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Objectives

Overview of HIP 2.0

POWER Account Basics

POWER Account Reconciliation and Rollover

Member Experience



HIP Basics

Who is Eligible?

- Indiana residents ages 19 to 64
- income **under 138%** of the federal poverty level (**FPL**)
- who are not eligible for Medicare or otherwise eligible for Medicaid

HIP Plus: Initial plan selection for all members

Benefits: Comprehensive coverage with enhanced benefits, including vision, dental, bariatric, and broader pharmacy formulary

Cost sharing: Monthly POWER account contribution required

Contribution is 2% of income with a minimum of \$1 per month

Copayments only for inappropriate ER use

HIP Basic: Only open to members below 100% FPL

Benefits: Minimum coverage, no vision or dental coverage

Cost sharing: Must pay copayments for services. \$4-\$8 for prescriptions, \$4 for doctor visits, \$8-\$25 for ER use, and \$75 for hospital stays.

HIP Plus: POWER Account Contributions



Unique feature of the Healthy Indiana Plan (HIP)

Health savings-like account / Deductible account

- Members receive monthly POWER Account statements
- Used to pay for the first \$2,500 of service costs

HIP Plus:

- Members make monthly contributions to POWER Account
 - Contribution amount is approximately 2% of income
 - Contribution ranges from \$1 to \$100 per month
- Members exempt from most other cost sharing

Rollover: All members may reduce future HIP Plus POWER Account contributions

- Must have remaining balance in POWER Account
- Depending on plan: requirement or bonus for receiving preventive services

Ways to Pay the POWER Account Contribution



Regardless of health plan members can pay by:

- Credit or debit card (including prepaid cards)
 - Over the phone
 - Online
- Check or money order
- Automatic bank draft
- Electronic funds transfer
- Payroll deduction
- Cash, at one of the following locations: Wal-Mart, CVS, Dollar General, 5/3 Bank, via Money Gram. Different MCEs offer different locations.

POWER Account Contribution Amounts



FPL	Monthly Income/PAC Individual	Monthly Income/PAC Household of 4
22%	\$216 = \$4.32	\$445 = \$8.90
50%	\$491 = \$9.82	\$1,010 = \$20.22
75%	\$736 = \$14.72	\$1,516 = \$30.32
100%	\$981 = \$19.62	\$2,021 = \$40.42
138%	\$1,369 = \$27.39	\$2,822 = \$56.44

Account Reconciliation and Member Rollover

POWER Accounts are reconciled 120 days after the member benefit period is over. This is also when member rollover is determined.

- **Reconciliation** – did the member expend all \$2,500 of account value. Does the MCE owe the State any refund amount?
- **Rollover** – did the member earn rollover for obtaining preventive services, pay PAC, having a remaining balance?

For Benefit Periods ending Jan 2016-May 2016:

- 37.9% of members used all of POWER Account while 46.6% used less than half of their POWER Account.
- The average POWER Account expenditure during that time was \$1,417
- 47.5% earned a rollover to reduce future PAC payments. 36% of those earned over \$100 in rollover.

Member Experience

Since program began in February 2015:

- About 65% of enrollees are choosing Plus and making PAC payments
- About 60% of enrollees under 100% FPL are choosing Plus

Over 90 percent of Plus members who made their initial POWER Account Contributions (PACs) continued to make payments and remained in HIP Plus.*

Between February 1, 2015 and November 30, 2016:

9,636 unique individuals with incomes above 100% FPL were disenrolled from HIP Plus coverage due to non-payment of PAC.*

*** Healthy Indiana Plan 2.0: POWER Account Contribution Assessment**
Lewin March 31, 2017