

Health Assessment (HA) in LEAN

UnitedHealthcare can better understand a member's unique health needs by obtaining a Health Assessment (HA) from the member. The HA is a tool that quickly identifies members at high risk for inpatient hospitalizations and those who may benefit from clinical programs. For coordination of care and Star Ratings, UnitedHealthcare should obtain a HA from members enrolling in a MA/MAPD, especially those in Chronic or Dual Special Needs Plans (SNP).

You can support UnitedHealthcare by completing a HA along with an enrollment application in LEAN. The HA must be submitted within three calendar days of the application signature date. Based on the responses, information could be shared with the member's care team. Answering these questions will have no effect on the member's plan membership.

The HA includes Social Determinants of Health questions. Social Determinants of Health are conditions in the places where people live, learn, work, and play that affect health risks and outcomes.* Answering these questions may help us assist members with referrals to resources such as food, transportation to medical appointments or behavioral health assistance.

In-Home Health Assessment Appointments

When completing a HA in the member's home, a written copy of the Rx Disposal Health Assessment form found on the Sales Materials Portal must be provided to the member along with a verbal summary of the information on the form. The form is available in electronic or print format on the Sales Materials Portal (Jarvis > Sales and Marketing > Sales Material > Sales Material Portal > Order Materials > Doc Type > Rx Disposal Health Assessment). Download or print the form and use the Drug Enforcement Agency (DEA) website to identify two safe disposal locations near the member.

Note: This process is only required when the agent is physically with the member at the member's home when the HA is being completed.

You must enter a minimum of two locations including the location, street address, and city on the disposal form.

<https://apps2.deadiversion.usdoj.gov/pubdispsearch/spring/main?execution=e1s1>

The screenshot shows the 'U.S. DEPARTMENT OF JUSTICE ★ DRUG ENFORCEMENT ADMINISTRATION DIVERSION CONTROL DIVISION' header. Below it is a search utility titled 'Controlled Substance Public Disposal Locations - Search Utility'. The form contains the following fields and options:

- Zip Code:
- Or-
- City:
- State:
- Search Radius: 5 miles 10 miles 20 miles 50 miles
- Search:

*<https://health.gov/healthypeople/objectives-and-data/social-determinants-health>

Health Assessment in LEAN

You have three options to provide the safe drug disposal information to the member:

1. Print the Safe Drug Disposal form, write two disposal locations on the form, and provide it to the member at the time of the HA along with your verbal summary of the information on the disposal form; or
2. Fill out the safe drug disposal form electronically and email the safe drug disposal form to the member after providing your verbal summary of the information on the disposal form; or
3. Fill out the safe drug disposal form electronically, print the form (if a printer is available), and provide the disposal form to the member at the time of the HA along with your verbal summary of the information on the disposal form.



You will attest to providing the information and the disposal form to the member when you start the HA.

Health Assessment

HA ATTESTATION (FOR AGENT USE ONLY)

- A Health Assessment is a short survey that helps the health plan assess a member's health needs.
- Health Assessments are conducted within 90 days of enrollment, and annually within 365 days of the previous completed health assessment. Additional health assessments may be completed with a change in health status.
- Health Assessments are used to assess each member for needs related to medical conditions, psychosocial status, functional status, cognitive ability and mental health.
- Information collected from the Health Assessment is used to develop an Individualized Care Plan (ICP) which is shared with the member's providers.
- If a Health Assessment is completed in a member's home, information regarding the safe disposal of prescription drugs must be provided by the Sales Agent. A written copy of the Safe Drug Disposal Form found on the Jarvis Sales Materials Portal is provided to the member along with a verbal summary of the information on the form. At least 2 drug take back sites in the community where the member lives must be included with the form.

I Agree or I Understand the above information regarding Health Assessments.

Once you have completed the member's enrollment application in LEAN, follow the instructions below to complete the HA:

1. Starting the Health Assessment

You have two options to start a HA after completing the enrollment application.

On the confirmation screen, click **Start HA** to begin the HA.

Thank You
The application has been submitted.
Confirmation # E-590016071621
Receipt emailed to:

[Completed Application Summary](#) [Display Receipt](#) [Close Application](#)

If you wish to start a Health Assessment for the same consumer, click the "Start HA" button below. You have 3 days to complete the Health Assessment.

Start HA



Health Assessment in LEAN

If you did not start the HA from the confirmation screen (e.g., you used Remote Signature to complete the enrollment), return to the LEAN dashboard and click **My Applications** on the left side of the dashboard.

The dashboard shows the following sections:

- Confirmation Steps:**
 - Confirm you are Licensed, Appointed, and Certified in the Applicant's State and Product
 - Confirm Scope of Appointment has been completed and returned
 - Confirm applicant has their Medicare Card or Number
- Medicare Advantage and Part D:**
 - Scope of Appointment
 - Voice Signature MA/PDP
- Medicare Supplement:**
 - New Med Supp App
 - Saved / Submitted Med Supp Application
 - Companion Sales
- Useful Links and Reference Material:**
 - Provider Search
 - UHC Drug Search
 - Jarvis
 - Benefit Review
 - Enrollment Handbook
 - Election Period Worksheet
 - LEAN User Guide

On the **Submitted** tab, click **Start HA**. If the **Start HA** button is not present/active, you are not permitted to complete a HA. The Start HA button may not be present/active based on the plan in which the consumer is enrolling or because more than three calendar days have passed since the consumer signed the enrollment application.

Action Required		Submitted				
Conf #	First name	Last name	Signed date	Date submitted	HA conf #	
1 E-590016071621	testtha	test0716	07/16/2021	07/16/2021	Start HA	
DOB		Medicare ID		Effective date		
01/01/1903		1aa1aa1aa11		08/01/2021		
View App		Download App				

The information used in these examples is for training purposes only and does not reflect actual consumers or members.



This will open the HA. To continue, you must read the statements and click **I Agree** for the attestation. Do not read these statements to the member.

All of the member's information is pre-populated from the LEAN application. If you did not include the member's home phone number on the LEAN application, you will be required to provide it here.

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I Agree or I Understand the above information regarding Health Assessments.

Enrollee Information

Today's Date
01/04/2022

First name Fa	Last name Mulan	State FL
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Date of birth 01/01/1965	Home phone number: * <input type="text" value="(321)654-9878"/>	Medicare number(MBI) 1EG4TE5MK72
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Enrollment confirmation number
E-1503004010422

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2. Navigating the Assessment

Capturing Responses

As the member answers the assessment, select the appropriate response from the dropdown menu.

Compared to others your age, how would you describe your health?

Current Health Conditions

Are you being treated for or have you been told you have any of the following?

COPD/Emphysema	<input type="button" value="Select..."/>
Mental Health Need (Anxiety, Depression, Schizophrenia, Bi-Polar Disorder)	<input type="button" value="Select..."/>
Diabetes (sugar diabetes) or too much sugar in your blood	<input type="button" value="Select..."/>
Heart problems (irregular heart beat, heart attack, or heart surgery)	<input type="button" value="Select..."/>
Heart Failure or Enlarged Heart	<input type="button" value="Select..."/>
High Blood Pressure	<input type="button" value="Select..."/>
Kidney Dialysis	<input type="button" value="Select..."/>



Some questions will require the member to give a rating. Select the appropriate response.

Help At Home
On a scale of 0-10 how much physical pain have you experienced over the past 72 hours? Zero equals no pain and ten equals the worst pain possible.

Select...
Select...
0
1
2
3
4
5
6
7
8
9
10
Choose not to answer

Conditional Questions

Answers on the HA give UnitedHealthcare a more complete picture of the member's needs and may help us to assist our members with additional assistance/resources or behavioral health referrals.

Some questions only appear on the screen when necessary.

Prescription Drugs
How many different medications do you take each day (including prescriptions and over the counter medications)?

Hospital Stays
In the last year, how many times have you stayed overnight as a patient in the hospital?

Help At Home
Do you need help with any of the following activities?

Bathing	<input type="text" value="Select..."/>
Grooming	<input type="text" value="Select..."/>
Toileting	<input type="text" value="Select..."/>
Eating	<input type="text" value="Select..."/>
Dressing	<input type="text" value="Select..."/>
Mobility (Moving Around)	<input type="text" value="Select..."/>
Transfers (example: move from bed to chair)	<input type="text" value="Select..."/>

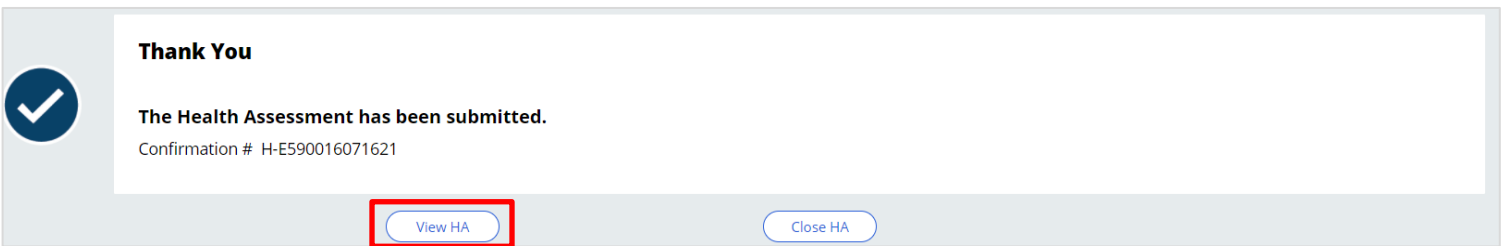
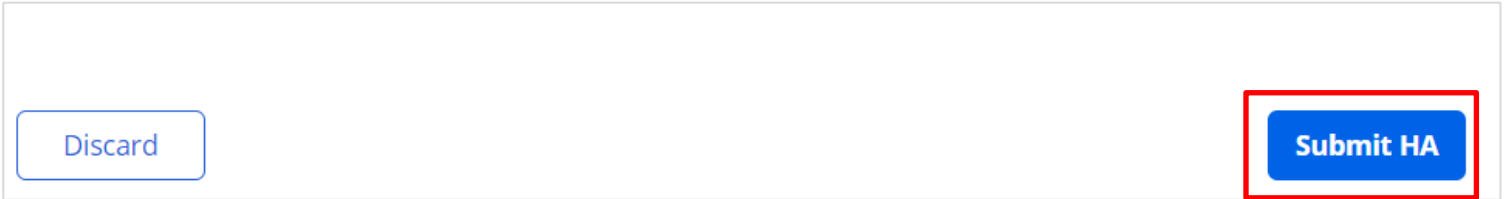


Changing Responses

You may go back to change an answer at any time before the assessment has been submitted.

3. Completing the Assessment

Once you have completed the assessment, click [Submit HA](#).



You can review the HA by either clicking [View HA](#) on the confirmation screen or go back to **My Applications >Submitted** and find the member. You will see the HA confirmation number on the right. You can click the confirmation number to view or download the completed HA. No changes can be made once the HA has been submitted.

Action Required		Submitted				
Conf #	First name	Last name	Signed date	Date submitted	HA conf #	
1	E-590016071621	testtha	test0716	07/16/2021	07/16/2021	H-E590016071621
DOB	01/01/1903	Medicare ID	1aa1aa1aa11	Effective date	08/01/2021	

[View App](#) [Download App](#)

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If you have any questions about using LEAN, see the LEAN User Guide (Jarvis>Knowledge Center>Learning Lab>Content Library>LEAN>Additional References).

If you have specific Health Assessment program questions, contact your UnitedHealthcare sales leader.

If you have other questions, please contact the PHD at 888-381-8581, Monday through Friday 7:00 AM to 9:00 PM CT.

