

Health Assessment (HA) in LEAN FAQ

General

What is a Health Assessment (HA)?

A HA has 20-30 questions that help the health plan identify programs and resources that fit the member's needs. By completing a HA, the member will also receive a care plan with goals that are based on the answers.

Why should I help a member submit a HA?

As an agent, you are often the first interaction a member has with UnitedHealthcare. When you assist a member in completing a HA, you are helping them to take full advantage of their health care plan.

Why is my client/member receiving phone calls to complete a HA? They already completed a HA with me during the sales process.

HAs are part of Star Ratings for Dual and Chronic Special Needs plans. HAs must be completed no more than 90 days before the effective date. As an example, if a "new to Medicare" member submits an application and HA on July 1 for an October 1 effective, it will not count toward the Star Ratings requirement (92 days in between July 1 and October 1). To avoid this issue, submit the HA no more than 90 calendar days before the effective date.

Eligibility

What types of agents can submit Health Assessments for enrollees?

The UnitedHealthcare agreement will note if Health Assessments are included.

How do I become eligible to be paid for completing a Health Assessment on behalf of UnitedHealthcare?

To be paid for completing a Health Assessment, you must be eligible, the member must enroll in an eligible plan, the enrollment application must be completed in LEAN, and the Health Assessment must be completed no more than 3 calendar days after the consumer signature date.

Agent Eligibility – you must be licensed, appointed, and product certified. In other words, if you are not eligible for a commission payment for the enrollment application, you are not eligible for payment for the associated HA.

Plan Eligibility – the consumer must be enrolling in an eligible MA/MAPD, Dual SNP (DSNP), or Chronic SNP (CSNP). Ineligible plans include those deemed non-commissionable at the time of enrollment and any stand-alone PDP, Medicare Supplement, or ISNP plan. LEAN will prevent you from taking an HA for an ineligible plan or plan type.

Other Eligibility Criteria –The enrollment application must be approved and the consumer enrolled (i.e. accreted application). Health Assessments associated with a denied, cancelled, or withdrawn enrollment application are not eligible for HA payment.

Training

Do I need to take HA training to be eligible to complete an HA?

No. An attestation will appear at the beginning of each HA you start in LEAN. You must read and acknowledge each statement before you will be able to begin answering the HA questions.



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Completing the Health Assessment

When may a HA be completed?

The HA must not be completed until the consumer has signed the enrollment application in LEAN.

How do I complete a HA in LEAN?

The entire HA process is completed in LEAN. Refer to training resources on Learning Lab for a job aid for step-by-step instructions for completing an HA (Jarvis>Knowledge Center> Learning Lab>Content Library>Health Assessment (HA) >Additional References).

Do I need to complete the attestation each time I complete a HA?

Yes. You will not be able to continue without completing the attestation.

Does any information entered in the enrollment application get pulled into the HA?

Yes. The consumer's first name, last name, date of birth, state, home phone number, and MBI pre-populate from the LEAN enrollment application. If you did not enter the consumer's home phone number during the enrollment process, you will need to manually enter it in the HA.

What if I want to check the status of a HA submitted for a member?

You can view the HA in My Applications with the completed HA number. The Start HA button will disappear once the HA has been completed.

Health Assessment Payment

How will the HA payment appear on my commission statement?

If you are a non-employee/contracted agent, you will find HA payments on the Commission Transaction tabs of the Excel version of your commission statement. If you are an ISR (UnitedHealthcare employed agent), you will find HA payments through the DOCK in your All Paid File.

How frequently will HA payments process?

Payments process monthly the month after the effective date of the plan. For example, HAs for plans with January 1 effective dates will be processed the last week of February.

I haven't received payment for a HA submission, what should I do?

Verify that all eligibility criteria were met to receive payment for completing a particular HA. The HA payment for January 1 plan effective dates will be processed in late February. Please wait one commission payment statement past when you were expecting payment before contacting the PHD for assistance.

If I have an Assignment of Commission (AOC) in place, who will receive the HA payment for the member I enrolled?

HA payments process the same as other payments through the system. For non-employee, contracted agents, if there is an AOC in effect, the assignee will receive the HA payment for HAs completed by the assignor.

Are HA payments reported as revenue like commissions? And if so, in what year will they be reported?

Yes, for non-employee, contracted agents, HA payments are considered revenue and are reported on the 1099 for the year in which it was paid. For UnitedHealthcare employee agents, the HA is considered income and is reported on the W2 for the year in which it was paid.



Troubleshooting

If you have any questions about completing an HA, see the Health Assessment in LEAN job aid (Jarvis>Knowledge Center> Learning Lab>Content Library>Health Assessment (HA)>Additional References).

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 Health Assessment questions, please contact the PHD at 888-381-8581, Monday through Friday 7:00 AM to 9:00 PM CT.

