



April 2025 Partnership Plan Update

Office of the State Comptroller

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Agenda

- July 1st, 2025 Rate Renewal
- Cigna Dental Updates
- HEP Reminder
- Firefighter Update
- Flyte Copay
- Financial Overview

Please remain on mute and ask any questions through the chat.

Thank you.

FY26 Rate Renewal

- 7/1/25 medical/Rx base rate renewal is 9.9% for actives & 12.5/12.6 for retirees
 - Then regional adjustment factored in
 - Same regional adjustment factor will be applied for 7/1/26 renewal

Baseline Rates

Plan	Current Rat	tes		Baseline Re	Rate Action		
	EE	EE+1	FAM	EE	EE+1	FAM	
Actives	\$1,163.16	\$2,465.27	\$3,007.81	\$1,278.82	\$2,710.41	\$3,306.90	9.9%
Non-Medicare Retirees Under 65	\$1,391.66	\$2,982.15	\$3,644.85	\$1,570.49	\$3,349.88	\$4,091.28	12.5%
Non-Medicare Retirees Over 65	\$2,462.40	\$5,356.94	\$6,563.03	\$2,775.82	\$6,003.24	\$7,348.04	12.6%

Regional Rate Adjustments

Area		
	Current	Renewal
	Adjustment	Adjustment
1-Fairfield	+7.0%	+8.0%
2-Hartford	-5.0%	-5.5%
3-Litchfield	-4.0%	-4.5%
4-Middlesex	+1.0%	+1.0%
5-New Haven	+5.0%	+3.5%
6-New London	+3.0%	+2.0%
7-Tolland	-8.0%	-7.0%
8-Windham	+1.0%	-2.0%

FY26 Rate Renewal

• 7/1/25 medical/Rx renewal rates below

Rates for All Groups: Per Employee, Per Month (PEPM) Rates Quarter of Enrollment* July 1, 2025 - Sept. 30, 2025							CONNECTICUT 2.0 PARTNERSHIP PLAN				
County	Actives			Pre	Pre-65 Retirees			Post-65 Non-Medicare Retirees			
	Single	Employee +1	Family	Single	Employee +1	Family	Single	Employee +1	Family		
Fairfield	\$1,381.13	\$2,927.24	\$3,571.45	\$1,696.12	\$3,617.87	\$4,418.58	\$2,997.88	\$6,483.50	\$7,935.88		
Hartford	\$1,208.48	\$2,561.34	\$3,125.02	\$1,484.11	\$3,165.63	\$3,866.26	\$2,623.15	\$5,673.06	\$6,943.90		
Litchfield	\$1,221.27	\$2,588.44	\$3,158.09	\$1,499.81	\$3,199.13	\$3,907.17	\$2,650.91	\$5,733.09	\$7,017.38		
Middlesex	\$1,291.61	\$2,737.51	\$3,339.97	\$1,586.19	\$3,383.38	\$4,132.19	\$2,803.58	\$6,063.27	\$7,421.52		
New Haven	\$1,323.58	\$2,805.27	\$3,422.64	\$1,625.45	\$3,467.12	\$4,234.48	\$2,872.97	\$6,213.35	\$7,605.22		
New London	\$1,304.40	\$2,764.62	\$3,373.04	\$1,601.90	\$3,416.88	\$4,173.11	\$2,831.33	\$6,123.30	\$7,495.00		
Tolland	\$1,189.30	\$2,520.68	\$3,075.42	\$1,460.55	\$3,115.39	\$3,804.89	\$2,581.51	\$5,583.01	\$6,833.68		
Windham	\$1,253.24	\$2,656.20	\$3,240.76	\$1,539.08	\$3,282.88	\$4,009.46	\$2,720.30	\$5,883.17	\$7,201.08		

Cigna Dental Updates

- Option 1, 2 & 5 Moving to 90th MCR2 < 3% rate increase >
- Basic Plan < 0.19% rate decrease >
 - Moving to 90th MRC2
 - OON Class 2: Changing to 70%
 - OON Class 3: Changing to 50%
 - In Network Oral Surgery: Changing to 70%
 - OON Oral Surgery: Changing to 50%
 - In Network Periodontal Scaling and Root Planning: Changing to 60%
- Enhanced Plan < 15.73% rate increase >
 - In-network deductible: Changing to \$0
 - In Network Annual Maximum: Changing to \$5,000
 - OON Annual Maximum: Changing to \$2,500
 - OON Class 2: Changing to 70%
 - OON Class 3: Changing to 50%
 - OON Oral Surgery: Changing to 50%
 - OON Perio Scaling and Root Planning: Changing to 50%
 - OON Other Periodontal Services: Changing to 50%
 - In Network Orthodontia: Changing to \$2,000 Lifetime Maximum
 - OON Orthodontia: Changing to \$1,000 Lifetime Maximum
- Custom & DHMO Plans No Plan Changes

HEP Update – 2024 Status

- Reminder that 2024 HEP penalties will be added to your August Anthem bills
 - Increase of \$100 PEPM to premium for non-compliance with HEP

Total Compliance

Summary of 2024

Total Eligible Households: 86,750	As of 4/9/2025	Total Eligible Participants: 182,480	As of 4/9/2025	TOTAL
Compliant	72,933 (84.1%)	Compliant	164,042 (89.9%)	
Non-Compliant	13,817 (15.9%)	Non-Compliant	18,438 (10.1%)	
Total Eligible Households: 63,824	As of 4/9/2025	Total Eligible Participants: 133,094	As of 4/9/2025	STATE
Compliant	54,443 (85.3%)	Compliant	120,650 (90.6%)	
Non-Compliant	9,381 (14.7%)	Non-Compliant	12,444 (9.4%)	
Total Eligible Households: 22,915	As of 4/9/2025	Total Eligible Participants: 49,388	As of 4/9/2025	PARTNERSHIP
Compliant	18,478 (80.6%)	Compliant	43,393 (87.9%)	
Non-Compliant	4,437 (19.4%)	Non-Compliant	5,995 (12.1%)	

Firefighter Update

- Effective May 1st, 2025, the Partnership plan now includes coverage for an enhanced ultrasound cancer detection screen, specifically for firefighters
 - Firefighters enrolled in the plan will have free access to a comprehensive, full-body scan once every two years
- These screenings are offered by a special vendor, United Diagnostic Services
 - For more information, please visit https://carecompass.ct.gov/ctpartner/medical/

Flyte Program

- The FlyteHealth medical weight management program is available to state employees, retirees, and Partnership Plan members who, in consultation with their medical provider, should determine if using injectable anti-obesity medications with requirements to monitor food intake, activity, and weight is recommended to improve long-term weight management.
- Starting July 1st, 2025, Program participants will be required to pay a \$25 monthly fee, with the opportunity to have 50% reimbursed after one year, if you meet preestablished goals. There will be more communication in the near future.



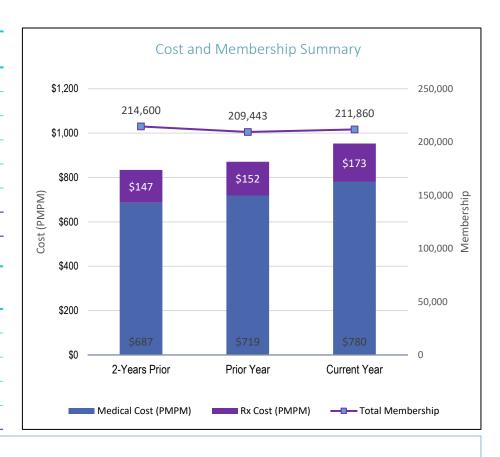
All Plans

Claims Summary¹

	Total Cost (PMPM) % of	Total Cost	Current Trend
Medical	\$780.41	82%	8.6%
Inpatient Facility	\$158.75	17%	1 1.3%
Outpatient Facility	\$305.02	32%	▲ 8.2%
Professional Services	\$294.42	31%	8.0%
Ancillary	\$22.23	2%	1.9%
Pharmacy ²	\$172.79	18%	13.7%
Total Cost	\$953.20		9.5%

Drivers of Trend

Service Category	Current PMPM	Prior PMPM	Change
Prescription Drugs - Brand	\$95.21	\$83.89	\$11.32
Pharmacy - Specialty	\$50.42	\$39.91	\$10.51
Inpatient - Medical	\$59.37	\$51.23	\$8.13
Outpatient - Surgery	\$48.58	\$41.05	\$ 7.53
Inpatient - Surgery	\$96.29	\$89.51	\$ 6.78



- PMPM medical costs have increased 8.6% Year-over-Year ("YoY") and accounted for 82% of total spend.
- PMPM Rx costs have increased 13.7% YoY and accounted for 18% of total spend.
- The second table above illustrates the top 5 drivers of trend. Prescription Drugs Brand was the top driver of spend on a PMPM basis, increasing \$11.32 PMPM over last year.

¹ Reflects paid claims through February 2025. Claims for the current period have been completed using a factor of 0.95

² Pharmacy costs reflect PrudentRx savings. Estimated CY2024 PrudentRx savings is \$66,238,725.



Questions?

Please remain on mute and use the chat function.

The presentation will be posted to the Partnership Site: The CT Partnership Plan 2.0

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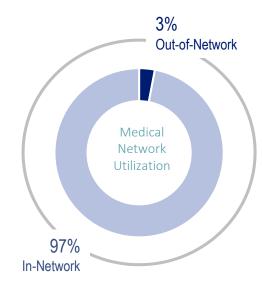
Appendix

- State of CT & Partnership Utilization Dashboard
 - Key Utilization Metrics
 - Disease Prevalence
 - Care Gaps & Compliance Rates
 - High-Cost Claimants

All Plans

Key Utilization Metrics

Category (Utilization per 1,000)	Current Period	Prior Period	% Change
Office Visits	5,098	4,861	4.9%
Preventive Services	4,351	4,486	-3.0%
Inpatient Admissions	77	71	7.5%
Average Cost Per Admission	\$24,879	\$24,017	3.6%
Emergency Room (ER) Visits	205	201	2.0%
Average ER Visit Cost	\$2,809	\$2,820	-0.4%
Urgent Care (UC) Visits	363	382	-5.0%
Average UC Visit Cost	\$235	\$225	4.5%
Rx Scripts	11,863	11,589	2.4%
Average Cost ¹ per Script	\$186	\$157	18.2%



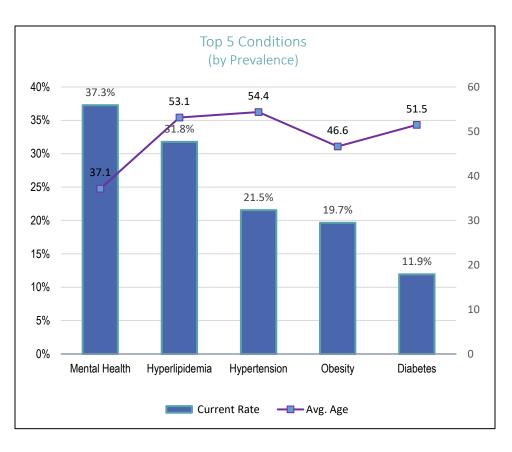
- Office visits per 1,000 increased 4.9% YoY, while preventive services decreased 3.0% YoY.
- Inpatient admissions per 1,000 increased 7.5% YoY, and average cost per admission increased 3.6% YoY.
- ER visits per 1,000 increased 2.0% YoY and the average cost per visit remained relatively stable YoY.
- Urgent care visits per 1,000 decreased 5.0% YoY, while the average cost per visit increased 4.5% YoY.
- Rx scripts per 1,000 increased 2.4% YoY, and unit cost trend increased 18.2% YoY.

¹ Pharmacy costs reflect PrudentRx savings and other direct manufacturer savings (through July 2024).

All Plans

Disease Prevalence (sorted by prevalence)

Chronic Condition	Current Rate	Prior Rate
Mental Health	37.3%	36.3%
Hyperlipidemia	31.8%	30.7%
Hypertension	21.5%	21.5%
Obesity	19.7%	18.7%
Diabetes	11.9%	9.8%
Asthma	7.3%	7.5%
Substance Abuse	4.0%	4.1%
Coronary Artery Disease (CAD)	3.4%	3.0%
Breast Cancer	1.0%	1.0%
Chronic Obstructive Pulmonary Disease (COPD)	0.6%	0.6%
Prostate Cancer	0.6%	0.5%
Congestive Heart Failure (CHF)	0.5%	0.4%
Colorectal Cancer	0.2%	0.2%
Cervical Cancer	0.0%	0.0%



- Mental health remained the State's top disease condition with 37.3% of total members (prevalence) and has increased 1.0 percentage points (pp) YoY.
- Continuing increases in Hyperlipidemia, Obesity, and Diabetes

All Plans

Care Gaps and Compliance Rates

Chronic	Clinical Quality Metrics	Al	l Members	5		Gender D	istribution	Compliance Rate by Gender	
Condition		Population	Current Period	Change (pp)	SHAPE BoB ¹	F	М	F	М
	At least 1 hemoglobin A1C test	25,888	83%	1 .6	85%	60%	40%	82%	85%
Diabetes	Screening for diabetic nephropathy	25,888	60%	▼ 5.6	65%	60%	40%	59%	61%
	Screening for diabetic retinopathy	25,888	50%	▼ 3.7	25%	60%	40%	51%	48%
Hypertension	On anti-hypertensives and serum potassium	30,020	63%	▼ 2.7	63%	42%	58%	63%	63%
Hyperlipidemia	Total cholesterol testing	68,975	79%	▼ 0.7	75%	48%	51%	80%	77%
COPD	Spirometry testing	1,307	36%	▼ 1.4	28%	52%	48%	36%	35%
CAD	Patients currently taking an ACE-Inhibitor or ARB Drug	7,356	39%	▼ 0.8	42%	34%	66%	31%	44%
CAD	Patients currently taking a statin	7,356	81%	- 0.6	72%	34%	66%	70%	86%
	Breast cancer	55,226	67%	▼ 0.1	57%	100%		67%	
Preventive Screening	Cervical cancer	90,315	53%	0.5	46%	100%		53%	
	Colorectal cancer	71,336	52%	▼ 3.4	43%	54%	46%	55%	48%
	Prostate cancer	32,837	69%	▼ 1.6	39%		100%		69%

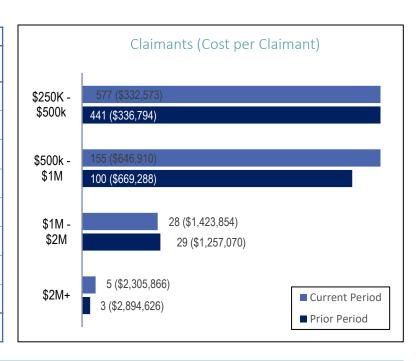
- All preventive screening compliance rates are critically important. Early detection of chronic conditions gives the patient a higher probability of a positive outcome. Expensive treatments in the future can be avoided if these conditions are caught/managed early.
- While most compliance rates are down YoY, the State's compliance rates remained favorable in most categories when compared to the SHAPE BoB.
- The Plan should continue to frequently communicate the value and importance of preventive screenings.

¹ SHAPE Book-of-Business reflects compliance rates for calendar year 2023 Compliance statistics have not been adjusted for risk or severity

All Plans

High-Cost Claimants (Medical & Rx \$250k+)

Catagony	Current	Period	Prior Period		
Category (sorted by Members)	Claimants	Cost per Claimant	Claimants	Cost per Claimant	
Episodic w/ Underlying Health Conditions ¹	207	\$470,137	165	\$484,957	
Non-Screenable Cancer	163	\$495,613	122	\$515,616	
Chronic	123	\$462,667	119	\$418,908	
Rx Dominant	122	\$413,647	67	\$407,245	
Screenable Cancer	95	\$399,983	69	\$407,742	
Mental Health	23	\$373,065	15	\$366,691	
Episodic w/o Underlying Health Conditions ¹	21	\$390,998	12	\$454,562	
Substance Disorder	11	\$299,700	4	\$361,576	
Total High-Cost Members	765	\$449,102	573	\$454,789	



- 765 claimants exceeded the \$250k in combined medical and Rx spend during the current period. Compared to 573 in the prior period.
- Episodic w/ Underlying Health Conditions was the top category with about 27% of high-cost claimants falling into this category. Non-Screenable Cancer was the second highest category.
- Rx dominant, which reflects claimants exceeding the threshold mainly due to prescription drug costs rather than medical costs, ranked third.

¹ Underlying conditions reflect members with the following conditions: Mental Health, Hyperlipidemia, Hypertension, Obesity, Diabetes, Asthma, Substance Abuse, Coronary Artery Disease (CAD), Chronic Obstructive Pulmonary Disease (COPD), and Congestive Heart Failure (CHF).