

| Kentucky Integrated Health Insurance Premium Payment (KI-HIPP) Program Frequently Asked Questions (FAQ) for Employers | |
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| What is KI-HIPP? | KI-HIPP is a voluntary Medicaid program offered to Medicaid members to help pay for the cost of an Employer-Sponsored Insurance (ESI) plan. In addition, enrolled members may also include Non-Medicaid policy holders with at least one Medicaid member on the plan. KI-HIPP is designed to give Kentuckians the tools to afford quality, comprehensive coverage in the commercial marketplace while also saving the Commonwealth on healthcare expenses. KI-HIPP enrollment does NOT result in a loss of Medicaid benefits! |
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| How does the program benefit employees? | The KI-HIPP program provides KI-HIPP payments to the policy holder as reimbursement for the cost of the health insurance premium, which is the amount that the policy holder must pay in order to receive health insurance coverage. KI-HIPP may also cover the cost of family health insurance coverage, even if some members are not Medicaid- eligible, as long as the policy holder or a member on the health insurance policy is enrolled in Medicaid. |
| | The benefits offered by an ESI plan may be very similar to Medicaid benefits, however, KI-HIPP may widen the healthcare network by providing access to providers and services in the full traditional Medicaid network. * In addition, the KI-HIPP program offers the following benefits to members who enroll: |
| | May help make employer health insurance affordable by reimbursing the policy holder for the insurance premium |
| | May allow an entire family to be on the same health insurance plan and access the same providers |
| | *It is highly encouraged to visit a provider that accepts Medicaid. If the Medicaid member visits a Non-Medicaid Provider (does not accept Medicaid), they may have out-of-pocket costs that are not reimbursable. |
| How will KI-HIPP impact my organization? | KI-HIPP allows employees, who may not otherwise have the opportunity, to utilize existing health benefits (i.e., health insurance) that your organization offers. KI-HIPP may benefit your organization in the following ways: Aid in retention by making your health insurance plans more affordable and more accessible to employees Facilitate access to care for employees and their families, contributing to a healthier and more productive workforce |
| Who is eligible for KI-HIPP? | Eligibility for KI-HIPP is based on the following criteria: Have a Medicaid member on the health insurance policy Have access or enrollment in one of the following types of medical insurance: Employer-Sponsored Insurance (ESI) |



| | Coverage through a United Mine Workers, Retiree Health Plan, or Consolidated Omnibus Budget Reconciliation Act (COBRA) There is a Prescreening Tool on kynect benefits (kynect.ky.gov/benefits) that allows employees to view their household's potential eligibility for state benefits before fully applying for KI-HIPP. The results from the Prescreening Tool do not guarantee KI-HIPP benefits. Additional information and resources for kynect benefits may be found on the <u>CHFS website</u> by searching "kynect benefits." |
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| If my company operates outside of Kentucky, are those employees eligible? | If your employee is a Kentucky resident works in another office outside of the state (e.g., Indiana), they may be eligible for KI-HIPP. However, employees who are residents of another state are not eligible for the KI-HIPP program. |
| Do all ESI plans qualify for KI-HIPP? | ESI plans at any tier of coverage (e.g., from employee only to family coverage) qualify for KI-HIPP if they are: Comprehensive (i.e., cover all ten essential health benefits) Cost-effective (i.e., cost less than what it would cost to cover the member through Medicaid) Compatible plans may include high-deductible plans. Please Note: The KI-HIPP Team determines if the plan meets these criteria when an employee submits a Summary of Benefits and Coverage and a Premium Rate Sheet (see enrollment process below). |
| What is the KI-HIPP enrollment process? | The enrollment process is completed in 4 easy steps: 1. Apply for KI-HIPP Individuals may complete a KI-HIPP application via: kynect benefits In-person with DCBS Over the phone with DCBS: 855- 306-8959 Email: kihipp.program@ky.gov Mail: CHFS KI-HIPP Unit 275 East Main Street, 6C-A Frankfort, KY 40621 2. Submit Documents Submit the following insurance documents: Summary of Benefits and Coverage (SBC) form Premium Rate Sheet 3. Enroll in an eligible health insurance plan After receiving the Health Insurance Plan Review notice, the individual must: Enroll in the eligible ESI plan (if not already) Submit a copy of their health insurance card Submit a recent paystub showing the health insurance premium deduction 4. Receive payment To stay enrolled and receive ongoing KI-HIPP payments, a member must: Pay health insurance premium Submit proof of premium payment to the KI-HIPP Team when notified |



| Can an employee apply outside of an employer's open enrollment period? | By federal regulation, determination of an employee's eligibility for a Medicaid HIPP program is a qualifying life event. This determination triggers a 60-day special enrollment period for eligible individuals to choose a qualifying group health insurance plan. Individuals will receive a dated Plan Compatibility Notice if the plan is found eligible for the program. The date on this notice is used to begin the 60-day special enrollment period. |
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| Are premium payments taxable income? | No, reimbursement payments made by the KI-HIPP program are not considered taxable income. |
| How can I support my employees in enrolling in the program? | Your HR or Benefits Manager can make the following documents for all available ESI plans readily available to aid your employees during the KI-HIPP enrollment process: Summary of Benefits and Coverage (SBC) form Premium Rate Sheet The SBC is a health insurance document that employees use to compare costs and coverages between health plans. The KI-HIPP Team needs the following information from the SBC to determine if the health insurance plan is compatible with the program: Type of deductible or max out of pocket type Deductible amount Max out of pocket amount Family deductible Family Max out of pocket Which services are covered Coinsurance and copay amounts for services Please Note : Since KI-HIPP members must submit proof of premium payment in order to receive KI-HIPP payments as reimbursement for the premiums, employers can ensure their employees have easy access to their paystubs. |
| If my employee is disenrolled from the KI-HIPP program, is that a qualifying event to end their ESI coverage? | It is at the employer's own discretion whether KI-HIPP disenrollment is considered a qualifying event. An employee may ask their employer to complete the "Loss of Medicaid or KI-HIPP eligibility as a Qualifying Event to End Coverage Form (KI-HIPP 024)." This form is found on the KI-HIPP webpage: • https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx |
| Where can I go for more information? | For additional information and resources for employers, you can visit the KI-HIPP webpage or contact the KI-HIPP Team directly: <u>https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx</u> kihipp.program@ky.gov |