

Division of Specialized Care for Children

HIPP Program Tip Sheet

The Health Insurance Premium Payment (HIPP) Program pays health insurance premiums for some children who have high medical costs and who have private health insurance available. The health insurance the participant is eligible for must be cost-effective. The insurance can be available directly to the participant or through someone else, such as a parent. The child must have Medicaid and private insurance at the time of application.

HIPP is available if the child has a serious illness or disease.

HIPP is available to all children receiving cash or medical insurance except for the following:

- Participants enrolled in spend down
- Qualified Medicare Beneficiaries (QMB) only
- Specified Low-Income Medicare Beneficiaries (SLIB) only
- · Participants of long-term care facilities or
- Participants enrolled in a health plan as required by a child support order

The Third Party Liability Section of the Bureau of Collections (BOC) runs HIPP. The BOC decides the cost-effectiveness of each health insurance policy on a case-by-case basis. When the health plan is cost-effective, the Illinois Department of Healthcare and Family Services (HFS) pays the premium for the child to one of the following:

- · Health insurance carrier
- Employer
- Union or other organization
- Participant (reimbursement only)

To apply for the HIPP Program, you will need:

- 1) Physician's statement describing the child's condition and diagnoses. Please see our <u>Physician Letter of Medical Necessity Examples</u> for reference.
- 2) Explanations of Benefits (EOB) statements from your insurance company from the last six months
- 3) Copy of the front and back of the insurance card
- 4) The address where the premiums should be sent

This packet should be mailed to: HIPP Unit, P.O. Box 19149, Springfield, IL 62794. The HIPP Hotline is (217) 524-8268.

You can also email everything to hfs.boc.hipp@illinois.gov. Note you will still have to mail your original signed application. The approval will have a start date of when you sign the application, even though it may take 30 or so days for your application to process. Make sure to include your child's name and Medicaid Recipient ID# when you send the email.

Contact us at **(800) 322-3722** for questions or for more information!

Visit our web page at dscc.uic.edu.

