



CONNECTICUT INSURANCE PREMIUM ASSISTANCE PROGRAM INFORMATION SHEET

The Connecticut Insurance Premium Assistance Program (CIPA) is a health insurance assistance program for eligible individuals living with HIV/AIDS.

CIPA will help pay health insurance premiums for eligible individuals who have health insurance coverage approved by CIPA. To be eligible, applicants must first apply to and qualify for the Connecticut AIDS Drug Assistance Program (CADAP).

CIPA is sponsored by the Connecticut Departments of Social Services and Public Health. CIPA is funded through the federal Ryan White Part B AIDS Drug Assistance Program.

We hope this fact sheet is helpful in explaining the program and informing you on how to apply.

CIPA: the Basics

- To be eligible for the CIPA Program, you must first be eligible for the Connecticut AIDS Drug Assistance Program (CADAP).
- To qualify for the Connecticut AIDS Drug Assistance Program (CADAP), you must be a Connecticut resident with an HIV or AIDS diagnosis and have a total individual or family income within 400% of the federal poverty level (for example, FY 2011 400% FPL income is at or below \$43,560 for a single person and \$58,840 for a household of two).
- For information about CADAP, call 860-424-5615 or go to the Department of Social Services website (www.ct.gov/dss), click on Services for People with HIV and AIDS, and then connect with the information on CADAP. A brochure and application can be downloaded from this website:
<http://www.ct.gov/dss/cwp/view.asp?a=2353&q=305218#CADAP>
- CIPA will pay up to a maximum of \$1,500 per month toward approved health insurance premiums for eligible individuals who are also enrolled in CADAP.
- CIPA will not reimburse individuals directly for health insurance premiums. Premiums will be paid directly to employers (upon employer approval of third party payment,) or to the COBRA administrator or health insurance administrator.

Eligible Coverage for Premium Assistance

- For a health insurance policy to be CIPA-approved, it must cover all medications on the current CADAP “formulary” (approved medication list) and provide adequate primary care coverage, (i.e., includes in-patient and out-patient hospital and professional medical services such as physician, major medical, surgical, diagnostic, x-ray, laboratory, and anesthesia).
- CIPA will not provide premium assistance for health insurance policies that do not cover HIV/AIDS-related services due to a pre-existing condition exclusion clause, or policies that have maximum limits on prescription and/or medical benefits.
- Charter Oak Health Plans are excluded from CIPA based upon cost effectiveness.

- CIPA cannot reimburse individuals directly for health insurance premiums. Payments will only be made directly to the individual's employer (upon employer approval of third party payment), or to the COBRA or health insurance administrators.
- CIPA is not able to help pay for family coverage or dental.
- CIPA will also not pay premiums for individuals with Medicare Part D. For CADAP-eligible individuals, Medicare Part D premiums are currently being paid by the federal government or CADAP, as long as the individual is enrolled in a Connecticut-approved benchmark Part D plan.

Special Requirements Regarding Employer-Sponsored Health Insurance

- CIPA applicants with employer-sponsored health insurance (ESI) must authorize a CIPA representative to contact employers confidentially regarding the applicant's employment, insurance coverage and premium payments. Employers must also agree to accept third-party payment. If the applicant declines to authorize CIPA to contact his or her employer, the application will not be approved. If an employer does not agree to accept third-party payment, the individual's CIPA application will also not be approved.

Premium payment details

- For new CIPA enrollees having difficulty paying for the first month premium for direct pay insurance, CIPA will accommodate a request to pay the first month's premium, pending approval of the health insurance policy. To be approved, a health insurance policy must meet all of the CIPA requirements. CIPA enrollees would be responsible for performing all application steps with the insurance provider and provide insurance approval documentation to CIPA. CIPA would activate the client based on the invoice amount from the health insurance provider and would pay the first month's premium at the next available check run. CIPA would continue such payments directly to the health insurance provider unless so notified by the CIPA client. CIPA cannot reimburse individuals directly for health insurance premiums.
- CIPA will begin paying the health insurance premium on behalf of eligible individuals in the month following receipt of all information required to make a CIPA eligibility determination. Premium payments will be sent directly to the insurance carrier for individuals with private- or direct-pay insurance coverage; or directly to the insurance company or employer for individuals with employer-based insurance (Note: Prior approval from employee and employer is required).

CT Pre-Existing Condition Insurance Plan and Health Reinsurance Association

- Individuals with a pre-existing condition and without health insurance for six months or more should contact Connecticut Pre-Existing Condition Insurance Plan at 1-800-656-6684 or www.ctpreexistingconditionplan.com. If applying for health insurance assistance through CIPA, the applicant must also have applied and be eligible for CADAP.
- For individuals with existing health insurance which is not CIPA-approved for premium assistance, it is recommended that the person contact the Health Reinsurance Association (HRA) regarding conversion or portability policies. For both programs, an individual must have had qualifying coverage for a period of at least 12-18 months. To contact HRA, call 1-800-842-0004 or www.hract.org.

- The Connecticut Pre-Existing Condition Insurance Plan and the Charter Oak Health Plan are also available as options for affordable coverage, **regardless of premium assistance through CIPA**. Both programs accept applicants with pre-existing medical conditions.

Special information about mail order pharmacy benefits

- CIPA will now pay premiums for approved health insurance policies that require members to use a mail order pharmacy, as long as the mail order pharmacy is enrolled as a Connecticut Medicaid provider. If the mail order pharmacy is not enrolled as a Connecticut Medicaid provider, CIPA will not be able to pay a client's health insurance premium. If your health insurance policy does not require mail order pharmacy, this particular CIPA rule does not apply.

IF YOU HAVE QUESTIONS OR FOR MORE INFORMATION ABOUT CIPA, PLEASE CALL

- **Monday through Friday, 9:00 a.m. to 6:00 p.m.**

<p>Phone: 1-855-888-CIPA (1-855-888-2472) Fax: 1-855-888-3300 Email: CustomerService@MyCIPA.com Website: www.MyCIPA.org or www.MYCIPA.com Mailing address: CIPA, 41 Crossroads Plaza, #110, West Hartford, CT 06117</p>
--

Looking for health insurance and have a pre-existing condition?

- For information regarding the Connecticut Pre-Existing Condition Insurance Plan, go to: www.ctpreexistingconditionplan.com; or call 1-800-656-6684; or email ctpcip.dss@ct.gov.
- Health Reinsurance Association: Covers individuals with pre-existing conditions and qualifying coverage (for conversion and portability policies). For information: 1-800-842-0004 or www.hract.org
- Charter Oak Health Plan: www.charteroakhealthplan.com or call 1-877-772-8625