

## 2007 CT Legislative Session - the budget and update on proposals to cover Connecticut's uninsured

Connecticut's 2007 session began with a great deal of momentum to address the rising number of uninsured residents and other health care needs. What happened?

### The Budget -- what passed

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#### Medicaid provider rate increases

- Physicians up 50%
- Clinics up 40%
- Dental up 40%
- Vision up by 40%
- Hospitals up 9%
- Nursing homes up 2.9%

Total: \$ 96 million FY 08  
\$123 million FY 09

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#### Primary Care Case Management

Created a pilot program for at least 1,000 HUSKY Part A members, \$2.5 million each year, for more on PCCM go to <http://www.cthealthpolicy.org/pccm/index.htm>

#### HUSKY changes

- Increase eligibility for HUSKY parents from 150% to 185% FPL
- Increase eligibility for pregnant women from 185% to 250% FPL
- Pay HUSKY premiums for uninsured newborns for 4 months
- HMO rate increase of \$10 million/year + \$20 million to increase managed care dental rates
- Repealed DSS authority to impose premiums on HUSKY parents (never implemented)
- Mandatory premium assistance waiver to force HUSKY families at all income levels into employer-sponsored coverage when available (and to forego HUSKY benefits)
  - state will reimburse for premiums
  - no provisions to reimburse for copays, deductibles or coinsurance
  - ill-defined reference to providing services not covered under employer plans
  - no evaluation of program or tracking of care received by children
  - no public accountability
  - for more on premium assistance, go to [http://www.cthealthpolicy.org/briefs/issue\\_brief\\_33.pdf](http://www.cthealthpolicy.org/briefs/issue_brief_33.pdf)

### Charter Oak Health Plan

- For CT residents uninsured at least 6 months
- Not clear what will be covered
- \$1000 deductible + 20% coinsurance + unlimited copays on drugs + \$1 million lifetime limit
- No limit on premiums
- Premium subsidies for residents under 300% FPL
- No requirements on capitalization or financial stability of insurers, no DOI oversight or screening for insurance scams
- No public planning authority or public reporting, no accountability, no evaluation of cost effectiveness or care received
- \$2 million for planning in FY 08, \$11 million in FY 09 to implement, from Tobacco Trust Fund

### Other changes

- Distressed Hospitals Fund - \$30 million from surplus, at DSS Commissioner's discretion
- Added non-emergency transportation and vision services back to SAGA
- Cigarette tax increase - up 49 cents/pack to \$2
- Create a voluntary Medicaid program for dual eligibles in Medicare SNP managed care, \$10 million each year
- Fully fund the Katie Beckett Medicaid program for children with special health care needs
- Provides funding for Medicaid interpretation services to begin 4/1/09
- Increases in grants to community health centers (\$7 million), school-based health centers (\$2.5 million) and local health districts (\$1 million)
- Increases funding to address nursing workforce shortage (\$500,000) but doubles licensure rates for RNs, APRNs, LPNs, and nurse-midwives
- \$750,000 to develop a state-wide health information technology plan and \$500,000 to create a CT Health Information Network coordinating state health databases
- Creates a Health First Authority to draft a plan to cover every CT resident, plan to be complete by 12/1/08

### What happened to proposals to cover Connecticut's uninsured?

	Name of Plan Bill #	Key features	What happened?
Governor's Plan	Charter Oak Plan SB 1127	Private policies for uninsured from current CT insurers	Passed in budget, Planning for FY 08, implement in FY 09
Single State Plan	CT Saves SB 1371	One large state program for everyone	Favorable reports from HS, INS and GAE Died in Finance Committee
Insurance Pool	State Health Insurance Purchasing Pool HB 7314	One purchasing pool with multiple private health plans	Favorable reports from HS, LAB, FIN, APP Died on House calendar
Senate Dem.s	CT Healthy Steps SB 1	Expand HUSKY now, plan for Medicare for All	Bill died on Senate calendar Modest HUSKY expansions passed in budget
Insurance Committee	CT Healthy Steps HB 6652	Pool uninsured and small business, offer through private policies	Favorable reports from INS, PH, APP, FIN Died on House calendar
House GOP	Deferred Health Insurance Payment Program HB 6332	Private market insurance policies, tax credits	Died in Public Health Committee
MEHIP	CT Insurance Pool HB 7320	Build large risk pool, use as a platform for affordable coverage for everyone	Favorable reports from LAB, APP Died on House calendar Was widely discussed until the end, but no final action

### Bottom Line:

Some progress. Much remains to be done.

Sources: HB 8001, HB 8002, Highlights of the 2007-2009 Biennial Budget, CGA/OFA, 6/25/07, www.cga.gov, unpublished legislative information.