Important Plan Information



Changes to the Healthy Indiana Plan (HIP), Hoosier Healthwise (HHW), and Hoosier Care Connect (HCC) member handbooks

Below are updates to the Healthy Indiana Plan (HIP), Hoosier Healthwise (HHW), and Hoosier Care Connect (HCC) member handbooks. Please keep this document with your member handbook.

Page 64 (HIP), page 54 (HHW), page 53 (HCC) | Part 6 – How to resolve a problem with Anthem | Section: Grievances

The Grievances information has been revised with the following language:

Grievances

If you have a complaint or problem with the care you are getting, you can file a grievance with Anthem. A grievance can be filed over the phone or in writing at any time after a problem happens.

You can first talk to your doctor or provider if you have any questions or concerns about your care. They can work with you on fixing the problem. If the problem isn't fixed, call Anthem.

If you need help filing your grievance, one of our associates can help you. If you do not speak English, we can get an interpreter for you.

You have four ways to file a grievance with us:

- 1. Call Member Services at **866-408-6131** (HIP and HHW), **844-284-1797** (HCC), or **TTY 711**, Monday through Friday from 8 a.m. to 8 p.m. Eastern time.
- 2. Complete a grievance form found on anthem.com/inmedicaid.
- 3. Write us a letter to tell us about the problem. These are the things you need to tell us as clearly as you can: who is involved in the grievance, what happened, when did it happen, where did it happen, and why you're not happy. Mail your completed form or letter, along with any documents, to:

Grievance Coordinator Anthem Blue Cross and Blue Shield P.O. Box 62429 Virginia Beach, VA 23466

4. Fax your completed form or letter, along with any documents to **855-516-1083**.

If we can't make a decision about your grievance within 30 calendar days, we can ask the state agency to give us extra time (up to 14 calendar days). If we do this, we'll send a letter to tell you why we need more time.

Expedited (rush) grievance

Members must request an expedited grievance by fax or calling Member Services. Please contact us in one of these ways:

Member Services: **866-408-6131** (HIP and HHW), **844-284-1797** (HCC), or **TTY 711**, Monday through Friday from 8 a.m. to 8 p.m. Eastern time

Fax: **855-516-1083**

If you think waiting 30 calendar days may harm your health, we may be able to give you an answer within 48 hours. This is called an expedited (rush) grievance. In your request, tell us why you think waiting 30 calendar days would harm your health. We'll make a decision and try to call you within 48 hours from the time we get your grievance.

We also will send you a letter within five business days after making our decision. If we don't think waiting 30 calendar days will harm your health, we'll send you a letter within two calendar days to let you know we'll complete your grievance as quickly as we can within 30 calendar days. We'll also try to call you to tell you what we decide.