

WGIUPD

GENERAL INFORMATION SYSTEM
DIVISION: Office of Health Insurance Programs

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TO: Local District Commissioners, Medicaid Directors

FROM: Judith Arnold, Director
Division of Eligibility and Marketplace Integration

SUBJECT: Health Insurance Premium Payment (HIPP) Program Changes

EFFECTIVE DATE: Immediately

CONTACT PERSON: Local District Support Unit
Upstate (518) 474-8887 NYC (212) 417-4500

The purpose of this General Information System (GIS) message is to advise local departments of social services of system changes to the cost benefit determination method used in the Health Insurance Premium Payment (HIPP) calculator.

As of May 29, 2015, the HIPP calculator utilizes the Medicaid managed care rates as the basis for determining the cost benefit of paying third party health insurance (TPHI) premiums on behalf of Medicaid recipients. The calculator will also consider the cost of certain services that may not be included in the TPHI, including dental, vision, durable medical equipment and emergency and non-emergency transportation. In addition, high deductible plans are never cost effective, and only policies that have a comprehensive scope of benefits are eligible for consideration for HIPP.

The new HIPP calculator was loaded with 2013 MMC rates. Since then, the 2014 MMC rates were made available and were entered into the calculator on July 15, 2015; replacing the 2013 rates.

Please direct any questions concerning this message to your local district liaison.