

Hoosier Care Connect Frequently Asked Questions

Hoosier Care Connect, the state's new managed care program for the Aged, Blind & Disabled, began April 1, 2015. If you are interested in contracting with MHS for Hoosier Care Connect, please visit our Become a Provider page. Thank you for being our continued partner in care.

MHS Offers MHS Fan Club to Help Members Stay Cool and Breathe Better

MHS offers a program to help members struggling with breathing difficulties, especially in the summer heat — the MHS Fan Club.

The MHS Fan Club is designed specifically for MHS members who suffer from pulmonary disease, such as asthma, COPD or emphysema, and/or congestive heart failure (CHF). These members have particular difficulty breathing during the summer months, and the program aims to make sure they have an operating fan in their home as well as additional education on their condition.

You can request a fan for an MHS member through their MHS Case Manager.

A Connection to Care: Care managers are useful links to members' healthcare team

A member's health situation often warrants additional resources in order to help the individual navigate complex treatment and recovery options. Our care management programs are a valuable resource available to members that supports our providers' treatment plans.

On the Job: Care managers are trained nurses and other healthcare professionals who coordinate the needs of patients. Typically, care managers work with chronically and/or catastrophically ill and injured patients. They are assigned by the health plan to a member when it's recognized the member's particular condition needs complex coordinated care that the member may not be able to facilitate on his or her own. A care manager connects the member with the healthcare team by providing a communication link between the member, his or her primary medical provider, the member's family or other support system, and additional healthcare providers such as physical therapists and specialty physicians. Care managers also collaborate to develop a plan for following your treatment plan regimens including medication, diet and exercise recommendations.

On Your Team: Care managers do not provide hands-on care, diagnose conditions or prescribe medication and treatment. The care manager helps a member understand the benefits of following a treatment plan and the consequences of not following the plan outlined by the physician. In this way, they become the eyes and ears for the healthcare team, and a resource for physicians, the member, and the member's family. Our case management team is here to support your team for such events as:

- Non-adherence
- New diagnosis
- Complex multiple co-morbidities

Providers can directly refer members to our case or disease management programs at any time. Providers may call 1-877-647-4848 for additional information about these services, or to initiate a referral.

The MHS care management team includes:

- Children with Special Needs
- Behavioral Health
- OB Care Management
- Early Childhood Development
- Complex Care Management for Asthma, Diabetes, COPD, CKD, CHF, CAD, Lead



What is Hoosier Care Connect?

Hoosier Care Connect is a new coordinated care program for Indiana Health Coverage Programs (IHCP) members age 65 and over, or with blindness or a disability who are residing in the community and are not eligible for Medicare. Members will select a managed care entity (MCE) responsible for coordinating care in partnership with their medical provider(s). Hoosier Care Connect members will receive all Medicaid-covered benefits in addition to care coordination services. Care coordination services will be individualized based on a member's assessed level of need determined through a health screening.

Who is eligible for Hoosier Care Connect?

Hoosier Care Connect is for IHCP members age 65 and over, or with blindness or a disability who are residing in the community. Individuals enrolled in Medicare, and those residing in an institution or receiving services through a home and community-based services (HCBS) waiver, will not be eligible for Hoosier Care Connect. Individuals in the following eligibility categories who do not have an institutional level of care and are not enrolled in Medicare will be enrolled in Hoosier Care Connect:

- Aged individuals
- Blind individuals
- Disabled individuals
- Individuals receiving Supplemental Security Income
- M.E.D. Works enrollees

Children who are wards of the State, receiving adoption assistance, foster children and former foster children may also voluntarily enroll in the program.

Always check the web interchange or the MHS website for member package and benefit information.

Visit the mhsindiana.com provider blog for a full Hoosier Care Connect Frequently Asked Questions at www.mhsindiana.com/2015/04/30/hoosier-care-connect-frequently-asked-questions

Have you signed up for the MHS Secure Provider Portal?

The MHS secure provider portal provides real-time information in a protected online environment to help you manage your practice with quick information at your convenience.

KEY FEATURES:

- Check eligibility & view member roster
- Submit & check authorizations, claims, and batch claims
- Access EOPs & capitation reports
- View care gaps for members
- Send secure messages to MHS

MHS Health library at mhsindiana.com/health

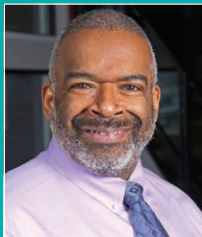
Patients appreciate being able to leave the office with information in-hand about their condition. Do you currently have a health information sheet resource available in your office? Go to mhsindiana.com/health, then click on "KRAMES Online Health Library" to access a free health library with over 4,000 printable health information sheets to give to your MHS members.

The health sheets are available in English and Spanish, with other languages available on request.

Just a Thought

by Dr. Yancy

Per the NCQA HEDIS measure for ADHD, children with newly prescribed ADHD medication should receive at least three follow-up care visits within a 10 month period, one of which should occur within 30 days of when the first ADHD medication was dispensed.



Dr. Eric A. Yancy
*MHS Chief
Medical Officer
and practicing
pediatrician*

MHS Member Rights and Responsibilities

MHS Members have certain rights and responsibilities under state and federal laws.

You can find a copy of these rights and responsibilities in the MHS Provider Manual, or the MHS Member Handbook, available on the MHS website, mhsindiana.com.

Just call MHS Provider Services at 1-877-647-4848 to request printed copies of any materials found on our website.



Members with speech or hearing disabilities call 1-800-743-3333 for tty/tdd. MHS is a health insurance provider that has been proudly serving Hoosiers for nearly two decades through the Hoosier Healthwise and Healthy Indiana Plan programs.