

News Release



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Indiana introduces new consumer-driven Medicaid reform plan

Indianapolis, Ind. (May 16, 2014) – The leaders of Anthem Blue Cross and Blue Shield’s Medicaid business are hailing Governor Mike Pence’s proposal to enhance the state’s Healthy Indiana Plan (HIP).

As announced by Gov. Pence yesterday, HIP 2.0 is a consumer-driven plan to replace the state’s traditional Medicaid program for non-disabled adults and includes innovative incentives and programs designed to encourage members to take personal responsibility for their health and well-being. HIP has shown some impressive results such as 7% lower emergency room utilization and higher member satisfaction than traditional Medicaid.

“This is an innovative, transformational program design targeted with improving access to healthcare for uninsured Hoosiers, providing choice, and promoting healthy outcomes,” said Kristen Metzger, president of Indiana Medicaid, Anthem Blue Cross and Blue Shield. “We applaud Governor Pence’s leadership and vision for Medicaid reform and look forward to being a part of this significant and positive step to providing health coverage to thousands of Hoosiers who are currently uninsured.”

Built on the successful framework of HIP, HIP 2.0 intends to establish an even more robust health coverage model as an alternative to traditional Medicaid for all adults ages 19-64 without a disability who fall below 138 percent of the federal poverty level. If approved by the Centers for Medicare and Medicaid, more than 300,000 additional Hoosiers could be enrolled into HIP.

The program improves upon the existing Personal Wellness and Responsibility (POWER) account, modeled after a Health Savings Account, used to pay for premiums, co-pays, and deductibles. The \$2,500 POWER account is funded through a combination of state and personal contributions.

Anthem Blue Cross and Blue Shield has served the Healthy Indiana Plan since its creation six years ago.

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About Anthem Blue Cross Blue Shield in Indiana

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