

Starting in 2023, Health Connector coverage will include new benefits, protections, and reduced cost-sharing to advance health equity objectives. The Health Connector is among the leaders of state-based marketplaces in leveraging its plan certification process to explicitly advance and invest in targeted health equity priorities.

- Informed by state and national health policy research and data, and stakeholder engagement, Health Connector staff identified health equity concerns in the health coverage landscape and designed its 2023 Seal of Approval plan certification process to advance objectives tailored to address those equity issues.
- The 2023 Seal of Approval addresses the opportunity to address equity issues related to the racially disparate incidence of key chronic conditions (e.g., diabetes, asthma, coronary artery disease, and hypertension) and how they relate to inequities in health outcomes, disparities in foregone health care services due to cost concerns, and disparate burdens associated with medical debt. These issues – if left unaddressed – further exacerbate health status and life expectancy disparities, as well as economic inequities.
- The Seal of Approval for 2023 also prioritizes equity objectives as they relate to behavioral health care access, gender-affirming care, meaningful access to care for residents with limited English proficiency and/or who are immigrants, and equitable access to provider and carrier choices for all residents obtaining coverage on-marketplace in accordance with the spirit of state health reform and the Affordable Care Act.

Health equity problem	Targeted Health Connector 2023 Seal of Approval response
<ul style="list-style-type: none"> • Health disparities in health status and chronic conditions by race and ethnic group • Disparities in foregone care due to cost reported by communities of color • Inequities in the incidence of medical debt by race and ethnic groups 	<ul style="list-style-type: none"> ✓ Eliminating cost sharing in ConnectorCare for high-value medications needed for treatment of four select chronic conditions disproportionately affecting communities of color: <ul style="list-style-type: none"> ○ Diabetes ○ Asthma ○ Coronary artery disease ○ Hypertension ✓ Eliminating cost sharing for PCP sick visits in ConnectorCare program to ease access to care setting where many chronic conditions are managed
<ul style="list-style-type: none"> • Inequities among Health Connector enrollees in ability to access full range of on-exchange carrier and provider choices based on income/subsidy eligibility 	<ul style="list-style-type: none"> ✓ Steps to require full carrier participation in ConnectorCare starting in 2024, which will: ✓ Make the ConnectorCare program more equitable for members and better reflect the Health Connector’s commitment to connecting the public it serves to the full market, and avoid operating a “two-tier system” based on income ✓ Increase statewide access, competition, and stability in the ConnectorCare program by protecting against the risk of ConnectorCare members having minimal carrier options or “bare counties”
<ul style="list-style-type: none"> • Disparities by race and ethnic group and LGBTQ+ status in mental health disorder incidence and/or access to behavioral health care 	<ul style="list-style-type: none"> ✓ Encouragement of carriers to incorporate recovery coaches and certified peer specialists into all Health Connector members’ treatment ✓ Will require carriers to contract with Community Behavioral Health Centers for earliest plan year in which they are implemented ✓ Eliminating cost sharing for mental health outpatient visits in ConnectorCare program
<ul style="list-style-type: none"> • Inconsistent or unclear access to gender affirming care and/or care for transgender residents 	<ul style="list-style-type: none"> ✓ Requiring carriers to enhance gender-affirming care case management expertise and work toward establishment of gender-affirming care advisory councils

The Health Connector looks forward to working with carriers, stakeholders, and the broader public and health care community in implementing these initiatives in order to make the health coverage available through the state’s health insurance marketplace as equitable, responsive, and meaningful as possible. The Health Connector is committed to ensuring that the health care access and financial protections afforded by health coverage are equitable to the residents and communities it serves.