

June 13, 2014

<Provider Name>
<Provider Address1>
<Provider Address2>
<Provider City> <state> <zipcode5-4>

Dear Provider:

RE: Healthy Michigan Plan Health Risk Assessments

The purpose of this letter is to provide an update regarding Healthy Michigan Plan Health Risk Assessments completed prior to beneficiary enrollment in a health plan.

Healthy Michigan Plan beneficiaries may receive services, including the initial primary care provider appointment and completion of the Health Risk Assessment, with a fee-for-service provider prior to enrolling in a health plan. When this occurs, the health plan and the provider are responsible for working together to ensure that the Health Risk Assessment is received by the health plan. Fee-for-service providers should give each beneficiary a copy of their completed assessment at the initial appointment and also forward a copy to the beneficiary's health plan after enrollment. Providers should periodically check the Community Health Automated Medicaid Processing System (CHAMPS) for health plan enrollment information. Beneficiaries who complete the Health Risk Assessment during the fee-for-service period are eligible for the health plan cost-sharing reduction and/or incentive upon enrollment in a health plan.

The Health Risk Assessment incentives do not apply to beneficiaries who do not enroll in a health plan and remain in fee-for-service. However, these beneficiaries and their providers may choose to complete the assessment to identify health risks and opportunities for healthy behavior change. Health Risk Assessments that are completed for these individuals do not need to be submitted to the Michigan Department of Community Health, and can remain in the medical file.

Fee-for-service will reimburse providers for covered services provided to the beneficiary prior to the effective date of enrollment in a health plan. However, health plans are required to disburse the provider incentive for Health Risk Assessment forms completed during the fee-for-service period when the form is submitted to the health plan after beneficiary enrollment. Incentives to non-network providers will be at the discretion of the health plans. Providers must utilize the date of submission of the Health Risk Assessment form to the health plans as the date of service.

Bulletin MSA 14-11, issued February 27, 2014, provides Healthy Michigan Plan policy guidance to providers. This bulletin, as well as additional information about the Healthy Michigan Plan, can be found at www.michigan.gov/healthymichiganplan. Questions about the Healthy Michigan Plan may be directed to healthymichiganplan@michigan.gov.

Sincerely,



Stephen Fitton, Director
Medical Services Administration