## **AmeriHealth Caritas VIP Care**

200 Stevens Drive Philadelphia, PA 19113



## Care for Older Adults Form - Provider Form

Care for Older Adult (COA) Pain Assessment and Functional Status are screening tools for adults age 66 years and older. AmeriHealth Caritas VIP Care tracks these services as part of our ongoing Quality Improvement Program. We encourage your practice to document completion of these screenings by including appropriate codes on your claims. If you have questions, please call Provider Services at 1-833-433-2177 or contact our Quality Department at <a href="mailto:vipquality@amerihealthcaritas.com">vipquality@amerihealthcaritas.com</a>.

Patient Name:		Date	Date of Birth:		Member ID:	
Member Phone:			Provider Name:		Provider Phone:	
Pain As	sessment					
Does the p	oatient have pai	in? □ Yes	□ No			
*If NO Pain, ST	OP here. If YES, com	plete Pain questions belov	v.			
On a scale today?	of 0 – 5, with z	ero being no pain	and 5 worst pair	n how does the	patient rate their pain	
□ 0	□ 1	□ 2	□ 3	□ 4	□ 5	
No Pain	Little Pain	Little More Pain	Hurts Often	Hurts A Lot	Worst Pain	
•	constant?	□ Yes □	] No			
Can the pa	nal Status atient perform a dependently list		laily living (ADL) a		I activities of daily living	
Can the pa (IADLS) ind If NO, pati	atient perform a	ted below?	∃ Yes □ N	lo		
Can the pa (IADLS) ind If NO, pati □Bathing	atient perform a dependently list	ted below? □ o with: □Fee	∃ Yes □ N eding	lo	□Housework/Laundry	
Can the pa (IADLS) in If NO, pati □Bathing □Dressing	atient perform a dependently list ent needs help	ted below? □  o with: □Fee □She	☐ Yes ☐ Neding	lo 	□Housework/Laundry □Using the Phone	
Can the pa (IADLS) ind If NO, pati □Bathing □Dressing □Groomin	atient perform a dependently list ent needs help g	ted below?	☐ Yes ☐ Neding Opping Ulking	lo   	□Housework/Laundry □Using the Phone □Driving or transportation	
Can the pa (IADLS) in If NO, pati □Bathing □Dressing	atient perform a dependently list ent needs help g ng pilet	ted below? □  o with: □ Fee □ She □ Wa □ Tal	eding opping liking king Medications	lo   	□Housework/Laundry □Using the Phone □Driving or transportation □Home Repair	
Can the pa (IADLS) income Bathing Dressing Groomin Using To	atient perform a dependently list ient needs help g ng pilet	ted below?   D with:  Fee  She  Wa  Tal	eding opping liking king Medications al Prep/Cooking	lo     	□Housework/Laundry □Using the Phone □Driving or transportation	
Can the pa (IADLS) in Bathing Dressing Groomin Using To Transfer	atient perform a dependently list dependently list dent needs help dent needs help dependently list dent needs help dent needs	ted below?	eding opping liking king Medications al Prep/Cooking	lo     	□Housework/Laundry □Using the Phone □Driving or transportation □Home Repair □Handling Finances	
Can the pa (IADLS) in Bathing Dressing Groomin Using To Transfer	atient perform a dependently list dependently list dent needs help dent needs help dependently list dent needs help dent needs	ted below?   D with:  Fee  She  Wa  Tal	eding opping liking king Medications al Prep/Cooking	lo     	□Housework/Laundry □Using the Phone □Driving or transportation □Home Repair □Handling Finances	

Please return a copy of the completed form to our Quality Department by fax at 855-396-5760 or by email at <a href="mailto:vipquality@amerihealthcaritas.com">vipquality@amerihealthcaritas.com</a> and keep a copy in your patient chart or EMR to review and update with your patient as needed.



Member ID:

## Care for Older Adults Form – Provider Form

Care for Older Adult (COA) Medication Review is a screening tool for adults age 66 years and older. AmeriHealth Caritas VIP Care tracks these services as part of our ongoing Quality Improvement Program. We encourage your practice to document completion of these screenings by including appropriate codes on your claims. If you have questions, please call Provider Services at ,1-833-433-2177 or contact our Quality Department at <a href="mailto:vipquality@amerihealthcaritas.com">vipquality@amerihealthcaritas.com</a>.

Date of Birth:

Patient Name:

Member Phone:	Provider Name:		Provider Phone:	
Medication Review (You	ı may attach a me	edication list fr	om chart)	
Date of Medication Review and Medication review and list of medications raclinical pharmacist. You can attach a	s must be submitted on the sa	ame date. This may be co	mpleted by the prescribing prac	 ctitioner
Medication name and strength	Quantity/days' supply	Prescriber	Notes	
			1	
Date Medication Review completed:	S	Signature and credentials of Provider:		
Please return a copy of the comemail at vipquality@amerihealthc				

**Care for the Older Adults Coding Chart** 

www.amerihealthcaritasvipcare.com | Coverage by AmeriHealth First.

update with your patient as needed.



Providers treating our members 66 years and older should complete the Care for Older Adult Assessments annually. We have included the CPT and CPT II codes that can be submitted via claims. Please note, correct coding and submission of claims is the responsibility of the submitting provider.

Code	Туре	Measure	Description	
1125F*	CPT II	Pain Assessment	Pain severity quantified, pain present	
1126F*	CPT II	Pain Assessment	Pain severity quantified, NO pain present	
1159F*  +  1160F* must be billed together	CPT II	Medication Review	Medication list documented in medical record (COA)  Review of all medications by a prescribing practitioner or clinical pharmacist and documented in the medical record	
99483	CPT	Functional Status Assessment	Cognitive Impairment Assessment and Care Planning	
1170F*	CPT II	Functional Status Assessment	Functional Status Assessed	

Updated 5/6/2022

\*CPT II codes which are eligible for our AmeriHealth Caritas VIP Care Healthcare Effectiveness Data and Information Set (HEDIS) Provider Incentive Program. This program provides compensation for reporting non-payable CPT II codes, which help to satisfy HEDIS measures. To participate in the program, submit a claim for the eligible services you provided to an AmeriHealth Caritas VIP Care member with the appropriate CPT II codes by following your normal claim submission process. It is that easy! AmeriHealth Caritas VIP Care is excited about our provider incentive program and will work with your practice, so you can maximize your revenue while providing quality and cost-effective care to our members.

If you would like more detail on the HEDIS Provider Incentive Program, please visit our website at <a href="https://www.amerihealthcaritasvipcare.com">www.amerihealthcaritasvipcare.com</a> under Provider>Resources>Quality. If you have any questions, please contact our Quality department at <a href="mailto:vipquality@amerihealthcaritas.com">vipquality@amerihealthcaritas.com</a> or your Provider Network Management Account Executive. Thank you for your continued participation in our network and your commitment to our members.