

Healthy Michigan Plan - Health Risk Assessment



Meridian providers are encouraged to complete an annual Health Risk Assessment (HRA) with all **Healthy Michigan Plan (HMP)** members. **HMP** members who are due for an HRA will be identified on the monthly provider HEDIS reports.

*You may be eligible for a \$25 incentive for completing the HRA for **HMP** members! Initial visit with PCP and Completed HRAs are for all genders ages 19-64.*



WHEN IS THE HRA DUE?

- **Initial HRA:** within 150 days of a member's enrollment with HMP
- **Subsequent HRA's:** 11-15 months after the initial HRA is completed
- **Completed and attested HRAs** must be received by Meridian within 30 days of initial visit



WHERE CAN I FIND A BLANK COPY OF THE HRA FORM?

- Meridian's website at <https://corp.mhplan.com/en/provider/michigan/healthymichiganplan/>
 - ▶ Click on the following pathway: Provider Resources ▶ Health Risk Assessment (HRA)
- Michigan Department of Health and Human Services' (MDHHS) website at www.michigan.gov/healthymiplan
 - ▶ Click on the following pathway: Provider Information ▶ Health Risk Assessment
- **HMP** members also receive a blank copy of the HRA in their Meridian new member welcome packet and may bring it to their initial appointment



HOW DO I FILL OUT THE HRA?

Providers are encouraged to complete the HRA in its entirety. Members may complete Sections 1-3 prior to their visit. Section 4 must be completed by the Primary Care Provider (PCP). The following fields in Section 4 are **required** in order for the HRA to be considered complete:

- ✓ Healthy Behavior statement
- ✓ Healthy Behaviors progress
- ✓ PCP Attestation including signature, NPI, and date

HOW DO I SUBMIT A COMPLETED HRA?

There are several ways to submit the completed HRA:

1. CHAMPS system via the HRA Questionnaire web page
2. MDHHS Central HRA fax: 517-763-0200
3. Completed HRAs can be faxed to Meridian's Quality Improvement Department at: 313-324-9120



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HOW DO I QUALIFY FOR THE INCENTIVE?

A **\$25** incentive is paid to in-network PCPs for the initial **HMP** HRA on the quarterly HEDIS payout when both of the following requirements are met:

1. Reimbursement paid once per member for initial visits performed within the first 150 days of enrollment and billed with the appropriate HRA CPT Code 96160♦

AND

2. Office visit claim is received and processed by Meridian and the date of service for visit is within 150 days of the member's enrollment with **HMP**

Follow these completion tips to make sure that the incentive is processed correctly:

- ✓ The attestation date should match the date of service for the visit
- ✓ A legible PCP attestation ensures that the correct provider is identified for the incentive



HOW DO I SUBMIT AN HRA AND CLAIM FOR A MEMBER SEEN DURING THE FEE-FOR-SERVICE (FFS) PERIOD?

HRAs completed for members seen during the FFS period should be submitted in the same manner as all other HRAs. MDHHS should be billed directly for the office visit. Meridian should be billed for CPT code 96160♦ with a date of service and the member's effective date with Meridian.



QUESTIONS?

Contact your Provider Network Development Representative (PNDR) with any questions.

- ♦ Codes listed are specific to subject matter of this flyer. While Meridian encourages you to use these codes in association with the subject matter of this flyer, Meridian recognizes that the circumstances around the services provided may not always directly support/match the codes. It is crucial that the medical record documentation describes the services rendered in order to support the medical necessity and use of these codes.

