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 July 31, 2016. Contact your State for more information on eligibility –

ALABAMA – Medicaid	FLORIDA – Medicaid
Website: http://myalhipp.com/	Website: http://flmedicaidtplrecovery.com/hipp/
Phone: 1-855-692-5447	Phone: 1-877-357-3268
ALASKA – Medicaid	GEORGIA – Medicaid
The AK Health Insurance Premium Payment Program	Website: http://dch.georgia.gov/medicaid
Website: http://myakhipp.com/	- Click on Health Insurance Premium Payment (HIPP)
Phone: 1-866-251-4861	Phone: 404-656-4507
Email: <u>CustomerService@MyAKHIPP.com</u>	
Medicaid Eligibility:	
http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx	
ARKANSAS – Medicaid	INDIANA – Medicaid
ARKANSAS – Medicaid Website: http://myarhipp.com/	INDIANA — Medicaid Healthy Indiana Plan for low-income adults 19-64
115 15 15 15 15 15	1 1 1 1 1 1 1 1 1
Website: http://myarhipp.com/	Healthy Indiana Plan for low-income adults 19-64
Website: http://myarhipp.com/	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov
Website: http://myarhipp.com/	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov Phone: 1-877-438-4479 All other Medicaid Website: http://www.indianamedicaid.com
Website: http://myarhipp.com/	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov Phone: 1-877-438-4479 All other Medicaid
Website: http://myarhipp.com/	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov Phone: 1-877-438-4479 All other Medicaid Website: http://www.indianamedicaid.com
Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (855-692-7447)	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov Phone: 1-877-438-4479 All other Medicaid Website: http://www.indianamedicaid.com Phone 1-800-403-0864
Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (855-692-7447) COLORADO – Medicaid	Healthy Indiana Plan for low-income adults 19-64 Website: http://www.hip.in.gov Phone: 1-877-438-4479 All other Medicaid Website: http://www.indianamedicaid.com Phone 1-800-403-0864 IOWA — Medicaid

KANSAS – Medicaid	NEW HAMPSHIRE – Medicaid
Website: http://www.kdheks.gov/hcf/	Website:
Phone: 1-785-296-3512	http://www.dhhs.nh.gov/oii/documents/hippapp.pdf
	Phone: 603-271-5218
KENTUCKY – Medicaid	NEW JERSEY – Medicaid and CHIP
Website: http://chfs.ky.gov/dms/default.htm	Medicaid Website:
Phone: 1-800-635-2570	http://www.state.nj.us/humanservices/
	dmahs/clients/medicaid/
	Medicaid Phone: 609-631-2392 CHIP Website: http://www.njfamilycare.org/index.html
	CHIP Website: http://www.njiamiiycare.org/index.ntml CHIP Phone: 1-800-701-0710
LOUISIANA – Medicaid	NEW YORK – Medicaid
Website:	Website:
http://dhh.louisiana.gov/index.cfm/subhome/1/n/331	http://www.nyhealth.gov/health_care/medicaid/
Phone: 1-888-695-2447	Phone: 1-800-541-2831
1 Holic. 1 000 095 2447	Thoree, 1 000 341 2031
MAINE – Medicaid	NORTH CAROLINA – Medicaid
Website: http://www.maine.gov/dhhs/ofi/public-	Website: http://www.ncdhhs.gov/dma
assistance/index.html	Phone: 919-855-4100
Phone: 1-800-442-6003	
TTY: Maine relay 711	
MASSACIIIISETTS Medicaid and CHID	NORTH DAKOTA – Medicaid
MASSACHUSETTS – Medicaid and CHIP Website: http://www.mass.gov/MassHealth	Website:
Phone: 1-800-462-1120	http://www.nd.gov/dhs/services/medicalserv/medicaid/
1 Hone. 1-000-402-1120	Phone: 1-844-854-4825
MINNESOTA – Medicaid	OKLAHOMA – Medicaid and CHIP
Website: http://mn.gov/dhs/ma/	Website: http://www.insureoklahoma.org
Phone: 1-800-657-3739	Phone: 1-888-365-3742
31 3135	3 3 3,1
MISSOURI – Medicaid	OREGON – Medicaid
Website:	Website: http://healthcare.oregon.gov/Pages/index.aspx
http://www.dss.mo.gov/mhd/participants/pages/hipp.ht	http://www.oregonhealthcare.gov/index-
<u>m</u>	<u>es.html</u>
Phone: 573-751-2005	Phone: 1-800-699-9075
MONTANA – Medicaid	PENNSYLVANIA – Medicaid
Website:	Website: http://www.dhs.pa.gov/hipp
http://dphhs.mt.gov/MontanaHealthcarePrograms/HIP	Phone: 1-800-692-7462
P O C O	
Phone: 1-800-694-3084	DHODE ICLAND M P 1
NEBRASKA – Medicaid Website:	RHODE ISLAND – Medicaid
http://dhhs.ne.gov/Children Family Services/AccessNe	Website: http://www.eohhs.ri.gov/ Phone: 401-462-5300
braska/Pages/accessnebraska index.aspx	1 110116. 401-402-5300
Phone: 1-855-632-7633	
NEVADA – Medicaid	SOUTH CAROLINA – Medicaid
Medicaid Website: http://dwss.nv.gov/	Website: http://www.scdhhs.gov
Medicaid Phone: 1-800-992-0900	Phone: 1-888-549-0820

SOUTH DAKOTA - Medicaid	WASHINGTON – Medicaid
Website: http://dss.sd.gov	Website: http://www.hca.wa.gov/free-or-low-cost-
Phone: 1-888-828-0059	health-care/program-administration/premium-
	<u>payment-program</u>
	Phone: 1-800-562-3022 ext. 15473
TEXAS – Medicaid	WEST VIRGINIA – Medicaid
Website: http://gethipptexas.com/	Website:
Phone: 1-800-440-0493	http://www.dhhr.wv.gov/bms/Medicaid%2oExpansion/
	Pages/default.aspx
	Phone: 1-877-598-5820, HMS Third Party Liability
UTAH – Medicaid and CHIP	WISCONSIN – Medicaid and CHIP
Website:	Website:
Medicaid: http://health.utah.gov/medicaid	https://www.dhs.wisconsin.gov/publications/pi/pioo95.
CHIP: http://health.utah.gov/chip	<u>pdf</u>
Phone: 1-877-543-7669	Phone: 1-800-362-3002
VERMONT– Medicaid	WYOMING – Medicaid
Website: http://www.greenmountaincare.org/	Website: https://wyequalitycare.acs-inc.com/
Phone: 1-800-250-8427	Phone: 307-777-7531
VIRGINIA – Medicaid and CHIP	
Medicaid Website:	
http://www.coverva.org/programs premium assistance.	
<u>cfm</u>	
Medicaid Phone: 1-800-432-5924	
CHIP Website:	
http://www.coverva.org/programs premium assistance.	
<u>cfm</u>	
CHIP Phone: 1-855-242-8282	

To see if any other states have added a premium assistance program since July 31, 2016, 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/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

Paperwork Reduction Act Statement

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 ebsa.opr@dol.gov and reference the OMB Control Number 1210-0137.