## Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit www.healthcare.gov.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial 1-877-KIDS NOW or www.insurekidsnow.gov to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at www.askebsa.dol.gov or call 1-866-444-EBSA (3272).

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of January 31, 2021. Contact your State for more information on eligibility –

ALABAMA – Medicaid	COLORADO – Health First Colorado (Colorado's Medicaid Program) & Child Health Plan Plus (CHP+)
Website: http://myalhipp.com/ Phone: 1-855-692-5447	Health First Colorado Website: https://www.healthfirstcolorado.com/ Health First Colorado Member Contact Center: 1-800-221-3943/ State Relay 711 CHP+: https://www.colorado.gov/pacific/hcpf/child-health-plan-plus CHP+ Customer Service: 1-800-359-1991/ State Relay 711 Health Insurance Buy-In Program (HIBI): https://www.colorado.gov/pacific/hcpf/health-insurance-buy-program HIBI Customer Service: 1-855-692-6442
ALASKA – Medicaid	FLORIDA – Medicaid
The AK Health Insurance Premium Payment Program Website: <a href="http://myakhipp.com/">http://myakhipp.com/</a> Phone: 1-866-251-4861 Email: <a href="mailto:CustomerService@MyAKHIPP.com">CustomerService@MyAKHIPP.com</a> Medicaid Eligibility: <a href="http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx">http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx</a> X	Website: https://www.flmedicaidtplrecovery.com/flmedicaidtplrecovery.com/hipp/index.html Phone: 1-877-357-3268
ARKANSAS – Medicaid	GEORGIA – Medicaid
Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (855-692-7447)	Website: <a href="https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp">https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp</a> Phone: 678-564-1162 ext 2131
CALIFORNIA – Medicaid	INDIANA – Medicaid

Website:
Health Insurance Premium Payment (HIPP) Program
<a href="http://dhcs.ca.gov/hipp">http://dhcs.ca.gov/hipp</a>
Phone: 916-445-8322
Email: <a href="http://www.in.gov/fssa/hip/">http://dhcs.ca.gov/hipp</a>
Phone: 1-877-438-4479
All other Medicaid
Website: <a href="https://www.in.gov/medicaid/">https://www.in.gov/fssa/hip/</a>
Phone 1-800-457-4584

IOWA – Medicaid and CHIP (Hawki)	MONTANA – Medicaid
Medicaid Website:	Website:
https://dhs.iowa.gov/ime/members	http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP
Medicaid Phone: 1-800-338-8366	Phone: 1-800-694-3084
Hawki Website:	
http://dhs.iowa.gov/Hawki	
Hawki Phone: 1-800-257-8563	
HIPP Website:	
https://dhs.iowa.gov/ime/members/medicaid-a-to-	
z/hipp	
HIPP Phone: 1-888-346-9562	
KANSAS – Medicaid	NEBRASKA – Medicaid
Website: https://www.kancare.ks.gov/	Website: http://www.ACCESSNebraska.ne.gov
Phone: 1-800-792-4884	Phone: 1-855-632-7633
1 Hone. 1 000 792 4004	Lincoln: 402-473-7000
	Omaha: 402-595-1178
KENTUCKY – Medicaid	NEVADA – Medicaid
Kentucky Integrated Health Insurance Premium	
Payment Program (KI-HIPP) Website:	Medicaid Website: <a href="http://dhcfp.nv.gov">http://dhcfp.nv.gov</a> Medicaid Phone: 1-800-992-0900
https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.asp	Medicald Pholie: 1-800-992-0900
X Phone: 1-855-459-6328	
Email: KIHIPP.PROGRAM@ky.gov	
Ellian. Kittii i i ROOKAlvi(@ky.gov	
KCHIP Website:	
https://kidshealth.ky.gov/Pages/index.aspx	
Phone: 1-877-524-4718	
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Kentucky Medicaid Website: https://chfs.ky.gov	
LOUISIANA – Medicaid	NEW HAMPSHIRE – Medicaid
Website: www.medicaid.la.gov or	Website: https://www.dhhs.nh.gov/oii/hipp.htm
www.ldh.la.gov/lahipp	Phone: 603-271-5218
Phone: 1-888-342-6207 (Medicaid hotline) or 1-855-618-	Toll free number for the HIPP program: 1-800-852-3345,
5488 (LaHIPP)	ext 5218
MAINE – Medicaid	NEW JERSEY – Medicaid and CHIP
Enrollment Website:	Medicaid Website:
https://www.maine.gov/dhhs/ofi/applications-forms	http://www.state.nj.us/humanservices/
Phone: 1-800-442-6003	dmahs/clients/medicaid/
TTY: Maine relay 711	Medicaid Phone: 609-631-2392
n' , 11 1.1 1 n ' 147 1	CHIP Website: <a href="http://www.njfamilycare.org/index.html">http://www.njfamilycare.org/index.html</a>
Private Health Insurance Premium Webpage:	CHIP Phone: 1-800-701-0710
https://www.maine.gov/dhhs/ofi/applications-forms	
Phone: -800-977-6740.	
TTY: Maine relay 711	NEW YORK AS II II
MASSACHUSETTS – Medicaid and CHIP	NEW YORK – Medicaid
Website: https://www.mass.gov/info-	Website:
details/masshealth-premium-assistance-pa	https://www.health.ny.gov/health_care/medicaid/
	Phone: 1-800-541-2831
Phone: 1-800-862-4840	
MINNESOTA – Medicaid	NORTH CAROLINA – Medicaid

Website: https://medicaid.ncdhhs.gov/ Website: https://mn.gov/dhs/people-we-serve/children-and-Phone: 919-855-4100 families/health-care/health-care-programs/programsand-services/other-insurance.jsp Phone: 1-800-657-3739 MISSOURI - Medicaid NORTH DAKOTA - Medicaid Website: Website: http://www.dss.mo.gov/mhd/participants/pages/hipp. http://www.nd.gov/dhs/services/medicalserv/medicaid/ Phone: 1-844-854-4825 htm Phone: 573-751-2005 **OKLAHOMA – Medicaid and CHIP UTAH - Medicaid and CHIP** Website: <a href="http://www.insureoklahoma.org">http://www.insureoklahoma.org</a> Medicaid Website: <a href="https://medicaid.utah.gov/">https://medicaid.utah.gov/</a> Phone: 1-888-365-3742 CHIP Website: <a href="http://health.utah.gov/chip">http://health.utah.gov/chip</a> Phone: 1-877-543-7669 VERMONT- Medicaid **OREGON – Medicaid** Website: <a href="http://www.greenmountaincare.org/">http://www.greenmountaincare.org/</a> Website: http://healthcare.oregon.gov/Pages/index.aspx Phone: 1-800-250-8427 http://www.oregonhealthcare.gov/index-es.html Phone: 1-800-699-9075 PENNSYLVANIA – Medicaid VIRGINIA - Medicaid and CHIP Website: Website: <a href="https://www.coverva.org/hipp/">https://www.coverva.org/hipp/</a> https://www.dhs.pa.gov/providers/Providers/Pages/ Medicaid Phone: 1-800-432-5924 Medical/HIPP-Program.aspx CHIP Phone: 1-855-242-8282 Phone: 1-800-692-7462 WASHINGTON - Medicaid RHODE ISLAND - Medicaid and CHIP Website: <a href="http://www.eohhs.ri.gov/">http://www.eohhs.ri.gov/</a> Website: <a href="https://www.hca.wa.gov/">https://www.hca.wa.gov/</a> Phone: 1-855-697-4347, or 401-462-0311 (Direct RIte Phone: 1-800-562-3022 Share Line) WEST VIRGINIA - Medicaid **SOUTH CAROLINA – Medicaid** Website: <a href="https://www.scdhhs.gov">https://www.scdhhs.gov</a> Website: <a href="http://mywyhipp.com/">http://mywyhipp.com/</a> Phone: 1-888-549-0820 Toll-free phone: 1-855-MyWVHIPP (1-855-699-8447) WISCONSIN - Medicaid and CHIP **SOUTH DAKOTA - Medicaid** Website: <a href="http://dss.sd.gov">http://dss.sd.gov</a> Website: Phone: 1-888-828-0059 https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm Phone: 1-800-362-3002 TEXAS - Medicaid WYOMING - Medicaid Website: <a href="http://gethipptexas.com/">http://gethipptexas.com/</a> Website: Phone: 1-800-440-0493 https://health.wyo.gov/healthcarefin/medicaid/programsand-eligibility/ Phone: 1-800-251-1269

To see if any other states have added a premium assistance program since January 31, 2021, or for more information on special enrollment rights, contact either:

U.S. Department of Labor Employee Benefits Security Administration Centers for Medicare & Medicaid Services www.dol.gov/agencies/ebsa 1-866-444-EBSA (3272)

U.S. Department of Health and Human Services www.cms.hhs.gov 1-877-267-2323, Menu Option 4, Ext. 61565

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average approximately seven minutes per respondent. Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employee Benefits Security Administration, Office of Policy and Research, Attention: PRA Clearance Officer, 200 Constitution Avenue, N.W., Room N-5718, Washington, DC 20210 or email <a href="mailto:ebsa.opr@dol.gov">ebsa.opr@dol.gov</a> and reference the OMB Control Number 1210-0137.

OMB Control Number 1210-0137 (expires 1/31/2023)