



August 2, 2023

Annual Health Carrier Public Forum

Public Notice

Public Notice: Annual Public Forum for Coordinated Care Corporation d/b/a Managed Health Services (MHS)

Pursuant to Indiana Code (IC 27-2-26 (1-3)), Managed Health Services (MHS) announces their public health forum will be held virtually on August 2, 2023, at 10 a.m. The forum will be available to be viewed by the public online. The purpose of the public forum is to provide members of the community with an opportunity to comment on Ambetter from MHS' performance in 2022 and discuss the premiums (as defined in IC 27-1-2-3(w)) charged by Ambetter from MHS.

Information that will be discussed during the public forum include:

- The premiums (as defined in IC 27-1-2-3(w)) charged by Ambetter from MHS.
- Ambetter from MHS' strategy to lower health care costs.
- Any increase in Ambetter from MHS' premiums, on average statewide, that occurred in 2022.

For additional information on the public forum, please contact Christina Hage, Senior Vice President of External Relations, at 1-877-647-4848.



Agenda

- Ambetter from MHS Overview
- Review Ambetter from MHS' 2022 performance through:
 - The premiums (as defined in IC 27-1-2-3(w)) charged by Ambetter from MHS.
 - Ambetter from MHS' strategy to lower health care costs.
 - Any increase in Ambetter from MHS' premiums, on average statewide, that occurred in 2022.
- Ambetter from MHS' Community Investment
- Public comment on health carrier's performance in the previous year and discussion on the premiums (as defined in IC 27-1-2-3(w)) charged by Ambetter from MHS.

MHS Purpose and Mission

OUR PURPOSE

*Transforming the Health of the Community,
One Person at a Time*

OUR MISSION

Better health outcomes at lower costs

OUR BRAND PILLARS

Focus on Individuals • Whole Health • Active Local Government



MHS Premiums Charged (as defined in IC 27-1-2-3(w))

- Premiums charged by MHS depend on the type of insurance offered.
- Medicare Advantage premiums are determined by submitting an actuarial bid for approval to the Centers for Medicaid and Medicare Services (CMS).
- Ambetter from MHS premiums are determined by actuarial calculations and rate recommendations which are reviewed and approved by the Indiana Department of Insurance (IDOI).
- Medicaid
 - Rates for Indiana are determined by the Family and Social Services Administration (FSSA).

Right Care. Right Time. Right Location.

- Start Smart for Your Baby®
- Fluvention
- Mail Order Pharmacy Benefit
- Wellframe
- My Health Pays®

Start Smart for Your Baby®

Start Smart for Your Baby® (SSFB) is an evidenced-based maternity program that identifies and engages members to improve pregnancy and birth outcomes.

SSFB connects expecting mothers with care managers to engage and empower members in accessing care and programs such as:

- Medical and behavioral healthcare
- Wellness programs
- Medical equipment
- Educational resources

Every member enrolled in SSFB receives clinically informed health education materials promoting prenatal care, postpartum care, newborn care, and healthy lifestyle habits.

Fluvention

Our Fluvention program is an annual campaign aimed at promoting flu vaccinations and reducing the severity of illness in individuals who get vaccinated but still contract the flu.

The program aims to protect our Ambetter from MHS members' health and well-being, while also contributing to the reduction of healthcare costs associated with flu-related complications.

Outreach to members communicates the various information around flu season.

- Eligible population
- Timing to receive an annual flu vaccine
- How to find a vaccination location

Wellframe

- Wellframe allows for members to take control of their health by receiving access to interactive, personalized care and navigation programs on their smartphone or tablet.
- Programs are delivered to members in the form of a daily checklist consisting of educational content, surveys, reminders, and more.
- Programs are personalized to meet the needs of each member, which allows for a targeted support of chronic or complex conditions, comorbidities and transitions of care.

My Health Pays® Rewards Program

Ambetter from MHS will reward members' healthy choices through our My Health Pays® Rewards Program. Members can earn dollar rewards by staying up-to-date on preventive care. These rewards will be added to a rewards card that can be used to pay for everyday items at Walmart*, utilities, transportation, telecommunications (cell phone bill), childcare services, education and rent.

You can earn rewards by completing the following healthy activities:

- Wellbeing Survey
- Annual Well Visit
- Comprehensive Diabetes Screenings
- Disease Management Participation
- Risk Assessments
- Clinical Screenings
- Educational Activities



*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.

My Health Pays®:

Offers fun, educational activities via challenges and power-ups on the MHP portal

- Ex: Challenges where members can be rewarded after tracking their steps

Additionally, My Health Pays® encourages healthy behaviors via clinical screenings and more.

Power-ups and Challenges:

- Wellness and health literacy activities have increased engagement across MHS membership. Participation drove \$784k in 2022 earnings.

Clinical Activities

- Participation in the MHP program encouraged members to earn a total of \$340k through the completion of clinical wellness activities for 2022.

Participation

- Currently, over 13,000 MHS members participate in the My Health Pays® program.

Average Changes in Ambetter from MHS Premiums in 2022

Average Premium Per Member

	2022	2021	Increase/(Decrease)
Marketplace	\$686.62	703.89	(\$17.27)

Marketplace average premium per member represents the average dollars MHS receives through premiums paid by individuals and/or CMS (Centers for Medicare and Medicaid Services).

Average Premium Per Member By Tier

	2022	2021	Increase/(Decrease)
Gold	\$683.56	\$740.40	(56.84)
Silver	\$646.37	\$608.78	(37.59)
Bronze	\$596.29	\$574.89	(21.40)

Community Engagement



Pacers Sports & Entertainment Partnership

Mad Ants STEAM Fest

Ambetter from MHS and the Fort Wayne Mad Ants partnered together to bring the Mad Ants STEAM Fest to Hoosier kids.

This event is focused on Science, Technology, Arts and Mathematics (STEAM). Kids who attended the event got to interact with different companies that brought activities focused on STEAM. After, they were able to attend the Mad Ants' basketball game for free, that same day!

Ambetter from MHS had a booth at the Fest and at the game. Ambetter also made an appearance on NBA Live during the game!



Pacers Sports & Entertainment Partnership

MHS Indiana Pacers Game Night

Kicking off 2022 and the start of our partnership with the Indiana Pacers, we had MHS Game Night at Gainbridge Fieldhouse. A fun night for Pacers fans!

The MHS logo was displayed on the night's program, on the court in LED-lit signage, during Time-Out Trivia, and on the MHS Flex Cam.

Attendees of the game could stop at the MHS information table to ask questions, learn more, and to receive a free vaccination card holder.

Rosie Roo, MHS' mascot, made an appearance on the court during a Time-Out Skills Challenge.

At the end of the game, attendees went home with co-branded winter tech gloves given away as part of our partnership.



Pacers Sports & Entertainment Partnership

Block Out Hunger

MHS and Pacers Sports & Entertainment teamed up for four separate Block Out Hunger events in 2022. Block Out Hunger aims to provide individuals and families in need with healthy food options. Each event gave us an opportunity to partner with organizations throughout the community. A huge thank you to The Rock Initiative at Eastern Star, Indianapolis Black Firefighters Association, Edna Martin Christian Center, and the Indianapolis Fire Department.

Indiana Pacers and Fever mascots, Boomer and Freddy Fever, and the Indiana Pacemates also made appearances at Block Out Hunger events.

Individuals and families were able to stop by and grab a bag of groceries from Kroger filled with healthy food options, including vegetables, fruit, meat, soup, crackers, and other pantry staples items. Each family also received a Pacers/Fever Swag Bag and tickets to an upcoming Pacers game!





MHS in the Community

We Make a Difference

- 382.5 hours completed
- 11 volunteer opportunities
- Support organizations
 - Habitat for Humanity
 - Million Meal Movement
 - Firefly Family & Children Alliance
 - The Villages
 - Indianapolis Urban League
 - Indianapolis Black Firefighters Association
 - Shephard Community Center
 - MHS & PACERS Block Out Hunger



Public comment on Ambetter from MHS' performance in the previous year and discussion on the premiums (as defined in IC 27-1-2-3(w)) charged by Ambetter from MHS.

Thank you for attending!

If you would like this information in another format or language, please reach out to MHS.
Si desea esta información en otro formato o idioma, comuníquese con MHS.



FROM



Appendix

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE CELTIC INSURANCE COMPANY

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION

CELTIC INSURANCE COMPANY

2.

NAIC Group Code	1295	BUSINESS IN THE STATE OF Indiana			DURING THE YEAR 2022										(LOCATION)		NAIC Company Code	80799
	1	Comprehensive Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14				
		2	3															
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health				
Total Members at end of:																		
1. Prior Year	51,013	50,977		35									1					
2. First Quarter	58,051	58,015		35									1					
3. Second Quarter	57,864	57,830		33									1					
4. Third Quarter	59,030	58,998		31									1					
5. Current Year	58,978	58,950		28														
6. Current Year Member Months	700,680	700,290		381									9					
Total Member Ambulatory Encounters for Year:																		
7. Physician	303,774	303,774																
8. Non-Physician	375,734	375,734																
9. Total	679,508	679,508	0	0	0	0	0	0	0	0	0	0	0	0				
10. Hospital Patient Days Incurred	22,723	22,723																
11. Number of Inpatient Admissions	3,431	3,431																
12. Health Premiums Written (b)	480,994,282	480,833,103		161,179														
13. Life Premiums Direct	(9)												(9)					
14. Property/Casualty Premiums Written	0																	
15. Health Premiums Earned	480,995,240	480,833,103		162,146									(9)					
16. Property/Casualty Premiums Earned	0																	
17. Amount Paid for Provision of Health Care Services	362,832,035	362,752,235		79,800														
18. Amount Incurred for Provision of Health Care Services	349,725,008	349,647,800		77,208														

(a) For health business: number of persons insured under PPO managed care products58,950 and number of persons insured under indemnity only products28

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$0