



American Kidney Fund®

reaching out
giving hope
improving lives

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Please read before signing the application to enroll in the program.

Health Insurance Premium Program (HIPP): What Patients Need to Know

Purpose:

The American Kidney Fund's Health Insurance Premium Program (HIPP) gives health insurance grants to eligible dialysis patients to pay for their Medicare Part B, commercial, "medigap" and/or Cobra premiums.

Who Can Get HIPP?

HIPP is a "last resort" program. It is only for patients who have no means of paying health insurance premiums and who would not have coverage without the help of HIPP. If you already have two kinds of insurance (primary and secondary), HIPP can not help you pay for a third (tertiary). Premiums taken out of checks (such as Social Security checks) can't be paid back to you. Also:

- You must get dialysis in the US or its territories. **Transplant patients are NOT eligible for HIPP***
- You must be referred by their dialysis social worker or kidney doctor (nephrologist).
- You must already be using programs like Medicaid, state kidney programs, etc. if you qualify for them.

***Note: HIPP will not help pay for premiums after you have a kidney transplant.**

How Do I Apply?

1. Fill out and send in a HIPP application through your dialysis social worker. Be sure to include an insurance bill, no older than three months old.
2. Please give AKF at least 2 weeks to process and mail premium payments. (Emergency requests will be considered, but only if an insurance policy will be lost within 7-10 days of the date of request.) Most requests are processed within 10 business days. All requests are paid on a first-come, first-served basis. AKF reserves the right to ask for other documents to prove application information.

Total household income must be included on the application. If you have no income, explain why. Also let us know if you are living with a family member, but get room/board only. AKF may at any time require proof of income such as a tax return.

3. You do not need to send in another HIPP application once you are in the program. AKF only needs a new application if you have large changes in income, expenses or liquid assets (bank savings, etc). However, if you have not received HIPP assistance for one year or longer, you will have to fill out a new HIPP application. Bring all of the insurance bills and notices that you get to your social worker. They need to submit them to the American Kidney Fund for payment. Payments are not automatically made for you unless a request is sent in.

(How to Apply cont.)

4. Most premium payments will be sent directly to your insurance company. There are some insurance companies that do not accept third-party checks. In these cases, checks will be mailed to you in care of the dialysis center. You will then need to deposit the check and get a money order or write a check from your own bank account to your insurance company. If you have lost your check that the American Kidney Fund provided, contact your social worker immediately.
5. HIPP grant checks sent to you are used to **pay your insurance premium only**. If you use it for a different purpose, AKF reserves the right to remove you from the HIPP program
6. Most payments are made quarterly (3 months/request). However, let your social worker know if you need your insurance bills paid on a 2 month or 6 month basis. Prior approval is required from AKF for other payment schedules.
7. **You are still legally responsible for paying your insurance premiums on time**. While HIPP makes every effort to pay premiums before their due dates, the American Kidney Fund is not liable if an insurance coverage is terminated.

What If You Get a Refund From Your Insurance Company?

The American Kidney Fund is a national health charity that helps low-income kidney patients. Almost 33,000 low-income dialysis patients, like you, rely on AKF to pay their health insurance premiums. Without HIPP, you and many other dialysis patients would be without health insurance and access to quality medical care.

HIPP grants are meant to pay existing health insurance premiums ONLY. Any premium refund received by you, your relatives or your estate from a health insurance policy paid for from HIPP funds **must be returned to the American Kidney Fund immediately**. Examples of HIPP refunds you must return: 1. A premium refund resulting from the cancellation or termination of your health policy; 2. A premium refund because your policy was overpaid or underpaid.

Please understand that, as a medical charity, AKF must do everything in its power to get back grant funds that are not used for their intended purpose. All recovered funds are returned to HIPP to support the program and help patients who rely on HIPP.

Ninety-six cents out of every dollar raised by American Kidney Fund goes to support patient programs such as HIPP. The Fund relies entirely on donations from the public, corporations and foundations. We receive no government assistance. Your cooperation helps AKF to continue to serve needy patients.

Frequently Asked Questions About HIPP

1. What types of insurance policies are paid for by HIPP?
Answer: HIPP pays for Medicare Part B, medigap, commercial and COBRA policies.
2. Why won't HIPP pay for a third level of coverage, if I can get Medicaid?
Answer: HIPP's purpose is to make sure that eligible dialysis patients have a way to pay for their dialysis treatment. If you can get Medicaid, it usually means that you have a way to pay the 20% when Medicare is your primary insurer. If this is not the case, AKF will ask for more information to explain your Medicaid benefits.

(FAQs cont.)

3. Why does the Fund need insurance bills no more than three months old and from the current year?

Answer: This is meant to protect the HIPP program and the patients it covers. Insurance companies often don't accept statements from prior months, quarters or years. HIPP checks sent in with "old" statements are often cashed by insurers without crediting the patient's account or are returned to AKF

4. How do I know if my payment was made?

Answer: Please contact your dialysis social worker to check if your payment was made. You may also want to contact your insurance company. They can make sure that your payment has been received. If you need proof of payment, please have your social worker contact us.

5. AKF made a payment for me, but the insurance company has no record of it. What should I do?

Answer: Insurance companies sometimes make mistakes. Have your dialysis social worker contact us (or their HIPP contact) if you have a problem. If it has, a copy of the cancelled check will be given to you to give to the insurance company. If it has not, we can reissue the check if it is over 45 days old. You should also check the insurance company's mailing address.

6. What if I change dialysis centers?

Answer: Please tell the social worker at your new dialysis center that you have been getting help through HIPP. Ask them to call the American Kidney Fund's HIPP department at 1-800-638-8299, if they have any questions.

7. Why doesn't AKF pay back patients who have their health insurance premiums taken out of their retirement checks?

Answer: HIPP is not a reimbursement program. HIPP is only for patients who have no other ways to pay for their health insurance premiums without HIPP. If your Medicare premiums are automatically taken out of your Social Security checks, then you have a way to pay for premiums.

8. Why can't kidney transplant patients get help from HIPP?

Answer: HIPP is for dialysis patients only. We do not have enough funds to support help for transplant patients. HIPP is a very expensive program. We currently help over 36,000 dialysis patients. The program is 100% funded by dialysis center donations.

9. What happens if I get a transplant while getting help from HIPP?

Answer: Dialysis patients getting HIPP help can get help after having a kidney transplant. HIPP will help for one month after your transplant, but only if the payment has not already been made.