



CT Department of Social Services

Medicaid Cost Transparency

October 2022



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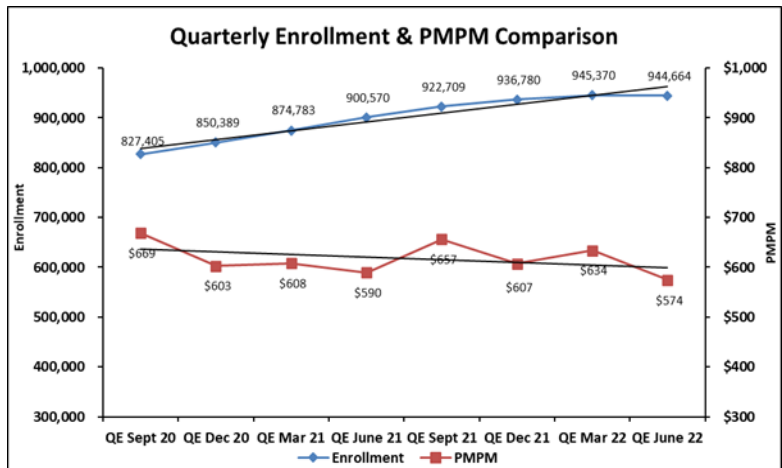
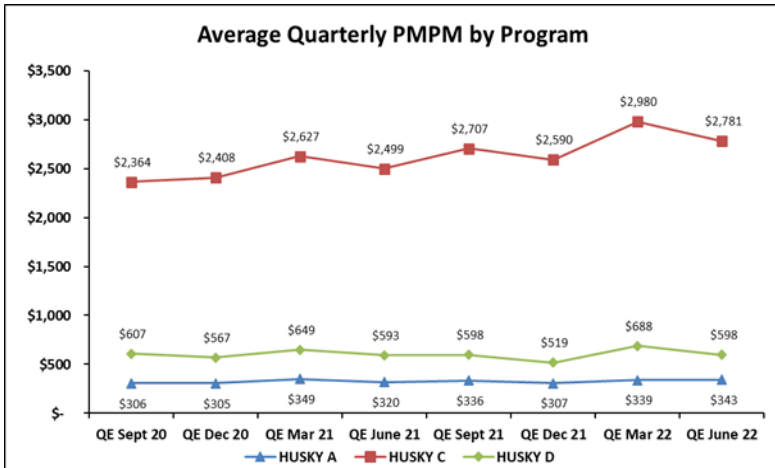
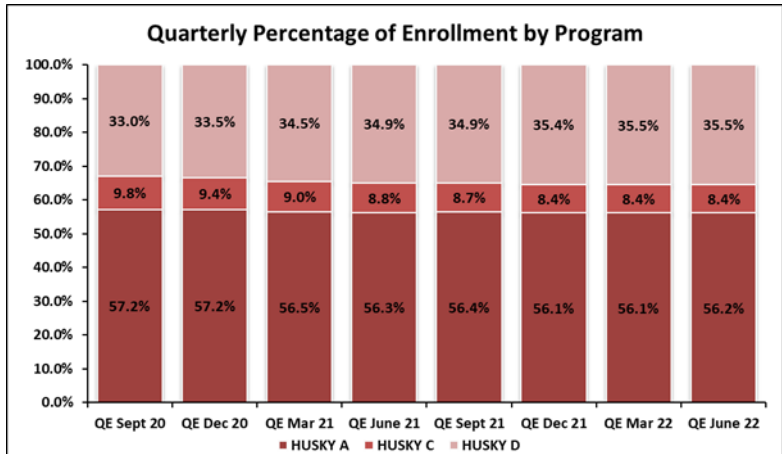
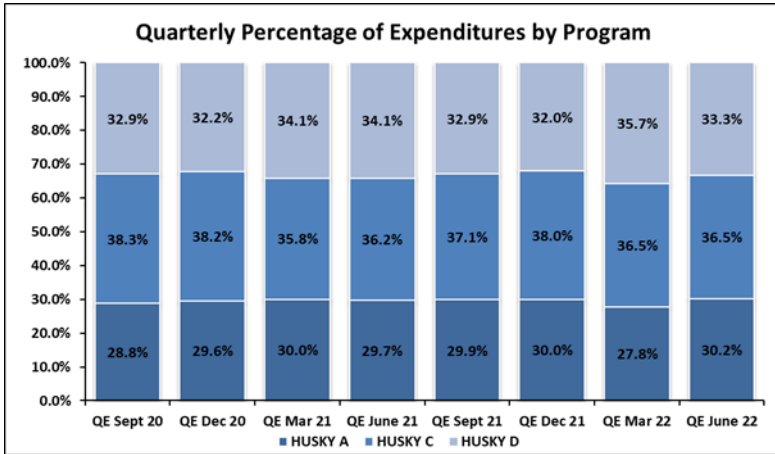
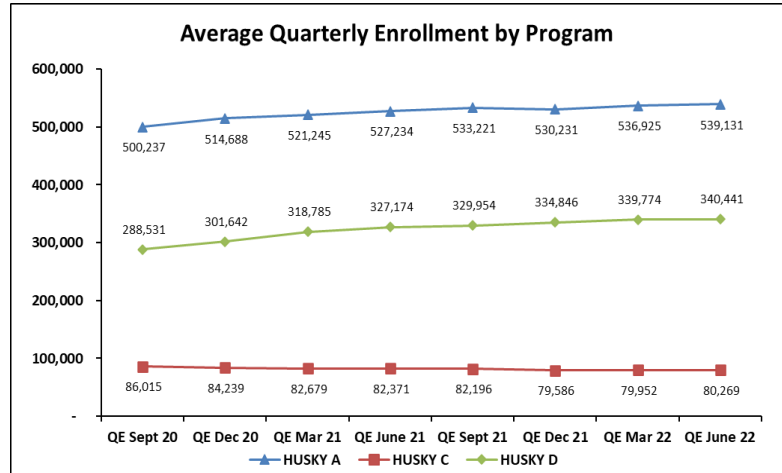
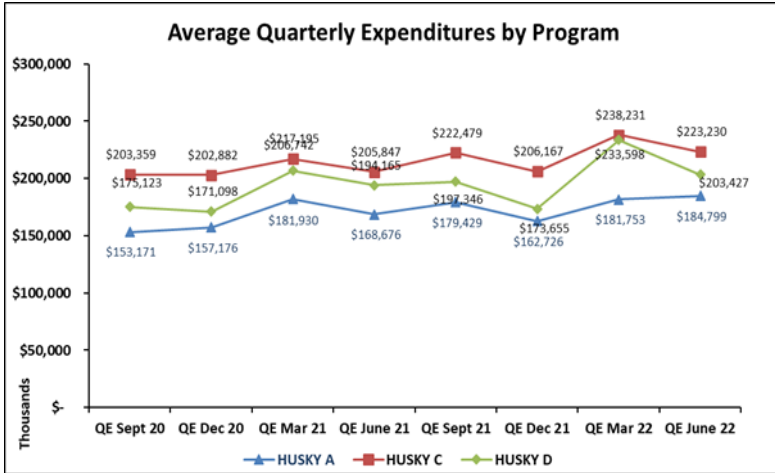
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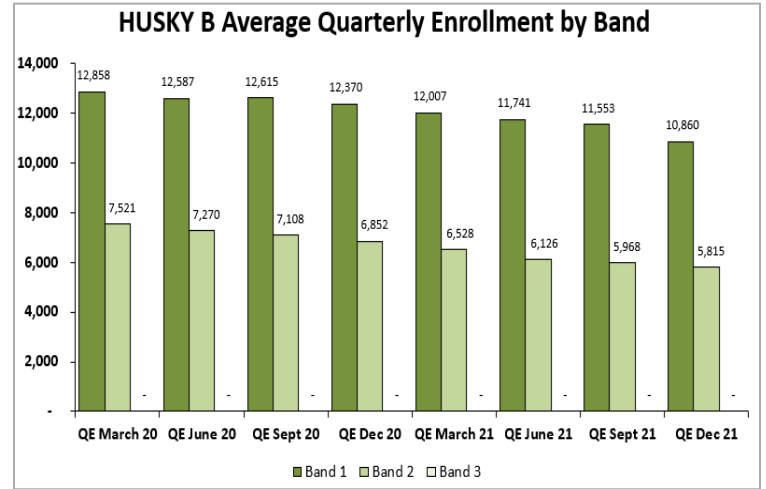
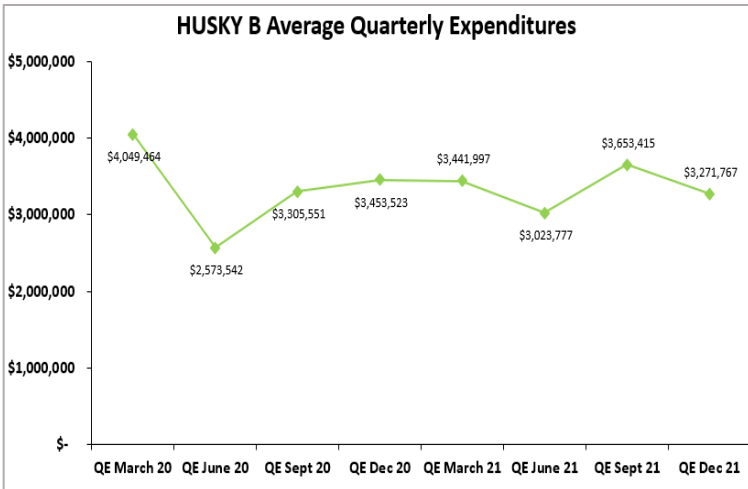
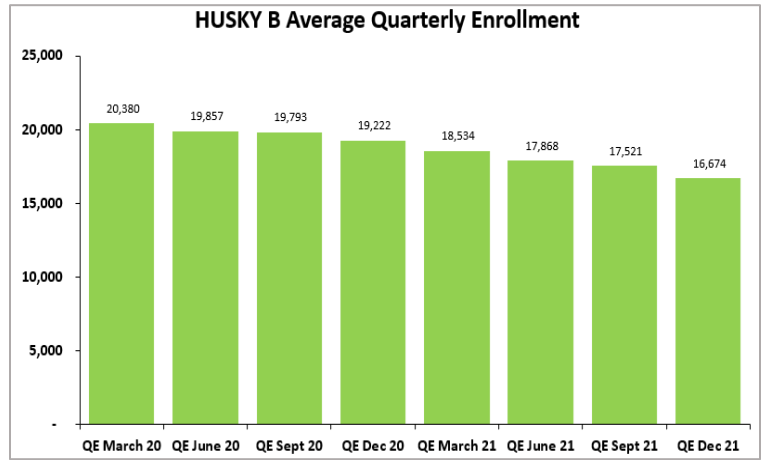
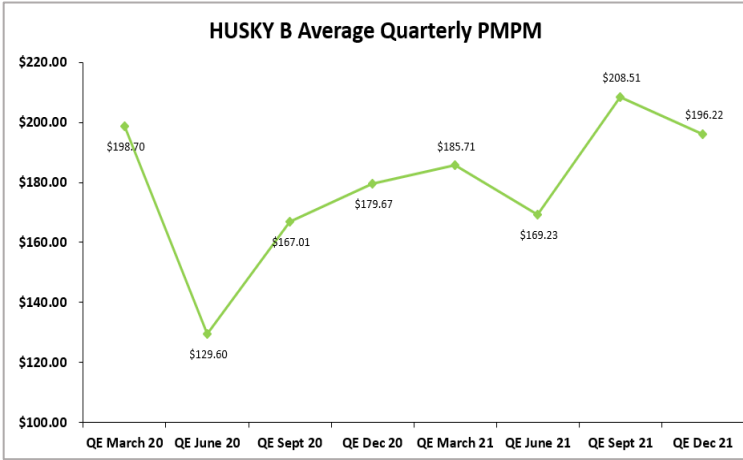
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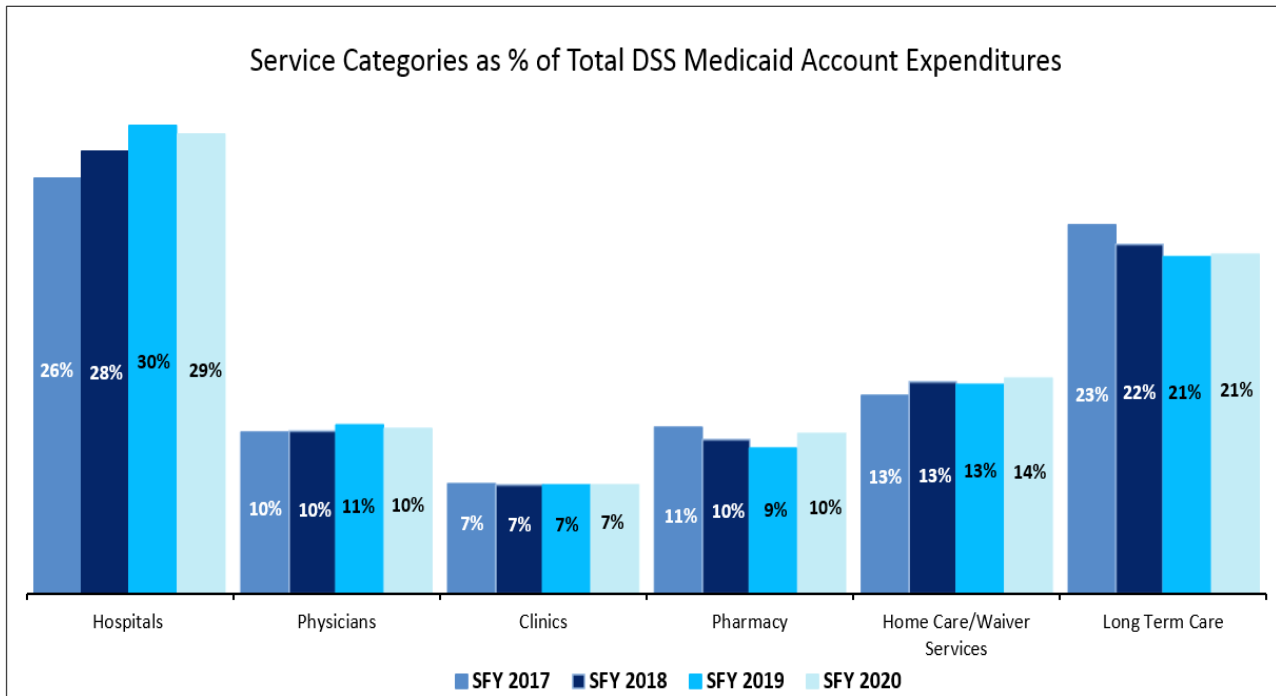
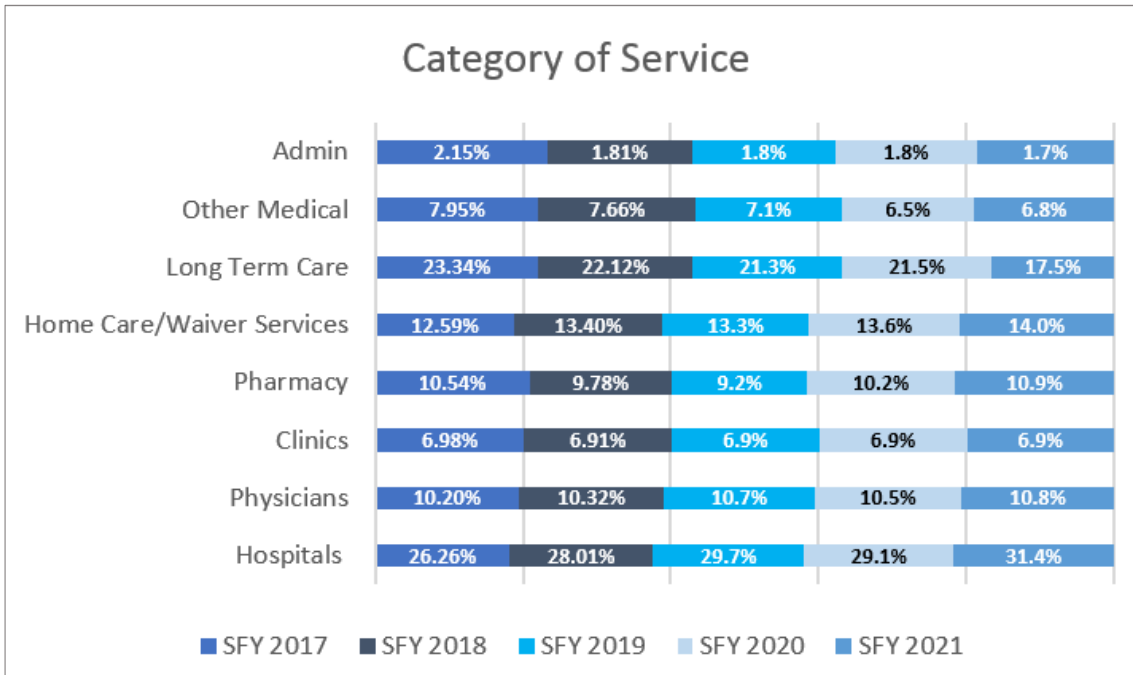
Quarterly Summary



HUSKY B



Service Category Expenditures



Definitions

Eligibility for HUSKY programs

HUSKY A	Eligible children, parents, relative caregivers, and pregnant women.
HUSKY B	Children’s Health Insurance Program (CHIP); children under age 19 in households with income between 201% and 323% of the federal poverty level qualify under either band 1 or band 2.
Bands	<p>Represent income eligibility thresholds and signify whether children are subject to premiums. All children enrolled in HUSKY B (CHIP – Bands 1 and 2), except for American Indians and Alaska Natives, are subject to co-payments for non-preventive services and some co-insurance for dental services. Children enrolled in HUSKY B Band 2 pay premiums. Also, it should be noted that the HUSKY B Band 2 data includes individuals who are eligible but have not yet enrolled. Advance payment of premium is required to enroll.</p> <ul style="list-style-type: none"> • Band 1 – Uninsured children in families with income >201%FPL – 254% FPL. Cost-sharing applies, No premiums • Band 2 – Uninsured children in families with income >254%FPL - 323% FPL. Cost-sharing applies; \$30 a month for one child; \$50 a month for two or more children • Band 3 no longer exists as of 1/1/14
HUSKY C	Eligible individuals who are aged 65 or older, blind or have a disability.
HUSKY D	Low-income adults aged 19 through 64 without dependent children, who do not receive federal Supplemental Security Income or Medicare and who are not pregnant.
PMPM	The Per Member Per Month cost for each enrolled member

Category of Service Groupings

Hospitals	Includes all hospital costs billed under the hospital inpatient and hospital outpatient service groups. This includes inpatient and outpatient acute care, children’s hospital and behavioral health services. Chronic disease hospital costs are not included here and fall under the Long Term Care category grouping.
Physicians	Includes all physician practitioners, primary care and specialists, as well as other practitioners such as APRNs and physician assistants.
Long Term Care	Includes nursing homes, intermediate care facilities for individuals with intellectual disabilities, chronic disease hospitals and hospice services provided in an institutional setting.
Home Care/Waiver Services	Includes CT Home Care, PCA, ABI, Autism, Katie Beckett, and Mental Health waiver services. Also includes Community First Choice (self-directed personal

	care assistant services), birth to three and autism services, in-home hospice care, and home health services.
Pharmacy	Includes costs for pharmaceuticals generally provided by retail pharmacies, net of any applicable rebates. Certain specialized pharmacy services provided in outpatient settings fall outside of this service group. Also included in the grouping are payments made to the federal government representing the state share of Medicare Part D drugs provided by Medicare on behalf of dually eligible recipients of both Medicaid and Medicare.
Clinics	Includes federally qualified health centers, family planning clinics, rehabilitation clinics, and behavioral health clinics.
Other Medical	Includes an array of services such as dental, vision, lab and x-ray, alcohol and drug treatment, emergency and non-emergency transportation, and durable medical equipment.
Admin	Includes Medicaid administrative costs paid under the Medicaid account within the state budget. This includes our medical, behavioral health and dental administrative services organizations, non-emergency medical transportation administration, certain waiver support administrative contracts, fiscal intermediary services, and other smaller administrative support costs. This does not include other Medicaid administrative support costs that are funded under the Other Expenses account.

*It should be noted that these services do not include Medicaid reimbursable, publicly operated services funded under other state agencies such as the Departments of Developmental Disabilities, Mental Health and Addiction Services and Children and Families.