Health Equity, Outreach and Consumer Experience Advisory Committee Special Meeting

Meeting Minutes

Thursday, June 4, 2026
Remote

Members Present:
Sean King (Chair); Jacqueline Sanchez; Ayesha Clarke; Jacqueline Sanchez; Sheldon Toubman

Other Participants:
Access Health CT (AHCT or Exchange) staff: James Michel; Tammy Hendricks; Holly Zwick; John Carbone; Marquese Davis; Marcin Olechowski

Connecticut Insurance Department (CID): Gerard O'Sullivan

A. Call to Order and Introductions

Chair Sean King called the meeting to order at 10:00 a.m. Roll call for attendance was taken.

B. Public Comment

No public comment was submitted.

C. Review and Approval of Minutes

Chair Sean King requested to approve the February 26, 2026, Health Equity, Outreach and Consumer Experience Advisory Committee Special Meeting Minutes. Motion was made by Sean King and seconded by Ayesha Clarke. Roll call vote was ordered. **Motion passed.** Sheldon Toubman and Ayesha Clarke abstained.

D. Health Equity and Outreach Department Update

Tammy Hendricks, Director of Health Equity and Outreach (HEO), presented the HEO department update.

Ms. Hendricks welcomed new Committee member Ayesha Clarke and provided an overview of the department's outreach and enrollment activities. Ms. Hendricks highlighted the mobile enrollment team's year-round community engagement, including supporting individuals affected by employer layoffs, participating in hundreds of outreach events, providing bilingual enrollment assistance, and establishing a new online scheduling tool for consumers.

Ms. Hendricks also reviewed training and capacity-building efforts, including Certified Application Counselor (CAC) training, monthly webinars, community partner meetings, and the Annual Community Conference. Updates were provided on the Navigator Program, which partners with six organizations to assist consumers with healthcare enrollment and broader social service needs.

Ms. Hendricks also reported on the fifth year of the Broker Academy Program, which enrolled 65 students from 28 towns across five counties. The Program provides free training, materials, laptops, exam vouchers and mentorship opportunities to Program participants, who are expected to graduate from the Program prior to Open Enrollment.

All in-person enrollment assistance, including enrollment fairs and appointments with Mobile Enrollment Specialists, is provided at no cost by AHCT. AHCT offers education and enrollment support in English and Spanish and utilizes translation tools to facilitate outreach conversations in multiple languages.

Outreach efforts have expanded significantly, with nearly 3,000 community partners statewide. Additional available consumer resources include Navigators, CACs, Certified Brokers, mobile enrollment scheduling options through AHCT, AHCT newsletters, and an outreach toolkit designed by AHCT containing educational materials, flyers, talking points, and social media content to support consistent and accurate public messaging.

Sheldon Toubman discussed concerns about brokers encouraging individuals dually eligible for Medicare and Medicaid to enroll in Medicare Advantage plans, potentially limiting provider access and increasing prior authorization requirements. James Michel, Chief Executive Officer, clarified that the Broker Academy Program's role is limited to preparing participants for the Connecticut State licensing examination through a State-approved training program and does not provide Medicare Advantage sales training. It was noted that Medicare product-specific training and annual certifications are administered separately by insurers and the Centers for Medicare and Medicaid Services (CMS).

Gerard O'Sullivan, a subject matter expert from CID, advised that concerns regarding broker conduct can be reported to CID, which works with CMS to investigate complaints and take appropriate regulatory action when warranted. It was also noted that ethics training is a required component of broker licensure and continuing education, and that CMS continues to strengthen and update broker conduct requirements.

E. Coordination with Connecticut Department of Social Services on Implementation of House Resolution 1 (H.R. 1) Requirements

Ms. Hendricks, along with Mr. Michel, provided a high-level update on ongoing collaboration with the Connecticut Department of Social Services (DSS) to implement H.R. 1 requirements. AHCT is supporting DSS with this implementation initiative.

Committee members discussed the upcoming implementation of H.R. 1 community engagement requirements and raised questions regarding how consumers will receive assistance and report information under the new processes. Mr. Michel explained that implementation details are still being finalized, including the division of responsibilities

between AHCT and DSS, but consumers contacting either agency will be directed to the appropriate resource. Members emphasized the importance of DSS participation in future meetings and advocated for greater stakeholder input during implementation. Mr. Michel agreed to invite a DSS representative to a future meeting to provide updates and answer questions regarding implementation plans.

F. Policy Updates

Mr. Michel reviewed upcoming H.R. 1 policy changes affecting Advanced Premium Tax Credits (APTCs), noting that beginning with tax year 2026, repayment caps on excess APTCs will be eliminated. The importance of consumer outreach to encourage enrollees to promptly report household income, household size, and other eligibility changes to avoid significant tax liabilities was emphasized by Ms. Hendricks. AHCT plans a comprehensive communication campaign through letters, emails, social media, Navigators, brokers, and community partners.

Mr. Michel also highlighted a new pre-enrollment verification requirement effective in 2028, under which applicants will not receive coverage or APTCs until income, identity, and immigration status are verified, replacing the current 90-day verification period. Additional discussion noted that individuals who lose Medicaid eligibility due to noncompliance with community engagement requirements will also be ineligible for federal Qualified Health Plan (QHP) subsidies and would need to pay the full cost of QHP coverage. It was indicated that planning and coordination with DSS and CMS is ongoing, as further federal guidance is expected.

G. 2027 Plan Year Planning/Update and H. Strategic Initiatives

No update was provided for Agenda Item G. Marquese Davis, Director of Information Technology (IT), provided information on the 10 Clicks Initiative, which aims to simplify and improve the enrollment experience for Connecticut residents by replacing AHCT's 12- to 13-year-old eligibility and enrollment platform. The project is expected to begin in late spring 2026, with a targeted new platform launch in summer 2027. Mr. Davis also highlighted ongoing coordination with DSS and a system integration vendor retained by DSS to ensure system requirements and business rules align with H.R. 1 implementation timelines and eligibility processes.

John Carbone, Director of Small Business Health Options Program (SHOP), Broker Support and Product Development, provided an update on BusinessPlus, AHCT's Individual Coverage Health Reimbursement Arrangement (ICHRA) platform, highlighting continued growth and engagement with brokers, employers, and community partners. More than 500 brokers have been trained, over 1,000 employer groups are in the sales pipeline, and ongoing platform enhancements have resulted in more than 45 system updates. Mr. Carbone also discussed a new Connecticut State tax credit program for small businesses creating an ICHRA through the Exchange, up to a $5 million annual allocation for two years. Efforts are underway to expand outreach, integrate ICHRA and small-group coverage options, and provide guidance to employers and employees on the coverage options that best meets their needs, including referrals to Medicaid when appropriate.

I. Adjournment

Chair Sean King requested a motion to adjourn. Motion was made by Sheldon Toubman and was seconded Sean King. Roll call vote was ordered. **Motion passed unanimously.** Meeting adjourned at 10:52 a.m.