What is HIPP?

The Health Insurance Premium
Payment Program (HIPP) and HIPP
for Kids (HFK) are cost saving
programs administered by Virginia
Medicaid

HIPP helps cover insurance premium payments for households with Medicaid-eligible members.

HIPP For Kids helps pay premiums for children under age 19 who are Medicaid eligible. HIPP for Kids members may also qualify for Cost Sharing to help with non-covered co-payments, deductibles and other expenses not covered by your primary insurer.

HIPP and HFK Benefits

HIPP participants receive premium reimbursement payments to offset medical costs.

Your doctors and other Medicaidenrolled providers receive maximum payment for your care because you have both private health insurance and Medicaid.

Am I Eligible for HIPP?

You might qualify for HIPP if you meet the following criteria:



I have a household member currently enrolled in fullcoverage Medicaid



I have access to a group health plan or COBRA and maintain it through an employer



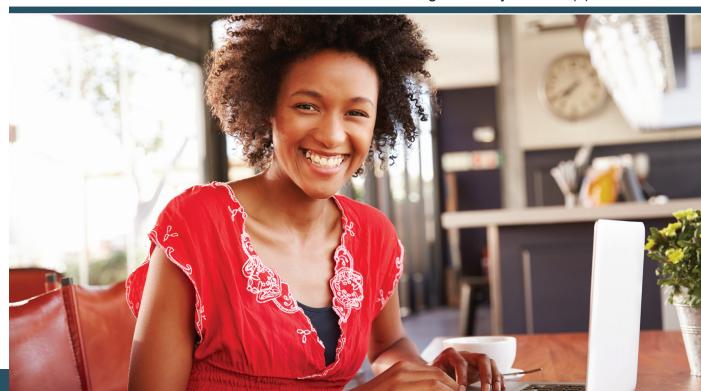
My health insurance meets program criteria, including cost effectiveness. Visit www.dmas.virginia.gov/#/hipp to learn more about program and cost-effectiveness criteria

How Do I Apply?

Visit www.dmas.virginia.gov/#/hipp to apply online or send us an email at hipp to apply online or send us an email at https://hipp to apply online or send us an email at https://hippcustomerservice@dmas.virginia.gov/#/hipp to apply online or send us an email at https://hippcustomerservice@dmas.virginia.gov

HIPP Application Checklist:

- Complete all parts of the HIPP application
- Complete Employer Insurance Verification (EIV) Form
- Submit insurance summary (Verifying deductibles, co-pays and co-insurance amounts)
- ✓ Provide current paystubs
- ✓ Submit front and back images of insurance card(s) of the Medicaid eligible family member(s)



Frequently Asked Questions

How can I apply for this program?

- 1. Visit www.dmas.virginia.gov/#/hipp to apply online
- 2. Fax your application and required documents to (804) 225-4393
- 3. Or email a paper form to HIPPcustomerservice@dmas.virginia.gov

Can I qualify if I have Plan First?

Plan First is not eligible for this program.

What happens if the required documents are not submitted monthly?

We will send you reminders and there is a 10 day grace period. However, after the grace period, your eligiblity will be suspended and you would not receive your reimbursement.

Once approved, when will I get my first payment?

Checks are mailed the last Friday of every month.

Want to Learn More?

Visit www.dmas.virginia.gov/#/hipp for more information and to apply online. You can also call 1-800-432-5924.

Contact Us!

HIPPcustomerservice@dmas.virginia.gov

(804) 225-4236 (800) 432-5924 (Virginia Residents)

Se habla espanol.

TTY for deaf or hearing impaired: 1-888-221-1590 (Interpreters are available)

The Department of Medical Assistance Services complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, religion, national origin, age, disability, sex, gender, pregnancy, child birth or other related medical conditions, or marital status.



Opening the Door to Healthly Choices

DID YOU KNOW?

If you have
employer-sponsored
insurance with a Medicaid
eligible dependent, the HIPP
program may reimburse
your portion of the
premium.

