Medica

HRA Reporting

Lunch & Learn

February 27, 2023

Agenda

- Updated HRA Reporting Template

- Updated HRA Review & Validation Process

- HRA Reporting & MnCHOICES

- Q&A

Regulatory Oversight & Improvement Team (Reg Quality)

Name	Title
Courtney Chupurdy	SNP Program Manager
Ashley Heehn	Delegate Improvement Analyst
Sheila Heskin	Delegate Improvement Analyst
Jenny Lanoue-Glerum	Delegate Improvement Analyst
Cindy Vang-Vue	Data Analyst
Lisa Benrud	Senior Manager, Regulatory Oversight & Improvement

HRA Completion Report Template

- Updates needed due to new CMS requirements

- Template posted on CC Hub under each product

  - >Templates, tools, and additional resources >Tools and Forms >Miscellaneous
  - Link titled "2023 Medica CC HRA Completion Report (XLS)"

- Report data for all products you manage (MSHO, MSC+, SNBC, SNBCI) (separate tabs in report)

- Send completed report monthly by the 15th of the following month:

  - Drop in **HRA folder** in Sharefile **(preferred)**; or
  - Send via secure email to MedicaSPPRegQuality@medica.com
  - **Note:** Also send any UTR/Refusal documentation for MSHO/SNBCI members
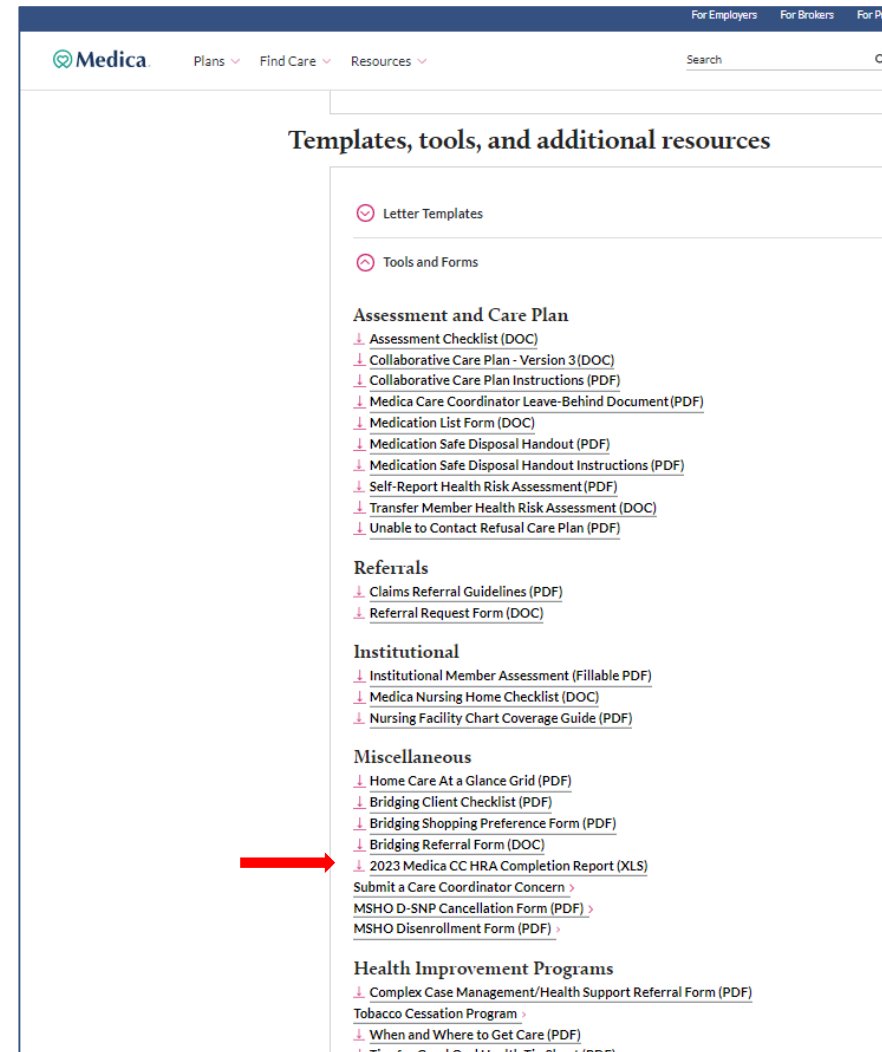
HRA Completion Report Template

- **New Field:** Assessment Method
  - In-person
  - Telephonic
  - Telehealth

- Telehealth means the assessment visit was done using a HIPAA secure platform that provides for a real-time audio-visual interactive encounter (e.g., video conference)

- See Instructions tab in template for details on how to report each field

Medica Monthly HRA Completion Report
Product: MSHO

Member PMI	Last Name	First Name	DOB	Delegate Name	Date of Assessment	Type of Current Assessment	Assessment Method	Date Care Plan Completed	Name of Care Coordinator	Comments
12345678	Smith	John	1/1/1980	XYZ Delegate	1/1/2018	(Select from Dropdown Box)	(Select from Dropdown Box)	1/1/2018	Jane Doe	
							In Person / Telephonic / Telehealth			

HRA Completion Report Template

- **Updated Field:** Date Care Plan Completed
  - Report date the Care Coordinator **completed** the care plan associated with the reported assessment date
  - If assessment completed in a given month but care plan not yet completed, report both in the next monthly report
  - For care plans associated with Transfer HRAs, report date the previous care plan was reviewed with the member, as documented on the Transfer HRA

- See Instructions tab in template for details on how to report each field

Medica Monthly HRA Completion Report
Product: MSHO

Member PMI	Last Name	First Name	DOB	Delegate Name	Date of Assessment	Type of Current Assessment	Assessment Method	Date Care Plan Completed	Name of Care Coordinator	Comments
12345678	Smith	John	1/1/1980	XYZ Delegate	1/1/2018	(Select from Dropdown Box)	(Select from Dropdown Box)	1/1/2018	Jane Doe	

HRA Completion Report - Instructions

- Instructions tab tells you how to complete each field in the report

Instructions for MEDICA Monthly Care Coordination HRA Completion Report

If you have questions, contact Regulatory Quality via email at MedicaSPPRegQuality@medica.com.

EXPLANATION OF DATA ELEMENTS IN SPREADSHEET TABLE

Column Heading	Data Element	Cell Format Parameters	Guidelines and Definitions
A through D	Column Headings match monthly enrollment report.	Varies	Enter demographic information for all members who have received an assessment/HRA in the previous month
E	Delegate Name	Text Field	Enter name of your agency/county/care system. Please make sure the delegate name is entered the same in the entire column.
F	Date of Assessment	mm/dd/yyyy	Enter the date the Care Coordinator completed the assessment with the member. For refusals, enter the date member refused the assessment. For Unable to Reach, enter the date of the last attempt to reach the member (either the date of the last phone call or the date the letter was sent, whichever is later). Note: member must have three phone calls in addition to the letter to code as unable to reach. For Transfer HRAs, document the date the previous LTCC/HRA was reviewed with the member (Assessment Date Reviewed question from Section II of the Transfer HRA).
G	Type of Current Assessment	Select from drop down box	Enter most current assessment type. The type could be an initial assessment, reasessement/annual, change in health condition, refusals, unable to reach, or transfer HRA. Transfer HRA can be used when you've received a member via transfer from another delegate and are using the Transfer HRA to document the review of the previous assessment, per Medica policy.
H	Assessment Method	Select from drop down box	Indicate if the assessment was completed in-person, telephonically or via telehealth. Telehealth means the assessment visit was done using a HIPAA secure platform that provides for a real-time audio-visual interactive encounter (e.g., video conference).
I	Date Care Plan Completed	mm/dd/yyyy	Enter the date the Care Coordinator completed the care plan associated with the most recent assessment date. Use the date documented as Today's Date on the Information about Me section of the My Care Plan and Community Support Plan or the AccessAbility Solution/AccessAbility Solution Enhanced Special Needs BasicCare

Instructions | MSHO | MSC+ | SNBC | SNBCI | (+)

UTR & Refusal Documentation (MSHO & SNBCI Only)

- When you send the monthly HRA Completion Report, also send documentation to support any Unable to Reach (UTR) or Refusal members for that month

- **UTR Members**
  - Must complete three live call attempts and send a follow-up letter before considering a member unable to reach
  - Supporting documentation:
    - Completed Unable to Contact/Refusal Care Plan or case notes showing dates of the three call attempts; **and**
    - Copy of the letter sent to the member

- **Refusal Members**
  - Must have conversation **with member or legal representative** where s/he declines to participate in the HRA
  - Supporting documentation: Case note with documentation of conversation

Documentation Tip:

Always double check dates.

Make sure dates on case notes, Unable to Contact/Refusal Care Plan, letters, and HRA Report all match.

HRA Review & Validation Process (MSHO & SNBCI Only)

Prior Process

- Sent HRA Review Report annually in Q4

- Ask: Review and validate all HRA dates received to date

New Process

- Send HRA Review Report more frequently so fewer dates to validate at once
  - Q1 – Q3: Report sent the month following the end of the quarter
  - Final Report sent later in Q4 with additional dates received

- Ask: Review and validate HRA and Care Plan dates on report

Report Content

- Corrections Tab
  - Pre-populated by Medica
  - Indicate dates requiring corrections by adding "Approved" or "Delete" for each date listed
- New HRA Dates Tab. Add member information and HRA/Care Plan dates for:
  - Members with incorrect HRA or Care Plan dates on Corrections Tab
  - Members not listed on Corrections Tab for whom you have HRA or Care Plan dates

HRA Review Report: MSHO & SNBCI Only

- **Corrections Tab (Tab 1):** Pre-populated by Medica except for Approved/Delete column

	A	B	C	D	E	F	G	H	I	J
1	PMI	LAST NAME	FIRST NAME	DOB	DELEGATE	COMPLETION DATE	ASSESSMENT CATEGORY	ASSESSMENT METHOD	APPROVED / DELETE	
2	01234567	Smith	John	DD/MM/YYYY	XXXX	DD/MM/YYYY	[HRA Assessment/Care Plan]	[In-Person/Telephonic/Telehealth/Care Plan]		
3									Approved / Delete	
4										Select action
5										to be taken for
6										HRA date
7										
8										
9										

- **New HRA Dates Tab (Tab 2):** Populate with corrected and/or missing HRA and Care Plan dates

A	B	C	D	E	F	G	H	I	J
Member PMI (ex 01234567)	Last Name	First Name	DOB (ex 09/15/1977)	Delegate Name	Date of Assessment (ex 05/10/2016)	Type of Current Assessment (Select from drop down)	Assessment Method (Select from drop down)	Date Care Plan Completed (ex 05/10/2016)	Name of Care Coordinator
						Initial Assessment			
						Reassessment/Annual			
						Change of Condition			
						Refusal			
						Unable to Reach			
						Transfer HRA			

HRA Reporting & MnCHOICES

- Continue sending us monthly HRA Completion Reports and UTR/Refusal documentation until further notice

- MCOs are working with DHS on available reporting out of MnCHOICES
  - Will keep you updated on status, including when can discontinue the HRA Completion Reports
  - **Note:** Will need to continue to report data for all MSHO & MSC+ Institutional HRAs indefinitely since those assessments will not be in MnCHOICES

Contact Information

- Regulatory Quality Mailbox: MedicaSPPRegQuality@medica.com

- Lisa Benrud: lisa.benrud@medica.com

- Cindy Vang-Vue: cindy.vangvue@medica.com

Questions?

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THANK YOU