

## Objectives

- Review Primary, Secondary, and Tertiary Prevention
- Review Screening and Diagnostic Testing
- Review USPSTF Purpose, Composition, and Ratings
- Briefly Review Key Historic U.S. Health Performance Data
- Review Components of the Medicare Wellness Visit



Carlinville Area

## Primary, Secondary, and Tertiary Prevention

- Primary prevention—measures that prevent the onset of illness or injury before the disease process begins.
   Examples: Vaccinations, Exercise
- Secondary prevention—measures that lead to early diagnosis and prompt treatment of a disease, illness or injury to prevent more severe problems from developing.
- Examples: Screening, Public Health Interventions
- Tertiary prevention—measures aimed at managing chronic disease to prevent further complication or damage.

• Examples: Medications, Treatment Goals, Rehabilitation

## Screening and Diagnostic Testing

- A screening test is often done to detect potential health disorders or diseases in **people who do not have symptoms** of disease.
- Screening tests are often done among people without symptoms who may have a higher risk of developing disease.
- A diagnostic test is often used to **investigate a specific concern** to determine the presence or absence of disease.
- Diagnostic tests are often done among people that display symptoms of disease or asymptomatic individuals with a positive screening test.

Carlinville Area

Carlinville Area HOSPITAL

#### United States Preventive Services Task Force

- USPSTF <u>https://www.uspreventiveservicestaskforce.org/uspstf/</u>
- Since 1998, the Agency for Healthcare Research and Quality has been authorized by the U.S. Congress to convene the Task Force.
- Each year a report is provided to Congress that identifies critical evidence gaps in research related to clinical preventive services.
- Composed of Independent, Volunteer Panel of Experts in Prevention and Evidence-Based Medicine.
- Members from Internal Medicine, Family Medicine, Pediatrics, Behavioral Health, Obstetrics and Gynecology, and Nursing

#### United States Preventive Services Task Force

- Intended to help primary care clinicians and patients decide together whether a preventive service is right for a patient's needs.
- Recommendations based on rigorous review of peer-reviewed evidence.
  Assign each recommendation a letter grade based on the strength of
- the evidence and balance of benefits and harm of a preventive service • Guidelines are reviewed every 3.5 years or earlier if a landmark study is
- published.
- Guidelines are updated only if there is substantial new evidence.

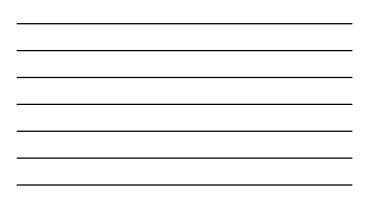
## **USPSTF** Ratings

- A There is high certainty that the net benefit is substantial.
- **B** There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial.
- C There is at least moderate certainty that the net benefit is small.
  D There is moderate or high certainty that the service has no net benefit or that the harms outweigh the benefits.
- I Evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined.

Carlinville Area HOSPITAL & CLINICS



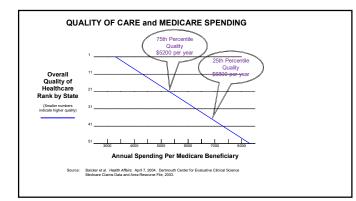
1 France	26 Saudi Arabia	]
2 Italy	27 United Arab Emirates	
3 San Marino	28 Israel	
4 Andorra	29 Morocco	World Health Organization
5 Malta	30 Canada	U U U U U U U U U U U U U U U U U U U
6 Singapore	31 Finland	2000 Rankings:
7 Spain	32 Australia	Health Systems
8 Oman	33 Chile	-
9 Austria	34 Denmark	Performance
10 Japan	35 Dominica	
11 Norway	36 Costa Rica	Ranking includes:
12 Portugal	37 United States of America	, and the second s
13 Monaco	38 Slovenia	<ol> <li>Disability-adjusted life</li> </ol>
14 Greece	39 Cuba	expectancy (DALE)
15 Iceland	40 Brunei	<ol><li>Distribution of healthcare</li></ol>
16 Luxembourg	41 New Zealand	3. System responsiveness
17 Netherlands	42 Bahrain	4. Cost of healthcare
18 United Kingdom	43 Croatia	4. Cost of fleathcare
19 Ireland	44 Qatar	World Health Organization
20 Switzerland	45 Kuwait	The World Health Report 2000
21 Belgium	46 Barbados	Health Systems - Improving
22 Colombia	47 Thailand	Performance
23 Sweden	48 Czech Republic	Geneva, Switzerland
24 Cyprus	49 Malaysia	http://www.who.int/whr/2000/en/index.html
25 Germany	50 Poland	

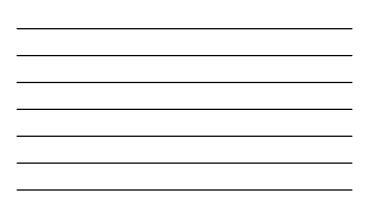


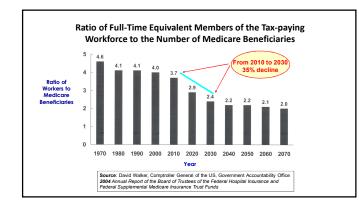
Healthcare: Best in the Wo	rld?
US ranking compared to 13 rich n	ations (2000):
	<u>Rank</u>
Low Birth Weight percentage	13 <sup>th</sup>
Neonatal and Infant mortality	13 <sup>th</sup>
Potential Years of Life Lost	13 <sup>th</sup>
Life Expectancy at 1 year	12 <sup>th</sup>
Life Expectancy at 15 years	11 <sup>th</sup>
Life Expectancy at 40 years	10 <sup>th</sup>
Life Expectancy at 65 years	7 <sup>th</sup>
Life Expectancy at 80 years	3 <sup>rd</sup>
Age-adjusted mortality	10 <sup>th</sup>
Barbara Starfield, Journal of the American Medical A	ssociation, 2000;284:483-5
	D

Comparison of US data to Australia, Belgium, Canada, Denmark, Finland, France, Germany, Japan, Netherlands, Spain, Sweden, United Kingdom











2003 Rank	Nation	1998 Rank	Change in Rank	% Improvement 1998-2003	Measuring the Health of Nations:
1.	France	1	-	+17%	
2.	Japan	2	-	+14	Deaths from
3.	Australia	4	+1	+23	Treatable
4.	Spain	3	-1	+14	
5.	Italy	6	+1	+20	Conditions
6.	Canada	5	+1	+16	E. Noite, et al: Measuring the Health of Nations: Updating an Earlier Analysis, Health Affairs, 2008, 27(1):58–71
7.	Norway	10	+3	+24	
8.	Netherlands	8	-	+18	
9.	Sweden	5	-4	+ 8	
10.	Greece	9	-1	+15	Corroboration: US ranks 37 <sup>th</sup> in 2000 WHO Rankings World Health Organization, The World Health Report 2000, Health Systems -
11.	Austria	12	+1	+28	
12.	Germany	11	-1	+18	
13.	Finland	16	+3	+25	
14.	New Zealand	14	-	+20	
15.	Denmark	13	-2	+12	
16.	United Kingdom	18	+2	+26	
17.	Ireland	19	+2	+30	Improving Performance
18.	Portugal	17	-1	+23	Geneva, Switzerland
19.	United States	15	-4	+ 5	http://www.who.int/whr/2000/en/index.html

#### Medicare Wellness Visit

- https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/preventive-services/medicare-wellnessvisits.html
- The Medicare Wellness Visit was created as part of the Affordable Care Act in 2010.
- It was introduced in 2011 to help address health risks faced by older populations.
- The Initial Preventive Physical Exam (IPPE) or "Welcome to Medicare Preventive Visit" must be done within 12 months of Part B eligibility.

Carlinville Area

## Annual Medicare Wellness Visit

- 12 months or longer after last Medicare Wellness Visit.
- Annual visits do not include a physical exam.
- 11 component categories
- G0439 code for Annual Wellness Visit; G0468 code for FQHC
- Any diagnosis consistent with patient exam or history may be used.
- Physician, NP, PA, CNS may do the visit.
- Supervised licensed medical professional may do the visit. Provider should see the patient briefly and review findings.

## Annual Medicare Wellness Visit Components

HOSPITAL

- Review and Update Health Risk Assessment
- Update Medical and Family History
- Update Current Providers and Suppliers Measure Standard Vitals and Other Appropriate Items
- Detect Cognitive Impairment
- Update Written Screening Schedule (screening and immunizations)
- Update Diagnoses, Conditions, and Risk Factors Provide and Update Health Education and Preventive Programs
- Provide Information on Advance Care Planning
- Review Current Opioid Prescriptions
- Screen for Potential Substance Use Disorders

#### Annual Medicare Wellness Visit

- Cancer Screening
- Risk Screening
- Immunizations

#### Colon Cancer Screening (All)

- Colonoscopy screening order every 10 years
- Fecal Immunochemical Test (FIT) order every year
- Stool DNA-FIT order every 1-3 years (Cologuard)
- Age 45-49 screen per test protocol (USPSTF B)
- Age 50-75 screen per test protocol (USPSTF A)
- Age 75 or older discuss; unknown benefit; consider life expectancy (USPSTF C)
- Family History consider earlier screening for first degree relatives with colon cancer, FAP, etc.

## Lung Cancer Screening (All)

- Low-dose CT scan order every year
- Age 50-80 20 pack-year tobacco history; still smoking or quit less than 15 years ago (USPSTF B)

   need to consider life expectancy and willingness to have curative lung surgery

HOSPITAL

Carlinville Area

- Breast Cancer Screening (Women)
- Conventional Mammography order every other year
- Age 40-49 discuss; minor benefit (USPSTF C)
- Age 50-74 screen per test protocol (USPSTF B)
- • Age 75 or older – discuss; unknown benefit; consider life expectancy (USPSTF I)
- Family History consider earlier screening for first degree relatives with breast cancer or BRCA

## Cervical Cancer Screening (Women)

- Cervical cytology alone order every 3 years
- Cervical hrHPV alone order every 5 years
- Cervical cytology and hrHPV order every 5 years

#### • Age 30-65 - screen per test protocol (USPSTF A)

- Age 65 or older do not screen (USPSTF D)
- Cervical Cancer w/ Hysterectomy continue testing for 20 years after surgery

## Prostate Cancer Screening (Men)

• PSA blood test – frequency unknown; annually at most

• Age 55-69 – discuss; minor benefit (USPSTF C)

• Age 70 or older - do not screen (USPSTF D)

## Hypertension (All)

- Screen with office blood pressure measurement.
- Screen annually for adults 40 years of age or older.
- Screen every 3-5 years for adults 18 to 30 years of age.
- Obtain blood pressure measurements outside of the clinical setting for diagnostic confirmation before starting treatment.

HOSPITAL

Carlinville Area

• Age 18 and over (USPSTF A)

# Prediabetes and Type 2 Diabetes (All)

- Patients who are overweight or obese.
- Screen every 3 years if glucose is normal.
- Age 35-70 screen per test protocol (USPSTF B)

## Depression Screening (All)

• Screen for depression, with adequate systems in place to ensure accurate diagnosis, effective treatment, and appropriate follow-up.

Carlinville Area

Carlinville Area

• Age 18 and over (USPSTF B)

## Unhealthy Drug Use (All)

- Screen by asking questions about unhealthy drug use when services for accurate diagnosis, effective treatment, and appropriate care can be offered or referred.
- Age 18 and over (USPSTF B)

# Unhealthy Alcohol Use (All)

- Screen for unhealthy alcohol use and provide persons engaged in risky or hazardous drinking with brief behavioral counseling interventions.
- Age 18 and over (USPSTF B)

## Tobacco Smoking Cessation (All)

 Ask about tobacco use and advise them to stop using tobacco and provide behavioral interventions and approved pharmacotherapy for cessation.

Carlinville Area

Carlinville Area

• Age 18 and over (USPSTF A)

## Hepatitis C Screening (All)

- Anti-HCV antibody blood test order one-time screening
- Age 18-79 screen per test protocol (USPSTF B)

## Bone Density Screening (Women)

- DEXA scan order every other year
- Age 65 or older screen per test protocol (USPSTF B)
- Age under 65 screen per test protocol for those at increased risk (USPSTF B)
- Men (USPSTF I)



- Abdominal duplex sonography order one-time screening with any history of smoking
- Age 65-75 screen per test protocol (USPSTF B)
- Age 65-75; men who never smoked (USPSTF C) \*Insurance\*
- Age 65-75; women with any history of smoking (USPSTF I)
- Age 65-75; women who never smoked (USPSTF D)

## USPSTF Senior Adult "I" Rating for Screening

- Skin Cancer
- Obstructive Sleep Apnea
- Visual Acuity
- Glaucoma
- Anxiety
- Atrial Fibrillation
- Vitamin D Deficiency
- Hearing Loss • Thyroid Dysfunction
- Pelvic Exam Iron Deficiency

• Lead Level

- Bladder Cancer

Cognitive Impairment

 Cardiovascular Disease Celiac Disease

• Peripheral Vascular Disease

Carlinville Area

Carlinville Area

Oral Cancer

# USPSTF Adult "D" Rating for Screening

- Genital Herpes
- COPD
- Carotid Artery Stenosis
- Bacterial Vaginosis
- Cardiovascular Disease (EKG)
- Pancreatic Cancer
- Ovarian Cancer
- Thyroid Cancer
- Testicular Cancer



Carlinville Area

Carlinville Area

#### Preventive Vaccinations - CDC

- Tetanus every 10 years
- Influenza annual vaccination
- Zoster 50 or older 2 doses (2-6 months apart)
   Younger if immunocompromised
- Pneumonia 65 or older 1 dose (PCV 20)
   Younger with certain medical conditions
- Pneumonia 65 or older 2 doses (PCV 15 and 23) 1 year apart
   Younger with certain medical conditions

## Resources

#### Medicare

- https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/preventive-services/medicare-wellness-visits.html
- USPSTE
- https://www.uspreventiveservicestaskforce.org/uspstf/
- <u>CDC</u>
   <u>https://www.cdc.gov/vaccines/acip/</u>



