



Initial Health Assessments Requirements

Health Net Community Solutions, Inc. (Health Net) is reminding providers that the Department of Health Care Services (DHCS) requires that primary care physicians (PCPs), including non-physicians, such as nurse practitioners, certified nurse midwives and physician assistants, complete an Initial Health Assessment (IHA) on newly enrolled patients, including those with disabilities, within 120-days of enrollment, and in a culturally and linguistically appropriate manner.

The monthly 120-day IHA reports of Medi-Cal members who have not yet had an IHA according to the encounter data can be accessed on provider.healthnet.com. Providers can access the 120-Day Initial Health Assessment Report after logging in to the provider website at provider.healthnet.com. Select *Provider Reports*, then select *Initial Health Assessment (IHA)* under Available Reports. This report is only available online. Providers who do not have access to provider reports but have registered for a provider account can have the delegated administrator for the account assign the provider to the Provider Reports role in order to view the Provider Reports section.

IHA REQUIREMENTS

The IHA, at a minimum, must include a physical and mental health history, and completion of the age-appropriate Staying Healthy Assessment (SHA) form, DHCS's approved Individual Health Education Behavioral Assessment (IHEBA). The SHA is the established assessment tool that enables PCPs to assess members' current acute, chronic and preventive health needs. The SHA consists of standardized questions to assist PCPs in:

- Identifying high-risk behaviors of individual members.
- Assigning priority to individual health education needs of members related to lifestyle, behavior, environment, culture, and language.
- Initiating discussions and counseling regarding high-risk behaviors.
- Providing tailored health education counseling, interventions, referrals, and follow-up care for members.

SHA REQUIREMENTS

DHCS requires PCPs to administer an age-appropriate SHA to new enrolled members as part of the 120-day initial health assessment (IHA) and to existing members during the next routine health examination. PCPs are required to complete the following SHA requirements:

- Administer the SHA when members enter a new age group.
- Review the SHA with members on an annual basis to determine any changes and provide necessary health education counseling, intervention, referral, and follow-up.

THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

- Physicians
- Participating Physician Groups
- Hospitals
- Ancillary Providers

LINES OF BUSINESS:

- HMO/POS/HSP
- PPO
- EPO
- Medicare Advantage (HMO)
- Medi-Cal
 - Kern
 - Los Angeles
 - Molina
 - Riverside
 - Sacramento
 - San Bernardino
 - San Diego
 - San Joaquin
 - Stanislaus
 - Tulare

PROVIDER SERVICES

1-800-675-6110
provider.healthnet.com

PROVIDER COMMUNICATIONS

provider.communications@healthnet.com
fax 1-800-937-6086

-
- Sign, date and document topics discussed and assistance provided, and keep the SHA as part of the patient's medical record.

Providers may download or print electronic versions of the SHA directly from the DHCS website at www.dhcs.ca.gov/formsandpubs/forms/Pages/StayingHealthy.aspx, where it is available in nine threshold languages. For additional information, a *SHA Instruction Sheet* for providers is available at www.dhcs.ca.gov/formsandpubs/forms/Documents/MMCD_SHA/GenDocs/SHAInstructionSheetforProviderOffice.pdf.

For members ages 21 and older, the IHA must follow DHCS guidelines and Health Net preventive care services guidelines. The preventive care guidelines in the U.S. Preventive Services Task Force *Guide to Clinical Preventive Services* are considered the minimum acceptable standards for adult preventive care services. Guidelines for members under age 21 follow the American Academy of Pediatrics (AAP) *Recommendations for Preventive Pediatric Health Care*. A member's risk factors affect the type and quantity of preventive services needed. A member may need additional services at more frequent intervals.

PCPs must document all exceptions from the IHA and SHA requirements and all member contact and outreach attempts, including appointment scheduling or the member's refusal to schedule an appointment, in the member's medical record. Evidence of timely completion of IHA and SHA is determined during the facility site review and medical record review periodic audits.

HEALTH NET IHA OUTREACH ACTIVITIES

To assist providers, new member reports are sent to providers monthly to assist with completing the required IHA. In addition, Health Net conducts the following IHA outreach activities to remind members to schedule appointments with their physicians within the required time frame.

- Welcome Packet – Includes an IHA Notification, an identification (ID) card, appropriate provider directory, and information on how to schedule an appointment with their PCP. The IHA notification instructs the new members to schedule an appointment with their PCPs and provides education as well as information on how to reach Health Net.
- Welcome telephone call – After the new member packet has been sent out, automated recorded calls are made to new members welcoming them to the plan, reminding them of the need to have their IHA completed within 120 days of enrollment and offering the member services telephone number for any questions or if they need assistance.
- Reminder postcard – Sent to new members and/or parents/legal guardians if IHAs have not been scheduled within 45 days of enrollment.

Member relations representatives can help members schedule appointments via a conference call with the member to the member's PCP's office, providing interpretation services if needed.

ADDITIONAL INFORMATION

To request approval to use an electronic version of the SHA or an alternate tool, contact Health Net's Health Education Department at 1-800-804-6074.

If you have questions regarding the IHA requirements, contact the Health Net Medi-Cal Provider Services Center within 60 days at 1-800-675-6110.