



## Office of the State Comptroller

*Health Care Policy and Services Division*

165 Capitol Avenue

Harford, CT 06106

# STATE MARSHAL HEALTH BENEFIT PARTICIPATION POLICY

**Effective Date:** October 1, 2025

**Administering Agency:** Office of the State Comptroller, in coordination with the State Marshal Commission

**Authority:** CT General Statute §5-259 as implemented in 2025HB-07287

## 1. Purpose

This policy establishes eligibility criteria, enrollment procedures, and attestation requirements for state marshals to participate in state-sponsored health benefit plans at the same cost share rate as active state employees.

## 2. Eligibility Criteria

Any state marshal may enroll in the health plan and pay 100% of the full premium for coverage. If all of the following requirements are met, they are then eligible to pay the same premium share as an active state employee:

### 1. Hours of Work

- The marshal works at least twenty (20) hours per week on average, measured on a quarterly basis.

### 2. Qualifying Service Activities

- The marshal is actively engaged in at least one of the following:
  - Service of process under a waiver of fees issued pursuant to section 52-259b;
  - Service of process of orders of protection under section 46b-15 or 46b-16a;
  - Service of capias mittimus orders issued by a family support magistrate pursuant to section 46b-231.

### 3. Quarterly Certification

- The marshal files an attestation of compliance with the State Marshal Commission on or before April 15, July 15, October 15, and January 15 for the preceding calendar quarter.

### 4. No Access to Equivalent Coverage

- The marshal does not have access to health coverage through:

- A spouse's employer, if that coverage is at least equivalent in actuarial value and provider access and the premium share is not greater than that of active state employees; or
- The Municipal Employees' Retirement System (MERS).

### 3. Participation Terms

- Participation is voluntary.
- State Marshals who enroll and provide quarterly attestation shall pay the same premium share as active state employees.
- State Marshals wishing to enroll a qualifying dependent must submit appropriate documentation to confirm eligibility.
- While paying the same premium share as active state employees, State Marshals must also meet all other active employee plan rules, including participation in the Health Enhancement Program. Should they choose not to participate in the Health Enhancement Program they will be billed an additional \$100 per month.
- State Marshals may enroll or update enrollment in health benefits following either:
  - Effective October 1, 2025 with the inception of the State Marshal Health Benefit Participation Policy,
  - First of the month following initial hire as a State Marshal,
  - First of the month following loss of coverage from another source, or
  - Annually during Open Enrollment, typically in May for coverage updates beginning July 1<sup>st</sup>
- All State Marshals, or enrolled dependents, over age 65, or otherwise eligible for Medicare, must enroll in Medicare parts A and B at their first opportunity for enrollment. Medicare eligible participants will be enrolled in the State of CT Medicare Advantage plan.
- State Marshals must make timely payments for any premiums directly to Anthem Blue Cross and Blue Shield. If payments are 60 days past due, the State Marshal will be sent notification advising pending termination for non-payment if payment is not submitted. The marshal will then have 15 days from the date they receive the letter to make payment. If payment is not received within 15 days, the State Marshal's health benefits will be terminated. Individuals terminated for non-payment may not re-enroll in benefits until the following Open Enrollment period.

### 4. Administration

- The State Marshal Commission shall:
  - Send quarterly reminder notices to all State Marshals requesting updated attestation forms.
  - Provide the Office of the State Comptroller with a quarterly list of all current State Marshals. List should be sent to [osc.benefitcorrections@ct.gov](mailto:osc.benefitcorrections@ct.gov).

- Collect official enrollment forms and attestation forms and share this collected information with the Office of the State Comptroller.  
Documentation should be sent to: [osc.benefitcorrections@ct.gov](mailto:osc.benefitcorrections@ct.gov).
- The Office of the State Comptroller shall:
  - Provide quarterly confirmation to eligible State Marshals of their status
  - Provide Anthem Blue Cross and Blue Shield and/or Aetna with eligible enrollees and billing rates. Anthem enrollments should be submitted to: [sppcobra@anthem.com](mailto:sppcobra@anthem.com). Aetna enrollments will be submitted to [stateofconnecticutmedicare@aetna.com](mailto:stateofconnecticutmedicare@aetna.com) using custom platform.
- Anthem Blue Cross and Blue Shield will administer premium collection and plan coverage for all non-Medicare participants. Aetna will administer premium collection and plan coverage for all Medicare participants after January 1, 2026.