Meeting Summary for MAPOC (Full Council) Zoom Meeting

Oct 10, 2025 12:55 PM Eastern Time (US and Canada) ID: 992 5101 9595

Quick recap

The MAPOC October meeting began with introductions and agenda discussions, including confirmation of attendance and note-taking policies only to use the Zoom version. The Department of Social Services team presented updates on various legislative implementations and health programs, including changes to the Katie Beckett program and Medicaid coverage expansions. The meeting focused heavily on the implementation of work requirements and new call center systems, with discussions covering staffing needs, technological improvements, and data verification methods for program eligibility.

Next steps

- DSS to provide MAPOC with a detailed list of approved positions for HR1 implementation, including call center staff and other positions.
- DSS to continue refining data analysis to identify more Husky D members who may be exempt from work requirements.
- DSS to explore additional data sources to better identify working Husky D members, including gig workers and self-employed individuals.
- DSS to develop FAQs for the Home Care Worker Registry implementation.
- DSS to implement the new Interactive Voice Response system in Q4 2025 through early 2026.
- DSS to explore fast-track processes for urgent medication needs during HR1 implementation.
- DSS to engage with member advisory councils and community partners for feedback on work requirements implementation.
- DSS and ICAN to present at the next Women and Children's Health Subcommittee meeting about optimizing the Husky Family Planning Benefit.
- Care Management Subcommittee to discuss non-medical transportation from MTM and PCMH+ updates at their November 12th meeting.
- Complex Care Committee to meet next Thursday to discuss Medicare Advantage plans and Medicare changes for 2026.

Summary

Legislative Meeting

The meeting began with introductions and attendance updates, with Rep. Jillian confirmed as the chair. It was mentioned that the meeting was live on CTN.

Legislative Updates on Autism Services

The MAPOC October meeting began with Co-Chairs Rep. Jillian and Senator Lesser discussing the agenda, followed by a clarification of the AI note-taking policy, which confirmed that only official Zoom-generated notes would be used. Co-Chair Senator Anwar joined the meeting and praised DSS staff for their ongoing efforts amidst challenging circumstances. The DSS team, led by Bill Halsey, presented updates on several legislative implementations, including lowering the maximum age for Katie Beckett participants, conducting a statewide autism needs assessment, expanding Medicaid coverage for gene therapies, and participating in various working groups

and task forces. The team also discussed plans to finalize a state plan amendment for autism services under HUSKY B, with a target submission date in October 2025.

Health Programs and Eligibility Updates

The meeting focused on updates and discussions regarding various health and welfare programs, including the Katie Beckett program, the Home Care Worker Registry, and SNAP eligibility. Bill Halsey and Rep. Gilchrest highlighted the positive impact of changing the age criteria in the Katie Beckett program, which is expected to improve the waiting list. Tracy Wodatch raised concerns about the burden of the six-month eligibility verification for the HUSKY D population, and Christine Weston explained that the Department of Social Services is addressing questions about the Home Care Worker Registry implementation. She wanted to provide clarification on the statement made that the individuals on the Katie Beckett Waiver are HUSKY D. Katie Becket Waiver recipients under the age of 21 have access to HUSKY A and those already with disability determination and over 18 have access to HUSKY C. Peter Hadler clarified that SNAP redeterminations would generally occur annually, but there might be opportunities to streamline processes across programs in the future.

Medicaid Work Requirements Overview

Deputy Commissioner Peter Hadler presented an overview of Medicaid work requirements, focusing on the impact of upcoming changes and the agency's preparation efforts. He explained that they have been approved to submit an advance planning document to CMS for funding, are enhancing staffing, and are analyzing data to identify potential exemptions. Peter clarified that HR1 affects only the expanded HUSKY D population, not HUSKY A adults. Rep. Gilchrest asked about the approval of enhanced staffing, to which Commissioner Andrea Barton Reeves responded that staffing is determined through partnerships with OPM and available resources.

HR1 Budget and Implementation Challenges

The meeting focused on budget allocation for HR1 and its implementation challenges. Commissioner Barton Reeves explained that resources could be redirected to HR1 within the current budget, and Deputy Commissioner Easha Canada detailed various technological solutions being explored to streamline the process, including income verification, community engagement data sources, and fast-tracking for exempt individuals. Senator Anwar raised concerns about the increasing workload and the need for a fast-track process for urgent cases, which Easha agreed to investigate further.

HR1 Project Staffing Expansion

The meeting discussed the approval of additional positions for the HR1 project, including call center staff and contractors, with a focus on using a combination of existing staff, vendors, and new hires to meet urgent needs. Leslie presented improvements made to the Eligibility Operations Call Center over the past two years, including the establishment of a Tier 1 service delivery model, virtual hold options, document upload features, and text messaging for renewals. The presentation also covered upcoming changes, such as the implementation of a new interactive voice response system and the launch of an online chatbot named Laurel, with plans to train over 900 staff members and develop an outreach plan for community partners.

IVR System Implementation Planning

The team discussed a new IVR system implementation planned for Q4 2025, which will include a 24/7 self-service option, simplified service menu, and improved call routing. Easha explained that the rollout will be iterative, starting with worker system access and then progressing through different programs like SNAP, TANF, medical, and LTSS over 3-4 months. The team is hiring 30 call center staff (24 agents, 3 leads, 3 supervisors) and will augment this with a third-party

vendor to handle increased call volumes due to upcoming SNAP work requirements, with implementation starting as early as November/December 2023.

Call Center System Implementation Plan

The meeting focused on the implementation of a new call center system, which will use both external vendors and DSS staff, including 30 call center staff. Easha explained that the new system will feature real-time data analytics, a "whisper" feature for sentiment tracking, and a tap-in model for agent support. The team discussed leveraging community partners to assist with non-eligibility determinations, though they noted limitations due to merit staff definitions. Commissioner Barton Reeves mentioned that community action agencies have already expressed willingness to support the transitions, particularly in guiding people through work requirements. The discussion concluded with questions about data sharing and SAGA cash recipients, with Peter Hadler agreeing to verify and discuss further at a future meeting. https://portal.ct.gov/dss/-/media/departments-and-agencies/dss/common-elements/husky-health-partners/husky-health-program-performance-dashboard---july-2025.pdf

Exploring Worker Qualification Data Sources

The team discussed concerns about the low percentage (27%) of qualifying workers based on current data, with Ellen Andrews expressing surprise and questioning the methodology. Peter explained that the figure represents those meeting income thresholds using Department of Labor quarterly wage data, but acknowledged the need to explore additional data sources, including client consent-driven data and more current income information, as CMS guidance is pending. The discussion also touched on medically frail populations, with Ellen suggesting they could leverage existing research and claims data to better understand chronic conditions among beneficiaries.

Medical Frailty Verification Strategies

The group discussed strategies for identifying and verifying medical frailty among program participants, with Peter explaining they are actively exploring options and definitions while awaiting final federal guidance. Ellen emphasized the importance of using self-attestation for caregivers and community volunteers, suggesting it could be simplified through home care workers' assessments rather than requiring a detailed 10-page form. Commissioner Barton Reeves noted that while self-attestation is their preference, they lack federal guidance on its implementation and must wait for rules regarding its acceptability. Karen Siegel expressed appreciation for the department's thoughtful approach and asked about member engagement in the review process, though the transcript ends before this question is addressed.

Data Sources and Engagement Strategies

The team discussed data sources and system changes, with Peter Hadler and Bill Halsey mentioning feedback loops and opportunities for beneficiary engagement. Easha and Les Cropley talked about IVR testing with client surveys, while Karen suggested involving community partners in outreach and messaging. Sheldon Toubman raised concerns about work requirements for Medicaid recipients, emphasizing the need for partnership and collaboration. The discussion also covered staffing in the call center, with questions about the percentage increase in DSS staff handling complex issues.

Call Center Staffing and Metrics

The meeting focused on staffing and call center operations at the eligibility center. Easha explained that they have a rolling backfill process for new staff and are working to increase staffing as they implement work requirements for SNAP and Medicaid. Les discussed their current metrics for call center performance, including average hold times and abandoned rates. Peter presented data on exempt populations, noting that the current 7% figure for other exemptions would likely decrease as they develop more accurate verification methods. The group agreed on the importance of partnerships with community groups to ensure proper implementation of the broad statutory exemptions.

Call Center Wait Time Improvements

The committee discussed wait times at call centers, with Les reporting that Tier 2 members experience a 15-minute hold time, while Tier 1 members wait 11 minutes. Representative Dathan stated that for the November Care Management Committee meeting that there will be an NEMT update and the PCMH+ program would be discussed as to what would replace it. Representative Hughes expressed concern about complex care patients and emphasized the need for improved user experience during transitions to IVR systems with the PACE program to be reviewed for the November Complex Care Committee meeting with presentations from Claire Volain and Kathy Holt of OHA. Tracy requested a dedicated line for home health providers to assist with eligibility and redeterminations. The committee also reviewed updates on the HUSKY Family Planning Benefit, including plans to move the application to a main website and implement auto-enrollment for losing coverage. Rep. Sarah Keitt and Amy Gagliardi discussed upcoming presentations on optimizing the benefit and maternal health data for the Women & Children's Health Committee meeting on November 10, 2025.

From Ellen Andrews:

JAMA article on chronic conditions in the ACA expansion population
https://jamanetwork.com/journals/jama/fullarticle/2839637

JAMA article on chronic conditions in the ACA expansion population
https://jamanetwork.com/journals/jama/fullarticle/2839637