



# Partners for a Healthy Connecticut

## CT Partnership Plan – Overview

Public Act 11-58 opens the CT State Employee Health Benefits Plan to non-state government employers.

### **Name: CT Partnership Plan**

**Governance:** CT Comptroller's Office with approval from the Health Care Cost Containment Committee

**Effective Date:** July 1, 2012 for Municipalities and BOE's

**Benefits offered:** State Preferred Plan with Point of Service (POS) national network

**Carrier Choice:** The medical, dental and vision carrier is UnitedHealthcare; the pharmacy benefit is administered by CVS Caremark

**Rate Stability:** Renewal rate = State Plan % change +/- 3%

### **Initial Group Rate:**

New Rate = Projected claims

- current risk charge
- current administration costs
- +/- adjust for state benefits
- + state administration costs
- + 3.5% rate stabilization reserve

Calculated by Milliman Consulting

Over 50 non-state groups tested had lower rates with the CT Partnership Plan; 30% had rate reductions greater than 5%

### **Health Enhancement Program (HEP)**

- 12 month phase-in
- Members have 12 months to obtain physical exams and required screenings

### **Commitment: 2 year minimum**

If a group leaves after two years AND has negative claim experience, the group could have an exit penalty of:

- After two years: 5% of last year's premiums
- After three years: 3%
- After four years: 2%
- After five years: 0%

**Self Funded groups: May incur "run-in" claims and pay "run out" upon termination**

**Retirees: Option to move to the state plan**

**Other options: Two dental plans (with optional orthodontia) and one vision rider option**

For more information contact the Office of the State Comptroller, Healthcare Analysis Unit at 860-702-3560 or by email at [PartnershipPlan@po.state.ct.us](mailto:PartnershipPlan@po.state.ct.us).

