

History and Overview of the Health Advantage Program

The Problem of the Uninsured:

“The lack of health insurance has important health and financial consequences for patients. Millions of Americans are unable to receive the care they need, which endangers the health and lives of all patients, adds cost to the health care system and reduces productivity. Furthermore, medical treatment for uninsured patients is often more expensive than preventive, acute and chronic care of insured patients, because uninsured patients are more likely to receive medical care in an emergency department than in a physician’s office. These higher costs are absorbed by providers as free care, passed on to the insured via cost-shifting and higher health insurance premiums, or paid by taxpayers through higher taxes to finance public hospitals and public insurance programs.”¹

In 1998, over 14 percent of Indiana residents were estimated to be without health insurance. Presently, most of the elderly population of Marion County has health coverage through Medicare and many adult residents receive health insurance through their employers. Employer-sponsored coverage is on the decline, however, and many individuals are entering into work situations that don’t offer immediate and affordable health insurance. Concurrently, many individuals are making the transition from welfare to minimum wage work due to recent welfare reform, and are losing Medicaid benefits. Although Medicaid still effectively addresses the needs of many uninsured Indiana residents, stringent eligibility criteria often exclude individuals with true need. While the expansion of Medicaid’s Children’s Health Insurance Program in 1999 assured that children were adequately covered, the health care needs of their family units often remain unmet.

Such a lack of adequate health insurance coverage has caused serious consequences for Indiana. Individuals without health insurance face significant difficulty in accessing care. It has been demonstrated that such individuals avoid or delay care resulting in unnecessary hospitalization, increased medical cost and, ultimately, adverse community-wide health outcomes. In Marion County, many adults are ineligible for Medicaid and yet unable to afford traditional health care coverage. Individuals therefore either visit their physician only when very ill or directly use the emergency department as a physician’s office for minor illnesses. The care that such patients receive is often episodic, late in the disease stage and/or not in the most appropriate setting. With no regular source of care, services are fragmented and duplicated. Patients do not consistently receive the primary and preventative care services critical to health promotion and disease prevention.

Inception & Structure of Health Advantage:

To address concerns about how, when and where indigent patients were receiving health care, Health and Hospital Corporation launched an innovative program designed

¹ American College of Physicians – American Society of Internal Medicine. [No Health Insurance? It’s Enough to Make You Sick: Scientific Research Linking the Lack of Health Coverage to Poor Health.](#)

to provide high quality health care to the low-income and uninsured residents of Marion County. Health Advantage (initially dubbed Wishard Advantage) was officially established in 1997 when HHC contracted with the Indiana University Medical Group/Primary Care (IUMG/PC) to provide primary care to Marion County's indigent patients. The program is modeled after Indiana Medicaid and its goals include improving the overall quality of health care in Marion County, effectively coordinating and managing patient care, strengthening doctor/patient relationships, decreasing inappropriate emergency department use and producing reliable data regarding the indigent population to guide future decision-making and policy development.

IUMG/PC physicians assume responsibility for all of the primary health care needs of Wishard Health Advantage patients and in return, HHC pays the group a fixed per member/per month fee. This fee provides an incentive for physicians to build relationships with their patients, encourage appropriate delivery system use and improve the provision of effective primary and preventative services. IUMG/PC is also responsible for processing shadow claim data and providing other key information (such as quality, utilization and patient satisfaction reports) to HHC in the form of a monthly operating report. This arrangement allows for tracking of the Health Advantage population for quality control and future planning purposes.

All Marion County residents that fall at or below 200 percent of the [federal poverty level \(link to Advantage Income Guidelines\)](#) are eligible for Health Advantage. Services include routine exams and sports physicals, immunizations, gynecological care, specialty care, lab and X-ray services, prescribed medicine and emergency services. Health Advantage members are required to choose a primary care site and are encouraged to develop a continuous relationship with their physician, leading to a higher quality of care. Upon enrollment, members receive a personalized membership card, 24-hour access to a nurse on-call hotline and other service components found in most commercial insurance plans.

The [Health Advantage Steering Committee \(link to organizational chart\)](#) provides the overall organizational structure and accountability for the program. The committee, which meets on a bimonthly basis, is comprised of a racially and culturally diverse group of individuals representing all Health Advantage providers and the Health Advantage member population.

Health Advantage Program Growth:

Based upon its success within the Wishard system, and in an effort to assure geographical accessibility, HHC began expanding the [Health Advantage Network \(link to Health Advantage Network Provider List\)](#) in 2000 to include other Marion County providers of indigent care including Shalom Health Care Center, Citizens Health Center, Raphael Health Center, HealthNet Community Health Centers, St. Francis Neighborhood Center, St. Vincent's Primary Care Clinic and the Gennesaret Free Clinic. These providers receive a per member / per month fee for their services in the same manner as IUMG/PC. Expanded Health Advantage members receive primary care services from their designated safety-net providers, but are referred into the Wishard system for specialty and emergency services.

As the program began to expand in 2000, it became clear that more services were required in order to effectively meet the needs of the population. HHC pulled the diverse network of Health Advantage providers together to assess needs and strategize next steps in an unprecedented display of countywide collaboration. The most significant program developments to result from that effort include:

- The implementation of a *Pharmacy Assistance Program* to reduce pharmacy costs at the clinic level and increase the availability of low-cost pharmaceuticals to indigent patients.
- The creation of a comprehensive disease case management program (the *Advantage Diabetes Action Program*) combining the efforts of primary, public and mental health providers in Marion County to improve the health status of the Health Advantage program's sickest members.
- The development of a countywide electronic application and eligibility determination system (*Ind-e-App*) to streamline entitlement program (i.e. Health Advantage and Medicaid) application processes and increase patient enrollment into appropriate programs.

Federal Healthy Community Access Program (HCAP) funds were received in March 2001 to help meet these goals and supplemental funds were received in August 2002. Second year funds were received in August 2002 and third year funds were received in September 2003.

The Future of Health Advantage:

It is anticipated that Health Advantage will remain an integral program within Health and Hospital Corporation as it addresses the corporation's mission to meet the health care access needs of low-income and uninsured populations in Marion County. Should the nation's economy continue to decline, the need for coordinated and effective health care services for the indigent will increase. Although the majority of service providers presently working with indigent populations in Indianapolis currently participate in the Health Advantage Program, expansion does remain a viable option. Expansion into new community health centers and/or independent clinics as they develop is likely. Health Advantage membership is therefore expected to increase in coming years.

The Health Advantage Program has demonstrated its effectiveness in improving the overall quality of health care in Marion County, coordinating and managing patient care, strengthening doctor/patient relationships, decreasing inappropriate emergency department use and producing reliable data regarding the indigent population to guide future decision-making and policy development. The program's momentum is increasing and it is projected that Health Advantage, a model managed-care program, will address the health care needs of the uninsured in Marion County more effectively with every passing year. For further information regarding the Health Advantage program, please contact Susan Jo Thomas, Director of Outreach and Enrollment, at (317) 221-3163 or stthomas@hhcorp.org.