Dear Colleague:

The focus of care for our senior patients should be on the preventive assessments and services delivered by primary care physicians, primary care providers and geriatricians like you. Many of the proactive approaches that you are using are best practices that will avoid co-morbidities and complications, as well as provide support for your older patients and their families to improve quality of life. Still many of our older members are missing critical assessments and screening tests vital to maintain and optimize their health.

What does this mean for you?

Join with Healthfirst as we focus on optimizing health outcomes for our senior patients by addressing five (5) domains of assessment, screening and preventive services:

1. **Identification of your Patient’s Health Goals and Advance Care Planning**
   - Starting the annual assessment visit with an understanding of your patient’s current health goals and plans for the future

2. **Functional Assessment and Management of Cognitive and Physical Debility**
   - Catalogue of your patient’s ability to care for themselves day-to-day and any memory or psychological impairments

3. **Pain Screening and Management**
   - Unless specifically asked, patients may not volunteer that they are living with chronic pain

4. **Medication Review and Reconciliation** to address high risk medicines and adherence
   - Ensures that your patient has an understanding of their daily medications and identifies medications that put older patients at risk

5. **Prevention Screening and Services** to ensure that you and your patients agree on key health screenings, self management, and maintenance care
   - Ensuring that you and your patient collaborate to address the many preventive goals and services areas that should be addressed each calendar year

This Healthfirst Spectrum of Health Bulletin contains:

1. A summary of HEDIS and Health Outcomes requirements for Care for Older Adults
2. A link to a model Patient Assessment to address the five (5) Senior Health Care and Management Domains

Contact me if I can be of assistance as you promote optimal health outcomes for your patients.

Warm regards,

Dr. Susan Beane
VP, Medical Director
Healthfirst
(212) 823-2437
sbeane@healthfirst.org
Dear Practice/Quality Administrator:

When it comes to encouraging good health among your older patients, you, the practice staff can be of very real assistance to physicians and practitioners. Patients have many concerns when they come into your office but have difficulty when trying to update their doctor on their condition. **Too many senior Healthfirst members are not getting important preventive care and services that will keep them healthy and out of the emergency room, hospital and nursing facilities.**

**What does this mean for you?**

Older patients are more likely to live longer and stay healthy if they are helped with the following five (5) Senior Health Care and Management Domains

**Primary care practices:**

- Identification of your Patient’s Health Goals and Advance Care Planning
  - Doctors interested in what patients want for their own health are really appreciated
- Functional Assessment and Management of Cognitive and Physical Debility
  - Can your patient care for themselves day to day?
- Pain Screening and Management
  - Unless specifically asked, patients may not volunteer that they are living with chronic pain
- Medication Review
  - Patients need a chance to report any problems that they have taking their medications
- Prevention Screening and Services
  - Ensuring that each patient has all health education, referrals and tests needed every year

**This Healthfirst Provider Bulletin contains:**

1. A summary of HEDIS and Health Outcomes requirements for Care for Older Adults

2. A link to a model Patient Assessment to address the five (5) Senior Health Care and Management Domains

You may contact your Network Management representative for more information about these standards. I look forward to working with you to promote good health for your patients.

Best wishes,

Susan Y. Kwon
VP, Network Management
Healthfirst
skwon@healthfirst.org
### Summary of HEDIS Requirements for Measures Related to Care of Older Adults

<table>
<thead>
<tr>
<th>MEASURE: ADVANCED CARE PLANNING</th>
<th><strong>How members are identified:</strong> The percentage of members 66 years and older with the presence in the medical record or documented discussion about an advanced care plan. Examples of Advanced Care Planning may include treatment preferences and the designation of a surrogate decision maker in the event that a person should become unable to make medical decisions on their own behalf. <strong>You report CPT Category II and HCPCS Codes to Identify Advance Care Planning:</strong> 1157F, 1158F, S0257</th>
</tr>
</thead>
<tbody>
<tr>
<td>MEASURE: FUNCTIONAL ASSESSMENT</td>
<td><strong>How members are identified:</strong> The percentage of members 66 years and older with the presence in the medical record of at least one functional status assessment during the measurement year. Examples of a functional assessment include:  - Notation that at least three of the following four components were assessed:    - Cognitive status    - Ambulation status (including risks for falls)    - Sensory ability (hearing, vision, speech)    - Other functional independence (e.g., exercise, ability to perform job)  - Results of a standardized assessment tool such as the SF-36  - Assessment of ability to perform activities of daily living. <strong>You report CPT Category II Code to Identify Functional Status Assessment:</strong> 1170F</td>
</tr>
<tr>
<td>MEASURE: PAIN SCREENING</td>
<td><strong>How members are identified:</strong> The percentage of members 66 years and older with the presence in the medical record of at least one pain screening or pain management plan during the measurement year. <strong>You report CPT Category II Codes to Identify Pain Screening:</strong> 0521F, 1125F, 1126F</td>
</tr>
<tr>
<td>MEASURE: MEDICATION REVIEW</td>
<td><strong>How members are identified:</strong> The percentage of members 66 years and older with the presence in the medical record of at least one medication review conducted by a prescribing practitioner or clinical pharmacist during the measurement year and the presence of a medication list in the medical record on the same date of service. <strong>You report:</strong>  - CPT Category II HCPCS* Codes to Identify Medication Review and 90862, 99605, 9960, 1160F, <em>G8427, G8428  - CPT Category II HCPCS</em>Codes to Identify Medication List 1159F, *G8427, G8428  *The HCPCS codes meet criteria for both medication review and medication management.</td>
</tr>
</tbody>
</table>
# Frequently Asked Questions About Care for Older Adults

1. **What tools are available to help me meet Care for Older Adults requirements?**

   Healthfirst has developed a Health Assessment for Seniors form that lists all of these requirements in plain language. This model form is available on our secure provider website at www.healthfirstny.org/providerservices. You may use this form in a number of ways, for example:
   - As part of your assessment process, completing it together with the patient. Give the patient a copy and keep a copy in your medical record.
   - Incorporate a template into your electronic medical record. Once completed, print a copy for the patient to keep the forms.

2. **My patients don’t wish to talk about Advanced Directives. What do you suggest?**

   Seniors will appreciate the opportunity to plan for what should occur if they are not able to make decisions for themselves. The model Senior Assessment form is designed to help you talk with your patients about the various aspects of advance planning.

3. **I speak with my patients about their medications when the medications are listed on my EMR - is that sufficient?**

   We find that most physicians and PCPs, like you, spend some time talking with patients about medications. However, increased adherence and better outcomes mean focusing on the whole medication list and reviewing the medications with the patient until you are sure that they understand the reason that they take each one and they have confidence that the medication will help them improve their health.

4. **My patients and I often talk about their pain in a certain area, or pain as a reason for the visit – does that meet the requirements?**

   Pain assessments and pain management plans limited to a single condition or body system do not meet the criteria for HEDIS. To meet this requirement, you must discuss and document a plan for treatment of your patient’s pain, which may include use of pain medications, psychological support, and patient/family education.

5. **If I use this form, and discover that my patient has a functional or cognitive limit or debility, what next steps and options do I have?**

   The Healthfirst Spectrum Care Managers are available, capable, and willing to assist and support you in finding resources for these Healthfirst members. There may be services available through the benefit plan and/or community based resources that we can find and implement for the patient and their families.

Contact Healthfirst Spectrum Care Management by calling our toll-free number: 1-866-237-0997