



THE EVENT WILL BEGIN SHORTLY



To ask questions at any time during the event, please use the Q&A function on your screen.

OPEN ENROLLMENT
IS MAY 2 - MAY 27, 2022



Learn more:
carecompass.ct.gov/openenrollment

OPEN ENROLLMENT RESOURCES



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For resources: carecompass.ct.gov/openenrollment

INFO

- Rates
- Plan Comparisons
- What's New

TOOLS

- Decision Guides
- Planners
- Q&A Documents

HELP

- Live Q&A Events
- Contact Info
- Videos & Materials

WHAT'S NEW: MEDICAL



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- **New plan names** that align with how you access care. All plans offer the same medical coverage, however, the way you access your care differs.
- **New Medical Plan:** the Quality First Select Access Plan is a new, lower-cost option. It will replace the State BlueCare Prime Plus POS plan.
- **Medical Decision Tool:** answer some simple questions that will help you compare plans.

**QUALITY FIRST
SELECT ACCESS**

**PRIMARY CARE
ACCESS**

STANDARD ACCESS

EXPANDED ACCESS

OUT-OF-AREA

PREFERRED*

(CLOSED TO NEW ENROLLMENT)

COMPARE PLANS: MEDICAL



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New!

FEATURES ▼	PLANS ▶	Quality First Select Access	Primary Care Access (POE-G)	Standard Access (POE)	Expanded Access (POS)
Primary Care Physician		Not Required	Required	Not Required	Not Required
PCP Referral		Not Required	Required	Not Required	Not Required
Includes In- and Out-of-Network Coverage		Yes	No	No	Yes
Provider Network Size		Limited	Broad	Broad	Broad
Premiums (view rates on Care Compass)		Lowest	Lower	Midrange	Highest

The State Preferred Point of Service plan is closed to new enrollments. The Out-of-Area plan is only available in specific situations when someone moves out of state.

WHAT'S NEW: DENTAL



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- Dependent Dental Coverage Extended Through Age 26
- Dependents previously removed from the plan can be added back to the plan during Open Enrollment
- Dependents turning age 26 will remain on the plan through the end of the calendar year.



COMPARE PLANS: DENTAL



FEATURES ▼	PLANS ▶	Cigna Dental Care DHMO Plan	Total Care DHMO Plan	Enhanced Plan	Basic Plan
Primary Care Dentist		Required	Required	Not Required	Not Required
Referred from Primary Care Dentist		Required	Required	Not Required	Not Required
In- and Out-of-Network Coverage*		No	No	Yes	Yes
What you pay when you get care		Copays	Coinsurance	Coinsurance	Coinsurance

**When you visit an out-of-network dentist, you are responsible for all charges above the maximum allowable charge—the amount the plan would have paid if you had visited an in-network dentist.*

WHAT'S NEW: PHARMACY



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PRUDENTRX

- Specialty Drug Discount Program
- Members that require specialty drugs will be enrolled in PrudentRx that will lower out-of-pocket costs to \$0.
- Members can opt out during Open enrollment.



COMPARE COSTS: PHARMACY



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	Maintenance Drugs 90-Day Supply	Non-Maintenance Drugs 90-Day Supply	Diabetes Maintenance Drugs 90-Day Supply	HEP Chronic Conditions
Generic	\$5-\$10*	\$5-\$10*	\$0	\$0
Preferred brand name	\$25	\$25	\$0	\$5
Non-preferred brand name	\$40**	\$40**	\$0	\$12.50
Out of Pocket Maximum	\$4,600 per individual /\$9,300 per family			

* \$5 for lower-cost generic drugs, \$10 for higher-cost generic drugs

**\$25 if your physician certified the non-preferred brand name drug is medically necessary

WHAT'S NEW: HEP



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- HEP requirement for colonoscopy now begins at age 45.
- Non-compliance letters have been mailed.



2022 HEP REQUIREMENTS



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PREVENTIVE SCREENINGS	AGE						
	0-5	6-17	18-24	25-29	30-39	40-49	50+
Preventive Visit	1 per year	1 every other year	Every 3 years	Every 3 years	Every 3 years	Every 2 years	Every year
Vision Exam	N/A	N/A	Every 7 years	Every 7 years	Every 7 years	Every 4 years	50-64: Every 3 years 65+: Every 2 years
Dental Cleanings*	N/A	At least 1 per year	At least 1 per year	At least 1 per year	At least 1 per year	At least 1 per year	At least 1 per year
Cholesterol Screening	N/A	N/A	Every 5 years (20+)	Every 5 years	Every 5 years	Every 5 years	Every 5 years
Breast Cancer Screening (Mammogram)	N/A	N/A	N/A	N/A	N/A	1 screening between age 45-49**	As recommended by physician
Cervical Cancer Screening (Pap Smear)	N/A	N/A	Every 3 years (21+)	Every 3 years	Pap smear only every 3 years or Pap and HPV combo screening every 5 years	Pap smear only every 3 years or Pap and HPV combo screening every 5 years	Pap smear only every 3 years or Pap and HPV combo screening every 5 years to age 65
Colorectal Cancer Screening†	N/A	N/A	N/A	N/A	N/A	40-44: N/A 45+: Colonoscopy every 10 years, Annual FIT/FOBT to age 75 or Cologuard screening every 3 years	

WWW.CTHEP.COM
(877) 687-1448

For those with a chronic condition: The household must meet all preventive and chronic requirements to be compliant.

* Dental cleanings are required for family members who are participating in a dental plan sponsored by your employer

** Or as recommended by your physician

† NEW: colorectal screening age requirements lowered to 45 years of age for calendar year 2022 as recommended by US Task Force on Preventive Services

FINDING PROVIDERS



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What you'll need:

List of current doctors/dentists
Anthem and/or Cigna ID cards

ANTHEM (MEDICAL)

- anthem.com/statect
- open menu, select "Find Care"
- select your plan: "Quality First" or "All Other Provider Types"
- enter ZIP code, address, name or specialty type

CIGNA (DENTAL)

- stateofct.cigna.com
- click "Find a Dentist"
- search by available criteria
- check to make your dentist is in your plan's network

QUESTIONS?



To ask questions, please use the Q&A function on your screen.

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Learn more:

carecompass.ct.gov/openenrollment

Care Compass - State of CT Benefits

carecompass.ct.gov

(866) 611-8005

facebook.com/carecompassCT

Health Enhancement Program (HEP)

cthep.com

(877) 687-1448

HEPquestions@Connect2YourHealth.com

Anthem - Medical Benefits

(800) 922-2232

anthem.com/statect

 **Sydney Health**

Cigna - Dental Benefits

(800) 244-6224

stateofct.cigna.com

 **MyCigna**

CVS - Pharmacy Benefits

(800) 318-2572

caremark.com

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