



## **2022 Talking Points**

### **Medicaid Dental Rates & Increasing Access**

- Adult dental rates are a fraction of pediatric dental rates
- Appointments are difficult to find and there is only 1 endodontist in the state accepting HUSKY enrollees
- More from COHI is coming soon!

### **Urgent Need for Community Health Worker (CHW) Support**

- As our health insurance systems grow more complex and tens of thousands of residents are likely to become ineligible for HUSKY when the federal declaration of a public health emergency ends, there is an urgent need for trusted, community-based support to ensure people can enroll in AND use health insurance.
- People who move from HUSKY to CoveredCT or the reverse will experience a change in covered benefits and provider network. CHWs can help people make appointments with new doctors and understand what is and is not covered by their plan.
- Community health workers are effective beyond the traditional walls of health care. They bridge the gap between individuals, communities, and the social and health services they need.
- People of color are disproportionately affected by gaps in health insurance coverage and face uneven access to health care services. Leaning on community health workers for targeted outreach will help residents with the least access to care receive the services and supports they need.
- Preparing for the end of the public health emergency means leveraging the strength of community health workers. Community health workers are frontline health workers equipped with the tools to help people navigate Connecticut's complex health insurance options to find the coverage that is suitable for them.
- Disparate health outcomes are linked to poor access to health services. Community health workers are critical messengers for public health and social service information. They serve as a bridge for people for whom accessing these systems is a significant barrier.
- Since the start of the pandemic, more than 100,000 people in Connecticut have enrolled in Medicaid. As the public health emergency ends, and people begin to experience significant changes in coverage, trusted, community- and faith-based organizations are needed to ensure that people receive the services for which they are eligible.
- Community health workers are trusted among the populations they serve because they have an in-depth understanding of a community's needs based on their own lived experience. Community health workers help to reduce health disparities, improve health outcomes, and better the overall quality of care.
- Only 200 people have enrolled in COVEREDCT since the program began. Evaluating the effectiveness of COVEREDCT will require robust enrollment and utilization. As the PHE ends, investing in community health workers is the first step in ensuring that people are aware of the program and its benefits.



### **175% FPL is not 200% FPL**

- Even with COVEREDCT, some people will lose Medicaid eligibility as the minimum wage increases. The minimum wage increase is needed and important but does not cover the cost of health insurance even with subsidies and cost-sharing on Access Health CT.
- Having insurance decreases the risk of medical debt and avoidance of care and increases opportunities to stay healthy and catch an illness before it gets worse.
- People of color are far more likely to go without insurance than the state average. This injustice is rooted in discrimination in employment, education, and housing. When CT implemented the ACA, these disparities started to shrink, but they are now stable or growing again.
- Even with cost-sharing and premium subsidies, the cost of health insurance is unaffordable for some people in Connecticut.
- Access to health care starts with having health insurance. Without insurance or with deductibles and other costs too high to manage, people forgo or delay the health care they need.
- Health insurance isn't sufficient to ensure access to care, but it is a necessary and vital part of access.
- Minimum wage is not living wage. For families above 175% FPL, the cost of health insurance is high, even with subsidies and cost-sharing on Access Health CT.
- The cost of healthcare in Connecticut and across the United States is high. HUSKY Health programs are one part of larger efforts to make health care affordable for everyone.

### **Increase access to HUSKY to include all income-eligible immigrants regardless of their status:**

- All residents of our state deserve access to health care. Today's eligibility standards are inadequate and do not broadly address un-insurance among immigrants without documents.
- Most immigrants without documents, who would otherwise qualify for CT's Medicaid programs (low-income adults, most children, older adults, and people with disabilities) are still ineligible.
- Expanding HUSKY programs to cover all income-eligible immigrants who are pregnant, postpartum, or under the age of 8 in 2021 was a huge step forward. It is not enough. All children and adults need health insurance to learn, work, and thrive.
- Lack of health insurance is one of the most significant barriers to health. Insurance coverage facilitates access to care and prevents long-term chronic illness.
- Many people without health insurance are forced to rely on emergency care for conditions that often could have been prevented or managed in a lower-cost setting<sup>1</sup>
- Some immigrants who have been in the U.S. for less than 5 years are not eligible for HUSKY health programs

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<sup>1</sup>

[https://www.aha.org/system/files/media/file/2019/10/report-importance-of-health-coverage\\_1.pdf](https://www.aha.org/system/files/media/file/2019/10/report-importance-of-health-coverage_1.pdf)



- Individuals without documents can only enroll in HUSKY if they are pregnant, postpartum, or young children, and are almost entirely unable to purchase insurance on the Access Health CT (state health insurance exchange).

For more information, contact:  
Karen Siegel; [ksiegel@hesct.org](mailto:ksiegel@hesct.org) or  
Jonathan Gonzalez-Cruz; [jonathanccag@gmail.com](mailto:jonathanccag@gmail.com)