



*West Virginia Health Insurance Premium Payment*

*...sponsored by the West Virginia Bureau for Medical Services.*



# Information for Participating Medicaid Healthcare Providers

# WV HIPP Objective:

## Partner with hospitals and their financial coordinators to:

- » Help increase revenues for hospitals and other participating Medicaid healthcare providers
- » Save state and taxpayer money on Medicaid healthcare claims
- » Assist families with high healthcare costs save money
- » Grow HIPP by increasing awareness of the benefits it provides to healthcare providers, Medicaid recipients, and the State



# HIPP Offers Providers

## Increases in provider reimbursement

- » Receive contractual payment from primary insurance and Medicaid (when billed)
- » Treat more patients that are covered under family policies
  - HIPP makes family coverage affordable to Medicaid families



# HIPP Offers Recipients

## Monthly premium reimbursement for qualified Medicaid recipients and their families

- » When a Medicaid recipient applies to HIPP, the applicant's family has three possibilities for coverage depending on the cost and availability of policy type:



# HIPP Offers Recipients

## Access to added benefits for Medicaid recipients

- » Wider provider network through commercial insurance coverage **AND** Medicaid
- » Coverage of medical expenses by commercial insurance **AND** Medicaid, including benefits Medicaid may not cover
- » Health insurance coverage for the entire family, if cost-effective

# HIPP Offers the State

## Cost Savings

1. Commercial insurance pays primary on all claims
2. Medicaid pays secondary, if billed
3. Primary cost transfers to insurance carrier
4. Savings on healthcare costs

# Qualifications for HIPP

To qualify for HIPP the member must meet the following criteria:

- » Be Medicaid-eligible
- » Have access to insurance that covers at least one Medicaid recipient
- » Have a case that is cost-effective



# Cost-Effective Determination

HIPP eligibility advisors approve an applicant if he/she meets all qualifications including cost-effectiveness.

**A case is determined cost-effective if:**

Insurance premiums are less than medical costs + out of pocket costs + administrative costs

**Insurance premiums tend to be less than medical costs if:**

- » There are two or more Medicaid-eligible recipients
- » Expensive medical conditions are involved, including:
  - Asthma, cancer, pregnancy, diabetes, allergies



# When Applying for HIPP



## Complete an application

- » Submit online, by mail, or fax

## Mail or fax a copy of:

- » Insurance card—front and back
- » Health insurance rate sheet
  - Proof of the cost
- » Summary of benefits for those that have employer-sponsored insurance
- » Paystub or other proof that shows premium payment

# After HIPP Enrollment

## The member will...

- » Provide proof of monthly premium deduction
- » Notify HIPP of changes to insurance policy or plan
- » Notify HIPP of changes in employment
- » Receive monthly premium reimbursements via check or direct deposit

# Frequently Asked Questions

- 1. Do I need to be enrolled in a health insurance policy before applying to HIPP?**
  - » No. An applicant must have access to a health insurance policy. You may enroll in a policy after your eligibility is determined.
- 2. Once enrolled in HIPP, do I lose my Medicaid benefits?**
  - » No. Once enrolled, all Medicaid benefits will continue to be given to the individual for as long as the West Virginia Bureau for Medical Services determines him/her eligible for Medicaid.
- 3. Does my Medicaid dependent need to have a catastrophic illness to be eligible for HIPP?**
  - » No. Any individual with a medically expensive condition will be considered for the HIPP program, whether he/she has a catastrophic illness or an expensive condition such as asthma.
- 4. How will I find out if I have been accepted onto the HIPP program?**
  - » You will receive an acceptance or a denial letter in the mail once an eligibility determination is made.

For more FAQs, visit [www.MyWVHIPP.com](http://www.MyWVHIPP.com), click on FAQs.

# Program Contact Information

The following methods of communication are available to you 8 a.m. - 5 p.m. Monday-Friday.

Toll-free Phone:

1-855-MyWVHIPP (1-855-699-8447)

Address:

3501 MacCorkle Ave SE

Charleston, WV 25304

Email: [CustomerService@MyWVHIPP.com](mailto:CustomerService@MyWVHIPP.com)

Toll-free Fax: 1-855-888-3003

Website: [www.MyWVHIPP.com](http://www.MyWVHIPP.com)

# WV HIPP Resources

Use the following resources for program and referral information:

- » 1-855-MyWVHIPP
- » [www.MyWVHIPP.com](http://www.MyWVHIPP.com) which provides:
  - Program information
  - Online application
  - Printable materials including:
    - Brochure, poster, presentations, fact sheet



Request a packet of brochures by contacting [Outreach@MyWVHIPP.com](mailto:Outreach@MyWVHIPP.com)

# Fostering a Partnership

By providing education, communication, and support we hope to increase your knowledge and understanding of the HIPP program.

Increasing HIPP awareness and membership aims to:

- » Maximize provider reimbursement for services given to Medicaid recipients
- » Increase the number of Medicaid individuals and families that are covered by commercial insurance
- » Optimize state savings

You can have a significant impact on the growth of this program by simply referring a pre-qualified Medicaid member to HIPP.

# Next Steps

## **Refer likely candidates to HIPP**

- » Inform Medicaid recipients about resources available on our website
- » Pass out HIPP brochures that include an application and contact information

## **Offer suggestions to the HIPP program**

- » You may contact us at any time with thoughts and suggestions