



# Provider Alert

**To: MDwise Hoosier Alliance Healthy Indiana Plan Providers**

**Subject: POWER Account Rollover Gives HIP Patients Extra Incentive to Obtain Health Services**

**From: James Shelton, Director, Network Management**

**Date: July 28, 2011**

The Healthy Indiana Plan (HIP) was built on the foundation of making preventive care services available to adults who would otherwise be uninsured. The POWER account card is one of the many tools the State uses to encourage HIP members to obtain wellness services.

Each HIP member’s POWER account is funded by a combination of member contributions and State funding. HIP members can use their POWER account funds to pay for HIP-covered medical care. If HIP members don’t use all of their available POWER account funds within a year, they can rollover the remaining funds for use in the following year. Listed below are the age- and /or gender-appropriate preventive services members should receive in order to qualify for the rollover benefit:

<b>Preventive Care Services</b>	<b>Male 19-35</b>	<b>Female 19-35</b>	<b>Male 35-50</b>	<b>Female 35-50</b>	<b>Male 50-64</b>	<b>Female 50-64</b>
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
Blood Glucose Screen*	X	X	X	X	X	X
Tetanus-Diphtheria Screen	X	X	X	X	X	X

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

The preventive services listed in the table were selected based on the United States Preventive Service Task Force 2007 handbook, “[The Guide to Clinical Preventive Services](#).” Please note these guidelines do not apply to members of the HIP Enhanced Services Plan.

When you’re talking to your HIP patients during an office visit or call, remind them that having appropriate preventive services is the key to ensuring they receive their POWER account rollover benefit. The reminder just might be the encouragement they need to come back for the health care you advise.