**Kentucky Integrated Health Insurance Premium Payment (KI-HIPP) Program**  
**Frequently Asked Questions (FAQ) for Employers**

| **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 plans, which is the amount that the policy holder must pay each month 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 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 monthly 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.* |
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| **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 |
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| **Who is eligible for KI-HIPP?** | Eligibility for KI-HIPP is based on the following criteria:  
  • Have a Medicaid member on the policy  
  • Have access or enrollment in one of the following types of medical insurance:  
    o Employer-Sponsored Insurance (ESI) |
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<th>Question</th>
<th>Answer</th>
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<td>If my company operates in other states, are those employees also eligible?</td>
<td>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.</td>
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| 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 have cost to cover the member through Medicaid)  
Compatible plans may include high-deductible plans.  
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 the enrollment process below). |
| What is the KI-HIPP enrollment process?                                | An eligible member must follow the process below to enroll in KI-HIPP:  
1. Apply for KI-HIPP  
2. Submit Documents  
   Submit the following insurance documents:  
   - Premium Rate Sheet  
   - Summary of Benefits and Coverage (SBC)  
3. Enroll in Insurance Plan  
4. Receive Payment  
   To receive ongoing reimbursements, a member must:  
   - Pay the health insurance premium  
   - Submit a copy of their pay stub each pay period as proof of premium payment |
| 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.¹                                                                 |

¹ Section 701(f)(3) of the Employee Retirement Income Security Act (29 U.S. Code § 1181)
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<th><strong>Are premium payments taxable income?</strong></th>
<th>No, reimbursement payments made by the KI-HIPP program are not considered taxable income.</th>
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| **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  

**Note:** Since KI-HIPP members must submit proof of premium payment each pay period in order to receive reimbursement, employers can ensure their employees have easy access to their paystubs. |
| **Where can I go for more information?** | For additional information and resources for employers, you can visit the KI-HIPP webpage:  
  - [https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx](https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx) |