

Wellness Visit FAQ's:

Who is Life Line Community Healthcare?

Life Line Community Healthcare believes in preventing major health issues and preserving the highest quality of life possible for as long as possible. It is a provider that is passionate about prevention and about wellness. Premier Patient Health Care has partnered with Lifeline Community Healthcare to help us to complete the Annual Wellness Visits so we can put a care plan together for you for the upcoming years. Preventive health care consists of measures taken for disease prevention, as opposed to disease treatment. The intent is to protect, promote, and maintain health and well-being and to prevent disease and disability.

By utilizing Life Line Community Healthcare's full service solution, we will be able to help providers improve the quality of care in a cost-effective manner. As healthcare reimbursement shifts from fee-for-service to fee-for quality, the Life Line Community Healthcare solution ensures delivery and reporting of many of the quality measures mandated by government agencies.

Life Line Community Healthcare's Mission

To encourage and promote wellness and prevention of serious health issues by conveniently providing the appropriate health services to our customers and providers based on their risk factors and history.

FAQs for your Patients if they call your office:

1) What do I need to bring?

Please make sure you bring a list of doctors that you see on a regular basis, a list of medications along with the dosage amount and your Medicare Part B card.

2) How often may I get this service?

After your first visit, you can return every 12 months for subsequent Annual Wellness Visits as long as you have Medicare Part B. We will update your medical information, revise your personalized prevention plan, and you will talk to the nurse practitioner about changes in your health profile. With each visit, your primary care doctor will receive a copy of your results and consult you on what is needed for an ongoing preventive care plan.

3) When will I get my Medicare Wellness Consultation results?

The day of the event, you will receive a personalized prevention plan – and we will also forward a copy of your plan directly to your doctor so you can have a care plan for the next year.

4) How long will the Medicare screening take?

Please allow for at least 90 minutes.

5) Is this the same as my annual physical at my doctor?

No, an annual physical is a more extensive visit and may include routine laboratory tests as well as examinations of the lungs, head and neck and prescribing of drugs among other things. Medicare does not cover an annual physical, and the patient is responsible for 100 percent of the cost. This will allow us to order other preventive tests that are covered by Medicare.

6) Who is qualified for an Annual Wellness Visit (AWV)?

Medicare covers an AWV after the beneficiary has been enrolled in Medicare Part B for 12 months or longer AND the individual has not received either an IPPE (Welcome to Medicare visit) or AWV within the preceding 12 months.

7) What is the difference between the Welcome to Medicare and Annual Wellness Visit?

The Welcome to Medicare visit is only provided within the first 12 months of Medicare Part B enrollment; whereas the Annual Wellness Visit is covered every 12 months after the first 12 months of Part B enrollment. Both cover the same health risk assessment, screenings and evaluations except Welcome to Medicare also includes a vision acuity test and advance care planning. Life Line Community Healthcare can conduct either the Welcome to Medicare or the Annual Wellness Visit, depending on your Medicare eligibility.

Please call Dawn Abasta at 216-780-0072 or contact your Premier Account Manager for more information on engaging Life Line AWV services at your practice.