

MEMO

To: Early Childhood Education Endowment Advisory Board
From: Tri-Chairs: Senator Maher, State Representative Farrar, and Commissioner Trueworthy
Re: June 18, 2026

This memo provides supplemental information and outlines the recommendation provided to the Early Childhood Education Endowment Advisory Board by Access Health CT regarding a health insurance subsidy for the CT Early Childhood Education workforce per [Public Act 25-93](#). The Advisory Board will vote to approve or modify this recommendation at the June 23, 2026 meeting.

Eligible Subsidies Pursuant to Public Act 25-93

The subsidy program may be created in several different ways pursuant to the legislation for enrollment in qualified health plans (QHPs) through Access Health CT (AHCT), either for:

- (1) a subsidy applied to the cost of a QHP purchased by the individual employee through the AHCT Individual marketplace;
- (2) a subsidy applied to the cost of a QHP purchased by the employer through the AHCT Small Employer Health Options Program (SHOP), or
- (3) in combination with an Individual Coverage Health Reimbursement Arrangement (ICHRA) offered by an employer for an employee to enroll in an Individual plan through the AHCT marketplace.

Pursuant to the statute, in order to be eligible, the early care and education (ECE) employee must not be eligible for Medicaid or the Covered Connecticut Program, must apply for and accept all eligible federal and state subsidies, employer contributions and other subsidies applicable to the cost of a QHP.

Statute specifies \$10 million of the FY27 Endowment spending for the health insurance subsidy program.

Recommendation

To provide an income-based, flat subsidy for early childhood educators to offset the consumer portion of the premium for:

1. An individual who purchases a Qualified Health Plan through the Access Health CT Individual marketplace

2. An individual whose employer has purchased a QHP through the AHCT Small Employer Health Options Program (SHOP)
 - a. Small employers with 50 or fewer FTEs may enroll in a small group plan through the AHCT SHOP. AHCT handles premium aggregation for SHOP plans, so employers are billed monthly and pay AHCT for the premiums, and AHCT forwards to the insurance company. A flat subsidy would be used to offset the consumer portion of premium for a group plan through the SHOP

3. An individual whose employer offers an Individual Coverage Health Reimbursement Arrangement (ICHRA)
 - a. Employers may offer their employees an ICHRA contribution as a form of employer coverage. The ICHRA contribution is used to offset the premium amount for each employee to purchase a plan through the AHCT Individual marketplace, and AHCT now offers a BusinessPlus platform for employers to offer their employees an ICHRA. The payment structure through BusinessPlus provides the maximum ease for the employer and the employee. Subsidy eligibility can be done through the BusinessPlus platform, and the payments could be combined and sent to the insurance company each month.

Recommended sliding scale starting at 175% of household income federal poverty level (FPL) with a flat-dollar subsidy amount within defined income bands:

1. >175% to 250% FPL
2. >250% to 400% FPL
3. Over 400% FPL

Recommended subsidy amount:

1. >175% to 250% FPL - \$1,200 per year (for 12 months of coverage)
2. >250% to 400% FPL - \$1,100 per year (for 12 months of coverage)
3. Over 400% FPL - \$1,000 per year (for 12 months of coverage)

Estimates suggest that 7,200 to 8,800 individual early childhood educators would benefit from this health insurance subsidy. The below table outlines the expected enrollment and cost.

| Baseline eligible employees | | | |
|---|---------------------|------------------|-----------------------------|
| Household Income % FPL | Enrollment % | Employees | Annual State Subsidy |
| 175%-250% FPL | 15% | 1,200 | \$1,200 |
| 250% to 400% FPL | 35% | 2,800 | \$1,100 |
| Over400% FPL | 50% | 4,000 | \$1,000 |
| Baseline Employees and Total Funding | 100% | 8,000 | \$8,520,000 |
| Low eligible employees | | | |
| Household Income % FPL | Enrollment % | Employees | Annual State Subsidy |
| 175%-250% FPL | 15% | 1,100 | \$1,200 |
| 250% to 400% FPL | 35% | 2,500 | \$1,100 |
| Over400% FPL | 50% | 3,600 | \$1,000 |
| Low Scenario | 100% | 7,200 | \$7,670,000 |
| High eligible employees | | | |
| Household Income % FPL | Enrollment % | Employees | Annual State Subsidy |
| 175%-250% FPL | 15% | 1,300 | \$1,200 |
| 250% to 400% FPL | 35% | 3,100 | \$1,100 |
| Over400% FPL | 50% | 4,400 | \$1,000 |
| High Scenario | 100% | 8,800 | \$9,370,000 |

Outreach and Implementation Plan

Access Health CT currently has 6 Navigator organizations located across the state. Navigator organizations are required to conduct year-round outreach and host regular outreach events which include monthly Healthy Chat information events as well as Enrollment events during the annual open enrollment period, as well as engaging with community organizations and promoting AHCT initiatives and events.

Information is shared on the full range of health insurance options including Medicaid and the Children's Health Insurance Program (CHIP), as well as federal and state financial help with a qualified health plan. This includes the eligibility criteria for various programs, the enrollment process, the documentation that may be requested as well as the requirement for all consumers receiving federal financial assistance to file a federal tax return and reconcile any premium tax credit amounts received. Consumers requesting assistance selecting a health insurance plan are directed to licensed brokers who are the only ones who can recommend a plan in Connecticut.

Navigators are also required to provide referrals to the Office of the Healthcare Advocate, health insurance ombudsman or other appropriate agencies for any enrollee grievance, complaint or question regarding health insurance coverage.

Navigators are required to provide assistance in a manner that is culturally and linguistically appropriate to the needs of the population being served by AHCT, including those with limited English language proficiency and to ensure accessibility and usability of Navigator tools and functions for individuals with disabilities in accordance with the ADA.

AHCT will offer additional educational and Enrollment events for ECE employees. Targeted outreach would include sending letters to the licensed providers to reach the ECE worker audience most likely to be uninsured, and hosting in person events to promote awareness and education on the new subsidy program as well as enrollment events to assist with enrollment.

Estimated costs are listed below and may vary depending upon final parameters for the subsidy program and the outreach needed to reach the audience of eligible ECE workers.

| Implementation Costs | Amount |
|--|------------------|
| AHCT Online System Changes | \$340,000 |
| Outreach | |
| • Mailing Letters to Family Child Care Home providers | \$9,000 |
| • Print Collateral Materials for Centers and Distribution | \$35,000 |
| • Paid Social Media Campaign | \$9,000 |
| • Hosting Outreach Events (depending on number of events and sites for events) | \$30,000 |
| Total Cost | \$423,000 |

*there will be an additional administrative cost for the financial transfer component