

Provider Update

The New Electronic Health Risk Assessment Form

Background: We encourage you to complete a Health Risk Assessment (HRA) every year for each patient on your Amerigroup¹ Medicare Advantage (Amerivantage) member panel. To complete the HRA, you must use our new electronic form. This form includes optical character recognition technology to more accurately capture medical information and increase ease of payment. You will receive a \$100 reimbursement for completing an HRA for each Amerivantage member per calendar year.

✦ **What this means to you:** Effective August 1, 2013, you must use our new electronic HRA form for all Amerivantage members. This form replaces all prior versions and is the only form that will be accepted and reimbursed for payment when a claim is submitted.

Why is this change necessary?

The electronic HRA form helps us collect Healthcare Effectiveness Data and Information Set (HEDIS)² and risk adjustment data and minimizes the need for chart collection of medical records. The form has been updated to reflect The Centers for Medicare & Medicaid Services' (CMS) HEDIS measures. The diagnosis pages have been expanded to capture up to the fifth digit of the care a member receives during the calendar year.

CMS measures our performance based on the care you render to our members, so we look to you to ensure our members receive preventive care and to manage follow-up related to tests and screening results. By completing and signing an HRA, you are attesting that the member's medical record supports the information documented on the form.

How do I access the electronic HRA form?

1. Log in and select **Office Support** and then **Downloadable Forms**. Under **Office Support**, select **Medicare**.
2. Download the HRA form to your local desktop or network. You will need the most recent version of Adobe Acrobat Reader to open the file. To download the free version of this software, go to www.adobe.com/downloads.
3. Complete the HRA form during a face-to-face visit with an Amerivantage member on the date of service.
4. Populate all required fields. The required fields are outlined in red on your screen and must be completed to sign the form and print it.
5. Enter your signature (located on the last page) as a Digital Signature after completing the entire form. Be sure to enter your credentials before applying your Digital Signature. Once the Digital Signature is entered, the form will be locked and no further edits can be made. See the next page for additional details about signing the HRA form and creating a Digital Signature.
6. Print the completed form.
7. Fax the form to 1-888-762-3219.
8. Submit a claim with CPT code 99420 and modifier 25 via a clearinghouse or our self-service website or mail a paper claim to:
Amerigroup Community Care
P.O. Box 61010
Virginia Beach, VA 23466-1010
9. File a copy of the completed HRA in the member's medical record.
10. **You will receive a \$100 reimbursement for completing an HRA for each Amerivantage member per calendar year.**

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Signing the HRA document

To complete the electronic HRA, you will need a Digital Signature to use as a unique identifier to authorize the document. To obtain a Digital Signature:

- Click anywhere in the **Signature Field** (located at the bottom of page 4) to sign. There may be a small tag attached to the top of the field.
- Click **Continue Signing**. If you have a password-protected Digital ID, another dialog box will ask you to enter your password.
- If this is your first time providing a Digital Signature, you will be required to create a Digital ID (see the instructions under **Creating a Digital ID** below).
- Once your password is entered and validated, click **Sign and Save** and then **OK** when confirmed. The finished signature should appear in the signature field.

Note: Signing the HRA should be the last step after entering all required information, including the signee's credentials. Upon completion of the Digital Signature, the form will no longer be open for editing; the form will become secured and will only allow printing. Any additional changes will require completion of a new HRA.

Creating a Digital ID

You must create a Digital ID to sign in the Digital Signature field on the electronic HRA. A Digital ID contains your unique signature, as well as other identifying information. If you don't already have a Digital ID:

- Click **Document** and select **Security Settings**.
- In the **Security Settings** dialog box, select **Digital IDs**.
- Click the **Add ID** button.
- In the dialog box, click the **Create a Self-Signed Digital ID** button and click **Next**.
- Click **Next** when the confirmation dialog box appears.
- Select the **New PKCS#12 Digital ID file** option.
- Enter your information in the required fields (e.g., name, organization and email address).
- Create a password and select the location where you want to store the file (click **Browse** to save the file in another location).
- Type the password twice and click **Finish**.
- Your Digital ID will now appear in the **Digital ID List**.

What if I need assistance?

If you have questions about this communication, received this fax in error or need assistance with any other item, contact your local Provider Relations representative or call the Dedicated Service Unit at 1-866-805-4589.

1 In New Mexico, Amerigroup Community Care of New Mexico, Inc.

2 HEDIS is a registered trademark of the National Committee for Quality Assurance.