

Connecticut Health Care Reform by the Numbers Estimates of the impact of the Affordable Care Act’s reforms

How many people are expected to gain coverage in Connecticut?

It’s estimated that after the Affordable Care Act (ACA) is implemented starting in 2014, between 170,000ⁱ, 191,000ⁱⁱ and 200,000ⁱⁱⁱ more Connecticut residents will have health coverage than do now, reducing the uninsured rate by half to 5% or 6.5%.

How many are expected to remain uninsured?

It is estimated that almost an equal number, 170,000^{iv} to 197,000^v state residents will remain without coverage after implementation of the Affordable Care Act.

How many new Medicaid members will Connecticut’s program enroll?

Estimates of the rise in Connecticut’s Medicaid enrollment vary between 116,352^{vi}, 120,000^{vii} and 147,000^{viii}. There are currently 658,891^{ix} Connecticut Medicaid members. Consequently enrollment will rise by 11 to 22%.

How many will purchase coverage through the new Insurance Exchange?

Estimates for enrollment in the CT Health Insurance Exchange vary considerably. It is expected that most Exchange members will buy as individuals; fewer will enter through small business coverage. Experts expect about half the individuals purchasing individual coverage to qualify for federal premium subsidies.

CT Health Insurance Exchange Enrollment	RAND ^x	Urban Institute ^{xi}	Mercer ^{xii}	Thompson Reuters ^{xiii} (eligible, not an enrollment estimate)
Individual	270,000	246,000	198,450	216,032
With premium subsidies	140,000	137,022		155,116
Without subsidies	130,000	108,978		60,916
Small business (SHOP) exchange	40,000		44,600	
Total enrollment	310,000		243,050	

How much funding will go to low-income state residents?

Over \$1.5 billion/year in premium subsidies are expected to benefit lower income state residents.^{xiv}

How much can Connecticut businesses expect to save under reform?

It is estimated that businesses in Connecticut can expect to save over \$300 million per year due to health reform.^{xv}

What will be the impact on the state budget?

It is estimated that Connecticut state government spending on health care will decrease by 10%, saving \$2.7 billion between 2011 and 2020^{xvi}, or over \$250 million/year^{xvii}, due to the Affordable Care Act.

What will happen to the employer-sponsored coverage rate in Connecticut?

There is not expected to be any significant net change in the proportion of state residents with employer-sponsored coverage before and after reform.^{xviii}

How many Connecticut residents that are Medicaid eligible now but are not covered by the program are expected to enroll because of reform?

States that have expanded coverage programs often find that many people who were already eligible but not enrolled come into the program. Estimates for Connecticut vary from 60,615^{xix} to 40,000^{xx}. Another estimate finds that there are currently 85,208 state residents eligible but not enrolled in Medicaid^{xxi}; it is unclear how many of them might enroll under health reform.

What are the income levels of Connecticut’s uninsured residents now?

	Kaiser ^{xxii} (2010)	Thompson Reuters ^{xxiii} (2012)
Up to 138% Federal Poverty Level (FPL) ^{xxiv} – Medicaid eligible under ACA	159,200 (42% of uninsured)	128,550 ^{xxv}
139 to 400% FPL ^{xxvi} – eligible for subsidies under ACA	150,800 (40%)	155,116
Over 400% FPL –not eligible for subsidies	67,900 (18%)	60,916
Total	377,900	344,582

How many residents might qualify for the Basic Health Program, if the state chooses to implement one?

The Affordable Care Act gives states the option to create a coverage program for state residents between 138% FPL, the ACA Medicaid eligibility level, and 200% FPL. It has been estimated that providing Medicaid-equivalent coverage for this population in Connecticut would provide more comprehensive coverage at lower cost to state residents, would have no cost to the state, and would add federal resources to improve care for this population.^{xxvii}

Estimates vary for the number of Connecticut residents who would be eligible for a Basic Health Plan option – 43,856^{xxviii}, 74,538^{xxix}, and one group estimates that while 74,000 state residents would be eligible, only 51,000 of that number would enroll.^{xxx}

ⁱ D Auerbach, et. al., The Impact of the Coverage-Related Provisions of the Patient Protection and Affordable Care Act on Insurance Coverage and State Health Care Expenditures in Connecticut, RAND Compare, April 2011, <http://www.rand.org/news/press/2011/04/05/index2.html> -- used 2016 estimates

ⁱⁱ S Dorn, PPACA in Connecticut: Initial Cost and Coverage Estimates, presentation to Sustinet Board, with J Gruber economic modeling, July 2010, http://www.ct.gov/sustinet/lib/sustinet/board_of_directors_files/resources/urbaninstitutesustinet_nationalreform_071310.pdf

ⁱⁱⁱ M Buettgens, et. al. Health Reform Across the States: Increased Insurance Coverage and Federal Spending on the Exchanges and Medicaid, Urban Institute, March 2011, <http://www.urban.org/uploadedpdf/412310-Health-Reform-Across-the-States.pdf> -- used 2016 estimates

^{iv} Auerback 2011

^v Buettgens 2011

^{vi} Health Insurance Exchange Planning Report, for the State of Connecticut, Mercer Government Human Services Consulting, January 2012, <http://www.healthreform.ct.gov/ohri/cwp/view.asp?a=2742&q=333886> -- used 2016 estimates

^{vii} Auerback 2011

^{viii} Buettgens 2011

^{ix} Active Assistance Units Report for June 2012, DSS, July 2012

^x Auerback 2011

^{xi} Buettgens 2011

^{xii} Mercer 2012

^{xiii} Thomson Reuters, 2012 – it is important to note that Thomson Reuters estimates differ from the other three sources, the estimate is of currently uninsured state residents who would be eligible to purchase in the exchange, currently at the income levels that will or will not qualify for subsidies under reform. The authors make no estimates of how many have alternative coverage options, would choose to purchase outside the exchange or would remain uninsured.

^{xiv} Dorn, 2010

^{xv} Dorn 2010

^{xvi} Auerback 2011

^{xvii} Dorn 2010, Auerback 2011

^{xviii} Auerback 2011, Dorn 2010

^{xix} Mercer 2012

^{xx} Buettgens 2011

^{xxi} Thomson Reuters 2012

^{xxii} Kaiser State Health Facts, 2009-2010, <http://www.statehealthfacts.org>, accessed June 2012

^{xxiii} Thomson Reuters 2012

^{xxiv} 138% of FPL is currently \$15,414/year for an individual and \$31,809 for a family of four.

^{xxv} Calculated from Thomson Reuters data

^{xxvi} 400 % of FPL is currently 44,680 for an individual and \$92,200 for a family of four.

^{xxvii} Mercer 2012, S Dorn, Sustinet Policy Options: Cost and Coverage Estimates, presentation to the Sustinet Board, November 2010, http://www.ct.gov/sustinet/lib/sustinet/dorn-gruber.modeling_results.111810.ppt

^{xxviii} Thomson Reuters 2012 – this estimate is of only uninsured residents eligible for the Basic Health Plan, it does not include the likely small number of residents below 200% FPL with coverage who would keep that coverage

^{xxix} Buettgens 2011

^{xxx} Mercer 2012