



**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/OAHIPPForms.aspx>