Covered Connecticut Program

Starting July 1, 2021, some Connecticut residents that meet specific eligibility requirements will be paying $0 for their healthcare coverage through Access Health CT, thanks to the new Covered Connecticut Program created by the State of Connecticut. The Covered Connecticut Program is administered by the State Office of Health Strategy in partnership with the Department of Social Services, the Insurance Department and Access Health CT.

Parents/caretakers, and their tax dependents, must meet the following eligibility requirements to participate in the Covered Connecticut Program:

1. Have a household annual income that is greater than 160%, and up to and including 175% of the Federal Poverty Level (FPL)
2. Have at least one dependent child in the household under age 19. A child who is age 18 must be a full-time student.
3. Be eligible for Advanced Premium Tax Credits (APTCs) and Cost Sharing Reductions (CSRs)
4. Use 100% of Advanced Premium Tax Credits (APTCs) and Cost Sharing Reductions (CSRs) available to you, along with the expanded American Rescue Plan (ARP) financial assistance.
5. Be enrolled in an eligible Silver Level Plan

Background: In this new program, the State of Connecticut will pay the consumer portion of the monthly payment (premium) directly to insurance carriers (Anthem/ConnectiCare) and will also pay for all of the cost-sharing amounts (deductibles, co-pays, co-insurance and maximum out-of-pocket costs) that customers normally would have to pay with a health insurance plan.

Beginning July 1, 2022, this program will also include coverage for visiting the dentist and non-emergency medical transportation (NEMT) to see providers. The health insurance plan will be a Silver Plan offered by either Anthem or ConnectiCare through Access Health CT. The dental benefits and non-emergency transportation will be administered by the Department of Social Services.
Frequently Asked Questions

What is Access Health CT?
Access Health CT (AHCT) is Connecticut’s official health insurance marketplace, where you can shop, compare, and enroll in quality healthcare plans; and is the only place where you can qualify for financial help to lower your costs. Your application will also be considered for free or low-cost coverage through HUSKY Health (Medicaid/the Children’s Health Insurance Program or CHIP).

Can anyone enroll though Access Health CT?
If you are a Connecticut resident who is lawfully present (U.S. citizen, by birth/naturalization, or who has a valid, current U.S. immigration status) and non-incarcerated, you can enroll through Access Health CT.

How will current, eligible Access Health CT customers be notified about the new Covered Connecticut Program?
Access Health CT will be notifying eligible customers about their eligibility and actions required to benefit from the Covered Connecticut Program through email and direct mail.

What do Access Health CT customers need to do to participate in the Covered Connecticut Program?
If you are an Access Health CT customer that meets the eligibility requirements, and are enrolled in a qualifying Silver Plan, you may want to verify that you are taking 100% of the Advanced Premium Tax Credits (APTCs) and Cost Sharing Reductions (CSRs) available to you and are receiving the expanded American Rescue Plan (ARP) financial assistance.

If you are not currently enrolled in an eligible Silver Plan, and/or not taking 100% of the Advanced Premium Tax Credits (APTCs) and Cost Sharing Reductions (CSRs) available to you, and/or not receiving the expanded American Rescue Plan (ARP) financial assistance, you can make plan changes.

If you are a new customer and think you may be eligible, contact the Call Center for help. You may also visit a navigator or certified application counselor (CAC) who may also assist you.

The Access Health CT Call Center can be reached at 1-855-805-4325, Monday – Friday from 8 a.m. to 5 p.m. If you are deaf or hearing impaired, you may use TTY at 1-855-789-2428 or call with a relay operator.

Should I contact a broker or my broker?
If you want advice about whether to change plans or for selecting a plan if you are new to Access Health CT, you should speak to a broker to review your options and your needs. If you do not have a broker you can find one by visiting www.AccessHealthCT.com, selecting “Get Help” and then “Find Certified Broker.”

What types of health care or services will be covered through this program?
All health care and services must be medically necessary and covered by the health insurance plan to be paid by the State of Connecticut.

What is the American Rescue Plan Act of 2021?
The American Rescue Plan Act (ARP), signed into law on March 11, 2021, by President Biden has made health insurance coverage more affordable and accessible for many Connecticut residents during the current health crisis, by virtually eliminating or vastly reducing monthly payments (premiums) for many people with low and moderate incomes who enroll through Access Health CT; and providing new financial help for people with somewhat higher incomes who can face high premiums.
Is the newly available financial help offered only through Access Health CT?
Yes. This is the reason why many who buy plans “off-exchange” or are uninsured/underinsured should come and shop, compare and enroll as the newly available financial help is available only through the marketplace.

Will eligible customers really have $0 premium and $0 cost-sharing plans through the Covered Connecticut Program?
Yes! The State of Connecticut will pay the consumer portion of the premium (monthly payment) and all out-of-pocket expenses (what you pay for a covered healthcare service) that customers were previously responsible for paying under their health insurance plan through Access Health CT.

When will the new program take effect?
The law is effective July 1, 2021. Depending on when you enroll, your health insurance plan may have a different effective date.

If eligible customers do not elect to use all APTCs available to them, will they still benefit from the Covered Connecticut Program?
No. Customers that want to participate in the Covered Connecticut Program must elect to use all APTCs available to them. Depending on the customer’s current application status and preferences, they may not have elected to use all APTCs available to them. Access Health CT will communicate with consumers who have not updated their accounts but may benefit from the Covered Connecticut Program changes.

If I am already paying a very low premium, should I take any action?
Probably. Many consumers are already enrolled in plans that cost nearly $0 per month. But with the Covered Connecticut Program, they may be eligible for a plan with no premium (monthly payment) and no out-of-pocket expenses (what you pay for a covered healthcare services).

How do I estimate my household income?
Please include all estimated income for 2021, and disclose any unemployment benefits, including any supplemental payments. Any Stimulus Payments do not need to be included in annual income.

Do I need to verify any of my household information after I enroll?
Maybe. Access Health CT attempts to verify all reported information with third-party sources. If we are unable to verify some of your information, we will contact you to request your verification of certain specific information. You should always make sure you have accurately listed your annual household income and that you provide verification if requested to make sure you are receiving the correct amount of financial assistance during the year. Always remember to make updates to your income and other information right away if there are any changes during the year.

Can I still qualify if my income is not the same every month?
Yes. The Covered Connecticut Program income requirements are based on annual income, which must be greater than 160%, and up to and including 175% of the FPL. If you experience a change in income, you must report it immediately.

Are American Indians and Alaska Natives eligible for the Covered Connecticut Program?
Yes.

When can eligible Covered Connecticut Program participants expect a new health insurance card?
You can expect a new insurance card from your insurance company in approximately one week. Contact your insurance company if you need a temporary card before you receive the new insurance card. If you are charged for any cost-sharing while seeking medical care or services, or visiting a pharmacy, you can contact your insurance company to submit a reimbursement request.