

# HEALTH ENHANCEMENT PROGRAM (HEP)

BY THE STATE OF CONNECTICUT AND CARE MANAGEMENT SOLUTIONS -- A CONNECTICARE AFFILIATE

## Welcome to the State of Connecticut Health Enhancement Program (HEP) For Partnership Plans

Care Management Solutions Inc. (CMSI) administers HEP for the State of Connecticut employees and municipalities that join the Partnership. HEP is designed to positively impact the overall health of its participants, and has two components – Preventive Requirements and Chronic Condition Education and Counseling.

### Preventive Requirements

Each enrolled participant must complete age/gender appropriate preventive exams and screenings – see grid on reverse side.

### Chronic Condition Education and Counseling

The HEP program requires participants who have been identified with the following –

- Diabetes (Type 1 or 2)
- Asthma or COPD
- Heart disease/Heart Failure
- Hyperlipidemia
- Hypertension

to read certain educational materials as well as participate in Care Management with a CMSI Registered Nurse if one should call you.

### Why Stay in HEP?

Along with staying healthy, Partnership employees and their dependents who are enrolled in the program receive a number of financial benefits by remaining compliant with the program.

- Lower premium payments – Non-HEP employees pay an additional \$100.00 per month in premium
- Lower out of pocket expenses – Non-HEP employees pay annual \$350 individual (\$1,400 family) in-network medical deductible
- Office Visit copays are waived for visits related to the above chronic conditions
- Lower to \$0 copays for medications used to treat any of the above chronic conditions

### What You Need to Do

The program year is measured on a calendar year basis with the look back period being the end of the year. Your first year of compliance is 2020 and all services need to be completed by December 31, 2020. Going forward each year all requirements will need to be met by December 31<sup>st</sup> of that year.

\*Please note if you were previously enrolled in another Partnership Group, your HEP Compliance year will be determined based off your original enrollment under the Partnership Plan.

Claims are received by CMSI on a weekly basis from your medical and dental carriers which are used to capture compliance. If you have had a service completed prior to insurance coverage under the Partnership Plan that would satisfy one of your requirements, you may need to have a Physician Notification Form (PNF) completed.

You will have access to a website (CTHEP.com) after your insurance goes into effect that you can use to check your compliance status and complete your chronic requirements if appropriate. You will receive reminder emails to visit the web portal to check your status throughout the year.

In addition to the HEP website, we have a dedicated Customer Service team that can assist you with any of your questions regarding the program. You can contact them at 1.877.687.1448 Monday thru Thursday 8:00 a.m. to 6:00 p.m. and Friday 8:00 a.m. to 5:00 p.m. Address: 175 Scott Swamp Rd, PO Box 4050, Farmington, CT 06034-4050 Fax: 1.855.207.1640. Email: HEPquestions@Connect2YourHealth.com

Office of the State Comptroller Website: [www.osc.ct.gov/ctpartner](http://www.osc.ct.gov/ctpartner)

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Please determine your age as of January 1<sup>st</sup> to locate your appropriate age group preventive screenings.

## HEP REQUIREMENTS

PREVENTIVE SCREENINGS	AGE						
	0 - 5	6-17	18-24	25-29	30-39	40-49	50+
Preventive Visit	1 per year	1 every other year	Every 3 years	Every 3 years	Every 3 years	Every 2 years	Every year
Vision Exam	N/A	N/A	Every 7 years	Every 7 years	Every 7 years	Every 4 years	50-64: Every 3 years 65+: Every 2 years
Dental Cleanings*	N/A	At least 1 per year	At least 1 per year	At least 1 per year	At least 1 per year	At least 1 per year	At least 1 per year
Cholesterol Screening	N/A	N/A	Every 5 years (20+)	Every 5 years	Every 5 years	Every 5 years	Every 2 years
Breast Cancer Screening (Mammogram)	N/A	N/A	N/A	N/A	1 screening between age 35-39**	As recommended by physician	As recommended by physician
Cervical Cancer Screening (Pap Smear)	N/A	N/A	Every 3 years (21+)	Every 3 years	Every 3 years	Every 3 years	Every 3 years to age 65
Colorectal Cancer Screening	N/A	N/A	N/A	N/A	N/A	N/A	Colonoscopy every 10 years, Annual FIT/FOBT to age 75 or Cologuard screening every 3 years

**For those with a chronic condition:** The household must meet all preventive and chronic requirements to be compliant.