

# **Access Health CT – Board of Directors**



# **Board Agenda**

A. Call to Order and Introductions

B. Public Comment (please submit to <u>Marcin.Olechowski@ct.gov</u> by 4 p.m. on April 15)

- C. Vote
  - Review and Approval of Minutes
- D. CEO Report
- E. Finance
- FY 2020 3rd Quarter Budget Report Operating -(Vote)
- FY 2020 3rd Quarter Capital Improvement Plan --Update
- FY 2021 Proposed Budget Operating (Vote)

- F. Qualified Health Plan Certification Requirements for 2021 Plan Year (Votes)
  - Recommended Standard Plans
  - Recommended Maximum Out-Of-Pocket (MOOP) Contingency
- G. AHCT COVID-19 Response Update
- H. Future Agenda Items
  - Back to Work Return Schedule
  - FY2020 Audit
  - Open Enrollment 8 Preparedness
  - State-Based Marketplace Annual Reporting
    Tool
- . Adjournment



# **Public Comment**





### Review and Approval of Minutes (\*February 20, 2020 Regular Meeting Minutes)



CEO Report James Michel



# Connecticut Health Insurance Exchange Board of Directors

### Fiscal Year 2020 Update

<sup>&</sup> Fiscal Year 2021 Proposed

# Operating & Capital Improvements Budget

April 16, 2020



# Fiscal Year 2020 Update

As of 3<sup>rd</sup> Quarter (March 31, 2020)

-FY 2020 Budget Summary	Page 8
-FY 2020 Budget vs Actuals through March 31, 2020	Page 9
-FY 2020 Projected Year-End Budget	Page 10
-Projected Fiscal 2020 Year-End Reserve Fund Balance	Page 11



### **FY 2020 Budget Summary** 3<sup>rd</sup> Quarter Budget Report (as March 31, 2020)

	Operating Budget - 3rd Quarter Fiscal Year-to-Date					
	Budget	Actuals	Variance			
AHCT	\$ 24,544,884	\$ 21,713,279	\$ (2,831,605)			
DSS Shared Cost	14,946,433	13,593,495	(1,352,937)			
Total	\$ 39,491,317	\$ 35,306,774	\$ (4,184,542)			

		Operating Budget - FY 2020 Projected Year-End						
	FY	2020 Adopted Budget			2020 Projected ar End Budget		Variance	
АНСТ	\$	33,643,924		\$	33,643,924	\$	0	
DSS Shared Cost		20,344,270			19,990,688		(353,583)	
Total	\$	53,988,194		\$	53,634,612	\$	(353,582)	



#### **FY 2020 Budget vs Actuals - Through March 31, 2020** (3<sup>rd</sup> Quarter Budget Report)

	OPE	RATING BUDG	ET -	3rd Quarter F	isca	l Year-to-Date	
		Budget		Actuals		Variance	
Revenues							-
Marketplace Assessments		25,325,578	\$	25,432,904	\$	107,326	Adjustment in Carrier Premiums
Interest Income		355,710		347,692		(8,018)	Lowered Interest Rates
Total Revenue	\$	25,681,288	\$	25,780,596	\$	99,308	
Expenses							
Salaries	\$	5,545,405	\$	5,447,242	\$	(98,163)	Vacancy Savings
Fringe Benefits		2,171,054		2,134,093		(36,961)	Vacancy Savings
Temporary Staffing		602,512		453,392		(149,120)	
Contractual		11,040,083		10,061,184		(978,899)	Timing of Projects and invoicing
Equipment and Maintenance		2,031,450		1,622,025		(409,425)	Timing of invoicing
IT Enhancements		2,377,699		1,345,436		(1,032,263)	Timing of Projects
Supplies		18,025		14,713		(3,312)	
Travel		82,462		33,995		(48,467)	Lower travel expenses due to COVID-19
Other Administrative		676,194		601,199		(74,995)	Lower staff development and timing
Total Operating Expenses	\$	24,544,884	\$	21,713,279	\$	(2,831,605)	-
Costs Shared with DSS		14,946,433		13,593,495		(1,352,937)	
AHCT and DSS Total Expenses	\$	39,491,317	\$	35,306,774	\$	(4,184,542)	



# FY 2020 Projected Year-End Budget

	FY 2020 Adopted	Pro	FY 2020 Djected Year			
	Budget	E	nd Budget	Va	riance	
Revenue		-				
Investment Income	\$ 359,924	\$	369,538	\$	9,614	Lower interest rate
Marketplace Assessments	33,284,000		34,202,729	ç	918,729	Adjustments in Carrier Premiums
Total Revenue	\$ 33,643,924	\$	34,572,267	\$ <u>9</u>	28,343	
Budgeted Expenses						
Salaries	\$7,829,218	\$	7,431,135	\$(3	398,083)	Variance due to timing of filling vacancies
Fringe Benefits	2,866,843		2,867,840		997	
Temporary Staffing	540,211		629,356		89,145	Temporary staff to augment vacant positions
Contractual	13,163,128		14,088,102	ę	924,974	Reclassification of expenses to support SHOP Marketing
Equipment and Maintenance	2,934,268		2,582,716	(3	351,552)	Improved Software Maintenance Contract Management
IT Enhancements	5,133,941		4,920,763	(2	213,178)	Reduction to support SHOP Marketing Initiative
Supplies	21,482		21,031		(451)	
Travel	124,383		62,966		(61,417)	Reduction in Travel due to COVID-19
Other Administrative	1,030,450		1,040,015		9,565	Consumer Breach & COVID-19 Cleaning Costs
Total Operating Expenses	\$ 33,643,924	\$	33,643,924	\$	0	
Costs Shared with DSS	\$ 20,344,270	\$	19,990,688	(3	353,583)	
AHCT and DSS Total Expenses	\$ 53,988,194	\$	19,990,688	\$	0	



AHCT projected fiscal 2020 year-end reserve is expected to be \$22.5 million, an increase of \$900k from prior year as a result of higher than expected assessment collections.

		Months of	
Projected Year-End Reserves as of March 31, 2020	<u>Amount</u>	<b>Operating Funding</b>	
Unrestricted:	21,613,046	7.4	
Add: Projected FY2020 increase in Revenue:	928,343		
Projection at June 30, 2020	\$ 22,541,389	7.7	



# FY 2020 – 3rd Quarter Projects & Capital Improvement Plan -- Update



# FY 2020 – 3rd Quarter Projects & Capital Improvement Plan - Update

#### Projects Funded from Operating Budget-Carry-forward Projects from FY2019 to FY2020

- Three (3) Projects were initiated and funded in FY 2019 but not completed by the end of the fiscal year are still on going in fiscal year 2020.
- The \$2.719 million carry-forward to FY 2020 remains on budget and majority of the projects are expected to be completed by end of FY2020.

#### Projects (CIP-R) Funded by Reserve

- Two (2) FY2019 Projects are currently on hold pending Assessment with DSS.
- FY2020 Project a draft Report has been produced on February 28, 2020 and shared with Board of Directors, Legislature and Stakeholders.



Fiscal Year 2021 Proposed Budget

# Focused on 3 Strategic Initiatives IT Investment © Cybersecurity © Health Disparities

## **To Support Our Mission**

To increase the number of insured residents, improve health care quality, lower costs and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health plan and provider that give them the best value.



Fiscal Year 2021 Proposed

# **Operating Budget**

-FY 2021 Proposed Budget Summary -FY 2021 Proposed Operating Budget Page 16 Page 17



### FY 2021 Proposed Budget Summary

	Operating Budget - FY2021 Projected					
	FY 2020 Adopted Budget	FY2021 Proposed Budget	Variance			
AHCT	\$33,643,924	\$ 35,141,988	\$ 1,498,064			
DSS Shared Cost	20,344,270	19,990,688	(353,583)			
Total	\$ 53,988,194	\$ 55,132,676	\$ 1,144,482			



# FY 2021 Proposed Operating Budget

	FY 2020 Adopted Budget	FY 2021 Proposed Budget	Variance	
Revenue				
Investment Income	\$ 359,924	\$ 62,685	\$ (297,239)	Expected earnings on reserve funds
Marketplace Assessments	33,284,000	35,079,303	1,795,303	Marketplace Assessment rate unchanged, but premium cost increased
Total Revenue	\$ 33,643,924	\$ 35,141,988	\$ 1,498,064	
Budgeted Expenses				
Salaries	\$7,829,218	\$ 8,120,513	\$ 291,295	2 additional staff for IT Security & 3% merit increase
Fringe Benefits	2,866,843	3,416,751	549,908	9% increase in employee medical cost
Temporary Staffing	540,211	682,672	142,461	2 IT temp staff for IT security
Contractual	13,163,128	14,429,493	1,266,365	\$460k Enterprise Project Management Office & \$800k SHOP
Equipment and Maintenance	2,934,268	3,745,577	811,309	\$350k for All Payer Claims Database (APCD) & IT maintenance contracts
IT Enhancements	5,133,941	3,440,271	(1,693,670)	Reduction to support Contractual initiatives & APCD
Supplies	21,482	22,720	1,238	
Travel	124,383	125,216	833	
Other Administrative	1,030,450	1,158,775	128,325	Wellness Program & Staff Development
Total Operating Expenses	\$ 33,643,924	\$ 35,141,988	\$ 1,498,064	
Costs Shared with DSS	\$ 20,344,270	\$ 19,990,688	\$ (353,583)	Improved software maintenance contract management
AHCT and DSS Total Expenses	\$ 53,988,194	\$ 55,132,676	\$ 1,144,482	



# Certification Requirements: Plan Year 2021



# Health Plan Benefits and Qualifications Advisory Committee: 2021 Plan Year

- Certification Requirements Reviewed
  - Standardized Plan Development Individual Market Medical
    - Actuarial Value Compliance/Validation
    - Resulting Cost Share Modifications
    - Mental Health Parity Issuer Testing, Validation, Compliance
  - Other topics impacted by new federal / state regulations and guidance and/or suggested by AHCT constituents including customer input
    - Assessment of V-BID X Report: "Creating a Value-Based Insurance Design Plan for the Exchange Market"
    - Evaluation of the standard Bronze HSA plan based on 2019 IRS guidance: "Additional Preventive Care Benefits Permitted to be Provided by a High Deductible Health Plan Under § 223"
    - Proposed state legislation related to diabetes and possible impact on standardized plans
    - Review of potential reinsurance program and the premium impact for 2020





### Access Health CT 2021 Individual Market Standard Plan Designs

PRESENTED BY Julie Andrews, FSA, MAAA – Sr. Consulting Actuary

April 16, 2020



#### 2021 Plan Design Review

- Summary of Plan Actuarial Value Calculator ("AVC") Results
- Proposed Plan Designs
  - Gold
  - Silver Copay and Cost-Sharing Reduction (CSR) Variations
  - Bronze Non-Health Savings Accounts (HSA)
  - Bronze HSA

### **Regulation Changes for 2021**

- <u>Proposed</u> annual limitation on cost sharing was increased to \$8,550 (from \$8,150 in 2020)
- CSR (Cost Sharing Reduction) Variations <u>proposed</u> annual limitation on cost sharing. The 2021 proposed limits are:
  - 100-150% \*\*FPL: \$2,850/\$5,700 (single/family)
  - 150%-200% \*\*FPL: \$2,850/\$5,700 (single/family)
  - 200%-250% \*\*FPL: \$6,800/\$13,600 (single/family)
- Federal HDHP minimum deductible and Maximum Out of Pocket (MOOP) limits are not yet released for 2021.
  - For 2020 the single deductible is set at a minimum of \$1,400 and the MOOP maximum limit is \$6,900.
- The deductible and MOOP limits shown are for individuals. The family limits are 2x the individual limit for all plans except where noted.

### Changes to the Federal AVC for 2021

- Data underlying the calculator was updated from prior year
  - Now based on 2017 individual and small group data trended to 2021
    - Medical Trend: 3.25% (2017-2018) and 5.4% Annually (2018-2021)
    - Pharmacy Trend: 9.0% (2017-2018) and 8.7% Annually (2018-2021)
  - There were some changes to the continuance table spending buckets that may impact the value of changes in the MOOP.
    - Additional breakouts between \$6,500 and \$15,000 in annual spend
    - Capped claims at \$1 million

#### Notes and Caveats

- The cost sharing shown on the following slides represents costs for innetwork services only.
- The deductible and MOOP limits shown are for individuals. The family limits are 2x the individual limit for all plans except where noted.
- Preventive care is covered at no cost to the member for all plans.
- Mental Health cost sharing is the same as Primary Care for all plans.
- Silver loading for defunded cost-sharing reduction plans will persist in 2021.
- All plans include 'embedded' deductible approach (not aggregate)
- All benefit categories shown in the exhibits are included in the AVC except Chiropractic and Urgent Care

### Notes and Caveats

• Other services not included in the AVC, but will be specified cost sharing for each standardized plan

In-Network Services					
Other Services					
Mammography Ultrasound					
Chiropractic Services (up to 20 visits per calendar year)					
Diabetic Supplies & Equipment					
Durable Medical Equipment					
Home Health Care Services (up to 100 visits per calendar year)					
Ambulance Services					
Urgent Care Center or Facility					
Pediatric Dental Care (for children under age 19)					
Diagnostic & Preventive					
Basic Services					
Major Services					
Orthodontia Services (medically necessary)					
Pediatric Vision Care (for children under age 19)					
Out-of-Network Services					
All services, deductible and maximum out-of-pocket					

### Summary of 2021 AV Changes

Individual Market	Gold	Silver	Bronze	Bronze HSA
Permissible AV Range	76.0%-82.0%	66.0%-72.0%	56.0%-65.0%	56.0%-65.0%
2020 AV (Final) <sup>1</sup>	81.96%	71.97%	64.98%	63.73%
2021 AV (Final)	81.60% - 82.87% <sup>3</sup>	70.69% - 71.83%	66.20% - 66.81%	66.24% - 66.24%

1 Wakely AV Calculation

Individual Market - CSR Plan Variations: Silver	73% AV CSR	87% AV CSR	94% AV CSR
Permissible AV Range	72.0%-74.0%	86.0%-88.0%	93.0%-95.0%
2020 AV (Final) <sup>1</sup>	73.98%	87.88%	94.98%
2021 AV (Final)	72.83% - 73.85%	87.41% - 88.42% <sup>3</sup>	94.71% - 94.96%

1 Wakely AV Calculation

2 73.0% CSR Silver must have a differential of 2.0%+ with Standard Silver

3 The Gold and Silver 87% CSR plans passed by all issuers, but not Wakely.

# 2020 Plan Design Overview with 2021 Plan Proposals

The 2021 plan proposals <u>have</u> been reviewed for AVC or Mental Health Parity compliance by Carriers

# µJakely

### Summary of 2021 Gold Plan AV

Benefit Category	2020/2021 Individual Market Gold Plan
Medical Deductible	\$1,300 (INN)/\$3,000 (OON)
Rx Deductible	\$50 (INN)/\$350 (OON)
Coinsurance	30%
Out-of-pocket Maximum	\$5,250 (INN)/\$10,500 (OON)
Primary Care	\$20
Specialist Care	\$40
Urgent Care	\$50
Emergency Room	\$400
Inpatient Hospital	\$500 per day (after ded., \$1,000 max. per admission)
Outpatient Hospital	\$300@ASC/\$500 otherwise (after ded.)
Advanced Radiology (CT/PET Scan, MRI)	\$65
Non-Advanced Radiology (X-ray, Diagnostic)	\$40 (after ded.)
Laboratory Services	\$10 (after ded.)
Rehabilitative & Habilitative Therapy (Physical, Speech, Occupational) Combined 40 visit calendar year maximum, separate for each type	\$20
Chiropractic Care 20 visit calendar maximum	\$40
All Other Medical	30%
Generic / Preferred Brand / Non-Preferred Brand / Specialty Rx	\$5 / \$35 / \$60 / 20% (spec. after ded., \$100 max per spec. script)
2020 AVC Results 2021 AVC Results	81.96% 81.60% - 82.87%

### Summary of 2021 Silver Plan AV

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Benefit Category	2020/2021 Individual Market Silver Plan	2020/2021 Individual Market Silver Plan (73%)	2020/2021 Individual Market Silver Plan (87%)	2020/2021 Individual Market Silver Plan (94%)
Medical Deductible	\$4,300 (INN)/ \$8,600 (OON)	\$3,950	\$650	\$0
Rx Deductible	\$250 (INN)/ \$500 (OON)	\$250	\$50	\$0
Coinsurance	40%	40%	40%	40%
Out-of-pocket Maximum	\$8,150 (INN)/ \$16,300 (OON)	\$6,500	\$2,500	\$900
Primary Care	\$40	\$40	\$20	\$10
Specialist Care	\$60	\$60	\$45	\$30
Urgent Care	\$75	\$75	\$35	\$25
Emergency Room	\$450 (after ded.)	\$450 (after ded.)	\$150 (after ded.)	\$50
Inpatient Hospital	\$500 per day (after ded., \$2,000 max. per admission)	(noissimbe	(noissimbe	admission)
Outpatient Hospital	\$300@ASC/\$500 otherwise (after ded.)	\$300@ASC/\$500 otherwise (after ded.)	\$60@ASC/\$100 otherwise (after ded.)	\$45@ASC/\$75 otherwise
Advanced Radiology (CT/PET Scan, MRI)	\$75	\$75	\$60	\$50
Non-Advanced Radiology (X-ray, Diagnostic)	\$40 (after ded.)	\$40 (after ded.)	\$30 (after ded.)	\$25
Laboratory Services	\$10 (after ded.)	\$10 (after ded.)	\$10 (after ded.)	\$10
Rehabilitative & Habilitative Therapy (Physical, Speech, Occupational) Combined 40 visit calendar year maximum, separate for each type	\$30	\$30	\$20	\$20
Chiropractic Care (20 visit calendar maximum)	\$50	\$50	\$35	\$30
All Other Medical	40%	40%	40%	40%
Generic / Preferred Brand / Non-Preferred Brand / Specialty Rx	\$10 / \$45 / \$70 / 20% (all but generic after ded., \$200 max per spec. script)	\$10 / \$45 / \$70 / 20% (all	\$10 / \$25 / \$40 / 20% (non- preferred brand and spec. after ded., \$60 max per spec. script)	
2020 AVC Results	71.97%	73.98%	87.88%	94.98%
2021 AVC Results	70.69% - 71.83%	72.83% - 73.85%	87.41% - 88.42%	94.71% - 94.96%

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### Summary of 2021 Bronze Non-HSA Plan AV

Benefit Category	2020 Individual Market Bronze Non-HSA Plan	2021 Bronze Non-HSA Sample Plan 2	
Combined Medical & Rx Deductible	\$6,200 (INN)/\$12,400 (OON)	\$6,550 (INN)/\$13,100 (OON)	
Coinsurance	40%	40%	
Out-of-pocket Maximum	\$8,150 (INN)/\$16,300 (OON)	\$8,550 (INN)/\$17,100 (OON)	
Primary Care	\$40	\$50	
Specialist Care	\$60 (after ded.)	\$70 (after ded.)	
Urgent Care	\$75	\$75	
Emergency Room	\$450 (after ded.)	\$450 (after ded.)	
Inpatient Hospital	\$500 per day (after ded., \$1,000 max. per admission)	\$500 per day (after ded., \$1,000 max. per admission)	
Outpatient Hospital	\$300@ASC/\$500 otherwise (after ded.)	\$300@ASC/\$500 otherwise (after ded.)	
Advanced Radiology (CT/PET Scan, MRI)	\$75 (after ded.)	\$75 (after ded.)	
Non-Advanced Radiology (X-ray, Diagnostic)	\$40 (after ded.)	\$40 (after ded.)	
Laboratory Services	\$10 (after ded.)	\$10 (after ded.)	
Rehabilitative & Habilitative Therapy (Physical, Speech, Occupational) Combined 40 visit calendar year maximum, separate for each type	\$30 (after ded.)	\$30 (after ded.)	
Chiropractic Care (20 visit calendar maximum)	\$50 (after ded.)	\$50 (after ded.)	
All Other Medical	40% (after ded.)	40% (after ded.)	
Generic / Preferred Brand / Non-Preferred Brand / Specialty Rx	\$10 / 50% / 50% / 50% (all but generic after ded., \$500 max per spec. script)	\$20 / 50% / 50% / 50% (all but generic after ded., \$500 max per spec. script)	
2020 AVC Results 2021 AVC Results	64.98% 66.81%	NA 64.26% - 64.90%	

### Summary of 2021 Bronze HSA Plan AV

Benefit Category	2020 Individual Market Bronze HSA Plan	2021 Bronze HSA Sample Plan 1	
Combined Medical & Rx Deductible	\$5,685 (INN)/\$9,200 (OON)	\$6,350 (INN)/\$12,700 (OON)	
Coinsurance	10%	20%	
Out-of-pocket Maximum	\$6,550 (INN)/\$12,900 (OON)	\$6,900 (INN)/\$13,800 (OON)	
Primary Care	10% (after ded.)	20% (after ded.)	
Specialist Care	10% (after ded.)	20% (after ded.)	
Urgent Care	10% (after ded.)	20% (after ded.)	
Emergency Room	10% (after ded.)	20% (after ded.)	
Inpatient Hospital	10% (after ded.)	20% (after ded.)	
Outpatient Hospital	10% (after ded.)	20% (after ded.)	
Advanced Radiology (CT/PET Scan, MRI)	10% (after ded.)	20% (after ded.)	
Non-Advanced Radiology (X-ray, Diagnostic)	10% (after ded.)	20% (after ded.)	
Laboratory Services	10% (after ded.)	20% (after ded.)	
Rehabilitative & Habilitative Therapy (Physical, Speech, Occupational) Combined 40 visit calendar year maximum, separate for each type	10% (after ded.)	20% (after ded.)	
Chiropractic Care (20 visit calendar maximum)	10% (after ded.)	20% (after ded.)	
All Other Medical	10% (after ded.)	20% (after ded.)	
Generic / Preferred Brand / Non-Preferred Brand / Specialty Rx	10% / 15% / 25% / 30% (all after ded., \$500 max per spec. script)	20% / 25% / 30% / 30% (all after ded., \$500 max per spec. script)	
2020 AVC Results	63.73%	NA	
2021 AVC Results	66.24%	64.98%	

**Makely** 

**Further Discussion** 







# HPBQ AC Recommendation to AHCT Board of Directors

- Recommend approval for cost sharing adjustments as presented by Wakely Consulting for the two AHCT standardized plans that will no longer be compliant for 2021 due to changes in federal Actuarial Value Calculator (AVC) tool
  - Bronze (Non-HSA) Plan: Sample Plan 2
  - Bronze HSA Compatible Plan: Sample Plan 1



# HPBQ AC Recommendation to AHCT Board of Directors

- Recommend approval for a contingency plan if forthcoming federal guidance pertaining to maximum out-of-pocket (MOOP) limits results in any of the AHCT standardized plans for 2021 no longer being compliant with Actuarial Value (AV), Mental Health Parity (MHP) and/or IRS guidance on High Deductible Health Plans (HDHPs)
  - Permit the AHCT PM team & its Actuarial Consultant to work directly with the carriers to modify the standardized plans and make necessary, minimal changes without reviewing the results with the HPBQ AC and/or AHCT Board of Directors
  - Standardized plans that could be impacted include: Bronze HSA, Bronze (Non-HSA) and Silver including the 73%, 87% and 94% Cost Sharing Reduction (CSR) plans

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 Should the MOOP change be greater than a \$300 decrease, this contingency approach could not apply

# Appendix



# Plan Mix: Number of Plans Required / Permitted per Issuer

		SHOP	
Metal Level	Standardized Plans	Non-Standard Plans	Total
Platinum	N/A	2	4 (Optional)
Gold	1	3	Min 1 – Max 6
Silver	1	0	Min 2 – Max 6
Bronze	2	3	Min 2 – Max 4
Catastrophic	N/A	1	N/A
TOTAL	4 Required	9 Optional	5 Required / 15 Optional
Maximum	13		20 access near

# AHCT COVID-19 Response Update



# **COVID-19 RESPONSE**

- New Special Enrollment Period for the Uninsured
- Hold Terminations for Failure to Verify
- Provisional Enrollments for Qualifying Life Event (QLE) Special Enrollment Periods (SEPs)
- Medicaid/CHIP Reinstatements/Qualified Health Plan (QHP) Enrollments



# **COVID-19 RESPONSE**

### **Call Center Staffing**

- Total number of agents 161
- Currently Work From Home (WFH) agents & leads 125
- Scheduled to be deployed for WFH 25
- Remaining staff chose to work in the center 11



# **COVID-19 RESPONSE**

		Benchmark		Benchmark
	3/19-4/2/2020	to Last Year	4/3-4/10/2020	to Last Year
QHP Enrollments	3,358	1,620	1,067	979
	4 400		010	
Uninsured SEP Enrollments	1,498		319	
Qualifying Life Event Enrollments	1,860		748	
	.,			
QHP Attritions	1,845	2,204	1,763	1,104
	44.057	44 500	6.640	40.240
HUSKY Enrollments	14,257	11,509	6,618	10,310
HUSKY Attrition	1,411	15,210	857	6,025
Call Center Volume	43,114	37,727	18,687	19,908

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# **Future Agenda Items**



# Adjournment

