NOTICE TO TERMINATING EMPLOYEES
Health Insurance Premium Payment (HIPP) Program

The California Department of Health Care Services will pay health insurance premiums for certain persons who are losing employment and have a medical condition that requires a physician’s treatment. In order to qualify for the Health Insurance Premium Payment (HIPP) Program, you must meet all of the following conditions:

1. Applicant must have full scope or fee-for-service Medi-Cal;

2. Must have a medical condition that requires a physician’s treatment. The monthly cost-savings to Medi-Cal must be 1.1 or greater;

3. Must have a current health insurance policy that covers your medical condition, COBRA or CAL-COBRA continuation policy; or a COBRA Conversion policy in effect or available at the time of application.

Health insurance cannot be court ordered. If a non-custodial parent has been ordered by the court to provide the health insurance, the child will not be eligible for enrollment in HIPP;

4. The health Insurance policy must cover your medical condition;

5. Apply online at http://dhcs.ca.gov/HIPP, then click on the “HIPP Application Form-Fillable” link to access the form.

6. Please upload all attachments in PDF format only;

7. Cannot be enrolled in a Medi-Cal related prepaid health plan, County Health Initiative, Geographic Managed Care Program, County Medical Services Program (CMSP) or Medicare.

For Persons Living with HIV/AIDS

Eligible California residents with an HIV/AIDS diagnosis may qualify for premium payment assistance through the Office of AIDS (OA) HIPP. For information regarding eligibility requirements and how to apply please see the web link below:

http://www.cdph.ca.gov/programs/aids/Pages/OAHIPPFoms.aspx

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