

# HEALTHY INDIANA PLAN 2.0

## HIP and HIP Link Program Overview

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## Healthy Indiana Plan (HIP) Overview

- **Covering Hoosiers since 2008**
  - Nation's first consumer-directed health care program for Medicaid recipients
- **Offers members a High Deductible Health Plan (HDHP) with a Personal Wellness and Responsibility (POWER) account**
- **February 2015:**
  - Expanded HIP to all non-disabled Hoosiers ages 19-64 with household incomes at or below approximately 138% of the federal poverty level

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## HIP Income Guidelines

Household Size	Annual income limit for HIP Link eligibility	Monthly income limit for HIP Link eligibility
1	\$16,436.80	\$1,369.73
2	\$22,246.25	\$1,853.85
3	\$28,055.69	\$2,337.97
4	\$33,865.13	\$2,822.09
5	\$39,674.57	\$3,306.21
6	\$45,484.01	\$3,790.33
7	\$51,293.45	\$4,274.45
8	\$57,102.89	\$4,758.57

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## HIP 2.0: HIP & HIP Link Comparison

	HIP	HIP Link
<b>Effective Date</b>	February 1, 2015	June 1, 2015
<b>Eligibility</b>	<ul style="list-style-type: none"> <li>• 19- 64 years old</li> <li>• Income under 138% FPL</li> <li>• Indiana resident</li> </ul>	<ul style="list-style-type: none"> <li>• 19- 64 years old</li> <li>• Income under 138% FPL</li> <li>• Indiana resident</li> <li>• Access to employer-sponsored insurance</li> </ul>
<b>Other Coverage</b>	Individuals cannot be covered under Medicare or other Medicaid categories	Individuals cannot be covered under Medicare or other Medicaid categories
<b>POWER Account</b>	\$2,500	\$4,000
<b>Plan Options</b>	HIP Basic or HIP Plus	Employer plan options may vary
<b>Network/ Provider</b>	Choose one of three managed care entities (MCE): Anthem, MHS, MDWise	May vary depending on employer plan

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## WHAT IS THE DIFFERENCE BETWEEN HIP BASIC & HIP PLUS?

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## HIP Basic VS HIP Plus Comparison

HIP Plus	HIP Basic
<ul style="list-style-type: none"> <li>Initial plan selection for <b>all members</b></li> <li>Benefits: Comprehensive, <b>including vision and dental coverage</b></li> <li>Cost Sharing               <ul style="list-style-type: none"> <li>Must <b>pay affordable monthly POWER account contribution</b> (approximately 2% of annual household income- \$1 to \$100 per month)</li> <li><b>No copayments</b> for services*</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Fall-back option for members with household incomes less than <b>100% FPL</b> only</li> <li>Benefits: Meet minimum coverage standards, <b>no vision or dental coverage</b></li> <li>Cost Sharing               <ul style="list-style-type: none"> <li>No monthly POWER account contribution</li> <li>Must <b>pay copayments</b> for doctor visits, hospital stays, prescriptions</li> </ul> </li> </ul>

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\*Exception: Using Emergency Room for routine medical care



## Essential Health Benefits

Essential Health Benefits	HIP Plus	HIP Basic
<b>Ambulatory (Doctor Visits)</b>	Covered – Includes coverage for <b>Temporomandibular Joint Disorders (TMJ)</b> 100 visit limit for home health	Covered – <b>No TMJ coverage</b> 100 visit limit for home health
<b>Emergency*</b>	Covered	Covered
<b>Hospitalization</b>	Covered - Includes <b>Bariatric Surgery</b>	Covered - <b>No Bariatric Surgery</b>
<b>Maternity</b>	Covered	Covered
<b>Mental Health</b>	Covered	Covered
<b>Laboratory</b>	Covered	Covered
<b>Pharmacy</b>	Covered	Covered - Generic Preferred
<b>Rehab &amp; Habilitation</b>	Covered – <b>75 visits</b> annually of physical, speech and occupational therapies 100 day limit for skilled nursing facility	Covered – <b>60 visits</b> annually of physical, speech and occupational therapies 100 day limit for skilled nursing facility
<b>Preventive</b>	Covered	Covered
<b>Pediatric</b>	Early Periodic Screening Diagnosis and Testing (EPSDT) services covered for 19 & 20 year olds	

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## HIP Plus POWER Account Contribution

- Member selects one of three MCEs
  - Anthem, MHS, MDWise
- HIP Plus members make POWER account contribution directly to MCE
  - Min. \$1/ per month, Max \$100/per month
- Employers & Non-for-Profits may assist with contributions
  - May pay up to 100% of member POWER account contribution
- Rollover: All members may reduce future HIP Plus POWER account contributions
  - Remaining POWER account funds, receiving preventive services

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## HIP Basic: Cost Sharing

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HIP Basic Members are responsible for the following copayments for health and pharmacy services

Service	HIP Basic Copay Amounts Income ≤100% FPL
Outpatient Services	\$4
Inpatient Services	\$75
Preferred Drugs	\$4
Non-preferred drugs	\$8
Non-emergency ER visit	Up to \$25

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*Copayments may not be more than the cost of services received.*



## WHAT IS HIP LINK?

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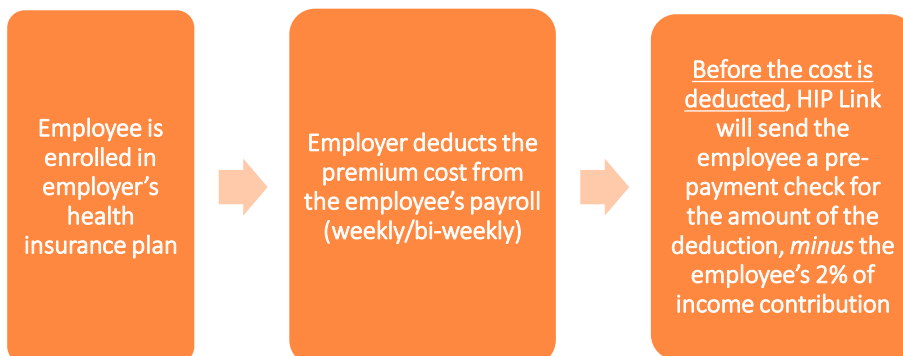
## HIP Link Overview

- HIP Link is a premium assistance program that helps working Hoosiers pay for the cost of their employer-sponsored health insurance plans
- State provides each HIP Link member a \$4,000 Personal Wellness and Responsibility (POWER) account to help cover a portion of the employee premiums and supplemental medical expenses
- Similar to HIP Plus, HIP Link members contribute 2% of annual household income towards the cost of coverage

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## How does HIP Link work?



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## Example of HIP Link Monthly Check

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### HIP Link Pre-Payment Check Calculation Example:

If you participate in HIP Link and your monthly income is:	\$1,300.00
Your 2 percent HIP Link monthly contribution would be:	\$26.00
If the monthly cost of your employer insurance is:	\$100.00
Each month you would get a check for:	\$74.00

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## WHICH EMPLOYERS ARE ELIGIBLE FOR HIP LINK?

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## HIP Link Employer Requirements

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Before employees can enroll in the HIP Link program, employers must first agree to participate.

- **To become an eligible HIP Link Employer, employers must:**
  - Contribute at least 50% to the premium cost,
  - Have a FEIN,
  - Employ Indiana residents, and
  - Offer a health plan that meets program benefits and affordability requirements

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## HIP Link Health Plan Criteria

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- **Meet Benefit Requirements**
  - Essential Health Benefits
  - Mental Health Parity and Addiction Equity Act (MHPAEA)
  - Abortion requirements, in accordance with federal law

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## Why Should a Business/Employer Participate in HIP Link?

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- More employees may be able to enroll in the employer's group health plan
  - An increase in employees may help to meet plan participation requirements
  - May help to lower group premium rates
- Potential to expand employee base
- Attract and retain employees by being listed as a HIP Link Employer
  - Turnover rates and cost may decrease
- Possible tax benefits for small employers using the Small Business Options Program (SHOP) Marketplace
- Increase participation in wellness programs if offered with health plan
  - Increase employee health and well-being= increase productivity

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## How does an Employer sign up?

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- **HIP Link Online Portal** available at [www.HIP.IN.gov](http://www.HIP.IN.gov)
  - Provide general business information
  - Upload health plan information and documentation
    - Certificate of Coverage, SBC, Schedule of Benefits
    - Employer and Employee Premium Rates
- Employer Counseling Team (ECT) reviews each health plan for program's benefits and affordability requirements
  - Approved employers receive an active **HIP Link Employer ID**

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## Ongoing Employer Requirements

### Initial Employee Verification

- When an eligible employee requests HIPLink, employer will be sent an email request to verify that the individual is employed and enrolled in or eligible for employer’s health insurance plans.
- Employer will need to confirm the employee’s premium rate and dates of coverage

### Monthly Employee Verifications

- Confirm health insurance information on HIP Link enrolled employees is up-to-date and report changes in employment, if applicable.

### Annual Confirmation

- Provide updated health plan information for next benefit period
  - Certificate of Coverages, SBC, Premium rates, etc.



## How does an Employee sign up?

HIP Basic & HIP Plus	HIP Link
Individuals may apply at any time.	Becoming HIP Link eligible is a <b>qualifying event</b> and allows for a special enrollment period of <b>60 days</b> or during employer’s annual open enrollment period.
HIP applications are available online, by mail, by phone, or visiting local Division of Family Resources (DFR) office.	Must submit a HIP application, available online, by mail, or visiting local Division of Family Resources (DFR) office <b>or</b> current HIP members may request a change by providing HIP Link Employer ID.
Website: <a href="http://www.HIP.IN.gov">www.HIP.IN.gov</a>	
DFR Call Center: 800-403-0864	
Enrollment Counseling: 877-GET-HIP-9	



## Questions?

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- More Information is available at [www.HIP.IN.gov](http://www.HIP.IN.gov)
- Kayla Hsu, Outreach Coordinator,  
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- Additional questions or comments may be sent to  
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