

# DSS Legislative Update

December 10, 2021

# Agenda

## 1. Eligibility Expansions

- a) Medicaid and CHIP postpartum care (4/1/22)
- b) Prenatal care for non-qualifying immigrant women (4/1/22)
- c) Covered Connecticut (7/1/22)
- d) Coverage for non-qualifying immigrant children (1/1/23)
- e) Postpartum care for non-qualifying immigrant women (4/1/23)

## 2. Medicaid Coverage/Services Projects

- a) Autism waiver slots
- b) CT Home Care Program
- c) Nursing home temporary financial assistance
- d) Nursing home rate increase/enhancement to health and pension benefits
- e) ICF rate increase and minimum per diem
- f) Licensed acupuncturists
- g) Licensed chiropractors
- h) Rate parity for nurse midwives
- i) Rate parity for podiatrists
- j) Behavioral health rate increases
- k) Ambulance rates
- l) Chronic disease hospitals
- m) Violence prevention program

## 3. HCBS ARPA Update

- a) Background, timeline and funding update

# Medicaid and CHIP Postpartum Care (April 1, 2022)

- PA 21-2, June Spec. Sess., Sections 371-372
- Extends HUSKY A Medicaid postpartum coverage from 60 days to 12 months for individuals with income up to 263% FPL who are citizens or qualified non-citizens
- Authorized by the American Rescue Plan Act (ARPA) for 5 years, will require a State Plan Amendment (SPA) submission
- Status Update:
  - New eligibility coverage group is being programmed in DSS systems
  - SPA template has not been released by CMS
  - DSS will submit SPA once the federal system is ready to accept Children's Health Insurance Plan (CHIP) SPAs (anticipated February 2022)
  - Considering if any other Medicaid payment authorities are necessary for postpartum women eligible for CHIP who may apply for Medicaid
  - Anticipate a February 2022 SPA submission for Medicaid and CHIP

# Prenatal care for pregnant individuals (CHIP unborn child option) (April 1, 2022)

- PA 21-176 Sec 4 as amended by PA 21-2, June Spec. Sess., Sec 344
- Provides prenatal coverage for pregnant individuals regardless of the immigration status of the pregnant individual
- Funded by CHIP
- Status Update:
  - New eligibility coverage group is being developed in DSS systems
  - DSS will submit SPA once the new federal system is ready to accept accept CHIP SPAs (anticipated February 2022)



# Covered Connecticut (July 1, 2022)

- Public Act 21-2, June Spec. Sess.
- Requires DSS to pursue an 1115 demonstration waiver to fully subsidize remaining premium and out-of-pocket costs for individuals enrolled in the silver level benchmark plan from a Qualified Health Plan (QHP) offered through Access Health CT
- Implementation is targeted for July 1, 2022
- Status Update:
  - Concept paper submitted to CMS
  - Informal feedback received from CMS (12/7/21)- No major concerns
  - Waiver application and budget neutrality complete by mid January
  - DSS will post for public comment in late January
  - DSS will request hearings for the waiver in the early part of the 2022 legislative session
  - Implementation will occur as soon as feasible after CMS approval of waiver which may be later than 7/1/2022

# Coverage for non-qualifying immigrant children (January 1, 2023)

- Effective 1/1/23 – provides health coverage to children 8 years of age or younger, in households with income that does not exceed 323% FPL, regardless of immigration status (PA 21-176 Sections 1 and 3)
- 100% state funded; mirrors HUSKY A and HUSKY B eligibility
- OHS, in consultation with other state agencies including DSS, required to study the feasibility of expanding coverage to children ages 9-18 up to 323% FPL by 7/1/22 (PA 21-176 Section 5)

# Postpartum care for non-qualifying immigrants (April 1, 2023)

- PA 21-176 Section 2
- Provides 12 months of postpartum coverage for individuals with income up to 263% FPL who don't qualify for HUSKY due to citizenship status
- 100% state funded



# Funding Streams

## General Fund

- Covered CT
- Coverage for non-qualifying immigrant children
- Postpartum care coverage for 12 months
- Postpartum care for non-qualifying immigrants
- Autism waiver slots
- State-funded CT Home Care Program copay reduction
- Nursing home rate increases
- ICF rate increase and minimum per diem
- Chiropractic coverage
- Acupuncture coverage
- Nurse midwives rate parity
- Podiatrists rate parity
- Home health and waiver rate increases (increases provided both in the budget and through ARPA HCBS)
- Ambulance rate increase
- Chronic disease hospital rate increase

## DSS ARPA

- One-time ARPA grants for nursing homes (calculated vs. issued rates)

## HCBS ARPA

- Increase rates for provider stabilization
- Expand family caregiver supports
- Integrate racial equity lens in care delivery
- Enhance HCBS Workforce
- Expand integration and use of assistive technology
- Enhance self-direction
- Enhance environmental adaptations
- Enhance and expand HCBS delivery transformation
- Enhance provider infrastructure
- Strengthen quality



# Medicaid Coverage & Services

Autism Waiver Slots (50 new slots)	Additional staffing is required and has been approved and posted
State-funded CT Home Care Program - reduce copays from 9% to 4.5%	Implemented on 7/1/21
One-time ARPA grants to support nursing homes with disparities between calculated v. issued rates	Address nursing home rate structure through full rebasing over three years as part of the transition to acuity-based reimbursements
Nursing home rate increases	<p>4.5% rate increases for staff wages effective 7/1/21 &amp; 7/1/22</p> <p>Temporary 10% general rate increase effective 7/1/21 to 3/31/22</p> <p>Health and pension benefit - 7/1/22</p>
Intermediate Care Facilities (ICF) rate increase and minimum per diem	<p>4.5% rate increase for staff wages and \$501 minimum per diem were implemented on 7/1/21. Exceeds provider costs in several cases and creates UPL problem with CMS. Minimum per diem is 100% state funded.</p>

# Medicaid Coverage & Services

Licensed acupuncturists	Implemented 10/1/21
Licensed chiropractors	Implemented 10/1/21
Rate parity for nurse midwives	Implemented, effective date 7/1/21
Rate parity for podiatrists	Implemented, effective date 7/1/21
Home care rate increases	Pediatric complex care home health rate increase (1.7%) implemented Additional rate increases are dependent on HCBS ARPA funding approval from CMS

# Medicaid Coverage & Services

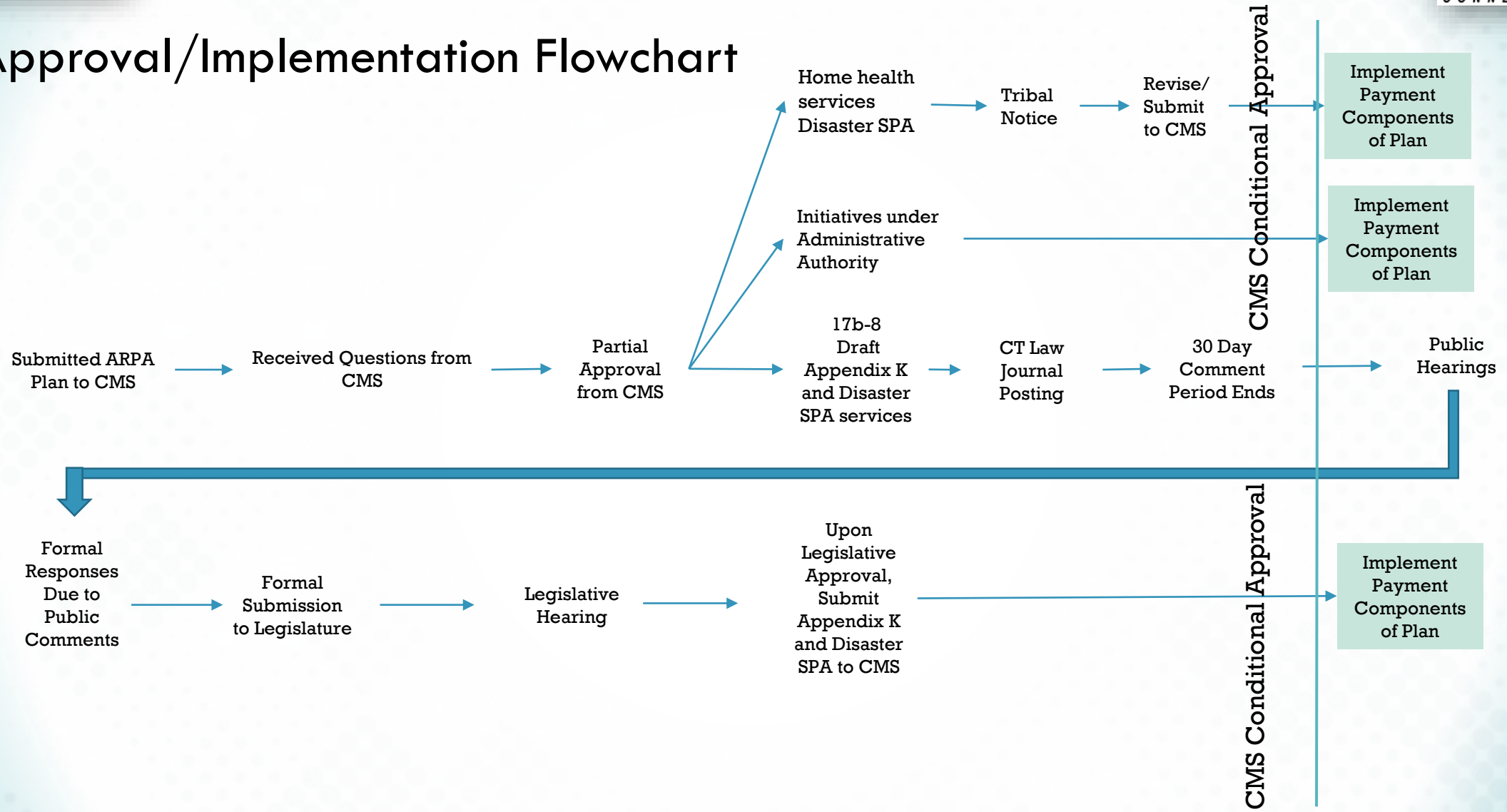
Behavioral Health 4% Rate Increase	Implemented November 2021
Ambulance rate increase	Implemented 7/1/21
Chronic disease hospital rate increase	Implemented 7/1/21
Community violence prevention	In process: working on defining violence prevention as a Medicaid benefit and working with existing violence prevention providers. Planned implementation for 7/1/22. Not funded in the enacted budget.



# Home and Community-Based Services (HCBS) ARPA Plan

- Background
- Proposal contents
- Partial CMS approval
- CMS approval process of Medicaid payment authority
- Notice in CT Law Journal
- Public comment
- Public hearing
- Disaster SPA, SPA, Appendix K and waiver amendment submission
- Implementation

# Approval/Implementation Flowchart



# HCBS ARPA Plan and Payment Authority Approval Process

## Plan Approval Process

- ✓ Developed and submitted plan with stakeholder input
- ✓ Legislative briefing
- ✓ Received partial approval from CMS
- ✓ Received/responded to CMS questions and attested to assurances required by CMS
- ✓ Revised ARPA plan and submitted to CMS as part of required quarterly report
- ✓ Waiting for CMS 'Conditional Approval'
- ✓ CMS approval of plan does not equate to payment authority approval

## Payment Authority Approval Process under CGS17b-8

- ✓ CT Law Journal posting
- ✓ Public comment period
- ✓ Response to public comments
- ✓ Public hearing
- ✓ Legislative hearing
- ✓ Legislative approval of Appendix K
- ✓ Submit approved Appendix K to CMS
- ✓ Components of ARPA plan other than those under 17b-8 may be implemented through standard (disaster) SPA procedures (home health only)



# Appendix

# Medicaid/HUSKY Eligibility

Connecticut HUSKY Health Program Monthly Income Guidelines – effective March 1, 2021						
Family of 1	Family of 2	Family of 3	Family of 4	Family of 5	Family of 6	Overview
Under \$1,718	Under \$2,323	Under \$2,928	Under \$3,534	Under \$4,139	Under \$4,744	<b>HUSKY A (parents/caregivers)</b> <ul style="list-style-type: none"> <li>Medicaid health care coverage for parents and caregiver relatives.</li> <li>No cost.</li> <li>Enrolled parents/relative caregivers no longer have HUSKY A eligibility when the youngest child turns 18 if the child is not going to graduate high school by 19th birthday (federal rule).</li> </ul>
Under \$2,158	Under \$2,918	Under \$3,679	Under \$4,439	Under \$5,200	Under \$5,960	<b>HUSKY A (children)</b> <ul style="list-style-type: none"> <li>Medicaid health care coverage for children and youths under 19th birthday.</li> <li>No cost</li> </ul>
Smallest family is 2 as unborn always counts as one	Under \$3,818	Under \$4,813	Under \$5,808	Under \$6,803	Under \$7,798	<b>HUSKY A (pregnant women)</b> <ul style="list-style-type: none"> <li>Medicaid health care coverage for pregnant women.</li> <li>No cost.</li> <li>For eligibility of pregnant women, the unborn child is also counted as a family member.</li> </ul>
Under \$1,482	Under \$2,004	Under \$2,526	Under \$3,048	Under \$3,570	Under \$4,092	<b>HUSKY D (adults without minor children)</b> <ul style="list-style-type: none"> <li>Medicaid health care coverage for adults from age 19 to 64 years of age</li> <li>No cost.</li> <li>For those who not receive not receive Medicare; who are not pregnant; and who do not have dependent child(ren) under 19 in household.</li> </ul>
From \$2,159 to \$2,727	From \$2,919 to \$3,688	From \$3,680 to \$4,649	From \$4,440 to \$5,610	From \$5,201 to \$6,571	From \$5,960 to \$7,532	<b>HUSKY B (level 1): health care coverage for children under 19<sup>th</sup> birthday.</b> <ul style="list-style-type: none"> <li>Children's Health Insurance Program (non-Medicaid)</li> <li>No monthly premiums; some co-payments.</li> <li>Eligible for HUSKY Plus services if the child's medical needs qualify.</li> </ul>
From \$2,728 to \$3,467	From \$3,689 to \$4,689	From \$4,650 to \$5,911	From \$5,611 to \$7,133	From \$6,572 to \$8,355	From \$7,533 to \$9,577	<b>HUSKY B (level 2): health care coverage for children under 19<sup>th</sup> birthday.</b> <ul style="list-style-type: none"> <li>Children's Health Insurance Program (non-Medicaid)</li> <li>Monthly premium of \$30 for plan with one child; \$50 for plan with more than one child; some co-payments.</li> <li>Eligible for HUSKY Plus services if the child's medical needs qualify.</li> </ul>

[CT DSS/updated 3/1/21 Income levels are approximate: application and eligibility determination necessary for qualification.]