

PREMIUM ASSISTANCE UNDER MEDICAID AND THE CHILDREN'S HEALTH INSURANCE PROGRAM (CHIP)

ASEA Health Benefits Trust

Address: PO Box 5434, Spokane, WA 99205 • Phone: 866-553-8206 (toll-free); 509-328-0300
 Fax: 509-323-7614 • Website: www.aseahealth.org

If you or your children are eligible for Medicaid or CHIP and you are 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 are not 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, you can 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, you can 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, you can 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's plan, your employer must allow you to enroll in your employer's plan if you are not 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's plan, you can contact the Department of Labor at www.askebsa.dol.gov or by calling toll-free 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, 2026. You should contact your State for further information on eligibility:

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| ALABAMA—MEDICAID |
| Website: myalhipp.com Phone: 1-855-692-5447 |
| ALASKA—THE AK HEALTH INSURANCE PREMIUM PAYMENT PROGRAM |
| Website: myakhipp.com Phone: 1-866-251-4861 Email: CustomerService@MyAKHIPP.com Medicaid Eligibility: health.alaska.gov/en/division-of-public-assistance |
| ARKANSAS—MEDICAID |
| Website: myarhipp.com Phone: 1-855-MyARHIPP (855-692-7447) |
| CALIFORNIA—MEDICAID |
| Health Insurance Premium Payment (HIPP) Program Website: dhcs.ca.gov/hipp Phone: 916-445-8322 Fax: 916-440-5676 Email: hipp@dhcs.ca.gov |
| COLORADO—HEALTH FIRST COLORADO (COLORADO'S MEDICAID PROGRAM) & CHILD HEALTH PLAN PLUS (CHP+) |
| Health First Colorado Website: healthfirstcolorado.com Health First Colorado Member Contact Center: 1-800-221-3943/ State Relay 711 CHP+: hcpf.colorado.gov/chp CHP+ Customer Service: 1-800-359-1991/ State Relay 711 Health Insurance Buy-In Program (HIBI): mycohibi.com HIBI Customer Service: 1-855-692-6442 |

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| FLORIDA—MEDICAID |
| Website: flmedicaidtprecovery.com/flmedicaidtprecovery.com/hipp Phone: 1-877-357-3268 |
| GEORGIA—MEDICAID |
| Website: medicaid.georgia.gov/health-insurance-premium-payment-program-hipp Phone: 678-564-1162, press 1 GA CHIPRA Website: medicaid.georgia.gov/programs/third-partyliability/childrens-health-insurance-program-reauthorizationact-2009-chipra Phone: 678-564-1162, Press 2 |
| INDIANA—MEDICAID |
| Health Insurance Premium Payment Program All other Medicaid Website: www.in.gov/medicaid ; www.in.gov/fssa/dfr Family and Social Services Administration: Phone: 1-800-403-0864 Member Services Phone: 1-800-457-4584 |
| IOWA—MEDICAID AND CHIP (HAWKI) |
| Medicaid Website: hhs.iowa.gov/medicaid Medicaid Phone: 1-800-338-8366 Hawki Website: hhs.iowa.gov/medicaid/plans-programs/hawki Hawki Phone: 1-800-257-8563 HIPP Website: hhs.iowa.gov/medicaid/plans-programs/fee-service/health-insurance-premium-payment-program HIPP Phone: 1-888-346-9562 |

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| KANSAS—MEDICAID |
| Website: kancare.ks.gov Phone: 1-800-792-4884 HIPP Phone: 1-800-967-4660 |
| KENTUCKY—MEDICAID |
| Kentucky Integrated Health Insurance Premium Payment Program (KI-HIPP) Website: chfs.ky.gov/agencies/dms/member/Pages/kihipp.aspx Phone: 1-855-459-6328 Email: KIHIPPPROGRAM@ky.gov KCHIP Website: kynect.ky.gov Phone: 1-877-524-4718 Kentucky Medicaid Website: chfs.ky.gov/agencies/dms/Pages/default.aspx |
| LOUISIANA—MEDICAID |
| Louisiana Medicaid Website: ldh.la.gov/healthy-louisiana Medicaid Customer Service Line: 1-888-342-6207 Louisiana Medicaid email: healthy@la.gov Louisiana Health Insurance Premium Program (LaHIPP) Website: ldh.la.gov/lahipp LaHIPP phone: 1-877-697-6703 LaHIPP email: La.HIPP@la.gov LaHIPP fax: 1-888-716-9787 LaHIPP mailing address: 100 Crescent Centre Parkway, Suite 1000 Tucker, GA 30084 |
| MAINE—MEDICAID |
| Enrollment Website: www.mymaineconnection.gov/benefits Phone: 1-800-442-6003 TTY: Maine relay 711 Private Health Insurance Premium Website: maine.gov/dhhs/ofi/applications-forms Phone: 1-800-977-6740 TTY: Maine relay 711 |
| MASSACHUSETTS—MEDICAID AND CHIP |
| Website: mass.gov/info-details/masshealth-premium-assistance-pa Phone: 1-800-862-4840 TTY: 711 Email: masspreassistance@accenture.com |
| MINNESOTA—MEDICAID |
| Website: mn.gov/dhs/health-care-coverage Phone: 1-800-657-3672 |
| MISSOURI—MEDICAID |
| Website: dss.mo.gov/mhd/participants/pages/hipp.htm Phone: 573-751-2005 |
| MONTANA—MEDICAID |
| Website: dphhs.mt.gov/MontanaHealthcarePrograms/HIPP Phone: 1-800-694-3084 Email: HSHIPPProgram@mt.gov |

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| NEBRASKA—MEDICAID |
| Website: dhhs.ne.gov/pages/accessnebraska.aspx Phone: 1-855-632-7633 Lincoln: 402-473-7000 Omaha: 402-595-1178 |
| NEVADA—MEDICAID |
| Medicaid Website: dhcfp.nv.gov Medicaid Phone: 1-800-992-0900 |
| NEW HAMPSHIRE—MEDICAID |
| Website: dhhs.nh.gov/programs-services/medicaid/health-insurance-premium-program Phone: 603-271-5218 Toll free number for the HIPP program: 1-800-852-3345, ext. 15218 Email: DHHS.ThirdPartyLiabi@dhhs.nh.gov |
| NEW JERSEY—MEDICAID AND CHIP |
| Medicaid Website: state.nj.us/humanservices/dmahs/clients/medicaid Phone: 1-800-356-1561 CHIP Premium Assistance Phone: 609-631-2392 CHIP Website: njfamilycare.org/index.html CHIP Phone: 1-800-701-0710 TTY: 711 |
| NEW YORK—MEDICAID |
| Website: health.ny.gov/health_care/medicaid Phone: 1-800-541-2831 |
| NORTH CAROLINA—MEDICAID |
| Website: medicaid.ncdhhs.gov Phone: 919-855-4100 |
| NORTH DAKOTA—MEDICAID |
| Website: hhs.nd.gov/healthcare Phone: 1-844-854-4825 |
| OKLAHOMA—MEDICAID AND CHIP |
| Website: insureoklahoma.org Phone: 1-888-365-3742 |
| OREGON—MEDICAID |
| Website: healthcare.oregon.gov/Pages/index.aspx Phone: 1-800-699-9075 |
| PENNSYLVANIA—MEDICAID |
| Website: pa.gov/services/dhs/apply-for-medicaid-health-insurance-premium-payment-program-hipp Phone: 1-800-692-7462 CHIP Website: pa.gov/agencies/dhs/resources/chip CHIP Phone: 1-800-986-KIDS (5437) |
| RHODE ISLAND—MEDICAID AND CHIP |
| Website: www.eohhs.ri.gov Phone: 1-855-697-4347, or 401-462-0311 (Direct Rite Share Line) |

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| SOUTH CAROLINA—MEDICAID |
| Website: www.scdhhs.gov Phone: 1-888-549-0820 |
| SOUTH DAKOTA—MEDICAID |
| Website: dss.sd.gov Phone: 1-888-828-0059 |
| TEXAS—MEDICAID |
| Website: hhs.texas.gov/services/financial/health-insurance-premium-payment-hipp-program Phone: 1-800-440-0493 |
| UTAH—MEDICAID AND CHIP |
| Utah's Premium Partnership for Health Insurance (UPP) Website: medicaid.utah.gov/upp Email: upp@utah.gov Phone: 1-888-222-2542 Adult Expansion Website: medicaid.utah.gov/expansion Utah Medicaid Buyout Program Website: medicaid.utah.gov/buyout-program CHIP Website: chip.utah.gov |
| VERMONT— MEDICAID |
| Website: dvha.vermont.gov/members/medicaid/hipp-program Phone: 1-800-250-8427 |
| VIRGINIA—MEDICAID AND CHIP |
| Website: coverva.dmas.virginia.gov/learn/premium-assistance/famis-select ; coverva.dmas.virginia.gov/learn/premium-assistance/health-insurance-premium-payment-hipp-programs Medicaid/CHIP Medicaid/CHIP Phone: 1-800-432-5924 |
| WASHINGTON—MEDICAID |
| Website: www.hca.wa.gov Phone: 1-800-562-3022 |
| WEST VIRGINIA—MEDICAID |
| Website: mywvhipp.com ; dhr.wv.gov/bms CHIP Toll-free Phone: 1-855-MyWVHIPP (1-855-699-8447) Medicaid Phone: 304-558-1700 CHIP Toll-free phone: 1-855-MyWVHIPP (1-855-699-8447) |
| WISCONSIN—MEDICAID AND CHIP |
| Website: dhs.wisconsin.gov/badgercareplus/p-10095.htm Phone: 1-800-362-3002 |
| WYOMING—MEDICAID |
| Website: health.wyo.gov/healthcarefin/medicaid/programs-and-eligibility Phone: 1-800-251-1269 |

To see if any more States have added a premium assistance program since January 31, 2026, or for more information on special enrollment rights, you can 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 ebsa.opr@dol.gov and reference the OMB Control Number 1210-0137.