



**To:** All IPAs  
**From:** IEHP – Provider Relations  
**Date:** December 22, 2017  
**Subject:** DPL/APL HRA Changes Effective 1/1/2018

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On 7/21/17, IEHP received a revised APL 17-013 and DPL 17-001 which requires IEHP to add an additional ten (10) LTSS questions to the Health Risk Assessment (HRA) for CMC and SPD Members. Effective 1/1/18, the additional ten (10) questions will be in Production. The HRA PDF will continue to be available on the Provider Portal for your review with the ten (10) questions added to the end of the survey.

The revised HRA data templates are posted to the SFTP as of 12/19/17.

Your Care Management Team should take note of the following background per the DPL and APL as follows:

**Background:**

In 2016, the Department of Health Care Services (DHCS) announced several strategies designed to improve referrals to Long Term Services and Supports (LTSS), including creating and releasing standardized LTSS referral questions for all Medicare-Medicaid Plans (MMPs) to administer during the Health Risk Assessment (HRA) process. DHCS convened a workgroup to develop recommendations to increase the effectiveness of the questions. The workgroup identified four different categories of risk factors: social determinants, functional capacity, medical conditions, and behavioral health conditions. These risk factors address the spectrum of challenges a beneficiary may face, reflecting a whole-person approach to understanding the need for LTSS.

The workgroup developed standardized LTSS referral questions to address the most directly connected risk factors. Each of the questions seeks to identify whether a beneficiary is experiencing risk factors that make them a candidate for LTSS services that will help keep them in their home and community. The questions are organized in the following two tiers and MMPs must take a holistic view of questions in both tiers to identify beneficiaries in need of follow-up assessments:

- Tier 1 contains questions directly related to LTSS eligibility criteria, and should trigger a follow-up assessment to determine if the beneficiary is eligible for LTSS services.
- Tier 2 contains questions that identify contributory risk factors, which would put a beneficiary at higher risk for needing LTSS services when combined with risk factors identified in Tier 1.

Please access the APL 17-013 and APL 17-001 at [DHCS.ca.gov](http://DHCS.ca.gov)

For any questions, please contact the IEHP Provider Relations Team at (909) 890-2054.