

# **Medicaid in CT: What to know about HUSKY**



**Connecticut Health**  
FOUNDATION

*Changing Systems, Improving Lives.*

# Overview

- What is Medicaid?
- Who's covered?
- Medicaid in CT: HUSKY A, B, C & D
- Who runs Medicaid
- Medicaid payment

# What is Medicaid?

**Medicaid is health insurance.**

**Medicaid is the largest source of health insurance in the U.S.**

- [71 million](#) people covered.

**Medicaid goes by a lot of different names across the country.**

- In CT, it's called HUSKY.

**Medicaid is NOT Medicare.**

- But some people with Medicare also have Medicaid coverage.
- Medicare is insurance for people aged 65+ and people with disabilities.

# Who is Medicaid for?

**Medicaid covers low-income residents and people with disabilities.**

- The income limit for kids is higher than adults.
- In some families, kids have HUSKY and parents do not.
- The income limit for people with disabilities is lower.

	Family size				
	1	2	3	4	5
Adults	\$21,597	\$27,918	\$36,777	\$44,367	\$51,957
Children	NA	\$42,511	\$53,566	\$64,621	\$76,676
Pregnant People	NA	\$55,624	\$70,089	\$84,554	\$99,019

# You know someone with Medicaid (probably many)

In CT, Medicaid covers:

- More than 900,000 people
- 41% of births
- More than 1 in 3 public school students
- More than 1 in 3 people who work in childcare
- 2 in 3 nursing home residents
- People in every city and town in the state

# Anyone who qualifies can get coverage

## Medicaid is an entitlement.

- Anyone who meets the qualifications can get coverage.
- This can make costs a bit unpredictable from year to year.
- This is different from government programs that have fixed budgets. If these programs run out of money, they can stop serving people. (Medicaid does not.)

## Some lawmakers have tried to change that.

Past efforts to cut Medicaid have included shifting to a system with a set amount of funding (**block grants**) or a spending limit for each person (**per-capita caps**).

- This could result in big cuts to Medicaid spending (and coverage).
- This approach is NOT part of the law that passed in July 2025.

# Medicaid in CT

**Medicaid in CT is called HUSKY.**

**There are 4 main portions – HUSKY A, HUSKY B, HUSKY C, and HUSKY D.**

- Each one differs in who is covered, the income limit, and the amount the federal government pays toward this coverage.
- There are some additional, smaller portions of HUSKY, such as coverage for people with breast or cervical cancer and limited coverage of family planning services.

# Medicaid in CT

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



# HUSKY A

**HUSKY A** covers the most people of any part of Medicaid.  
There are different eligibility limits for parents, kids, and pregnant people.

Who it covers	Income limits	People covered	Average monthly per-person cost	Feds pay
Parents	138% FPL	539,100	\$391	50%
Kids	201% FPL			
Pregnant people	263% FPL			

Cost and enrollment data is as of fall 2024.

# HUSKY B

**HUSKY B** is the Children's Health Insurance Plan (CHIP), not Medicaid. It covers kids with family incomes above the Medicaid limit.

Who it covers	Income limits	People covered	Average monthly per-person cost	Feds pay
Kids under 19	201% to 323% FPL	21,800	\$263	65%

[Cost and enrollment data](#) is as of fall 2024.

# HUSKY C

**HUSKY C** covers low-income seniors and people with disabilities. Many people with HUSKY C receive long-term care in nursing homes or at home.

HUSKY C has the lowest income limit to qualify.

Because people with HUSKY C have high medical needs, it has the highest costs per person.

Who it covers	Income limits	People covered	Average monthly per-person cost	Feds pay
Seniors People with disabilities	105% FPL	84,700	\$3,362	50%

[Cost and enrollment data](#) is as of fall 2024.

# HUSKY D

**HUSKY D** was created under the Affordable Care Act (also known as Obamacare). It covers adults under 65 who do not have minor children. This group is also known as the **Medicaid expansion**. The federal government pays 90% of the cost of this coverage.

Who it covers	Income limits	People covered	Average monthly per-person cost	Feds pay
Adults without minor children	138% FPL	312,700	\$732	90%

[Cost and enrollment data](#) is as of fall 2024.

# How does CT cover undocumented residents?

## **State HUSKY A**

- CT covers kids up to age 16 regardless of immigration status, if their families meet income limits.
- Kids who get covered before age 16 can stay covered until they turn 19.
- This is entirely funded by the state.

## **Pregnancy and postpartum coverage**

- CT provides HUSKY coverage to people who are pregnant and up to 12 months postpartum, regardless of immigration status.

## **Emergency Medicaid**

- The federal government pays hospitals for providing emergency treatment to low-income people, regardless of immigration status.

# Who runs Medicaid?

**Medicaid is run by the state and federal government.**

- The federal government sets rules; states run their Medicaid programs within those rules.
- Each state's Medicaid program works differently.
- Certain decisions about Medicaid are up to states, and others require federal approval.

The state agency that runs Medicaid in CT is the **Department of Social Services.**

# Who pays for Medicaid?

**The state and federal governments share the cost.**

**States spend money on Medicaid, and the federal government reimburses a percentage of the costs.**

- In CT, the federal government pays 50% of the cost for most coverage. In states with lower incomes, the feds pay more.
- For some coverage, the feds pay every state more. (For example, for HUSKY D/expansion coverage, the feds pay 90% of the cost.)
- In 2023, Medicaid in CT cost [\\$10.4 billion](#). The federal government paid [63%](#) of that cost.

# The federal payment rate is an important tool

**Key term: FMAP (federal medical assistance percentage)**

**FMAP is the percent of a state's Medicaid costs that the federal government pays.**

**The FMAP is a big lever the federal government can use to increase (or decrease) funding to states.**

- Example: During the COVID-19 pandemic, the federal government increased the FMAP for states by 6.2 percentage points.
- This helped states pay for Medicaid at a time when more people needed coverage and states were collecting less tax money since fewer people were working.
- Congress has recently considered lowering the FMAP for certain states.



# Where does Medicaid funding go?

**Medicaid funding goes to health care providers** – hospitals, doctors' offices, clinics, community health centers, dentists, pharmacies, etc.

**Medicaid payments have ripple effects on the economy.** Health care providers employ people, whose incomes contribute to the economy.

In CT, Medicaid covers:

- More than 20% of hospital discharges
- 60% of community health center patients

# Long-term outcomes from Medicaid coverage

Research 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.

# Long-term outcomes from Medicaid coverage

[Research](#) has linked the Medicaid expansion under the Affordable Care Act (to cover more low-income adults) to positive [outcomes](#).

These include:

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

Studies have also found that gaining Medicaid coverage made it **easier for people to look for jobs or continue working**, which benefits individuals as well as the overall economy.

# Learn more

**Medicaid in CT**, a curated set of resources from the Connecticut Health Foundation:

<https://www.cthealth.org/topic-guides/medicaid-in-ct/>

**Medicaid resources from KFF**, a national organization focused on health policy that provides background information and updates on recent changes:

<https://www.kff.org/medicaid/>

**There's more to Medicaid**, from the CT Department of Social Services:

<https://www.myplacect.org/medicaid/>

**Medicaid information from Families USA**, which advocates for health care consumers:

<https://familiesusa.org/our-work/medicaid/>

# How to apply

## **Looking for Medicaid coverage?**

To apply or see if you're eligible, visit the CT Department of Social Services website:

<https://connect.ct.gov/access/jsp/access/Home.jsp>

You can also call the Department of Social Services: 1-855-626-6632