

**Support House Bill 5137: An Act Concerning the Eligibility of Children Enrolled in the HUSKY Plan
to restore “continuous eligibility” for children in HUSKY A and B.**

**Continuous Eligibility:
A Proven Strategy for Stabilizing Children’s Coverage in the HUSKY Program**

HUSKY is a publicly-funded health insurance program for children, low-income parents, pregnant women, low-income adults, individuals with disabilities, and seniors. Although the HUSKY Program has expanded over the years to provide needed health coverage to hundreds of thousands children and low-income adults, ensuring uninterrupted coverage for eligible children and families is an ongoing challenge.

Studies have shown that maintaining health insurance coverage is key to children getting timely and appropriate health care. In addition, gaps in coverage increase the administrative costs to the HUSKY program. “Continuous eligibility” is a Medicaid and Children’s Health Insurance Program option for keeping children insured for 12 months, even if income or family size changes, reducing gaps in coverage. *Thirty-two states offer 12 months of coverage for children.*

- **Children are at risk of losing HUSKY health insurance coverage when families renew coverage each year or experience changes during the year:**
 - The renewal notices and process are confusing, especially if families are not aware of the need to renew coverage annually.
 - Changes in family circumstances that affect eligibility (household income or family size) are often temporary.
 - This results in a large number of people experiencing “churning”, or going on and off Medicaid and CHIP (HUSKY A and B in Connecticut) during the course of a year and at renewal.
- **Continuous eligibility can improve the quality of health care for children:**
 - Children with continuous coverage are more likely to receive timely care, get their health care needs met, and fill their prescriptions.
 - Children with chronic diseases, such as diabetes, asthma and mental/behavioral disorders, can get the care they need.
- **“Continuous Eligibility” can reduce the administrative burden for the state:**
 - Connecticut had “continuous eligibility” for children from 1999-2003.
 - Once the legislature authorizes continuous eligibility for children, Connecticut simply needs to submit a state plan amendment to the federal government.
 - The cost for re-enrolling an eligible person is significant (for example, over \$200 for each re-enrollment in Massachusetts).
 - The average monthly cost of health care increases after a gap in coverage.
- **Connecticut should consider adopting continuous eligibility for adults in HUSKY:**
 - Offering coverage to the entire family for 12 months will stabilize health care coverage for everyone, including children.
 - Connecticut needs to apply for a Medicaid waiver to implement continuous eligibility for adults.