

KB Article: Covered Connecticut Program (updated June 15, 2022 for Phase II)

Some Connecticut residents that meet specific eligibility requirements are paying **\$0** for their health insurance coverage, thanks to the new **Covered Connecticut Program** created by the State of Connecticut. The Covered Connecticut Program provides health insurance coverage, dental coverage and Non-Emergency Medical Transportation (NEMT) administered by the Connecticut Department of Social Services.

For eligible Connecticut residents enrolled in the Covered Connecticut Program, the State of Connecticut pays the customer's portion of the monthly payment (premium) directly to their insurance company (Anthem/ConnectiCare) and also pays for the cost-sharing amounts (deductibles, co-pays, co-insurance and maximum out-of-pocket costs) that customers would typically have to pay with a health insurance plan.

Residents must meet the following requirements to participate in the Covered Connecticut Program:

- ✓ Have a household income up to and including 175% of the Federal Poverty Level (FPL) and don't qualify for Medicaid because of income*
- ✓ Be eligible for financial help, including Advanced Premium Tax Credit (APTC) and Cost-Sharing Reductions (CSRs), and use 100% of the financial help available to you
- ✓ Be enrolled in a **Silver Level Plan**

*If your household income makes you eligible for HUSKY Health/Medicaid, you will not be able to enroll in the Covered Connecticut Program. Medicaid provides comprehensive benefits, please contact DSS for more information.

Household Size	1	2	3	4	5	6	7	8
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Ineligible for HUSKY/Medicaid and have household income up to and including 175% FPL	\$22,540	\$30,485	\$38,430	\$46,375	\$54,320	\$62,265	\$70,210	\$78,155

How to Enroll in the Covered Connecticut Program

Complete an application at AccessHealthCT.com and we will let you know if you qualify for the Covered Connecticut Program. You can also call our call center for free enrollment and eligibility help at 1-855-805-4325. If you are deaf or hearing impaired, you may use the TTY at 1-855-789-2428 or contact us with a relay operator.

Already enrolled through Access Health CT or the Covered Connecticut Program?

- If you're already enrolled in the Covered Connecticut Program, we will automatically update your account by July 2022 to include the additional NEMT and Dental benefits. (The Connecticut Department of Social Services will send you an identification card)
- If you're not already enrolled in the Covered Connecticut Program, we will review your application to see if you qualify for the Covered Connecticut Program and automatically enroll any eligible customers by July 2022. Make sure we have the most up-to-date household income and contact information.

FREQUENTLY ASKED QUESTIONS

When does this program start?

The law went into effect on July 1, 2021 but additional benefits and services were added to the program as of July 1, 2022.

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.
- Dental benefits and Non-Emergency Medical Transportation: for more information about benefits please visit <https://ctdhp.org> and <https://ct.ridewithveyo.com/>

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 customer 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. There will also be dental benefits and Non-Emergency Medical Transportation benefits included at no additional cost.

Is this financial help available only through Access Health CT?

Yes. This is the reason we encourage everyone to take a look at plans available through Access Health CT, even if you already have other health insurance coverage.

How do I estimate my household income?

Please include all estimated income and disclose any unemployment benefits.

Can I still qualify if my income isn't the same every month?

Yes. The Covered Connecticut Program income requirements are based on **annual income**, so you will need to estimate what your total annual household income will be for the year. If you experience a significant change in income after you enroll, you must report it to Access Health CT immediately.

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 your broker to review your options and your needs. If you do not have a broker you can find one [here](#).

If eligible customers do not elect to use all Advance Premium Tax Credit (APTC) 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 APTC available to them. Depending on the customer's current application status and preferences, they may not have elected to use all APTC available to them. Access Health CT will communicate with customers 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 customers 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 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 direct mail and email.

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.

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

Yes.

When can Covered Connecticut Program participants expect new identification card(s)?

You will get two identification cards after enrolling in the Covered Connecticut Program.

You can expect a new identification card from your insurance company about one week after enrollment. 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.

The Connecticut Department of Social Services will send an identification card to Covered Connecticut Program participants for their Dental and NEMT benefits approximately two weeks after enrollment.

What if I enroll in the Covered Connecticut Program but I already paid my premium (monthly payment) to my insurance company for the next month?

Your insurance company will reimburse you.

Can I be reimbursed for premium (monthly payment) or cost-sharing amounts (deductibles, co-pays, co-insurance and maximum out-of-pocket costs) I incurred before I was enrolled in the Covered Connecticut Program?

No. You are still responsible for any balances due for premiums, care or services received before you enroll in the Covered Connecticut Program.

What else should I keep in mind?

Application details like household size and estimated income will impact the financial help you may be eligible for through Access Health CT. It is important to report any changes as soon as possible.

Remember that updates to your application could result in changes to the type of coverage you may select.

How do I use dental benefits after I enroll?

Please visit <https://ctdhp.org> for more information about dental benefits, including details on benefits and how to find a provider.

How do I access Non-Emergency Medical Transportation after I enroll?

Please visit <https://ct.ridewithvevo.com/> for details about Non-Emergency Medical Transportation (NEMT) benefits.