# Better Health for All

How lawmakers can advance health equity in 2023



The health of all Connecticut residents is critical to our state's future, yet too many residents face substantial barriers to being as healthy as possible. These barriers disproportionately affect people of color, and have created significant, long-standing – yet preventable – disparities in health outcomes.

In addition to facing worse health outcomes, Black and Hispanic Connecticut residents are less likely than white residents to have health insurance and a regular source of care, and research shows that people of color are less likely to receive quality care.<sup>1</sup> The COVID-19 pandemic magnified the many barriers to health that people of color face.

There are steps lawmakers can take now to make Connecticut a healthier state for everyone and make progress in reducing these disparities. In this briefing you will find information on three key areas that legislators can address in 2023 to improve health and reduce disparities, references to learn more, and other organizations that are working on these issues in Connecticut.



### In this brief:

- Covering All of Connecticut: Reducing Disparities in Health Coverage
- Creating Connections to Care: How Community Health Workers Can Help Connecticut Residents
- What We're Watching: The End of the Federal Public Health Emergency

### **Read more:**

- Health Disparities in Connecticut: Causes, Effects, and What We Can Do
- How Racism Shapes Opportunities for Black Families

# Covering All of Connecticut: Reducing Disparities in Health Coverage

Health coverage is a critical step toward ensuring that people can access the care they need, including preventive services that can keep people healthy. Having health insurance is associated with lower death rates and better health outcomes.<sup>2</sup>

Connecticut has one of the nation's lowest uninsured rates, but the overall rate masks much higher uninsured rates for people of color. Approximately 200,000 state residents still lack coverage – particularly those in two groups: people just above the income threshold for HUSKY (Connecticut's Medicaid program) and undocumented residents.

State lawmakers have already started making progress to cover more people in these groups.

In 2021, lawmakers created the Covered Connecticut program,<sup>5</sup> which provides state funding to eliminate costs for purchasing coverage through Access Health CT, the state's health insurance exchange. Participants also have no deductibles or cost-sharing when they get care. The program is available to those whose income is too high for Medicaid but below 175% of the federal poverty level. For a family of four, this would be \$46,375 and under, according to 2022 guidelines.<sup>6</sup> However, state residents just above that income level still struggle to afford coverage. Research shows that the cost of coverage is a key reason why people with incomes below 200% of the federal poverty level (\$55,500 for a family of four) are uninsured at higher rates than residents at other income levels.<sup>7</sup> The existing eligibility for Covered Connecticut only covers a portion of this population.

State lawmakers have also expanded HUSKY eligibility to undocumented children ages 12 and under and extended prenatal and postpartum coverage to undocumented residents. (Coverage for children takes effect

# Who's uninsured in CT?

Significant disparities exist in uninsured rates.

Population	Uninsured Rate (under age 65), 2019 (%) <sup>3</sup>
White	4.8
Black	7.0
Hispanic	14.4
Multiple races	10.9
Undocumented immigra	ants <sup>4</sup> 58*
Total	7.1

\* Data for undocumented immigrants covers all ages. The vast majority of other state residents are eligible for Medicare at age 65.

January 1, 2023, and postpartum coverage begins April 1, 2023; prenatal coverage is already available.) Despite this progress, more work remains. According to recent research, offering HUSKY coverage to all eligible undocumented residents would help more than 21,000 people access health care, for just 3% of the state's annual Medicaid budget.<sup>8</sup> Connecticut lawmakers can build on this progress and close the gap in uninsured rates by getting more people covered.

# Ways to Improve Coverage and Access for All

- Expand HUSKY coverage for all who are eligible, regardless of immigration status.
- Increase the eligibility of Covered Connecticut to higher income limits.



## **CT Health Grantees Focused on Health Coverage**

- CT Students for a
- <u>• Center for Children's Advocacy\*</u>
  <u>• Ministerial Health Fellowship</u>\_\_\_\_\_
- Dream\*
- Make the Road CT\*

\*These organizations are part of the <u>HUSKY 4 Immigrants</u> coalition.

### **Read more:**

- Closing the Health Insurance Affordability Gap: Two Options for Connecticut
- Expanding Insurance Coverage to Undocumented Immigrants in Connecticut

# **Creating Connections to Care**: How Community Health Workers Can Help Connecticut Residents

"Community health worker" is an umbrella term for frontline health workers who build relationships with people to better connect them to health care or social services. Community health workers are often members of the communities they serve, making them well-suited to help people access care and address their needs more broadly.

Community health workers can play a major role in reducing health disparities. They help:



- Improve health outcomes for people with conditions including diabetes, asthma, cardiovascular disease, and HIV.<sup>9</sup>
- Ensure people receive preventive care.<sup>10</sup>
- **Reduce** some health care costs, such as avoiding emergency room treatment.<sup>11</sup>

Community health workers in Connecticut also played a crucial role during the pandemic. They served as contact tracers and helped people address needs such as food, medical care, and help paying bills.<sup>12</sup>

Many states are beginning to recognize the value of community health workers and are working to integrate their services into health care systems.<sup>13</sup>

Connecticut has made progress in investing in the workforce of community health workers, such as defining the workforce in statute and implementing a voluntary certification program.<sup>14</sup> The state is also funding community health workers in home visiting programs. However, there is currently no sustainable payment method for community health workers in Connecticut. This leaves many programs reliant on grant funding, which is often short-term, limiting the impact that community health worker services could have.

# Ways to Create a Sustainable Community Health Worker Workforce

• Support Medicaid funding for certified community health workers.

## CT Health Grantees Focused on Community Health Workers

- Charter Oak Health Center
- Greater Waterbury Health Partnership
- Health Equity Solutions

#### **Read more:**

• Understanding community health workers: Who they are and why they matter for Connecticut

# What We're Watching: The End of the Federal Public Health Emergency

Before the pandemic, people covered by Medicaid had to regularly renew their coverage by showing they were eligible. While the nation is under a federally declared public health emergency, the federal government prevents states from cutting off coverage for people whose eligibility lapsed.

However, when the federal government ends the public health emergency declaration (it's not clear when that will be), states will start checking eligibility and cutting off coverage for those who are no longer eligible.<sup>15</sup> There's a risk that this process will inadvertently cause people who still qualify to lose coverage, particularly if they face challenges in providing updated information to the state to verify their eligibility or if the state's effort to collect data falls short.<sup>16</sup> For those who no longer qualify for Medicaid, it will be critical to assure they can find other coverage. Without careful monitoring and outreach, many people could fall through the cracks and become uninsured.

Once the public health emergency ends, the state will have 12 months to re-determine eligibility for people covered by HUSKY. The Connecticut Department of Social Services, the Office of Health Strategy, and Access Health CT have taken steps to prepare and prevent coverage losses. However, there's more that can be done.

# Ways to Keep People Covered when the Public Health Emergency Ends

- Monitor the re-determination process and enrollment trends. Consider creating a data dashboard modeled after those in use in other states.<sup>17</sup>
- Communicate with constituents who might be affected to make sure they know what will happen, how to update their information to verify eligibility, and how to find other coverage sources if they no longer qualify for HUSKY.
- Support state funding for outreach so that community-based organizations and other trusted messengers can best reach those who will be affected.



#### **Read more:**

- What Happens When the COVID-19 Emergency Declarations End? Implications for Coverage, Costs, and Access
- Examples of data dashboards from other states

# **End notes**

- 1 Arielle Levin Becker, "Health Disparities in Connecticut: Causes, Effects, and What We Can Do," Connecticut Health Foundation, 2020. <u>https://www.cthealth.org/wp-content/uploads/2020/01/Health-disparities-in-Connecticut.pdf</u>
- 2 Center on Budget and Policy Priorities, "The Far-Reaching Benefits of the Affordable Care Act's Medicaid Expansion," updated 2020. <u>https://www.cbpp.org/research/health/</u> <u>chart-book-the-far-reaching-benefits-of-the-affordable-care-acts-medicaid-expansion</u>
- 3 Kaiser Family Foundation, "Uninsured Rates for the Nonelderly by Race/Ethnicity," 2019. <u>https://www.kff.org/uninsured/state-indicator/nonelderly-uninsured-rate-by-raceethnici</u> ty/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22;%22sort%22:%22asc%22%7D
- 4 Migration Policy Institute, "Profile of the Unauthorized Population," 2019. https://www.migrationpolicy.org/data/unauthorized-immigrant-population/state/CT
- 5 Access Health CT, "Covered Connecticut Program," updated 2022. https://help.accesshealthct.com/en\_US/covered-connecticut-program
- 6 Ibid.
- 7 Cindy Mann, Allison Orris, Ashley Traube, "Closing the Health Insurance Affordability Gap: Two Options for Connecticut," Connecticut Health Foundation, 2022. <u>https://www.cthealth.org/wp-content/uploads/2020/11/CT-Health-Closing-the-Affordability-Gap.pdf</u>
- 8 Preethi Rao, Girosi Federico, & Christine Eibner, "Expanding Insurance Coverage to Undocumented Immigrants in Connecticut," RAND Corporation, 2022. <a href="https://www.rand.org/pubs/research\_reports/RRA1964-1.html">https://www.rand.org/pubs/research\_reports/RRA1964-1.html</a>
- 9 The Institute for Clinical and Economic Review, "Community Health Workers: A Review of Program Evolution, Evidence on Effectiveness and Value, and Status of Workforce Development in New England," 2013. <u>http://icerorg.wpengine.com/wp-content/uploads/2020/10/CHW-Final-Report-07-26-MASTER.pdf</u>
- 10 Katharine London, Kelly Love, & Roosa Tikkanen, "Sustainable Financing Models for Community Health Worker Services in Connecticut: Translating Science into Practice," Connecticut Health Foundation, 2017. <u>https://www.cthealth.org/wp-content/uploads/2017/06/CHF-CHW-Report-June-2017.pdf</u>
- 11 Ibid
- 12 Arielle Levin Becker, "Two Years In: Lessons from the COVID-19 Pandemic," Connecticut Health Foundation, 2022, p. 17. <u>https://www.cthealth.org/wp-content/uploads/2022/03/</u> CT-Health-COVID-lessons-learned.pdf
- 13 National Academy for State Health Policy, "State Community Health Worker Models," updated 2021. https://www.nashp.org/state-community-health-worker-models
- 14 Public Act No. 19-117, Sec. 160, p. 191. https://cga.ct.gov/2019/ACT/pa/pdf/2019PA-00117-R00HB-07424-PA.pdf
- 15 Kinda Serafi, Cindy Mann, & Nina V. Punukollu, "The Risk of Coverage Loss for Medicaid Beneficiaries as the COVID-19 Public Health Emergency Ends," The Commonwealth Fund, September 2021. https://www.commonwealthfund.org/blog/2021/risk-coverage-loss-medicaid-beneficiaries-covid-19
- 16 Tricia Brooks, "An Estimated 3.8 Million Eligible Children Could Lose Medicaid Due to the Administrative Churn During the Unwinding," Center for Children and Families of the Georgetown University Health Policy Institute, August 2022. <u>https://ccf.georgetown.edu/2022/08/22/millions-of-eligible-children-could-lose-medicaid-due-to-administrative-churn-during-the-unwinding/</u>
- 17 Emily Zylla and Lindsey Theis, "Tracking Medicaid Coverage Post the Continuous Coverage Requirement: Using Data Dashboards to Monitor Trends," State Health & Value Strategies, 2022. https://www.shvs.org/wp-content/uploads/2022/01/Tracking-Medicaid-Coverage-Post-the-Continuous-Coverage-Requirement\_Using-Data-Dashboards-to-Monitor-Trends.pdf



100 Pearl Street, Hartford, CT 06103 www.cthealth.org



#### **About the Connecticut Health Foundation**

The Connecticut Health Foundation is an independent, nonpartisan, private foundation created in 1999. We focus on improving health outcomes for people of color and assuring that all Connecticut residents have access to affordable and high-quality health care. Through public policy, grantmaking, and leadership development, we work to make lasting changes that improve lives. To learn more, visit <u>cthealth.org</u>.