Healthcare Coverage for Immigrants
Recent Healthcare Coverage Expansions

- **HUSKY B Prenatal** – began April 1, 2022
  - Pregnant individuals w/ income up to 263% FPL who don't qualify for Medicaid due to immigration status
  - Now have full CHIP benefits during prenatal period

- **State HUSKY A and State HUSKY B** – began January 1, 2023
  - Children ages 0-12 w/ income up to 323% FPL who don't qualify for Medicaid or CHIP due to immigration status
  - Enrollees may retain coverage through age 18
  - State-funded Medicaid and CHIP coverage-equivalents

- **State-Funded Postpartum** – begins April 1, 2023
  - Postpartum individuals w/ income up to 263% FPL who don't qualify for Medicaid due to immigration status
  - Will have full state-funded Medicaid coverage-equivalent for 12 months postpartum
HUSKY B Prenatal – Status and Updates

• Began April 1, 2022

• State Plan Amendment approved on October 24, 2022

• Enrollment: **1,604** (as of December 2022)

• Website: New Prenatal Coverage & Extended Postpartum Coverage ([ct.gov](http://ct.gov))
State HUSKY A & B – Status and Updates

• Began January 1, 2022

• For children who qualify for State HUSKY A, coverage is free, and they receive the same level of benefits as a traditional HUSKY A Medicaid enrollee.

• Children who qualify for State HUSKY B Band 1 are subject to the same co-pays as current participants under Band 1, and children who qualify for State HUSKY B Band 2 are subject to the same co-pays and premiums as current participants under Band 2.

• Enrollment: **1,724** (as of February 1, 2023)

Emergency Medicaid Coverage

Emergency Medicaid for COVID-19 Testing and Treatment
• For Connecticut residents who meet Medicaid financial eligibility requirements but do not qualify for full Medicaid due to their immigration status
• Can have COVID-19 testing and testing-related provider visits covered through Emergency Medicaid.
• Coverage is aligned to the pandemic limited benefit Medicaid COVID-19 Uninsured Coverage group and, like that group, will also end the day the federal Public Health Emergency (PHE) declaration ends, which is now expected to be May 11, 2023.

Emergency Medicaid Coverage of Outpatient Dialysis for End Stage Renal Disease
• For Connecticut residents who meet financial eligibility requirements but do not qualify for full Medicaid due to their immigration status
• Covers the treatment of End Stage Renal Disease (ESRD).

General Emergency Medicaid
• For all state residents who qualify for Medicaid but for their immigration status. Benefits are limited pursuant to federal law to treatment of an “emergency medical condition.”
• Available to both undocumented individuals and individuals who are qualified non-citizens but who have not met the 5-year bar under federal law. The 5-year bar requires qualified non-citizens to be present in the U.S. for 5 years before they qualify for federal benefits such as Medicaid.
Emergency Medicaid - COVID-19 Testing and Treatment Enrollment

• Implemented March 2020

• Limited benefit coverage aligned to Medicaid COVID-19 Coverage for the Uninsured

• Benefit will end on last day of federal PHE declaration (May 11, 2023)

• Enrollment: **20,820** (as of December 2022)
Emergency Medicaid - COVID-19 Testing and Treatment Expenditure Data

Average monthly data:
• 283 claims per month; 233 individuals per month; $190/claim
Emergency Medicaid – Coverage of Outpatient Dialysis for End Stage Renal Disease (ESRD)

• Implemented August 2021

• In addition to dialysis, also covered are ESRD-related services, including primary and specialty care visits related to ESRD, transportation related to ESRD care, ESRD-related medications, etc.

• Enrollment: 98 (as of Dec 2022)
Emergency Medicaid – General

• Limited coverage of emergency medical services to non-citizens who would qualify for full Medicaid but for their immigration status, including undocumented immigrants.

• Medicaid pays for care and services necessary for the treatment of an emergency medical condition.

• Covers labor and delivery.

<table>
<thead>
<tr>
<th>CY</th>
<th>Expenditures</th>
<th>Total Claims</th>
<th>Individuals</th>
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</thead>
<tbody>
<tr>
<td>2017</td>
<td>$ 5,629,178</td>
<td>2,067</td>
<td>771</td>
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<tr>
<td>2018</td>
<td>$ 11,923,213</td>
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<td>2019</td>
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<td>2020</td>
<td>$ 29,399,460</td>
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<td>2021</td>
<td>$ 28,655,462</td>
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<tr>
<td>Average</td>
<td>$ 19,404,868</td>
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<td>1,429</td>
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* Includes full Rx costs and is not net of rebates