





Medicaid in Connecticut

2025

MEDICAID

Medicaid provides health care coverage to low-income residents in every state. It is administered by each state under federal rules and serves as a critical safety net for one in five U.S. residents. The federal government pays more than half of the state's Medicaid costs. Medicaid is separate from Medicare, which covers seniors and people with disabilities.

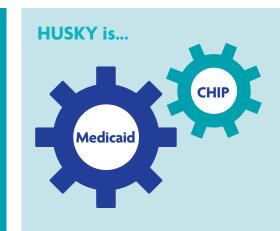
One in five

U.S. residents are covered by Medicaid



HUSKY

HUSKY is Connecticut's name for Medicaid and the Children's Health Insurance Program (CHIP), which covers children whose family incomes are above the Medicaid limit.

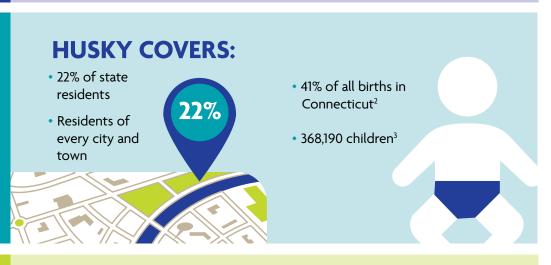


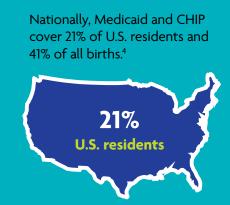


WHY MEDICAID MATTERS:

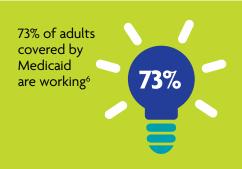
- Medicaid provides health care coverage to more than 900,000 state residents including more than 368,000 children.¹
- Medicaid makes it possible for people to receive preventive care to stay healthy and to get medical care, behavioral health services, and dental care when they need it.
- Medicaid is the largest payer of long-term care in the state, covering residents in nursing homes and those receiving home health care.







OF MEDICAID MEMBERS: Two of five are children



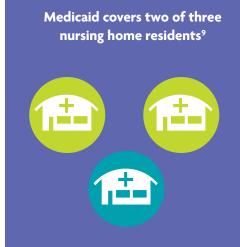
WHAT ROLE DOES MEDICAID PLAY IN THE ECONOMY?

Medicaid is one of the major funders of health care services – money that goes to hospitals, community health centers, behavioral health providers, and others who deliver care.

Medicaid covers:

25% of hospital discharges⁷

60% of community health center patients8



What are HUSKY A B C and D?

There are four parts of HUSKY.

Name	Who's covered?	Income limit	How many people ¹⁰	Average monthly per-person cost ¹¹	Federal government pays
HUSKY A	Children Parents Pregnant people	201% FPL 138% FPL* 263% FPL	539,100	\$391	50%
HUSKY B (CHIP)	Children whose family incomes are too high for Medicaid	323% FPL	21,800	\$263	65%
HUSKY C	Seniors People with disabilities	105% FPL	84,700	\$3,362	50%
HUSKY D	Adults without minor children	138% FPL	312,700	\$732	90%

Enrollment and cost data is as of fall 2024 Enrollment numbers are rounded to nearest hundred FPL: Federal poverty level

To qualify for HUSKY A, a family of three would have to earn less than \$36,777 per year (138% of FPL). **To qualify for HUSKY D**, a single person would have to earn less than \$21,597 per year.

WHAT ARE THE LONG-TERM OUTCOMES OF MEDICAID?

Research¹² has linked Medicaid coverage of children and pregnant women to long-term health and economic benefits. These include:

- **Better health during adulthood:** improved overall health, reduced obesity, decreased hospitalizations, lower rates of disability, and reduced mortality.
- **Greater educational attainment:** higher reading test scores, reduced high school dropout rates and increased likelihood of college attendance and degree completion.
- Increased employment, higher earnings, higher tax payments in adulthood.

Research $^{13 \, 14}$ has also found that the expansion of Medicaid to low-income adults without minor children – which occurred under the Affordable Care Act – has been linked to:

- Improved access to medical care and behavioral health treatment.
- More early-stage cancer diagnosis and treatment.
- Less medical debt and fewer unpaid bills among low-income people.

Some studies also found that gaining Medicaid coverage made it easier for people to look for jobs or continue working, which benefit individuals as well as the state's overall economy.



^{*}Eligibility for parents and other caretakers of minor children was cut from 150% FPL to 138% during the 2024 legislative session.





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How can I learn more?

Read: Medicaid 101 by KFF

Medicaid in Connecticut by KFF

<u>Medicaid's role in Connecticut's economy, health system, and budget</u> by Edwin Park, Georgetown Center for Children and Families

Faces of HUSKY D: The impact of Connecticut's Medicaid expansion by the Connecticut Health Foundation

Endnotes

- 1 KFF, Monthly Child Enrollment in Medicaid and CHIP, December 2024.
- 2 KFF, Medicaid in Connecticut, May 2025.
- 3 KFF, Monthly Child Enrollment in Medicaid and CHIP, December 2024.
- 4 KFF, Medicaid in United States, May 2025, and KFF, Health Insurance Coverage of the Total Population, 2023.
- 5 KFF, Medicaid in Connecticut, May 2025.
- 6 KFF, Medicaid in Connecticut, May 2025.
- 7 Connecticut Office of Health Strategy, <u>Annual Report on the Financial Status of Connecticut's Acute Care Hospitals, for the Fiscal Year 2022,</u> September 2023.
- 8 KFF, Community Health Center Patients by Payer Source, 2023.
- 9 KFF, Medicaid in Connecticut, May 2025.
- 10 Connecticut Department of Social Services, Medicaid Program Exp. Enrollment Update, March 2025.
- 11 Connecticut Department of Social Services, Medicaid Program Exp. Enrollment Update, March 2025.
- 12 Edwin Park, Medicaid's Role in Connecticut's Economy, Health System, and Budget, Connecticut Health Foundation, August 2018.
- 13 Madeline Guth, Rachel Garfield, and Robin Rudowitz, <u>The Effects of Medicaid Expansion Under the ACA: Studies from January 2014 to January 2020, KFF, March 17, 2020.</u>
- 14 Rose C. Chu, Christie Peters, and Thomas Buchmueller, Medicaid: The Health and Economic Benefits of Expanding Eligibility, U.S. Department of Health and Human Services, September 2024.