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, 2022. Contact your State for more information on eligibility -

ALABAMA-Medicaid	CALIFORNIA-Medicaid
Website: http://myalhipp.com/	Website:
Phone: 1-855-692-5447	Health Insurance Premium Payment (HIPP) Program
	http://dhcs.ca.gov/hipp
	Phone: 916-445-8322
	Fax: 916-440-5676
	Email: hipp@dhcs.ca.gov
ALASKA-Medicaid	COLORADO-Health First Colorado (Colorado's
	Medicaid Program) & Child Health
	Plan Plus (CHP+)
The AK Health Insurance Premium Payment Program	Health First Colorado Website:
Website: http://myakhipp.com/	https://www.healthfirstcolorado.com/
Phone: 1-866-251-4861	Health First Colorado Member Contact Center: 1-800-221-
Email: CustomerService@MyAKHIPP.com	3943/ State Relay 711
Medicaid Eligibility:	CHP+: https://www.colorado.gov/pacific/hcpf/child-health-
http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx	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
ARKANSAS-Medicaid	FLORIDA-Medicaid
Website: http://myarhipp.com/	Website:
Phone: 1-855-MyARHIPP (855-692-7447)	https://www.flmedicaidtplrecovery.com/flmedicaidtplrecov
	ery. com/hipp/index.html
	Phone: 1-877-357-3268
GEORGIA-Medicaid	MAINE-Medicaid
A HIPP Website: https://medicaid.georgia.gov/health-	Enrollment Website:
insurance-premium-payment-program-hipp	https://www.maine.gov/dhhs/ofi/applications-forms
Phone: 678-564-1162, Press 1 GA CHIPRA Website:	Phone: 1-800-442-6003
	TTY: Maine relay 711

Intersection shealth insurance-programs-reauthorization-act-2009-chipm		
Private Health Insurance Premium Webagee: Insurance Premium Webagee: Private Health Insurance Premium Payment Prome: 1-800-487-48449	https://medicaid.georgia.gov/programs/third-party-	
https://www.maine.gov/dhhs/of/applications-forms		Private Health Insurance Premium Webpage:
Phone: 1-800-977-0740. TYP: Maine relay 711 Healthy Indiana Plan for low-income adults 19-64 Website: https://www.in.gov/medicaid/ Website: https://www.in.gov/memmeners Medicaid Website: https://win.gov/memmeners Medicaid Phone: 1-800-338-8366 Hawki Website: https://win.gov/memmeners/medicaid-a-to-z/hipp HIPP Phone: 1-880-349-562 KANSAS-Medicaid Website: https://www.kas.mo.gov/mhd/participants/pages/hipp.htm Phone: 1-880-349-328 Email: KHIPP.PWebsite: https://min.gov/molamaHealthcarePrograms/HIPP Website: https://www.dss.mo.gov/molamaHealthcarePrograms/HIPP Phone: 1-835-459-6328 Email: KHIPP.PROGRAM@ky.gov KCHIP Website: https://kis.ky.gov/pages/index.aspx Phone: 1-835-439-6328 Email: KHIPP.PROGRAM@ky.gov KCHIP Website: www.medicaid.la.gov or www.ldh.la.gov/lahipp. Phone: 1-835-439-6328 Email: KHIPP.PROGRAM@ky.gov KCHIP Website: www.medicaid.la.gov or www.ldh.la.gov/lahipp. NEYADA-Medicaid Website: https://www.dss.mo.gov/molamaHealthcarePrograms/HIPP Phone: 1-835-439-6328 Email: KHIPP.PROGRAM@ky.gov KCHIP Website: www.medicaid.la.gov or www.ldh.la.gov/lahipp. NEYADA-Medicaid Website: www.medicaid.la.gov or www.ldh.la.gov/lahipp. NEYADA-Medicaid Website: https://www.dss.mo.gov/molama-lead-besc-programs-lawe-programs-l		
TTY: Maine relay 711		*
MASSACHUSETTS-Medicaid and CHIP	1 Holic. (076) 304-1102, 11038 2	
Healthy Indiana Plan for low-income adults 19-64	INDIANA Modiceid	
Website: https://www.in.gov/fsaship/ Phone: 1-800-862-4840 Phone: 1-800-657-3739 Phone: 1		
Phone: 1-877-438-4479 All other Medicaid Website: https://www.dis.ass.ass.ass.ass.ass.ass.ass.ass.ass.a		
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Website: https://www.kare.org/indexidedid Website: https://dx.sow.gov/ime/members Medicaid Phone: 1-800-338-8366 Hawki Website: http://dx.sow.gov/ime/members/medicaid-a-to-z/hipp HipP phone: 1-800-257-8563 HIPP Website: https://dx.sow.gov/ime/members/medicaid-a-to-z/hipp HipP phone: 1-880-257-8346-9562 KANSAS-Medicaid Website: https://www.kancare.ks.gov/ Phone: 1-800-792-4884 Website: https://www.kancare.ks.gov/ Phone: 1-800-792-4884 KENTUCKY-Medicaid Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website: https://chis.kv.gov/agencies/dms/member/Pages/kihipp.asp X Phone: 1-855-459-6328 Email: KIHIPP_PROGRAM@ky.gov KCHIP Website: https://chfs.kv.gov NECHIP Website: https://www.hdls.anl.gov/or/www.hdl.la.gov/lahipp Phone: 1-888-342-6207 (Medicaid hottine) or 1-855-618-5488 (LaHIPP) Medicaid Website: https://www.dhls.anl.gov/oi/hipp.htm Phone: 603-271-5218 NEW HAMPSHIRE-Medicaid Website: https://www.dhls.anl.gov/oi/hipp.htm Phone: 603-271-5218 Toll free number for the HIPP program: 1-800-852-3345, ext 5218 NEW JERSEY-Medicaid and CHIP Medicaid Website: https://www.state.ni.us/humanservices/dmahs/clients/medicaid/did/wedicaid Phone: 603-231-2392 CHIP Website: http://www.stafins.gov Medicaid Phone: 603-232-2329 CHIP Website: http://www.stafins.gov Phone: 1-888-88-80-059 Website: http://www.stafins.gov Phone: 1-800-657-3739 Medicaid Website: http://www.stafins.gov Phone: 1-800-657-3739 Medicaid Website: http://www.difins.micro.gov Phone: 1-850-657-3739 Medicaid Website: http://www.difins.micro.gov Phone: 1-850-657-3739 Medicaid Website: http://www.stafins.gov Phone: 1-850-652-37633 Licnolin: 402-473-7000 Omaha: 402-595-1178 Website: http://www.stafins		
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	Medicaid Phone: 609-631-2392	
	CHIP Website: http://www.nifamilycare.org/index.html	
CHIP PHONE: 1-800-701-0710	CHIP Phone: 1-800-701-0710	
NEW YORK-Medicaid UTAH-Medicaid and CHIP		UTAH-Medicaid and CHIP

Website: https://www.health.ny.gov/health_care/medicaid/	Medicaid Website: https://medicaid.utah.gov/
Phone: 1-800-541-2831	CHIP Website: http://health.utah.gov/chip
1 Hone. 1-000-541-2051	Phone: 1-877-543-7669
NORTH CAROLINA-Medicaid	VERMONT-Medicaid
Website: https://medicaid.ncdhhs.gov/	Website: http://www.greenmountaincare.org/
Phone: 919-855-4100	Phone: 1-800-250-8427
NORTH DAKOTA-Medicaid	VIRGINIA-Medicaid and CHIP
Website:	Website: https://www.coverva.org/en/famis-select
http://www.nd.gov/dhs/services/medicalserv/medicaid/	https://www.coverva.org/en/hipp
Phone: 1-844-854-4825	Medicaid Phone: 1-800-432-5924
	CHIP Phone: 1-800-432-5924
OKLAHOMA-Medicaid and CHIP	WASHINGTON-Medicaid
Website: http://www.insureoklahoma.org	Website: https://www.hca.wa.gov/
Phone: 1-888-365-3742	Phone: 1-800-562-3022
OREGON-Medicaid	WEST VIRGINIA-Medicaid and CHIP
Website: http://healthcare.oregon.gov/Pages/index.aspx	Website: https://dhhr.wv.gov/bms/
http://www.oregonhealthcare.gov/index-es.html	http://mywvhipp.com/
Phone: 1-800-699-9075	Medicaid Phone: 304-558-1700
	CHIP Toll-free phone: 1-855-MyWVHIPP (1-855-699-
	8447)
PENNSYLVANIA-Medicaid	WISCONSIN-Medicaid and CHIP
Website:	Website:
https://www.dhs.pa.gov/Services/Assistance/Pages/HIPP-	https://www.dhs.wisconsin.gov/badgercareplus/p-
<u>Program.aspx</u>	<u>10095.htm</u>
Phone: 1-800-692-7462	Phone: 1-800-362-3002
RHODE ISLAND-Medicaid and CHIP	WYOMING-Medicaid
Website: http://www.eohhs.ri.gov/	Website:
Phone: 1-855-697-4347, or 401-462-0311 (Direct Rite	https://health.wyo.gov/healthcarefin/medicaid/programs-
a r: \	1 11 11 11 11 /
Share Line)	and-eligibility/
Share Line)	and-eligibility/ Phone: 1-800-251-1269

To see if any other states have added a premium assistance program since January 31, 2022, or for more information on special enrollment rights, contact either:

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