

Sponsored Content



CHRIS LEEUW
 Founder and CEO
 NeuroHope



DR. CAMEUAL WRIGHT
 President
 CareSource Indiana

Health Care

A prescription for better health

In this week's Thought Leadership roundtable, executives at CareSource Indiana and NeuroHope discuss some of the biggest challenges facing Indiana's health care system, the causes of those challenges, and possible solutions.

Q: What are the significant trends or risks that businesses and policymakers should know in Indiana's health care landscape?

Chris Leeuw: Health care costs are rising, reimbursement rates to providers are falling, and the health of Hoosiers is deteriorating. This all translates to higher

premiums for self- and employer-based plans, which are expected to increase by 9% next year. These trends underscore the complexities of our health care system and its unfortunate, paradoxical nature. As the cost of care goes up, the very benefits and access that would keep high-risk people healthy become more restricted, and overall health declines.

Indiana is among the 10 unhealthiest states in the country (based on rates of diabetes, heart disease, obesity,

and high blood pressure). The cost of delivering health care to our community is the highest in decades. This is no secret to policy makers. Their difficult task is to align cost control with outcomes that are effective and sustainable.

Dr. Cameual Wright: Workforce shortages remain one of Indiana's greatest challenges, and our health care system is no exception. Indiana faces a critical shortage of health care professionals across all disciplines, including physicians, nurses, behavioral health providers and other allied health professionals. In addition, growing issues with housing, food and employment are affecting health outcomes.

For our members, CareSource's Life Services® program pairs them with Life Coaches who help them identify their unique social barriers to health, including education, employment and housing. The coaches collaborate with the member to address these challenges, leading to better health outcomes and self-sufficiency. Members also gain access to over 200 employer partners, opening potential pathways into future careers, including those in the medical field

Q: What are the challenges that private practices face in today's health care climate?

Chris Leeuw: All health care providers are navigating flat or declining reimbursements from payors as the cost of care rises—but private, outpatient practices that operate outside larger hospital contracts feel the most pressure. In the world of physical therapy, for example, when adjusted for inflation, reimbursement rates have dropped more than 25% over the last five years, while administrative costs have increased. As clinicians are pressured to maximize financial productivity, they struggle to maintain the highest standard of care.

This is the crux of why NeuroHope was created—to ensure that the highest standard of care for high-cost patients is affordable and accessible. We can't "fix" health care without bringing the focus back to patients and investing in the tools and strategies that keep them healthy.

Q: How are changes in health policy affecting hospitals and outpatient clinics?

Chris Leeuw: Changes in Medicaid funding at both the federal and state level are at the forefront.

Medicaid enrollment for disabled and low-income Hoosiers has doubled over the last five years, and costs have grown by \$5 billion in the same timeframe—far outpacing revenue growth. Federal funding covers two-thirds of the cost, so federal cuts will impact the state's ability to make up the gap. Hospitals and providers relying heavily on Medicaid as a critical revenue source may feel the pressure and stress of policy changes, but I fear that it will be the patients in need who will ultimately be the most affected.

Q: How are factors like rising costs and flat reimbursements affecting service delivery?

Chris Leeuw: Salaries, supplies, and technology expenses continue climbing, but payments from Medicare, Medicaid, and insurers have stayed stagnant; reimbursement from many services have even declined. It is a squeeze that forces hospitals and clinics to make tough choices: cutting staff or reducing services. Patients feel the impact through longer wait times, shorter visits, and restricted access to specialized care. The tension between costs and reimbursements is reshaping how, where, and even whether care is delivered.

Q: Workforce shortages in health care, especially in rural areas, seem to be a growing issue. How does that affect access?

Dr. Cameual Wright: Access to care is deeply impacted. More than one-third of Indiana counties are maternal care deserts, requiring many women to travel over an hour for obstetric services. Additional behavioral health and primary care deserts are prevalent as well. These shortages lead



CARE THAT CONNECTS

HEALTH INSURANCE
 JOBS
 REWARDS
 SUPPORT



Sponsored Content

to fewer available providers, longer wait times and less access to care.

CareSource employs multiple methods to improve our members' access to care. First, we work closely with our providers in rural communities to ensure a broad, statewide network to serve our members. In addition, we are engaged with unique partnerships, such as with Marian University, to fund an endowed scholarship to help offset the expense of medical school for students interested in serving in rural communities. We collaborated with the Little Medical School to raise awareness in children living in rural areas about careers in medicine. Finally, we partner with Purdue University to destigmatize agricultural mental health and provide educational programming, resources and access to quality mental health services to farmers, farm families and rural communities.

Chris Leeuw: Health care leaders and policy makers are aware that Indiana is dealing with a physician shortage as we struggle to maintain and recruit health care professionals to our state. Rural areas, already hit by Medicaid policy changes, feel the labor shortage the most. Appointments take longer to secure, emergency rooms face staffing gaps, and in some cases, people simply go without the treatment they need, which deepens existing health disparities and places added pressure on already stretched providers.

Q: How is technology enhancing health care efficiency, and where does it fall short?

Dr. Cameual Wright: Technology can be instrumental in improving access to health care. Digital tools, such as the BeMe app, a free mobile app, supports teen mental health and wellness. Websites, like our CareSource website, provide critical educational resources and links to

providers in the area. Telehealth is a useful tool that allows members to speak with providers and get support in the privacy of their own homes. Remote patient monitoring, which uses digital medical equipment, such as scales and blood pressure cuffs, can monitor members' physical condition and send that data to health care providers to help manage chronic health conditions. Combining technology with personalized support ensures everyone benefits and no one is left behind. Unfortunately, insufficient access to broadband technology, limited digital literacy and language barriers can hinder the adoption and utility of technological advances.

Chris Leeuw: We live in an exciting and rapidly evolving time when technological advancements are reshaping health care delivery. There is also irony. In some cases, as technology advances, patient access to state-of-the-art resources becomes more difficult. In the world of neuro rehabilitation, for example, robotic exoskeletons, electrical stimulation devices, and novel surgical implants are proving to be effective and coming to market, but high price tags and hesitancy by insurers to cover care turn restrictive. Health care access needs a paradigm change. That's what we are delivering on a small scale at NeuroHope.

Q: Which populations in Indiana are uniquely at risk for poor health, and what initiatives can address these challenges?

Chris Leeuw: Unfortunately, Indiana's population has a higher rate of obesity, diabetes, and high-blood pressure than the national average. We also fall within in the U.S. "stroke belt," where the population is 30% more likely to suffer a stroke than other areas of the country.

Lower-income households that may have a more difficult time accessing healthy food are a primary focus, but the disabled population—who often are isolated, more sedentary, and less active—are overlooked everywhere.

One in four people living with paralysis nationwide are admitted to the hospital at least once a year due to complications from inactivity. At NeuroHope, we recently completed a two-year study with the University of Indianapolis through Indiana CTSI tracking the health and hospital readmittance for people with neurologic conditions who have access to extended care, personal training, and adaptive fitness classes. Our study found hospital readmittance was 50% less than the national average, and hospital length of stays were one-third as long. It's a subset of some of the most vulnerable, high-cost patients in the health care system, and it paints a picture of the value that can come along with access to proper preventative care.

Dr. Cameual Wright: One unique population we serve is returning citizens, people who are returning to the community from incarceration. For eight years, the CareSource Re-Entry Program® has had a dedicated team of full-time Community Justice Liaisons to all 15 state prisons, providing pre-release education on the Healthy Indiana Plan and post-release health screenings, personalized care plans and access to our JobConnect™ program. Our CJs work one-on-one with these

members to ensure they have access to physical, behavioral health and social services to support their health outcomes, facilitate their education and employment goals, and reduce the likelihood of recidivism.

Q: What investments should businesses be making to ensure a healthier future for the next generation of Hoosiers?

Dr. Cameual Wright: Investing in women's and children's health is vital to foster the health and well-being of the next generation. Opportunities exist for local businesses to support organizations like The Villages or Firefly, Riley or Peyton Manning's Children's hospitals, local sporting events or the Boys and Girls Club. Even small investments can help build a healthier, more empowered community.

Chris Leeuw: Investing in preventative care is the best start. Employers can go beyond traditional benefits to create lasting impact. Workplace wellness programs, nutrition and fitness incentives, mental health resources, and routine health screenings can help employees stay healthier while reducing long-term health care costs. It starts with proper education and proper access to resources that promote lifelong health.●



Chris Leeuw, MBA, is the Founder and CEO of NeuroHope, a 501(c)3 outpatient physical, occupational, and speech therapy clinic that provides affordable, long-term rehabilitation and adaptive fitness for people living with and recovering from neurologic conditions after insurance discharge. In 2024, NeuroHope joined forces with the non-profit "Conquer Paralysis Now" to open the DRIVEN NeuroRecovery Center Powered by NeuroHope in Carmel.



As President of CareSource Indiana, **Cameual Wright, MD, MBA,** leads the market executive team, overseeing operational and quality performance. Leveraging clinical and business expertise, she drives the development of innovative programs and initiatives that ensure CareSource members receive high-quality, high-value care. Dr. Wright is responsible for establishing, growing and maintaining partnerships with health care providers, regulators, legislators, state agencies, community-based organizations and other stakeholders to improve the health and wellbeing of Hoosiers.



POWERED BY NEUROHOPE

NeuroHope

provides an *affordable continuum of care* following spinal cord injury, brain injury, and stroke.

| | | |
|---|---|--|
| <p>Physical, Occupational, and Speech Therapy</p> <p>Activity-based sessions that focus on improving weaknesses and Activating the nervous system.</p> | <p>Guide Adaptive Exercise</p> <p>Extended access to rehabilitation and personal training.</p> | <p>Monthly Wellness Program</p> <p>Wheelchair accessible fitness Center, workout plans and daily group classes.</p> |
|---|---|--|

Rehabilitation. Redefined.

Contact Us: www.neurohopewellness.org
Follow us on Facebook & Instagram: @neurohope