What do I need to do to stay enrolled in KI-HIPP?

ALL of the actions below must be taken in order to remain enrolled in KI-HIPP:

- Have a Medicaid member on the policy.
- Remain enrolled in Employer-Sponsored Insurance (ESI).
- Pay the health insurance premium.
- Submit a paystub when notified.

**Please Note:** If the actions listed above are not taken and KI-HIPP benefits are lost, the Medicaid member will stay enrolled in the ESI plan until they are disenrolled by the policy holder. The policy holder will no longer receive KI-HIPP payments that help pay the cost of ESI premiums.

How do I report a change?

If the Medicaid member on the policy has any changes that may impact **eligibility for Medicaid**, the member must “report a change” to the **Self-Service Portal** at kynect.ky.gov or contact DCBS at 855-306-8959. The Medicaid member must “report a change” if any of the changes below apply:

<table>
<thead>
<tr>
<th>Income</th>
<th>Employer</th>
<th>Health Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household Size</td>
<td>Address</td>
<td>Tax Filing Status</td>
</tr>
</tbody>
</table>

What happens if I am disenrolled from KI-HIPP?

If disenrolled from KI-HIPP due to **failure to submit requested documents** to the KI-HIPP Team, the policy holder will no longer receive premium payments and will be responsible to pay for the ESI plan.

For Medicaid members previously enrolled in a Managed Care Organization (MCO): If **ESI coverage is lost**, the Medicaid member will **transition back to an MCO**.

For more information, please review the KI-HIPP Member Handbook.