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CHIPRA Required Notice for Your Employees

President Obama signed into law the Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA) to extend and expand the State Children's Health Insurance Program (CHIP).

GuideStone® modified its procedures effective April 1, 2009, to comply with CHIPRA's requirement to add special enrollment rights for participants and their children when:

- There is a loss of coverage under Medicaid or CHIP or
- The employee or dependents become eligible under Medicaid or CHIP for state premium assistance to purchase coverage under the employer's group health plan.

Premium assistance programs use federal and state CHIP and Medicaid funds to help subsidize the purchase of group health coverage for children (and, in some circumstances, family members) who have access to employer-sponsored coverage but may need assistance in paying for their premiums.

What does this mean to employers?

CHIPRA requires that employers maintaining group health plans in states that provide medical assistance through either Medicaid or a CHIP program must provide a notice to employees to inform them of the potential opportunities for premium assistance in their state.

The attached notice is provided by the U.S. Department of Labor's Employee Benefits Security Administration. You should also check with your state Medicaid or CHIP program office to determine whether the additional state program information must be included in the notice.

Because your health plans renew each January 1, your notice must be provided with the annual re-enrollment materials for the next plan year.

This information was compiled on January 31, 2018. It will be updated as new information becomes available.

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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 visit 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, 2018. Contact your state for more information on eligibility:

ALABAMA – Medicaid	ALASKA – Medicaid
<p>Website: http://myalbipp.com/ Phone: 1-855-692-5447</p>	<p>The AK Health Insurance Premium Payment Program Website: http://myakbipp.com/ Phone: 1-866-251-4861 Email: CustomerService@MyAKHIPP.com Medicaid Eligibility: http://dbss.alaska.gov/dpa/Pages/medicaid/default.aspx</p>
ARKANSAS – Medicaid	COLORADO – Health First Colorado (Colorado’s Medicaid Program) & Child Health Plan Plus (CHP+)
<p>Website: http://myarbipp.com/ Phone: 1-855-MyARHIPP (1-855-692-7447)</p>	<p>Health First Colorado Website: https://www.healthfirstcolorado.com/ Health First Colorado Member Contact Center: Phone: 1-800-221-3943/State Relay 711 CHP+: Colorado.gov/HCPF/Child-Health-Plan-Plus CHP+ Customer Service: 1-800-359-1991/State Relay 711</p>
FLORIDA – Medicaid	GEORGIA – Medicaid
<p>Website: http://flmedicaidtplrecovery.com/bipp/ Phone: 1-877-357-3268</p>	<p>Website: http://dcb.georgia.gov/medicaid Click on Health Insurance Premium Payment (HIPP) Phone: (404) 656-4507</p>
INDIANA – Medicaid	IOWA – Medicaid
<p>Healthy Indiana Plan for Low-income Adults 19–64 Website: http://www.in.gov/fssa/bip/ Phone: 1-877-438-4479 All Other Medicaid Website: http://www.indianamedicaid.com Phone: 1-800-403-0864</p>	<p>Website: http://dbs.iowa.gov/ime/members/medicaid-a-to-z/bipp Phone: 1-888-346-9562</p>
KANSAS – Medicaid	KENTUCKY – Medicaid
<p>Website: http://www.kdbeks.gov/bcf/ Phone: (785) 296-3512</p>	<p>Website: https://kidshealth.ky.gov/Pages/index.aspx Phone: 1-800-635-2570</p>
LOUISIANA – Medicaid	MAINE – Medicaid
<p>Website: http://dbb.louisiana.gov/index.cfm/subhome/1/n/331 Phone: 1-888-695-2447</p>	<p>Website: http://www.maine.gov/dbbs/ofc/public-assistance/index.html Phone: 1-800-442-6003 TTY: Maine relay 711</p>

MASSACHUSETTS – Medicaid and CHIP	MINNESOTA – Medicaid
Website: http://www.mass.gov/eohhs/gov/departments/masshealth/ Phone: 1-800-862-4840	Website: http://mn.gov/dhs/people-we-serve/seniors/health-care/health-care-programs/programs-and-services/medical-assistance.jsp Phone: 1-800-657-3739
MISSOURI – Medicaid	MONTANA – Medicaid
Website: http://www.dss.mo.gov/mbd/participants/pages/bipp.btm Phone: (573) 751-2005	Website: https://www.benefits.gov/benefits/benefit-details/1633 Phone: 1-800-694-3084
NEBRASKA – Medicaid	NEVADA – Medicaid
Website: http://www.ACCESSNebraska.ne.gov Phone: 1-855-632-7633 Lincoln: (402) 473-7000 Omaha: (402) 595-1178	Medicaid Website: https://dwss.nv.gov/Medical/1_0_Apply_for_Assistance/ Medicaid Phone: 1-800-992-0900
NEW HAMPSHIRE – Medicaid	NEW JERSEY – Medicaid and CHIP
Website: https://www.dhhs.nh.gov/ombp/nbbpp/ Phone: (603) 271-5218 Hotline: NH Medicaid Service Center at 1-888-901-4999	Medicaid Website: http://www.state.nj.us/humanservices/dmabs/clients/medicaid/ Medicaid Phone: (609) 631-2392 CHIP Website: http://www.njfamilycare.org/default.aspx CHIP Phone: 1-800-701-0710
NEW YORK – Medicaid	NORTH CAROLINA – Medicaid
Website: http://www.nyhealth.gov/health_care/medicaid/ Phone: 1-800-541-2831	Website: https://dma.ncdhhs.gov/ Phone: (919) 855-4100
NORTH DAKOTA – Medicaid	OKLAHOMA – Medicaid and CHIP
Website: http://www.nd.gov/dhs/services/medicalsev/medicaid/ Phone: 1-844-854-4825	Website: http://www.insureoklahoma.org Phone: 1-888-365-3742
OREGON – Medicaid	PENNSYLVANIA – Medicaid
Website: http://healthcare.oregon.gov/Pages/index.aspx http://www.oregonhealthcare.gov/index-es.html Phone: 1-800-699-9075	Website: http://www.dhs.pa.gov/provider/medicalassistance/healthinsurancepremiumpaymentbippprogram/index.btm Phone: 1-800-692-7462
RHODE ISLAND – Medicaid	SOUTH CAROLINA – Medicaid
Website: http://www.eohhs.ri.gov/ Phone: 1-855-697-4347	Website: http://www.scdhhs.gov Phone: 1-888-549-0820
SOUTH DAKOTA – Medicaid	TEXAS – Medicaid
Website: http://dss.sd.gov Phone: 1-888-828-0059	Website: http://getbipptexas.com/ Phone: 1-800-440-0493
UTAH – Medicaid and CHIP	VERMONT – Medicaid
Medicaid Website: https://medicaid.utah.gov CHIP Website: http://health.utah.gov/cbip Phone: 1-877-543-7669	Website: http://www.greenmountaincare.org/ Phone: 1-800-250-8427
VIRGINIA – Medicaid and CHIP	WASHINGTON – Medicaid
Medicaid Website: http://www.coverva.org/programs_premium_assistance.cfm Medicaid Phone: 1-800-432-5924 CHIP Website: http://www.coverva.org/programs_premium_assistance.cfm CHIP Phone: 1-855-242-8282	Website: http://www.bca.wa.gov/free-or-low-cost-health-care/program-administration/premium-payment-program Phone: 1-800-562-3022 ext. 15473
WEST VIRGINIA – Medicaid	WISCONSIN – Medicaid and CHIP
Website: http://mywvbipp.com/ Phone: 1-877-598-5820, HMS Third Party Liability	Website: https://www.dhs.wisconsin.gov/publications/p1/p10095.pdf Phone: 1-800-362-3002
WYOMING – Medicaid	
Website: https://health.wyo.gov/healthcarefin/medicaid/ Phone: (307) 777-7531	

To see if any other states have added a premium assistance program since January 31, 2018, 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 ebsa.opr@dol.gov and reference the OMB Control Number 1210-0137.

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