



POWER Account



Healthy Indiana Plan (HIP)
POWER Account

mhsindiana.com

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What is a POWER Account?

POWER Account stands for ‘**Personal Wellness and Responsibility**’ Account. The **POWER Account** is a special savings account. It is meant to encourage you to stay healthy and use healthcare services in a cost-efficient way. All Healthy Indiana Plan (HIP) members have a **POWER Account**.

The first **\$2,500 of medical expenses for covered services are paid with your POWER Account**. The state will contribute most of the amount. If you are required to make a payment, depending on your eligibility status, your payments also go towards the \$2,500. The amount of your payment depends on your income.

The money in your **POWER Account** pays for covered medical services. Preventive services are paid for by MHS – no money comes out of your account. Even if you use all the money in your account, MHS will still pay for covered services. But, you can get rewarded for managing your account wisely! Check out the Member Rollover section for more details.



Your POWER Account ID Card

Every HIP member gets a **POWER Account ID Card**. You must show this card every time you see a provider or visit a pharmacy. If you do not get a **POWER Account ID Card** in the mail or if you lose your card, please go online and request a new one through the Secure Member Portal at mhsindiana.com/login.



Secure Member Portal

You can view statements that show charges and payments to your **POWER Account** online. Go to your Secure Member Portal at mhsindiana.com/login.



POWER Up! To HIP Plus



HIP Plus is the preferred plan for all HIP members. HIP Plus is the best value because it gives you health coverage for a low, predictable monthly cost.

With HIP Plus, you get **dental and vision coverage** – and **no copays!** If you have HIP Basic now, be sure to POWER Up to HIP Plus when it's time to re-enroll.



Preventive Services

Preventive services are healthcare services that can find health problems early. Then, you can treat the problem before it becomes serious. MHS wants you to get all your recommended preventive health services. This could include yearly checkups, mammograms, PAP smears, cholesterol tests, blood glucose screens, flu shots and more. These services are fully covered when you visit an in-network provider – no money comes out of your **POWER Account!**

PREVENTIVE CARE SERVICES*	Male	Female
Annual Physical	Y	Y
Mammogram	N/A	Y
Pap Smear	N/A	Y
Cholesterol Testing	Y	Y
Blood Glucose Screen	Y	Y
Tetanus-Diphtheria Screen	Y	Y
Flu Shot	Y	Y

*Ask your doctor what services you need based on your age and medical history.



Pay with My Health Pays® Rewards

MHS rewards you for completing healthy activities. HIP Plus members can use those rewards to make your monthly **POWER Account** payment.

How can you earn rewards right away?

Take your My Health Pays® Visa® Prepaid Card* to any Walmart pharmacy kiosk within 30 days of becoming a member. Scan your card and complete your Health Needs Screening. You'll earn \$30 in rewards instantly that you can use to pay your **POWER Account** payment.

Depending on your required contribution, rewards can cover part of one month up to an entire year of payments.

Find out more ways to earn rewards at mhsindiana.com/rewards.



How to Change Your Contribution Amount

The state determines your **POWER Account** payment amount based on your income and family size. There are two ways to request a change in your payment amount:

- 1) If you have a “qualifying event.” A qualifying event is a job loss or other change in income. You can only request a change in the payment amount due to a qualifying event once every benefit period.
- 2) You have a change in family size, such as a death, divorce, birth or a family member moving out of the household. You can do this as many times as needed.

To request a change in your payment amount, you will need to complete the Report of Change Form through the FSSA portal. Visit in.gov/fssa or find a link at mhsindiana.com under Member Forms.

*This card may not be used to buy alcohol, tobacco or firearms products. This card is issued by The Bancorp Bank pursuant to a license from Visa U.S.A. Inc. The Bancorp Bank; Member FDIC. Card cannot be used everywhere Visa debit cards are accepted. See Cardholder Agreement for complete usage restrictions. Funds expire 90 days after termination of insurance coverage or 365 days after date reward was earned, whichever comes first.



POWER Account Payments

Your First Payment

To become fully eligible for HIP Plus, you need to make your first monthly **POWER Account** payment. Then, you must make your payment on time every month to keep your HIP Plus benefits. Or, you can pay the entire year's worth of payments at once if you would like.

Remember, with HIP Plus, your monthly contribution is your only healthcare cost. You will not have a copay when you visit the doctor or fill a prescription.

Ways to Pay

MHS offers several easy ways to make your monthly payment:

- **Online:** Pay online at mhsindiana.com with your credit or debit card, or your bank account information.
- **In Person:** Pay at a MoneyGram retailer like CVS/pharmacy or Walmart. Bring your **POWER Account** invoice and use Receive Code 15200. Find a MoneyGram location online or call 1-800-926-9400.
- **Mail:** Mail cash, check or money order, or fill out the payment coupon with your credit or debit card information and mail to: *Managed Health Services, Member Mailstop 16253487, PO Box 660160, Dallas, TX 75266-0160*. Include the payment voucher from the bottom of your invoice with payment.
- **Phone:** Call Member Services at 1-877-647-4848 to pay with a debit or credit card.
- **My Health Pays® Rewards:** Pay with rewards you earn for healthy activities. Call Member Services or go to mhsindiana.com.
- **Automatic Bank Deduction*:** Set up auto-deductions from your bank account.
- **Payroll Deduction*:** Have your employer automatically deduct your payment from your paycheck.

**You can get the forms needed at mhsindiana.com*



Member Rollover

If you manage your healthcare and your **POWER Account** wisely, you may have money left in your account after 12 months. The portion that you contributed can be used to LOWER your monthly payments for the next year of coverage. This is called Member Rollover. For **HIP Plus** members, if you get recommended preventive care services throughout the year, the Member Rollover funds will be doubled. For **HIP Basic** members, if you get preventive care and do not use all of your **POWER Account**, you can get a discount on the cost of enrolling in HIP Plus.



Penalties for Non-Payment

It's important to make your HIP payment on time every month. If you do **NOT** make your **POWER Account** contribution and:

- **Your income is at or below 100% of the federal poverty level** – You will **LOSE** HIP Plus benefits and **MOVE** to HIP Basic. In HIP Basic, you will have a copayment every time you see a provider, go to the hospital, or fill a prescription. Payments will range from \$4 to \$8 per visit or prescription filled and may be as high as \$75 per hospital stay. The HIP Basic plan could cost more than paying the HIP Plus monthly **POWER Account** contribution. Plus, you will lose your dental and vision benefits.
- **Your income is above 100% of the federal poverty level** – You will **LOSE** HIP Plus coverage and will be **LOCKED OUT** of the HIP program for six months before you can reapply. Some exceptions apply.



Contributions on Your Behalf

Non-profit organizations, your healthcare provider or your employer are allowed to pay some or all of your monthly payment. They should fill out the Contribution Form at mhsindiana.com under Member Forms.

You are always responsible for your full payment. Be sure to check your **POWER Account** invoice if you are expecting someone else to pay on your behalf. You will need to make sure the payment was made.



1-877-647-4848
mhsindiana.com

This brochure is a brief overview of the **POWER Account** program. Please read your member handbook or visit us online at mhsindiana.com for more information.

MHS is a health coverage provider that has been proudly serving Indiana residents for two decades through Hoosier Healthwise, the Healthy Indiana Plan and Hoosier Care Connect. MHS also offers a qualified health plan through the Health Insurance Marketplace called Ambetter from MHS. All of our plans include quality, comprehensive coverage, with a provider network you can trust. MHS is your choice for affordable health coverage.