

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, 2024. Contact your State for more information on eligibility –

ALABAMA – Medicaid

WEBSITE <http://myalhipp.com/>
PHONE 1-855-692-5447

ALASKA – Medicaid

WEBSITE [The AK Health Insurance Premium Payment Program
http://myakhipp.com/](http://myakhipp.com/)
PHONE 1-866-251-4861
EMAIL CustomerService@MyAKHIPP.com
MEDICAID ELIGIBILITY <https://health.alaska.gov/dpa/Pages/default.aspx>

ARKANSAS – Medicaid

WEBSITE <http://myarhipp.com/>
PHONE 1-855-MyARHIPP (855-692-7447)

CALIFORNIA – Medicaid

WEBSITE [Health Insurance Premium Payment \(HIPP\) Program
http://dhcs.ca.gov/hipp](http://dhcs.ca.gov/hipp)
PHONE 916-445-8322 / (fax) 916-440-5676
EMAIL: hipp@dhcs.ca.gov

COLORADO – Health First Colorado (Colorado's Medicaid Program) & Child Health Plan Plus (CHP+)

WEBSITE [Health First Colorado Website:
https://www.healthfirstcolorado.com/](https://www.healthfirstcolorado.com/)
PHONE [Health First Colorado Member Contact Center:
1-800-221-3943 / State Relay 711](tel:1-800-221-3943)
CHP+ WEBSITE <https://hcpf.colorado.gov/child-health-plan-plus>
CHP+ PHONE [Customer Service: 1-800-359-1991 / State Relay 711](tel:1-800-359-1991)
WEBSITE [Health Insurance Buy-In Program \(HIBI\):
https://www.mycohibi.com/](https://www.mycohibi.com/)
PHONE [HIBI Customer Service: 1-855-692-6442](tel:1-855-692-6442)

FLORIDA – Medicaid

WEBSITE <https://www.flmedicaidprecovery.com/flmedicaidprecovery.com/hipp/index.html>
PHONE 1-877-357-3268

GEORGIA – Medicaid

GA HIPP WEBSITE <https://medicaid.georgia.gov/health-insurance-premium-payment-program-hipp>
PHONE 678-564-1162, Press 1
GA CHIPRA WEBSITE <https://medicaid.georgia.gov/programs/third-party-liability/childrens-health-insurance-program-reauthorization-act-2009-chipra>
PHONE 678-564-1162, Press 2

INDIANA – Medicaid

WEBSITE [Health Insurance Premium Payment Program
Family and Social Services Administration
http://www.in.gov/fssa/dfr/](http://www.in.gov/fssa/dfr/)
PHONE 1-800-403-0864 or 1-800-457-4584 (Member Services Phone)
WEBSITE [All other Medicaid
https://www.in.gov/medicaid/](https://www.in.gov/medicaid/)

IOWA – Medicaid and CHIP (Hawki)

MEDICAID WEBSITE <https://hhs.iowa.gov/programs/welcome-iowa-medicaid>
MEDIACID PHONE 1-800-338-8366
HAWKI WEBSITE <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/iowa-health-link/hawki>
HAWKI PHONE 1-800-257-8563
HIPP WEBSITE <https://hhs.iowa.gov/programs/welcome-iowa-medicaid/fee-service/hipp>
HIPP PHONE 1-888-346-9562

KANSAS – Medicaid

WEBSITE <https://www.kancare.ks.gov/>
PHONE 1-800-792-4884
HIPP PHONE 1-800-967-4660

KENTUCKY – Medicaid

WEBSITE [Kentucky Integrated Health Insurance Premium Payment \(KI-HIPP\) Program
https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx](https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx)
PHONE 1-855-459-6328
EMAIL KIHIPPPROGRAM@ky.gov
KCHIP WEBSITE <https://kynect.ky.gov>
KCHIP PHONE 1-877-524-4718
MEDICAID WEBSITE <https://chfs.ky.gov/agencies/dms>

LOUISIANA – Medicaid

WEBSITE www.medicaid.la.gov or www.ldh.la.gov/lahipp
PHONE 1-888-342-6207 (Medicaid hotline) or 1-855-618-5488 (LaHIPP)

MAINE – Medicaid

ENROLLMENT WEBSITE https://www.mymaineconnection.gov/benefits/s/?language=en_US
PHONE 1-800-442-6003 TTY: Maine relay 711
WEBSITE [Private Health Insurance Premium
https://www.maine.gov/dhhs/ofi/applications-forms](https://www.maine.gov/dhhs/ofi/applications-forms)
PHONE 1-800-977-6740 TTY: Maine relay 711

MASSACHUSETTS – Medicaid and CHIP

WEBSITE <https://www.mass.gov/masshealth/pa>
PHONE 1-800-862-4840 TTY: 711
EMAIL masspremassistance@accenture.com

MINNESOTA – Medicaid

WEBSITE <https://mn.gov/dhs/health-care-coverage/>
PHONE 1-800-657-3672

MISSOURI – Medicaid

WEBSITE <http://www.dss.mo.gov/mhd/participants/pages/hipp.htm>
PHONE 573-751-2005

MONTANA – Medicaid

WEBSITE <http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP>
PHONE 1-800-694-3084
EMAIL HHSHIPProgram@mt.gov

NEBRASKA – Medicaid

WEBSITE <http://www.ACCESSNebraska.ne.gov>
1-855-632-7633
PHONE Lincoln: 402-473-7000
Omaha: 402-595-1178

NEVADA – Medicaid

WEBSITE <http://dhcnp.nv.gov>
PHONE 1-800-992-0900

NEW HAMPSHIRE – Medicaid

WEBSITE <https://www.dhhs.nh.gov/programs-services/medicaid/health-insurance-premium-program>
PHONE 603-271-5218
TOLL FREE FOR HIP PROGRAM 1-800-852-3345, ext 15218
EMAIL DHHS.ThirdPartyLiabi@dhhs.nh.gov

NEW JERSEY – Medicaid and CHIP

MEDICAID WEBSITE <http://www.state.nj.us/humanservices/dmahs/clients/medicaid/>
MEDICAID PHONE 1-800-356-1561
CHIP WEBSITE <http://www.njfamilycare.org/index.html>
CHIP PHONE 1-800-701-0710 TTY: 711
609-631-2392 (Premium Assistance Phone)

NEW YORK – Medicaid

WEBSITE https://www.health.ny.gov/health_care/medicaid/
PHONE 1-800-541-2831

NORTH CAROLINA – Medicaid

WEBSITE <https://medicaid.ncdhhs.gov/>
PHONE 919-855-4100

NORTH DAKOTA – Medicaid

WEBSITE <https://www.hhs.nd.gov/healthcare>
PHONE 1-844-854-4825

OKLAHOMA – Medicaid and CHIP

WEBSITE <http://www.insureoklahoma.org>
PHONE 1-888-365-3742

OREGON – Medicaid and CHIP

WEBSITE <http://healthcare.oregon.gov/Pages/index.aspx>
PHONE 1-800-699-9075

PENNSYLVANIA – Medicaid and CHIP

WEBSITE <https://www.pa.gov/en/services/dhs/apply-for-medicaid-health-insurance-premium-payment-program-hipp.html>
PHONE 1-800-692-7462
CHIP WEBSITE <https://www.dhs.pa.gov/CHIP/Pages/CHIP.aspx>
CHIP PHONE 1-800-986-KIDS (5437)

RHODE ISLAND – Medicaid and CHIP

WEBSITE <http://www.eohhs.ri.gov/>
PHONE 1-855-697-4347, or 401-462-0311 (Direct RItE Share Line)

SOUTH CAROLINA – Medicaid

WEBSITE <https://www.scdhhs.gov>
PHONE 1-888-549-0820

SOUTH DAKOTA - Medicaid

WEBSITE <http://dss.sd.gov>
PHONE 1-888-828-0059

TEXAS – Medicaid

WEBSITE <https://www.hhs.texas.gov/services/financial/health-insurance-premium-payment-hipp-program>
PHONE 1-800-440-0493

UTAH – Medicaid and CHIP

WEBSITE <https://medicaid.utah.gov/upp/>
<https://medicaid.utah.gov/expansion/> (Adult Expansion)
<https://medicaid.utah.gov/buyout-program/> (Utah Medicaid Buyout Program)
<https://chip.utah.gov/> (CHIP)
EMAIL Utah's Premium Partnership for Health Insurance (UPP)
upp@utah.gov
PHONE 1-888-222-2542

VERMONT– Medicaid

WEBSITE <https://dvha.vermont.gov/members/medicaid/hipp-program>
PHONE 1-800-250-8427

VIRGINIA – Medicaid and CHIP

WEBSITE <https://coverva.dmas.virginia.gov/learn/premium-assistance/famis-select>
<https://coverva.dmas.virginia.gov/learn/premium-assistance/health-insurance-premium-payment-hipp-programs>
MEDICAID AND CHIP PHONE 1-800-432-5924

WASHINGTON – Medicaid

WEBSITE <https://www.hca.wa.gov/>
PHONE 1-800-562-3022

WEST VIRGINIA – Medicaid and CHIP

WEBSITE <http://dhr.wv.gov/bms>
<http://mywvhipp.com>
MEDICAID PHONE 304-558-1700
CHIP TOLL-FREE 1-855-MyWVHIP (1-855-699-8447)

WISCONSIN – Medicaid and CHIP

WEBSITE <https://www.dhs.wisconsin.gov/badgercareplus/p-10095.htm>
PHONE 1-800-362-3002

WYOMING – Medicaid

WEBSITE <https://health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility/>
PHONE 1-800-251-1269

To see if any other states have added a premium assistance program since July 31, 2024, 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

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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.