

H.R. 1 HUSKY D (MEDICAID) CHANGES

MATERIALS FOR PROVIDERS AND COMMUNITY-BASED ORGANIZATIONS

Summary of Changes and FAQs



Summary of Changes Core Content

Intended audience: Healthcare providers, hospital/health system staff, community-based organizations

Uses: Content can be used in a letter, internal email, intranet message, staff trainings. Different pieces of the following content can be used for different educational needs and quick reference points.

Goal: Lead with a simple summary and then follow with a detailed breakdown of what is known about the HUSKY D changes to raise awareness so those supporting Medicaid enrollees can better assist patients, share early information, and prepare for implementation.

Content:

Preparing to Support Patients Through Upcoming HUSKY D Changes

We are sharing early information to help *[healthcare providers, hospital staff, and community-based organizations]* prepare for upcoming changes to Medicaid (HUSKY Health) eligibility rules. This information specifically pertains to HUSKY D coverage and new work rules. Early education and outreach is critical to help individuals understand new rules and keep their coverage.

While many details are still being finalized by the federal government, several key changes adopted in the federal bill known as H.R. 1, or the One Big Beautiful Bill Act, will take effect beginning **January 1, 2027** that will impact the HUSKY D population in Connecticut, though not all HUSKY D members will be affected. HUSKY D members who must fulfill the work rules will receive information from the Department of Social Services (DSS). Because these changes may require members to show proof that they work, attend school, volunteer, or are unable to work in order to keep their coverage, it's important to raise awareness early. **Impacted populations should be encouraged to make sure their contact information with DSS is up to date and to start preparing now.** Additional guidance will be shared as more details become available.

Anticipated Changes Include:

- New work, education, and community service/volunteer rules for certain adults enrolled in HUSKY D
 - Those enrolled in HUSKY D without an exemption to the new requirement will need to meet at least one of the following in order to maintain HUSKY D coverage: earn \$580+/month, complete 80 hours/month of work, community service, volunteer work, training (or a combination), **or** be enrolled in school at least half-time

- More frequent eligibility renewal requirements for HUSKY D members (every 6 months starting in 2027)
- Changes to retroactive Medicaid coverage (limits on how far back medical bills may be covered)

Please note, the changes to HUSKY D are in addition to other Medicaid eligibility rule changes for certain non-citizen populations (effective October 1, 2026) and changes to SNAP eligibility already implemented. The following information pertains specifically to HUSKY D changes.*

How Providers and Community Partners Can Help Medicaid Beneficiaries Now:

Stay informed and empower patients with actions they can take.

By building awareness early and communicating proactively, providers can help minimize coverage disruptions and better support patients through upcoming changes.

- **Encourage patients to keep their contact information current so they receive timely notices and renewal information from DSS, including if the reporting requirements apply to them.** Patients can visit the HUSKY Health *Update Us So We Can Update U* page at portal.ct.gov/UpdateUsDSS to find out how to update their address, email, and phone number with DSS or Access Health CT. HUSKY D members can also call Access Health CT at **1-855-805-4325** to update their contact information
- **Remind patients to open and respond to all mail** related to their HUSKY Health coverage. Remind patients to be on the lookout for important information from DSS, HUSKY Health, and Access Health CT, and to respond promptly to requests for information
- **Raise awareness about how the Department of Social Services (DSS) will communicate via text.** Authorized text messages come from the DSS short code 60302 and the DSS Benefits Center number 1-855-626-6632. DSS text messages will **always** include the client’s first name and the last four digits of Client ID number. Encourage clients to save DSS contact information, so they always know when the call or text is coming from DSS
- **Begin raising awareness** with patients — especially those enrolled in HUSKY D — about upcoming requirements

*Updated eligibility rules for certain non-citizen populations (distinct from HUSKY D changes):

- Effective October 1, 2026, individuals such as refugees, asylees, trafficking victims, humanitarian parolees and more who currently qualify for HUSKY Health will no longer be eligible due to their immigration status
- Non-citizen populations still eligible after October 1, 2026, include Lawful Permanent Residents (LPRs) with LPR status for 5 or more years, Cuban/Haitian entrants (CHE), and Compacts of Free Association (COFA) Citizens

- **Integrate messaging into outreach and care coordination efforts** to ensure patients are not caught off guard
- **Strengthen your knowledge of the changes as well as existing resources and support** by reviewing the DSS and CHA FAQs and related materials to help prepare your team to answer patient questions and provide support. These changes will not apply to everyone, and assistance will be available for those affected. It is important for patients to feel informed and empowered so they can prepare ahead of changes taking effect January 1, 2027. Providers are encouraged to regularly review the state’s H.R. 1 resources for the latest information for both Medicaid beneficiaries and healthcare providers on how the federal requirements passed in H.R. 1 may impact Medicaid enrollees in Connecticut.
- **Stay Connected to the Latest Patient Support Information:** If you are interested in becoming a DSS “Community Partner” so that you can assist Connecticut residents in applying for benefits at access points in their community please send a request to DSS.PartnerSignUp@ct.gov. To sign up for the Community Partner newsletter, [click here](#). For information about the Community Partner program and how to sign up please go to: [Special for Service Partners--How To](#)

KEY CHANGES FOR ADULTS ON HUSKY D:

- Work/community engagement requirements for HUSKY D enrollees — if not exempted or excluded — are effective January 1, 2027 (income of \$580 or more a month, complete 80 hours/month of work, community service and volunteer work, training, or be enrolled at least half-time in school, or a combination)
- Renewals required every 6 months (instead of 12)
- Retroactive HUSKY D coverage reduced to 1 month (from 3)
- If not exempt from the work rules at initial application, eligibility includes a 1-month look back at work requirement compliance
- At renewal, there will be a 6-month look back to verify the individual met work/community engagement requirements or was exempt from requirements during at least 1 calendar month

The Types of HUSKY Coverage in Connecticut:

HUSKY A covers low-income children, caretaker relatives, and pregnant and postpartum people.

HUSKY B is CHIP for children in higher-income families.

HUSKY C covers adults who are aged, blind, or disabled.

HUSKY D covers low-income adults without dependent children. (approximately 1 out of every 3 individuals enrolled in HUSKY)



Who has to meet these work rules?	Who does <u>not</u> have to meet the work rules?
<p>Adults on HUSKY D who:</p> <ul style="list-style-type: none"> • Are 19-64 years old • Are not a parent/caretaker relative of a child under 19, or a disabled individual • Can work (physically and mentally) <p>If you are a part of this group, you have to meet the work, education, and community service/volunteer work rules.</p>	<p>You do <u>not</u> have to meet the work rules if you are:</p> <ul style="list-style-type: none"> • On HUSKY A, B, C, or Limited Benefit • Pregnant or postpartum (12-months post pregnancy) • A Foster or Former Foster Care youth under age 26 • An American Indian or Alaska Native • A Veteran with a total disability rating • Medically frail individuals (e.g. blind, disabled, children with serious emotional disturbances, adults with serious mental illness, chronic substance use disorders, serious and complex medical conditions) • Participating in a drug or alcohol treatment and rehabilitation program • Already meeting work requirements for TFA (Temporary Family Assistance) or receiving SNAP (Supplemental Nutrition Assistance Program) without a work rule exemption • A parent, guardian, or caretaker relative of a dependent child under 19 • A parent, guardian, or caretaker relative of an individual with a disability • An individual who was in jail or prison in the last 90 days • An individual now in or who was recently in the hospital, or a patient in a nursing facility, intermediate care facility, or psychiatric hospital • An individual that needs to travel outside of their local area for long periods of time to get medical care for themselves or their child <p>Individuals may need to provide proof that they meet one of the above conditions.</p>

What kind of activities meet the work/community engagement requirement?

To meet the HUSKY D work rules you must have at least one of the following:

- Monthly income of at least \$580/month, **or**
- At least 80 hours per month of work, **or**
- At least 80 hours per month of community service/volunteer work, **or**
- At least 80 hours per month of qualified work or training program participation, **or**
- Enrolled at least half-time in an education program, **or**
- Any combination of the above totaling at least 80 hours per month

What is not yet known?

- What documentation/verification can be used to show compliance for requirements or exemption
- Parameters for 'medically frail' and 'special medical needs' exemptions

Federal government must define by June.

HUSKY D Changes FAQ

Intended audience: Healthcare providers, hospital/health system staff, community-based organizations

Uses: Content can be used to inform training and guidance for providers in handling conversations with patients/HUSKY D members to best support them in understanding new rules to maintain their health coverage

Goal: Provide easy to use FAQs, aligned with DSS to ensure uniform, clear answers to key questions

Content:

MEDICAID WORK REQUIREMENTS – HUSKY D

Who has to meet these work rules?

Adults on HUSKY D who:

- Are 19-64 years old
- Do not live with a child under age 14
- Who can work (physically and mentally)
- If they are part of this group, they have to meet the work rules.

Who does not have to meet the work rules?

Individuals do not have to meet the work rules if they are:

- On HUSKY A, B, or C
- Pregnant or postpartum
- A Foster or Former Foster Care youth under age 26
- An American Indian or Alaska Native
- A Veteran with a total disability rating
- Medically frail individuals (e.g. blind, disabled, children with serious emotional disturbances, adults with serious mental illness, chronic substance use disorders, serious and complex medical conditions)
- Participating in a drug or alcohol treatment and rehabilitation program
- Individuals already meeting work requirements for SNAP and/or TFA cash
- A parent, guardian, or caregiver of a dependent child under age 14
- A parent, guardian, or caregiver of an individual with a disability
- An individual released from incarceration, for 90 days post release
- An individual with a short-term hardship waiver

Individuals may need to provide proof that they meet one of the above conditions.

What kind of activities meet the requirement?

To meet the Medicaid (HUSKY Health) work requirement, individuals must have at least one of the following:

- Monthly income of at least \$580/month, **or**
- At least 80 hours per month of work, **or**
- At least 80 hours per month of community service, **or**
- At least 80 hours per month of qualified work or training program participation, **or**
- Enrolled at least half-time in an education program, **or**
- Any combination of the above totaling at least 80 hours per month

When do Medicaid work requirements start?

Work requirements for Medicaid are effective January 1, 2027.

What are the eligibility requirements/income guidelines related to salary to be eligible for HUSKY D? If a member is now working and earning income to meet the work requirement, how much income would disqualify them for the benefit?

Income guidelines are available on the DSS/HUSKY Health Website here: portal.ct.gov/dss/knowledge-base/articles/fact-sheets-and-brochures-articles/income-tables-articles/husky-income-charts

What can Medicaid/HUSKY D members do now?

HUSKY D members can make sure the Department of Social Services/HUSKY Health/Access Health CT has their current contact information NOW. They'll need it to send important updates including if new work reporting requirements apply to them. If a patient/HUSKY D members moves gets a new phone number, or changes their email address, they should update it with the state right away by visiting [Portal.ct.gov/UpdateUsDSS](https://portal.ct.gov/UpdateUsDSS) or calling Access Health CT at **1-855-805-4325**

Where can Medicaid/HUSKY D members get help?

They can visit portal.ct.gov/dss/all-programs/dss-benefits-and-hr1/hr1-for-members to stay up to date as we finalize the new reporting requirements. To reach the DSS Benefits Center for other questions, call **1-855-626-6632**.

What can patients who don't have Medicaid/HUSKY D now do if they may be eligible?

If a patient doesn't have Medicaid now and thinks they are eligible, they shouldn't wait to apply. Medicaid enrollment is available all year. If they apply in 2026, they will not have to meet work reporting requirements when they apply. They may need to meet these requirements in 2027 when they renew their coverage.

Is more information coming?

Yes. HUSKY D members should keep an eye out for more information from DSS, HUSKY Health, and Access Health CT about work reporting requirements and whether they apply to an individual.

RENEWAL FREQUENCY

When will the change to how often a renewal for HUSKY D is due happen?

Effective January 1, 2027.

Will I have to complete a renewal more often?

Adults on HUSKY D will have to complete a renewal every 6 months instead of every 12 months.

RETROACTIVE MEDICAID/CHIP COVERAGE (HUSKY HEALTH)

When does the change to retroactive coverage take effect?

Changes to retroactive coverage take effect for HUSKY Health applications submitted on or after January 1, 2027.

What is the change to retroactive coverage for adults on HUSKY D?

Limits retroactive coverage for adults applying for HUSKY D to 1 month instead of 3 months.

What is the change to retroactive coverage of other types of HUSKY Health?

Limits retroactive coverage for other HUSKY Health recipients to 2 months instead of 3 months.

What is the change to retroactive coverage for HUSKY B (CHIP) programs?

Provides states with the option to offer 2 months of retroactive coverage for HUSKY B (CHIP) programs.

COST SHARING REQUIREMENTS FOR HUSKY D

When does cost sharing for HUSKY D start?

Cost sharing for HUSKY D starts October 1, 2028.

Who will have to pay cost-sharing?

HUSKY D adults with incomes over 100% of the [federal poverty level](#) (FPL).

How much will I have to pay for cost-sharing?

The amount of cost-sharing can be decided by the state but must be more than \$0 and cannot be more than \$35 per item or service. Total cost-sharing cannot exceed 5% of the individual's or family's income.

Do I have to pay for all medical services?

Certain services will not have cost-sharing:

- Primary care
- Prenatal care
- Pediatric care

- Emergency room care (except for non-emergency care provided in emergency rooms)
- Services provided by a Federally Qualified Health Center

MAXIMUM HOME EQUITY LIMIT FOR LONG-TERM SERVICES AND SUPPORTS

When will the maximum home equity limit change?

Effective October 1, 2028.

What does the change to the maximum home equity limit mean?

Sets a maximum home equity limit of \$1 million for the purpose of determining eligibility for long-term services and supports.

MEDICAID NON-CITIZEN ELIGIBILITY CHANGES

When do changes to non-citizen eligibility for Medicaid (HUSKY Health) happen?

Changes are effective October 1, 2026.

Who will no longer be eligible for Medicaid (HUSKY Health) due to changes in non-citizen eligibility?

Effective October 1, 2026, individuals such as refugees, asylees, trafficking victims, humanitarian parolees and more who currently qualify for HUSKY Health will no longer be eligible due to their immigration status.

Who is still eligible after changes in non-citizen eligibility?

Lawful Permanent Residents (LPRs) with LPR status for 5 or more years, Cuban/Haitian entrants (CHE), and Compacts of Free Association (COFA) Citizens.