



The purpose of this training is to educate and teach application center staff about the Louisiana Health Insurance Premium Program (LaHIPP) and the benefits it provides to Medicaid-eligible members with Employee-Sponsored Insurance (ESI) or Individual Health Insurance (ISI).

What is LaHIPP?

History of LaHIPP

On April 20, 2017, Louisiana reinstated the LaHIPP program to help pay some or all of the health insurance premiums for Medicaid members and their families.

LaHIPP reduces Medicaid spending by making the ESI or ISI the primary payer of the Medicaid beneficiary's medical expenses, so Medicaid only pays after that third party liability (TPL) has met its legal obligation.



How does LaHIPP Work?

LaHIPP:

Reimburses:

- The policyholder pays their insurance premium through payroll deduction or directly to their insurance provider. LDH then issues a monthly **reimbursement check** to the policyholder for the amount deducted or paid.

Covers:

- Medicaid **covers** insurance co-payments and deductibles, if the enrollee's provider is in the health insurance plan's network and accepts Medicaid as a secondary payer, and the enrollee follows all plan guidelines.

Gives Access:

- **Access** to a larger network of providers, including many specialist.

Pays

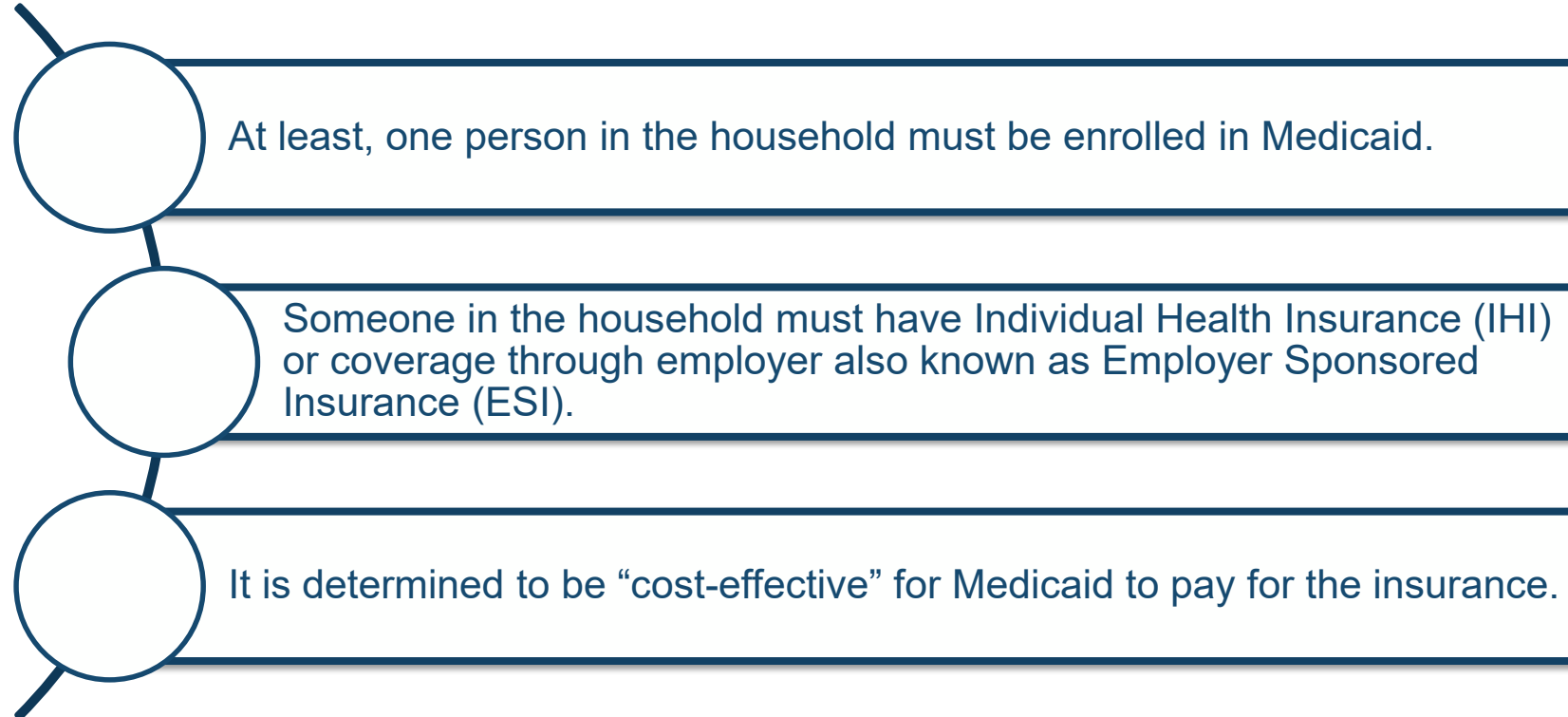
- Medicaid will **pay** for health services that the beneficiaries insurance does not cover.

Qualifying Event:

- Acceptance to LaHIPP is considered a **Qualifying Event**. Employees can add family member to their policies outside of open enrollment.

How to qualify for LaHIPP?

To Qualify for LaHIPP



What is Cost-Effective?

Cost-effective vs. Not cost-effective

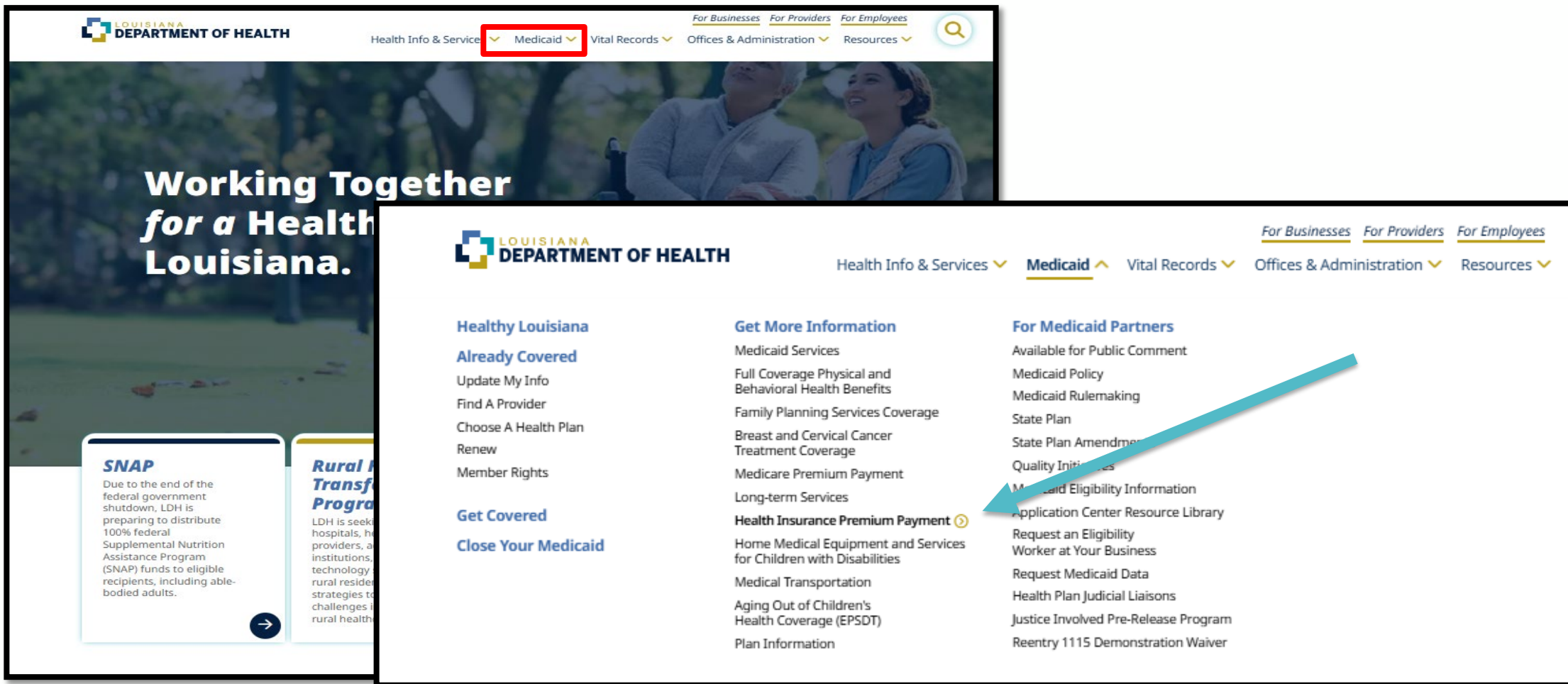


Cost effective- An Employer Sponsored Insurance (ESI) is cost effective if it would “**cost less**” for Louisiana Medicaid to pay the health insurance premium, wrap around costs (i.e.co-pay fees) and administrative fees for the Medicaid recipient than it would be to pay the Per Member Per Month (PMPM) fixed rate to provide Medicaid benefits and services to enrolled members

Not Cost Effective- An Employer Sponsored Insurance (ESI) is not cost-effective if it would “**cost more**” for Louisiana Medicaid to pay the health insurance premium, wrap around costs (i.e.co-pay fees) and administrative fees for the Medicaid recipient than it would be to pay the Per Member Per Month (PMPM) fixed rate to provide Medicaid benefits and services to enrolled members.

How to apply for LaHIPP?

How to apply for LaHIPP?



The screenshot shows the Louisiana Department of Health website. The top navigation bar includes the department logo, a search icon, and links for 'For Businesses', 'For Providers', and 'For Employees'. The main menu is open, showing 'Health Info & Services' (highlighted with a red box), 'Vital Records', 'Offices & Administration', and 'Resources'. The 'Medicaid' link is also highlighted with a red box. A blue arrow points to the 'Medicaid Eligibility Information' link in the 'For Medicaid Partners' section.

Working Together for a Healthier Louisiana.

Healthy Louisiana

- Already Covered
- Update My Info
- Find A Provider
- Choose A Health Plan
- Renew
- Member Rights

Get Covered

Close Your Medicaid

Get More Information

- Medicaid Services
- Full Coverage Physical and Behavioral Health Benefits
- Family Planning Services Coverage
- Breast and Cervical Cancer Treatment Coverage
- Medicare Premium Payment
- Long-term Services
- Health Insurance Premium Payment ⓘ
- Home Medical Equipment and Services for Children with Disabilities
- Medical Transportation
- Aging Out of Children's Health Coverage (EPSDT)
- Plan Information

For Medicaid Partners

- Available for Public Comment
- Medicaid Policy
- Medicaid Rulemaking
- State Plan
- State Plan Amendment
- Quality Initiatives
- Medicaid Eligibility Information
- Application Center Resource Library
- Request an Eligibility Worker at Your Business
- Request Medicaid Data
- Health Plan Judicial Liaisons
- Justice Involved Pre-Release Program
- Reentry 1115 Demonstration Waiver

SNAP

Due to the end of the federal government shutdown, LDH is preparing to distribute 100% federal Supplemental Nutrition Assistance Program (SNAP) funds to eligible recipients, including able-bodied adults.

Rural Health Transformation Program

LDH is seeking hospitals, health providers, academic institutions, technology, and rural residents to address challenges in rural health.

How to apply for LaHIPP?



🏠 > Medicaid > Get More Information > LaHIPP

LaHIPP



Overview

The Louisiana Health Insurance Premium Payment (LaHIPP) Program helps eligible individuals and families save money on health coverage. If you qualify, LaHIPP can reimburse your employer-sponsored or individual health insurance premiums, along with paying for your co-pays, co-insurance, and deductibles.

<https://www.ldh.la.gov/lahipp>

How to apply for LaHIPP?

Apply for LaHIPP

[Apply Online](#)

or

[Download an Application](#)

Complete the downloaded application and submit by:

Email La.HIPP@la.gov

Fax: 1(888) 716-9787

Mail to:

Attn: LaHIPP

100 Crescent Centre Parkway, Ste 1000

Tucker, GA 30084

Apply here

Download an
Application

Forms, flyers, and applications can be downloaded from the LaHIPP website.

Forms

MORE INFO

LaHIPP Flyer

LaHIPP Flyer (Spanish)

LaHIPP Flyer (Vietnamese)

Application

Renewal

EFT Form

Health Insurance Information Form

W9

Download a LAHIPP Flyer



The Louisiana Health Insurance Premium Payment Program

LOUISIANA
DEPARTMENT OF HEALTH



What is LaHIPP?

The Louisiana Health Insurance Premium Payment Program (LaHIPP) can help pay for your individual or your employer sponsored health insurance premium if you or a family member has Medicaid.

LaHIPP membership has no cost and will not change Medicaid eligibility.

How do I apply for LaHIPP?

Step 1: Complete the LAHIPP application. Visit the LaHIPP website at www.la.gov/lahipp to apply online or to download an application and submit by fax, email or mail. Be sure you sign page 3 of the form agreeing that you understand the program and will comply with the program's guidelines.

Step 2: Have your employer complete and submit the LaHIPP Health Insurance Information Form. You can find this form on pages 5, 6 and 7 of the LaHIPP application or download a stand-alone copy from the LaHIPP website.

Step 3: If you qualify, LaHIPP will start reimbursing your monthly premium. If you are not already enrolled in your employer's health insurance plan, you must enroll and begin paying the monthly premium to receive your reimbursement.

What happens after I am enrolled in LaHIPP?

- After you pay your medical premiums, LaHIPP will pay you back the following month.
- You will no longer receive health services through a Medicaid managed care health plan.
- Bring both your Medicaid card and health insurance card to your doctor visit.
- Keep copies of your Explanation of Benefits (EOB) or paid claims forms to support expenses related to medical conditions or ongoing treatment.
- Contact the LaHIPP Office if your Medicaid eligibility, insurance coverage, or employment status changes.

* If you are receiving health insurance through COBRA or other on a basis of spouse and the reimbursement method is not possible, LaHIPP can pay premiums directly to your employer or insurance provider.

What are the benefits of participating in LaHIPP?

- Medicaid will pay for health services that your insurance does not cover.
- Access to a larger network of providers, including many specialists.
- Coverage applies to you and any family members who have Medicaid.

Contact Us

Phone: 1-877-697-6703
Fax: 1-888-716-9787
Email: LaHIPP@la.gov
Mail: 100 Crescent Centre
Parkway Suite 1000
Baton Rouge, LA 70801



Do you have questions or need help filling out the LaHIPP application?

We're here to help you Monday to Friday between 8 a.m. and 4:30 p.m.

Want to learn more?

Visit www.la.gov/lahipp for more information

LaHIPP Application

  BHSF Form LaHIPP
Renewal Rev. 2/2023

APPLICATION FOR THE LOUISIANA HEALTH INSURANCE PREMIUM PAYMENT PROGRAM
Medicaid Assistance with Paying Insurance Premiums

- Fill out this application to see if you qualify for the Louisiana Health Insurance Premium Payment (LaHIPP) Program. LaHIPP may help pay some or all of the health insurance premiums to the policyholder if someone in the family is eligible for private health insurance through a job or an individual plan and has Medicaid.
- If you need extra space, use a separate sheet of paper.
- If you have any questions, call 1-877-697-6703 Monday-Friday between 8:00 AM-5:00 PM to speak with a LaHIPP representative, or visit us online at our website [www.ldh.la.gov/LaHIPP](http://ldh.la.gov/LaHIPP).
- Complete and mail this application to Attn: LaHIPP, 100 Crescent Centre Parkway, Suite 1000, Tucker, GA 30084 or fax it to 1-888-716-9787. You can also e-mail a copy of this application to La.HIPP@la.gov.

How did you hear about LaHIPP? _____

What is your preferred language? ☐ English ☐ Spanish ☐ Vietnamese ☐ Other: _____

► Please **PRINT** clearly in black ink.

1 — Policyholder Personal Information


First name	Middle initial	Last name	Suffix (Sr., Jr., etc.)
Social Security number		Date of birth	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female

2 — Policyholder Contact Information

Mailing Address		Home Address (if different)	
P.O. box or street address		Apt/Lot #	Street address
City		State	Zip
City		State	Zip
E-mail address		Home parish (where you live)	
Cell phone	Home phone	Other phone	
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Questions? 1-877-697-6703 Page | 1

Insurance Information Form for the Employer

  BHSF Form LaHIPP
HI Information Rev. 2/2023

THE LOUISIANA HEALTH INSURANCE PREMIUM PAYMENT PROGRAM
Health Insurance Information Form

- This form **MUST** be completed by the entity providing health insurance to the LaHIPP applicant, in order to make a final determination of eligibility for health insurance premium reimbursement. Although some information may not relate to the applicant or they may not currently have health insurance, this information is still needed.
- If you need extra space, use a separate sheet of paper.
- If you have any questions, call 1-877-697-6703 Monday-Friday between 8:00 AM-5:00 PM to speak with a LaHIPP representative, or visit us online at our website <http://ldh.la.gov/la hipp>.
- Complete and mail this form to Attn: LaHIPP, 100 Crescent Centre Pkwy, Suite 1000, Tucker, GA 300084 or fax it to 1-888-716-9787. You can also e-mail a copy of this form to La.HIPP@la.gov.

► Please **PRINT** clearly in black ink.



1 — Employer's Information

Employer name	Employer phone number ()
Employer address	Employer Federal Tax ID (mandatory)

2 — Insurance Carrier Information

Insurance carrier name	Insurance carrier phone number ()
Insurance carrier address	Insurance carrier fax number (if applicable) ()
Are multiple plans offered by this insurance carrier? <input type="checkbox"/> Yes <input type="checkbox"/> No (Please submit a summary of benefits for all plans with this form)	
Is there an Open/Annual Enrollment Period? <input type="checkbox"/> Yes <input type="checkbox"/> No	If NO, when would changes to insurance go into effect?
If YES, what are the dates for this period? Begin date: End date:	When would changes to insurance go into effect for this period?

LaHIPP Renewal

  BHSF Form LaHIPP
Renewal Rev. 2/2023

THE LOUISIANA HEALTH INSURANCE PREMIUM PAYMENT PROGRAM RENEWAL APPLICATION
Medicaid Assistance with Paying Insurance Premiums

- Fill out this application to see if you are qualified to continue receiving assistance from the Louisiana Health Insurance Premium Payment (LaHIPP) Program. LaHIPP may continue to help pay some or all of the health insurance premiums to the policyholder if someone in the family is eligible for private health insurance through a job or an individual plan and has Medicaid.
- If you need extra space, use a separate sheet of paper.
- If you have any questions, call 1-877-697-6703 Monday-Friday between 8:00 AM-5:00 PM to speak with a LaHIPP representative, or visit us online at our website <http://ldh.la.gov/la hipp>.
- Complete and mail this application to Attn: LaHIPP, 100 Crescent Centre Pkwy, Suite 1000, Tucker, GA 300084 or fax it to 1-888-716-9787. You can also e-mail a copy of this application to La.HIPP@la.gov.

What is your preferred language? ☐ English ☐ Spanish ☐ Vietnamese ☐ Other: _____

► Please **PRINT** clearly in black ink.

1 — Policyholder Personal Information

First name	Middle initial	Last name	Suffix (Sr., Jr., etc.)
Social Security number		Date of birth	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female

2 — Policyholder Contact Information

Mailing Address		Home Address (if different)	
P.O. box or street address		Apt/Lot #	Street address
City		State	Zip
City		State	Zip
E-mail address		Home parish (where you live)	
Cell phone	Home phone	Other phone	
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Questions? 1-877-697-6703 Page | 1

What should you do if Open Enrollment closes?

HIPAA Special Enrollment

Children's Health Insurance Program Reauthorization Act (CHIPRA)

Under the Children's Health Insurance Program Reauthorization Act of 2009 (CHIPRA), group health plans and group health insurance issuers must offer special enrollment opportunities. Plans and issuers must permit employees and dependents who are eligible for, but not enrolled in, a group health plan to enroll in the plan upon:

- losing eligibility for coverage under a State Medicaid or CHIP program, or
- becoming eligible for State premium assistance under Medicaid or CHIP.

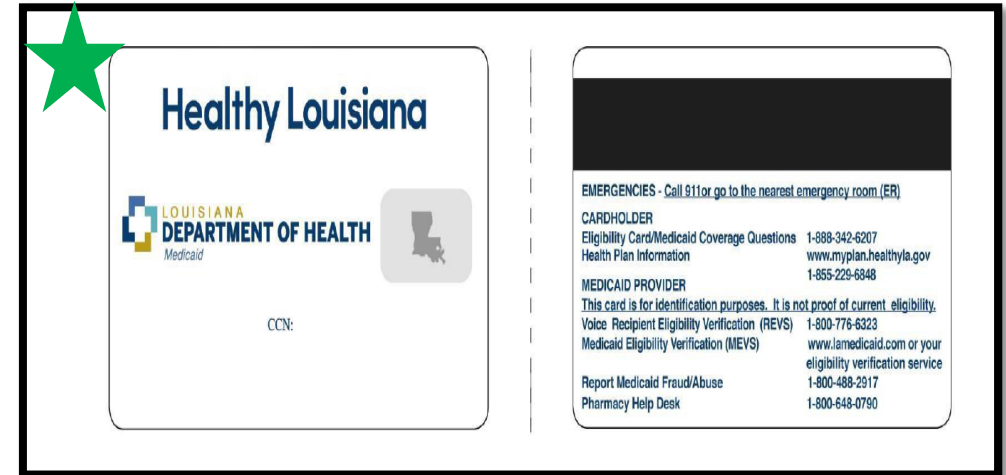
The employee or dependent must request coverage within 60 days of being terminated from Medicaid or CHIP coverage or within **60 days of being determined to be eligible for premium assistance.**

[CHIPRA](#)

What happens when approved for LaHIPP?

Approved!

1. After the beneficiary pays their premium, LaHIPP reimburses the following month.
2. The beneficiary no longer receives service through the managed care organization (MCO) health plan, but is now **fee-for-service.**
 - a) The only services covered through the MCO plan are behavioral health and dental plans.
 - b) Beneficiaries certified under LaHIPP who are not eligible for Medicaid are responsible for their co-payments and deductibles.
3. The beneficiary will use their employee-sponsored or individual insurance card as Primary and use their Medicaid card as secondary payer.
 - a) The beneficiary can no longer use the MCO plan card at the doctor's office, but can request a new Medicaid card if they no longer have their Healthy Louisiana Card.
 - b) To request a new card call the Medicaid Customer Service number at 1-888-342-6207.
4. Federal regulations require many employers to offer COBRA benefits to former employees if the employee was covered under insurance at the time that the employment ended.
 - a) LaHIPP reviews information provided by COBRA administrators to determine if it is cost-effective for Medicaid to pay the COBRA premium and if so, pays the premium directly to the COBRA administrator



How can you help?

Spread the Word!



If an applicant has employee sponsored insurance or Individual health insurance inform them of LaHIPP.

They do not have to cancel their insurance.

Provide the applicant with a copy of the flyer to apply once they are approved for Medicaid.

Explain to the applicant to keep copies of their Explanation of Benefits (EOB) or paid claims forms to support expenses related to medical conditions or ongoing treatment.

A LaCHIP or BCC applicant/beneficiary may have insurance coverage if purchased by the LaHIPP program. If Medicaid is paying the premium through the LaHIPP program, the insurance is not considered creditable health insurance and does not affect the LaCHIP or BCC eligibility.

Any Questions?



LaHIPP@LA.GOV
Thank You!