

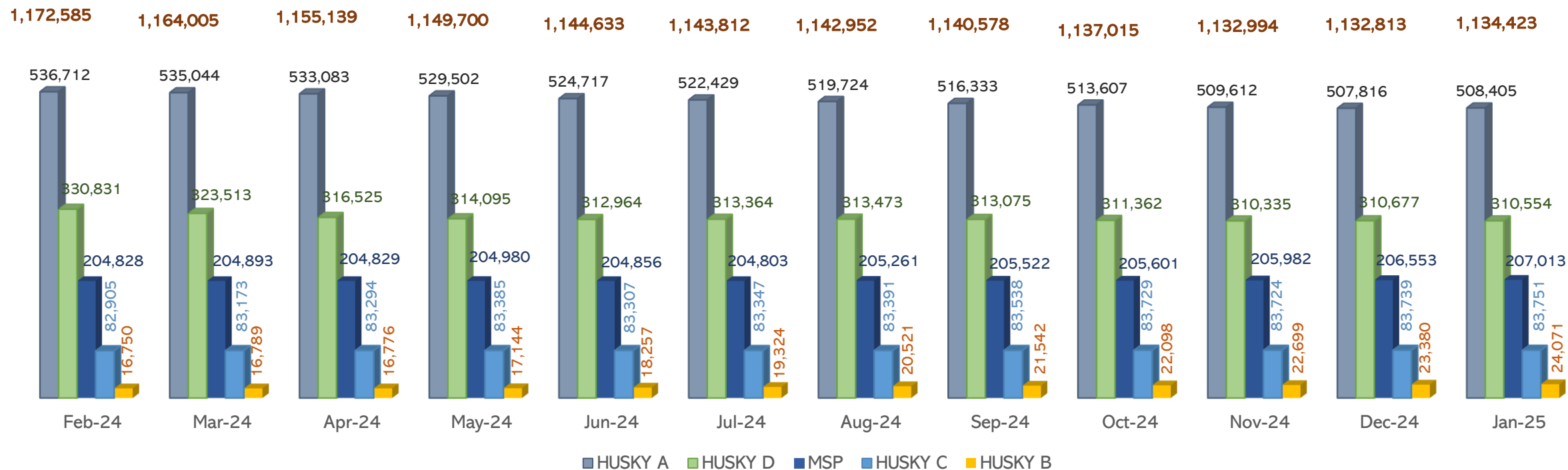
HUSKY Health Program Performance Dashboard



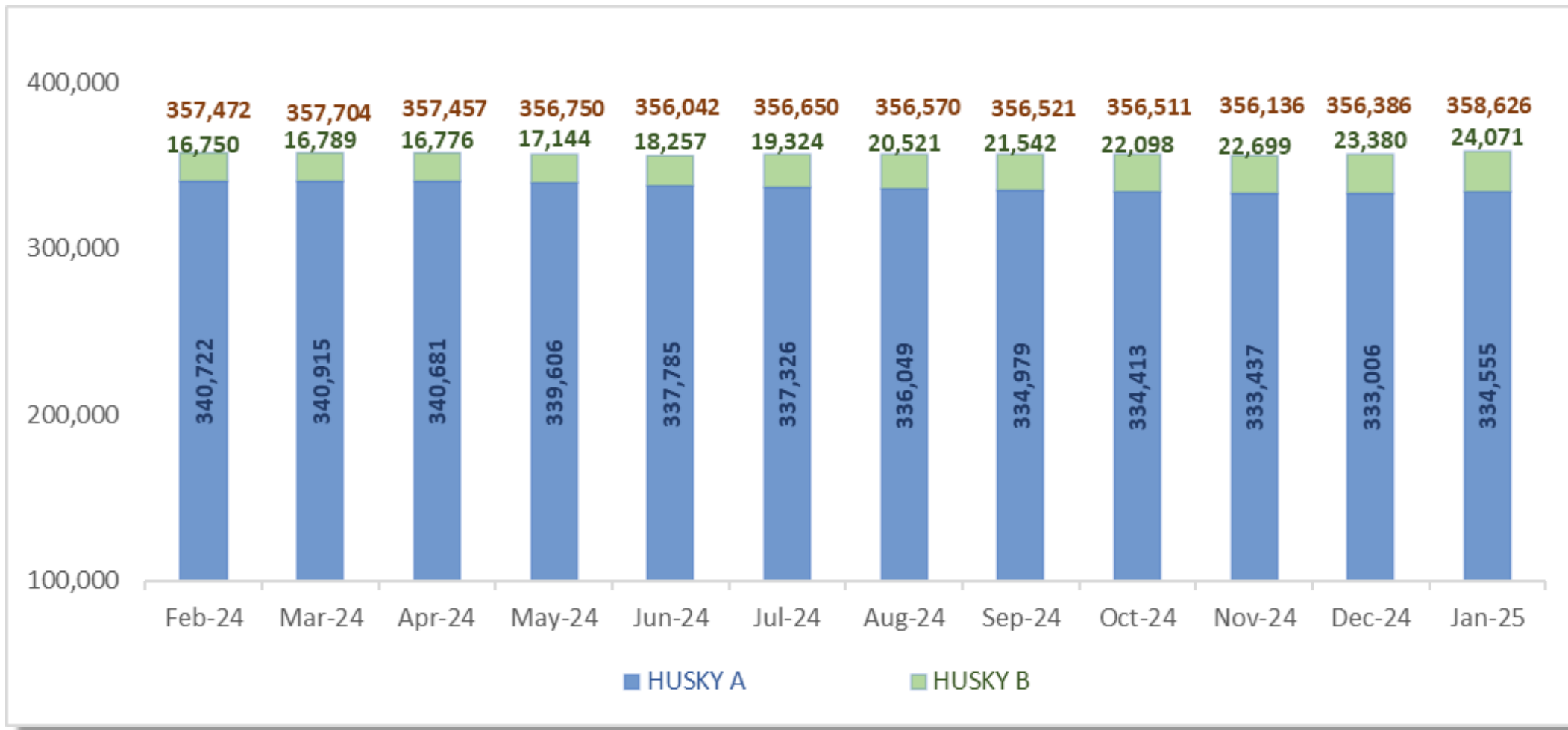
January 2025



HUSKY Enrollment

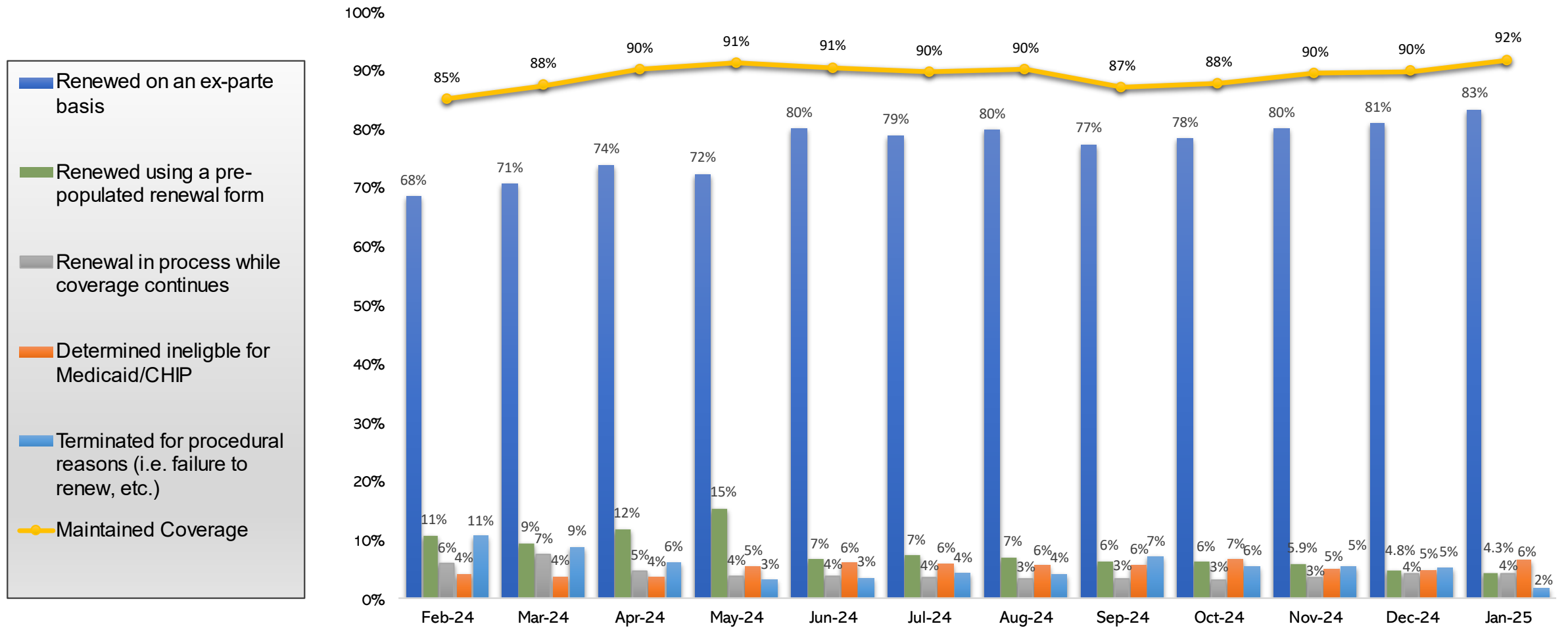


* Excludes limited benefit programs and state-funded programs





HUSKY Renewal Activity & Outcomes



During the last 12 months, an average of 89% of individuals maintained coverage at month end.

Renewal Disenrollment Tracking 30/60/90-Day Mark	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24
	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	90-day mark	60-day mark	30-day mark
Total individuals disenrolled at renewal	12,476	15,647	11,658	15,395	13,242	6,804	7,270	7,022	9,883	8,652	11,073	11,455	10,675	9,953
Total individuals active currently in HUSKY/CHIP	3,123	3,422	2,214	3,074	3,019	2,166	1,711	1,699	2,326	1,850	2,394	2,457	2,223	1,826
Total individuals active currently in QHP/APTC	996	1,053	685	1,005	957	394	658	522	736	726	605	830	813	856
Total individuals active currently in Covered CT	724	905	651	843	778	303	479	473	596	626	646	813	733	829
Total Individuals who transitioned to non-MAGI HUSKY	58	65	51	79	81	32	32	21	35	36	35	45	45	48
Total individuals who closed and are now active	4,901	5,445	3,601	5,001	4,835	2,895	2,880	2,715	3,693	3,238	3,680	4,145	3,814	3,559
*Total individuals not enrolled in any state programs	5,302	7,575	10,202	8,057	10,394	8,407	3,909	4,390	4,307	6,190	7,393	7,310	6,861	6,394
Re-enrolled	41%	39%	35%	31%	32%	37%	43%	40%	39%	37%	33%	36%	36%	36%

*This count includes individuals that moved out of CT and deceased individuals

About 37% of individuals who were disenrolled at renewal have regained coverage within 90 days from closure, mostly by requalifying for HUSKY coverage. Most of the remaining individuals have stayed closed because they did not come in to renew coverage or be evaluated for other coverage options.

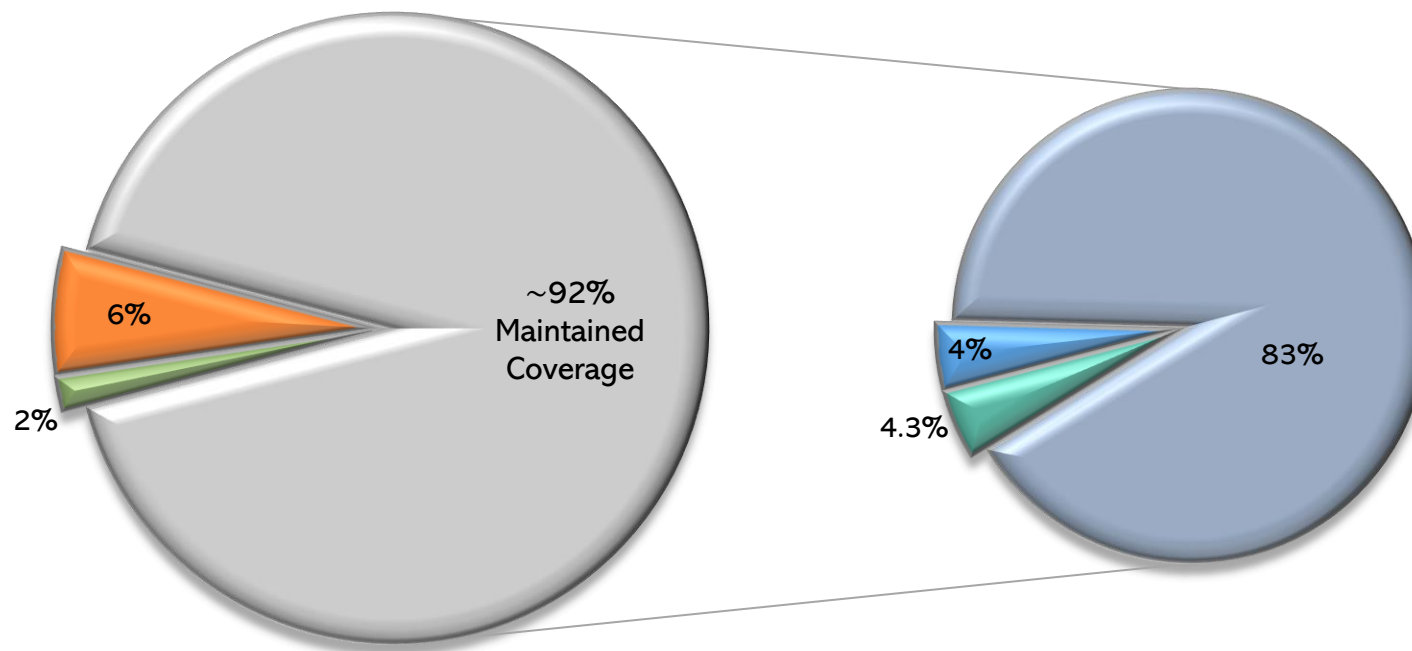
HUSKY Renewal Outcomes – Latest Status

Data captures renewal outcomes at individual level (not household).

In January, 79,067 individuals went through the renewal process.

- 83% of individuals had coverage renewed without further information being requested from them. This is called an *ex-parte* or passive renewal.
- 4.3% of individuals who could not be renewed passively (i.e., data sources show income over the program limit) were renewed using a pre-filled form.
- 4% of individuals were conditionally enrolled/renewal in process, but a final eligibility determination has not yet been made (pending receipt of outstanding verifications).
- 6% of individuals were determined ineligible for Medicaid.
- 2% lost coverage for procedural reasons. Approximately 37% of individuals who disenroll, re-enroll within 90 days from closure.

* Data is point-in-time at end of reporting month and does not include subsequent reenrollments.

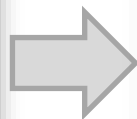


- Terminated for procedural reasons (i.e. failure to renew, etc.)
- Determined ineligible for Medicaid/CHIP
- Renewal in process while coverage continues
- Renewed on an ex-parte basis
- Renewed using a pre-populated renewal form

Outcomes by Benefit Plan

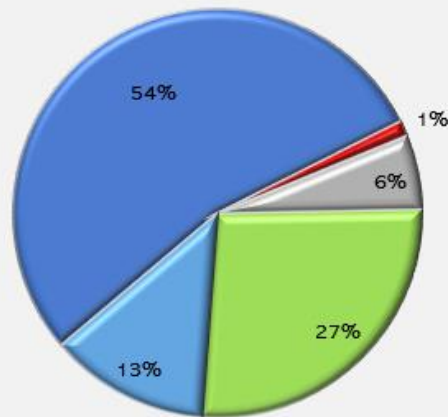
Medical Benefit Plans refer to the HUSKY Programs (A, B, C, and D) and the Medicare Savings Program (MSP)

- HUSKY A - Medicaid for children, parents, relative caregivers, and pregnant individuals, etc.
- HUSKY B - Children's Health Insurance Program (CHIP)
- HUSKY C - Medicaid for older adults and individuals with disabilities
- HUSKY D - Medicaid for adults without dependent children
- MSP provides premium and/or copayment assistance to Medicare beneficiaries



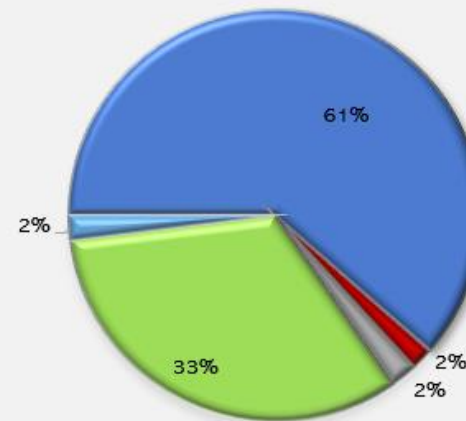
Renewed and retained in Medicaid/CHIP

N = 69,346



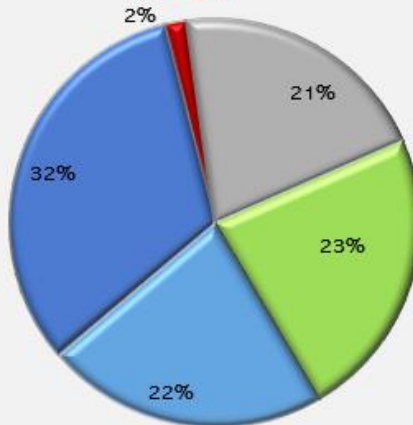
Determined ineligible for Medicaid/CHIP

N = 5,072



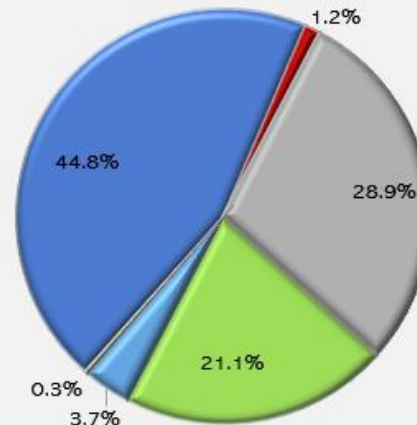
Terminated for procedural reasons

N = 1,371



Renewal in process

N = 3,278

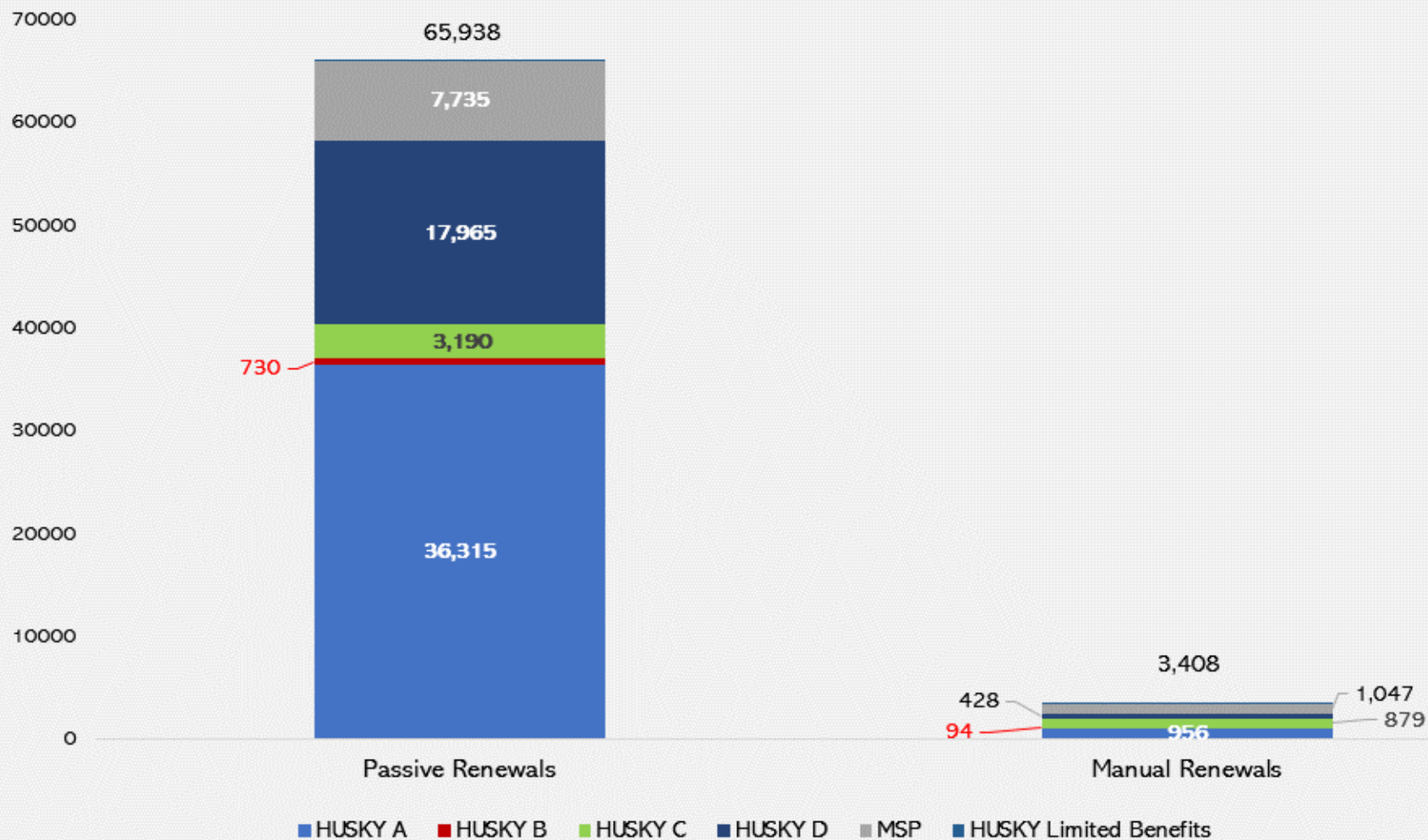


- HUSKY A
- HUSKY B
- HUSKY C
- HUSKY D
- MSP - Medicare Savings Program
- HUSKY Limited Benefits (<.05%)

Passive vs. Manual Renewals by Medical Benefit Plan

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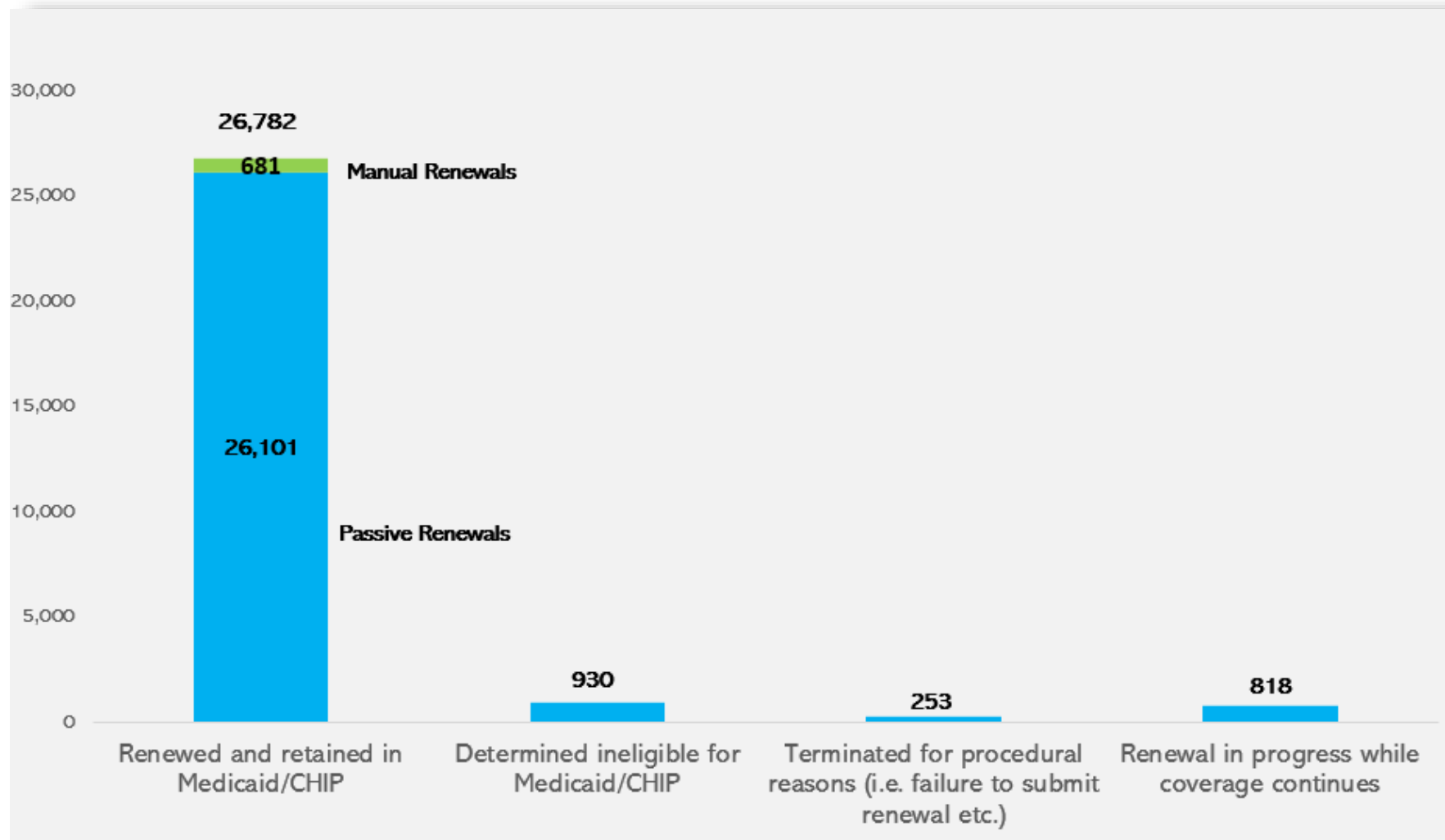
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During January 2025, 65,938 individuals renewed “passively” while 3,408 renewed using a pre-filled form.

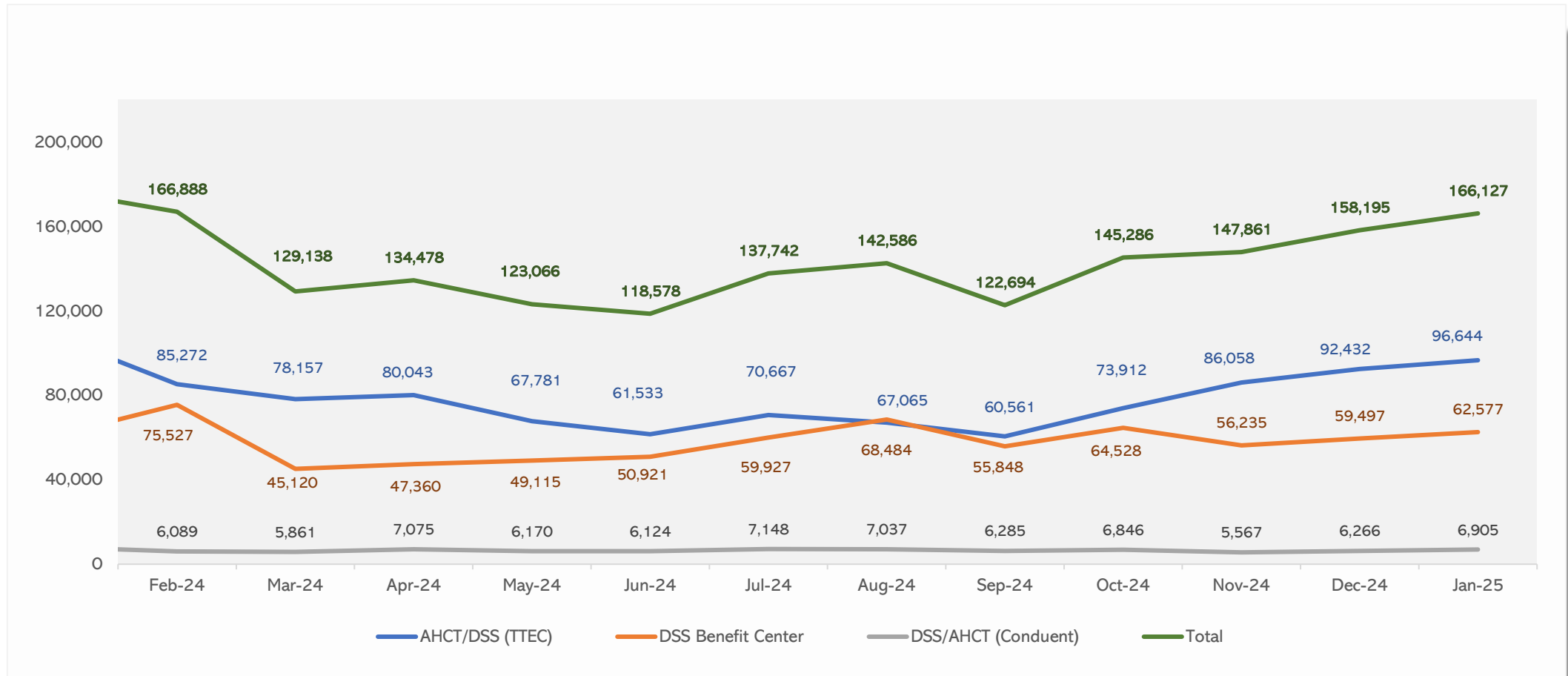
Renewal Outcomes for Children

- Includes data for children on HUSKY A and HUSKY B (CHIP)
- The "Renewal in process" metric also includes children in HUSKY A and B who are in a reasonable opportunity period and have a VCL (verification check-list) for outstanding verifications. Coverage is maintained during this process.

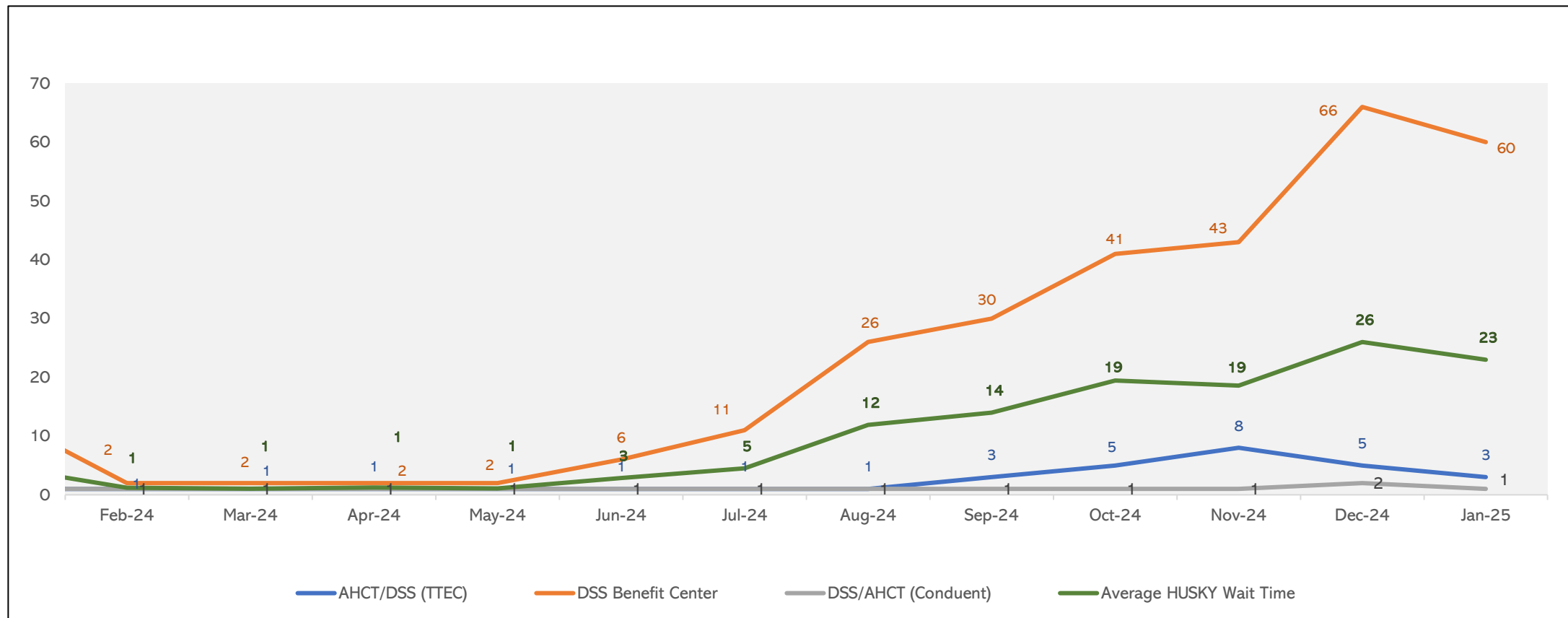




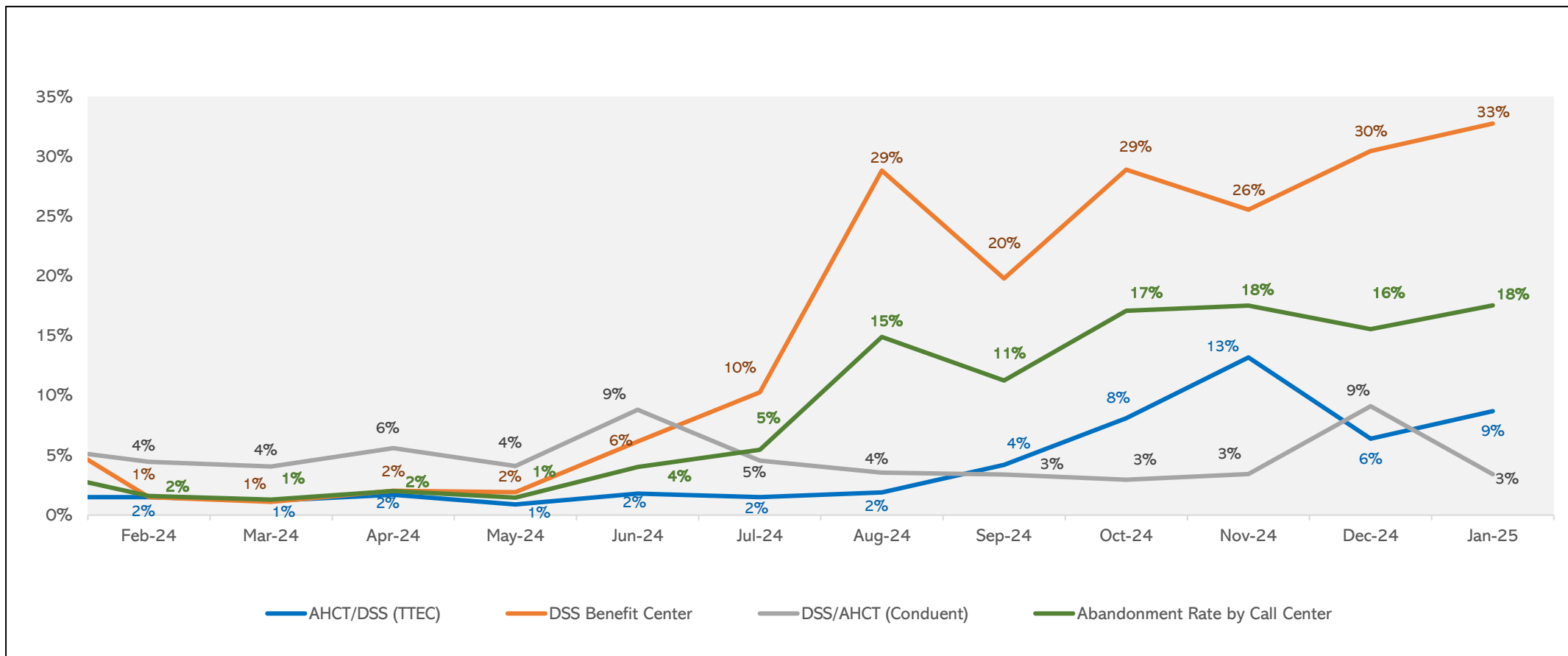
Call Center Data Across all HUSKY Contact Centers



Per CMS requirements, data represents only Medicaid/CHIP calls. Calls for other programs are excluded. The DSS Benefit Center handles 30% of Medicaid/CHIP calls. Total call volume for the Benefit Center in January was 223,491.

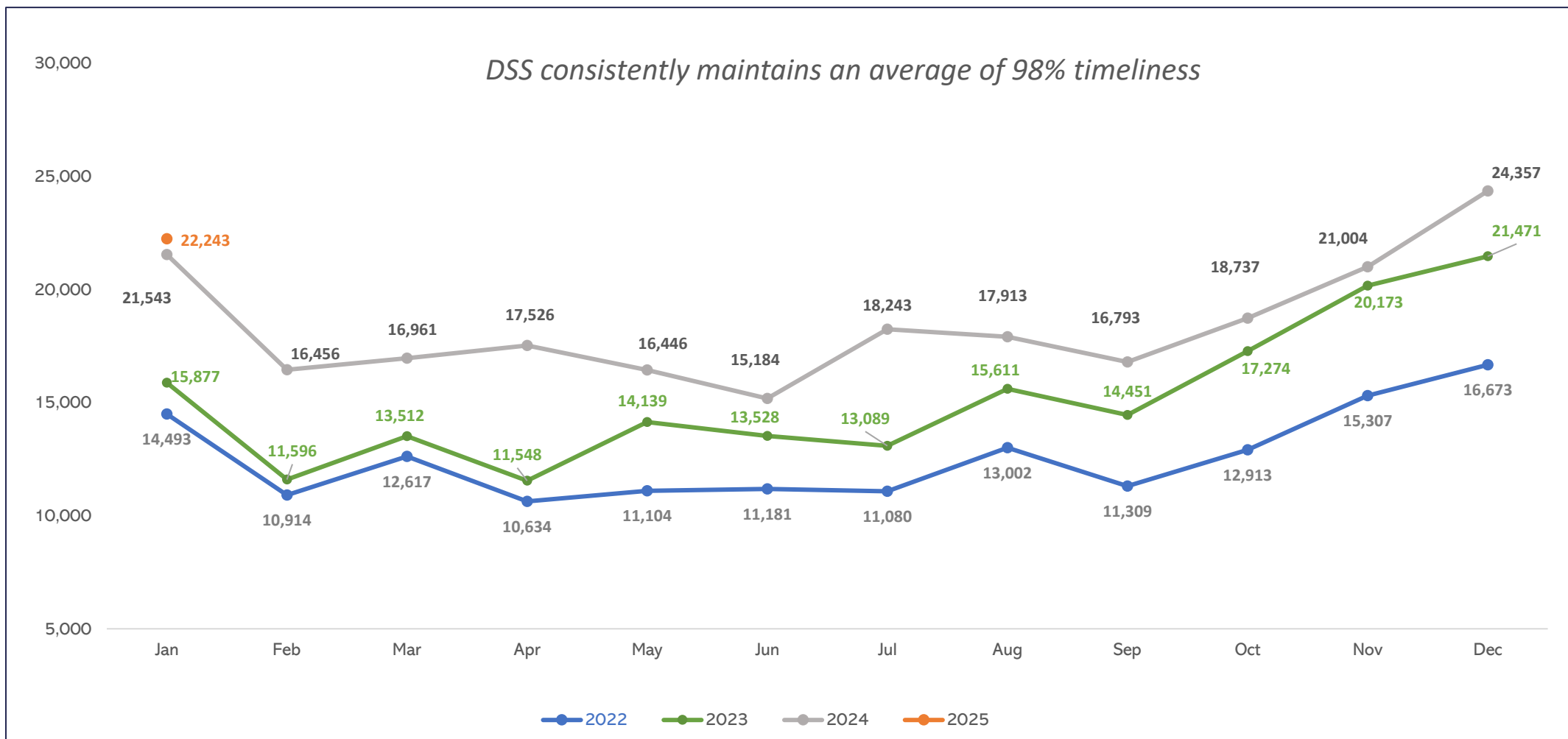


Per CMS requirements, data represents only Medicaid/CHIP calls. Calls for other programs are excluded. Wait times are measured from the time a caller selects the option to speak with an agent to the moment the caller is connected to one.

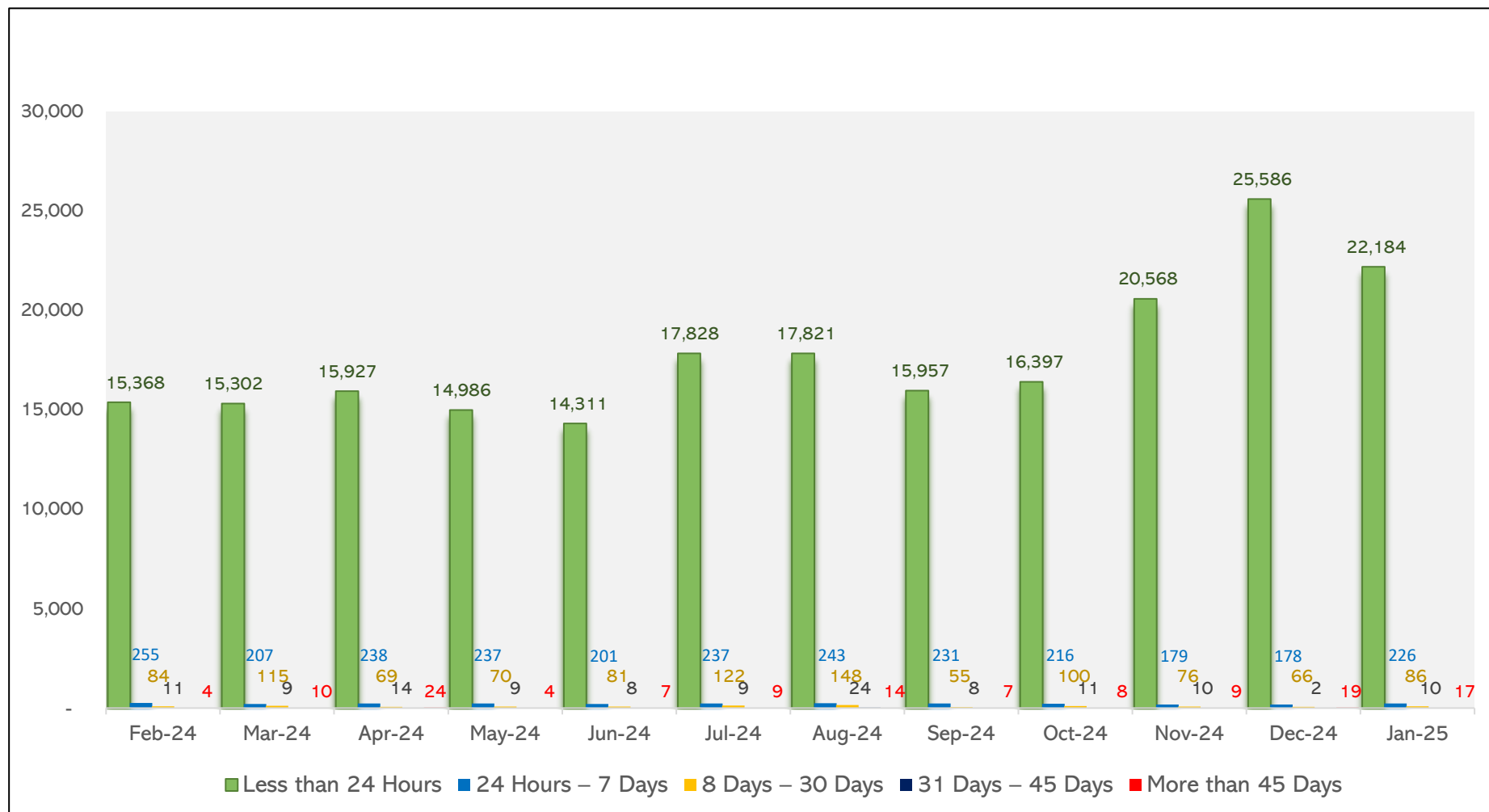


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HUSKY Application Activity & Timeliness



- The standard of promptness for MAGI-based Medicaid applications is 45 days from receipt.
- Current median processing time in CT is less than 24 hours



- The standard of promptness for most Medicaid apps is 45 days from receipt.
- A longer period of up to 90 days is allowed for people with disabilities and applications for long term services and supports.
- Current median processing time is 32 days.

