

# Measuring our Success

## Eligibility Services Report – 1<sup>st</sup> Quarter 2018



Medical Assistance Program Oversight Council – May 11, 2018

Connecticut Department of Social Services

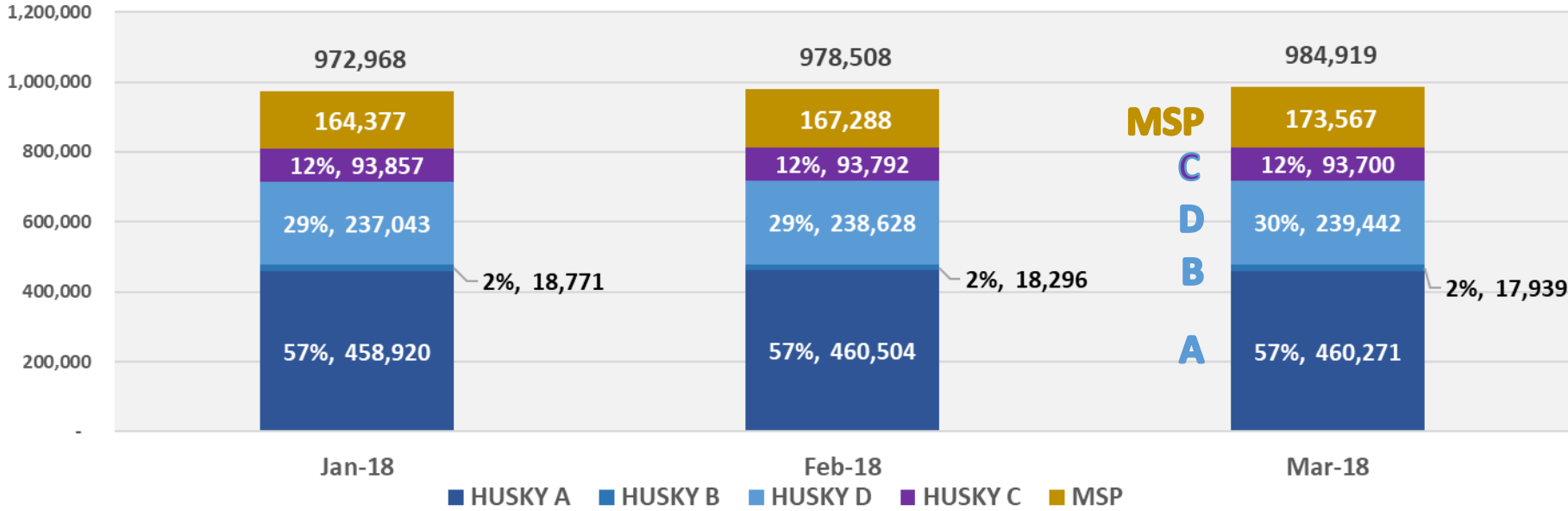
- Medical Enrollment Details
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- Application Details
  - Medical Applications
  - Year-over-Year Single Streamlined Paper Applications
- Renewal Details
  - MAGI-Based Renewals
  - Year-over-Year MAGI-Based Paper Renewals
- Call Center Information
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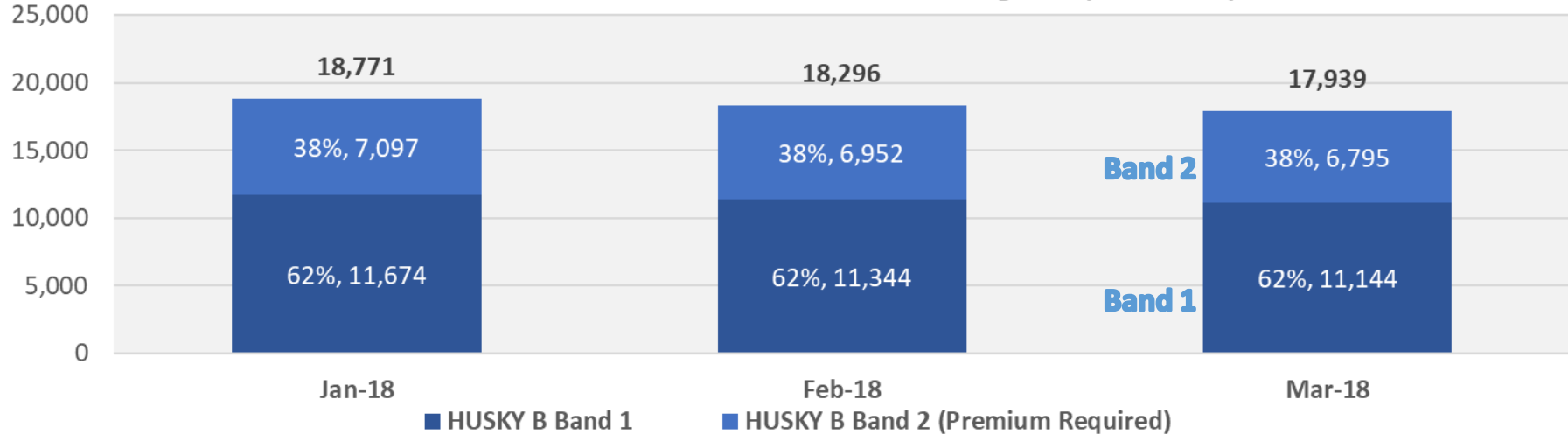
## Medical Enrollment Details

# Medical Enrollment

## Total Medical Enrollment



## Children's Health Insurance Program (HUSKY B)

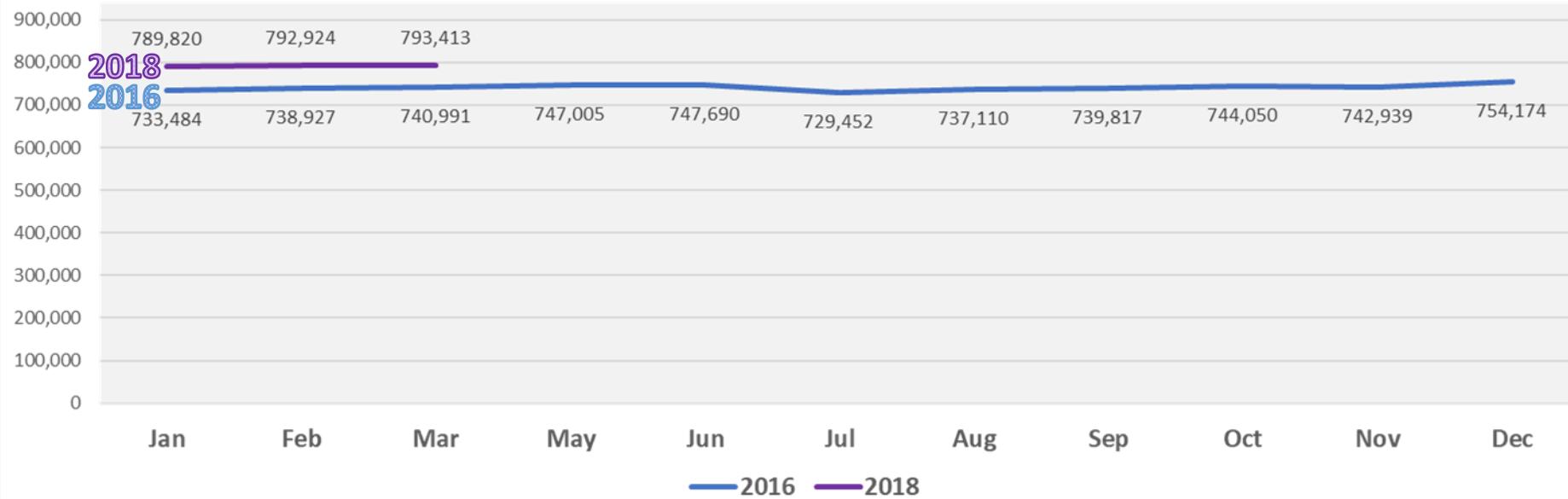


### Notes:

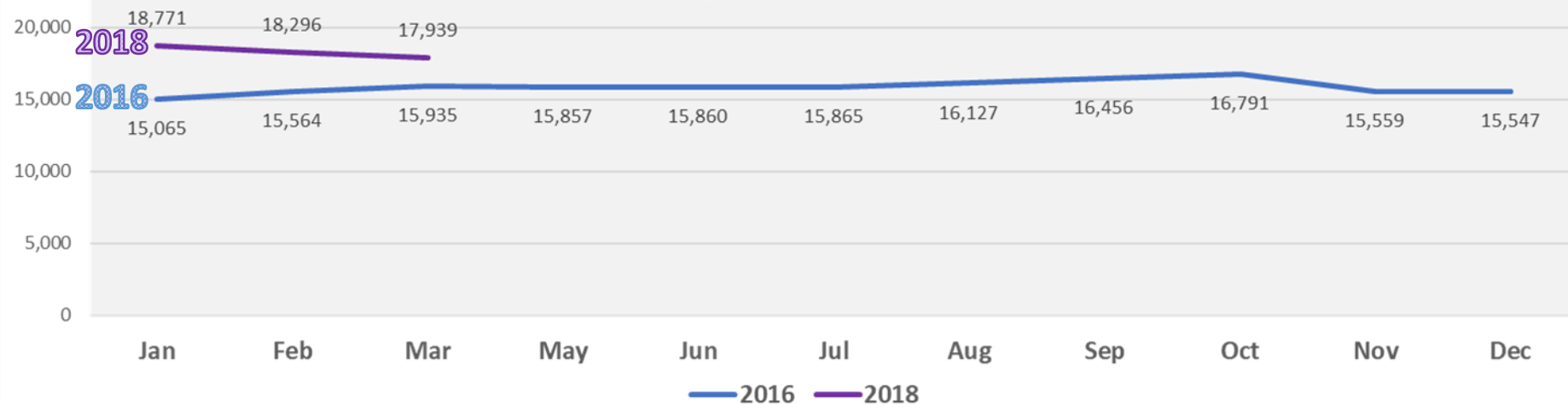
- Medical consists of the HUSKY programs (A, B, C & D) and the Medicare Savings Program (MSP).
    - HUSKY A – Medicaid for children, parents, pregnant women, etc.
    - HUSKY B – Children’s Health Insurance Program
    - HUSKY C – Medicaid for the aged, blind and disabled
    - HUSKY D – Medicaid for low income adults
  - For the most part HUSKY A, B and D use the streamlined MAGI/ACA coverage rules.
  - The rules for HUSKY C can be complex and can include asset tests and disability assessments.
  - 88%** of HUSKY is ACA/MAGI-based.
- There are ~10k individuals (2%) HUSKY A clients determined using non MAGI rules, e.g., DCF foster children.
  - HUSKY B and 2 includes individuals who have yet to pay their first premium and so while eligible are not truly enrolled.

# HUSKY Year-over-Year Enrollment

## HUSKY A, C & D (Medicaid) Year-over-Year Enrollment



## HUSKY B (CHIP) Year-over-Year Enrollment



### Notes:

- Shows year-over-year growth.
- 2017 data is missing as it was a period of complex system and program transitions.
- In July 2015 the parent FPL was reduced to 155%. It took a year to see the full effect as most parents received Transitional Medical Assistance (TMA).
- Similarly, in December 2017 the State reduced the parent FPL to 138%. Since most individuals move to TMA it will be a year before we see the effect.

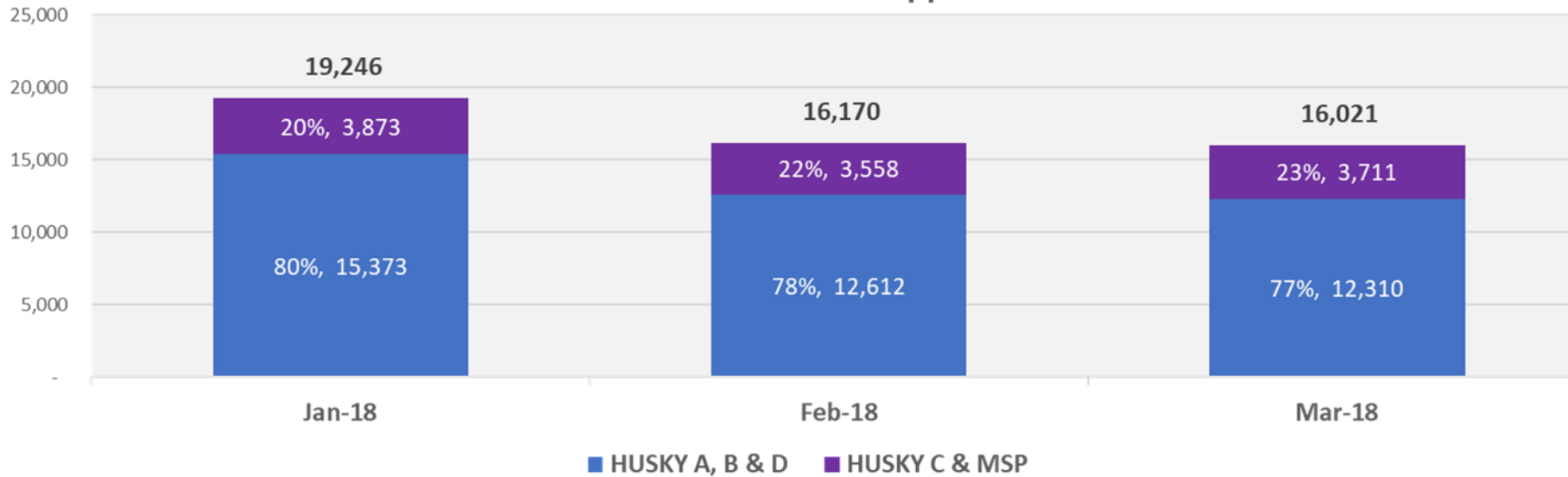
- 2016 data is sourced from EMS.
  - It does not include non-MAGI HUSKY A individuals (~10k). These are included in 2018.
- 2018 A, B & D data is sourced primarily from the HIX.
- 2018 HUSKY C data is sourced from ImpaCT.
- HUSKY B includes individuals who have yet to pay their first premium and so while eligible are not truly enrolled.



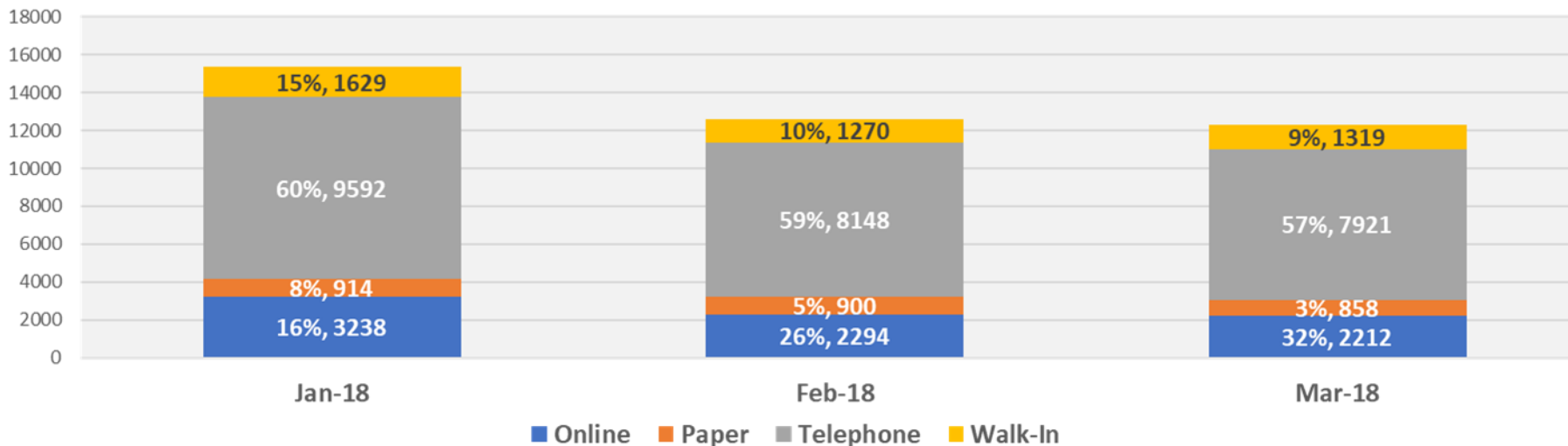
## Application Details

# Medical Applications

## Total Medical Applications



## HUSKY A, B & D Applications by Channel

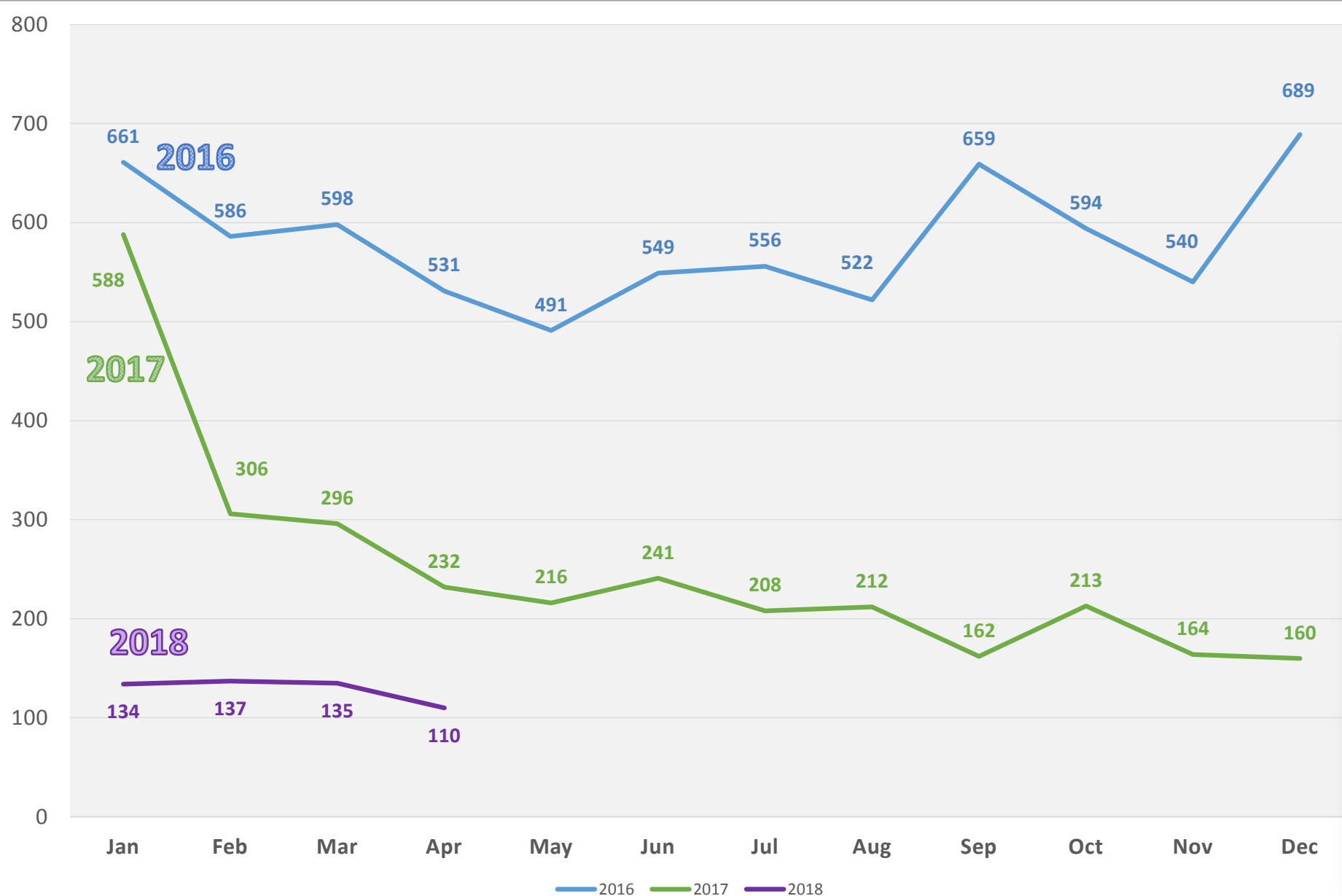


## Notes:

- This is a count of the subsidized applications, by channel, with a filing (application) date in the month and:
  - Application status is in-process or determined (not inactive or canceled);
  - Applicant has no current active coverage;
  - Application is not a renewal or in the reconsideration period.
- The ACA paper channel is small, but higher than expected when compared to the actual paper processing tasks performed in the HIX channel, i.e., typically process less than 10 per day.
  - We attribute much of this to clients incorrectly using the W1-E paper form and mailing channel; DSS workers identify these and enter them into the HIX.

# Year-over-Year Single Streamlined Paper Applications

Data Source: ScanOptics



## Notes:

- Paper applications (AH2 & AH3) volume is low and getting lower.
  - Online and call center channels are preferred.
- Less than 10 forms per business day.
  - Usually processed same day received.

### Application for Health Coverage and Cost Saving Programs

<b>Apply faster online</b>	Apply faster online at <a href="https://accesshealthct.com">accesshealthct.com</a>
<b>Use this application to see what coverage you qualify for</b>	<ul style="list-style-type: none"> <li>Affordable private health care plans that offer comprehensive coverage to help you stay well.</li> <li>A new tax credit that can immediately help pay a portion of your premiums for health coverage.</li> <li>Free or low-cost health care programs from Medicaid or the Children's Health Insurance Program (CHIP)</li> <li><b>You may qualify for a low-cost program even if you earn as much as \$95,400 a year (for a family of 4).</b></li> </ul>
<b>Who can use this application?</b>	<ul style="list-style-type: none"> <li>Use this application to apply for anyone in your family.</li> <li>Apply even if you or your child already has health coverage. You could be eligible for lower-cost or free coverage.</li> <li>Families that include immigrants can apply. You can apply for your child even if you aren't eligible for coverage. Applying won't affect your immigration status or chances of becoming a permanent resident or citizen.</li> <li>If someone is helping you fill out this application, you may need to complete Appendix C.</li> </ul>
<b>What you may need to apply</b>	<ul style="list-style-type: none"> <li>Social Security numbers (or document numbers for any legal immigrants who need insurance)</li> <li>Date of birth for all applicants</li> <li>Employer and income information for everyone in your family (for example, from paystubs, W-2 forms, or wage and tax statements)</li> <li>Policy numbers for any current health care insurance</li> <li>Information about any employer-related health care insurance available to your family.</li> <li>Send your completed and signed application to the address on page 13.</li> </ul>
<b>What happens next?</b>	<ul style="list-style-type: none"> <li>We'll follow up with you within 2 weeks by mail and you'll get instructions on the next steps to obtain health coverage.</li> <li>If you don't have all the information required, sign and submit your application anyway. If necessary, we will contact you by phone or mail to complete the application.</li> <li>If you don't hear from us and it's been 2 weeks, please call 1-855-805-4325. Filling out this application doesn't mean you have to buy health coverage.</li> </ul>
<b>Why do we ask for this information?</b>	<ul style="list-style-type: none"> <li>We ask about income and other information to let you know what coverage you qualify for and if you can get any help paying for it.</li> <li><b>We'll keep all the information you provide private and secure, as required by law.</b></li> </ul>
<b>Get free help with this application</b>	<ul style="list-style-type: none"> <li><b>Online:</b> <a href="https://accesshealthct.com">accesshealthct.com</a></li> <li><b>Phone:</b> 1-855-805-4325.</li> <li><b>In person:</b> There may be counselors certified by Access Health CT in your area who can help.</li> <li>Visit <a href="https://accesshealthct.com">accesshealthct.com</a> or call 1-855-805-4325 for more information.</li> <li><b>En Español:</b> Llame a nuestro centro de ayuda gratis al 1-855-805-4325.</li> <li>For Telecommunications Device for the Deaf (TDD or TTY) please call 1-855-789-2428.</li> <li>If someone is helping you fill out this application, you will need to complete Appendix C.</li> </ul>

Form AH3 revised 07/14/2014

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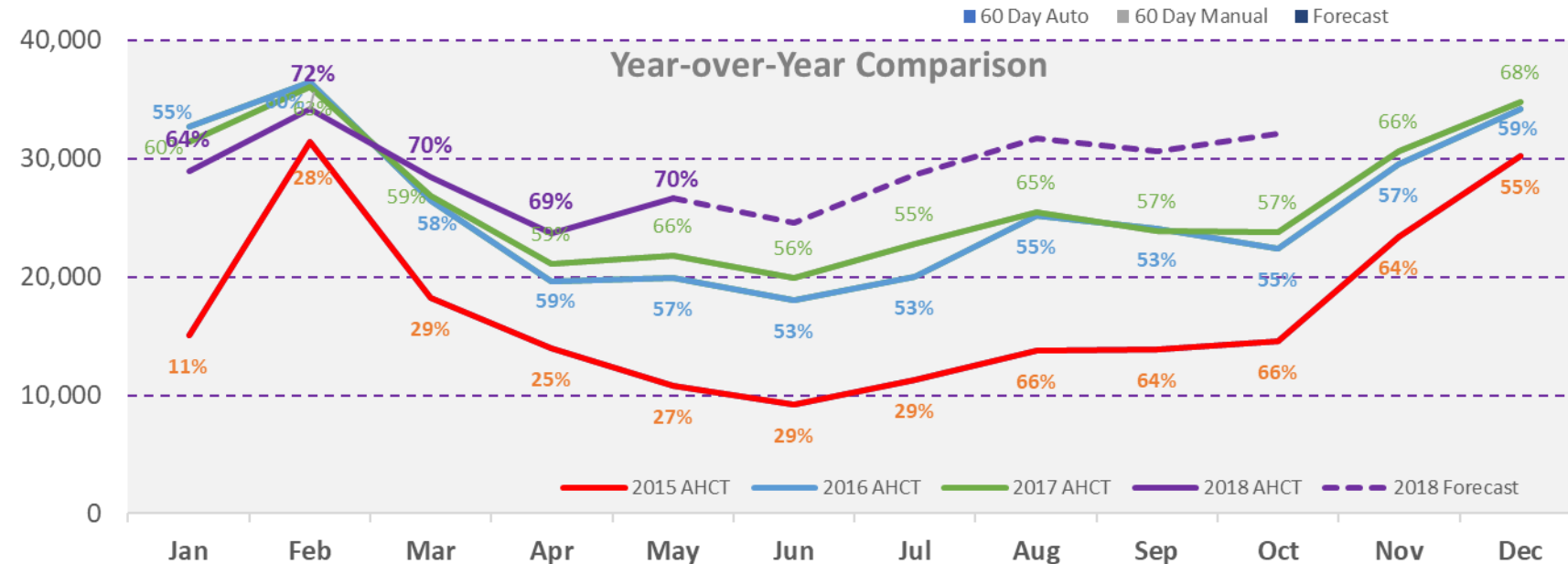
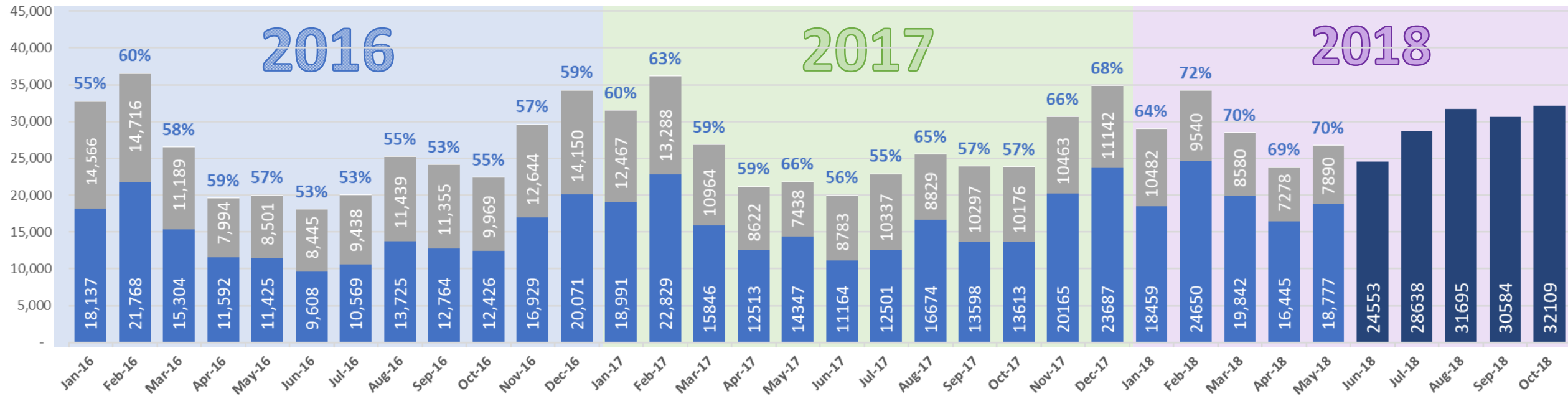


## Renewal Details

# MAGI-Based Renewals

Data Source: HIX

## HUSKY A, B & D Renewals - Historical and Forecast

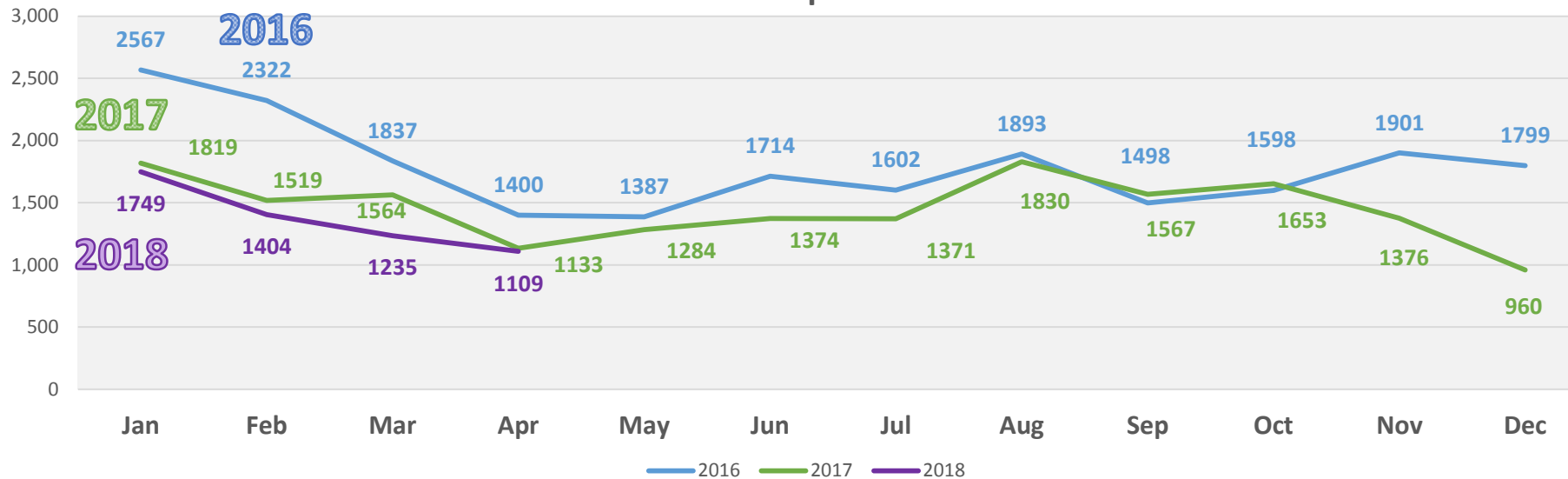


### Notes:

- Currently the auto-renewal rate is running around **70%**
- Each month approximately **7%** of the auto-renewal will report changes to the Department.
- Each month approximately **15%** of the renewals are manual and non-responsive by the 15<sup>th</sup> of the month.

# Year-over-Year MAGI-Based Paper Renewals (AH3-R)

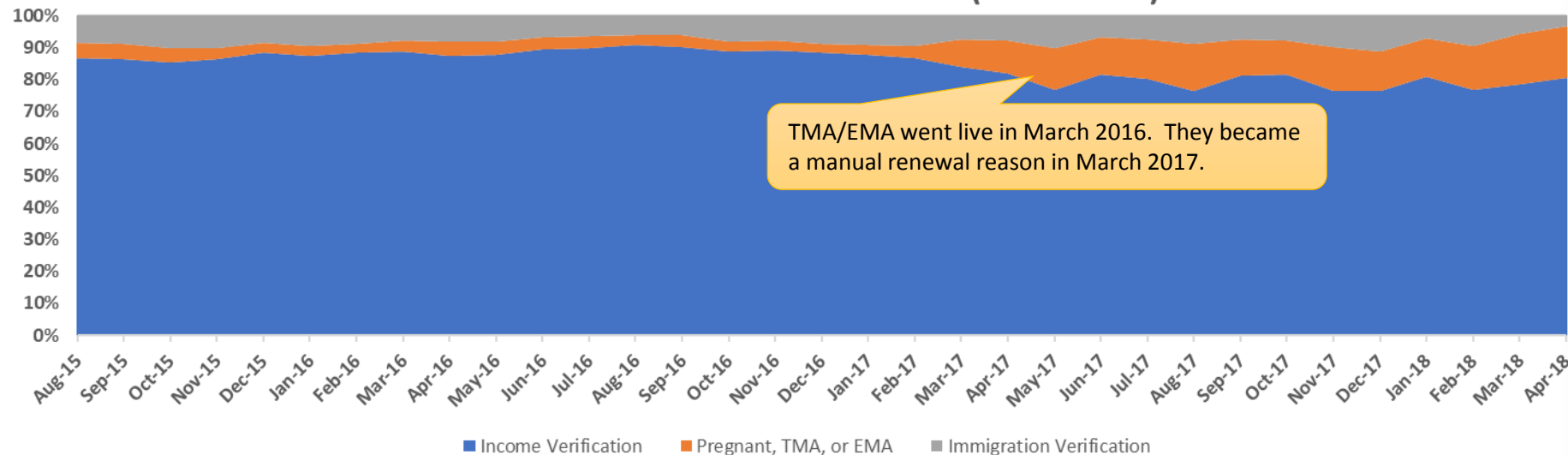
## Year-over-Year Paper AH3-R Forms



## Notes:

- The AH3-R paper renewal forms are pre-filled and are easy to edit, sign and return.
- Paper renewal volumes are relatively low, but are much greater than the paper applications (AH2 or AH3), e.g. 15 times greater.
  - Typically achieve same day turnaround for processing.

## Reasons for Manual Renewal Path (sent AH3-R)



HUSKY Health (Medicaid and CHIP)  
**Renewal Form**

<BARCODE>

**Do not use this form if you are not <FNLNS of the Head of Household>**

<small>&lt;FNLNS of the Head of Household&gt;</small> <small>&lt;Street Address&gt;</small> <small>&lt;City, State Zip&gt;</small>	<small>&lt;mail date&gt;</small> <small>Respond by: &lt;45 day deadline date&gt;</small> <small>Person ID: &lt;MPI ID&gt;</small> <small>Client ID: &lt;EMS ID&gt;</small>
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It is time to renew your HUSKY Health (HUSKY A, B or D) coverage.

You can renew your HUSKY Health (Medicaid & CHIP) in any one of these ways

- Renewing online is faster! Go to [www.accesshealthct.com](http://www.accesshealthct.com), sign-in and then click on the Report a Change/Renew Coverage link.
- By phone: Just call 1-855-805-4325 (TTY: 1-855-789-2428). The call is free.
- By mail: Complete this form and mail it to:  
Access Health CT / DSS  
PO Box 4670  
Manchester, CT 06045-0670
- In person: Visit [www.ct.gov/dss](http://www.ct.gov/dss) for a listing of all DSS Regional Office locations and directions. Or call 1-866-6 CONNECT (1-866-626-6632) for the location that's best for you. Office hours are 8:00 am - 4:30 pm, Monday through Friday.

**How to complete this renewal form**

- Review all of the questions on the form.
- Read the information about you and each member of your household. Add any missing information. If any information has changed, write in the correct information.
- Sign the form in Section 9.
- Return this form by <45 day deadline date>. If you do not return the form by this deadline, you will lose your HUSKY Health coverage.

**What we need**

We need information about each person living in your household or listed on your tax return, including:

- those who get HUSKY Health now,
- those who do not get HUSKY Health now but would like to apply, **and**
- others who live in the household and do not get HUSKY Health but do not want to apply.

We will check your answers using information from computer data sources, including the Internal Revenue Service (IRS), the Social Security Administration, the Department of Homeland Security and others. If the information does not match, we may ask you to send more information.

**If you do not qualify for HUSKY Health (Medicaid & CHIP)**

If you do not qualify for HUSKY Health, Access Health CT will check to see if you qualify for other kinds of health coverage.

**If you have questions about your renewal**

Call Access Health CT at 1-855-805-4325. The call is free. TTY: 1-855-789-2428. Or visit [www.accesshealthct.com](http://www.accesshealthct.com).

AH3-R  
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Form AH3-R revised 07/14/2014  
access health CT



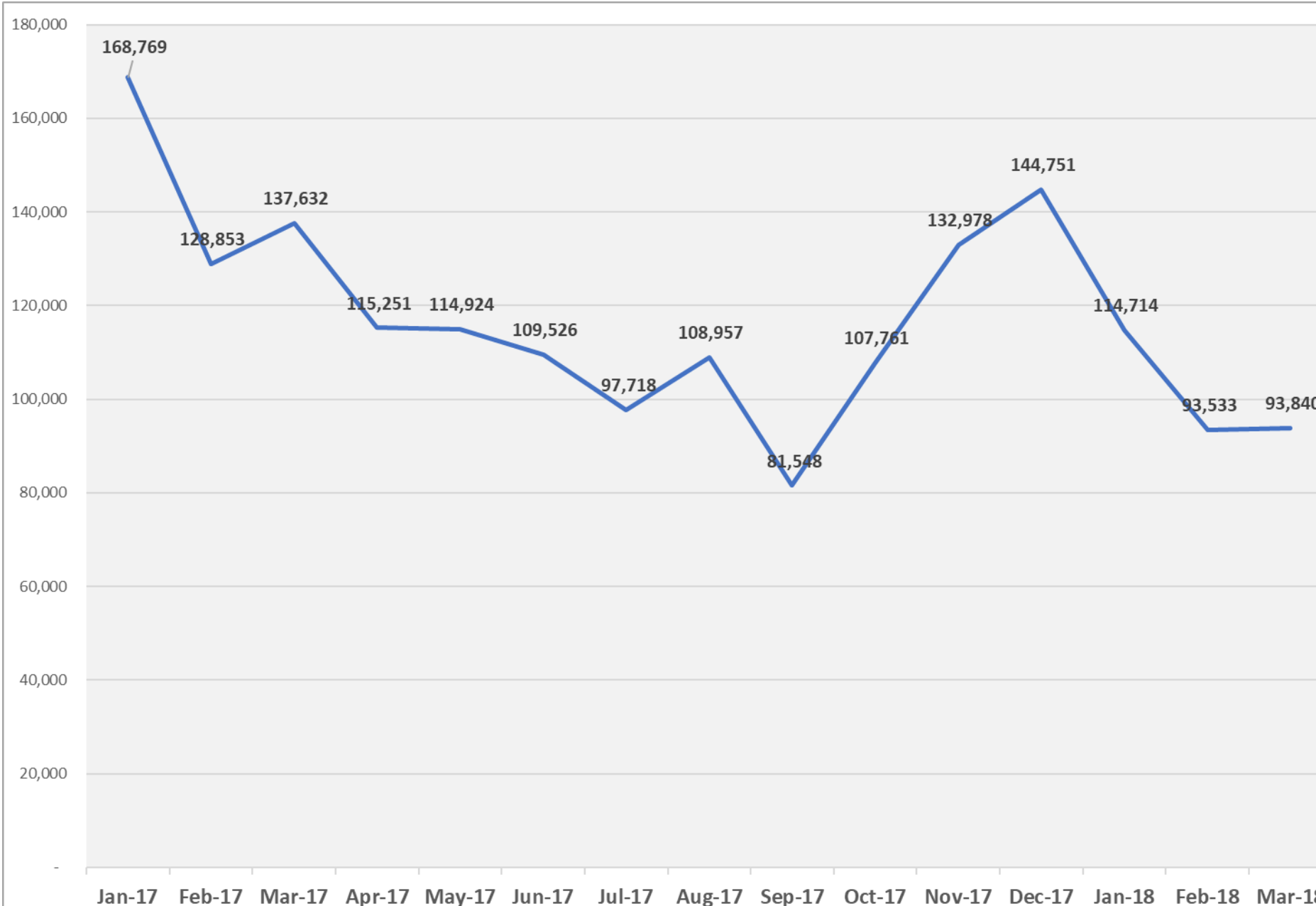
## Call Center Information

# DSS Inbound Call Volume

## Notes:

- There are 3 call center operations:
  - AHCT Call Center (Faneuil)
  - DSS Client Information Line
  - DSS Specialized Support Call Center (Conduent)
- There were **93,840** inbound calls in March compared to a December peak of 144,751.

Graph assumes 70% of the shared AHCT call center is HUSKY A, B and D focused (the remainder is QHP and excluded).  
Graph includes all other DSS programs such as SNAP and TFA.





# Thank You

**Connecticut Department of Social Services**

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