HIPP
The Health Insurance Premium Payment Program
For MO HealthNet Participants

WHAT IS THE HEALTH INSURANCE PREMIUM PAYMENT PROGRAM?
The Health Insurance Premium Payment (HIPP) Program is a MO HealthNet program that pays for a participant's share of cost of health insurance premium when it is cost effective. In addition, MO HealthNet will reimburse copays, coinsurance and deductibles charged to participants if the policy is paid by MO HealthNet.

WHAT DOES "COST EFFECTIVE" MEAN?
"Cost effective" means that it costs less to buy health insurance to cover medical care than to pay for the same services with only MO HealthNet funds.

WILL THE HIPP PROGRAM FIND HEALTH INSURANCE FOR ME?
No. The HIPP Program cannot find a health insurance policy for you. You may have health insurance available to you through an employer, a former employer, a labor union, a credit union, church affiliations, other organization, or an individual policy.

YOU MUST APPLY TO THE HIPP PROGRAM IF ALL OF THE FOLLOWING ARE TRUE:
• You or members of your household are applying for MO HealthNet or are MO HealthNet eligible;
• You or members of your household are employed or recently lost employment and are eligible for COBRA coverage;
• Your employer, or former employer, offers group health insurance coverage; and
• MO HealthNet determines the health insurance plan is cost-effective, you must participate in HIPP.

WHO CAN CHOOSE TO APPLY?
You can choose to apply to the HIPP program if you or a member of your household is applying for MO HealthNet or are MO HealthNet eligible and has health insurance available from sources other than your employer (personal policies, credit union, labor unions, church affiliations, other organization, etc.) If MO HealthNet decides the insurance plan is cost-effective, MO HealthNet will pay the premium.

HOW DO I APPLY?
Apply by completing the HIPP application form located at www.dss.mo.gov/mhd/participants/index.htm or at your local Family Support Division (FSD) office. You may also get a HIPP application by calling HIPP at (573) 751-2005 or by writing to:

Cost Recovery Unit
HIPP Section
P.O. Box 6500
Jefferson City, MO 65102-6500

If you or your dependents are not already enrolled in your health insurance plan, contact the HIPP program before enrolling. You must wait to enroll until it is determined to be cost effective for MO HealthNet to pay the premiums.
HOW WILL THE PREMIUMS BE PAID?
Whenever possible, the HIPP program will pay the premiums directly to the insurance company or your employer. If the premium is deducted from your pay check, the HIPP program will reimburse you directly for the payroll deduction made for health insurance.

HOW LONG WILL THE HIPP PROGRAM PAY FOR MY INSURANCE?
The HIPP program will continue to pay your health insurance as long as you are eligible for MO HealthNet and it is cost effective.

ARE MY MO HEALTHNET BENEFITS AFFECTED IF I'M IN HIPP?
Because you have group or private health insurance coverage paid by HIPP does not affect your MO HealthNet eligibility. The group or private health insurance is the primary payer; MO HealthNet will still pay for services covered under the MO HealthNet Program that are not paid by the insurance plan. If you choose to drop group health insurance coverage that MO HealthNet decides is cost effective and is paying for, you may lose your MO HealthNet benefits (13 CSR 70-97.010).

IF I HAVE MO HEALTHNET, WHY DO I WANT HEALTH INSURANCE?
The main reason MO HealthNet wants to buy group or private health insurance for people getting MO HealthNet is because it will help lower program costs. However, there are several reasons why having insurance may be good for you:
1. The policy may cover services that may not be covered under MO HealthNet.
2. Members of your family who are not eligible for MO HealthNet may be covered under the group or private health insurance plan when MO HealthNet decides that buying a family plan for eligible person(s) is cost effective.
3. You will have group or private health insurance available to you if you lose MO HealthNet eligibility. (However, you will be responsible for paying the premiums when you are not MO HealthNet eligible.)

WHAT ARE MY RESPONSIBILITIES?
- Inform your local FSD office of changes in your address, income or resources, household size, or any other change that may affect your MO HealthNet eligibility.
- Report any changes in your health insurance coverage to your local FSD office or directly to the HIPP program within ten days of the change. Changes that should be reported include a change in the amount of the premium, a change in the amount of the deductible, a change in the benefits or services covered by the policy, a change in the number of persons covered, or if the insurance is discontinued;
- Inform your medical providers of all third-party resources you have (Medicare, private health insurance, damage suits, MO HealthNet, etc.)
- Refund to MO HealthNet any money that you receive from a person or company to pay medical expenses that have been paid by MO HealthNet.