

COVERED CT – 1115 WAIVER APPLICATION

Department of Social Services
Office of Health Care Strategy
Access Health CT
Connecticut Insurance Department

- Public Hearing
- February 10, 2022

BACKGROUND AND PURPOSE OF COVERED CT

- Established by state legislation in sections 15 through 19 of Public Act 21-2 of the June special session
- The law directs the Department of Social Services (DSS) to submit a demonstration waiver application pursuant to section 1115 of the Social Security Act (Demonstration) to the U.S. Centers for Medicare and Medicaid Services (CMS) to provide federal matching funding for the program
- DSS is working in collaboration with various state partners in the design and implementation of this program, including the Office of Health Strategy (OHS), Access Health CT, and the Insurance Department (CID)

STATE OBJECTIVES

- The intent of this Demonstration is to help close the health insurance affordability gap in a cost-effective manner for low-income individuals who earn too much to qualify for Medicaid but not enough to afford comprehensive and affordable coverage through the state's health insurance marketplace, Access Health CT
- The goals and objectives for Covered CT include:
 - Improve the affordability of health insurance coverage by reducing co-pays and deductibles
 - Promote health insurance coverage
 - Ensure stable coverage
 - Reduce the statewide uninsured rate
 - Improve oral health
 - Enable access to medical appointments by reducing transportation barriers

ELIGIBILITY

- This Demonstration will be available to the following eligibility groups:
 - Parents and caretaker relatives and their tax dependents under age 26
 - Adults ages 19 to 64 without dependents
- Eligible individuals must have income above the Medicaid limit, but not exceeding 175% of the federal poverty level (FPL) (\$48,563 for a family of four) and must also enroll in a silver-level Qualified Health Plan (QHP) available through Access Health using federal premium subsidies and cost-sharing reductions

BENEFITS

- After federal approval and upon implementation, this Demonstration will provide eligible individuals with no cost QHP coverage available through Access Health CT
- The State will directly reimburse the plans for the monthly premiums and the cost-sharing amounts that the enrollee would normally have to pay, such as out-of-pocket costs for deductibles, copays, and co-insurance
- Enrollees will also receive no cost dental care and non-emergency medical transportation (NEMT) services, comparable to the benefits under Connecticut Medicaid and provided through the Medicaid delivery and payment system, also known as HUSKY Health
- No cost-sharing requirements will apply to benefits provided under the Demonstration
- The Medicaid waiver authority allows the state to receive federal match on the expenditures incurred to cover the out-of-pocket expenses, premiums, cost-sharing, dental and NEMT services.

PROJECTED ENROLLMENT

Population	Demo Year 1	Demo Year 2	Demo Year 3	Demo Year 4	Demo Year 5
Parents and Caretaker Relatives	2,818	8,991	13,157	13,223	13,289
Adults without dependents	15,903	24,302	25,568	25,696	25,824
Total Enrollment	18,721	33,293	38,725	38,919	39,113

ADDITIONAL INFORMATION

- Information about this Demonstration is also posted to the DSS website at this link: <https://portal.ct.gov/DSS/Health-And-Home-Care/Covered-Connecticut-Demonstration-Program>
- Second public hearing hosted by DSS on Wednesday, February 16, 2022 from 9:00 to 11:00 a.m.
- Written comments accepted through March 11, 2022 at Public.Comment.DSS@ct.gov