## Key Facts About Connecticut Medicaid



Connecticut Medicaid improves the health and well-being of people.

Covers over **800,000 Connecticut citizens** (22% of the state population) who live in all 169 towns



Covers four out of ten births, statewide



- Covers over 70% of all nursing home residents, and also covers home and community-based services for older adults and people with disabilities
- Has increased use of preventative care from CY 15 to CY 17 by over 16%, supporting school readiness for children and work readiness and stability for adults



Has decreased hospital admissions from CY 15 to CY 17 by almost 5%, reflecting people receiving preventative care and resulting in cost savings Connecticut Medicaid is efficient and financially accountable.

Has reduced per person costs more than any other state in the country, Medicare or private plan

Health Affairs' July 2017 issue (Vol. 36, No. 7) reported that Connecticut's Medicaid program led the nation in controlling cost trends on a per enrollee basis.

→ Is a lean, efficient self-insured model, with administrative costs of 3.2%



- Is the largest source of federal funding in the Connecticut state budget almost 60% of Medicaid and 88% of CHIP is federally funded
- Is a good investment in the future of people, and represents the lowest share of the state general fund budget of all New England states



Represents almost 20% of all health care spending in the state, including commercial and self-insured