Key Facts About Connecticut Medicaid



Connecticut Medicaid improves the health and well-being of people.

Covers over 800,000 Connecticut citizens
(22% of the state population) who live in all 169 towns

Covers four out of ten births, statewide



- Covers over 70% of all nursing home residents, and also covers home and community-based services for older adults and people with disabilities
- ➔ Has increased use of preventative care from CY 15 to CY 17 by over 16%, supporting school readiness for children and work readiness and stability for adults



Connecticut Medicaid is efficient and financially accountable.

➔ Has reduced per person costs more than any other state in the country, Medicare or private plan

Health Affairs' July 2017 issue (Vol. 36, No. 7) reported that **Connecticut's Medicaid program led the nation in controlling cost trends on a per enrollee basis.**

➔ Is a lean, efficient self-insured model, with administrative costs of 3.2%



- ➔ Is the largest source of federal funding in the Connecticut state budget - almost 60% of Medicaid and 88% of CHIP is federally funded
- → Is a good investment in the future of people, and represents the lowest share of the state general fund budget of all New England states



Has **decreased hospital admissions** from CY 15 to CY 17 by almost 5%, reflecting people receiving preventative care and resulting in cost savings Represents almost 20% of all health care spending in the state, including commercial and self-insured