

Let's Get Started!

- ✓ **Step 1** – Read your instruction packet
- ✓ **Step 2** – Have your free preventive services office visit
- ✓ **Step 3** – Have your free, fasting blood tests
- ✓ **Step 4** – Complete the HRA
 - a.** Go online to the HRA
 - b.** Answer the health questions
 - c.** Enter the following **required** information:
 - Height and Weight
 - Resting Heart Rate (Pulse)
 - Fasting Cholesterol (HDL, LDL, Total Cholesterol, Triglycerides)
 - Answers to the questions:
 - Do you smoke?
 - Do you use tobacco products?
 - Blood Pressure
 - Fasting Blood Glucose
 - d.** Review your HRA results



H.E.L.P. ✓ Member Information

Let's get started! Thank you for participating in the **H.E.L.P. ✓** Program. **Take this form to your preventive services appointment with a HealthChoice Network Provider to record the medical information required for completing your health risk assessment.** The back side of this form also provides the required codes your provider must use when billing for these services. When your provider bills HealthChoice for these specific codes, these specific services are free to you with no copay or other out-of-pocket costs. Do not send this form to HealthChoice or HP Administrative Services, LLC.

General Information (please print clearly)

Name: _____
First Name Middle Initial Last Name

Address: _____
Street Address City, State ZIP Code

Phone Numbers: _____
Home Office Cell

HealthChoice ID Number: _____

Date of Birth: _____ Sex (Circle one): Male Female

Information Required for Your Online Health Risk Assessment

Date(s) of Service: _____

Height: _____ Weight: _____ Resting Heart Rate (Pulse): _____

Blood Pressure: _____ Fasting Blood Glucose: _____
Systolic Diastolic

Fasting Cholesterol: _____
HDL Cholesterol LDL Cholesterol Triglycerides Total Cholesterol

Do You Smoke? Yes No Do You Use Tobacco Products? Yes No
(Cigarettes or Cigars) (Snuff, Dip, Chewing Tobacco)

Provider, please return this form to the member or provide the information above.

For more information, contact HP Administrative Services, LLC at 1-405-416-1800 or toll-free 1-800-782-5218. TDD users call 1-405-416-1525 or 1-800-941-2160.

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H.E.L.P. ✓ Provider Instructions

HealthChoice has implemented a wellness program called **H.E.L.P. ✓**. By completing the following preventive services and an online health risk assessment, your patient qualifies for an incentive payment:

- One Comprehensive Preventive Medicine Services Visit
- One Comprehensive Metabolic Panel (Fasting)
- One Comprehensive Lipid Panel (Fasting)

The following services are covered one time per calendar year at 100% of the Plans' Allowed Charges, with no copay or out-of-pocket costs to the member, regardless of the diagnosis, when they are provided in an outpatient or medical setting by a HealthChoice Network Provider. **The following CPT Codes must be used when billing for these services:**

- **Preventive Medicine**

New Patient: Initial Comprehensive Preventive Medicine

- 99385 – new patient age 18-39, or
- 99386 – new patient age 40-64, or
- 99387 – new patient age 65 and older (non-Medicare), or

Established Patient: Periodic Comprehensive Preventive Medicine

- 99395 – established patient age 18-39, or
- 99396 – established patient age 40-64, or
- 99397 – established patient age 65 and older (non-Medicare)

- **Metabolic Panel**

- 80053 – comprehensive metabolic panel, or
- 80050 – general health panel

- **Lipid Panel**

- 80061 – comprehensive lipid panel

Certain other office visit codes also qualify for the **H.E.L.P. ✓** program. These codes and any additional services provided outside the **H.E.L.P. ✓** program are subject to all Plan provisions including copays, deductibles, and coinsurance. CPT Codes are subject to change.

- Your patient needs the following information to complete the **H.E.L.P. ✓** program:

- Height/Weight
- Blood Pressure (systolic/diastolic)
- Resting Heart Rate/Pulse
- Fasting Blood Glucose
- LDL Cholesterol
- HDL Cholesterol
- Total Cholesterol
- Triglycerides
- Tobacco usage

A **H.E.L.P. ✓ Member Information Form** on the other side of this document should make collection of the above information easier. Once the form is completed, please return it to the member so they can complete their health risk assessment.

H.E.L.P. ✓ Provider Billing Instructions

Please provide these instructions to your physician's billing office to assist them in properly billing for your services. The following services **are covered one time per calendar year at 100% of the Plans' Allowed Charges**, with **no copay or out-of-pocket costs to the member**, regardless of the diagnosis, when they are provided in an outpatient or medical setting by a HealthChoice Network Provider.

The following CPT Codes **must be used** when billing for these services:

- **Preventive Medicine**

New Patient: Initial Comprehensive Preventive Medicine

- 99385 – new patient age 18-39, or
- 99386 – new patient age 40-64, or
- 99387 – new patient age 65 and older (non-Medicare), or

Established Patient: Periodic Comprehensive Preventive Medicine

- 99395 – established patient age 18-39, or
- 99396 – established patient age 40-64, or
- 99397 – established patient age 65 and older (non-Medicare)

- **Metabolic Panel**

- 80053 – comprehensive metabolic panel, or
- 80050 – general health panel

- **Lipid Panel**

- 80061 – comprehensive lipid panel

The member may have additional services at the same time they have their free, comprehensive preventive medicine visit. These services and any additional services provided outside the **H.E.L.P. ✓** program are subject to all Plan provisions including copays, deductibles, and coinsurance.

Please note: CPT Codes are subject to change.

For more information, contact HP Administrative Services, LLC at 1-405-416-1800 or toll-free 1-800-782-5218. TDD users call 1-405-416-1525 or 1-800-941-2160.

H.E.L.P. ✓ Questions and Answers

Let's get started improving your health! After you complete the requirements of the program, you will have personalized health information that can help you reduce your health risks and improve your health. In exchange for your efforts, HealthChoice will send you an incentive payment of \$200 after you complete all the requirements of **HELP** ✓.

1. What are the program requirements?

To qualify for the **H.E.L.P.** ✓ incentive payment, you must complete the following requirements:

Step 1. Read all **H.E.L.P.** ✓ program information.

Step 2. Complete your free comprehensive preventive services visit.

- See the *Provider Billing Information Sheet* or the *Provider Instruction Sheet* included in this packet for the specific codes your provider must use when billing for these specific services.

Step 3. Complete your free comprehensive metabolic and lipid panels.*

- See the *Provider Billing Instructions* or the *Provider Instruction Sheet* included in this packet for the specific codes your provider must use when billing for these specific services.

Step 4. Complete the online health risk assessment

- a. Go online to the health risk assessment
- b. Answer the health questions
- c. Enter at least the following required information for the HRA; however, you may enter more information if you choose:

- | | | |
|-----------------------------|-------------------------|--------------------------------|
| • Height and Weight | • Blood Pressure | • Resting Heart Rate (Pulse) |
| • LDL Cholesterol | • HDL Cholesterol | • Total Cholesterol |
| • Triglycerides | • Fasting Blood Glucose | |
| • Answers to the Questions: | • Do you smoke? | • Do you use tobacco products? |

The comprehensive preventive services visit and the comprehensive metabolic and lipid panels are covered at 100% of Allowed Charges once per calendar year with no copay or out-of-pocket costs to you when they are provided in an outpatient or medical setting by a HealthChoice Network Provider. For these services to be covered at 100%, specific CPT Codes must be used when billing. Please provide the **H.E.L.P.** ✓ *Provider Billing Instructions* page to your provider's billing office.

*Be aware that the lipid and metabolic panels are blood tests that must be done after you have been fasting. Generally, this means nothing to eat or drink for 10-12 hours before blood is drawn. Check with your physician for specific instructions.

2. Are you eligible?

The **H.E.L.P. ✓** program is available to primary HealthChoice health plan members age 20 and older who are not enrolled in a HealthChoice Medicare Supplement Plan.

3. What is Included in Your H.E.L.P. ✓ Packet?

Member Information Form

The **H.E.L.P. ✓** *Member Information* form is for recording the test results required for the HRA. You are not required to return this form to HealthChoice or HP Administrative Services, LLC. It is simply a helpful tool to ensure you have all the information you need to complete your online HRA.

Provider Instructions Sheet

The *Provider Instructions* page gives an overview of the **H.E.L.P. ✓** program and provides the billing codes that must be used for the services to be free to you. If other codes are billed or other services are provided during the visit, i.e., venipuncture, x-ray, etc., the member is responsible for any copays, deductibles, and coinsurance.

Provider Billing Instructions

The *Provider Billing Instructions* page provides your physician's office the exact billing codes that must be submitted to HealthChoice for your free comprehensive preventive services visit and your free comprehensive metabolic and lipid panels.

Questions and Answers

The *Questions and Answers* pages provide the answers to the questions most frequently asked about the **H.E.L.P. ✓** program.

4. What is the health risk assessment?

The online health risk assessment (HRA) provides immediate, personalized health information based on your answers to the survey questions. It provides information about your health risks and the steps you can take to reduce and/or eliminate those risks.

Please allow ample time to complete the HRA, and make certain to answer all the questions as accurately as possible. If necessary, you can log out of the HRA at the end of any section and come back to it at a later time. Please note that the following information is required:

- Height and weight
- Blood pressure
- Resting heart rate (pulse)
- Fasting lipid panel (LDL, HDL, total cholesterol, and triglycerides)
- Fasting metabolic panel (blood glucose)
- Do you smoke (cigarettes, cigars)?
- Do you use tobacco products (snuff, dip, chewing tobacco)?

To get the most benefit from the **H.E.L.P. ✓** HRA, including personalized health information and video counseling, HealthChoice encourages you to complete the HRA online. If this is not an option, contact HP Administrative Services, LLC at 1-405-416-1800 or toll-free 1-800-782-5218. TDD users call 1-405-416-1525 or toll free 1-800-941-2160. A representative will contact you to discuss options for completing the HRA online. If no other electronic means are available, a paper HRA will be mailed to you to complete and return.

Where can you find the online health risk assessment?

To access the secure, online HRA, go to the HealthChoice website at www.sib.ok.gov or www.healthchoicook.com, click the HRA button on the home page, log into *ClaimLink*, and then click the *Health Risk Assessment* tab in the top menu bar. If you have not already registered for ClaimLink, you will be prompted to create a unique User ID and Password by following the online instructions. **You will need your User ID and Password to access ClaimLink and the HRA in the future.**

5. If you completed the HRA in 2011, how do you update your HRA for 2012 to show your new preventive services visit, lab results, and any changes in your health condition?

Follow the process below to update your information:

- Step 1.** See the instructions for accessing the HRA located under the question, *Where can you find the online health risk assessment?*
- Step 2.** Enter the application and click the *Update Health Record* link under the *My Health Record* tab in the upper, right corner.
- Step 3.** Select the *Demographics* tab
 - Click the blue Edit button
 - Update your height and weight
 - Click the red Save button
- Step 4.** Select the *Screenings/Procedures/Discussions* tab
 - Click the blue Edit button
 - Update your cholesterol numbers, fasting blood glucose, and blood pressure
 - Click the red Save button

To update the other health questions for 2012, please complete the following steps:

- Step 1.** See the instructions for accessing the HRA located under the question, *Where can you find the online health risk assessment?*
- Step 2.** Enter the HRA application and click the *Update My HRA* link under the *My Health Assessment* tab in the upper left corner.
- Step 3.** Review your previous answers and update if needed.
- Step 4.** Click *Continue* to move to the next screen.
- Step 5.** When you reach the section called *Screenings/Procedures/Discussions*, you can enter any NEW screenings or procedures you have had.
- Step 6.** Complete the HRA.

Who can you contact if you cannot remember your password?

If you have questions about your User ID or Password, please contact HP Technical Support at 1-405-416-1800 or toll-free 1-800-782-5218. TDD users call 1-405-416-1525 or toll free 1-800-941-2160.

What should you do with the results of your health risk assessment?

The results of your HRA will provide you with valuable feedback about your health and your risk factors for chronic diseases such as diabetes or heart disease. This is information you can share with your physician. You will also have access to online lessons that can help you understand how the choices you make every day can affect your health. You can then make a plan, on your own or with the support of your physician, to address these risks and make choices that can improve your health.

Does HealthChoice have access to your personal health information?

HealthChoice does not have access to your health risk assessment. Please note that the information you provide on your health risk assessment is protected under the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA).

6. How do you qualify for the incentive payment?

Once you complete the **H.E.L.P. ✓** program requirements and it is confirmed, a check is mailed to you at the address on file with HealthChoice. Please allow approximately six weeks for the processing of your incentive payment.

How long do you have to complete the requirements of the program?

You must complete all program requirements by December 31, 2012. This includes completing the required fields in the HRA.

What are HealthChoice's responsibilities?

HealthChoice will:

1. Pay 100% of Allowed Charges for the specified preventive services visit and specified comprehensive metabolic and lipid panel blood tests for Network providers.
2. Assist you while you complete the steps of the program.
3. Send you a check for \$200 when you complete all the program requirements.

How soon can you repeat the H.E.L.P. ✓ program if you participated in 2011?

The preventive services office visit and fasting blood tests are program benefits you can take advantage of each calendar year; however, your physician may have you wait for some time to pass before repeating these services. Check with your physician on when to schedule.

7. Who do you contact for more information?

For more information, contact HP Administrative Services, LLC at 1-405-416-1800 or toll-free 1-800-782-5218. TDD users call 1-405-416-1525 or toll-free 1-800-941-2160.

Make the commitment to participate in the **H.E.L.P. ✓** program. You can take steps towards improving your health and earn some cash at the same time!