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This study was conducted by Optum exclusively for the State of CT and specifically and solely as it applies to the evaluation of the benefit mandates discussed in this report. This statement of opinion is not intended for any other application or purpose. I, Steven J. Stender, am a consulting health actuary and Director with Optum. I am a fellow of the Society of Actuaries and a member of the American Academy of Actuaries, in good standing, and I meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion contained herein. Please contact me if you have questions. My e-mail address is [steven.stender@optum.com](mailto:steven.stender@optum.com), and my office phone is 212-817-6018.



Steven J Stender, FSA, MAAA

## Appendices

PMPM COST INDIVIDUAL COVERAGE PLANS PROJECTED 2014 COSTS (PMPM)	
<b>Individual premium developed as weighted average from carrier surveys</b>	
<b>Average Individual Premium:</b>	<b>\$303.38</b>

NOTE: Individual data is less credible than group data due to small sample size

PROJECTED 2014 PMPM COST FOR INDIVIDUAL COVERAGE PLANS						
	=A - B			= C + D		
	A	B	C	D	E	F
Mandate	Allowed Cost	Cost Share	Paid Cost	Retention	Paid Cost + Retention	% of Premium
<b>Superior Court</b>	0.3801	NA	0.2661	0.0389	0.3050	0.10%
<b>Probate Court</b>	0.0508	NA	0.0356	0.0052	0.0408	0.01%
<b>Total</b>	0.4310	0.1293	0.3017	0.0441	0.3458	0.11%

PMPM COST GROUP COVERAGE	
PROJECTED 2014 COSTS (PMPM)	
Group premium developed as weighted average from carrier surveys	
Average Group Premium	
Any Size	\$482.42
<100 Employees	\$548.52
100+ Employees	\$417.59

PROJECTED 2014 PMPM COST FOR GROUP COVERAGE PLANS								
=A - B				= C + D				
	A	B	C	D	E	F	G	H
							% of Premium	
Mandate	Allowed Cost	Cost Share	Paid Cost	Retention	Paid Cost + Retention	% of Premium	Group Size < 100 Ees	Group Size 100+ Ees
Superior Court	0.3801	NA	0.3298	0.0582	0.3880	0.08%	0.07%	0.09%
Probate Court	0.0508	NA	0.0441	0.0078	0.0519	0.01%	0.01%	0.01%
Total	0.4310	0.0571	0.3739	0.0660	0.4399	0.09%	0.08%	0.11%

TOTAL DOLLAR COST CALCULATION	
PROJECTED 2014 COSTS (dollars)	
TOTAL COST CALCULATION BASED ON:	
<b>Total Insured's (Group + Individual)</b>	1,146,887
<b>Group (Excluding State)</b>	828,936
<b>Group (State Only)</b>	161,368

PROJECTED 2014 MONTHLY COST FOR GROUP COVERAGE PLANS						
	A	B	C	D	E	F
	Allowed Cost		Paid Cost + Retention	Allowed Cost + Retention	Paid Cost	Paid Cost
MANDATE	Total Cost of Health Care	Paid Cost	Premium Impact	Overall Cost to Health Care System	Total Paid Cost for the State Employee Health Plan	Total Paid Cost for Fully Insured + State Employees
<b>GROUP + INDIVIDUAL</b>						
Superior Court	\$435,959	\$357,969	\$421,140	\$375,720		
Probate Court	\$58,298	\$47,869	\$56,317	\$50,243		
Total	\$494,257	\$405,838	\$477,457	\$425,963		
<b>GROUP ONLY</b>						
Superior Court	\$315,098	\$273,366	\$321,608	\$363,339	\$53,216	\$326,582
Probate Court	\$42,136	\$36,556	\$43,007	\$48,587	\$7,116	\$43,672
Total	\$357,234	\$309,922	\$364,614	\$411,927	\$60,332	\$370,254

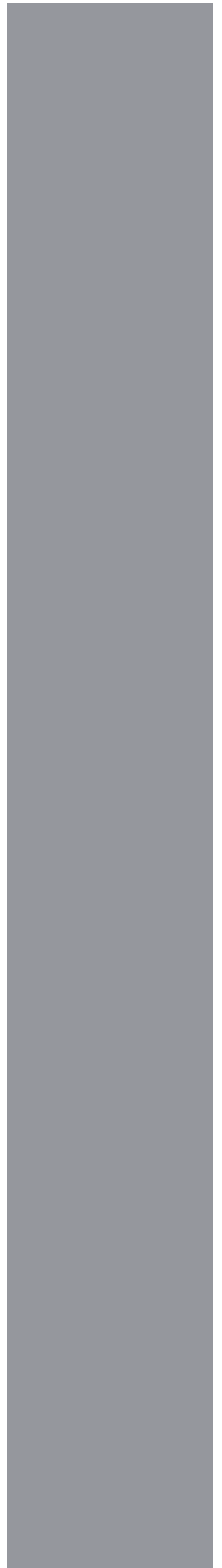
**COST OF MANDATED HEALTH CARE BENEFIT ON COST OF HEALTH CARE BY EMPLOYER SIZE**

<b>PMPM COST SMALL GROUP (&lt; 100 EMPLOYEES ) COVERAGE</b>						
	<b>= A - B</b>			<b>=C + D</b>		
	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>G</b>
<b>Mandate</b>	<b>Allowed Cost</b>	<b>Cost Share</b>	<b>Paid Cost</b>	<b>Retention</b>	<b>Paid Cost + Retention</b>	<b>% of Premium</b>
Superior Court	0.3801	NA	0.3298	0.0609	0.3907	0.07%
Probate Court	0.0508	NA	0.0441	0.0081	0.0522	0.01%
<b>Total</b>	<b>0.4310</b>	<b>0.0571</b>	<b>0.3739</b>	<b>0.0691</b>	<b>0.4429</b>	<b>0.08%</b>

<b>PMPM COST LARGE GROUP(100+ EMPLOYEES) COVERAGE</b>						
	<b>= A - B</b>			<b>=C + D</b>		
	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>	<b>G</b>
<b>Mandate</b>	<b>Allowed Cost</b>	<b>Cost Share</b>	<b>Paid Cost</b>	<b>Retention</b>	<b>Paid Cost + Retention</b>	<b>% of Premium</b>
Superior Court	0.3801	NA	0.3298	0.0561	0.3859	0.09%
Probate Court	0.0508	NA	0.0441	0.0075	0.0516	0.01%
<b>Total</b>	<b>0.4310</b>	<b>0.0571</b>	<b>0.3739</b>	<b>0.0636</b>	<b>0.4375</b>	<b>0.10%</b>

## **Appendix III**

### **CSSD Contracted Providers Survey**



# CSSD Contracted Providers Survey

## Introduction

Dear CSSD service provider, CSSD is partnering with the UConn Center for Public Health and Health Policy (CPHHP) to collect information from CSSD contracted services providers. CPHHP has been contracted by the Committee on Insurance and Real Estate of the CT General Assembly to review a proposed mandate that would require private insurance carriers to cover services for mental and substance use disorders ordered by the judiciary. Answers to this survey will provide information CPHHP requires to complete their review. Please complete this survey at your earliest opportunity. When completing the survey, please keep in mind that we are assessing care of a medical/psychiatric nature and, as such, please exclude other types of services that a private insurance carrier would be unlikely to cover, such as education or transportation. It may be beneficial to print the survey and distribute it to the appropriate people in your organization to calculate the numbers we are requesting before completing the survey online. If you are unable to calculate your responses, please coordinate with the most informed colleagues at your organization for estimations. **Please complete the online survey before 5PM on Friday, November 29, 2013**, at which time the online survey will close. All results will be reported in aggregate form. No individuals or organizations will be identified in any reports or publications resulting from these data. Your responses will go directly to CPHHP and will not be reviewed by CSSD. Thank you in advance for your time and attention to this important effort. Please direct any comments or questions to the Study Coordinator: Andrew M. Cislo, PhD at [cislo@uchc.edu](mailto:cislo@uchc.edu) (preferred) or 860-282-8575.

### 1. What was the total number of CSSD clients that your organization served in fiscal year 2012?

Number of CSSD clients served in FY 2012:

### 2. What proportion (%) of your fiscal year 2012 CSSD clients were juveniles? (i.e. under 18 years of age)

### 3. What proportion of your CSSD clients were treated for substance use disorder in fiscal year 2012?

### 4. What proportion of your CSSD clients were treated for a mental disorder (excluding substance use) in fiscal year 2012?

### 5. Among the adult CSSD clients that you served in fiscal year 2012, what was the proportion who had private insurance coverage?

### 6. Among the juvenile CSSD clients that you served in fiscal year 2012, what was the proportion who had private insurance coverage?

### 7. What was the aggregate dollar cost of services provided to CSSD clients in fiscal year 2012 for care that a private insurance carrier might cover?

Total cost of applicable services to CSSD clients in FY 2012:



# CSSD Contracted Providers Survey

## 8. What was the aggregate dollar cost of services provided to CSSD clients in FY 2012 who had private insurance?

Total cost for CSSD clients with private insurance in FY 2012:

## 9. What was the total number of dollars billed to the private insurance carriers for CSSD clients in fiscal year 2012?

Total dollars billed to CSSD clients' private insurance in FY 2012:

## 10. What was the total dollar amount collected from private insurance carriers for CSSD clients in fiscal year 2012?

Total dollars received from CSSD clients' private insurance in FYI 2012:

## 11. What was the total dollar amount denied by private insurance carriers for CSSD clients in fiscal year 2012?

Total dollars denied by private insurance for CSSD clients in FY 2012:

## 12. What was the total dollar amount that was cost shared by CSSD clients in fiscal year 2012?

Total dollars paid by CSSD clients in FY 2012:

## 13. What was the total dollar amount that was cost shared by Court Support Services Division in fiscal year 2012?

Total dollars covered by CSSD in FY 2012:

## 14. What was the total dollar amount for services to CSSD clients that was covered by public insurance (e.g. Medicaid) in fiscal year 2012?

Total dollars covered by public insurance in FY 2012:

## 15. For CSSD clients with private insurance whose claims were denied in fiscal year 2012, what proportion of patients were denied because services were court-ordered?

## CSSD Contracted Providers Survey

**16. For CSSD clients with private insurance whose claims were denied in fiscal year 2012, what proportion of patients were denied because services were not judged medically necessary?**

**17. For CSSD clients with private insurance whose claims were denied in fiscal year 2012, what proportion of patients were denied because services were not covered under the insurance plan?**

**18. Please indicate whether your responses to the questions about were calculated or estimated or some combination:**

- My responses were calculated
- My responses were estimated
- I both calculated and estimated my responses

**19. Please feel free to comment on the capabilities and limitations of your data system in answering the above questions:**

# CSSD Contracted Providers Survey

**20. Please feel free to add any additional comments:**

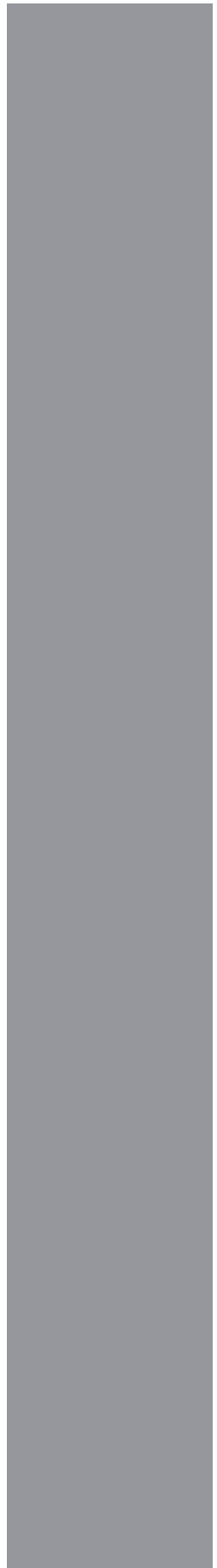


Thank you for your time and participation!



**Appendix IV**

**DHMAS Reponse to Legislative Request  
- Court Ordered Services**













## Glossary of Terms and Acronyms<sup>1</sup>

<b>Term</b>	<b>Definition</b>
ACA	Patient Protection and Affordable Care Act
CID	Connecticut Insurance Department.
CSSD	Court Support Services Division of the Connecticut Judicial Branch
Comorbidity	The co-occurring presence of two or more medical conditions.
Co-payment	The amount that a member must pay out-of-pocket for medical services. It is usually a fixed amount, such as \$5, \$10, or \$25 per service.
CPHHP	Center for Public Health and Health Policy (University of Connecticut)
Deductible	That portion of a subscriber's (or member's) health care expenses that must be paid out-of-pocket before the insurance coverage applies (amounts vary depending on type of plan). Deductibles are common in insurance plans and PPOs, uncommon in HMOs. They may apply only to the out-of-network portion of a point-of-service plan or only to one portion of the plan coverage (e.g., just to pharmacy services).
DCF	Connecticut Department of Children and Families.
Delinquency	An offence or misdeed, usually of a minor nature, especially one committed by a young person.
DMHAS	Connecticut Department of Mental Health and Addiction Services
Electroconvulsive therapy/ECT	A treatment for serious mental illnesses, such as severe depressive disorders, involving the application of an electrical current to the head in order to induce a seizure: usually administered after sedatives and muscle relaxants.
Forensic	Pertaining to, connected with, or used in courts of law or public discussion and debate.
Group Coverage	A type of health insurance in which members receive coverage through an insurance contract that covers an entire group, usually an employment-based group. Employees usually have the option of covering other members of their families as well.
Health Maintenance Organization (HMO)	A type of managed care plan that acts as both insurer and provider of a comprehensive set of health care services to an enrolled population. Services are furnished through a network of providers.

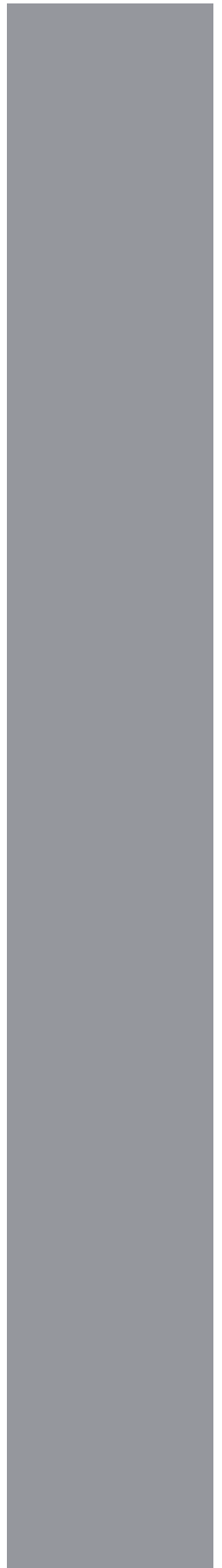
<sup>1</sup> Except where otherwise noted, definitions are taken from Dictionary.com, <http://dictionary.reference.com/browse/mode?s=t>





**Appendix VI.**

**Acknowledgments and Work Group**





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- ◆ Chris Pleasanton The Community Court in Hartford

Insurers and managed care organizations in Connecticut responding to the survey.

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