

CONNECTICUT MEDICAID FACTS



Who is covered in Connecticut's Medicaid Program?

ELIGIBILITY GROUPS

FFS²

- Children (0-18 years)
- Parents and other Caretaker Relatives
- Pregnant Women
- Adults (19-64)
- Aged, Blind, and Disabled
- ↑ Dual Eligibles
- † Children with Disabilities
- ↑ Current and Former Foster Care Children

Important News

2016 - 753,413 people were covered by the state Medicaid program, Health Care for Uninsured Kids and Youth (HUSKY). This was a net reduction of about 7,300 people from the previous year.⁴



Do Medicaid health plans provide coverage?³





NO

Eligibility Criteria for Specific Populations as a Percentage of the Federal Poverty Level (FPL)¹

Children: 323% Seniors & People with Disabilities: 63% Expansion adults: 138% Parents: 155% Pregnant women: 263%

Percentage Breakdown of Connecticut's Medicaid
Population⁵

Children: 37% Adults: 39% Elderly Adults: 14% Individuals with Disabilities: 10%

How has Connecticut's Medicaid program engaged in Managed Care?²

Connecticut transitioned to managed care organizations (MCO) in 1994 with a federal waiver. In 2010, the state converted from an MCO model to the current fee-for-service model (FFS).







CONNECTICUT MEDICAID FACTS

How is Connecticut meeting the needs of Medicaid enrollees?

Value-Based Healthcare Initiatives

Connecticut offers Behavioral Health Homes (CT BHH) available for Medicaid beneficiaries with chronic mental health conditions. It includes care coordination managed by local Mental Health Authorities. This model increases access to behavioral and physical health care and uses community health services to reduce unnecessary hospital (re)admissions.⁶

Under the Person-Centered Medical Home (PCMH) initiative, Connecticut Medicaid provides new payment incentives to practices and clinics that demonstrate a higher standard of person-centered medical care.⁷

A four-year State Innovation Model grant was awarded to the state in 2014 to support implementation of a value-based payment model. It aimed to transition providers from a pay-for-performance (P4P) program to a shared savings model. Connecticut aims to have 88% of the state's population receiving care from clinicians who are participating.⁸

Family Planning

Counseling and education related to family planning, lab tests to detect the presence of conditions affecting reproductive health, and abortions are covered with HUSKY plans A, C and D.9

The HUSKY Health Limited Benefit - Family Planning program covers family planning and family planning-related services. Services include reproductive health exams, screening and treatment services for sexually transmitted infections, sterilizations, contraceptive services and supplies (including IUD,

diaphragm, condoms), prescribed drugs (birth control, drugs for treatment of STDs, and certain pain medicines), HPV immunizations for males and females, and pregnancy tests.¹⁰



Oral Health9

Dental Services are covered through Connecticut Dental Health Partnership (CTDHP), a component of the HUSKY Health program. Services include:

- Flouride
- Cleaning
- SealantsX-rays
- A-rays - Fillings
- Root canal
- Oral surgery
- Dentures



Orthodontic services are provided only to members under age 21.

The CTDHP will help eligible members locate a participating network dentist.

Child and Adolescent Health¹⁵

The Healthy Airways program provides a nurse care manager for members with asthma. The nurse care manager supports the member through education and health care service coordination.

The Healthy Start program offers health education and care management services for children and parents.



Women's Health

Cervical and breast cancer screening and STD/STI screening are covered in well visits. $^{\rm II}$

Healthy Start is a health insurance program for low-income pregnant women whose household income is at or below 250% of the Federal Poverty Level. There is no asset limit. Services include case management for pregnant women and children ages 0-2.12

Nurse midwifery services are covered under a fee-for-service arrangement 13

Free-Standing Birth Centers are covered under fee-for-service arrangements with a global fee for labor and delivery facility costs.¹⁴

The Healthy Beginnings program connects pregnant and new mother members with nurse care managers. The program also covers the following services:¹⁵

- Pregnancy testing
- Choice of prenatal care provider
- Nutritional counseling
- Programs, counseling, and medications to aid in smoking cessation
- Assessment for the Special Supplemental Nutrition Program for Women, Infants, Children (WIC)
- Connection to the Nurturing Families Network
- Prenatal health education classes for childbirth, breastfeeding, and parenting
- Breastfeeding support from lactation specialists
- Newborns in the Neonatal Intensive Care Unit (NICU)
- Hospitalization







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How is Connecticut meeting the needs of Medicaid enrollees?

Behavioral Health

Mental health and substance use treatment services are available through the Connecticut Behavioral Health Partnership (CT BHP).¹⁶

Services covered by the CT BHP include psychiatric hospitalization, 23-hour observation, detoxification, partial hospitalization, crisis stabilization, psychiatric residential treatment facility, adult and child group homes, case management if < 19 years of age, outpatient services, psychological testing, and Autism Spectrum Disorder Services.¹⁷

The CT BHP also created the Behavioral Health Home (CT BHH) as described under value-based.⁶

Prescription drugs covered: methadone, naloxone, naltrexone, and disulfiram.¹⁸



Social Determinants of Health (SDOH)19

The Corporation for Supportive Housing led a five-year housing program in which Social Innovation Fund support was provided to state Medicaid agencies and nonprofits. Connecticut combined Medicaid and Homeless Management Information Systems data to identify high-cost, high-risk Medicaid enrollees. These enrollees were then provided housing through a network of community-based organizations in the state.



Cost-Sharing²⁰

Connecticut Medicaid members in the HUSKY A, C, and D programs do not pay copays for any services. Members in the HUSKY B program may be charged copays for non preventive services.





Children with Special Health Care Needs

Medicaid covers 45% of children with special health care needs in Connecticut.¹

Intensive Care Services (ICM) are available to children with special health care needs. ICM services include:

- Education about illness/condition
- Assistance setting up appointments
- Arrangement of transportation
- Medication reviews
- Assignment of a nurse care manager
- Connection to community health workers

The Birth to Three program provides coverage for early intervention services for children under age 3 that are experiencing a developmental delay or are diagnosed with a physical or mental condition that could lead to a developmental delay.

School-based child health services are available for children with an Individualized Education Plan (IEP). 15

Long-Term Services and Supports (LTSS)¹

Eligible Medicaid members can receive home health care services including:

- Skilled nursing visits
- Home health aide assistance with dressing, bathing, oral hygiene, eating, transferring positions, and toileting
- Short-term rehabilitation including physical therapy, speech therapy, and occupational therapy

Covered durable medical equipment (DME) include:

- Wheelchairs and accessories
- Walking aids such as walkers, canes, and crutches
- Bathroom equipment such as commodes and safety equipment
- Inhalation therapy equipment such as nebulizers
- Hospital beds and accessories
- Other devices such as Continuous Positive Airway Pressure (CPAP) machines, apnea monitors, and ventilators
- Insulin pumps and glucometers
- Breast pumps







Timeline



