

Digital channel: Athena Moments of Care

Frequently asked questions

Athena Moments of Care is a bidirectional data exchange channel. It enables UnitedHealthcare to display risk and quality gaps directly within Athena pre-encounter and point-of-care workflows.



When you respond or act on open gaps, this information is automatically returned to UnitedHealthcare via Claims at no additional cost to you. Please note, the below applies to Medicare Advantage and Dual Special Needs Plans (DSNP) lines of business.

Frequently asked questions

What is the Athena Moments of Care workflow?

It is the native workflow within Athena that is used to close and attest to risk gaps.

How can I be included in Moments of Care?

Moments of Care follows an automatic opt-in method, so the functionality will be available unless you actively opt out.

Is additional attestation required after taking action in this channel?

No. With the direct capability for capturing the provider gap action, additional attestation is not required.



Where can we find additional information on what this looks like within Athena?

Athenahealth included this functionality within its 2022 spring tri-annual release as “Moments of Care,” along with information on the Success Community. Reach out to your Athenahealth contacts for more information.

If a suspect condition is present in my EMR, what do I do?

Assess the condition. If accurate for your patient, add the ICD-10 code with appropriate specificity to the visit using your typical EMR workflow to ensure it is submitted on a claim. Add supporting documentation to your visit note using MEAT criteria (monitor, evaluate, assess, treat).

If I am unable to diagnose a suspect medical condition, what do I do?

Report in your native Athena EMR workflow (Moments of Care) that you’re unable to diagnose the suspect medical condition at the present time (see Athena’s Moments of Care tip sheet for more details if needed).

Do I also have to report out in Practice Assist to get the provider incentive credit?

No. If you added the ICD-10 code with appropriate specificity to the visit using your typical EMR workflow to ensure it is submitted on a claim or reported that you were unable to diagnose the suspect medical condition at the present time in your typical EMR workflow, you **DO NOT** need to report out in Practice Assist.

When do I use Practice Assist?

Only use Practice Assist if you did not use your native EMR workflow to report that you were unable to diagnose the suspect medical condition at the present time or if a provider needs to supplement what was done in the EMR.

Is the data in my EMR, Practice Assist and Patient Care Opportunity Report (PCOR) all the same?

No. There are instances where some suspect conditions are suppressed by either Athena or UnitedHealthcare for various reasons. This can lead to discrepancies between PCOR, Practice Assist and Moments of Care screens.

How and when does the work I do in my EMR translate to Practice Assist and PCOR?

Following assessment during a patient visit, gaps will be soft-closed (no longer in the workflow) within 24 hours. This process assumes that the patient visit was closed/signed, and any gaps that were addressed by adding the ICD-10 code to the claim or by rejecting the gap will be soft-closed.

How often are new gaps refreshed?

Any care gaps that are addressed will be processed daily and soft-closed within 24 hours. New or updated care gaps may appear following the monthly refresh.

Will the actions I take within the workflow close open gaps within the MCAIP program?

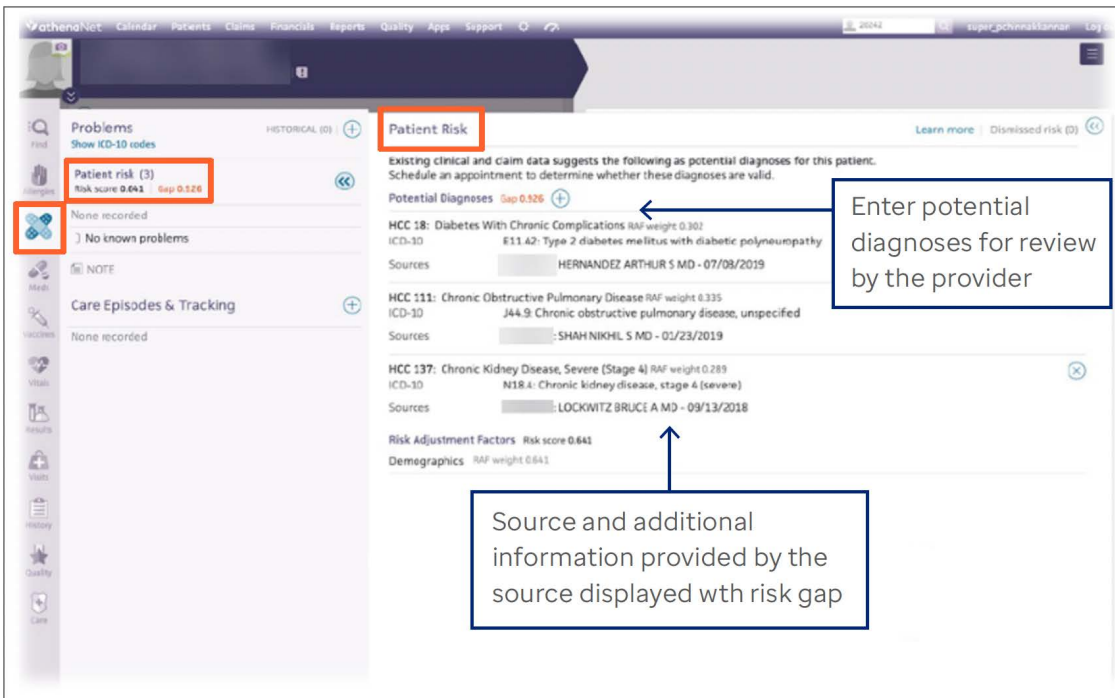
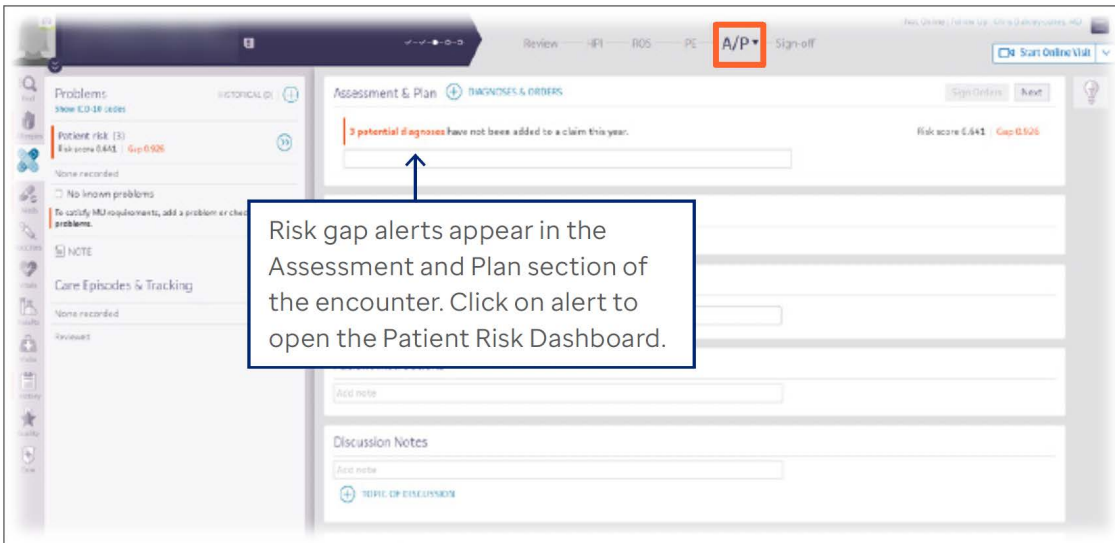
Yes.

Onboarding

Athena will automatically opt in provider groups, so the Moments of Care functionality is available. If you don't want to use that functionality, you can manually opt out.

Athena screenshots

Physicians can see risk suspects and recapture display in a patient's, giving them the ability to address or dismiss the condition.



Care gaps (quality) are displayed within both the worklist and the patient's chart.

Care Gap List
Last Updated 02:00 pm EST.

Worked Patients	Next Visit
Suzanne Williams 43yo F 04-10-1976 #1268491	Wellness 30 02-01-2020
Shirley Murphy 44yo F 05-12-1977 #6028742	No Appt. Schedule

Care Gap	Last Activity	Status
OPEN PAYER GAP Breast Cancer Screening	Order exists - pending result: MAMMO, SCREENING, DIGITAL, BILATERAL, 02/05/2021	🟡
Flu Vaccine	No Data	🟡
OPEN PAYER GAP Diabetes: Medical attention for nephropathy	Result 01/04/2021	🟢
OPEN PAYER GAP Med Adherence: ACE/ARB	LOSARTAN-HCTZ 100-12.5 MG TAB, 2020-03-19	🟣

Patient	Next Visit	Physician	Open Gaps
Shirley Williams 70yo F 09-05-1949 #49505012	Wellness 30 02-01-2020	Dr. Jacobson	🟡 Open Gaps
Shirley Murphy 50yo M 05-28-1969 #1087446	No Appt. Schedule	Dr. Sutherland	🟡 Open Gaps
Suzanne Williams 50yo F 02-23-1972 #1369075	Wellness 30 02-01-2020	Dr. Sutherland	🟡 Open Gaps
William Harris 48yo M 10-23-1973 #9502895	No Appt. Schedule	Dr. Jacobson	🟡 Open Gaps

Test Patient
63yo 06-04-1957 #423A

Quality Measures
View by charge | Last Updated at 4:57 PM

- Breast Cancer Screening (4)** Past Due | Open Payer Gap
- Diabetic Foot Exam (4)** Past Due
- Folic Acid Use (4)** Past Due | Open Payer Gap
- Fall Risk Screening (4)** Past Due | Open Payer Gap
- Depression Screening & Follow-Up (4)** Due Soon
- Influenza immunization (2)** Snoozed
- Alcohol Use Assessment (1)** Excluded
- Hemoglobin A1c testing and control (6)** Satisfied | Open Payer Gap
- High risk medications in elderly (2)** Satisfied
- BP Control [140/90] Adjusted, Uncertified (1)**

Breast Cancer Screening (4)

- Breast Cancer Screening (4) Past Due
- Breast Cancer Screening (4) Past Due | Open Payer Gap
- Mammogram (Adjusted, Uncertified) (4) Due Soon: 12/02/2020
- Breast Cancer Screening (4) Performed
- Date (Due date varies): Text
- Adult Preventive Care Guidelines
- Internal Note: Text
- Breast Cancer Screening (4) Satisfied: 10/31/2020