







Medicaid Preventative Care Fact Sheet

Preventative care with regular health checkups is beneficial to your patients.

Medicaid members can be seen at least once per calendar year for preventative care exams.

Consider developing a personalized prevention plan to help them on their healthcare journey.

Note: Healthy infants should be seen by their doctor often during the first year of life.

Age	Exam Components	Topics To Cover During Exam
Ages 0-2 Conduct preventive care 2-3 days after coming home and then at:	 Age-appropriate unclothed exam and history Head circumference Length/height, weight, BMI % 	 Development progress Newborn screenings Hearing issues Vision problems Labs/tests and screenings as applicable Nutrition assessment and counseling Immunizations as applicable
Ages 3-10	 Annual exam Age-appropriate unclothed exam and history Height, weight, BMI % Blood pressure Dental, vision and hearing screenings Medication reconciliation 	 Dental care Obesity, diet and physical activity Development/behavioral screening Labs/tests and screenings as applicable Immunizations as applicable
Ages 11-20	 Annual exam Age-appropriate unclothed exam and history Height, weight, BMI % Blood pressure Dental, vision and hearing screenings Obesity screening Medication reconciliation 	 Diet and physical activity Domestic violence/abuse screening Anxiety/depression screening Alcohol, tobacco and drug use Sexual health (contraception and STDs) Labs/tests and screenings as applicable Immunizations as applicable
Ages 21-49	 Annual exam Height, weight, BMI % Blood pressure/hypertension screening Cardiovascular screening Cancer screenings (skin, colon, breast, cervical, etc.) Diabetes screening Obesity screening Medication reconciliation 	 Diet and physical activity Domestic violence/abuse screening Anxiety/depression screening Alcohol, tobacco and drug use Gynecological health referral Sexual health (contraception and STDs) Labs/tests and screenings as applicable Immunizations as applicable



 Cancer screenings (skin, colon, breast, etc.) Diabetes screening Lung cancer screening Obesity screening Urinary incontinence Medication reconciliation Domestic violence/abuse screening Fall/balance/activities of daily living risks Sexual health (contraception and STDs) Refer/order preventive labs/tests and screenings as applicable Immunizations as applicable Gynecological health referral
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When evaluating members and establishing the presence of a diagnosis, remember to put the M.E.A.T. (Monitoring, Evaluating, Assessing/Addressing, & Treating) in your documentation.

Monitoring	Evaluating	Assessing/Addressing	Treating
· Signs	· Test results	· Ordering tests	· Medications
· Symptoms	 Medication 	 Discussion 	· Therapies
· Disease progression	effectiveness	· Review records	· Other modalities
· Disease regression	· Response to treatment	· Counseling	· Referrals to specialists
		· Planning	· Disease management program
			· Testing

Tips to ensure healthy outcomes:

- Always share tests and screening results with members and how they can access them via member portal.
- Be sure to submit all applicable conditions via ICD-10 codes.
- Leverage CPT® Category II codes to ensure outcomes to reduce chart collection events.
- Provide anticipatory guidance and counseling/referrals for identified problems.

Consumer Assessment of Healthcare Providers and Systems (CAHPS®)

Your Success Is Our Success: CMS or NCQA may ask your patients how you rate in the annual Consumer Assessment of Healthcare Providers and Systems CAHPS® survey. Our goal is to partner with our providers to serve your patients with the best healthcare possible.

Improving your patient's experience during their office visit has been proven to improve healthcare outcomes and increase patient compliance with treatment plans.



Ensure your patient's satisfaction:

- See patient within 15 minutes.
- Write prescriptions for medications on formulary.
- Share test results as soon as you get them.
- Help coordinate and manage care to other health services.
- Refer patients to network specialists.

