

Wellness Care—Pilot, Review and Refine

Goals and Purpose –

In preparing for a change initiative, it's useful to remind the team of the reasons we're doing this, our ultimate goal. At the heart of the annual wellness visit (AWV) initiative is better care for patients and a stronger primary care foundation for the health care system. Practices may review and refine aims for themselves, but the following are offered as a starting point. The purpose of this initiative is:

- A positive experience for patients. This is represented both in:
 - Feedback on the AVW encounter, and
 - Taking action to preserve or improve their health.
- A positive experience for the practice staff. Increases to AWV volumes enhance, or at least don't disrupt, practice workflow and efficiency. Changes implemented have a positive impact on the practice's bottom line and capacity to operate in changing payment models that reward higher quality and cost containment.
- Increased use of preventive and wellness care services. If also targeted, increased use of chronic care management and other services.

Start-up Phase(s)

Implementing or expanding AWVs will introduce changes to practice processes. For example, you may be adding visits to the schedule, changing team roles, providing a different type of care than patients are used to, or marketing these services in a different manner. As you introduce these changes, you can anticipate problems, glitches, and surprises (this is normal and expected). Effective teams plan for this using such strategies as:

- Testing out changes on a small scale to work out the bugs.
- Keeping a log of both problems and successes.
- Checking in frequently as a team to refine processes and team roles.

Production Phase

As workflows begin to stabilize, change initiatives transition from the start-up to production phase. At this time practices can assess how well the initiative is achieving its purpose, consistency of processes across the practice and whether further changes are needed. To the extent possible, this assessment should leverage existing practice performance and population management measurement systems. Key indicators include:

- Patient satisfaction and feedback.
- Preventive services use.
- Practice population health measures (health risks) – for example:
 - Physical activity
 - Diet
- Practice staff satisfaction measures.

- AWV and associated services volumes and revenues.

It is useful to trend these measures over time.

This material was prepared by Comagine Health, the Medicare Quality Innovation Network-Quality Improvement Organization for Idaho, Nevada, New Mexico, Oregon, Utah and Washington, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. 12SOW-GEN-21-QIN-054