

March 2023

To: Primary Care Practitioners

Blue Shield of California Promise Health Plan Medi-Cal Network

Completing a timely Initial Health Appointment (IHA) provides an opportunity for members to establish a relationship with their primary care physician (PCP) and obtain necessary health care and preventive services, which can lead to positive health outcomes and improvement in the member's overall health status. All newly enrolled members must receive an Initial Health Appointment (IHA) within 120 days of enrollment, as stated in the Department of Health Care Services (DHCS) <u>APL 22-030</u>.

Please note that, starting January 1, 2023, the completion of an Individual Health Education Behavioral Assessment (IHEBA) also known as an SHA (Staying Healthy Assessment form) will no longer be required at the IHA visit.

IHA Requirements

A minimum of two documented attempts must be made to schedule the timely IHA, with at least one phone call and one letter. If the member has been contacted but has missed a scheduled IHA, please evidence the additional documented attempts to reschedule the appointment; at least one attempt to contact the member by telephone and at least one attempt to contact the member by letter.

The IHA consists of a comprehensive health history (medical, social, family, etc.), physical exam, including a review of systems. This visit should include, but is not limited to, immunizations (in accordance with guidelines from the <u>Advisory Committee Immunization Practices</u> (ACIP) medical testing and treatment, and review of the <u>U.S. Preventive Services Task Force</u> (USPSTF) recommendations for screenings.

Although there is no specific form, complete documentation of this visit is required to be kept in the patient's medical record (age-appropriate physical evaluation templates). Provision of the assessment or that of a comparable comprehensive assessment needs to be documented in the patient's medical chart.

- DHCS Policy Letter 22-030
- DHCS APL 18-004 Immunization Requirements
- <u>Advisory Committee on Immunization Practices ACIP Guidelines</u>
- <u>USPSTF Recommendations</u>
- Age-appropriate physical evaluation templates

Review the information on the following pages to see the standards used to implement an Initial Health Appointment in accordance with requirements.



Initial Health Appointment Auditing Tool

The standards outlined below will be used to perform an audit of an Initial Health Appointment report provided by your IPA/medical group, should your group be randomly selected by Blue Shield Promise to provide such a report.

Medical Records Review Audit

Attachment 70.29.1.14

Enrollment quarter:		Enrollment			
		Year:			
County:		Auditor:			
IPA/medical group:					
Specialty:		Provider			
		Name:			
Score Criteria: Met = 100%	Not Met = < 89%	Value Score: Yes	= 1	No = 0	N/A = 1

All M	All Members		No	N/A	Comment	Source
1.	The IHA was performed within 120 days of enrollment.	0	0	0		<u>APL22-030</u>
2.	The medical record reflects diagnostic, treatment and follow- up services for symptomatic findings or risk factors, identified in the IHA within 60 days following discovery.	0	0	0		<u>APL22-030</u>
3.	The medical record reflects TB assessments for all members: TB Screen/Test or CXR results for positive skin results.	0	0	0		AAP Periodicity Schedule
4.	If the IHA has not been completed, the medical record reflects attempts to schedule IHA per Health Plan policy.	0	0	0		<u>APL22-030</u>
5.	If the IHA has not been completed due to missed appointments, the medical record reflects documented missed appointments and at least two (2) attempts for follow-up, as appropriate, including one attempt by telephone and one by letter or postcard.	0	0	0		<u>APL22-030</u>
6.	Immunization information is reported to the California Immunization Registry (CAIR) within 14 days of the immunization.	0	0	0		<u>APL18-004</u>
7.	The medical record reflects that the HPV immunization was offered to age-appropriate males and females (ages 9 to 26 years).	0	0	0		MMCD Policy Letter PL 07-015



Promise Health Plan

All Members		Yes	No	N/A	Comment	Source
8.	Initial and annual assessment of tobacco use for each adolescent and adult member	0	0	0		<u>APL16-014</u>
9.	The medical record reflects an assessment of alcohol/drug misuse, using a validated screening tool, for members ages 11 years and older. The name of the screening tool and score are documented in the medical record.	0	0	0		<u>APL16-014</u>
10.	For positive alcohol/drug misuse screening results, the medical record reflects assessment using a validated assessment tool, and documentation that brief misuse counseling has been offered and/or referral for additional evaluation and treatment.	0	0	0		<u>APL21-014</u>
11.	Vital signs completed per guidelines (including BP, head circumference, BMI)	0	0	0		AAP Periodicity Schedule
12.	Dyslipidemia Risk Assessment/Screening completed (starting at 24 months)	0	0	0		AAP Periodicity Schedule
13.	Hepatitis B Risk Assessment/Screening completed (starting as a newborn)	0	0	0		AAP Periodicity Schedule
14.	Hepatitis C Risk Assessment/Screening completed (starting at 18 years of age)	0	0	0		AAP Periodicity Schedule
Section quest	on score for all members: (14 ions)	0	o	o		

Pediatric Members (ages 0 – 20 years)		Yes	No	N/A	Comment	Source
15.	For members under 21 years of age, the medical record reflects completion of an age appropriate IHA according to the most recent edition of the American Academy of Pediatrics (AAP) age specific guidelines and periodicity schedule.	0	0	0		AAP Periodicity Schedule
16.	The medical record reflects a dental screening/oral assessment and dental referral starting at age 3 or earlier, if warranted.	0	0	0		<u>APL18-007</u>



Promise Health Plan

Pediatr	ic Members (ages 0 – 20 years)	Yes	No	N/A	Comment Source	
17.	The medical record includes a risk assessment or lab screening for anemia according to the most recent edition of the USPSTF periodicity table. Screening by lab testing should be performed at age 12 months.	0	0	0	AAP Periodicity Schedul	<u>e</u>
18.	The medical record includes identification, treatment and follow-up on obese members.	0	0	0	USPSTF Screening for Obe Children & Adolescents	
19.	The medical record includes documented age-appropriate immunization(s).	0	0	0	USPSTF Screening for Obe Children & Adolescents CDC Recommended Child Adolescent Immunizatio Schedule	<u>4 &</u>
20.	The medical record includes documented age-appropriate administration of an IPV vaccine: 1) 2 months 2) 4 months 3) 6 to 15 months 4) 4-6 years.	0	0	0	USPSTF Screening for Obe Children & Adolescents CDC Recommended Child Adolescent Immunizatio Schedule	<u>4 &</u>
21.	The medical record includes a documented testing for lead poisoning in IHA (if appropriate). Lead level checks at ages 12 months, 24 months, and 72 months.	0	0	0	<u>APL20-016</u>	
22.	Follow-up lead re-check done on lead levels ages 10 to 14 in 3 months.	0	0	0	<u>APL20-016</u>	
23.	Follow-up lead confirmatory (venous) re-check is performed on level levels 15 to 19 within 1 to 2 months.	0	0	0	<u>APL20-016</u>	
24.	Referred to County Lead Program for lead levels above 15	0	0	0	<u>APL20-016</u>	
25.	The medical record includes documented testing for Sickle Cell Anemia (SCA) trait in the IHA (if appropriate).	0	0	0	<u>PL98-06</u>	
26.	Maternal depression screening completed by 1 month, 2 months, 4 months and 6 months	0	0	0	AAP Periodicity Schedul	<u>e</u>
27.	Autism Spectrum Disorder screening and/or Developmental Surveillance completed	0	0	0	AAP Periodicity Schedul	e
28.	Vision screening completed, starting with risk assessment as a newborn.	0	0	0	AAP Periodicity Schedul	<u>e</u>
29.	Hearing screening completed	o	o	o	AAP Periodicity Schedul	e
Section (15 ques	Score for Pediatrics stions)	0	0	0		



SPD M	SPD Members		No	N/A	Comment	Source
30.	The Health Risk Assessment for the SPD member is present in the medical record.	0	0	0		MMCD Policy Letter PL 12-004
31.	The SPD member has received all necessary information regarding their treatment and services so that they can make an informed choice.	0	0	0		MMCD Policy Letter PL 12-004
32.	The medical record reflects that the SPD member agrees with the plan for treatment and services.	0	0	0		MMCD Policy Letter PL 12-004
Section score for SPD members (3 questions)		0	0	0		
_	TOTAL COMBINED SCORE POINTS FOR ALL SECTIONS (32 questions):		0	0		