

steps to PREVENTION



WINTER 2010



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Questions? Call us at 1-800-356-1204 or 317-630-2831 in the Indianapolis area. You can also go to our website at MDwise.org.

Si quiere que le mandemos esta información en español, favor de llamar a nuestro departamento de Servicio al Cliente de MDwise al 1-800-356-1204 o 317-630-2831 en Indianápolis. También puede encontrar esta información en español en nuestra página web en MDwise.org. Gracias.

Member Tools at MDwise.org

Did you know that the MDwise website has helpful information for members? You can visit any time to:

- View or print a copy of the member handbook.
- Search for a provider or pharmacy in your area.
- View and print copies of previous or current newsletters.
- View the MDwise Privacy Policy.
- View the Member Rights and Responsibilities.
- Find helpful links to online wellness tools with useful health information.
- Learn more about our special programs to help your family stay healthy.
- View the MDwise Community Events calendar.
- And much more!

If you do not have a computer at home, your public library has computers with access to the Internet for free.

Please visit us at MDwise.org. There is information for members in both English and Spanish.

HEALTHY INDIANA PLAN
Health Coverage = Peace of Mind



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Get Help for Depression

Do you wonder why you don't want to eat? Maybe your friends say you get angry over nothing. And you just want to be left alone.

Is it depression?

If this sounds like you or someone you know, the problem could be depression. It's more than just feeling blue once in a while. It's feeling sad and hopeless most of the time.

People who are depressed may also:

- Cry a lot.
- Have trouble focusing and remembering.
- Sleep a lot more or a lot less than usual.
- Think about death a lot, or say they wish they were dead.
- Lose interest in things they usually like to do.
- Have stomachaches and headaches.
- Lose or gain weight.

Anyone can get depressed, even children. It can happen when there are family problems, such as divorce, or when someone you love dies. Sometimes other people in the family are depressed too.

Getting help

If you think you or someone you know might be depressed, tell someone you trust. They can help you find treatment that works. Counseling can help you change the way you think and act. And medicines can help you feel better.

Behavioral and mental health services are a covered benefit for Healthy Indiana Plan members. Your doctor can help. However, you do not need a referral from your doctor to get help. You can find a behavioral health provider at www.indianamedicaid.com/ihcp/ProviderServices/ProviderSearch.aspx. If you have a behavioral health emergency or an urgent concern, you can call MDwise Customer Service at 1-800-356-1204 or 317-630-2831 in the Indianapolis area.

Don't ignore depression, in a friend or in yourself. The sooner you get help, the sooner you can start to feel better.

Source: American Academy of Child & Adolescent Psychiatry



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MDwise.org

Information in STEPS TO PREVENTION comes from a wide range of medical experts. If you have any concerns or questions about specific content that may affect your health, please contact your health care provider.

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Questions? Comments? Complaints?
If you need help with anything about MDwise or your doctor, we can always help. Please call MDwise Customer Service at 1-800-356-1204 or 317-630-2831 in the Indianapolis area.

New Ways to Pay Your Monthly Contribution in 2011

Your POWER Account

As a member of the Healthy Indiana Plan, there are special rules to follow. Once you are eligible for the Healthy Indiana Plan, you will get a letter that will let you know what your monthly contribution is. You must pay this each month. If you do not pay this, you will be disenrolled from the program. We will send you a statement each month to remind you. You can also choose to pay for the entire year in one payment. If you are disenrolled due to non-payment, you cannot re-enroll for 12 months and there will be a 25% penalty on your POWER Account.



There are a number of ways you can make your monthly POWER Account contribution:

1. Check or Money Order.

Make your check or money order payable to MDwise and mail your payment to:
MDwise HIP Contributions
PO Box 630869
Cincinnati, OH 45263-0869

Important note: All checks and money orders are held for 10 days to allow them time to clear. Please keep this in mind when mailing your contribution.

If you do not have enough money in your bank account to cover the payment that you make, you will have an additional fee to pay. You will have to pay a \$3.00 fee if your check bounces. This is in addition to making your monthly payment again.

2. Cash.

Please do not mail cash. HIP members can use the "Check-free Bill Payment" at Wal-Mart stores. Call MDwise Customer Service at 1-800-356-1204 or our billing department at 1-877-744-2317 for more details.

3. Employer Contribution.

Ask your employer about paying part of your contribution. If your employer agrees to help pay, he/she must fill out the Employer Contribution Form. This form can be found on our website at MDwise.org/employer. Only a part of your contribution can be made by your employer (up to 50% of the total contribution). You will get a bill each month for the rest.

4. Payroll Deduction.

Ask your employer if you can have your HIP contribution taken from your paycheck. If so, your employer will need to view the Payroll Deduction/Direct Deposit Instruction Information.

5. WISEpay.

Members may also submit payment online with a debit or credit card or arrange for an automatic withdrawal from a designated bank account (electronic funds transfer). You can do this through your myMDwise Member Portal account on our website. Click on the MDwise WISEpay link. For general billing or payment help or if you need help with your online payment, please call WISEpay Customer Service at 1-877-744-2317.

6. Phone.

You can also make contribution payments with a debit or credit card by phone. Call our automated Billing and Payment Center at 1-877-744-2397.

Please be aware that if we find there is no money to cover an automatic withdrawal or your credit card declines, you will pay a fee of \$.50 (cents).

You can sign up to receive a bill electronically through your myMDwise Member Portal account on our website. If you don't have a myMDwise Member Portal account, you can sign up for one by clicking on "Create A New Account." All payment options are listed on your monthly invoice or bill.

What is COPD?

COPD stands for chronic obstructive pulmonary disease. This is a group of diseases that can block the flow of air in your lungs and can make it hard for you to breathe.

COPD can include:

- Emphysema
- Chronic bronchitis

The main cause of COPD is tobacco use. Other causes can include air pollutants, genetics and asthma.

Signs of COPD include:

- Constant coughing
- Shortness of breath while doing normal activities
- Producing a lot of mucus
- Feeling like you can't breathe or take a deep breath
- Wheezing

If you show signs of COPD or are at risk, you should see your doctor. This is especially important if you are over age 45 and smoke or have smoked in the past. Your doctor will have you take a simple test for COPD and do a health exam. If you are diagnosed with COPD, there are many ways to treat it depending on the cause. Your doctor will help you come up with a treatment plan. There are many ways to protect yourself from getting COPD if you are at risk.



- If you smoke, stop smoking. Secondhand smoke can also cause COPD, so keep your home smoke free.
- Protect yourself from chemicals, dust and fumes at home and work.

Remember, early detection of COPD is very important. See your doctor if you show any symptoms.

Please Pay Monthly Contributions On Time!

For you to keep your Healthy Indiana Plan coverage, you must pay your POWER Account contributions by the due date on the bill you get each month. If your employer agrees to pay a part of your contribution, and then does not make that payment, we will let you know. You will then have 60 days to pay it yourself. You can also earn rewards for making your payments on time. Please visit MDwise.org for more information about the new MDwise Rewards program coming January 1, 2011.

If you do not pay on time and your HIP coverage ends, you will lose 25% of the remaining balance in your POWER Account. Also, you will also not be able to re-apply for HIP for 12 months.

Your Pharmacy Benefit and What You Need To Know

The State of Indiana manages your pharmacy benefit. Medicines for MDwise members are covered. You can go to any pharmacy that accepts Indiana Medicaid. If you have pharmacy questions or problems, please call 1-800-457-4584.

How the Prescription Benefit Works

When you need medicine, your doctor will write a prescription. You can take that prescription to the pharmacy.

There are no co-pays for your prescription medicine. Your medicines are paid for through your POWER Account.

Prescription Medicine

The Healthy Indiana Plan covers necessary medicines. Your doctor must prescribe these medicines. It must be a medicine approved by the Food and Drug Administration (FDA).

The Healthy Indiana Plan gives your health care provider a tool called a preferred drug list. This helps him or her prescribe drugs for you. A preferred drug list is a list of brand and generic medicines covered by the Healthy Indiana Plan. MDwise Healthy Indiana Plan members can call 1-800-457-4584 and choose option #2 to ask about medicines on the preferred drug list. If you have Internet access, you can go to www.indianamedicaid.com. This drug list also tells you the over-the-counter medicine and vitamins that are covered.

There is also the Indiana Medicaid Pharmacy Services Member Handbook. It is available online at www.indianamedicaid.com under "Pharmacy" or you may call 1-800-457-4584 to have a copy mailed to you.

If you need help, you can call MDwise Customer Service toll-free at 1-800-356-1204 or 317-630-2831 in the Indianapolis area. You can also visit MDwise.org to find a list of pharmacies. Please click on "Find a Doctor" and choose "Find a Dentist or Pharmacy."

Member Redetermination

Healthy Indiana Plan members must re-enroll every 12 months. 90 days before your coverage ends, you will get a letter from the Division of Family Resources with information on how to enroll for next year.

60 days before your coverage ends, you will get another letter from the Division of Family Resources with a re-enrollment form.

It is very important you that you fill out the re-enrollment form right away and send it in! The Division of Family Resources must get this completed form 45 days before your coverage ends or you will be disenrolled from HIP. If that happens, you will not be able to re-enroll for 12 months.

Please mail the form to:

FSSA Document Center
P.O. Box 1630
Marion, IN 46952

You can also fax the completed form to 1-800-403-0864. If you have any questions, call MDwise Customer Service toll-free at 1-800-356-1204 or 317-630-2831 in the Indianapolis area.

Reminder:

You can always view your member handbook online at MDwise.org. Choose Members, then Healthy Indiana Plan, and click on "Handbook & Overview" in the left column.

Member Rights and Responsibilities

MDwise provides access to medical care for all its members. We do not discriminate based on your religion, race, national origin, color, ancestry, handicap, sex, sexual preference, or age.

Medical care is based on scientific principles. We provide care through a partnership that includes your doctor, MDwise, other health care staff, and you—our member.

MDwise is committed to partnering with you and your doctor. We will:

- Treat you and your family with dignity and respect.
- Maintain your personal privacy. Keep your medical records confidential as required by law.
- Give you a clear explanation of your medical condition. You have a right to be part of all your treatment decisions. If you understand the options, you can better decide if you want a certain treatment. Options will be discussed with you no matter what they cost or whether they are covered as a benefit.
- Provide you with information about MDwise, its services, and doctors.

In addition, YOU have the right to:

- Change your doctor once a year by calling the MDwise Customer Service Department.
- Timely access to covered services.
- Appeal any decisions we make about your health care. You can also complain about personal treatment you get.
- Get copies of your medical records or limit access to these records, according to state and federal law.
- Amend your medical records that we keep.
- Get information about your doctor.



- Request information about the MDwise organization and operations.
- Refuse care from any doctor.
- Ask for a second opinion.
- Make complaints about MDwise, its services, doctors, and policies.
- Get timely answers to your complaints or appeals.
- Take part in member satisfaction surveys.
- Prepare an advance directive.
- Get help from the Indiana Family and Social Services Administration (FSSA) about covered services, benefits, or complaints.
- Get complete benefit information. This includes how to get services during regular hours, emergency care, after-hours care, out-of-area care, exclusions, and limits on covered services.
- Request information about our physician incentive plan.

(continued on next page)

- Be told about changes to your benefits and doctors.
- Be told how to choose a different health plan.
- Health care that makes you comfortable based on your culture.
- Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience or retaliation, in accordance with Federal regulations. This means that your doctor cannot restrain or seclude you because it is the easiest thing to do. The doctor cannot make you do something that you do not want to do. The doctor cannot try to get back at you for something that you may have done.
- When you exercise these rights, you will not be treated differently.
- Provide input on MDwise member rights and responsibilities.
- Participate in all treatment decisions that affect your care.
- If MDwise closes or becomes insolvent, you are not responsible for our debts. Also, you would not be responsible for services that were given to you because the State does not pay MDwise, or that MDwise does not pay under a contract. Finally in the case of insolvency, you do not have to pay any more for covered services than what you would pay if MDwise provided you the services directly.
- Telling your doctor if you do not understand your care plan or what is expected of you.
- Following the plans and instructions for care that you have agreed upon with your doctor.
- Keeping scheduled appointments.
- Notifying your doctor 24 hours in advance if you need to cancel an appointment.
- Telling us about other health insurance you have.

IMPORTANT TIP:

If you do not follow your doctor's advice, this may keep you from getting well. It is your job to talk with your doctor if you have any questions about your medical care. Don't ever be afraid to ask your doctor questions! It is your right!

YOU are responsible for:

- Contacting your doctor for all your medical care.
- Treating the doctor and their staff with dignity and respect.
- Understanding your health problems to the best of your ability and working with your doctor to develop treatment goals that you can both agree on.
- Telling your doctor everything you know about your condition and any recent changes in your health.



HIP Preventive Health Requirements

In order to see how healthy you are, it is important to see your doctor every year. Regular check-ups help you and your doctor know how well your body is working and how to keep healthy from day to day. MDwise wants to help you stay healthy.

Please remember that you are allowed unlimited preventive services. The costs of these preventive services will not be taken out of your POWER Account. MDwise will cover all preventive care that you need. At the end of the year, if you have received the preventive services you need, the entire account balance (including the State's portion) stays in your POWER Account. This may mean you will owe less in your second year. If you do not get the preventive services you need, only your portion (if there is any left) will stay in your POWER Account. What is left of the state's portion will go back to the state and will NOT rollover to your account. The chart below shows the preventive health services required.



Preventive Care Services	Male 19–34	Female 19–34	Male 35–49	Female 35–49	Male 50–64	Female 50–64
Annual Physical	X	X	X	X	X	X
Mammogram	N/A	N/A	N/A	X*	N/A	X
Pap Smear	N/A	X	N/A	X	N/A	X
Cholesterol Testing*	N/A	N/A	X	45+	X	X
Diabetes or Blood Sugar Screen*	X	X	X	X	X	X
Tetanus-Diphtheria Screen	X	X	X	X	X	X
Flu Shot*	X	X	X	X	X	X
Pneumococcal Vaccine*	X	X	X	X	X	X
Colonoscopy	N/A	N/A	N/A	N/A	X	X

* Annual or as required by your disease/history specific condition