

Katie Beckett Waiver Work Group Follow Up Information for October 21 Meeting

Does DSS have any data on the number of people actively (on a daily or monthly basis) using state plan/waiver services? Is there any fiscal data on who is on the waiver using private insurance v. Medicaid?

- Approximately 30% of waiver participants had Medicaid claims partially paid by other insurance. This supports that some participants have primary insurance and use Medicaid as a backup. DSS is currently reviewing the data to gather further insight as to the level of usage by each waiver participant.

	Unduplicated Recipients	Cost	Avg Cost Per User	Monthly
Care Management	375	65,989	\$ 176	\$ 16
Inpatient Hospital	37	3,244,693	\$ 87,694	\$ 7,868
Physician	284	293,938	\$ 1,035	\$ 93
Outpatient/Clinic	220	390,924	\$ 1,777	\$ 159
Lab & Xray	57	28,641	\$ 502	\$ 45
Pharmacy	289	5,325,407	\$ 18,427	\$ 1,653
Home Health	71	4,445,582	\$ 62,614	\$ 5,618
CFC	121	2,508,780	\$ 20,734	\$ 1,860
Other	321	3,056,823	\$ 9,523	\$ 854
Total	375	19,360,777	\$ 51,629	\$ 4,632
Source: MAR 372 report CY 2023				
All participants with at least 1 day of service in CY 2023				
Avg length of stay 339 days				

How many KBW participants currently use CFC?

- 91 KBW participants are utilizing CFC.

What does it mean to be a TEFRA State and how it relates to CTs status?

This information was taken from; <https://portal.ct.gov/-/media/oca/childrenwithspecialhealthcareneeds/pdf.pdf?rev=d1155a027acb49c0b07bf2358a0ca4ba&hash=A4AF99556966D38FC1B1D0E819722B27>

- Connecticut is one of twelve 209(b) states as opposed to being an SSI state. In an SSI state, all individuals who are eligible for SSI are automatically enrolled in Medicaid. As a 209(b) state CT is able to apply a more restrictive eligibility standard than SSI when determining eligibility for Medicaid.
- Connecticut does not consider children under 18 with disabilities to be “disabled individuals”, and therefore disability is not a factor of Medicaid eligibility CT for those under the age of 18.

- TEFRA (Tax Equity and Fiscal Responsibility Act of 1982) created a new state-plan option for the Katie Beckett population. Most states have since converted their Katie Beckett Waivers to TEFRA programs. TEFRA essentially creates a Medicaid coverage group for disabled children under the age of 18 who require institutional level of care. Eligibility is based solely on the income and assets of the applicant.
- The 209(b) designation prevents Connecticut from being able to implement the TEFRA option and we would need to abandon our 209(B) status in order to adopt TEFRA.