

AI-EMBEDDED ASSESSMENT COMPONENTS

These mandated Assessments are driven by individual patient's medical necessity and are a crucial part of your patient engagement, value-based scores, rankings, and revenue. We have several AI-Embedded (AI-E) assessments built into our platform that are used by a physician practice including the following and growing.

Only Precision has AI-E technology that informs the provider from within the assessment's results exactly what medical necessities are present and what care plans CMS expects. For example, even if the provider performed mandated assessments on 100% of their patients, they would still be penalized for failing to act on medical necessities found within these results.



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SAFETY RISK ASSESSMENT

This document asks questions related to suicide and homicide risk. This assessment does not have scoring but can provide insight as part of a behavioral health plan.

PHQ-2

Inquiries about the frequency of depressed mood and anhedonia over the past two weeks. Scoring is provided as part of the assessment.

PHQ-9

Used for screening, diagnosing, monitoring, and measuring the severity of depression. Scoring is provided as part of the assessment.

CAGE

Indication for possible substance abuse. This is a Yes or No assessment and guidance is provided.

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OPIOID RISK

Indication for Opioid Risk based on specific questions. Scoring is provided as part of the assessment. **Required** of patients on controlled substances or narcotics.

SOAPP14

(Screener and Opioid Assessment for Patients with Pain) - The Screener and Opioid Assessment for Patients with Pain (SOAPP) is a tool to help determine how much monitoring a patient on long-term opioid therapy might require. Scoring is provided as part of the assessment. **Required of patients on controlled substances or narcotics.**



GAD7

(Anxiety Screening Tool) - Used as a screening measure of panic, social anxiety, and PTSD. Scoring is provided as part of the assessment. GAD7 can be administered every two weeks. **Required of patients on controlled substances, narcotics, antidepressants, stimulants, etc.**

DA

DAST 10

(Drug Abuse Screening Test) -Assesses drug use, not including alcohol or tobacco use, in the past 12 months. Required of patients on controlled substances, narcotics, antidepressants, stimulants, etc.

СОММ

(Current Opioid Misuse Measure) - The COMM will help clinicians identify whether a patient, currently on long-term opioid therapy, may be exhibiting aberrant behaviors associated with misuse of opioid medications. The questions pertain to a thirty-day period. Scoring is provided as part of the assessment. Required of patients on controlled substances, narcotics, antidepressants, stimulants, etc.

PEG 3

(Pain Screening Tool) - Measure average pain levels, pain-related disability and pain-related quality of life that can be used repeatedly to assess response to treatment. This provides a score for each question.

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In our Concierge Software as a Service C-SaaS), we operate our technology on your behalf. As part of our White Glove service, we transfer this data into your EMR and submit it into your billing process, and follow up with claim adjudication.

Examples of codes that may be billed for the above Assessment types include 96127, 96110. W7010, W7020, 99408, 99409, G0443, G0396, G0437 and others. Physicians, Physician's Assistant and Nurse Practitioners, Clinical Nurse Specialists, Clinical Psychologists, Clinical Social Worker, and a Certified-Midwife can provide services in most cases. We provide a comprehensive solution that includes the following.

- Record start and stop times or total face-to-face time with the patient
- Document the patient's progress, response to changes in treatment, and revision of diagnosis
- Document the rationale for ordering diagnostic and other ancillary services, or ensure it can be easily inferred
- For each patient encounter, document:
 - Assessment, clinical impression, and diagnosis
 - Date and legible identity of provider of Physical examination findings and prior diagnostic test results
 - Plan of care
- Identify appropriate health risk factors
- Document to support all codes reported on the health insurance claim
- Make past and present diagnoses accessible for the treating and consulting physicians

Under certain circumstances, a physician may need to indicate that a procedure or service was distinct or independent from other services performed on the same day. Modifier 59 is used to identify procedures/services that are not normally reported together but are appropriate under the circumstances. This may represent a different session or patient encounter, different procedure or surgery, different site or organ system, separate incision/excision, separate lesion, or separate injury (or area of injury in extensive injuries) not ordinarily encountered or performed on the same day by the same physician.

NOTE FOR EXAMPLE: Modifier 25 should be appended to the E/M and modifier 59 should be appended to the 99408/ 99409 CPT code.

G2011 Alcohol and/or substance (other than tobacco) abuse structured assessment (e.g., CAGE, dast), and brief intervention, 5–14 minutes

G0396 Alcohol and/or substance (other than tobacco) abuse structured assessment (e.g., CAGE, dast), and brief intervention 15 to 30 minutes

G0397 Alcohol and/or substance (other than tobacco) abuse structured assessment (e.g., CAGE, dast), and intervention, greater than 30 minutes.