HIP Members: Are You Ready for Gateway to Work?

Now that 2019 is here, as a Healthy Indiana Plan (HIP) member, you may need to do Gateway to Work activities like work, take classes or volunteer for a certain number of hours each month and report them by the end of this year. Gateway to Work connects HIP members like you with ways to look for work, train for jobs, finish school and serve your community. If you have a Gateway to Work status of “Reporting,” you need to meet a required number of hours at least eight out of 12 months of this year to keep your HIP health benefits next year. The Indiana Family and Social Services Administration (FSSA) will look at your entire year of Gateway to Work participation at the end of 2019, and if you haven’t completed enough hours, your HIP benefits could be suspended.

Questions?
If you need more help or if you do not have your Gateway to Work status, please call MHS at 1-877-647-4848 for more information about what you need to do for Gateway to Work.

What do I need to do now?

Between now and the end of June 2019, the activity hour requirement is zero. During this time, you can get familiar with the Gateway to Work program and all of the tools available to you.

You can go online to [www.HIP.in.gov](http://www.HIP.in.gov) and click on “Gateway to Work” to find helpful resources like:

- “Where Do I Start?” to take a quick quiz to find out what activities might be right for you or if you already do things that count for Gateway to Work. You may also learn that you are exempt.
- “Learn About Gateway to Work” for information about what activities you can do, how many hours you need to do each month, and how to report them.
- “Find Opportunities to Work, Learn and Serve” to search for organizations and resources near you that can help you find and do activities, report your hours and more.

You can register for the FSSA Benefits Portal at [www.fssabenefits.in.gov](http://www.fssabenefits.in.gov). Once logged in, you will find:

- A tracking tool showing your monthly progress for Gateway to Work.
- A place to log Gateway to Work activity hours to meet the monthly requirement.

You can call MHS at 1-877-647-4848 to:

- Take an assessment over the phone to find out what activities might be right for you, if you already do things that count for Gateway to Work, if you might be exempt, or if you need more help.
- Find out your Gateway to Work status and what that means.
- Ask any questions about Gateway to Work.
MHS Presents 2017 Summit Awards

MHS recently gave out the 2017 Summit Awards for Excellence in Care to Windrose Health Network (WHN) and Dr. Penny Kallmyer. MHS awarded these providers for excellent service to MHS members.

Dr. Penny Kallmyer is a pediatrician in Indianapolis. She is located on the Westside in the Eagle Creek Park area.

WHN is a Federally Qualified Health Center (FQHC) that provides primary and preventative care. It has health centers in Johnson, Shelby, Bartholomew, Brown, Morgan and southern Marion counties.

Congrats to our 2017 Summit Award Winners!

Checkups for Teens

Teens don’t need checkups as often as young kids do. But they should still see a primary care doctor at least once a year. Regular visits will keep teenagers up to date on vaccines. The doctor can also talk to teens about:

- Depression
- Drug and alcohol use
- Healthy Relationships
- Safe Sex

As teens get older, they should stop seeing a pediatrician and start seeing an adult primary care provider. This is particularly important for teens with chronic health issues. If a teen has a condition such as diabetes, he or she should not miss any visits.

Growing up also means teens will need to start managing their own care. They will need to make their own appointments. They will need to talk to doctors about their care. If you need help changing your child’s doctor to an adult healthcare provider, please call Member Services at 1-877-647-4848.

What are your wishes?

It can be hard to talk about end-of-life care. But it’s important to talk about it now. That way, your loved ones will know what your wishes are if you become unable to speak for yourself.

An advance directive is a document that says what treatments you do and do not want. Once you have a directive, there’s still more to do. Make sure your doctor puts a copy in your file. Make sure your loved ones know where to find a copy. You can find more information on advance directives at www.caringinfo.org.
Choose Your MHS Doctor Right Away

MHS cares about you having a successful medical home. That begins with choosing MHS doctors for you and your family. As an MHS member, you get to choose the doctor you want. He or she will help manage your healthcare, and help you get the services your family needs.

It’s important that you choose the doctor you want within 30 days of becoming an MHS member. New members can earn a $15 CentAccount Reward for creating a member portal account and using your member portal account to select a doctor within 30 days of enrolling. If you don’t choose a doctor, MHS will choose a doctor for you.

How to Choose your MHS Doctor:

First, find a list of doctors in your area.
- Go online at mhsindiana.com/find-a-provider.
- Or call MHS Member Services at 1-877-647-4848 and ask for a list.

Next, pick your doctor from the list.

Last, tell us! You can tell us one of two ways:
- Choose your doctor through the Secure Member Portal at mhsindiana.com/login. New members earn a reward for doing this!
- Call MHS Member Services at 1-877-647-4848.

Afterwards, MHS will send you a letter confirming the doctor(s) you chose. You can choose from the following types of MHS doctors:
- Family Practice
- General Practice
- Internal Medicine
- OB/GYN
- Pediatrician
- Endocrinologist (HIP only)

Call MHS Member Services at 1-877-647-4848 if you need a paper copy of your member handbook, anything in this newsletter, or anything available on the MHS website at mhsindiana.com.

CHECKING IN WITH DR. YANCY

If you have diabetes, the best thing you can do is work closely with your doctor. And schedule these tests at least once each year, or as recommended by your doctor:

- The A1c (HbA1c) blood test shows how well you have controlled your blood sugar over the past few months.
- An LDL-C cholesterol blood test measures the “bad” fats in your blood. The bad fats can cause heart disease.
- A urine screening test makes sure your kidneys are working well. Diabetes can lead to kidney failure.
- A vision test will check for signs of eye diseases that can occur with diabetes. This needs to be a retinal exam.
- People with diabetes should also have their feet checked at every exam.

Dr. Eric A. Yancy, MHS Chief Medical Officer and practicing pediatrician
Viruses or Bacteria: What's Got You Sick?

Antibiotics only treat bacterial infections. Viral illnesses cannot be treated with antibiotics. When an antibiotic is not prescribed, ask your healthcare professional for tips on how to relieve symptoms and feel better.

<table>
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<tr>
<th>Common Condition: What's got you sick?</th>
<th>Common Cause</th>
<th>Are antibiotics needed?</th>
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<tbody>
<tr>
<td></td>
<td>Bacteria</td>
<td>Bacteria or Virus</td>
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<td>Strep throat</td>
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<td>Whooping cough</td>
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<td>Urinary tract infection</td>
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<td>Sinus infection</td>
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<td>Middle ear infection</td>
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<td>Bronchitis/ chest cold (in otherwise healthy children and adults)*</td>
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<td>Common cold/runny nose</td>
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<td>Sore throat (except strep)</td>
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<td>Flu</td>
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Reprinted from the Be Antibiotics Aware program by the Centers for Disease Control and Prevention. Visit cdc.gov/antibiotic-use for more information and resources.

MHS 24-Hour Nurse Advice Line is Here to Help

MHS wants all of its members to have a close working relationship with their primary care doctors. Your doctor is always the best source of advice on how to treat a problem. Your doctor can help you decide if you need to be seen urgently for treatment.

Sometimes you may have a question about a problem that has just come up. Or, you may be unsure if you need to go to the Emergency Room (ER) or if a problem can wait until your doctor’s office is open. Sometimes visiting an Urgent Care or Walk-In Clinic is a good option.

MHS has a 24-hour nurse advice line that can help you decide where to go. If you call, a trained nurse will speak with you immediately or call you back in a short time. The nurse can help you decide how serious your problem is and get you the care you need. If the nurse tells you to go to the ER, then co-pays for non-emergent care will not apply to you. When in doubt if you should go to the ER or an Urgent Care clinic, call the 24-hour nurse advice line at 1-877-647-4848.

Find Out More about Your Pharmacy Benefits

Did you know that you can review pharmacy benefit information on our website and the secure member portal? You can find a complete list of preferred medications, find a pharmacy, view copay amounts and see other important information.
Statement of Non-Discrimination

Managed Health Services (MHS) complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. MHS does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

MHS:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)

- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, contact MHS at 1-877-647-4848 (TTY/TDD 1-800-743-3333).

If you believe that MHS has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Grievance and Appeals Coordinator, PO Box 441567, Indianapolis, IN 46244, 1-877-647-4848 (TTY/TDD 1-800-743-3333), Fax 1-866-714-7993. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, MHS is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, 1-800-368-1019, 1-800-537-7697 (TDD).

Complaint forms are available at hhs.gov/ocr/office/file/index.html.

We hope you enjoyed our latest issue of Healthy Moves! You can find this and past issues on our website at mhsindiana.com. Or, you can call Member Services and ask for a copy to be mailed to you.

If you need this or any other information in another language or format, or have any problems reading or understanding this information, please call MHS Member Services Monday through Friday from 8 a.m. to 8 p.m. at 1-877-647-4848 (TTY/TDD 1-800-743-3333). Learn more at mhsindiana.com.