



1. The Alabama Health Insurance Premium Payment program is sponsored by the Alabama Medicaid Agency.
2. AL HIPP is free. This program reimburses Medicaid recipients for the cost of group health insurance provided by their job or through COBRA.
3. Qualified Medicaid recipients have most out-of-pocket expenses covered by Medicaid when a recipient elects to go to a Medicaid provider.
4. Some will qualify to receive reimbursements for the cost of a family plan that covers non-Medicaid recipients.
5. Qualified members will receive benefits from both AL HIPP and Medicaid at the same time.
6. Federal law allows employees to apply to HIPP outside of the employer's open enrollment period within 60 days of eligibility determination.
7. Those interested can contact the HIPP program toll-free at 1-855-MyALHIPP between Monday to Friday 8am-5pm.
8. Documents can be sent by FAX: 855-357-1130 or mail: AL HIPP, 3066 Zeld Rd. Box 233, Montgomery, AL 36106.
9. Those interested may apply online at www.MyALHIPP.com, click Apply.
10. Applicants can choose to enroll in their job's health insurance policy after applying to HIPP.
11. In some cases, health insurance is offered to recently terminated employees for up to 18 months, this is known as COBRA. For more information, contact your Benefits Coordinator.
12. Pre-qualifying individuals have access to group health insurance and have at least one Medicaid dependent.
13. To be eligible for HIPP, the annual cost of an applicant's health insurance policy must be less than the entire annual cost of their Medicaid dependent's medical expenses.
14. A Medicaid dependent does NOT need to have a catastrophic illness to be eligible for HIPP.
15. Any individual with a medically expensive condition will be considered for the HIPP program.
16. A determination letter will be mailed within 30 days of submitting an application and other documentation.
17. When applying to HIPP, an applicant must provide the following:
 - a. Policyholder's social security number
 - b. Policy number & group number
 - c. Employer & employee share of premium cost
 - d. Medicaid recipient(s) name & Medicaid identification number
18. Applicants must send in the following documents along with their completed application:
 - a. A copy of the front and back of their insurance card
 - b. Policy rate sheet provided by a Human Resources Department
 - c. Summary of benefits
 - d. Paystub that includes premium deduction
19. HIPP members will receive premium reimbursements each month for as long as they provide proof of monthly premium deduction.
20. If a member becomes ineligible at any time, they will receive a letter in the mail stating why they are no longer eligible for HIPP membership.
21. HIPP eligibility does not affect Medicaid eligibility.