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**HEALTH INSURANCE PREMIUM PAYMENT (HIPP) for Kids PROGRAM  
Cost Sharing of Co-pays, Deductibles and Co-insurance**

The HIPP for Kids Program will provide cost sharing for items/services rendered to the Medicaid eligible under the age 19 and their parent enrolled in a qualified employer-sponsored health plan and participating in the HIPP for Kids program. The cost sharing by the HIPP for Kids Program is limited to items and services which are covered by the qualified employer sponsored health plan and only for services covered under the State Plan for Medicaid.

Payment for cost sharing (co-pays, deductibles, co-insurance) is limited to services received under the qualified employer-sponsored plan that are covered under the Medicaid State Plan. Parents and family members not enrolled in Medicaid are not eligible for Medicaid state plan services that are not covered by qualified employer-sponsored health plan.

**Reimbursement of Cost Sharing**

Policy holder may submit the Cost Sharing Medical Expense Form (*see Tab G*) in order to request reimbursement of incurred medical expenses. Medical claim information will be processed on a quarterly basis. Please see table below for processing schedule of medical claims for cost sharing

<b>Medical Expense Period</b>	<b>Receipt Deadline</b>	<b>Reimbursement Month</b>
January thru March	May 5th	June
April thru June	August 5th	September
July thru September	November 5th	December
October thru December	February 5th	March

In addition to submitting the Cost Sharing Medical Expense form, the policy holder must submit copies of the medical bill received from the medical provider and Explanation of Benefits (EOB) received from the insurance company along with copies of the canceled check or, bank statement showing the payment of the medical bill or a receipt demonstrating payment of the item or service.

Requests for reimbursement of pharmacy services must include information regarding the prescription dispensed (drug name), the person who received the prescription and the cost incurred to the policy holder (copy of receipt, copy of bank statement or canceled check).

Cost sharing payments are processed on the 17<sup>th</sup> of month in March, June, September and December, with the check being mailed the last Friday of that month.

The policy holder will be informed in writing of any requests for reimbursement that are denied. If all requested reimbursement is issued, there will be no written notice sent to the policy holder.

In addition to the list of non-covered services for Medicaid which are not eligible for reimbursement from the HIPP For Kids Program, the policy holder should be aware that the HIPP For Kids program only provides cost sharing for services covered by the health plan approved for the HIPP For Kids Program. If the policy holder has a separate dental and/or vision plan for which the HIPP For Kids is not providing premium assistance, there is no cost sharing from the HIPP For Kids program, to include no cost sharing for the Medicaid eligible child. However, for the Medicaid eligible child, the servicing provider can bill Medicaid for potential cost sharing.

No payment is available for co-insurance or deductibles for services rendered by providers who do not participate in the member's employer sponsored group health plan (out of network charges). In some instances, if a co-pay was charged by the out of network provider, it may be reimbursed by the HIPP For Kids program based upon the Explanation of Benefits from the insurance carrier.

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### **Medicaid eligible members:**

Provider must bill Medicaid for items and services that have been rendered. Medicaid is payor of last resort, so all other third party insurance is to be billed prior to the claim being billed to Medicaid.

If the provider does not participate in the Medicaid program, the service may be eligible for cost sharing from the HIPP For Kids program for the Medicaid eligible under the age of 19 when the service is also a Medicaid covered service.

### **Non-Medicaid family members (limited to parents only)**

Cost sharing for parents enrolled in the employer sponsored health plan is limited to the services covered by the plan and covered by the Medicaid State Plan, in addition to the above stated requirements.

### **Effective Date for Cost Sharing for Parents**

The HIPP for Kids Program will begin cost sharing for items and services rendered on or after the effective date of enrollment in the HIPP for Kids Program. Cost sharing will continue while there is active participation in the HIPP for Kids Program.