

# 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](http://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](http://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](http://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, 2023. 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/>  
PHONE 1-866-251-4861  
EMAIL [CustomerService@MyAKHIPP.com](mailto: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>  
PHONE 916-445-8322 / (fax) 916-440-5676  
EMAIL [hipp@dhcs.ca.gov](mailto: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/>  
PHONE Health First Colorado Member Contact Center:  
1-800-221-3943 / State Relay 711  
CHP+ WEBSITE <https://hcpf.colorado.gov/child-health-plan-plus>  
CHP+ PHONE Customer Service: 1-800-359-1991 / State Relay 711  
WEBSITE Health Insurance Buy-In Program (HIBI):  
<https://www.mycohibi.com/>  
PHONE HIBI Customer Service: 1-855-692-6442

## FLORIDA – Medicaid

WEBSITE <https://www.flmedicaidtprecovery.com/flmedicaidtprecovery.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 Healthy Indiana Plan for low-income adults 19-64  
<http://www.in.gov/fssa/hip/>  
PHONE 1-877-438-4479  
All other Medicaid  
WEBSITE <https://www.in.gov/medicaid/>  
PHONE 1-800-457-4584

## IOWA – Medicaid and CHIP (Hawki)

MEDICAID WEBSITE <https://dhs.iowa.gov/ime/members>  
MEDICAID PHONE 1-800-338-8366  
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

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>  
PHONE 1-855-459-6328  
EMAIL [KIHIPP.PROGRAM@ky.gov](mailto:KIHIPP.PROGRAM@ky.gov)  
KCHIP WEBSITE <https://kidshealth.ky.gov/Pages/index.aspx>  
KCHIP PHONE 1-877-524-4718  
MEDICAID WEBSITE <https://chfs.ky.gov/agencies/dms>

## LOUISIANA – Medicaid

WEBSITE [www.medicaid.la.gov](http://www.medicaid.la.gov) or [www.ldh.la.gov/lahipp](http://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](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/off/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](mailto:masspremassistance@accenture.com)

## MINNESOTA – Medicaid

WEBSITE <https://mn.gov/dhs/people-we-serve/children-and-families/health-care/health-care-programs/programs-and-services/other-insurance.jsp>  
PHONE 1-800-657-3739

**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 [HSHIPPProgram@mt.gov](mailto:HSHIPPProgram@mt.gov)

**NEBRASKA – Medicaid**

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

**NEVADA – Medicaid**

MEDICAID WEBSITE <http://dhcnp.nv.gov>  
 MEDICAID 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 HIPPI PROGRAM 1-800-852-3345, ext 5218

**NEW JERSEY – Medicaid and CHIP**

MEDICAID WEBSITE <http://www.state.nj.us/humanservices/dmahs/clients/medicaid/>  
 MEDICAID PHONE 609-631-2392  
 CHIP WEBSITE <http://www.njfamilycare.org/index.html>  
 CHIP PHONE 1-800-701-0710

**NEW YORK – Medicaid**

WEBSITE [https://www.health.ny.gov/health\\_care/medicaid/](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**

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

**PENNSYLVANIA – Medicaid and CHIP**

WEBSITE <https://www.dhs.pa.gov/Services/Assistance/Pages/HIPP-Program.aspx>  
 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 Rlte 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**

MEDICAID WEBSITE <https://medicaid.utah.gov/>  
 CHIP WEBSITE <http://health.utah.gov/chip>  
 PHONE 1-877-543-7669

**VERMONT– Medicaid**

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

**VIRGINIA – Medicaid and CHIP**

<https://coverva.dmas.virginia.gov/learn/premium-assistance/famis-select>  
 WEBSITE <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://dhhr.wv.gov/bms>  
<http://mywvhipp.com>  
 MEDICAID PHONE 304-558-1700  
 CHIP TOLL-FREE 1-855-MyWVHIPP (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, 2023, or for more information on special enrollment rights, contact either:

**U.S. Department of Labor**  
 Employee Benefits  
 Security Administration  
**[www.dol.gov/agencies/ebsa](http://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](http://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](mailto:ebsa.opr@dol.gov) and reference the OMB Control Number 1210-0137.

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