How to Get Connecticut Medicaid Benefits

This article is a collection of the best answers to Connecticut Medicaid's most frequently asked questions.

Medicaid is a government-sponsored healthcare program for low-income families and individuals who fulfill specific income and resource requirements. Only the aged, blind, or disabled can access resources within the defined restrictions.

We have scoured the internet to provide all you need to know about the Connecticut Medicaid Benefits.

You will learn everything you need to know about Connecticut Medicaid in this article.

What is Connecticut Medicaid?

Connecticut provides Medicaid healthcare coverage to millions of Americans, including kids, expectant mothers, parents, retirees, and those with disabilities. All low-income adults who fall below a particular income threshold are covered by the program in various states.

Who is eligible for Connecticut Medicaid?

You must be a resident of Kentucky, a U.S. national, citizen, permanent resident, or legal alien, in need of health care/insurance assistance, and whose financial condition would be classified as low-income or very low income to be eligible for Connecticut Medicaid.

You also need to fit one of the following criteria:

- Pregnant, or
- Be in charge of a youngster who is younger than 18 years old or

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- Have a disability or a family member who is disabled at your home, or
- Be 65 years of age or older.

Annual Household Income Limits (before taxes)

Household Size*	Maximum Income Level (Per Year)
1	\$18,075
2	\$24,353
3	\$30,630
4	\$36,908
5	\$43,186
6	\$49,463
7	\$55,741
8	\$62,018

^{*}For households with eight or more members, add \$6,277 for each additional member.

How do I contact Medicaid in Connecticut?

Phone

1-877-284-8759

Website

https://portal.ct.gov/HUSKY

Emaildmsweb@ky.gov

What are the Medicaid plans in Connecticut?

The State of Connecticut's public health insurance program is called the Health Care for Uninsured Kids and Youth (HUSKY). HUSKY in Connecticut offers affordable or free complete coverage to families or individuals with very low incomes.

It covers eligible children, parents, relatives who are caring for them, senior citizens, people with disabilities, adults without children, and pregnant women who meet certain income requirements. Regardless of the family income, children under the age of 19 may be eligible.

The state's marketplace for health insurance is called Access Health CT. The shared system that serves as the access point for HUSKY A, B, and D is coordinated by the Connecticut Department of Social Services and Access Health.

To discover a suitable plan that will meet their needs and, at the same time, find out if they are eligible for financial assistance to minimize the costs of a qualified health plan, people looking for private insurance can also get in touch with Access Health CT.

- HUSKY A is available to children and the relatives who look after them
 whose family income is less than 185 percent of the poverty level, as well as
 to pregnant mothers whose income is less than 250 percent of the poverty
 level.
- Due to their age, blindness, or disability, certain people may qualify for Medicaid. People who fit this description are eligible for **HUSKY C**.
- Adults who are single and make less than 56% of the federal poverty threshold may be eligible for **HUSKY D** or Medicaid for Low-Income Adults (LIA).
- The Children's Health Insurance Program is known as **HUSKY B** in Connecticut.
- If their parents' income is greater than 185 percent of the federal poverty threshold, children from low-income families in Connecticut may be eligible for HUSKY (Healthcare for Uninsured Kids and Youth).

How do I apply for Connecticut Medicaid?

To apply online, please visit the **ConneCT** online application portal.

Visit the <u>How to Qualify</u> for more information on the application process.

You may also find out if you qualify through the Marketplace application.

What is covered by Connecticut Medicaid?

The following services are covered by Connecticut Medicaid

Ambulatory surgery	Hospital stays
Audiology services	Laboratory tests
Behavioral health services	Maternity care
Dental services	Non-emergency transportation
Dialysis	Orthotic and prosthetic devices
Doctor visits	Occupational therapy
Durable medical equipment	Pharmacy (medications)
Emergency care	Physical rehabilitation
Family planning services	Preventive care
Hearing aids	Smoking cessation services
Home health care	Vision care
Hospice services	Women's health care
Hospital outpatient care	X-rays and other radiology services

Copayments?

Most Medicaid recipients in Connecticut do not pay deductibles or copayments, though some enrollees in a smaller Medicaid-funded program may pay a premium based on their income.

What is not covered by Connecticut Medicaid?

Independent podiatrists, chiropractors, naturopaths, psychologists, or therapists are not covered by Medicaid (physical therapists, audiologists, or speech therapists).

Medicaid is also not required to provide coverage for private nursing or for caregiving services provided by a household member. Things like bandages, adult diapers, and other disposables are also not usually covered, and neither is cosmetic surgery or other elective procedures.

How many types of Connecticut Medicaid are there?

HUSKY Health is the state of Connecticut's public health insurance program for pregnant women, adults without dependent children, elders, caregivers for elderly or disabled people, parents, and other qualifying individuals.

- Medicaid and the Children's Health Insurance Program are both covered by HUSKY Health.
- HUSKY A—Medicaid for kids, teens, parents, relatives caring for them, and expectant mothers;
- HUSKY B: Children's Health Insurance Program, available to children and teenagers up to age 19;
- HUSKY C Medicaid for Employees with Disabilities, Long-Term Services and Supports for Adults with Disabilities, and Adults Ages 65 and Over;
- HUSKY D: Medicaid for people without dependent children who are low-income.

HUSKY Health offers a full health benefits package. Doctor visits, medicines, eye, and dental treatment, among other things, are all covered by HUSKY Health. The

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Can I have both Connecticut Medicaid and Medicare?

It's crucial to remember that individuals with disabilities who are younger and have modest incomes may qualify for both Medicaid and Medicare.

What is the highest income limit for Connecticut Medicaid?

Depending on where you live in Connecticut and the type of coverage you require, there are different income limits (HUSKY C). HUSKY C is a Medicaid plan which provides health insurance for employees with disabilities as well as eligible adults 65 and older and persons with disabilities.

Adults with no minor children at home with an income of less than \$1,480 per month for one adult or \$3,047 for a family of four (HUSKY D). Please note that the annual income limit for MED-Connect enrollees is \$75,000.

How much money can you have in the bank on Connecticut Medicaid?

According to the Connecticut Medicaid eligibility guide, there is also a \$1,600 asset cap for single applicants. Married couples are allowed a maximum of \$2,400 in assets.

Does the disabled person get Connecticut Medicaid?

A medical assistance program for citizens of Connecticut is called MED-Connect (Medicaid for Employees with Disabilities), and it is run by the Department of Social Services.

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Through the program, a person with a disability is able to work, make money, and qualify for Medicaid health insurance.

Will you still have Connecticut Medicaid once you are over 18?

Children under the age of 18 who come from families with incomes above the Medicaid eligibility level should be referred to HUSKY B for coverage without enrollment gaps. Those who are between 19 and 20 years old may still be eligible for Medicaid.

What documents do I need to apply for Medicaid?

The application must be accompanied by the following documents.

- Social Security Number;
- Proof of U.S. citizenship or lawful residence (e.g., passport, driver's license, birth certificate, green card, employment authorization card)
- Proof of all revenue sources, both legitimate and illicit (e.g., paycheck stubs, retirement benefits, Supplemental Security Income)
- EvIdence of sources (e.g., bank or stock statements, life insurance policies, property)
- Evidence of residence (e.g., rent receipt, landlord statement, deed)
- Any insurance cards, including the Medicare card (you can also provide a copy of the insurance policy)
- Pregnancy (doctors' confirmation of the pregnancy and the anticipated delivery date, if any);
- Non-pregnant parents who are applying for Medicaid on their own behalf should present documentation of their financial situation (the latest three months' worth of bank statements, statements from checking or savings accounts, copies of life insurance policies, stock and bond certificates, etc.).