



Healthcare Policy & Benefit Services Division

Division Memorandum 2021-05

TO THE HEADS OF ALL STATE AGENCIES

**ATTENTION: Personnel and Payroll Officers, Chief Administrative and Fiscal Officers,
Business Managers**

SUBJECT: 2021-2022 Health Insurance Open Enrollment

I. INTRODUCTION

The state employee annual open enrollment period for health insurance will be held from May 3, 2021 through May 28, 2021, for coverage effective July 1, 2021. This memorandum discusses enrollment procedures and how employees can access information about available health plan choices and premiums.

This year we will be hosting six virtual question and answer sessions. These sessions have replaced the traditional open enrollment fairs that took place prior to Covid-19. The dates, times, and links to each of these events can be found on the open enrollment dedicated landing page on Care Compass [Open Enrollment - Care Compass \(ct.gov\)](#).

We will be highlighting the plan features below during open enrollment:

- Care Compass - A centralized benefits hub that provides access to all health benefit materials. It can be accessed at [Home - Care Compass \(ct.gov\)](#).
- Health Navigator – A service to assist all members of our health plan obtain answers to all their benefit questions. Members can speak with a Health Navigator by phone, the web, or online messenger chat.
- New Dental Plan Option: Total Care DHMO Plan - A plan that provides dental services from a defined network of dentists. There's no annual deductible or calendar-year maximum. When you need care, you pay coinsurance based on the service you receive. You must select a primary care dentist; to coordinate your care. Referrals are required for all specialist services.
- Quality-Focused Medical Plan Option – The State BlueCare Prime Plus POS plan. This medical plan option offers access to high-performing doctors and specialists in Connecticut— at lower premiums.

- Networks of Distinction - Under this program, we have identified high-quality, cost-effective doctors and care locations that offer comprehensive care for many common medical tests and procedures, and health conditions. Members can earn incentives for utilizing Networks of Distinction for certain medical procedures or conditions.

During open enrollment, employees may change medical and/or dental plans, add or drop coverage for family members, or enroll if they previously waived coverage. This is the only time employees may enroll in or change a health plan, unless there is a qualifying mid-year event, such as marriage, divorce, legal separation, birth, adoption, legal guardianship or loss of other health insurance coverage by an eligible dependent. The employee is responsible for contacting their agency personnel/payroll representative to file the appropriate forms within 31 days of the event that necessitates a change in enrollment or plan.

II. DISCUSSION

A. Plan Offerings

1. Medical Plans and Benefits – Anthem will be the only carrier administering our medical plans for active employees and non-Medicare retirees. Plan details can be found on [Medical - Care Compass \(ct.gov\)](#).

2. Dental Plans and Benefits – Cigna administers all dental plans. In addition to the existing dental plans which include the Basic Plan, Enhanced Plan, and DHMO, there is a new dental plan option this year, Total Care DHMO plan. Plan details can be found on Care Compass, [Dental - Care Compass \(ct.gov\)](#).

3. Pharmacy Plans and Benefits – The State of Connecticut employee plan utilizes CVS/Caremark’s Standard Formulary. Plan details can be found on Care Compass, [Pharmacy - Care Compass \(ct.gov\)](#).

The 4-tier co-pay structure for acute and maintenance drugs is as follows:

- Tier 1 – Preferred Generic - \$5
- Tier 2 – Non-Preferred Generic - \$10
- Tier 3 – Preferred Brand - \$25
- Tier 4 – Non-Preferred Brand - \$40

Note: There is a mandatory 90-day supply for maintenance drugs through mail order or CVS/Caremark’s Maintenance Drug Network. The first prescription for any medication (30-day supply) may be filled at any participating retail pharmacy. After that, refills for maintenance medications must be filled through a participating State of Connecticut Maintenance Drug Network pharmacy. Reduced co-pays to treat HEP targeted chronic conditions will remain the same at \$0/\$5/\$12.50.

B. Care Compass Website for all Benefit Information

All open enrollment information can be found on Care Compass, [Open Enrollment - Care Compass \(ct.gov\)](#).

Care Compass contains information on the scheduled Q&A sessions, Carrier Spotlight presentations, benefit summaries, information about applicable employee premium shares, and

general guidelines on making health benefit choices. You will also find contact information for Health Navigator, a service to assist members with all benefit related questions.

C. Enrollment Statements

In addition to the Core-CT generated open enrollment form issued by the employees' agency, we have created form CO-744-A as an alternative to the Core-CT form. This is another option for employees who may be struggling to connect with their agency to obtain the Core-CT form. Employees may use either form for open enrollment changes. This form can be found on Care Compass, [Forms and Documents - Care Compass \(ct.gov\)](#).

D. Health Enhancement Program and New Enrollment

Employees who are not currently participating in HEP may elect to do so during open enrollment by completing a Health Enhancement Program Enrollment Form (CO-1314). The form is available on Care Compass. Employees can submit completed forms to their agency Payroll/Human Resources office. Forms must then be forwarded to the Healthcare Analysis Unit of the Office of the State Comptroller by email to osc.cthep@ct.gov or by fax to (860)702-3556. All new HEP enrollments must be completed by May 28, 2021.

Employees who are currently enrolled in HEP but are in a non-compliant status must complete the HEP Application for Reinstatement Form (CO-1320) and submit the required information to Care Management Solutions, Inc. in order to be reinstated into HEP compliance status. The form is available online at www.cthep.com.

HEP monitoring for 2021 has been reinstated. All enrolled members are encouraged to review outstanding preventive requirements and make necessary appointments. Questions should be directed to HEP Customer Service at 877-687-1448.

III. CONCLUSION

Care Compass has a dedicated landing page for the 2021-2022 Open enrollment, [Open Enrollment - Care Compass \(ct.gov\)](#). Personnel or payroll staff members who have questions concerning the Open Enrollment process should contact the Central Benefits Unit in the Comptroller's Healthcare Policy & Benefit Services Division at (860) 702-3535.

Very truly yours,



Thomas Woodruff, Ph.D.
Director

Attachments:

[2021-2022 Employee Health Care Options Planner](#)