

**HEALTHY INDIANA PLAN DEMONSTRATION**  
PROJECT NUMBER: 11-W-00237/5

**SECTION 1115 QUARTERLY REPORT**  
State of Indiana

**REPORTING PERIOD:**

Demonstration Year: 6 (1/1/13 – 12/31/13)  
Federal Fiscal Quarter: 4/2013 (4/1/13 – 6/30/13)  
Date submitted to CMS: 8/31/2013



**HEALTHY INDIANA PLAN**<sup>SM</sup>  
Health Coverage = Peace of Mind

**Introduction:**

The Healthy Indiana Plan (HIP) was designed for those that do not have access to health insurance and that are not eligible for other Indiana Medicaid programs. Through a December 14, 2007 letter from Kerry Weems, Acting CMS Administrator, the State of Indiana Family and Social Services Administration (FSSA) Secretary was informed HIP was approved as the Indiana Section 1115 Medicaid Demonstration Project (11-W-00237/5) for a five year period – January 1, 2008 through December 31, 2012 – in accordance with section 1115(a) of the Social Security Act.

The goal of this approved demonstration is to:

- Provide high deductible health insurance plan
- Provide Personal Wellness & Responsibility (POWER) Account (like a HSA)
- Provide health insurance to uninsured custodial parents (caretakers) of Medicaid & SCHIP children with family incomes 22% of federal poverty level (FPL) up to 200% of FPL
- Provide health insurance to non-custodial parents and uninsured childless adults (non-caretakers) with family income up to 200% of FPL.

This demonstration is the first of its kind in the United States and has a unique empowerment of enrollees (members) to be cost and value conscious while promoting personal responsibility, which includes:

- Specified monthly POWER account contribution ranging from 2% - 5% of gross income.
- Twelve month lock out from program for members that do not make payments within 60 days.
- Incentivizes yearly preventative services at no cost and are funded outside the POWER Account.
- Total remaining balance in the POWER account rolls over when preventative services are obtained.

**Overview**

The State of Indiana respectfully submits the 2nd quarter 2013 Healthy Indiana Plan 1115 demonstration report.

If there are any questions or comments regarding these changes please do not hesitate to contact the State contacts listed below.

**State Contacts**

Primary Contact	Secondary Contact
Ken Klemme Director of Operations FSSA Operations Family and Social Services Administration W461 IGC-S, MS 25 402 W Washington St. Indianapolis, IN 46204-2739 Telephone: 317- 232-4739 Facsimile: 317-233-4693 Ken.klemme@fssa.in.gov	Ted Feeney, Director of Healthcare Programs FSSA Operations Family and Social Services Administration W374 IGC-S, MS 07 402 W Washington St. Indianapolis, IN 46204-2739 Telephone: 317-232-4652 Facsimile: 317-233-4693 ted.feeney@fssa.in.gov

<b>Hoosier Healthwise-Enrollment</b>		
Source: OMPP Data Unit		
Item	Period	Total
Number of Hoosier Healthwise Enrollees-Anthem	Rolling	238,420
Number of Hoosier Healthwise Enrollees-MDwise	Rolling	299,053
Number of Hoosier Healthwise Enrollees-MHS	Rolling	214,156
<b>Number of Hoosier Healthwise Enrollees-Total</b>	<b>Rolling</b>	<b>751,629</b>

Table 1

<b>Healthy Indiana Plan-Applicants</b>		
Source: OMPP Data Unit		
Item	Period	Total
Number of HIP Applicants-Start of Quarter	Rolling	428,607
Number of HIP Applicants-During Quarter	Quarter	15,715
<b>Number of HIP Applicants-Total</b>	<b>Rolling</b>	<b>444,322</b>

Table 2

<b>Healthy Indiana Plan-Number of Denials</b>		
Source: OMPP Data Unit		
Item	Period	Total
Number of HIP denials Non-Caretaker Cap reached	Quarter	428,607
Number of HIP Denials-Failure to pay initial POWER Account contribution	Quarter	15,715
Number of HIP Denials-Insurance through employer	Quarter	444,322
Number of HIP Denials-Other	Quarter	428,607
<b>Number of HIP Denials-Total</b>	<b>Quarter</b>	<b>15,715</b>

Table 3

<b>Healthy Indiana Plan-Number of Denials</b>						
Source: OMPP Data Unit						
FPL Range	Number of Applicants	Number Who Failed to Make an Initial POWER Account Contribution	Percentage	Number of Enrollees	Number Who Were Disenrolled for Failure to Make a Subsequent POWER Account Contribution	Percentage
0 to 22% FPL	4,315	30	0.695%	11,385	57	0.501%
23-50% FPL	2,724	91	3.341%	5,682	106	1.866%
51 to 100% FPL	6,086	219	3.598%	13,688	275	2.009%
101 to 150% FPL	3,567	188	5.271%	8,707	139	1.596%
151+ FPL	1,552	66	4.253%	4,226	53	1.254%

<b>Healthy Indiana Plan-Enrollment</b>			
Source: OMPP Data Unit			
	Item	Period	Total
A	Number of HIP Enrolled-Start of quarter	Rolling	38,134
B	Number of HIP Enrolled-During the quarter	Quarter	3,493
C	Number of HIP Disenrolled-Due to non-payment of POWER Account	Quarter	624
D	Number of HIP Disenrolled-HIP redetermination packet not submitted	Quarter	1,181
E	Number of HIP Disenrolled-Member became pregnant	Quarter	173
F	Number of HIP Disenrolled-Move to Medicaid category	Quarter	196
G	Number of HIP Disenrolled-Insurance through employer	Quarter	223
H	Number of HIP Disenrolled-Other reasons	Quarter	2,277
<b>I</b>	<b>Number of HIP Enrolled-End of the quarter ((I)=(A)+(B)-(C)-(D)-(E)-(G)-(H))</b>	<b>Quarter</b>	<b>36,953</b>

Table 4

<b>Healthy Indiana Plan-Number of Denials</b>							
Source: OMPP Data Unit							
Reason Code	Low Income 0-22%	Low Income 23-50%	51%-100%	101%-150%	151%+	Unknown FPL <sup>1</sup>	Total
HIP Disenrolled-Due to non-payment of POWER Account	47	108	277	140	52		<b>624</b>
HIP Disenrolled-HIP redetermination packet not submitted	531	116	299	163	66	6	<b>1,181</b>
HIP Disenrolled-Member became pregnant	24	24	68	46	11		<b>173</b>
HIP Disenrolled-Move to Medicaid category	46	29	78	34	9		<b>196</b>
HIP Disenrolled-Insurance through employer	55	18	79	53	14	4	<b>223</b>
HIP Disenrolled-Other reasons	567	255	634	475	329	17	<b>2,277</b>

<sup>1</sup> FPL gathered from ICES data

Table 4.1

<b>Healthy Indiana Plan-FPL</b>								
Source: OMPP Data Unit								
Aid Category	Plan	Low Income 0-22%	Low Income 23%-50%	51%-100%	101%-150%	151%-200%	Unknown FPL <sup>1</sup>	Total
Caretaker	Anthem	2,086	2,043	5,766	4,248	2,414	-	<b>16,557</b>
	ESP	118	82	235	168	93	-	<b>696</b>
	MHS	595	486	1,112	698	365	-	<b>3,256</b>
	MDwise	1,216	1,005	2,529	1,662	794	-	<b>7,206</b>
Subtotal			3,616					<b>27,715</b>

		4,015		9,642	6,776	3,666	-	
Non Caretaker	Anthem	2,395	533	2,032	1,731	1,215	-	7,906
	ESP	246	61	242	193	108	-	850
	MHS	313	65	194	170	108	-	850
	MDwise	1,074	190	794	514	308	-	2,880
Subtotal		4,590	928	3,467	2,800	1,801	-	13,586
<b>Grand Total</b>		<b>8,727</b>	<b>4,525</b>	<b>13,361</b>	<b>9,586</b>	<b>5,394</b>	<b>-</b>	<b>41,593</b>

<sup>1</sup> FPL gathered from ICES data

Table 5

Number of HIP Enrolled-Reached \$200,000/Annual or \$900,000/Lifetime in Benefits					
Source: Healthy Indiana Plan Health Plans					
Item	Period	Anthem	MDwise	MHS	Total
Referred to Medicaid	Quarter	0	0	0	0
Referred to M.E.D. Works	Quarter	0	0	0	0
Other	Quarter	0	0	0	0
<b>Total</b>	<b>Quarter</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Table 6

Number of HIP Enrolled-Reached \$300,000/Annual or \$1,00,000/Lifetime in Benefits					
Source: Healthy Indiana Plan Health Plans					
Item	Period	Anthem	MDwise	MHS	Total
Referred to Medicaid	Quarter	0	0	0	0
Referred to M.E.D Works	Quarter	0	0	0	0
Other	Quarter	0	0	0	0
<b>Total</b>	<b>Quarter</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

Table 7

Number of HIP Enrolled-ESP				
Source: OMPP Data Unit				
Item	Period	Month 1	Month 2	Month 3
Number of HIP Enrolled-ESP	Quarter	1,434	1,432	1,427

Table 8

Budget Neutrality – Member Months				
Source: OMPP Finance and State Actuary				
Medicaid Eligibility Group (MEG)	Period	Month 1	Month 2	Month 3
HHW Caretakers	Quarter			
HHW Children	Quarter			
HHW Pregnant Women	Quarter			
HIP Caretakers	Quarter			
HIP Non-Caretakers	Quarter			

Table 9

Healthy Indiana Plan-Enrollee/Applicant Inquiries					
Source: FSSA Communications					
Item	Period	Month 1	Month 2	Month 3	Total
Eligibility	Quarter	0	0	0	0
Application	Quarter	0	0	0	0
Buy-In	Quarter	4	5	4	13
General Questions	Quarter	5	4	2	11
Waiting List	Quarter	1	0	1	2
Anthem	Quarter	3	2	1	6
ESP	Quarter	0	0	0	0
MDwise	Quarter	0	1	0	1
MHS	Quarter	0	3	0	3
<b>Total</b>	<b>Quarter</b>	<b>13</b>	<b>15</b>	<b>8</b>	<b>36</b>

Table 10

Healthy Indiana Plan- Enrollee/Applicant Hearings and Appeals		
Source: FSSA Hearings and Appeals		
Item	Period	Total
Did Not Complete Verifications Request from State	Quarter	1,335
Other Insurance	Quarter	545
Financial Eligibility	Quarter	157
Other	Quarter	4
<b>Total</b>	<b>Quarter</b>	<b>2,041</b>

Table 11

Enrollee/Applicant Issues
Source: OMPP Care Programs
<p>Provide a summary of the types of complaints or successes consumers identified about the program in the current quarter. Include any trends discovered, the resolution of complaints, and any actions taken or to be taken to prevent other occurrences.</p> <p>Indiana Medicaid monitors all types of inquires and the responses to these inquiries using the State's Internet Quorum (IQ) system. This system enables the State to track any trending issues, develop uniform responses to frequently asked questions, and educate vendors in the areas where they should improve their member and provider services, outreach and marketing efforts. In addition, members/applicants may utilize the HIP plans' grievance and appeal system and FSSA hearings and appeals system. Although the State usually only hears about complaints, members will periodically express compliments or success stories about receiving health care for the first time or describe how they appreciate HIP to our enrollment broker, Maximus, and to the MCEs themselves.</p> <p>The number of inquiries received during this reported quarter was consistent with previous quarters.</p>

Table 12

Outreach/Innovative Activities
Source: Healthy Indiana Plan Health Plans
Provide a summary of the outreach activities and/or promising practices for the current quarter.
<p><b>MDWise</b></p> <p>MDwise has integrated the promotion and education of the Healthy Indiana Plan since the plan originally started in 2007. MDwise achieves successful promotion of its Healthy Indiana Plan by conducting outreach, education, and marketing, to its Healthy Indiana Plan members and providers. MDwise strives to educate its members on the importance of receiving preventive care, knowing their medical home, and how to reach MDwise for additional resources.</p> <p>MDwise provides its providers with all the resources and information needed to deliver low cost, high quality care to our members. Below are some initiatives MDwise established and completed to provide quality health care to its Healthy Indiana Plan members in Q2 2013.</p> <p>One of the strengths of the MDwise outreach team is their opportunity to interact directly with MDwise members and</p>

community members in communities throughout the state. While, MDwise outreach incorporates HIP education into all their outreach efforts, there are events and presentations when the outreach team has an opportunity to interact with MDwise HIP members across the state of Indiana.

In Q2 2013, MDwise outreach and marketing organized and participated in the following activities and events where HIP information was discussed, explained and distributed in communities of all sizes throughout Indiana.

### **Enrollment Awareness**

- MDwise Outreach distributed HIP applications at community events and presentations.
- Provided direct assistance to community members on how to enroll for HIP on-line
- Worked with Covering Kids and Families, enrollment partners and local DFR offices to promote and conduct enrollment for the HIP health plan.
- 221 HIP applications were completed by Covering Kids & Families
- 270 HIP applications were distributed at community events and presentations
- 37 HIP applications were completed at events by DFR and community enrollment centers.
- 340 CKF and enrollment partner referrals
- Covering Kids & Families completed 192 HIP applications.
- 24 individuals were assisted with the HIP on-line application
- Partnered with enrollment partners on 4 enrollment events for the Hoosier Healthwise & HIP Programs.

### **HIP Outreach Education and Awareness**

- Educated parents and caregivers about the HIP Program at over 45 school outreach events, including parent nights, kindergarten round-ups, Family Fun Nights, after-school programs, presentations to staff, registration days, parent teacher conferences, and Title One Parent meetings. Completed 66 MDwise Q&A Chats in Q2 2013. The Chats target members and community members seeking services at local DFR offices, Provider offices, Health Departments, FQHC's, Food Pantries, Churches, free & reduced lunch programs, and other agencies and programs.
- Organized and participated in 4 Bluebelle's Baby community baby shower. Distributed Information on how to apply for HIP after pregnancy. Participated in four community baby showers. MDwise outreach educated each participant on the HIP Program.
- Outreach team promoted the HIP program to caregivers at the 21 Q2 ENC Days.
- The outreach team partnered with enrollment partners at over events and community presentations to educate and provide enrollment assistance on the HIP Program.
- Provided one-on-one member education on the myMDwise Portal to 1,101 MDwise members and how to redeem Rewards points for completing preventive care at all events and presentations.
- Worked with School Based Health Centers (SBHC) to promote HIP to uninsured parents.
- HRS screenings completed for new HIP members.
- Promoted Hoosier Healthwise and HIP as a solution for health insurance for the entire family.
- Promoted that HIP members should see their doctor within the first 90 days of becoming a MDwise HIP member.
- HIP promotion and education published in MDwise member newsletter.
- Expanded outreach initiatives to local food pantries, public libraries and Legal Aid sites to educate communities about where to apply for HIP and how to stay enrolled.

### **Education Materials and Special Programs**

- Distributed education pieces on "How to Stay Enrolled on Hoosier Healthwise & HIP", "How to Stay on MDwise", and "Where to Enroll for Hoosier Healthwise & HIP" at 231 community events and presentations.
- Educated agencies, schools and other programs about HIP at the 38 completed professional presentations.
- Distributed the "Got Insurance Brochure" to increase education on where to apply for HIP (Marion County).
- Educated members on the "Use Emergency Room Wisely" brochure on ER utilization.
- Updated and promoted Smoke Free materials to MDwise HIP members.
- Promotion of INControl Disease Management Program for HIP members.

- Distribution of HIP Health Plan materials created by FSSA.

### **Presentations**

- Provided education on HIP at 7 IMPACT community presentations. Educated participants that there is continuous coverage available from Package A or B to HIP (no six month wait) .
- Presented to 4 support groups for pregnant women programs. Outreach educated women on how to apply for HIP after pregnancy without interruption of coverage to HIP
- 2 presentations to the Children’s Bureau (Randolph and Delaware) on the HIP program, addressed common-misconceptions, eligibility questions and distributed HIP applications.

### **Redetermination**

- Redetermination calls and mailings made to HIP members who are in their redetermination period.
- MDwise customer service department used dialer resources to further assist with reaching members and making this process more efficient.

### **Providers**

- Provided provider workshops for all HIP doctors.
- Provided member list to HIP providers that have HIP members that have not yet received preventive care exam.
- Distributed flyer that provided details about performance dollars MDwise will pay to the providers who performed well on Adult Preventative Care measure.
- Provided individual education to providers during visits or presentations.
- MDwise was involved in multiple organizations and associations focused on providers.
- Incorporated HIP education and resources at three MDwise Community Advisory Councils (SE, NC and North) in Q2.

### **HIP Power Account**

- Mailed HIP new member letters with ID Cards. Letter explained the importance of receiving preventive care. The letter also explained how receiving preventive care qualifies the member for the rollover of any remaining funds in their POWER Account.
- Mailed monthly HIP POWER Account Invoice to all members reminding them of their monthly contribution.
- Mailed monthly HIP POWER Account Statement to members. Letter describes health care services used in the current year. Refers members to view member handbook to view preventative service targets.
- Mailed HIP and Hoosier Healthwise member handbook to members when they became members.

### **MDwise Rewards**

- Promoted MDwiseREWARDS program, which is an incentive program for MDwise Hoosier Healthwise and Healthy Indiana Plan. The program uses incentives to encourage members to seek their annual check-ups and health screenings. Members earn points for healthy activities and visiting the doctor. The points can be redeemed for gift cards.
- Included MDwiseREWARDS information into main MDwise all program brochure, member handbook, MDwise website, and other member materials.
- MDwiseREWARDS information sheet on what activities earn points and how many points are earned for the activity completed available on MDwise.org or outreach can print for events and customer service can mail by request when members call in.
- Distributed a business card size promotion card for MDwiseREWARDS at outreach events and through provider’s offices.
- In Q2 2013, a total of 314 HIP members redeemed their Rewards points for a gift card. This is 13% of the total number of HHW and HIP members that redeemed. The percentage of HIP members that are redeeming is reduced from the same period last year (20%), but consistent with Q1 of 2013. Members continue to have a preference for Subway gift cards for those that redeem at the \$10 level, and the Walmart card is the most popular at the \$30 and \$50 levels.



## Anthem

Anthem's six outreach specialist who provide for member engagement throughout the state, successfully completed a 48 hour Community Health Worker training provided by Ivy Tech College. This training better prepares the staff to work with the cultural and linguistic needs within the diverse communities who are considered most at risk. Anthem maintains a local presence with participation in community based events that further promote preventive health services with the goal to lessen health disparities. Such events this quarter include working with the Burmese population to gain access to medical care and working within the Latino communities to bring greater awareness of health care availability within the communities. A Community Advisory Council meeting was held in the Indianapolis area with key CBO's in attendance to discuss issues and strategies related to community needs. Another new Anthem outreach strategy was the implementation of the Stakeholder Meeting which was held in Orange County. The goal is to bring key community organizations together in underserved areas to learn of best practices with the community to improve health outcomes. Faith based organizations continue to be a focus as this is a rich area of member engagement opportunities that serve the diverse needs within their communities. The nurse practice consultants continue to partner with the outreach staff in building relationships within the communities with a focus on provider practices who are identified as having a large member population of noncompliant members. Anthem's outreach staff works with the provider community for direct member outreach related to missed appointments, frequent ER use, lack of prenatal care coordination and missing preventive services.

## Managed Health Services (MHS)

In the 2<sup>nd</sup> Quarter of calendar year 2013, Managed Health Services (MHS) participated in and sponsored many events and activities aimed at educating HIP members about the HIP program, including how important it is to get preventive care and how the POWER Accounts operate. We also aimed to provide our HIP members and the public with general information about the Healthy Indiana Plan such as how to contact the State to apply for coverage. We also promote general information about how to get healthy and stay healthy. MHS regularly participates in and sponsors events to support charitable non-profit groups dedicated to helping people in the communities we serve apply for coverage, access care and be healthy. Examples are:

- On 4/9/2013, MHS attended the Covering Kids and Families (CKF) Women's Health Day in Marion County. The purpose of MHS attendance at this event was to support this community organization whose mission is to increase access to health coverage and care. MHS provided support by sponsorship and took the opportunity to educate attendees/participants about MHS and the services available to MHS members. MHS had a booth on-site where staff gave out educational information on getting and staying healthy, giveaways and basic program information about both HIP and Hoosier Healthwise programs – what they are, how to apply through the State and how to get more information.
- On 4/9/13, MHS also attended the CKF Town Hall Meeting in Marion County, Indiana. MHS was present to support a community organization through sponsorship and to educate participants on MHS and the services available to members. MHS had a booth on site where Plan staff provided attendees with educational health information and giveaways as well as basic program information.
- MHS attended the CKF Men's Health Day in Marion County on 4/11/13. MHS attended to support a community organization through sponsorship and take the opportunity to educate participants at this event especially focused on Men's health and access to coverage and care. MHS provided information to attendees about MHS and the services available to Plan members. MHS had a booth on-site with educational health information and giveaways as well as basic program information.
- On 4/11/13, MHS participated in the "Spring into Health" Fair at Community HealthNet, an FQHC in Lake County, Indiana. MHS was there to educate the community on broader health issues and provide basic program information. MHS had a booth on site where staff provided attendees with educational health information, giveaways and basic program information.
- MHS attended the CKF MCE Resource Fair on 4/13/13 in Marion County, Indiana. MHS was there to support this community organization through sponsorship and to educate Fair participants about MHS and the services available to MHS members. MHS had a booth on site with educational health information and giveaways, as well as basic program information.
- On 4/13/13, MHS attended the Spring Sickle Cell Health Fair in Marion County, Indiana. MHS attended in order to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- On 4/16/13, MHS participated in the American Lung Association Healthy Lung Expo and TB Symposium in Marion County, Indiana. MHS supported this community organization through sponsorship and took the opportunity to educate Symposium participants about MHS and the services available to its members. The MHS Associate Medical Director, Dr. John Ellis was a featured presenter in the education track and MHS had a booth on site with educational health information and giveaways as well as basic program information.

- MHS attended the 4/16/13 Diabetic Day Kick-Off at the Madison County Indiana Health Center, a FQHC, in order to educate the community on broader health issues and provide basic program information. MHS identified members who live in the Madison County area and contacted them in advance to invite them to attend the event and MHS had a booth on site with educational health information and giveaways as well as basic program information.
- MHS attended the 4/17/13 Hoosier Idol Event, sponsored by the Indiana State Legislature for the benefit of Mental Health America of Indiana, in Marion County, Indiana. MHS supported this community organization and this annual fundraising event through sponsorship. MHS “purchased” a table and invited staff to attend and support the event.
- On 4/17/13, MHS was at the HealthLinc Health Center for MHS Day, in LaPorte County, Indiana. MHS was on site to educate the community on broader health issues and provide basic program information. MHS staffed a booth on site with educational health information and giveaways as well as basic program information.
- MHS was in attendance at and a sponsor for the 4/19/13 Indiana Minority Health Coalition Annual Luncheon held in Marion County, Indiana. MHS supported this support community organization through sponsorship. MHS “purchased” a table and invited staff to attend and support the event. MHS notes that it has a contract with the IMHC to provide staff for its Family Education Network to education Healthy Indiana Plan (HIP) members about how the HIP program works, particularly the importance of preventive care and the operation of the POWER Accounts.
- MHS attended the 4/20/13 Spring Family Festival, in Monroe County, Indiana. The purpose of MHS attendance at this event was to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- On 4/25/13, MHS participated in the Longfellow Family Health Night, in Delaware County, Indiana. MHS attended this event to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- MHS attended the 5/4/13 “Cinco de Mayo” celebration in South Bend, Indiana in St. Joseph County. MHS staff was on hand to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- On 5/4/13, MHS had Plan staff at the Gospel Music Stake held in Marion County, Indiana. The purpose of attending this event was to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- MHS attended the 5/11/13 “Cinco de Mayo” celebration in Lake County, Indiana. MHS staff was on hand to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- MHS supported and attended the 5/13/13 Women's Health Week Celebration at Raphael Health Center, in Indianapolis, Indiana, Marion County. MHS took this opportunity to educate the community attendees on broader health issues and provide basic program information. Raphael Health Center is an important and active primary care group. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- MHS participated in the Thea Bowman Leadership Academy Health Fair on 5/15/13 in Lake County, Indiana. MHS was there to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- On 5/16/13, MHS held the HealthLinc Healthy Celebration (Women's Health), in Porter County, Indiana. The purpose of this event was to get MHS Members – specifically adult women, assigned to HealthLinc, the Porter County FQHC, to come in to see their PMP for missing check-ups and screenings while MHS and the practitioners provided health and benefit education. In advance of the event, MHS identified its members assigned to HealthLinc providers who were due for a recommended check-up and/or needed health screenings. MHS Member Services staff then contacted the members to invite them to the event. After their check-ups, Members were invited to stay for a 'celebration,' including health-related games, coloring activities for their children and to enjoy healthy snacks for everyone.
- MHS participated in the 5/17/13 Lakeridge Health Fair: Eat. Learn. Live event in Lake County, Indiana. MHS was on hand to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- On 5/18/13, MHS attended the LaPorte County NAACP Health & Wellness Fair, in LaPorte County, Indiana. MHS staff was present to educate the community on broader health issues and provide basic program information. MHS had a booth on site with

educational health information and giveaways as well as basic program information.

- On 5/23/13, MHS participated in the Allen County Health Disparity Coalition Prevention Clinic, Allen County, Indiana. The purpose of MHS participation was to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- MHS attended the 6/1/13 International Food Store Outreach event in Marion County, Indiana. MHS purpose in participating in this event was to seek out non-English speaking people and to educate the community on broader health issues and provide basic program information. MHS had a booth on site with multi-lingual educational health information and giveaways as well as basic program information.
- MHS helped develop, publicize and sponsor the 6/12/13 event, "Scavenge the Avenue with Indy Reads," held in Indianapolis, Marion County, Indiana. This event was to support a community educational organization through sponsorship. MHS was on hand to educate participants about MHS, the services available to MHS members, and the availability of the IHCP coverage programs. MHS sent staff volunteers to participate in the scavenger hunt event and had a booth on site to provide attendees with educational health information & giveaways as well as basic program information.
- On 6/13/13, MHS attended the Men's Health Luncheon & Health Fair in Lake County, Indiana. The purpose of MHS attendance at the event was to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- MHS was a sponsor at the 6/14/13 Fathers and Families Annual Luncheon in Marion County, Indiana. MHS attended to support important community organizations through sponsorship. The MHS VP of Compliance, and a father himself, was a speaker at the luncheon. MHS also "purchased" a table and invited Plan staff to attend and support the event.
- MHS attended the 6/14/13 Mental Health America of Indiana (MHAI) 2013 Mental Health Symposium & Annual Meeting, in Marion County, Indiana. MHS was there to support this important community organization through sponsorships and to take advantage of the opportunity for MHS staff to attend continued education.
- On 6/15/13, MHS attended the Indiana Latino Expo in Marion County, Indiana. MHS was on hand to support important community organizations through sponsorship and to educate the participants about MHS and the services available to its members, as well as about the availability of the IHCP coverage programs. MHS had participants in the day's race event, and had a booth on site with educational health information & giveaways as well as basic program information.
- In Lake County, Indiana, MHS participated in the 6/21/13 Health Start "Juneteenth & Health Awareness Celebration. MHS was on hand to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- On several days, 6/22, 6/23 and 6/24/13, MHS attended the Community Resurrection Partnership Tent Revival Community Days, in Marion County, Indiana. MHS was there to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- MHS participated in the 6/22/13 Pentecostal Church Health Fair in Lake County, Indiana. MHS took the opportunity to educate the community on broader health issues and provide basic program information. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- At the CKF Health Fair at Gary Community HealthNet in Lake County, Indiana on 6/27/13, MHS was on hand to support a community organization through sponsorship and to educate participants on MHS and the services available to its members. MHS had a booth on site with educational health information and giveaways as well as basic program information.
- MHS attended the Healthy Celebration (well child & women's health) on 6/27/13 in Porter County, Indiana. The purpose of this event was to get MHS Members from Porter County to come in to see their PMP for missing check-ups and screenings while MHS and the practitioners provided health and benefit education. In advance of the event, MHS identified its members in Porter County who were due for a recommended check-up and/or needed health screenings. MHS staff then contacted the members to invite them to the event. After their check-ups, Members were invited to stay for a 'celebration,' including health-related games, coloring activities for their children and to enjoy healthy snacks for everyone.

Table 13

**Operational Activities**

Source: OMPP Care Programs

Identify all significant program developments/issues/problems that have occurred in the current quarter, including, but not limited to, approval and contracting with new plans, benefit changes, and legislative activity.

Indiana is waiting for CMS’ decision for the future of the HIP waiver.

Our bi-partisan legislature and the Office of the Governor have identified the HIP program as the vehicle for any Medicaid expansion to occur in our State.

Table 14

**Financial Activities**

Source: OMPP Finance & State Actuary

Identify all significant developments/issues/problems with financial accounting, budget neutrality, and CMS-64 reporting for the current quarter. Identify the State’s actions to address these issues.

The State is continuing its review of internal controls related to budget neutrality and CMS64 reporting. The State is working to re-tool our reporting logic to assure compliance with the Special Terms and Conditions set forth in the 1115 demonstration waiver.

Below, please find our process to achieve control objectives of accurate, timely and complete reporting in compliance with the Special Terms and Conditions:

- Budget neutrality submissions will be developed utilizing CMS64 data.
- Budget neutrality and CMS64 reporting will be reconciled quarterly prior to submitting reports to CMS.
- Federal Funding Director/OMPP Controller will be the final approver on all budget neutrality submissions.

Reconciliation documentation will be maintained to support quarterly submissions.

Table 15

**Monitoring Activities**

Source: OMPP Care Programs

Identify any quality assurance/monitoring activity in current quarter.

The 2nd quarter of 2013 Onsite Monitoring Visits agendas of the Care Programs Quality Team reviewed and discussed with the MCEs the following topics: prior authorization related to infant nutritional supplements, PMP assignments, case management of Diabetes, and behavioral health case management. A detailed description of each topic is listed below.

Prior Authorization: a) coordination of member services with WIC clinics, and b) the number of prior authorization requests received, approved, and denied and reasons for denial for infant nutritional supplements.

PMP Assignments: a) review of the MCE’s PMP policies and procedures, b) the number of newly assigned members in CY 2012, and of those members how many were assigned a PMP within 30 days, 60 days, and 90 days, c) situations when a member would not be assigned within 30 or 60 days, and d) the number of members assigned to an open network status.

Diabetes Case Management: a) discussion of successful diabetic case studies and a pre-diabetic patient, and b) review of successful education strategies to prevent or manage diabetes, educational events, provider and member publications and any

untraditional outreach methods.

Follow-up Outpatient Visits for Behavioral Health: a) review of case studies regarding members with behavioral health needs; b) review of case study with successful management and facilitated outpatient appointment following an inpatient psychiatric hospitalization, c) discussion of successful educational strategies in working with individuals with behavioral health needs, educational events, provider and member publications, and untraditional outreach methods.

Table 16

<b>Demonstration Evaluation</b>
Source: OMPP Quality
Discuss progress of evaluation design and planning.
<p>The Healthy Indiana Plan (HIP) promotes prevention, wellness, and personal responsibility while providing health care protection to those who can least afford health insurance. HIP functions similar to a Consumer-Driven Health Plan. It allows members to take a personal investment in their healthcare by contributing to their POWER Accounts (similar to a Health Savings Account) and encouraging members to obtain preventive services. Members who obtain at least one preventive service during the year are able to “roll-over” the remaining funds in their POWER Account to the following year, which reduces the required contribution amount for the new year.</p> <p>HIP represents a groundbreaking attempt to expand coverage while encouraging individuals to take a more proactive role in managing their health and the cost of their healthcare.</p> <p>The Healthy Indiana Plan (HIP) is currently being evaluated as part of the External Quality Review for CY 2012. The report will assess the utilization of primary care services in the following areas: 1) utilization by MCE and point of service (office, FQHC, RHC...), 2) utilization by MCE and region, 3) utilization by MCE and race/ethnicity. In addition the evaluation will include a breakout of behavioral services utilization by provider specialty and a review of behavioral health case management files. Qualitative interviews with HIP providers are also being conducted.</p>

Table 17

<b>POWER Account Rollover</b>		
Source: OMPP Data Unit		
Discuss POWER account rollover.		
	Total Number	Percent
Members Enrolled April-June 2010 & Eligible for Rollover		
Members that Completed Preventative Services		
Members w/POWER Account Balance		
Members w/no POWER Account Balance		
Members w/Balance and Completion of Positive Preventative		
Members w/Balance and Negative Preventative		
Average Member Remaining Balance		
Average State Remaining Balance		
Average Member Remaining Balance		

	for Members w/Negative Preventative			
	Average State Remaining Balance for Members w/Negative Preventative			

Table 18

<b>ER Copayments</b>					
Source: OMPP Care Programs					
Discuss ER copayments.					
ER Copayments April 2013-June 2013					
HIP Population	Co-Payment Amount	Number of Anthem Members	Number of MDwise Members	Number of MHS Members	Total HIP Members
<b>Caretakers</b> with true emergency	\$0 per visit*	1,756	833	799	<b>3,388</b>
<b>Caretakers</b> With Incomes Above AFDC Income Limit <b>through 100% FPL</b>	\$3 per visit	650	7,866	307	<b>8,823</b>
<b>Caretakers</b> Above <b>100 % through 150% FPL</b>	\$6 per visit	154	1,419	55	<b>1,628</b>
<b>Caretakers</b> Above <b>150 % through 200% FPL</b>	Lower of 20% of services cost provided during visit, or \$25	68	676	25	<b>769</b>
Non-Caretakers	\$25 per visit	1,076	4,806	312	<b>6,194</b>
<b>Total</b>		<b>3,704</b>	<b>15,620</b>	<b>1,498</b>	<b>20,802</b>

\* Indicates zero out-of-pocket co-payments after the visit was adjudicated as true emergency.

Table 19

<b>ER Utilization</b>
Source: OMPP Care Programs
Discuss initiatives to decrease ER utilization.
The managed care entities proactively use multiple opportunities to educate HIP members about appropriate ER utilization through care/case/disease management, Nurse On call, Health Risk Assessments, member materials, member inquiries and outbound calls.
An onsite monitoring visit with the MCEs included a discussion on the Nurse On-call Lines and ER utilization. MCE representatives capitalize upon contacts with members to provide education on alternatives to ER usage, medically appropriate utilization and PMP care.
ER utilization has increased over the previous quarter (1 <sup>st</sup> Quarter 2013)of activity. OMPP will continue to monitor the ER utilization data for appropriate usage. OMPP will discuss ER usage with MDwise at a monthly contract compliance onsite meeting.

Table 20

<b>Supporting Documentation</b>
HIP Financial Monitoring Report (Unable to submit at this time because of CMS 64 reporting status)
OMPP Finance & State Actuary (Unable to submit at this time because of CMS 64 reporting status)