



**Annual Report to the Governor, General
Assembly, and Auditors of Public Accounts**

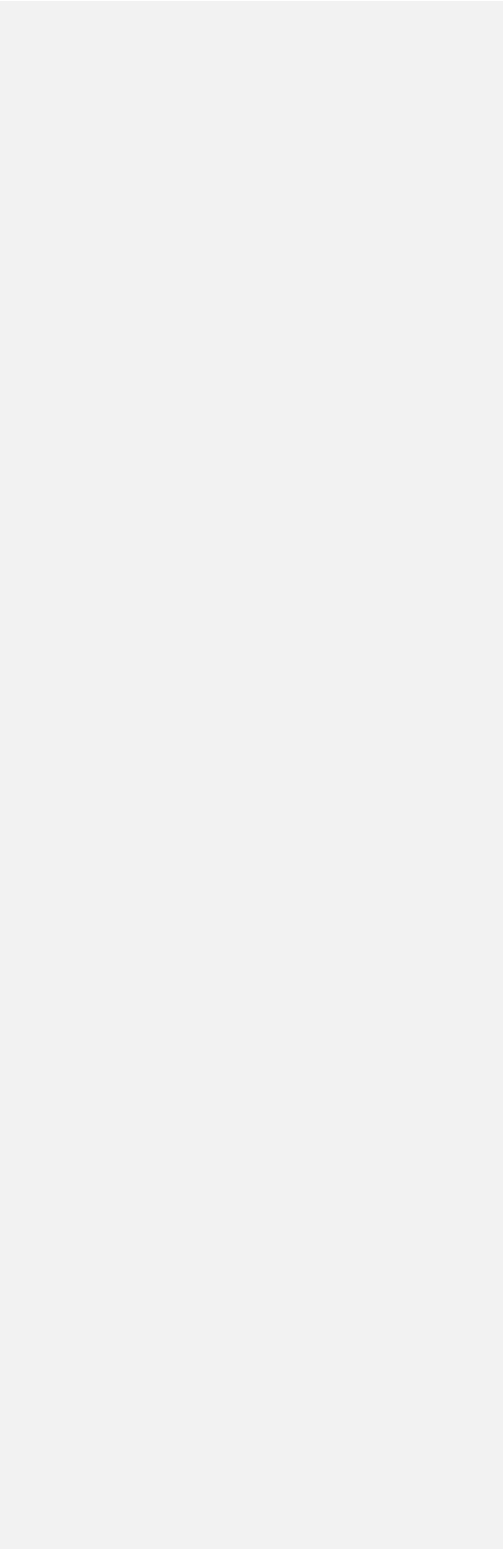
Fiscal Year 2025

AccessHealthCT.com

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1. Board of Directors

GOVERNOR'S APPOINTEES

Charles H. Klippel, Chair

Former Senior Vice-President and Deputy General Counsel, CVS Health, Inc.

Deidre Gifford

Former Commissioner, Office of Health Strategy

LEGISLATIVE LEADERSHIP APPOINTEES

Paul Philpott, Vice Chair

Principal Consultant, Quo Vadis Advisors LLC

Grant A. Ritter

Senior Scientist, Schneider Institutes for Health Policy

Dina Berlyn

Counsel to the Connecticut State Senate President Pro Tempore, Senate Democrats

Steven Hernández

Executive Director, ConnCAN

Matthew Brokman

Chief of Staff, Office of the Governor

Thomas McNeill

Attorney

EX-OFFICIO MEMBERS

Andrea Barton Reeves

Commissioner, Department of Social Services

Sean King (Acting) (through 9/30/24)

State Healthcare Advocate, Office of the Healthcare Advocate

Kathleen Holt (Acting) (as of 10/1/24)

State Healthcare Advocate, Office of the Healthcare Advocate

Jeffrey Beckham

Claudio Gualtieri (Designee)

Secretary, Office of Policy and Management

EX-OFFICIO MEMBERS — NON-VOTING

Andrew Mais

Paul Lombardo (Designee)

Commissioner, Connecticut Insurance Department

Manisha Juthani

Commissioner, Department of Public Health

Nancy Navarretta

Carleen Zambetti (Designee)

Commissioner, Department of Mental Health and Addiction Services

As of June 30, 2025

2. Mission, Vision, Strategy, and Values

Created as a quasi-public agency in 2011 as a result of the Patient Protection and Affordable Care Act (ACA), the Connecticut Health Insurance Exchange d/b/a Access Health CT (Exchange, Access Health CT or AHCT) successfully developed and implemented the State-based Health Insurance Marketplace for the State of Connecticut and remains committed to serving our state's citizens. Access Health CT's efforts have reduced the uninsured rate across Connecticut to all-time lows, with significant impact on minority and hard-to-reach communities and the young. Access Health CT continues to operate a sustainable marketplace.

Our Mission: Our mission is to decrease the number of uninsured residents, improve the quality of healthcare, and reduce health disparities through an innovative, competitive marketplace that empowers consumers to choose the health coverage that gives them the best value.

Our Vision: Our vision is to provide Connecticut residents with access to the most equitable, simple, and affordable health insurance products to foster healthier communities.

Our Strategy: Access Health CT's strategic goals focus on providing access to quality insurance choices for individuals and small businesses, delivering a positive customer experience, improving quality, cost transparency, and reducing disparities in healthcare, which will result in healthier people, healthier communities, and a healthier Connecticut.

Our Values: At Access Health CT, it is with our customers and our employees in mind that we seek to promote these collective values and to live by these behaviors. Our culture of acceptance welcomes and values everyone. We challenge the status quo to find new ways to grow and improve our community, our company, and ourselves. Our people take pride in the service we provide and in the spirit of the common good that we share.

Values incorporate the organization's mission and vision and define behaviors that are consistent with them. Our values emerged from consultant-led sessions in 2018 with a committee of 20 employees. Workshops, focus groups, and interviews with staff were all part of the process. Six values were selected: authenticity, integrity, excellence, ownership, one team, and passion. A 15-person Employee Values Committee was formed and began integrating values into operating and recruiting processes. This process is employee-led, not directed by management, and continues to support the organization, its employees, and the residents of Connecticut.



3. Activities and Projects: Fiscal Year 2025 in Review

Enrollment

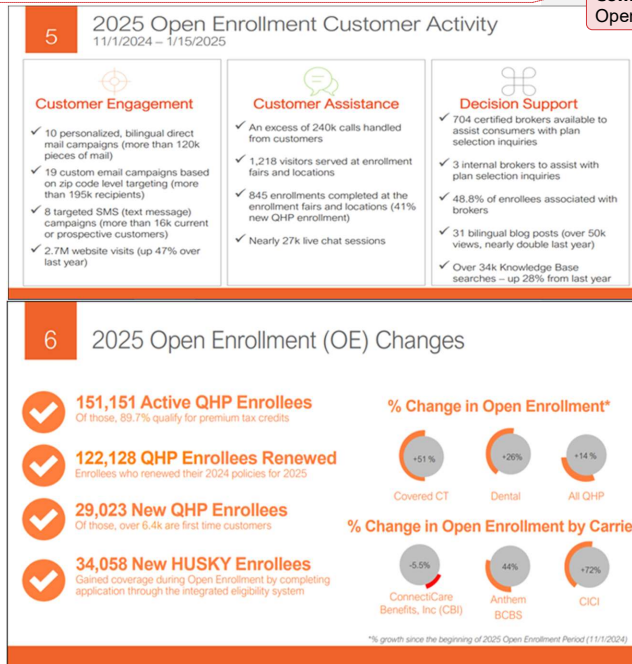
For Plan Year 2025, three carriers participated in the Individual Market: Anthem, ConnectiCare Benefits, Inc., and ConnectiCare Insurance Company, Inc. (CiCi). Anthem participated in the Small Group Market. Anthem and ConnectiCare Insurance Company, Inc. offered both Medical and Stand-Alone Dental Plans (SADP) to the Individual Market, while ConnectiCare Benefits, Inc. offered Medicaid only.

Individual Enrollment for Plan Year 2025

Open Enrollment (OE) for Plan Year 2025 took place from November 1, 2024, through January 15, 2025. Access Health CT's detailed 2025 Open Enrollment Report is available at Agency.AccessHealthCT.com > About Us > Reports & Audits > Presentations > 2025 Open Enrollment Summary.

Highlights from 2025 Open Enrollment

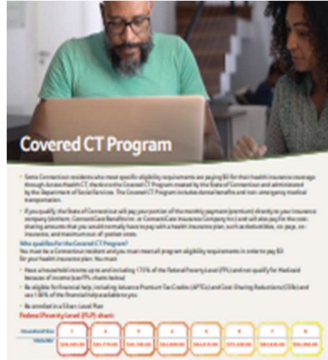
- OE for plan year 2025 ended with **151,151** customers enrolled in Qualified Health Plans (QHPs), a substantial increase from 129,000 in 2024.
- **90%** of enrollees qualified for Premium Tax Credits (PTCs).
- **29,023** enrollees were not enrolled prior to OE, and **22%** were first time customers. Newly acquired QHP customers were nearly four years younger than retained customers on average.
- **122,128** enrollees renewed their coverage.
- Non-subsidized enrollees tended to be younger and have larger covered households.



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- Overall, **48.8%** of customers enrolled with Broker assistance during OE for 2025. Nearly **2,000** customers received assistance from a Broker for the first time.

- **93.3%** of applicants indicated English is their preferred language or did not specify a preferred language. Of those who specified a language other than English, **83.8%** selected Spanish.
- **17,757** customers enrolled in a SADP, a 26% increase over 2024 enrollment.
- **8,549** enrollees were not receiving Dental coverage from AHCT prior to OE; **15%** of these were first time customers.
- **30%** of SADP enrollees were over the age of 54.
- **79%** of enrollees answered optional questions on race and ethnicity, a 2.6% increase from 2024.



Covered CT Enrollment

At the end of Open Enrollment for Plan Year 2025, 41,165 Connecticut residents were enrolled in the Covered CT Program, which provides them with no-cost healthcare, paid for by the State of Connecticut.

This represents a 50% increase in enrollment in the past year. Access Health CT continues to promote the Covered CT Program, and as of June 20, 2025, 48,130 residents were enrolled in Covered CT.

Legislation creating Covered CT was adopted in June 2021 with an effective date of July 1, 2021.

Accolades

Access Health CT is proud to have been named a “Best Places to Work” employer by the Hartford Business Journal for 2020, 2021, 2022, 2023, 2024, and 2025.



AHCT’s Human Resources Manager, Jessica Briggs, won a bronze Stevie Award in the Onboarding Professional of the Year category in September 2024.

Governance and Management Accomplishments

Board Membership

Charles H. Klippel, appointed by Governor Ned Lamont, has served as chair of the Board of Directors since April 15, 2021. Additionally, Board member Paul Philpott, appointed by Senate Minority Leader, Senator Kevin Kelly, and reappointed by subsequent Minority Leaders, has served as Vice-Chair of the Board since January 21, 2021.

Access Health CT assists the Office of the Governor and other appointing authorities with the search for and appointment of new directors when vacancies arise and as board members’ terms of service end.

Audits

Access Health CT completed the Fiscal Year (FY) 2025 independent financial and programmatic audits by Whittlesey and the 2024 annual State-based Marketplace Annual Reporting Tool (SMART) audit required by the Affordable Care Act. The FY 2025 Audited Financial Statements and Programmatic Audit Report, as well as the SMART audit were each clean audits free of material weaknesses and significant deficiencies.

Enterprise Project Management Office (EPMO)

EPMO successfully managed three major integrated eligibility and enrollment system releases to completion, along with four other major projects:

- The fourth year of the Broker Academy (completion in November 2025), which provides training for selected students to become licensed Brokers and covers the costs of their licensing exam. The Program aims to help reduce health disparities and uninsured rates by embedding a network of trusted healthcare coverage advisors in Connecticut's traditionally hardest-to-reach communities.
- The Health Insurance Exchange (HIX) Data Assessment (completion in August 2025), which aimed to identify a future state of data architecture to be scalable and align with our business needs as we look ahead to modernizing our integrated eligibility and enrollment system.
- Call Center Interactive Voice Response (IVR) Enhancements, Phase 1 (completion in July 2025) to enhance the IVR system in our Call Center to improve customer experience, streamline operations and increase efficiency.
- The Individual Contribution Health Reimbursement Arrangement (ICHRA)/BusinessPlus platform (launched on 07/01/2025), which offers more health coverage options, as well as tax benefits to employers and employees.

Financial Management

In FY 2025, the Finance Department:

- Received clean audits for the 2024 Centers for Medicare & Medicaid Services (CMS) SMART audit, the FY 2025 independent financial and programmatic audits.
- Collected all marketplace assessment receivables as of December 31, 2024.
- Implemented a new financial planning and analysis software (Datarails).
- Collected Credit Card Rebate Revenue of \$24,157.
- Successfully applied for a \$198,000 sub-grant from the U.S. Department of Homeland Security (DHS) State and Local Cybersecurity Grant to the Connecticut Division of Emergency Management and Homeland Security (DEMHS) that was awarded to AHCT.
- Successfully applied for a \$5,000 Grant from Farmington Bank Community Foundation for the Broker Academy Program that was awarded to AHCT.

- Presented a new Reserve Fund Policy to the Board of Directors, which the Board approved.

Human Resources

In Fiscal Year 2025, the Human Resources Department:

- Developed the intern program. Facilitated the hiring of 9 interns in June. Worked with the Associate Director of Finance to create a group project (Inventory) that all interns would participate in and report their results to the Senior Leadership Team at the conclusion of the program.
- Was Named a “Best Place to Work in CT” by the Hartford Business Journal for the 6 year in a row.
- Performed a thorough salary analysis for all current positions within the organization, in collaboration with Kardas Larson, our external benchmarking firm. Ensured that the findings were prepared by the end of the first quarter of the 2025 calendar year.
- Developed and distributed detailed Total Compensation reports for employees that included information on salary, as well as the various benefits offered by the company and the associated costs incurred by the company & employee for each benefit.

Information Technology

In Fiscal Year 2025 the IT Department:

- **10 Clicks Initiative**

Created a forward-looking technology roadmap to advance the adoption of modern, scalable platforms in alignment with the 10-Clicks vision. This work increased system agility, reduced technical complexity, and positioned us to deliver faster enhancements and a more intuitive user experience supporting our long-term organizational strategy.

- **Enhance Technical and Leadership Skills**

Established ongoing training programs that strengthened our team's technical competencies and leadership capabilities. These initiatives equipped staff to drive innovation and adapt effectively to evolving organizational challenges.

- **Enhance Security and Compliance within All Enterprise Environments**

Prioritized robust security measures, enhancing data protection and strengthening compliance protocols across our systems. These improvements ensured continued adherence to Internal Revenue (IRS) and Centers for Medicare & Medicaid Services (CMS) regulatory requirements and safeguarded sensitive information at every touchpoint.

- **Reduction of Outstanding Security Findings**

Successfully reduced the number of outstanding security findings through comprehensive risk assessments and targeted remediation efforts. These actions

minimized vulnerabilities and strengthened the overall security posture and resilience of the Integrated Eligibility System (IES) and BusinessPlus platforms.

Legal, Governmental Affairs and Plan Management

In FY 2025, Legal, Governmental Affairs and Plan Management:

- Collaborated with the Connecticut Department of Revenue Services on a legislative initiative to include space on the Form CT-1040 for Connecticut residents to indicate their interest in learning more about the health coverage options and financial help available through AHCT. Legislation was passed by the Connecticut General Assembly in 2023 in Public Act 23-204. This initiative led to numerous consumers enrolling in coverage through AHCT (either in a qualified health plan or Medicaid) and also updating the information in their AHCT applications which may also result in changes in coverage.
- Led several competitive procurement processes through Requests for Proposals (RFP), including an RFP for Call Center Services. The department executed more than 125 contract vehicles for procurements to support agency needs and work.
- Created a “Notice of Availability” of language assistance services and auxiliary aids that was deployed through the following consumer channels:
 - *Online Application*: created a help button to the online application that links to the Notice of Availability.
 - *Navigator and Enrollment Locations*: the Notice of Availability will be posted at all Navigator and Enrollment Locations.
 - *Consumer Notices*: Notice of Availability will be appended to all active English and Spanish notice types.
- Onboarded a new dental carrier, Guardian Life Insurance Company for Plan Year 2026.
 - 4 new dental plans
- Renewed existing carriers: Anthem, ConnectiCare Benefits, Inc (CBI) and ConnectiCare Insurance Company, Inc. (CICI).
 - 22 health plans and 6 dental plans

- Simplified language within the Plan Management and Consumer portals and consolidated related benefits to make plan comparison easier and reduce number of clicks needed to review plan details.
- Continued to accumulate new data, validate existing data, and enhance reporting capabilities within our Essential Community Provider (ECP) database.

Marketing Accomplishments

In FY 2025, Marketing:

- Created a lead generation campaign to increase contacts with email addresses and zip codes on file: Email subscribers increased by 11.5%, adding a total of 35,036 email contacts to the Access Health CT marketing database. Additionally, 2,374 contacts added a zip code to their contact information via the email submission form, and 1,477 added their zip code directly into the Integrated Eligibility System as a result of the campaign.
- Created a campaign to help explain the impact to Connecticut residents if Enhanced Premium Tax Credits are not extended past Plan Year 2025: Enhanced Premium Tax Credits were first introduced by the American Rescue Plan Act (ARPA) and extended through the Inflation Reduction Act (IRA) but set to expire December 31, 2025. To help state and federal legislators understand the impact to Connecticut residents if this financial help goes away, the Marketing Department helped create five district fact sheets and a statewide fact sheet with real-life examples. Information was shared with the elected officials and other state agencies, major healthcare providers and associations across the state.
- Provided marketing support for the Department of Revenue Services (DRS) “Check the Box” Campaign: Access Health CT led the marketing efforts to create awareness. Authored co-branded press release, completed a direct mail campaign and created co-branded social media content and a flyer to help get the word out about the new opportunity. A total of 64,186 Connecticut residents requested information. 1,890 households enrolled in coverage as a result of the new initiative.
- Launched brand standards: Refreshed brand standards and a comprehensive guide was launched in the Spring of Fiscal Year 2025. Support materials were also updated, including a new PowerPoint template, new letterhead, business cards and more.
- Expanded customer journey mapping: On the heels of the previous customer journey mapping success, Access Health CT mapped eight new personas and identified seventy-nine new recommendations to improve the customer experience across the various ways we connect with our customers – online, over the phone, by mail and in person.

- Launched video blogs: An analysis of Access Health CT's digital content and search engine optimization (SEO) revealed customers are most interested in blog content that helps them solve problems than health awareness months and best practices for staying healthy. Launched a video blog series with content that helps solve problems. Written blog content is supplemented with video, which consumers find more engaging and is repurposed across other digital channels including social media for further reach.
- Redesigned the AHCT toolkit: The Access Health CT toolkit is a helpful digital resource for external contacts to help us achieve our mission-driven work. It includes talking points, downloadable/printable flyers and other relevant information for our stakeholders, including but not limited to our legislative partners, Brokers, Certified Application Counselors (CACs), community partners and Navigators. It was redesigned and organized based on user experience preferences from interviews with relevant stakeholders who use the content.

Customer Service Operations Accomplishments

In FY 25, Customer Service Operations:

- Signed a new contract for Call Center Vendor Services with TTEC Government Solutions, LLC (TTEC), our existing Call Center Vendor following selection through a full Request for Proposal (RFP) process. TTEC is providing additional enhancements to our interactive voice response (IVR) system to enhance the consumer experience when contacting our Call Center as part of the new contract.
- Collaborated with TTEC on the design and preparation of IVR system enhancements during FY 2025, resulting in a successful launch at the start of FY 2026 (July 2025). New features included speech enablement, SMS/texting, expanded informational messaging, language accessibility, external call transfers, and a call-back option, such as the following key enhancements:
 - Expanded Language Support: In addition to English and Spanish, the IVR now supports four additional languages: Portuguese, Haitian Creole, Arabic, and Ukrainian. This allows callers to communicate more naturally in their preferred language.
 - Text-a-Link Feature: This feature enables consumers to receive a text message containing helpful links that provide answers to common questions, such as acceptable verification documents or required enrollment documents. On average, approximately 400 texts are sent to consumers daily.
 - Enhanced Call Routing: A new capability allows callers to be transferred directly from the IVR to either the Department of Social Services or their insurance carrier. This option is utilized by about sixty consumers each day.

- Training certified 1,405 individuals to help enroll consumers, including Customer Service Representatives, Certified Application Counselors, Brokers, community partners, and AHCT staff. This reflects a 9% increase from last Fiscal Year.
- The Customer Resolution Team streamlined workflows for consumer issue assignments which resulted in lower overall inventory. The team resolved 14,785 customer inquiries.

Health Equity and Outreach Accomplishments

In FY 2025, Health Equity and Outreach:

- Expanded the Mobile Enrollment Team. Four full-time Mobile Enrollment & Outreach Specialists were hired, who will be certified to enroll consumers and conduct outreach activities. Specialists will rotate through high-need communities statewide, supporting Navigators and Certified Application Counselors (CACs) with in-person enrollment and outreach. New scheduling tools are being explored to make it easier for consumers to book appointments.
- Grew the Navigator Program. The number of navigator organizations was expanded to six this year, with stronger clinic partnerships that provide both enrollment and support services. Navigators are strategically located in the top high-uninsured areas of Connecticut. Outreach efforts now reach over 2,500 partner contacts, from grassroots organizations to federally qualified health centers (FQHCs) and faith-based groups.
- Grew Community Engagement.
 - Attended 283 outreach events statewide, including community fairs, educational presentations, and sponsorships.
 - Conducted 369 in-person site visits and 83 virtual presentations for community partners and consumers (Healthy Chats).
 - Hosted Annual Community Conference, with nearly 200 partners and vendors to prepare for Open Enrollment, including topics like upcoming system updates, community engagement, understanding coverage and an introduction to Individual Contribution Health Reimbursement Account (ICHRA) program for businesses.
- Continued to lead the Broker Academy training program, designed to diversify the Broker pool and expand access in underserved communities. Year 4 marked a milestone: 50 students participated in the class, with twenty-nine passing the state exam, the highest number yet, surpassing the twenty-eight graduates from Year 1 despite a smaller class size. Over 100 graduates across four years of the program now serve communities throughout Connecticut, many from minority and women-led backgrounds. Some graduates have launched their own businesses and now mentor

new participants. The Academy has more than doubled our return on investment, bringing in revenue and strengthening community-based enrollment capacity.

Small Business Health Options Program (SHOP) Accomplishments

In FY 2025, SHOP:

- Successfully developed and launched the BusinessPlus platform:
 - Led end-to-end development of BusinessPlus, overseeing design, system build, and integration with carrier partners.
 - Directed the creation of the quoting tool, ensuring accurate plan comparisons, savings illustrations, and Broker-ready outputs.
 - Guided user experience design to make enrollment simple for both employers and employees.
 - Delivered the 07/01/2025 launch of BusinessPlus, introducing ICHRA to Connecticut's small business market.
 - Positioned BusinessPlus as an innovative, cost-saving solution for employers facing renewal increases.
- Strengthened Broker Training & Engagement:
 - Trained over 300 Brokers with 350+ additional sessions scheduled.
 - Built structured training programs that increased Broker adoption and confidence.
 - Strengthened Broker partnerships, laying the foundation for sustained membership growth.
- Strategic Sales & Growth Planning with Nonprofit & Small Business Focus:
 - Developed a multi-year sales strategy designed to drive steady membership growth and establish BusinessPlus as a long-term solution for employers.
 - Designed outreach through chambers of commerce and employer networks, with a strong emphasis on nonprofit organizations.
 - Launched a dedicated nonprofit marketing plan highlighting BusinessPlus as a cost-effective solution for controlling costs and expanding employee benefits.
- Hosted the Connecticut Small Business Summit:
 - Statewide Connecticut Small Business Summit with over 350 attendees, including small business owners, nonprofit leaders, chambers, and policy influencers, and roll-out of BusinessPlus platform.
 - Elevated BusinessPlus visibility as a leading benefits solution for cost control and employee choice.

- Strengthened partnerships with chambers, associations, and employer networks, generating new outreach and growth opportunities.

Technical Operations and Analytics (TOA) Accomplishments

In FY25, TOA:

- Completed scoping and Implementation of four major releases to our integrated eligibility and enrollment system: During this period, 48 enhancements and improvements were implemented including both regulatory changes and improvements to the user experience.
- Collaborated with carriers and CMS to ensure accurate subsidy reimbursement for Coverage Years 2022-2025. Rolled out a process for automated processing of carrier-initiated reinstatements of QHP policies, reducing the amount of manual intervention required to ensure enrollment data is aligned across systems.
- Participated in the CMS Improper Payment Pre-Testing Assessment (IPPTA): The TOA team collaborated with CMS and other state exchanges to test processes and procedures that support CMS review of determinations of advance payments of the premium tax credit (APTC) in preparation for the upcoming measurement program.
- Collaborated with CT DRS and AHCT Legal to implement system and processes for contacting individuals, who, via the Form CT-1040, indicated interest in learning more about the health coverage options and financial help available through AHCT. As of the end of June 2025, over 64,000 CT residents received letters explaining what options may be available to them and nearly 2,000 enrolled in coverage as a result.
- Worked closely with the SHOP team to implement system and process changes in support of the integration of the ACHT Individual Market platform with the new BusinessPlus (Individual Coverage Health Reimbursement Arrangements (ICHRA)) platform.
- Provided ongoing support to various departments and partners with data and ongoing reporting to better support data-driven decision making.

4. Activities and Projects Planned for Fiscal Year 2026

Strategic, Multi-Year Initiatives

1. 10 Clicks or Less

- AHCT's "10 Clicks or Less" (10 Clicks) initiative is redefining and reimagining the overall customer enrollment experience, exploring all connections and people involved to make enrollment a smoother, easier process for customers.
- In FY 2026 we intend to develop our strategy, prioritize evidence-based tactics, and determine the path forward for the enrollment system.
- In FY 2026 we aim to determine how to measure an improved user experience and the efficiencies gained within the reimagined enrollment process and eligibility system. In FY 2026 we also plan to establish a date to start implementing the system transition or build a new enrollment and eligibility system.

2. BusinessPlus

- In Phase 1 Access Health CT implemented the ICHRA functionality through the BusinessPlus platform to support employer use of ICHRA for health coverage for employees.
- Phase 2 (FY 2026) will entail fully integrating the ICHRA system with the Integrated Eligibility System (IES) and further expanding ICHRA capabilities, enhanced reporting with board dashboards tracking pipeline, conversation rates, membership growth, and continued advanced Broker sessions to build confidence around ICHRA complexities and small business adoption.
- Phase 3 (FY 2027 and beyond) will involve the final rollout of the new and fully integrated enrollment platform. Phase 3 includes planned full integration of the ICHRA system into the AHCT enrollment platform, creating a seamless employer-to-employee enrollment flow. Phase 3 also involves scaling marketing to include statewide campaigns and nonprofit association partnerships, ongoing quoting tool enhancements with deeper savings illustrations and compliance safeguards, and a long-term goal of positioning BusinessPlus as a sustainable alternative to traditional small group health plans, particularly as more employers face double-digit renewals.

FY 2026 Department Goals

Finance

1. Increase Reserves by continuing to pursue cost-saving initiatives throughout the organization.
2. Pursue grant funding for projects that advance AHCT mission and goals, such as health literacy, use of preventive care, the Broker Academy, cybersecurity, and affordability for small employers.

3. Examine procedures, policies, training and back-up operations to improve accounting and review standards and processes to assure compliance with Generally Accepted Accounting Principles (GAAP) and continue to meet the requirements of Connecticut and other audits.
4. Complete a physical inventory count and recommend a new solution/process for Fixed Asset Management with the assistance of AHCT's 2025 summer interns.
5. Simplify the budgeting process by moving from budgeting by vendor to budgeting by account.

Board Administration

1. Develop and execute the new Internal Change Management team to support internal projects and initiatives.

Operations

1. Continue to support the 10 Clicks Initiative by redefining the overall customer enrollment experience and exploring all connections and people involved in the experience to make it a smoother process.
2. Continue Call Center IVR System enhancements along with other consumer touchpoints to improve the consumer experience. Launch Phase 1 IVR enhancements in July 2025. Launch Phase 2 enhancements by 10/01/2025.
3. Identify Customer Resolution Team Department process improvements and/or new functionality for Customer Relationship Management (CRM) (1-2) that would better the consumer experience and increase the efficiency in handling consumer cases by 06/30/2026.
4. Reduce unassigned inventory over 30 days YOY by 10% during post open enrollment season.
5. Identify at least 1-2 opportunities by 06/30/2026 to present system updates, knowledge, etc., to community partners, the Call Center and State of Connecticut agencies or their partners.
6. Identify opportunities to improve the Call Center New Hire curriculum by continuing our partnership with call center trainers and DSS by 6/30/2026.

Marketing

1. Develop a change management communications plan by 12/31/2025 to help guide the organization and stay informed on the multi-year 10 Clicks initiative.
2. Improve cross-functional alignment between Marketing and EPMD teams to ensure timely delivery of marketing campaigns and initiatives by having at least one member of the Marketing team complete their Project Management Professional designation by 12/31/2026.

3. Based on Phase I and Phase II of our most recent customer journeys, identify improvements to our marketing funnel in order to better reach the uninsured residents of Connecticut by 04/30/2026.
4. Improve website content and navigation to improve the customer experience and uncover future opportunities for 10 Clicks implementation that will improve the digital experience by 06/30/2026.
5. Map the existing customer digital engagement strategy and future improvements that will better align digital infrastructure used by the totality of the organization (including the call center) by 04/30/2026. This is different from Goal #4 because the Department will look at other digital tools, not our website (such as CRMs, email automation tools, SMS, etc.).
6. In support of AHCT's mission to reduce the rate of the uninsured and eliminate health disparities, identify topics of interest regarding health coverage and formulate new methods to address those needs and/or improve existing ones by 04/30/2026. For example, what matters most: cost, carrier options, or the impact of legislation, such as reduced financial help. Technical Operations and Analytics.

Technical Operations and Analytics (TOA)

1. Adjust the Release Management and Scoping processes to accommodate quicker turnaround for the implementation of changes to the IES System, specifically regulatory/legislative requirements.
 - Develop Dashboards and improve workflows within JIRA to support the decision-making process by 11/01/2025.
 - Provide documentation and training to AHCT Staff and partners on the new process by 12/01/2025.
2. Expand automation of reconciliation of enrollment and Advanced Premium Tax Credit (APTC) payment data to reduce turnaround time for resolution of discrepancies.
 - Identify potential AI tools to integrate into the reconciliation process by 03/31/2026.
3. Develop baseline performance measurements of the IES ancillary platforms (CP, WP, BP).
 - Identify which metrics to measure and when (before, during, after OE) based on process identified by the 10 Clicks initiative team by 12/01/2025.
 - Develop process(es) for gathering and sharing the baseline performance measurements by 12/31/2025.
 - Share baseline performance measurement with the organization by 06/01/2025.
4. Identify and implement process improvements for improving the self-service rate, reduce overhead costs for the organization and improve the overall user experience.

- Allow tax filers to receive 1095-A Forms electronically only to reduce printing and postage costs by 11/01/2025.
- Allow consumers the ability to pay the initial month's premium directly to the carrier to reduce the potential impact of cancellations due to non-payment by 11/01/2025.
- Implement a new Remote Identity Proofing (RIDP) process to remove barriers to account creation by 06/30/2026.
- Analyze the complete Document Verification process from upload to closure to identify opportunities for improvement, including integration of automated verification by 12/31/2025.

SHOP

1. Enroll 5,000 members through BusinessPlus programs by year-end 2026. This number represents more than just enrollment—it marks a fundamental shift in how we deliver choice, flexibility, and affordability to the small group market.
 - Sustain growth over the next three-to-five years, with a long-term goal of expanding to 15,000 to 20,000 members. The demand for ICHRA-based solutions may accelerate with possible tax credits, further validating our investment in BusinessPlus as a scalable and policy-aligned innovation for health benefits delivery.
2. Platform enhancements for BusinessPlus by the end of FY 2026. This next phase of development includes:
 - A significantly enhanced ICHRA quoting engine, multi-carrier comparisons, multi-class contribution functionality, ACA affordability benchmarking and side-by-side plan views.
 - Seamless integration of individual medical, dental and small group plans into a unified quoting and enrollment experience.
 - Development of intuitive employer, Broker and carrier dashboards to support real-time quoting, contribution tracking, onboarding workflows and compliance automation.
 - Implementation of centralized lead management system to streamline engagement, conversion and pipeline visibility.
 - Decision-support tools that empower employees to evaluate plans based on cost, provider access and benefit preferences—improving overall experience and satisfaction.

Human Resources

1. Internship Program Continuation: Continue the intern program facilitating collaboration among different departments, resulting in a project that provides measurable benefits to AHCT, as assessed by stakeholder feedback.

2. Leadership Excellence Program: Launch a revised version of the Leadership Excellence at Access Health Program (LEAHP) specifically tailored for front-line supervisors and managers.
3. Employee Feedback Participation: Actively participate in the Best Places to Work in CT Survey Program, aiming to achieve a minimum response rate of 65% from employees, and compile a report summarizing insights and recommendations based on the feedback received.
4. SharePoint Site Rollout: Work closely with IT to successfully launch the new SharePoint site with the centralized repository for company information.
5. 10 Clicks Initiative Support: Work with Calculus of Talent to develop and execute a comprehensive change management strategy to facilitate the successful implementation of the 10 Clicks initiative, ensuring that employees are prepared, engaged and supported throughout the transition.

Legal and Plan Management

1. Work with Health Plan Benefits and Qualifications (HPBQ) Advisory Committee and Board on Standard Plan Designs that maximize federal financial assistance and provide consumers with an array of affordable options in a changing marketplace.
2. Implement Legislative Initiative for Study to Develop Affordable Options for Early Childhood Education Workers, and participate in Working Group on Direct Enrollment and communicate consumer and AHCT challenges and perspectives.
3. Support procurement and contracting to engage vendor for 10 Clicks Initiative to achieve goals of improving customer experience and maximizing AHCT's efficiency and effectiveness.
4. Continually increase visibility at the Capitol and educate state and federal legislators and elected officials on AHCT consumer concerns for affordability and accessibility for health care coverage in changing marketplace.
5. Maximize AHCT collaboration among state-marketplace colleagues to support AHCT departments and strategic initiatives.

Information Technology

1. 10 Clicks:
 - o Create a roadmap for adopting modern, scalable technologies to improve system efficiency and agility, enabling faster updates and seamless user experience that supports our long-term strategic goals.
 - o By focusing on user-centered design, refine our digital platforms to provide a more intuitive and engaging experience, aligning our services with customer needs to foster greater satisfaction and loyalty.
2. Center of Excellence for Innovation:

- To create increase employee engagement, create a Center of Excellence for Innovation (CoE) that will focus on building a sustainable, enterprise-wide innovation ecosystem that drives measurable business value.
- Formalize and expand our processes for idea intake, evaluation, piloting and scaling, ensuring alignment with strategic priorities.
- Foster collaboration across departments, provide tools and frameworks for experimentation and embed innovation into our culture to enable the CoE to serve as a catalyst for creative problem-solving and continuous improvement.
- Measure success by the impact of piloted initiatives, adoption of scalable solutions and increased employee engagement in innovation efforts.

Health Equity and Outreach

1. Expand Community Outreach and Health Literacy Statewide:
 - Hire four full-time Mobile Enrollment & Outreach Specialists by July 2025.
 - Complete onboarding and certification training by August 2025 to support expanded in-person enrollment and outreach efforts year-round.
 - By June 2026, increase total number of outreach events, tabling activities and educational presentations (Healthy Chats) by 20% compared to FY 2025, with half of this growth occurring in underserved and high-uninsured regions.
2. Strengthen and Grow Community and Navigator Partnerships: By June 2026, grow the number of active community partner organizations engaged with AHCT by 20% and expand navigator-led outreach activities by 20%, prioritizing geographic coverage in top uninsured areas identified in data.
3. Strengthen Enrollment Support Through Partner Development: By June 2026, expand enrollment capacity by:
 - Recruiting and training at least 15% more Certified Application Counselors (CACs) statewide.
 - Continuing the Broker Academy with a new cohort, emphasizing recruitment from underserved communities and maintaining a graduation-to-licensure rate at or above previous years' benchmarks.
4. Implement Mobile Outreach and Enrollment Teams: Deploy mobile outreach and enrollment specialists, with each specialist participating in a minimum of thirty community-based activities (events, presentations and enrollments) by June 2026.
5. Team Training and Professional Development: By June 2026, provide at least two structured training opportunities for the Health Equity and Outreach Department, focusing on professional certifications (e.g., LinkedIn Training, Community Health Worker certification, Broker training or other relevant industry training) and team building workshops. Each team member will complete at least one training that strengthens their outreach, enrollment or leadership skills.

5. Human Resources

Affirmative Action Policy

Access Health CT's policy on Equal Employment Opportunity and Affirmative Action was approved by the Exchange Board of Directors in January 2012. The policy states:

AHCT is an equal employment opportunity and affirmative action employer, dedicated to the policy of nondiscrimination in employment on any basis prohibited by law. It is committed to providing equal employment and advancement opportunities without consideration of race, color, religious creed, age, sex, sexual orientation, gender identity or expression, marital status, national origin, ancestry, veteran status, mental retardation, genetic information, disability, or other legally protected status, unless there is a bona fide occupational qualification under applicable Connecticut statute excluding persons in one of the foregoing protected groups. Additionally, AHCT will take affirmative action to ensure workplace equality, avoid all forms of discrimination, and develop a workforce that is representative of all segments of the population.

Employees are directed to bring any violation of this policy to the immediate attention of their supervisor or Human Resources. Any employee who violates this policy or knowingly retaliates against an employee reporting or complaining of a violation of this policy shall be subject to immediate disciplinary action, up to and including discharge. Complaints brought under this policy will be promptly investigated.

Workforce Composition as of June 30, 2025

Class	Title	Employees	Male							Female							
			W	B	H	A	I	N/H	T	W	B	H	A	I	N/H	T	
1.1	Exec/Senior Level Officials & Mgrs.	10	2	2	0	0	0	0	0	5	1	0	0	0	0	0	
1.2	First/Mid-Level Officials & Mgrs.	24	5	2	2	2	0	0	1	6	2	4	0	0	0	0	
2	Professionals	26	13	2	1	0	0	0	0	5	1	1	2	0	0	1	
5	Administrative Support Workers	35	5	2	2	0	0	0	0	6	4	15	0	0	0	0	
Total			Male							Female							
	Male	Female	Total	W	B	H	A	I	N/H	T	W	B	H	A	I	N/H	T
	41	54	95	25	8	5	2	0	0	1	22	8	20	2	0	0	1
	43%	57%		61%	20%	12%	5%	0%	0%	2%	41%	15%	37%	4%	0%	0%	2%

* KEY: (W) - White; (B) - Black or African American; (H) - Hispanic or Latino; (A) - Asian; (I) - Indian; (N/H) - Native Hawaiian/Pacific Islander; (T) - Two Or More Races

Affirmative Action Efforts in Fiscal Year 2025

Access Health CT continues to maintain a strong commitment to the Equal Employment Opportunity and Affirmative Action policy. Statewide advertisements of all new staff positions are posted electronically on Indeed.com, JobTarget.com, and Access Health CT's own website. These websites and Access Health CT recruitment efforts reach a broad range of diverse candidates.

6. Financial

Marketplace Assessments

Marketplace assessments fund Access Health CT's ongoing operations. Marketplace assessments are charged to all health and dental insurance carriers capable of offering a qualified health plan through the Exchange to generate funding necessary to support the operations of Access Health CT. Access Health CT's assessments are calculated as a percentage of the premiums earned in Connecticut. Marketplace assessments are billed and collected on a calendar year basis.

Pursuant to Conn. Gen. Stat. § 38a-1083(c)(7) the Exchange has the authority to charge assessments or user fees to fund its operations and to charge interest and penalties to carriers failing to pay the assessments and fees required.

Conn. Gen. Stat. §38a-1083 provides that the Commissioner of Insurance shall see that all laws respecting the authority of the Exchange are faithfully executed. In enforcing the assessment, the Commissioner "has all the powers specifically granted under Title 38a and all further powers that are reasonable and necessary."

Final determinations as to the terms, conditions, basis, and methodology of any assessments or fees to be charged shall rest in the sole discretion of the Board, acting in accordance with applicable law.

In June 2023, after reviewing significant research and thoughtful deliberation, the Access Health CT Board of Directors increased the assessment rate from 1.65% to 1.85%, effective January 1, 2024. While the assessment rate was unchanged for the previous eight years, AHCT's assessment rate remains the lowest among all other state exchanges.

Bonds

Access Health CT has not issued bonds and has no bonds outstanding.

Grants Awarded to Access Health CT

In FY 2025, Access Health CT was awarded a \$216,038 grant from the State of Connecticut as a part of State and Local Cybersecurity Grant Program (SLCGP). In addition, Access Health CT was awarded a \$5,000 grant from Farmington Bank Community Foundation for the Broker Academy.

Grants Issued by Access Health CT

In FY 2025, Access Health CT issued five community Navigator grants totaling **\$400,803**:

Community Health Center Association of Connecticut, Inc.	\$	80,000
Community Renewal Team, Inc.	\$	80,803
Cornell Scott-Hill Health Corporation	\$	80,000
GBAPP, Inc.	\$	80,000
New Opportunities, Inc.	\$	80,000
Grand Total	\$	400,803

Individuals and Firms that Received Payments of More than \$5,000

The following outside individuals and firms received more than \$5,000 in the form of loans, grants, or payments for services:

A&A Office Systems, Inc	Jama Software, Inc.
Advent Cat Risk	Janus Software, Inc.
ALM Global LLC	Kaplan North America, LLC
Always Decorating Inc	Kaplan, Inc.
Amazon.com LLC	Kardas Consulting, LLC
ANZ Rocky Hill, LLC	Kool Ink LLC
AT&T Corp	M2D Global Life Sciences, LLC
Benefitfocus.com.inc.	Market Street Research Inc.
Bernard L. Kavalier	Melissa Data Corporation
Buildscale, Inc. (dba Vidyad)	MetroHartford Alliance, Inc
Calculus of Talent, LLC	Mintz & Hoke
Carahsoft Technology Corporation	New Fields Technologies LLC
CDW LLC	New Opportunities, Inc.
Center for Health Policy Development	Northeast Series of Lockton Companies, LLC
Chubb and Son a division of Fed Ins Co	Noverant, Inc.
Clarizen, Inc.	OpenSesame Inc.
Cognizant Technology Solutions	Optiv Security, Inc.
Community Health Center Association of Connecticut, Inc.	Oracle America Inc.
Community Renewal Team, Inc.	Paramount Technologies, Inc
Converge Technology Solutions US, LLC	Pier 27 Executive Coaching and talent Consulting LLC
CORNELL SCOTT-HILL HEALTH CORPORATION	Pillar Community Development Corporation
Coursera, Inc.	Pitney Bowes Presort Services, Inc
Crown Castle Fiber LLC	Regional Community - Technical Colleges
Datarails Inc	Scan-Optics LLC
Dell Financial Services LLC	SHI International Corp.
Dell Marketing LP	Shipman & Goodwin LLP
Deloitte Consulting LLP	SOFTHEON INC.
Emitrr Inc	State of Connecticut - DSS
ePlus Technology Inc	State of CT Office of Health Strategy
Fairfax Data Systems, Inc	TEKsystems, Inc
GBAPP, Inc.	The RDW Group, Inc
Grunberg 280 Trumbull, LLC	The Rocket Science Group, LLC
Hallmark Totaltech, Inc	The Southern New England Telephone Co
Health Equity Solutions	The Tri-Com Consulting Group, LLC
HubSpot Inc.	Three-Way Communications, Inc.
Infosys Public Services, Inc.	TMC - The Maintenance Company, Inc
Insight Public Sector, Inc	TTEC Government Solutions, LLC
International Business Machines Corp	Universal E-Business Solutions, LLC
	uWork.com, Inc.

Victor Advertising Service
V-Link, Inc
W.B. Mason Co. Inc
Wakely Consulting Group, Inc
West Publishing Corporation
Whittlesey PC

Financial Statements



**CONNECTICUT HEALTH INSURANCE EXCHANGE
DBA: ACCESS HEALTH CT**

STATEMENTS OF NET POSITION

June 30, 2025 and 2024

	2025	2024
Assets		
Current assets		
Cash and cash equivalents	\$ 36,715,850	\$ 28,387,878
Accounts receivable	3,564,956	280,122
Prepaid expenses	247,126	236,333
Total current assets	<u>40,527,932</u>	<u>28,904,333</u>
Noncurrent assets		
Capital assets not being depreciated/amortized	3,004,280	2,293,400
Capital assets, net of accumulated depreciation/amortization	9,807,282	11,162,167
Total noncurrent assets	<u>12,811,562</u>	<u>13,455,567</u>
Total assets	<u>\$ 53,339,494</u>	<u>\$ 42,359,900</u>
Liabilities		
Current liabilities		
Accounts payable	\$ 75,249	\$ 44,151
Accrued liabilities	5,910,656	5,553,849
Unearned revenue	9,815,031	1,371,326
Lease liability - current portion	268,987	321,524
Subscription liability - current portion	60,429	153,105
Total current liabilities	<u>16,130,352</u>	<u>7,443,955</u>
Noncurrent liabilities		
Lease liability	2,340,392	2,609,395
Subscription liability	-	19,374
Total noncurrent liabilities	<u>2,340,392</u>	<u>2,628,769</u>
Total liabilities	<u>\$ 18,470,744</u>	<u>\$ 10,072,724</u>
Net position		
Net investment in capital assets	\$ 10,194,000	\$ 11,309,312
Unrestricted	24,674,750	20,977,864
Total net position	<u>\$ 34,868,750</u>	<u>\$ 32,287,176</u>



**CONNECTICUT HEALTH INSURANCE EXCHANGE
DBA: ACCESS HEALTH CT**

STATEMENTS OF REVENUES, EXPENSES, AND CHANGES IN NET POSITION

For the Years Ended June 30, 2025 and 2024

	2025	2024
Operating revenues		
Marketplace assessment	\$ 36,646,314	\$ 33,356,883
Intergovernmental revenue	198,000	-
Private grants	5,000	40,000
Miscellaneous revenue	24,157	32,969
Total operating revenues	<u>36,873,471</u>	<u>33,429,852</u>
Operating expenses		
Wages	8,942,860	8,603,559
Fringe benefits	3,984,817	3,670,611
Consultants	13,505,922	14,761,188
Maintenance	3,233,219	2,972,862
Administration	783,479	712,397
Equipment	851,940	1,068,801
Travel	88,670	97,026
Supplies	8,020	13,133
Depreciation and amortization	4,188,875	5,516,865
Total operating expenses	<u>35,587,802</u>	<u>37,416,442</u>
Net operating gain/(loss)	1,285,669	(3,986,590)
Nonoperating revenues		
Interest income	<u>1,295,905</u>	<u>1,136,824</u>
Change in net position	2,581,574	(2,849,766)
Net position - beginning of year	<u>32,287,176</u>	<u>35,136,942</u>
Net position - end of year	<u>\$ 34,868,750</u>	<u>\$ 32,287,176</u>



**CONNECTICUT HEALTH INSURANCE EXCHANGE
DBA: ACCESS HEALTH CT**

Statements Of Cash Flows

For the Years Ended June 30, 2025 and 2024

	2025	2024
Cash flows from operating activities		
Receipts from marketplace assessment	\$ 41,525,059	\$ 34,368,910
Reimbursement of operating costs	21,079,584	22,974,777
Receipts from intergovernmental revenue	198,000	-
Receipts from other sources	327,786	72,969
Payments to employees	(12,796,933)	(12,277,747)
Payments to vendors	(39,323,031)	(43,603,113)
Net cash provided by operating activities	<u>11,010,465</u>	<u>1,535,796</u>
Cash flows from capital and related financing activities		
Payments for software development in progress	(3,505,991)	(3,062,210)
Purchase of equipment and software	(38,879)	(681)
Subscription payments	(112,050)	(174,818)
Lease payments	(321,478)	(521,088)
Net cash used by capital and related financial activities	<u>(3,978,398)</u>	<u>(3,758,797)</u>
Cash flows from investing activities		
Interest and dividend income	1,295,905	1,136,824
Net change in cash and cash equivalents	8,327,972	(1,086,177)
Cash and cash equivalents - beginning of year	<u>28,387,878</u>	<u>29,474,055</u>
Cash and cash equivalents - end of year	<u>\$ 36,715,850</u>	<u>\$ 28,387,878</u>
Reconciliation of operating income (loss) to net cash provided by operating activities		
Operating income (loss)	1,285,669	(3,986,590)
Adjustments to reconcile operating loss to net cash provided by operating activities		
Depreciation and amortization	4,188,875	5,516,865
Change in assets and liabilities		
(Increase) in accounts receivable	(3,284,834)	(66,238)
(Increase) in prepaid expenses	(10,793)	(40,769)
(Decrease) increase in accounts payable	31,098	32,519
Increase (decrease) in accrued liabilities	356,745	(865,780)
Increase in unearned revenue	8,443,705	945,789
Net cash provided by operating activities	<u>\$ 11,010,465</u>	<u>\$ 1,535,796</u>