

**OFFICE OF THE STATE
COMPTROLLER**

**HEALTHCARE COST
CONTAINMENT COMMITTEE**



**HEALTHCARE POLICY & BENEFIT
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Healthcare Policy & Benefit Services Division

Division Memorandum 2023-02

TO THE HEADS OF ALL STATE AGENCIES

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

SUBJECT: 2023-2024 Health Insurance Open Enrollment

I. INTRODUCTION

The state employee annual open enrollment period for health and dental benefits will be held from May 1, 2023, through May 26, 2023, for coverage effective July 1, 2023. This memorandum discusses enrollment procedures and how employees can access information about health plan choices and premiums.

This year we will be hosting four live event question and answer sessions during open enrollment. The dates, times, and links to each of these events can be found on the open enrollment dedicated landing page on Care Compass: <https://carecompass.ct.gov/benefits-enrollment/>.

There are no benefit changes this year. We will be highlighting the following tools to assist employees with all benefit questions:

- A new health benefits portal – Employees can now find all benefit information in one place, including their HEP status. The new benefits portal is powered by Quantum Health and is accessible from the Care Compass web page <https://carecompass.ct.gov/>. Members will have to register by clicking on “create an account”. Note: This is a new portal with more than just HEP information, so everyone in HEP must register a new account. The health benefits portal can also be accessed through a mobile app MyQHealth. Once registered, a member can access their personal information from carecompass or on the app. The website and MyQHealth mobile app display the same information. Dependents age 18 or older can create their own account and can easily elect to share their HEP information with the employee/plan subscriber.
- Care Coordinators – Effective May 1, 2023, members will be able to contact a Quantum Care Coordinator to assist with all benefits questions including benefit coverage, plan options, portal enrollment issues or password reset needs, and get help finding providers in their current plan.
 - On July 1, 2023, members can contact Quantum’s Care Coordinators with medical claim questions or issues. Anthem will continue to assist members with claim questions through June 30, 2023.

- All eligibility changes such as enrolling in benefits for the first time, qualifying life changes, adding/removing a dependent, demographic changes for employees and covered dependents continue to be completed at the agency level.
- New Medical ID cards – All members will receive a new Medical ID card prior to July 1st with the new customer service number.

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.

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 Care Compass medical page <https://carecompass.ct.gov/state/medical/>.

2. Dental Plans and Benefits – Cigna administers all dental plans, which include the Basic Plan, Enhanced Plan, Total Care DHMO and DHMO. Plan details can be found on the Care Compass dental page <https://carecompass.ct.gov/state/dental/>.

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 page <https://carecompass.ct.gov/state/pharmacy/>.

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

Members can get a \$0 copay for all specialty drugs through the Prudent Rx specialty discount program.

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

The Care Compass website does not require a sign in to view general plan coverage for medical, pharmacy, dental or supplemental benefits offered through the State. For enrolled (Anthem) medical plan participants, there is a benefits portal sign-in button on carecompass.ct.gov for plan members to view their personal benefit plan information, including check HEP status, view claims, use in-network provider and pharmacy search tools, have one-click access to benefit assistance and to their personal dental and pharmacy plan information.

All open enrollment information can be found on Care Compass, under the “Benefit Enrollment” button (<https://carecompass.ct.gov/benefits-enrollment/>).

The Care Compass Benefit Enrollment contains information on the scheduled virtual benefit Q&A sessions, on-line decision tools to help employees choose the best medical and dental plans to match their needs, the 2023-24 Healthcare Options Planner, employee premium shares and printable plan comparison charts and the benefits member services phone number to provide support to employees making health benefit choices.

C. eBenefits/Enrollment Statements

- eBenefits – The Core-CT online enrollment platform is available to all state employees with access to CORE-CT. Employees can use this self-service option to make 2023-2024 open enrollment elections. The Core-CT job aid can be found on the Care Compass Benefits Enrollment page or by using the following link: (<https://carecompass.ct.gov/wp-content/uploads/2023/04/eBenefits-2023-04-18.pdf>).
 - Note: Due to payroll confirm dates on May 11 and May 25, CORE-CT access will be blocked. Please advise employees to make eBenefit changes in CORE, accordingly.

Employees may also use the Core-CT generated open enrollment form.

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 (<https://carecompass.ct.gov/forms/>). Employees can submit completed forms to their agency benefit specialist/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 26, 2023.

New!! Quantum Health is now administering the Health Enhancement Program. All compliance questions should be directed to HEP Customer Service at 833-740-3258 or through the secure messaging function in the member's benefit portal.

III. CONCLUSION

Care Compass has a dedicated landing page for the 2023-2024 Open enrollment (<https://carecompass.ct.gov/benefits-enrollment/>). 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.

Sincerely,



Joshua Wojcik
Director

Attachments:
2023-2024 Employee Health Care Options Planner