

**CENTER FOR MEDICAID & CHIP SERVICES (CMCS)  
SECTION 1115 MONITORING REPORT SUMMARY TEMPLATE**



## Section 1115 Monitoring Report Summary Template

*This document provides a template for Monitoring Leads to summarize and capture key content of section 1115 Demonstration Monitoring Reports (MRs) submitted by states for approved section 1115 Demonstrations on quarterly and annual basis. For additional guidance please refer to [Section 1115 Monitoring Report Review Guide.pdf](#).*

*If a Demonstration has many policy areas, please clarify applicability of information (i.e. if information is applicable to the entire Demonstration or only a portion of the Demonstration such as SUD).*

***If the MR does not include information for some elements below, please note “not included in MR” under the “Summary of Information” column below. Please review whether that particular element was a required MR element in the Demonstration Special Terms and Conditions (STCs) or not and include that information in the summary column.***

Monitoring Report Information	Summary of Information (if included in MR)
<b>State and Demonstration Name</b>	Connecticut-Covered CT
<b>Monitoring Lead reviewing MR</b>	Marie DiMartino
<b>MR Time Period (please specify quarterly vs. annual report and time period covered by MR)</b>	Annual Report Demonstration Year: 2 Q4 and Annual (10/01/2023 – 12/31/2023)
<b>Was MR submitted timely? If not, please note length of delay and reasons for delay (if known)</b>	Yes
<b>Please specify if there are any required elements missing in the MR per STCs</b>	Disenrollment numbers. State was instructed to report on metrics when monitoring protocol is finalized. State will report on past quarters if requested
<b>Summary of key accomplishments activities during reporting period</b>	DY2 Q4 began on October 1, 2023, during which time Connecticut’s Public Health Emergency unwind and redetermination process for Medicaid, halted during the

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	<p>PHE, continued. The Connecticut state health insurance exchange estimated that between 10-15% of the Continuous Medicaid enrollment population and the new limited benefit population would be eligible for a Qualified Health Plan including the Covered CT program during the unwind period. Covered CT enrollment increased an average of 8% month over month during DY2 Q4 and increased an average 25% over the prior quarter. From January to December, enrollment increased 64%.</p> <p>During DY2, DSS focused on executing new contracts with the insurance carriers that support the covered CT program and on executing and implementing carrier supports for contract amendments assigned to DSS by the Office of Health Strategy. DSS executed amendments to the original OHS contracts on July 1, 2023; these expired on December 31, 2023. DSS, during DY2Q4 extended the amendments until February 29, 2024 to allow for additional time to reach consensus on terms for new contracts to be executed wholly by DSS. During DY2, the state met with both carriers regularly to discuss and implement processes for submission and payment of invoices, reporting requirements and processes for oversight and issue mitigation. The state initiated monthly oversight meetings during Q3 with each carrier and these continued through Q4.</p> <p>DSS continued to meet with state partners monthly during DY2 at partner team meetings and executive committee meetings to provide updates on program</p>

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	<p>progress, ensure continued collaboration and to address and mitigate any decision, risk or issue related to Covered CT. Collaboration with state partners also included updates to the CT eligibility system to support content and application flow changes to ensure clarity for the member during the eligibility and application process and to support an auto-enrollment feature for Covered CT during the application workflow; Phase I of the auto-enrollment feature was implemented in October 2024. DSS continued to collaborate and support outreach and engagement efforts led by OHS, meeting with OHS state partners monthly, participating in outreach and engagement efforts led by OHS and providing program information for outreach initiatives. During DY2 Q4 DSS met with OHS and Paraeducators to discuss the Covered CT program and answer questions related to eligibility and enrollment.</p>
<b>Enrollment numbers for MR period</b>	25, 542 DY2 Q4 (Oct: 21, 403 Nov: 21, 302, Dec: 25, 542)
<b>Enrollment numbers for past MR period (for quarterly MR please refer to previous quarter; for annual MR please refer to previous year)</b>	20, 321 DY2 Q3 (July: 18,193 August: 19,948, September 20, 321)
<b>Did enrollment increase or decrease by more than 2%? If yes, please enter reason if identified in report. If</b>	Yes, increase is greater than 2%. The state outreach team is actively continuing to enroll new beneficiaries into the 1115 as well as an increase from the Medicaid unwinding.

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<b>not, please review with state in future Monitoring Call.</b>	
<b>For eligibility and coverage demonstrations, please enter disenrollment numbers for report period.</b>	<i>Not included in MR. State will report on disenrollment if required following monitoring protocol finalization</i>
<b>Did grievances for MR period increase or decrease by more than 2% from previous MR period? If yes, please enter reason if identified in report. If not, please review with state in future Monitoring Call.</b>	<i>Not included in MR.</i>
<b>Did appeals for MR period increase or decrease by more than 2% from previous MR period? If yes, please enter reason if identified in report. If not, please review with state in future Monitoring Call.</b>	<i>Not included in MR.</i>
<b>Did denial of services for MR period increase or decrease by more than 2% from previous MR period? If yes, please enter reason if identified in report. If not, please review with state in future Monitoring Call.</b>	<i>Not included in MR.</i>
<b>Did number of providers for MR period increase or decrease by more than 2% from previous MR period? If yes, please enter reason if identified in report. If not, please review with state in future Monitoring Call.</b>	<i>Not included in MR.</i>
<b>Operational, implementation and beneficiary Issues identified in MR (Note: these should be entered in <a href="#">Monitoring Issue Register</a>)</b>	No issues requiring monitoring issue registry

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<p><b>Any notable policy, operational and implementation updates or changes included in MR</b></p>	<p><u>Connecticut Health Insurance Exchange, Access Health CT (AHCT)</u></p> <p>AHCT worked in collaboration with DSS staff to develop requirements to implement auto-enrollment for members to opt-in to or decline Covered CT auto enrollment and Covered CT plan selections during the subsidized application flow. If the consumer is newly eligible for Covered CT and opts-in to Covered CT auto-enrollment, they will be auto-enrolled into their pre-selected Covered CT plan if they are losing HUSKY coverage (unless they are losing coverage because they failed to complete the manual Medicaid renewal). This change will be performed for both online and batch flows. Phase I of the auto-enrollment feature was implemented in October 2023. Phase II of the auto-enrollment is targeted for February 2024 and will expand the auto-enrollment process to non-Medicaid individuals that are newly eligible for Covered CT.</p> <p>As a result of the end of the PHE, AHCT resumed the existing verification processing which takes action for members on the exchange that have not provided supporting documentation needed to resolve inconsistencies in information required for their eligibility to receive APTCs and CSRs within the allotted timeframe. This includes verification of immigration status, income, identity or incarceration. A member will be required to submit supporting documentation if the information attested to by the member at the time of enrollment conflicts with or is unable to be verified by approved electronic sources. Members with outstanding verification requests due prior to May 1, 2023, have had their due dates extended. A member with an open or active verification will have 90 days to provide the requested documentation to maintain their benefits. This impacts Covered CT members because program eligibility is dependent upon eligibility for and full application of APTCs and CSRs. As of November 30, 2023, 173 out of 21,302 Covered CT members failed the verification process and lost eligibility for Covered CT.</p>

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	<p>During quarter four, AHCT provided additional marketing support in the form of press releases, geo-targeted email campaigns and promoted Covered CT at enrollment fairs. In addition, AHCT collaborated with carriers and the UConn Health Provider Network on collateral for patient networks and to support outreach efforts; supported social media coverage and ensured the AHCT homepage content had current program information for consumers as well as a digital toolkit for community partners (<a href="https://AccessHealthCT.com/toolkit/">AccessHealthCT.com/toolkit/</a>).</p> <p>AHCT continued to support weekly reporting during the latter half of 2023, providing information on enrollment stratified by age, gender, zip code and income level. This information is shared with our state partners involved in outreach and engagement efforts, utilized for internal planning and utilized for reporting to the state legislature. Representatives from AHCT continued to participate in monthly Covered CT team meetings, Covered CT Executive Committee meetings and Covered CT reporting meetings, offering subject matter expertise and further strengthening the partnership through their continued engagement.</p> <p><u>Dental</u></p> <p>The dental benefit was instituted in July 2022 and is administered by BeneCare Dental Plans. BeneCare remains a great partner and strong supporter of the Covered CT program. BeneCare administers the dental benefit and manages the distribution of the member welcome packets for the dental and non-emergency medical transportation (NEMT) benefits for the Covered CT program for DSS. Prior to the roll-out of the dental benefit, BeneCare worked with the State of Connecticut and other state partners to ensure members were able to access services beginning July 1, 2022, when expanded benefits were implemented. BeneCare was</p>

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	<p>able to produce and mail member “Welcome Packets,” including member ID cards and program information for the Covered CT dental and NEMT programs. These packets are mailed to members upon enrollment. BeneCare has been responsive to requests made by DSS to update the member welcome packet to provide more detail on the transportation benefit following program expansion.</p> <p>BeneCare continues to support a dashboard for the Covered CT dental program that details utilization monthly. Utilization of the dental benefit was slow to build in the initial months of the roll-out under Covered CT but rose steadily in the last quarter of 2022 and has remained strong throughout 2023. Utilization of dental services remains highest for exams, preventive care and restorative care.</p> <p><u>Non-Emergency Medical Transportation (NEMT)</u></p> <p>The NEMT benefit was implemented in July 2022 utilizing existing system infrastructure and is administered by MTM. Utilization of the benefit for the first seven months of DY2 increased steadily averaging a 76% increase month over month from January to July. Data for the latter half of 2023 is not available due to the recent transition in ownership of the NEMT vendor and the transition of analytics and reporting as a result; DSS will retrospectively report this information as soon as the data is available There was no report of any member issues related to enrollment or services in DY2 Q4.</p> <p><u>Outreach and Engagement</u></p> <p>The Connecticut Office of Health Strategy (OHS) was mandated by the Connecticut General Assembly (CGA) in June 2021 to procure outreach, engagement and navigation services for the Covered Connecticut Demonstration for SFY 2023; this was extended by the Connecticut General Assembly in June 2023 for state fiscal year 2024. The OHS Covered Connecticut outreach and engagement program provides ten community and consumer focused organizations</p>

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	<p>with deep connections in their respective communities, funds to assist in outreach, education and enrollment in CoveredCT. During DY2 Q4 outreach activities and events included: Distributing information at libraries, farmers markets, community health events, neighborhood health clinics, enrollment fairs, barbershops, and food pantries. Provided information at a Breast Cancer Awareness Event, Waterbury Public Schools Community Resource Fair, and distributed flyers at a Parent Teacher Conference in New Haven. Through the enrollment assistance offered by the program 341 members were enrolled in Covered CT during the quarter and 545 members in total for 2023.</p>
<b>Evaluation updates included in MR</b>	

Monitoring Report/Issue/Requirement Information	Summary of Information