

## Operating Engineers Local 825 Fund Service Facilities

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CCC/IBT 1345-M

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July 2021

## Annual Notification of Assistance Available From States' Medicaid and/or CHIP Programs

Attached is a notice intended to provide you with information about premium assistance that may be available through your state's Medicaid and/or Children's Health Insurance Program (CHIP).

## Premium Assistance Under Medicaid and the Children's Health Insurance Program (CHIP)

If you or your children are eligible for Medicaid or CHIP and you're eligible for health coverage from your employer, your state may have a premium assistance program that can help pay for coverage, using funds from their Medicaid or CHIP programs. If you or your children aren't eligible for Medicaid or CHIP, you won't be eligible for these premium assistance programs but you may be able to buy individual insurance coverage through the Health Insurance Marketplace. For more information, visit **www.healthcare.gov**.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or **www.insurekidsnow.gov** to find out how to apply. If you qualify, ask your state if it has a program that might help you pay the premiums for an employer-sponsored plan.

If you or your dependents are eligible for premium assistance under Medicaid or CHIP, as well as eligible under your employer plan, your employer must allow you to enroll in your employer plan if you aren't already enrolled. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance**. If you have questions about enrolling in your employer plan, contact the Department of Labor at **www.askebsa.dol.gov** or call **1-866-444-EBSA (3272)**.

If you live in one of the following states, you may be eligible for assistance paying your employer health plan premiums. The following list of states is current as of January 31, 2021. Contact your State for more information on eligibility –

ALABAMA-Medicaid	CALIFORNIA-Medicaid
Website: <u>http://myalhipp.com/</u> Phone: 1-855-692-5447	Website: Health Insurance Premium Payment (HIPP) Program <u>http://dhcs.ca.gov/hipp</u> Phone: 916-445-8322 Email: <u>hipp@dhcs.ca.gov</u>
ALASKA-Medicaid	COLORADO-Health First Colorado (Colorado's Medicaid Program) & Child Health Plan Plus (CHP+)
The AK Health Insurance Premium Payment Program Website: <u>http://myakhipp.com/</u> Phone: 1-866-251-4861 Email: <u>CustomerService@MyAKHIPP.com</u> Medicaid Eligibility: <u>http://dhss.alaska.gov/dpa/Pages/medicaid/default.aspx</u>	Health First Colorado Website: <u>https://www.healthfirstcolorado.com/</u> Health First Colorado Member Contact Center: 1-800-221-3943/ State Relay 711 CHP+: <u>https://www.colorado.gov/pacific/hcpf/child-</u> <u>health-plan-plus</u> CHP+ Customer Service: 1-800-359-1991/ State Relay 711 Health Insurance Buy-In Program (HIBI): <u>https://www.colorado.gov/pacific/hcpf/health-insurance-</u> <u>buy-program</u> HIBI Customer Service: 1-855-692-6442
ARKANSAS-Medicaid Website: http://myarhipp.com/ Phone: 1-855-MyARHIPP (855-692-7447)	FLORIDA-Medicaid   Website: https://www.flmedicaidtplrecovery.com/flmedicaidtplrecov   ery.com/hipp/index.html Phone: 1-877-357-3268

GEORGIA-Medicaid	MASSACHUSETTS-Medicaid and CHIP
Website: https://medicaid.georgia.gov/health-insurance-	Website: https://www.mass.gov/info-details/masshealth-
premium-payment-program-hipp Phone: 678-564-1162 ext 2131	premium-assistance-pa Phone: 1-800-862-4840
INDIANA-Medicaid	MINNESOTA-Medicaid
Healthy Indiana Plan for low-income adults 19-64 Website: <u>http://www.in.gov/fssa/hip/</u> Phone: 1-877-438-4479 All other Medicaid Website: <u>https://www.in.gov/medicaid/</u> Phone 1-800-457-4584	Website: https://mn.gov/dhs/people-we-serve/children-and- families/health-care/health-care-programs/programs-and- services/other-insurance.jsp Phone: 1-800-657-3739
IOWA-Medicaid and CHIP (Hawki)	MISSOURI-Medicaid
Medicaid Website: <u>https://dhs.iowa.gov/ime/members</u> Medicaid Phone: 1-800-338-8366 Hawki Website: <u>http://dhs.iowa.gov/Hawki</u> Hawki Phone: 1-800-257-8563 HIPP Website: <u>https://dhs.iowa.gov/ime/members/medicaid-a-to-z/hipp</u> HIPP Phone: 1-888-346-9562	Website: http://www.dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 573-751-2005
KANSAS-Medicaid	MONTANA-Medicaid
Website: https://www.kancare.ks.gov/ Phone: 1-800-792-4884	Website: <u>http://dphhs.mt.gov/MontanaHealthcarePrograms/HIPP</u> Phone: 1-800-694-3084
KENTUCKY-Medicaid	NEBRASKA-Medicaid
Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website: https://chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx Phone: 1-855-459-6328 Email: <u>KIHIPP.PROGRAM@ky.gov</u> KCHIP Website:	Website: <u>http://www.ACCESSNebraska.ne.gov</u> Phone: 1-855-632-7633 Lincoln: 402-473-7000 Omaha: 402-595-1178
https://kidshealth.ky.gov/Pages/index.aspx Phone: 1-877-524-4718	
Kentucky Medicaid Website: https://chfs.ky.gov	
LOUISIANA-Medicaid	NEVADA-Medicaid
Website: <u>www.medicaid.la.gov</u> or <u>www.ldh.la.gov/lahipp</u> Phone: 1-888-342-6207 (Medicaid hotline) or 1-855-618- 5488 (LaHIPP)	Medicaid Website: <u>http://dhcfp.nv.gov</u> Medicaid Phone: 1-800-992-0900
MAINE-Medicaid	NEW HAMPSHIRE-Medicaid
Enrollment Website: <u>https://www.maine.gov/dhhs/ofi/applications-forms</u> Phone: 1-800-442-6003 TTY: Maine relay 711 Private Health Insurance Premium Webpage:	Website: <u>https://www.dhhs.nh.gov/oii/hipp.htm</u> Phone: 603-271-5218 Toll free number for the HIPP program: 1-800-852-3345, ext 5218
https://www.maine.gov/dhhs/ofi/applications-forms Phone: 1-800-977-6740 TTY: Maine relay 711	

NEW JERSEY-Medicaid and CHIP	SOUTH DAKOTA-Medicaid
Medicaid Website:	Website: http://dss.sd.gov
http://www.state.nj.us/humanservices/	Phone: 1-888-828-0059
dmahs/clients/medicaid/	
Medicaid Phone: 609-631-2392	
CHIP Website: <u>http://www.njfamilycare.org/index.html</u> CHIP Phone: 1-800-701-0710	
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NEW YORK-Medicaid	TEXAS-Medicaid
Website: https://www.health.ny.gov/health_care/medicaid/	Website: http://gethipptexas.com/
Phone: 1-800-541-2831	Phone: 1-800-440-0493
NORTH CAROLINA-Medicaid	UTAH-Medicaid and CHIP
Website: https://medicaid.ncdhhs.gov/	Medicaid Website: https://medicaid.utah.gov/
Phone: 919-855-4100	CHIP Website: http://health.utah.gov/chip
	Phone: 1-877-543-7669
NORTH DAKOTA-Medicaid	VERMONT-Medicaid
Website:	Website: http://www.greenmountaincare.org/
http://www.nd.gov/dhs/services/medicalserv/medicaid/	Phone: 1-800-250-8427
Phone: 1-844-854-4825	
OKLAHOMA-Medicaid and CHIP	VIRGINIA-Medicaid and CHIP
Website: http://www.insureoklahoma.org	Website: https://www.coverva.org/hipp/
Phone: 1-888-365-3742	Medicaid Phone: 1-800-432-5924
	CHIP Phone: 1-855-242-8282
OREGON-Medicaid	WASHINGTON-Medicaid
Website: http://healthcare.oregon.gov/Pages/index.aspx	Website: https://www.hca.wa.gov/
http://www.oregonhealthcare.gov/index-es.html	Phone: 1-800-562-3022
Phone: 1-800-699-9075	
PENNSYLVANIA-Medicaid	WEST VIRGINIA-Medicaid
Website:	Website: <u>http://mywvhipp.com/</u>
https://www.dhs.pa.gov/providers/Providers/Pages/Medica	Toll-free phone: 1-855-MyWVHIPP (1-855-699-8447)
<u>l/HIPP-Program.aspx</u> Phone: 1-800-692-7462	
1 Hold. 1-000-072-7402	
<b>RHODE ISLAND-Medicaid and CHIP</b>	WISCONSIN-Medicaid and CHIP
Website: http://www.eohhs.ri.gov/	Website:
Phone: 1-855-697-4347, or 401-462-0311 (Direct RIte	https://www.dhs.wisconsin.gov/badgercareplus/p-
Share Line)	<u>10095.htm</u>
	Phone: 1-800-362-3002
SOUTH CAROLINA-Medicaid	WYOMING-Medicaid
Website: https://www.scdhhs.gov	Website:
Phone: 1-888-549-0820	https://health.wyo.gov/healthcarefin/medicaid/programs-
	and-eligibility/
	Phone: 1-800-251-1269

To see if any other states have added a premium assistance program since January 31, 2021, or for more information on special enrollment rights, contact either:

U.S. Department of Labor Employee Benefits Security Administration www.dol.gov/agencies/ebsa 1-866-444-EBSA (3272) U.S. Department of Health and Human Services Centers for Medicare & Medicaid Services www.cms.hhs.gov 1-877-267-2323, Menu Option 4, Ext. 61565

## **Paperwork Reduction Act Statement**

According to the Paperwork Reduction Act of 1995 (Pub. L. 104-13) (PRA), no persons are required to respond to a collection of information unless such collection displays a valid Office of Management and Budget (OMB) control number. The Department notes that a Federal agency cannot conduct or sponsor a collection of information unless it is approved by OMB under the PRA, and displays a currently valid OMB control number, and the public is not required to respond to a collection of information unless it displays a currently valid OMB control number. See 44 U.S.C. 3507. Also, notwithstanding any other provisions of law, no person shall be subject to penalty for failing to comply with a collection of information if the collection of information does not display a currently valid OMB control number. See 44 U.S.C. 3512.

The public reporting burden for this collection of information is estimated to average approximately seven minutes per respondent. Interested parties are encouraged to send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Employee Benefits Security Administration, Office of Policy and Research, Attention: PRA Clearance Officer, 200 Constitution Avenue, N.W., Room N-5718, Washington, DC 20210 or email <u>ebsa.opr@dol.gov</u> and reference the OMB Control Number 1210-0137.

OMB Control Number 1210-0137 (expires 1/31/2023)