

CONNECTICUT'S HEALTH CARE RESOURCE GUIDE

INTRODUCTION

To view this document online go to.

<http://uwc.211ct.org/professionals/directories/>

2-1-1'S HEALTH CARE RESOURCE GUIDE is intended to provide information on state, federal and privately purchased health coverage programs for Connecticut residents. The Guide also provides information about obtaining health care when you are uninsured, ineligible for state and federal programs, or unable to pay for the cost of care. We hope that the information in our Guide provides information that will help you understand your options for accessing health care in Connecticut.

On January 1, 2014, the Affordable Care Act was implemented and guarantees that all Americans – regardless of their health status or pre-existing condition – will have access to coverage. Individuals can now apply for affordable health insurance coverage choices in health insurance marketplaces when open enrollment begins each November 1st and ends on December 15th. Visit the [Health Insurance Marketplace](#) to learn more from the federal government website.

In Connecticut, Access Health CT has a health insurance exchange/marketplace, where individuals can go directly to inquire about health insurance, or visit an enrollment center during this enrollment period. Please visit [Access Health CT](http://www.accesshealthct.com) (www.accesshealthct.com) for further information on what constitutes a qualifying event that you may qualify for a Special Enrollment period throughout the year if needed, or call, (855)909-2428.

Or visit our topical paper, "[Access Health CT: Connecticut Health Insurance Exchange](#)" for general information on Connecticut's Health Exchange and links to other fact sheets and tips to help individuals looking for health plan options.

2-1-1 is Connecticut's free, confidential information, referral, and crisis intervention service. We are available by phone 24/7 from anywhere in Connecticut. Just dial 2-1-1 and a trained specialist will answer your call any time of day or night. 2-1-1 is a program of the United Way of Connecticut and the State of Connecticut.

Please visit our website at www.211ct.org to search our on-line databases:

- Statewide Community Resources Database: <http://www.211ct.org>
- 2-1-1 e-Library: <http://www.211ct.org/InformationLibrary/Default.asp>
- Special Directories: <http://uwc.211ct.org/professionals/>
- Child Care Database: <http://www.211childcare.org/>

SOURCE INFORMATION:

Information in this guide was compiled by the United Way of Connecticut/2-1-1 from the following sources: Child Development Infoline; Connecticut Area Agencies on Aging; Connecticut State Departments of Children and Families, Insurance, Labor, Public Health, Rehabilitation Services, and Social Services; Lions Low Vision Centers, and Vision USA; Medicare Rights Center; U.S. Depts. of Health and Human Services, and Veterans Affairs, etc...

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Please report errors or omissions to: (Latest revision 3/2020)

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STATE HEALTH COVERAGE PROGRAMS

THE CONNECTICUT DEPARTMENT OF SOCIAL SERVICES (DSS)

<http://www.ct.gov/dss/site/default.asp> administers many state medical assistance programs for residents of Connecticut who are U.S. citizens or legal residents and who meet program income and asset restrictions. Apply for any of these programs at DSS offices and suboffices (see Appendix) or call the DSS Public Information Line & Benefits Center (855) 626-6632 for general program information. Applicants or clients who disagree with a department decision regarding eligibility or benefits have the right to a Fair Hearing.

■ ACCESS HEALTH CT

www.accesshealthct.com

As of January 1, 2014, the Affordable Care Act guaranteed that all Americans – regardless of their health status or pre-existing conditions – will have access to coverage. Individuals can apply for affordable health insurance coverage choices in health insurance marketplaces which open enrollment starts each year on November 15th and ends on December 15th. Visit the [Health Insurance Marketplace](#) to learn more from the federal government.

In Connecticut, Access Health CT is the health insurance exchange/marketplace. Please visit [Access Health CT](#) for further information, or call 1-855-909-2428

Or visit our topical paper, "[Access Health CT: Connecticut Health Insurance Exchange](#)" for general information on Connecticut's Health Exchange and links to other fact sheets and tips to help individuals looking for health plan options.

■ HEALTHY START

[Link to Healthy Start Application Sites](#)

Program provides full health coverage for income eligible pregnant women, including prescriptions and transportation to medical appointments. There are no premiums, co-pays or deductibles for any Healthy Start covered service. Apply for Healthy Start at DSS regional offices, or at community sites authorized to accept applications. Community sites offer case management for the pregnant woman and for children ages 0 through 2; DSS sites do not. Eligibility:

- Pregnant and postpartum women
 - Connecticut resident
 - U.S. citizen, asylee, refugee, or legal resident.
(women with other types of visas (student, tourist, work visas) are not eligible)
 - Income at or below 263% of the Federal Poverty Level. Certain employment and child care expenses can be used to reduce applied income; Pregnant woman is counted as two family members when calculating income eligibility
 - No asset limit
-

■ HUSKY A & HUSKY B

Connecticut children and their parents or a relative caregiver; and pregnant women may be eligible for HUSKY A (also known as Medicaid), depending on family income. Uninsured children under age 19 in higher-income households may be eligible for HUSKY B (also known

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as the Children's Health Insurance Program). Depending on specific income level, family cost-sharing applies.

- To apply online, visit www.accesshealthct.com, under 'Get Health Coverage.'
- To apply by phone, please call the Access Health CT call center at 1-855-805-HEALTH (4325).

[Note: When looking at the HUSKY family income guidelines, please keep in mind that DSS may not count some income and may also deduct certain expenses. The best thing to do is apply and let DSS determine family's eligibility.]

■ HUSKY C & Medicaid for Employees with Disabilities

Households and individuals who wish to apply for Medicaid for the Aged/Blind/Disabled (HUSKY C), or Medicaid for Employees with Disabilities (MED-Connect), should use the 'W-1E' application. Connecticut residents aged 65 or older, or who are aged 18 up to 65th birthday and who are blind, or who have another disability, may qualify for coverage under HUSKY C.

To apply on line, please visit www.ConneCT.ct.gov -under 'Apply for Benefits.' Or call the DSS Benefits Center Line at:1-855-6-CONNECT (1-855-626-6632)

Individuals can also [download the 'W-1E' application](#):

There are income and asset limits to qualify for HUSKY C. For complete income and asset limits, allowed deductions and what assets can be excluded, please read the Basic Eligibility for the Aged, Blind and Disabled publication.

■ HUSKY D

Connecticut residents aged 19 up to 65th birthday, who do not qualify for HUSKY A; who do not receive Medicare; and who are not pregnant, may qualify for **HUSKY D** (also known as Medicaid for the Lowest-Income Populations).

- To apply online for HUSKY D, please visit www.accesshealthct.com, under 'Get Health Coverage.'
- To apply by phone, please call the Access Health CT call center at 1-855-805-HEALTH (4325).

For eligibility requirements, visit:

<http://www.ct.gov/hh/cwp/view.asp?a=3573&q=421548&hhNav=|#HUSKYD>

Or see a list of In Person Assister's located throughout the state, you can help you enroll: [In Person Assister's](#).

CONNECTICUT BEHAVIORAL HEALTH PARTNERSHIP: <http://www.ctbhp.com/> manages mental health and substance abuse treatment services, but does not act as a "gatekeeper." People with Medicaid

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Coverage for the Lowest Income Populations (Formerly Medicaid LIA), find their own behavioral health provider; community clinics, hospitals, mental health authorities usually accept HUSKY D (Formerly Medicaid LIA). HUSKY D (Formerly Medicaid LIA) does not pay for private doctors and therapists.

DENTAL CARE: [CT Dental Health Partnership](#) is the managed care company for HUSKY D - Medicaid Coverage for the Lowest Income Populations (Formerly Medicaid LIA) dental care.

VISION CARE: One routine eye exam and one pair of glasses per year are covered under HUSKY D – Medicaid Coverage for the Lowest Income Populations. Non-routine eye care (injuries or disease) is through referral by the client's PCP.

TRANSPORTATION: Non-emergency medical transportation is not provided, except for HUSKY D - Medicaid Coverage for the Lowest Income Populations recipients with qualifying medical needs/conditions: HUSKY D recipients who are wheelchair bound, seeing a specialist for post-operative services, visiting an oncologist for treatment including chemotherapy, receiving outpatient rehabilitation services, stroke related specialist services, dialysis, and HIV related specialist services can receive transportation. Transportation provided by Coordinated Transportation Solutions may be by livery or a shared ride in a van.

■ MEDICAL SPEND-DOWN

Apply at DSS offices; see Appendix for site list.

Individuals with income over the limit for Medicaid and who have very high medical expenses can use medical bills to “spend down” income to the Medicaid income limit, also known as the “medically needy income limit.” Income and medical expenses are reviewed every six months, and once medical expenses in a six month period bring income below the “medically needy income limit,” the client is deemed eligible for Medicaid.

To be eligible for the spend-down, the applicant must meet all the eligibility requirements for Medicaid, except that their income exceeds the limit.

NOTE: Medicaid Coverage for the Lowest Income Populations/HUSKY D will not be accessible through a “spend-down” process if an applicant is over-income, effective January 1, 2014. This is because the income-eligibility limits are increasing and federal rules will no longer permit spend-down for this group. Since the income-eligibility level is rising so substantially, many individuals who now go through the spend-down process will qualify for Medicaid regardless.

■ EMERGENCY MEDICAID

Emergency Medicaid can never be pre-approved. Instead hospitals send the medical bill for the treatment of the emergency to a Medical Review team at DSS.

Emergency Medicaid reimburses hospitals for the cost of emergency care for a person who is not eligible for any other Medicaid program but who meets the income and asset limits for Medicaid. Emergency Medicaid is limited to treatment required after the sudden onset of a medical emergency. The acute symptoms of the condition must be so severe that the absence of immediate medical attention could be life-threatening. Emergency Medicaid does NOT pay for treatment of chronic conditions, even if the condition has the potential to be life threatening. (For example, a person with a heart condition that may lead to a heart attack cannot get treatment for the heart condition under Emergency Medicaid. Instead, this person has to have a heart attack or sudden onset of a medical emergency before Emergency Medicaid will pay for his treatment.)

Emergency Medicaid for Pregnant Women

Emergency Medicaid covers labor and delivery for pregnant women who do not qualify for state medical programs, but who otherwise meet Medicaid income and asset limits. It does not cover prenatal care; however, if the pregnant woman has complications to her pregnancy or if the unborn baby is at risk, then Emergency Medicaid will cover the cost of prenatal care. Likewise, Emergency Medicaid will cover the cost of an abortion if the mother's life is in danger, but not if the abortion is an elected procedure.

Emergency Medicaid for Immigrants and Non-Citizens

Immigration status is not a factor for Emergency Medicaid eligibility. Any person, regardless of legal immigrant status, can be eligible for Emergency Medicaid if he/she meets income and asset limits.

FEDERAL HEALTH INSURANCE PROGRAMS

Several federally funded health programs are administered by the CT State Dept. of Social Services. Information about these programs is listed in the STATE HEALTH INSURANCE section.

■ VETERANS HEALTH CARE SYSTEM

<http://www.connecticut.va.gov/> For information call (877)222-VETS

The federal veteran medical center provides inpatient and outpatient medical, rehabilitative, and psychiatric services, detoxification and substance abuse treatment, and community based social services for any veteran with an honorable discharge and either 90 days of active duty served prior to 1980 or 24 months active duty served after 1980. Inpatient care is centralized at the West Haven Medical Center and outpatient services are offered at West Haven, as well as at the Newington Campus and community based outpatient clinics. Specialized treatment programs include inpatient rehabilitation for veterans who are blind, specialized health care for female veterans, geriatric assessment and counseling for older veterans, and outreach to veterans who are homeless and veterans with chronic mental illness. The Errera Community Care Center offers community based mental health services including psychiatric and substance abuse outpatient and day treatment programs, psychosocial and vocation rehabilitation, transitional and permanent housing options, and employment services.

For additional information on State and Federal Veterans Services, see the complete 2-1-1 directory of services at: <http://uwc.211ct.org/files/2015/01/vetresources.pdf>

■ MEDICARE

<http://www.medicare.gov> For information call (800) MEDICARE / (800-633-4227)

Federal insurance program for people ages 65+, people under age 65 who are permanently disabled and who have been receiving Social Security benefits for two years, and people with end stage renal disease. Premiums, deductibles and co-payments apply to some of the health care services. Also, some medical expenses, such as dental care, are not covered.

Or go to the Center for Medicare Advocacy's website:
<http://www.medicareadvocacy.org/>

More information about State and Federal Health Care Programs can be found in Special Populations sections.

PRIVATE HEALTH INSURANCE

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■ HIPAA

Health Insurance Portability and Accountability Act (HIPAA) mandates certain rights and protections for people whose health insurance is/was provided by a group plan. HIPAA limits exclusions from insurance because of pre-existing conditions, prohibits discrimination based on health conditions, and gives people the right to buy individual policies if a group plan is not available to them and they have used up their COBRA or other type of health insurance continuation coverage.

HIPAA Privacy Rule: The HIPAA Privacy Rule creates national standards to protect individuals' personal health information, guarantees patients full access to their medical records, gives them more control over how their personal information is used and disclosed, and provides recourse if their medical privacy is compromised. The U.S. Dept. of Health and Human Services Office of Civil Rights is managing implementation of the HIPAA Privacy Rule. For questions about the HIPAA Privacy Rule or to file a complaint against violators of the Privacy Rule, visit the website <http://www.hhs.gov/ocr/privacy/psa/complaint/index.html> or call the HIPAA Hotline at (866)627-7748 or the Office of Civil Rights at (800)368-1019 (routes to regional office).

Fact sheets about HIPAA:

U.S. Dept. of Labor's fact sheet on HIPAA: <https://www.hhs.gov/hipaa/for-professionals/privacy/guidance/index.html>

■ COBRA

Federal law requires employers with 20 or more employees to let employees and their dependents keep their group health coverage for a time after they leave their group health plan under certain conditions. Those conditions include voluntary or involuntary job loss, reduction in the hours worked, transition between jobs, death, divorce, and other life events. Once your job ends, your plan must provide you with written notice explaining your rights under COBRA. You have 60 days from the date the notice is provided or from the date coverage ended – whichever is later – to elect COBRA coverage. It begins the day your health care coverage ended and lasts for up to 18 months. *NOTE: Under COBRA the employee pays the entire group rate premium; the employer is not required to pay any part of it.* For more information: <https://www.dol.gov/general/topic/health-plans/cobra>

■ SPECIAL COBRA LAW FOR CONNECTICUT RESIDENTS

For information call the Conn. Dept. of Insurance (800)203-3447

If you are ages 62-65, you may keep your COBRA coverage until you reach age 65, regardless of the number of months involved. (Eligibility also depends upon your type of insurance plan.) This is a special provision under Connecticut law; it is not part of the federal law. Link to Office of Legislative Research Summary: <https://www.cga.ct.gov/2011/rpt/2011-R-0503.htm>

■ CONNECTICUT DEPARTMENT OF INSURANCE

<http://www.ct.gov/cid/>

Call CID for a list of approved health insurance companies licensed to do business in Connecticut. Note: Before buying private health insurance, check with the Dept. of Insurance to verify that the health insurance agent and the health insurance company are licensed to sell insurance in Connecticut.

■ SELF EMPLOYED AND SMALL BUSINESS HEALTH INSURANCE

For a list of insurance companies that offer plans to self-employed or small businesses, call the Connecticut Dept. of Insurance or go to [Small Employer Plans](#) on the CID website. (*People who are self-*

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employed are considered to be small employers.)

HEALTH CARE FOR PEOPLE UNABLE TO GET INSURANCE

NOTE: The following programs DO NOT require U.S. citizenship or legal residency, unless otherwise noted.

■ COMMUNITY HEALTH CENTERS

[Link to list of Community Clinics.](#)

Community health clinics, also known as Federally Qualified Health Centers, are funded to provide primary health care on a sliding fee basis to people without health insurance, including illegal immigrants. Many CHCs offer prenatal care; some have on-site pharmacies.

■ COMMUNITY DENTAL CLINICS

[Link to list of Dental Care Clinics](#)

Community dental clinics are funded to provide dental care on a sliding fee basis to people without health insurance, including illegal immigrants.

■ FAMILY PLANNING CLINICS

[Link to sites providing family planning services.](#)

Planned Parenthood of Connecticut is the grantee for State of Connecticut family planning funds. These family planning clinics and other community based clinics provide reproductive health care services for both males and females on a sliding fee basis. Services include clinical exams, contraception information and prescriptions, pregnancy testing and counseling, STD and HIV testing and counseling, and other reproductive health services. Call (877)529-3689 and your call will be routed to the closest Planned Parenthood health center, or go to <http://www.plannedparenthood.org/ppsne/>

■ PRENATAL CARE FOR WOMEN WITHOUT HEALTH INSURANCE

Women whose income is above the limit for Healthy Start and women who are ineligible for Medicaid or Healthy Start because of immigration status can get prenatal care on a sliding fee basis at some community health centers and at many hospital-based prenatal care clinics. Any woman who is pregnant and who does not have insurance or cannot afford to pay full cost for prenatal care should call 2-1-1 to get information about prenatal care providers who provide services on a sliding scale.

■ HIV TESTING SITES

[Link to HIV testing sites](#)

Community health centers, family planning clinics, and some health departments offer confidential HIV testing and counseling for either no fee or sliding fee.

■ STD TESTING SITES

This guide was updated in 3/2020. For updated information or for additional resources, please call 2-1-1 or go to <https://www.211ct.org/>

[Link to STD Testing sites.](#)

Community health centers, family planning clinics, and some health departments offer confidential HIV and STD testing for either no fee or sliding fee.

■ **BREAST, CERVICAL & COLON CANCER EARLY DETECTION AND TREATMENT**

[Link to Early Detection sites](#)

Free statewide screening program, managed by the CT Department of Public Health, for early detection of breast, cervical & colon cancer for women who are uninsured or whose insurance does not provide coverage for mammograms and/or Pap tests, and whose income is at or below 250% of the Federal Poverty Level. Screenings are done at contracted hospitals and health services provider sites. Women who are screened through this program and are then diagnosed with breast or cervical cancer or pre-cancerous conditions are eligible for Medicaid and can have treatment for the condition for no fee and without regard to income or assets. Free screenings do not require citizenship or legal resident status, but Medicaid eligibility for women diagnosed with cancer does. Women who need treatment but who are not eligible for Medicaid are referred to hospital charitable funds if they are unable to afford cost of care. Eligibility:

- Income at or below 250% Federal Poverty Level; and
- For mammogram: ages 40-64, or under 40 with symptoms and or specific risk factors
- For clinical breast exams and PAP test: ages 21-64.

NOTE: Program sites will determine eligibility, including risk assessment.

■ **“FREE BED” FUNDS**

Most hospitals in Connecticut have “free bed funds” to help low income patients pay their hospital bills. These funds can be applied to any hospital-generated bill, not just for inpatient hospital care. Since the funds are not a government program, but charitable donations administered by the hospital, it is likely that each hospital will have a different set of eligibility criteria for applicants. However, the law requires hospitals to tell their patients about the fund, and to have a written policy regarding how and to whom the funds will be applied. The best way to find out about these funds is to contact the hospital administration, billing office, or social work office.

Anyone having trouble obtaining information from a hospital about its free bed funds should call, write to, or email the Attorney General’s office. *(Some hospitals, not all, require U.S. citizenship or legal residency for their free bed funds. Call hospital social work department or billing department for information.)*

■ **EPSDT - Early Periodic Screening Diagnosis and Treatment**

Visit Husky Health CT website, <http://ct.gov/hh/site/default.asp> or call member services, at 1-800-859-9889 for more information

EPSDT, sometimes known as Health Track, expands services usually covered by HUSKY A and Medicaid to include screenings and treatments that identify and treat diseases or impairments which may adversely affect a child’s growth and development. EPSDT covers children ages 0-21 who are eligible for Medicaid/HUSKY A. HUSKY informs enrollees about services they are entitled to, and can advocate for access to these services.

■ WELL CHILD CLINICS

[Link to list of Well Child clinics](#)

Many towns offer well child clinics for children, usually for ages 0-5. The clinics are offered at specific times during the year to provide immunizations and well child exams. Call your town public health department to see if/when your town offers a well child clinic.

■ SCHOOL BASED HEALTH CENTERS

[Link to list of school based health centers.](#)

School based health centers are licensed outpatient health clinics located at some public schools. These centers provide medical services, mental health and social work services, and health education to compliment the school's existing health education activities. Center staff usually includes at least one nurse practitioner, one clinically trained master's level social worker, a medical director, and support staff as needed. Any child enrolled at the school can use the clinic once the parent or guardian signs a permission form. There are no income or asset restrictions, and all services are free. Health information about students is confidential, does not become part of the child's school record, and is not shared with school personnel unless there is danger of self-injury or injury to others.

■ CHILD GUIDANCE CLINICS

[Link to list of child guidance providers](#)

Child Guidance Clinics provide outpatient mental health services to children ages 0-18 and their families, on a sliding fee basis and regardless of ability to pay. Clinics offer evaluation; individual, family, and group counseling and psychiatric services; parent guidance and parent education; and parent support services. Child guidance clinics often have waiting lists.

■ CHILDREN'S RESPITE CARE

CHILD DEVELOPMENT INFOLINE – CDI

<http://cdi.211ct.org/> or call 800-505-7000.

Respite funds are offered for children with special needs who are enrolled in the Children and Youth with Special Health Care Needs program, without regard to family income. Maximum respite grant per family is \$500 per year. Also, CDI can refer to other children's respite care programs.

■ TEEN HEALTH

SCHOOL BASED HEALTH CENTERS

School based health centers offer full range of clinical services for teens; however, not all schools have a school based health center. To see a list of schools that do have this service, go to:

http://www.211ct.org/search?term=Student%20Health%20Programs&page=1&location=connecticut&taxonomy_code=2018&service_area=connecticut

Pediatricians and community health centers also offer primary care to teens. Link to Community Clinics: http://www.211ct.org/search?term=Community%20Clinics&page=1&location=connecticut&taxonomy_code=2924&service_area=connecticut

ELDERS / PEOPLE WITH DISABILITIES

■ BENEFITSCHECKUP

www.benefitscheckup.org

BenefitsCheckUp is the National Council on Aging's on-line tool for people ages 55+ to see what federal and state programs may be available to them.

■ **HUSKY D – Medicaid Coverage for the Lowest Income Population:** HUSKY D - Medicaid Coverage for Low Income Populations is for individuals with very low income who do not have dependent children and who are not disabled.

How to Apply for Expanded Medicaid Health coverage:

You can apply in one of the following ways:

- If you can apply online, visit **Access Health CT**, the state's health insurance marketplace, at <https://www.accesshealthct.com/AHCT/LandingPageCTHIX>
- Access Health CT is also available by phone, toll-free, at 1-855-805-HEALTH (1-855-805-4325). Paper applications are available through this phone contact point.
- Or see a list of [In Person Assister's](#) located throughout the state, you can help you enroll:

Or apply at DSS offices; see Appendix for site list.

See Medicaid in Section STATE HEALTH INSURANCE PROGRAMS.

■ MEDICAID WAIVER PROGRAMS

Katie Beckett Waiver (Also called the Deeming Waiver or the 2176 Model Waiver)
For information and to apply, call Alternate Care Unit at DSS Central Office, (800)445-5394

Waiver program enables severely disabled individuals to be cared for at home and be eligible for Medicaid based on the individual's income and assets. The individual's income must be at or below 300% of SSI, and assets must be below \$1000. Without the waiver, the income and assets of legally liable relatives (parent or spouse) are counted when the disabled individual is cared for at home. There is a long waiting list for this program; however, families of severely disabled individuals who want to care for their child or spouse at home are encouraged to add their name to the waiting list.

■ MEDICAID WAIVER PROGRAMS -DEPARTMENT OF SOCIAL SERVICES (DSS)

Acquired Brain Injury Medicaid Waiver

Special Medicaid waiver program for adults ages 18-64 who have an acquired brain injury pays for medical and non-medical services such as case management, personal care assistance,

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chore services, respite care, vocational supports, housing supports, and other services as needed. Waiver services must be able to keep the individual from being placed in a nursing facility, a chronic disease hospital, or a long term intermediate care facility. Income/asset restrictions. *Not an entitlement program; there may be a waiting list*

Applications are available in English and Spanish at: <http://www.portal.ct.gov/DSS/Search-Results?SearchKeyword=abi+waiver>

***Applications can be returned to Community Options Unit, Department of Social Services, 55 Farmington Avenue, Hartford, CT 06105*

Persons who are deaf or hard of hearing and have a TTD/TTY device can contact DSS at 1-800-842-4524. Persons who are blind or visually impaired, can contact DSS at 1-860-424-5040.

PCA Waiver Program/Personal Care Assistance Waiver Program

<http://www.portal.ct.gov/DSS/Health-And-Home-Care/Medicaid-Waiver-Applications/Medicaid-Waiver-Applications>

The PCA Waiver Program funds personal care aides for income/asset eligible adults (ages 18-64) who have chronic, severe and permanent physical disabilities and who want to live as independently as possible. The person who needs the aide manages the hiring/firing/training process, but payroll and tax filing are handled by Allied Community Resources in Enfield. (Individuals ages 65+ may be eligible for the services of a personal care aide through the CT Home Care Program for Elders, after a needs assessment.)

■ CONNECTICUT HOME CARE PROGRAM FOR ELDERLY (CHCPE)

<http://www.ct.gov/dss/cwp/view.asp?a=2353&q=305170> For information and to apply, call Community Options Unit at DSS Central Office, (800)445-5394 / Fax to 860-424-4963

Online applications can be accepted at:

<https://www.ascendami.com/CTHomeCareForElders/default/>

Applications are available at: <https://portal.ct.gov/DSS/Health-And-Home-Care/Long-Term-Care/Community-Options>

Connecticut Home Care Program for Elders manages medical and non-medical support services that are needed by frail individuals ages 65+ to avoid institutionalization. Cost of services cannot exceed cost of institutional care. There are no income limits for the program, but clients in higher income ranges are required to contribute to the cost of the services they need. Asset limits depend upon income level. The benefit of program participation for older adults with higher incomes and who must pay for full cost of care is that they can receive the case management and care oversight services that CT Home Care Program case managers provide.

Each applicant's needs are reviewed to determine if the applicant may remain at home with the help of home care services:

Services may include:

Care Management Services
Adult Day Health Services

This guide was updated in 3/2020. For updated information or for additional resources, please call 2-1-1 or go to <https://www.211ct.org/>

Companion Services
Home Delivered Meals
Homemaker Services
Assisted Living Services
*Personal Care Attendant Services - family members are NOT eligible to be paid for taking care of relatives with very rare exceptions.
*Chore Assistance - only available as part of a package of services to applicants who meet all other eligibility criteria.
Adult Family Living
Bill Payer
Support Broker
Care Transitions
Chronic Disease Self-Management
Assistive Technology

■ HOME CARE PROGRAM FOR DISABLED

For information and to apply, call DSS's Alternate Care Unit.

State-funded pilot program for adults with disabilities provides home care services needed to keep the person living independently in their own home. The program targets (but is not strictly limited to) adults with multiple sclerosis, Alzheimer's, cerebral palsy, Parkinson's disease, or other neurological degenerative diseases that cause them to need professional help to remain independent.

- Income and asset limits: Same as Home Care Program for Elders
 - Cannot be eligible for Medicaid
 - Cannot have primary diagnosis of mental retardation or mental illness
 - Care plan (the amount of money that is needed to keep the person independent in their own home) cannot exceed \$2600/month
 - Participants may be asked to contribute to the cost of their service plan if their income exceeds 200% of the federal poverty level
-

■ MEDICARE

<http://www.medicare.gov/default.asp>

Federal insurance program for all Social Security recipients ages 65+, or people who are permanently disabled and who have been receiving Social Security benefits for two years, or people with end stage renal disease. Premiums, deductibles and co-payments apply to some of the benefits. Also, some medical expenses, such as prescription drugs, dental care, and routine physicals, are not covered by either Part A or Part B.

Medicare publishes "Medicare and You," a comprehensive guide to Medicare, including lists of Part C and Part D plans. To download a copy, visit: <https://www.medicare.gov/medicare-and-you/medicare-and-you.html>

Another good source of information about Medicare is the Center for Medicare Advocacy's Index of Information by Topic page: <http://www.medicareadvocacy.org/InfoByTopic/TopicMain.htm>

■ MEDICARE ADVANTAGE PLANS

Medicare Advantage plans (also known as Medicare Part C) are health plan options approved by Medicare and run by private companies. Medicare Advantage plans take the place of Medicare Part A and Part B, and health care services are provided by the plan selected. All Medicare Advantage plans are required to provide coverage for medically necessary services that the original Medicare plan provides. But the plans can charge different premiums, co-payments and deductibles, and may offer coverage for services not covered by original Medicare.

Be cautious about choosing to opt out of regular Medicare Parts A and B. Consult CHOICES counselors or Medicare Advocacy to learn what the advantages and disadvantages may be. Once enrolled you must stay in the plan and use the plan's provider network until the open enrollment period from November 15-December 31 of each year.

Lists of participating Part C plans are in the [Medicare and You](#) book.

■ MEDICARE RX – MEDICARE PRESCRIPTION DRUG PROGRAM

See Section: PRESCRIPTION DRUG EXPENSE ASSISTANCE

■ MEDICARE ADVOCACY

<http://www.medicareadvocacy.org>

Information, assistance, advocacy: call (800)262-4414

Center for Medicare Advocacy provides information, advocacy, and legal assistance to help Medicare beneficiaries with all aspects of Medicare-related questions or problems, including help with filing Medicare appeals.

■ MEDICARE SAVINGS PROGRAMS

Apply at DSS offices; see Appendix for site list.

MSP's (Medicare Savings Programs) pay a person's Medicare B premiums, and in some cases, their co-payments and deductibles.

- **QMB:** Qualified Medicare Beneficiary program helps low to moderate income elderly or disabled Medicare beneficiaries by paying the Medicare Part B premium, deductibles and coinsurances. Income limit is 211% of the Federal Poverty Level. **There is no asset limit.**
- **SLMB:** Special Low-Income Medicare Beneficiary Program pays Medicare Part B premiums for Medicare beneficiaries. Income limit is 231% of the Federal Poverty Level. **There is no asset limit.**
- **ALMB:** Additional Low-Income Medicare Beneficiary Program pays the Medicare Part B premiums for eligible Medicare beneficiaries. Note: ALMB is not an entitlement program and the funding is limited. When available funds are exhausted applications will be denied. Income limit is 246% of the Federal Poverty Level. **There is no asset limit.**

Enrollment in an MSP makes an individual eligible for Medicare Part D's Low Income Subsidy, a program that pays for Medicare Part D premiums, covers prescription drugs during the coverage gap ("donut hole") and lowers co-pays.

For more details on the program, visit the Connecticut Department of Social Services (DSS) at:

<http://portal.ct.gov/DSS/Services/Health-and-Home-Care>

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■ CONNMAP

To apply for ConnMAP, call State of Connecticut, Department of Social Service, (800)443-9946

ConnMAP (Connecticut Medicare Assignment Program) issues cards to income-eligible Connecticut residents who are enrolled in Medicare Part B. The ConnMAP card ensures that Medicare providers will not bill for more than the Medicare-approved reasonable rate for covered services. Must be enrolled in Medicare Part B; Must have lived in Connecticut for at least 6 months; No asset limit; adjusted gross income for individual must be under \$44,907; for couple, adjusted gross must be under \$60,613.

■ MEDIGAP INSURANCE

[Medicare.gov](https://www.medicare.gov)

Medigap policies supplement Medicare A and B, providing a basic benefit package, and different combinations of other benefits depending upon the plan selected. There are various standard Medigap plans, designated by letters A through N; Plan A is the basic benefit package; and each of these other plans offer different combinations of benefits

The CHOICES counselors at the Area Agencies on Aging can also provide lists of companies offering Medigap insurance in Connecticut, and can help people understand the differences among the plans.

■ CHOICES PROGRAM

<http://www.ct.gov/agingservices/cwp/view.asp?a=2511&q=313032>

Call (800)994-9422 to reach your closest CHOICES program

CHOICES, managed by the regional Area Agencies on Aging, is a free information and benefits counseling program for people ages 60+, or people under age 60 who are disabled and need help with Medicare issues. The five program components of CHOICES include counseling and information to older adults about public and private insurance programs, outreach, information and referral to senior services, counseling about resource options, and eligibility screening for state and federal benefit and support programs.

CHOICES is the lead program in Connecticut responsible for helping Medicare beneficiaries understand and choose a Medicare Prescription Drug Plan.

■ CONNTRANS ORGAN TRANSPLANT RECIPIENT PROGRAM

For information and to apply, call Adult Support Unit at DSS Central Office, (860)424-5250

Charitable fund provides financial assistance for income-eligible people who either need an organ transplant or have had a transplant and need help paying for maintenance medications. This is not an entitlement program; assistance is limited by the amount of money in the fund at any given time. Most of the money in the fund comes from Connecticut residents who donate part of their income tax refund. People needing help to pay for a transplant must have income below the State Median Income; People needing help to pay for maintenance medications after a transplant must have incomes at or below 300% of the Federal Poverty Level; Asset limit is \$10,000. People who are over the income or asset limit should apply anyway in case some of their medical expenses can be used to "spend down" their income and assets.

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■ MEDICAL TRANSPORTATION

Many towns offer ride programs for elders and for people with disabilities. For information, call a town's senior center or human services department, or search the [2-1-1 list of Medical Transportation providers](#). Medicaid, HUSKY A, and Healthy Start benefits include transportation to medical appointments; Medicaid recipients who are wheelchair bound, seeing a specialist for post-operative services, visiting an oncologist for treatment including chemotherapy, receiving outpatient rehabilitation services, stroke related specialist services, dialysis, and HIV related specialist services can receive transportation.

■ TRANSPORTATION FOR PEOPLE WITH DISABILITIES

[Link to Disability Related Transportation providers.](#)

Towns and some community based organizations have transportation services for adults who have disabilities. Also, public buses have ADA Paratransit programs for individuals with mental or physical disabilities that prevent them from being able to use the regular public transportation system. For ADA transportation, the person's disability can be permanent, temporary, or conditional. (A "conditional" disability is one that exists under specified conditions; for example, at night, or when the temperature is very high or very low.) Fares, routes and schedules closely follow the public bus route. There is no age restriction, no income/asset restriction, and it is not necessary to be on SSI or SSD. The CT Dept. of Transportation manages the ADA paratransit system in CT.

■ RESPITE CARE

NATIONAL FAMILY CAREGIVER SUPPORT PROGRAM

<http://www.ct.gov/agingservices/cwp/view.asp?a=2513&q=313064>

For more information or to apply, call your Area Agency on Aging, (800)994-9422

Caregiver respite program, administered by the five regional Area Agencies on Aging (AAA), assists with costs per year for adult respite care to caregivers of family members ages 60+. Some of the AAAs also pay for children's respite care when the caregiver is age 60+. The program also offers assistance for "Supplemental Items or Services" that are needed by the care recipient, but are not available through outside funding. Items can include air conditioners, fans, hearing aids, eyeglasses (not covered by insurance), durable medical equipment, lift chairs, and wheelchair ramps. Applicants may be asked to share in the cost of respite or supplemental services unless income is below Federal Poverty Level. Priority is given to older caregivers, particularly older individuals providing care and support to people with mental retardation and related developmental disabilities. For more information or to apply, contact your regional Area Agency on Aging.

CONNECTICUT STATEWIDE RESPITE CARE PROGRAM FOR ALZHEIMER'S/OTHER DEMENTIA

<http://www.ct.gov/agingservices/cwp/view.asp?a=2513&q=313026>

For more information or to apply, call your Area Agency on Aging, (800)994-9422

The Connecticut Statewide Respite Care Program is funded by the State Department on Aging and is operated in partnership with the Alzheimer's Association Chapters of Connecticut and the Connecticut Area Agencies on Aging. Eligible families may apply for daytime or overnight respite care services including but not limited to: Adult day care, home health aide, homemaker/companion, skilled nursing care, self-directed care, Cognitive Training, or short term nursing home placement.

Program Eligibility and Guidelines:

The applicant or authorized agent must provide a Physician's statement declaring that the patient has

Alzheimer's disease or a related disorder such as: Multi-Infarct dementia, Parkinson's Disease, Lewy Body Dementia, Huntington's disease, Pick's disease or Normal Pressure Hydrocephalus. The applicant cannot be receiving services under the Connecticut Home Care Program for Elders (CHCPE), must have an income of no more than \$44,591 per year and liquid assets of \$118,549 or less. The program pays for up to \$7,500 in respite care services per family per year. A 20% co-payment of the cost of the service is required, but may be waived based upon financial hardship.

ALZHEIMER'S ASSOCIATION RESPITE FUND

<http://www.alz.org/ct/>

For more information or to apply, contact the CT Chapter of the Alzheimer's Assn., (860)828-2828 or 24-hour Helpline: When Alzheimer's touches your life, we are here for you. Anytime day or night, call us for reliable information and support (800)272-3900

Financial reimbursement program assists families caring for a family member with dementia to purchase respite services, including adult day care, home health aides, homemaker/companion, skilled nursing care or short term nursing services. The program provides a maximum benefit of \$500/year, without regard to income; space for this program is limited.

CONNECTICUT DEPARTMENT OF DEVELOPMENTAL SERVICES

www.ct.gov/dds

For information, call DDS at (866)737-0330

DDS provides funds to help pay for the temporary care of anyone who has mental retardation and is eligible for DDS services. Respite care can be provided in or out of the home. Ability to respond to requests is limited by available funds and space. DDS also manages several respite centers throughout Connecticut that provide out-of-home overnight respite for children or adults with mental retardation. Family contribution to respite care cost varies according to household income

EASTER SEALS

<http://www.hartford.easterseals.com>

For information, call Easter Seals at (860)270-0600

Service agency for children and adults with physical, psychological, or developmental disabilities offers outpatient medical rehabilitation and vocational rehabilitation services including placement in transitional and supportive employment and special education services.

AIDS/HIV RELATED HEALTH CARE

Go to 2-1-1's HIV/AIDS Prevention and Care Guide: <http://uwv.211ct.org/professionals/directories/>
View [2-1-1's listing](#) of all services for Connecticut residents who are HIV+ or living with AIDS.

The CT Dept. of Public Health's AIDS and Chronic Diseases Division's website also lists services and service providers http://www.ct.gov/dph/cwp/view.asp?a=3135&q=387010&dphNav_GID=1601

PRESCRIPTION DRUG EXPENSE ASSISTANCE

■ **MEDICAID, HUSKY A, HUSKY B, HEALTHY START** all include prescription drug coverage.

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■ BENEFITSCHECKUPRX

www.benefitscheckup.org

The National Council on Aging's on-line tool may help point people to federal, state, and private prescription assistance programs for which they may be eligible. (The site is primarily oriented to people who have Medicare but are not eligible for Medicaid.)

■ MEDICARE RX / MEDICARE PART D – MEDICARE PRESCRIPTION DRUG BENEFIT

www.medicare.gov

For assistance by phone call: MEDICARE - (800)MEDICARE or CHOICES - 800-994-9422

Anyone who has Medicare A or B is eligible for the Medicare prescription drug benefit, also known as Medicare Part D or Medicare Rx. Unlike Medicare Parts A and B, Part D is offered by individual prescription drug plans and people must enroll in one of the plans to receive the benefit. Each plan has a different constellation of premiums, deductibles and co-pays, and different formularies, but all plans must offer at least the standard benefit. People with low income/assets who qualify for the Low Income Subsidy may not have to pay premiums or deductibles.

■ VETERANS

All veterans:

For information call (877)222-VETS

Department of Veteran Affairs (VA) offers a prescription benefit to honorably discharged veterans who are enrolled with the VA Health Care System and who have been seen by a VA doctor. Each 30-day supply of prescription medications has a co-pay. VA may charge for the doctor's visit, but your insurance may cover this charge. (Veterans who are disabled or have low income do not have co-pays for prescriptions or doctor's visits.)

Active duty and retired military:

For information call (877)DOD-MEDS

TRICARE Senior Pharmacy Program is a prescription drug program for active duty military and their families; and for military retirees and their families.

■ PARTNERSHIP FOR PRESCRIPTION ASSISTANCE (PPARX)

http://www.rxassistantprograms.com/?gclid=EA1aIQobChMI5--XqJL24wIViJ6zCh1TWAaREAAAYAiAAEgL26fD_BwE

For assistance by phone call 1-(888)344-8915

Coalition of pharmaceutical companies and other national organizations provides a single point of access to patient assistance programs that in turn provide free or low-cost medications to income eligible individuals. People can call for assistance or access info and applications via the web site.

■ NEEDYMEDS

<http://www.needymeds.com>

Cannot seek assistance by phone; must search for medications on their website.

NeedyMeds is a Web based information source on prescription assistance programs offered by

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pharmaceutical companies. The website lists drugs and links the patient to information about the specific program that is offered by the pharmaceutical company that produces the drug. Information includes eligibility detail and links to application forms, if available.

■ PRESCRIPTION DISCOUNT CARDS

There are many drug discount cards being offered. Search the Internet with “Prescription Discount Cards” to find information, or go to the [AARP Discount Programs](#).

Also, some hospitals offer drug discount cards. Call hospitals in your area.

■ COMMUNITY HEALTH CENTER PHARMACIES

Some community health centers house on-site reduced cost pharmacies for patients receiving their medical care at the center.

■ DISCOUNTED GENERIC MEDICATIONS

Costco, Sam's Club, Target, Walmart, Stop and Shop pharmacies are some of the "big box" stores that offer generic drugs for a low price, sometimes as low as \$4 for a 30 day supply or \$10 for a 3 month supply. Not all medications can be purchased as a generic; also, not all generics are being offered at discount. Talk to the store's pharmacist to see if you needed medicine can be bought at discount.

■ BUYING MEDICINES AND MEDICAL PRODUCTS ONLINE:

BE CAREFUL about buying prescriptions or over-the-counter drugs from a Web site.

www.webmd.com has a page “Beyond [the Pharmacy: Online and Mail Order Prescription Drugs](#)” that offers advice about how to buy drugs online safely and how to avoid ordering medicines from sites that are selling expired or counterfeit medications.

The U.S. Food and Drug Administration offers tips for consumers thinking about buying medicines and medical products online call the FDA at (888)463-6332 or go to: <http://www.fda.gov/downloads/Drugs/ResourcesForYou/UCM133237.pdf>

Beware of online pharmacies that do not have a physical address. These are more likely to be selling counterfeit drugs.

The National Assn. of Boards of Pharmacy website lists Internet pharmacies that meet its safety and consumer rights criteria. Go to <http://www.nabp.net/>, Click on the link “Buying Medicine Online,” under the heading Internet Pharmacies.

PharmacyChecker.com evaluates online pharmacies and compares their prices. (www.pharmacychecker.com) Basic drug price comparisons are free; members receive enhanced services and searches. Membership fee is about \$20 for a one-year membership.

■ DISEASE SPECIFIC ADVOCACY GROUPS

Some disease-specific advocacy agencies may have information about prescription assistance programs, and possibly offer small financial grants to buy when there is financial need. Call your specific agency (Cancer Care, Sickle Cell Disease Assn., United Cerebral Palsy, etc.) to see if they manage any

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charitable funds or can give you information about assistance programs.

■ **NORD - NATIONAL ORGANIZATION FOR RARE DISORDERS**

<https://rarediseases.org/>

For information and to apply for assistance, call NORD at (800)999-6673.

NORD's Patient Assistance Program helps uninsured or under-insured individuals with rare diseases obtain free life-saving or life-sustaining medications.

■ **CHARITABLE FUNDS**

Local charitable funds may offer limited and sometimes one-time help with medical expenses. Eligibility requirements vary, but funds are usually for low income people residing in the charity's service area. To see if there is a charitable fund for your town, please call 2-1-1 or your town's social services department.

■ **CADAP**

<http://www.portal.ct.gov/DSS/Health-And-Home-Care/CADAP/Connecticut-AIDS-Drug-Assistance-Program-CADAP>

For information and to apply call Department of Social Services, Medical Operations Unit at (800)233-2503.

CADAP (Conn. AIDS Drug Assistance Program) is a prescription program for people living with HIV/AIDS that pays for federally approved HIV antiretroviral drugs and drugs. Net countable income must be at or below 400% Federal Poverty Level; there is no asset limit. Client must first apply for Medicaid.

■ **CONTRANS ORGAN TRANSPLANT RECIPIENT PROGRAM**

For information and to apply, call DSS Central Office, (860)424-5250

Charitable fund provides financial assistance for income-eligible people who either need an organ transplant or have had a transplant and need help paying for maintenance medications. This is not an entitlement program; assistance is limited by the amount of money in the fund at any given time. Most of the money in the fund comes from Connecticut residents who donate part of their income tax refund. People needing help to pay for a transplant must have income below the State Median Income; People needing help to pay for maintenance medications after a transplant must have incomes at or below 300% of the Federal Poverty Level; Asset limit is \$10,000. People who are over the income or asset limit should apply anyway in case some of their medical expenses can be used to "spend down" their income and assets.

EYEGASSES / VISION SCREENING

■ **HUSKY A, HUSKY B, HUSKY C, HEALTHY START** - All include vision care.

■ **HUSKY D (Formerly MEDICAID FOR LOW INCOME ADULTS (LIA))** – Program pays for one vision screening and one pair of eyeglasses each year. Vision care is managed by Block Vision, (800-879-6901). Block Vision will refer to participating opticians for exams/eyeglasses for individuals. Non routine eye care (injuries or disease) is through referral by the client's PCP.

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■ EYECARE AMERICA

www.eyecareamerica.org

For information and to apply, call (800)222-EYES

Eyecare America will refer low income elders ages 65+ to free or reduced fee ophthalmologists. Must be ages 65+ and a U.S. citizen or legal resident; Must not have seen an ophthalmologist within the last 3 years; must not be a member of an HMO and must not be eligible for eye care through the armed forces or the U.S. Veterans Affairs Health Care System.

■ ONESIGHT

<http://www.onesight.org/>

For information call 1-888-935-4589.

Free vision screening and eyeglasses for people without insurance who do not have the means to pay for them. OneSight is an international vision program of the Luxottica Group Foundation that also offers assistance through certain vision stores in North America. People in need can call LensCrafters, Pearle Vision, Sears Optical and Target Optical stores to ask about program requirements. (Some stores require a letter from a social service agency, some will accept only a Lion's Club letter.)

■ LIONS LOW VISION CENTERS

For information and to make an appointment, call (800)676-5715. [List of sites.](#)

Nonprescription devices, and low vision rehabilitation, to assist people with low vision in daily living activities. The centers evaluate the individual's low vision to determine which device best suits the individual's needs, and will train the individual to use the device. No charge for office visit; Donations are accepted for cost of devices; NOTE: Niantic office does not charge for devices, but clients must be residents of New London, Middlesex, Tolland or Windham County.

HEARING AIDS

■ LIONS CLUB HEARING AID BANK

For a listing of local Lions Clubs, go to

<http://www.e-district.org/sites/md23/index.php>

The Connecticut Lions Clubs Hearing Aid Bank offers hearing aids for children and adults when there is a financial need and when the person's insurance does not pay for hearing aids. A written request must be made to the client's local Lions Club. Once received by the local club it is forwarded to The Hearing Aid Bank Committee of the appropriate Lions Club District. Requests should include a copy of an audiologist's evaluation and verification that the individual would benefit from a hearing aid; report of an examination by a licensed medical doctor; a financial need application form; and information about extenuating circumstances that require special consideration

LOAN/PURCHASE PROGRAMS: MEDICAL EQUIPMENT AND ASSISTIVE TECHNOLOGY DEVICES

This guide was updated in 3/2020. For updated information or for additional resources, please call 2-1-1 or go to <https://www.211ct.org/>

■ LOAN CLOSETS

[Link to Medical Equipment Loan Closets](#)

Many agencies, and sometimes town social service departments, operate loan closets that lend equipment such as wheelchairs, walkers, etc. to people who need them. Some loan closets may also sell used medical equipment and assistive technology equipment for nominal fees.

■ NEAT MARKETPLACE

www.neatmarketplace.org

For information, call NEAT: (866) 526-4492

The NEAT Marketplace's (New England Assistive Technology) Equipment Restoration Centers (ERC) restores donated assistive devices and medical equipment/supplies. Restored items are available for sale at lower cost than a new item. NEAT has sites in Hartford and Stratford.

■ TECH ACT PROJECT/ASSISTIVE TECHNOLOGY LOAN PROGRAM

<http://www.cttechact.com/>

The Bureau of Rehabilitation Services' Tech Act Project provides low interest loans to people with disabilities to purchase equipment or to make home or vehicle modifications to maintain or improve functional capabilities.

■ CONVERSE COMMUNICATIONS

www.conversecommunications.com

Converse Communications provides services for people who are deaf, hard of hearing or speech impaired. Services include TDD/TTY repair, distribution of loaner TDD/TTY phones and closed captioning interpretation for video tapes.

■ MUSCULAR DYSTROPHY ASSOCIATION

Southern CT Chapter – (203)248-6500

Loan closet available with durable medical equipment such as wheelchairs, lifts, walkers, and shower benches for families registered with MDA. After insurance coverage has been exhausted, association can offer assistance for the remaining expenses of wheelchairs, leg braces and augmentative communication devices.

■ DISEASE SPECIFIC ADVOCACY GROUPS

Many groups that specialize in supporting and advocating for people with specific illnesses or disorders, such as American Cancer Society, Multiple Sclerosis Society, United Cerebral Palsy, Spina Bifida Assn., Amyotrophic Lateral Sclerosis Assn., Voice for Joanie (ALS), have equipment loan or purchase programs.

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■ CHARITABLE FUNDS

To see if there is a charitable fund for your town, please call 2-1-1 or your town's social services department.

Local charitable funds may offer limited and sometimes one-time help with medical equipment needs for eligible people. Eligibility requirements vary, but are usually for low income people residing in the charity's service area.

OTHER HEALTH / DISABILITY RELATED INFORMATION

■ AIR TRANSPORTATION FOR MEDICAL CARE

Volunteer airline and pilot organization provide "mercy flights" for people who need transportation to other locales for medical treatment. **AIR CARE ALLIANCE** (www.aircareall.org), a network of flying organizations posts on its website a list of charitable aviation organizations providing free air transportation to patients in need. Air Care Alliance will also provide help by phone to people seeking information about mercy flights.

■ CHILD DEVELOPMENT INFOLINE

<http://cdi.211ct.org/>

For information and to apply for these programs and much more, call (800)505-7000

Birth to Three

Birth to Three is Connecticut's single point of entry for referrals to early intervention services for children ages 0-36 months who have significant developmental disabilities or delays. Care coordinators discuss developmental concerns with parents and make referrals for evaluation to Conn. Birth to Three System providers. Eligible children and their families receive early intervention services addressing the child's developmental needs. There is no fee for the evaluation; services are provided on a sliding fee basis. There are no income or assets restrictions for program eligibility.

Help Me Grow

The Help Me Grow program helps to find services for children, birth through age 8, who are at risk for developmental or behavioral concerns, including children who might not meet the criteria for the Birth to Three Early Intervention Program or who are ages 3 and over. Telephone Care Coordinators identify appropriate service options for the family. Follow up ensures that the referral has been successful. Care Coordinators mail families general information on development or specific topics (e.g. toilet training), provide parent support, and offer families the opportunity to sign up for a child developmental monitoring program using the Ages and Stages questionnaires. Regional Help Me Grow child development community liaisons facilitate networking meetings, research resources and provide technical assistance. Help Me Grow is a program of the Children's Trust Fund. There are no income or assets restrictions for program eligibility.

Children and Youth with Special Health Care Needs

Children and Youth with Special Health Care Needs Program coordinates services for children under age 18 who have, or who are at elevated risk for having, chronic physical, developmental, behavioral, or emotional conditions (biological or acquired), and who also require health and related non-educational and non-recreational services of a type or amount not usually required by children of the same age. The program also offers payment for certain types of services including, but not limited to, adaptive and specialty equipment, specialty pharmacy and nutritional formulas, hearing aids, and medical and/or surgical supplies. Also, respite services are available to families whose children are enrolled in the CYSHCN Program. (Families may be placed on a waiting list until funds become available.) Respite services include planned or emergency care, including summer camps, to provide relief to eligible families caring for children with special health care needs. Maximum respite grant per family is \$500 per year.

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Care coordination, family support services, and respite care are provided without regard to family income; for other services income must be at or below 300% of the Federal Poverty Level and the services are not covered by the child's health insurance. Children who are eligible for HUSKY but have not applied are required to apply.

■ CHILDHOOD LEAD POISONING PREVENTION PROGRAM

http://www.ct.gov/dph/cwp/view.asp?a=3140&q=387550&dphNav_GID=1828&dphPNavCtr=#47067

For information about childhood lead poisoning and, lead abatement, or to file lead-related complaints, call DPH Healthy Homes, (860)509-7299

The CT State Dept. of Public Health manages lead poisoning prevention and abatement information programs. Also, several Connecticut municipalities offer grants or loans to help homeowners remove lead paint from their homes.

■ FILING A COMPLAINT ABOUT A HEALTH CARE PRACTITIONER OR HEALTH CARE FACILITY

For information about filing a complaint, call (860)509-7552 or go to

http://www.ct.gov/dph/cwp/view.asp?a=3120&q=387678&dphNav_GID=1821&dphPNavCtr=#47136

To file a complaint about a doctor, dentist, health care practitioner or health care facility, submit the following in writing:

- Your name, address and phone number;
- The name, field of practice, title, and address of the practitioner referenced in your complaint, OR the name and address of the licensed institution or agency referenced in your complaint;
- Specific concerns;
- Detailed information concerning the concerns (for example, dates);
- Names of others who may be able to provide information (for example, witnesses)

Send letter to:

CT Dept. of Public Health

Practitioner Investigations Unit

MS#12HSR

410 Capitol Ave., Hartford, CT 06134

■ FRAUD REPORTING

To report known or suspected fraud:

- **Medicaid Fraud:** (800)842-2155
 - **Medicare Fraud:** (800)HHS-TIPS
 - **Home Health Care Fraud:** (800)828-9769
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■ HEALTH CARE PROVIDER LICENSING AND REGULATION

For licensing information about any health care professional licensed in Connecticut, call DPH's Health Care Professionals Licensure and Investigations Unit at (860)509-7603 or search the DPH website.

License information on CT physicians, as well as disciplinary or convictions histories, if any, are listed on the CT Dept. of Public Health's website: <http://www.ct.gov/dph/cwp/view.asp?a=3121&q=476312>

License information on other CT health care providers, including dentists, psychiatrists, mental health

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and substance abuse counselors is listed on the CT Licensing Info Center website:
http://www.ct.gov/dph/cwp/view.asp?a=3121&q=389526&dphNav_GID=1821&dphPNavCtr=#47137

■ HEALTH INSURANCE ADVOCACY

- **CT Office of the Health Care Advocate** www.ct.gov/oha: Advocates for the rights of people with managed care policies.
 - **State of Connecticut Dept. of Insurance** www.ct.gov/cid: informs and advocates for the rights and protections of people with group insurance provided through employers and privately purchased insurance.
 - **Statewide Legal Services** <http://slsct.org/>: advocates for the rights of people with all forms of Medicaid and SAGA Medical.
 - **Center for Medicare Advocacy** www.medicareadvocacy.org advocates for people on Medicare.
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■ HEALTH RELATED SUPPORT GROUPS

[Link to lists of health/disability related support groups. – go to - http://www.211ct.org/](http://www.211ct.org/)

Then type in support groups in the search box to get a drop down list of suggested support groups

2-1-1 maintains information about hundreds of health/disability related support groups in Connecticut:

■ HEALTHNET – HEALTH INFORMATION ASSISTANCE

Healthnet, Connecticut Consumer Health Information Network, program of the University of Connecticut Health Center Library, provides a free, customized consumer health research service for Connecticut residents. Call Healthnet at 860-679-4055 to request a packet of information tailored to your health questions. Healthnet's website at <http://library.uchc.edu/departm/hnet> includes direct hyperlinks to a topic-by-topic list of health websites on subjects such as medical tests, Connecticut health resources, research news, patient advocacy, aging, navigating the health care system, and children's health.

■ LIENS PLACED ON REAL ESTATE BY CT DEPT. OF SOCIAL SERVICES (DSS)

For more information on liens relative to DSS benefits, call the Resource Units at DSS regional offices and suboffices.

When DSS places a lien on a client's home, it means, in most cases, that the department will recover money when the home is sold. It does not mean that the client will be forced to sell their home before they choose to. The money recovered is limited to the amount that the department issued to the client or on the client's behalf. Medicaid programs that require a lien are: SAGA Medical, and Medicaid only when the homeowner has been permanently placed into a long term care facility, but not if that person's spouse, child under 21, any age disabled child, or sibling who co-owns the house are living in the house. In these cases a lien is not placed. If none of these people remain in the house, a lien is placed and the owner is expected to try to sell the property.

Other Medicaid programs (HUSKY, and Healthy Start) do not require a lien.

■ MEDICAID APPEALS/FAIR HEARINGS

For information call DSS Office of Regulations and Administrative Hearings, (860) 424-5760, within Hartford, (800)462-0134, outside Hartford

To appeal a decision by the CT Dept. of Social Services, request a Fair Hearing in writing within 60 days

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from the date DSS mails the notice of action. Send the Fair Hearing request to: DSS-OLCRAH, 55 Farmington Avenue, Hartford, CT 06105.

■ QUITLINE (SMOKING/TOBACCO CESSATION)

For information in Connecticut, call 1-800-784-8669 (800-QUIT-NOW)

Help with quitting smoking and with quitting the use of other tobacco products, information through the mail, and referrals to other resources to aid cessation.

■ TUBERCULOSIS CONTROL PROGRAM

http://www.ct.gov/dph/cwp/view.asp?a=3136&q=388584&dphNav_GID=1601&dphPNavCtr=#47055

For information call DPH, (860)509-7722

CT Dept. of Public Health's surveillance, prevention and control program works with public and private providers of medical care to ensure that all cases of TB are monitored and treated. People who have TB are given antibiotics at no charge.

CT DEPT. OF SOCIAL SERVICES BENEFITS APPLICATION SITES

<http://www.ct.gov/dss/cwp/view.asp?a=2345&q=490698>

CENTRAL OFFICE: (No Direct Service at this Site)

55 Farmington Avenue, Hartford, CT 06105

Public Information: (800)842-1508

TDD/TTY line: (800)842-4524

Mail documents to: DSS Connect Scanning Center, P.O. Box 1320, Manchester, CT 06045

Fax documents to: (860) 812-0020 or (860) 812-0022

NORTHERN REGIONAL OFFICES

**Hartford – 20 Meadow Road, Windsor, CT
06095 – (855)626-6632 /TDD (800)842-4524**

**New Britain – 30 Christian Lane, New Britain,
CT 06051 – (855)626-6632 /TDD (800)842-4524**

**Manchester - 699 East Middle Tpke,
Manchester, CT 06040 –(855)626-6632 /TDD
(800)842-4524**

**Willimantic - 1320 Main St. Suite 18, Tyler Sq,
Willimantic, CT 06226 – (855)626-6632 /TDD
(800)842-4524**

SOUTHERN REGIONAL OFFICES

**New Haven – 50 Humphrey St., New Haven,
CT 06513 –(855)626-6632 /TDD (800)842-4524**

**Middletown – 2081 South Main St. (Route 17)
Suite B, Middletown, CT 06457 – (855)626-
6632 /TDD (800)842-4524**

**Norwich - 401 West Thames St., Suite 102,
Norwich, CT 06360 –(855)626-6632 /TDD
(800)842-4524**

WESTERN REGIONAL OFFICES

**Bridgeport - 925 Housatonic Ave.,
Bridgeport, CT 06606 –(855)626-6632 /TDD
(800)842-4524**

**Stamford - 1642 Bedford St., Stamford, CT
06905 –(855)626-6632 /TDD (800)842-4524**

**Waterbury - 249 Thomaston Ave., Waterbury,
CT 06702 – (855)626-6632 /TDD (800)842-4524**

**Danbury - 342 Main St., Danbury, CT 06810 –
(855)626-6632 /TDD (800)842-4524**

**Torrington - 62 Commercial Boulevard, Suite
1, Torrington, CT 06790 –(855)626-6632 /TDD
(800)842-4524**

FEDERAL POVERTY LEVELS 3/2020-3/2021

Annual income limits derived from U.S. Dept. of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, <https://aspe.hhs.gov/poverty-guidelines>

Annual Income

	100%	125%	130%	138%	150%	185%	200%	235%	250%	300%
<i>Family Size: 1</i>	12,760	15,950	16,588	17,609	19,140	23,606	25,520	29,986	31,900	38,280
2	17,240	21,550	22,412	23,791	25,860	31,894	34,480	40,514	43,100	51,720
3	21,720	27,150	28,236	29,974	32,580	40,182	43,440	51,042	54,300	65,160
4	26,200	32,750	34,060	36,156	39,300	48,470	52,400	61,570	65,500	78,600
5	30,680	38,350	39,884	42,338	46,020	56,758	61,360	72,098	76,700	92,040
6	35,160	43,950	45,708	48,521	52,740	65,046	70,320	82,626	87,900	105,480
7	39,640	49,550	51,532	54,703	59,460	73,334	79,280	93,154	99,100	118,920
8	44,120	55,150	57,356	60,886	66,180	81,622	88,240	103,682	110,300	132,360
<i>Each add'l person, add:</i>	4,480	5,600	5,824	6,182	6,720	8,288	8,960	10,528	11,200	13,440

Monthly Income

	100%	125%	130%	138%	150%	185%	200%	235%	250%	300%
<i>Family Size: 1</i>	1,063	1,329	1,382	1,467	1,595	1,967	2,127	2,498	2,658	3,190
2	1,437	1,796	1,868	1,983	2,155	2,658	2,873	3,377	3,592	4,310
3	1,810	2,263	2,353	2,498	2,715	3,349	3,620	4,254	4,525	5,430
4	2,183	2,729	2,838	3,013	3,275	4,039	4,367	5,130	5,458	6,550
5	2,557	3,196	3,324	3,528	3,835	4,730	5,113	6,009	6,392	7,670
6	2,930	3,663	3,809	4,043	4,395	5,421	5,860	6,886	7,325	8,790
7	3,303	4,129	4,294	4,559	4,955	6,111	6,607	7,762	8,258	9,910
8	3,677	4,596	4,780	5,074	5,515	6,802	7,353	8,640	9,192	11,030
<i>Each add'l person, add:</i>	374	468	486	516	561	692	748	879	935	1,122

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for additional resources, please call 2-1-1 or go to <https://www.211ct.org/>*

SUMMARY CHART

AGENCY/PROGRAM and SUMMARY	CONTACT INFORMATION
<p>2-1-1 www.211ct.org 24 hour information and referral to health and human services in CT; Crisis intervention; Suicide prevention</p>	<p>2-1-1 (V/TDD) (800)203-1234 (V/TDD)</p>
<p>ACQUIRED BRAIN INJURY WAIVER, SOCIAL WORK DIVISION, CONNECTICUT DEPARTMENT OF SOCIAL SERVICES Medicaid waiver program for adults ages 18-64 who have an acquired brain injury. Waiver services must keep individual from placement in nursing facility, chronic disease hospital or long term care facility. Income/asset restrictions.</p>	<p>Call DSS Community Options Unit – 1-800-445-5394</p>
<p>AIDS AND CHRONIC DISEASES, DIVISION OF, CONNECTICUT DEPARTMENT OF PUBLIC HEALTH http://www.ct.gov/dph/cwp/view.asp?a=3135&q=387010&dphNav_GID=1601&dphPNavCtr=#47044 Funds community HIV and STD testing sites, HIV prevention programs, CARE partner notification program; Also provides information and referral to chronic disease diagnosis and treatment providers.</p>	<p>(860)509-7806 (M-F: 8am-4:30pm)</p>
<p>AIDS.GOV Provides access to Federal HIV/AIDS information through a variety of new media channels; supports the use of new media tools by Federal and community partners to improve domestic HIV programs serving minority and other communities most at-risk for, or living with, HIV.</p>	<p>http://www.aids.gov/</p>
<p>AIDSINFO Centers for Disease Control's Information line for HIV/AIDS treatment options and clinical trials.</p>	<p>(800)CDC-INFO (800-232-4636) (888)232-6348 (TTY)</p>
<p>AIR CARE ALLIANCE www.aircareall.org Central listing of aviation organizations providing free air transportation for medical care.</p>	<p>(888)260-9707</p>
<p>ALCOHOL AND DRUG INFORMATION, SAMSHA NATIONAL CLEARINGHOUSE FOR www.samhsa.gov National substance abuse information and referral line.</p>	<p>(800)662-4357 (800)487-4889 (TTY)</p>
<p>ALZHEIMER'S ASSOCIATION http://www.alz.org/ct/ Health advocacy organization supports and assists people with Alzheimer's disease and related disorders and their caregivers.</p>	<p>(800)272-3900</p>
<p>AREA AGENCIES ON AGING http://www.ct.gov/agingservices/cwp/view.asp?a=2511&q=313032 Information and referral for older adults; also manages the CHOICES Program, the National Caregiver Support Program, and the CT Statewide Respite Care Program.</p>	<p>(800)994-9422</p>

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AGENCY/PROGRAM and SUMMARY	CONTACT INFORMATION
BREAST AND CERVICAL CANCER (BCC) EARLY DETECTION PROGRAM http://www.ct.gov/dph/cwp/view.asp?a=3124&q=388824&dphPNavCtr= 47735 #47737 Free breast and cervical cancer screening program for women who have no health insurance or who have insurance that does not cover Pap tests or mammograms.	For referral to a BCC screening site, call 2-1-1 or DPH: (860)509-8251
CADAP, CONNECTICUT DEPARTMENT OF SOCIAL SERVICES http://www.ct.gov/dss/lib/dss/PDFs/CADAPapp03.pdf Prescription and insurance premium assistance program for people with HIV/AIDS.	(860)424-5150
CENTER FOR MEDICARE ADVOCACY www.medicareadvocacy.org Information, advocacy for Medicare-related issues.	(800)262-4414 (860-456-7790 (TDD))
CENTERS FOR DISEASE CONTROL National phone line managed by the Centers for Disease Control gives information and referrals to callers with questions about diseases and other health related issues.	(800)CDC-INFO (888)232-6348 (TDD)
CHILD ABUSE AND NEGLECT CARELINE https://portal.ct.gov/DCF/1-DCF/Reporting-Child-Abuse-and-Neglect Investigates reports of known or suspected abuse or neglect of any child under age 18.	(800)842-2288 (800) 624-5518 (TDD)
CHILD DEVELOPMENT INFOLINE http://cdi.211ct.org/ Birth to Three, Help Me Grow and Children with Special Health Care Needs programs.	(800)505-7000 (V/TDD)
CHOICES PROGRAM (AREA AGENCIES ON AGING) http://www.ct.gov/agingervices/cwp/view.asp?a=2513&q=313032 Insurance information and benefits counseling for people ages 60+, or people under age 60 who are disabled and on Medicare. Also offers assistance to Medicare beneficiaries who need help understanding the new Medicare Prescription Drug plan.	(800)994-9422
COBRA http://www.dol.gov/dol/topic/health-plans/cobra.htm Information about the federal COBRA law; or to file COBRA complaints against an employer.	U.S. Dept. of Labor (866)4-USA-DOL (866-444-3272)
COBRA– SPECIAL PROVISION FOR CT RESIDENTS http://www.cga.ct.gov/2004/rpt/2004-R-0004.htm Information about the special COBRA law for Conn. residents ages 62-65.	Connecticut Department of Insurance (800)203-3447
CONNECTICUT HOME CARE PROGRAM FOR ELDERS, ALTERNATE CARE UNIT, CONN. DEPT. OF SOCIAL SERVICES http://portal.ct.gov/DSS/Lists/Programs-and-Services Case management/financial support for medical and non-medical services needed by individuals ages 65+ who are at risk of institutionalization.	(800)445-5394 (800)842-4524 (TDD)
CONNMAP, ELDERLY SERVICES DIVISION, CONN. DEPT. OF SOCIAL SERVICES Card issued to income-eligible Conn. residents that ensures that Medicare providers will not bill for more than the Medicare–approved reasonable rate for covered services.	(800)443-9946

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AGENCY/PROGRAM and SUMMARY	CONTACT INFORMATION
CONNTRANS, ADULT SUPPORT TEAM, CONN. DEPT. OF SOCIAL SERVICES Financial assistance for income-eligible people who either need an organ transplant or have had a transplant and need help paying for maintenance medications.	(860)424-5373
CONVERSE COMMUNICATIONS www.conversecommunications.com Loaner TDD phones, closed caption interpreting for video tapes, and TDD phone repairs.	(860)242-4974 Voice/TDD (800)743-1219 Voice/TDD
DEPARTMENT OF LABOR, U.S. DEPARTMENT OF http://www.dol.gov/ Information to employees and employers about COBRA and HIPAA.	(866)4-USA-DOL
CONNECTICUT STATE DEPARTMENT ON AGING: http://www.ct.gov/agingservices/site/default.asp Information about, and referral to, state and federal benefit programs for elders.	(860)424-5274 (800)994-9422 - CHOICES
EPSDT – EARLY PERIODIC SCREENING, DIAGNOSIS AND TREATMENT Free screening, diagnosis, and treatment for all medical conditions that may affect growth and development of children ages 0-21 who have HUSKY A or Medicaid.	Information and advocacy (877)CT-HUSKY
EYECARE AMERICA http://www.eyecareamerica.org Refers low income elders ages 65+ to free or reduced fee ophthalmologists.	(800)222-3937
FRAUD REPORTING	DSS Medicaid Fraud: (800)842-2155 HHS Medicare/Medicaid Fraud: (800)HHS-TIPS CT Attorney General's Health Care Fraud: (860)808-5355
HEALTH CARE PROFESSIONALS AND PRACTITIONERS LICENSURE AND INVESTIGATION UNIT, CONN. DEPT. OF PUBLIC HEALTH Information about physician's licensure; or to file complaint.	Licensing: (860)509-7603 Complaints: (800)842-0038
HEALTHNET University of Connecticut Health Center's free, customized consumer health research service for Connecticut residents. http://library.uhc.edu/departm/hnet	860-679-4055
HEALTHY START Medicaid managed care health plan for pregnant women with household income at or below 185% FPL. (Pregnant woman is counted as family of two); No asset test.	Call 2-1-1 for application sites

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AGENCY/PROGRAM and SUMMARY	CONTACT INFORMATION
<p>HIPAA – HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT https://www.hhs.gov/hipaa/index.html Rights and protections for people whose health insurance is/was provided by a group plan.</p>	<p>CT Dept. of Insurance: (800)203-3447</p>
<p>HOME CARE PROGRAM FOR DISABLED, ALTERNATE CARE UNIT, CONNECTICUT DEPARTMENT OF SOCIAL SERVICES Funded home care services for people with disabilities. Program targets (but is not strictly limited to) adults with multiple sclerosis, Alzheimer's, cerebral palsy, Parkinson's disease, or other neurological degenerative diseases.</p>	<p>(800)445-5394 (800)842-4524 (TDD)</p>
<p>HUSKY A / HUSKY B www.huskyhealth.com Managed care health plans for children ages 18 and under</p>	<p>Access Health CT (855)-805-4325 or (877)CT-HUSKY</p>
<p>HUSKY A FOR CAREGIVER RELATIVES www.huskyhealth.com Medicaid managed care health plan for parents/ caretaker relatives who have children on HUSKY A and whose income is at or below 155% FPL; No asset limit.</p>	<p>Access Health CT (855)-805-4325</p>
<p>INSURANCE, CONNECTICUT DEPARTMENT OF www.ct.gov/cid Provides list of health insurance companies and agents registered in Connecticut, including Medigap insurers and Blue Ribbon policy providers. Will investigate complaints against insurance companies and agents.</p>	<p>(800)203-3447</p>
<p>KATIE BECKETT WAIVER, MEDICAL UTILIZATION UNIT, CONNECTICUT DEPARTMENT OF SOCIAL SERVICES (Also known as the Deeming Waiver or the 2176 Model Waiver) Medicaid waiver program enables severely disabled individuals to be cared for at home and be eligible for Medicaid based only on the individual's income and assets, and not the income/assets of legally liable relatives.</p>	<p>(800)445-5394 (800)842-4524 (TDD)</p>
<p>LEAD POISONING PREVENTION PROGRAM, CONN. DEPT. OF PUBLIC HEALTH http://www.ct.gov/dph/cwp/view.asp?a=3140&q=387550&dphNav_GID=1828&dphPNavCtr= #47067 Information about lead poisoning, treatment programs, and lead abatement.</p>	<p>(860)509-7299</p>
<p>LIONS LOW VISION CENTERS Nonprescription devices and low vision rehabilitation to assist people with low vision.</p>	<p>860-832-9601</p>
<p>MEDICAID (NOW HUSKY D), CONNECTICUT DEPARTMENT OF SOCIAL SERVICES http://www.ct.gov/dss/lib/dss/pdfs/medicaid.pdf Health insurance at no cost for very low income families with dependent children, elderly or disabled individuals, and refugees.</p>	<p>Access Health CT (855)805-4325 or DSS offices</p>

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AGENCY/PROGRAM and SUMMARY	CONTACT INFORMATION
<p>MEDICAID FOR THE EMPLOYED DISABLED (NOW HUSKY C), CONNECTICUT DEPARTMENT OF SOCIAL SERVICES http://www.ct.gov/dss/cwp/view.asp?a=2353&q=305220 People who are disabled and who are employed and paying Social Security taxes (or who have wage stubs proving earnings if not paying Social Security taxes) can earn up to \$75,000 per year AND BE ELIGIBLE FOR MEDICAID.</p>	<p>Apply online at link, call (877)CT-HUSKY or DSS Offices</p>
<p>MEDICAL SPEND-DOWN PROGRAM, CONN. DEPT. OF SOCIAL SERVICES Medicaid health insurance for individuals whose medical bills bring their income down to the "medically needy income limit" set by DSS.</p>	<p>DSS offices</p>
<p>MEDICARE www.medicare.gov Federal insurance program for all Social Security recipients ages 65+, people who are permanently disabled and who have been receiving Social Security benefits for two years, and people with end stage renal disease.</p>	<p>(800)MEDICARE (877)486-2048 (TDD)</p>
<p>MEDICARE ADVANTAGE PLANS A Medicare beneficiary can elect to receive Medicare benefits through an HMO. The beneficiary must remain enrolled in both Medicare A and Medicare B and receives all of the rights and benefits entitled under Original Medicare. Most plans require a monthly premium, especially if the plan includes a prescription drug benefit.</p>	<p>CHOICES Program at the Area Agencies on Aging (800)994-9422</p>
<p>MEDICARE SAVINGS PROGRAMS CONNECTICUT DEPARTMENT OF SOCIAL SERVICES QMB, SLMB, ALMB: Income eligible individuals and couples can enroll in a Medicare Savings Program that will pay for Medicare premiums, deductibles or co-pays. Level of benefit depends upon income.</p>	<p>DSS offices</p>
<p>MEDIGAP Privately purchased insurance policies that supplement benefits available through Medicare Parts A and B. (People on Medicare who have very low income and assets use Medicaid to supplement Medicare.)</p>	<p>Conn. Dept. of Insurance: (800)203-3447 CHOICES Program: (800)994-9422</p>
<p>MENTAL HEALTH INFORMATION CENTER, SAMHSA NATIONAL http://www.samhsa.gov/ National mental health information and referral line.</p>	<p>1-(877)-SAMHSA-7 (866) 889-2647 (TDD)</p>
<p>NEAT MARKETPLACE http://www.neatmarketplace.org/ Used, restored assistive devices and medical equipment/supplies for sale.</p>	<p>(866) 526-4492</p>
<p>NEEDYMEDS http://www.needymeds.com Web-based information on free or discounted prescription assistance programs that are offered by pharmaceutical companies. Programs and eligibility vary.</p>	<p>(website; no phone)</p>
<p>NORD – NATIONAL ORGANIZATION FOR RARE DISORDERS https://rarediseases.org/ Information about rare disorders; Also provides prescription assistance for certain drugs.</p>	<p>(800)999-6673</p>

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AGENCY/PROGRAM and SUMMARY	CONTACT INFORMATION
OFFICE OF THE HEALTHCARE ADVOCATE www.ct.gov/oha Mediates disputes between managed care companies and beneficiaries; Informs callers on rights and how to appeal a decision.	1-866-HMO-4446
ONESIGHT http://www.onesight.org/ Free vision screening and eyeglasses for people without insurance who do not have the means to pay for them. Call LensCrafters, Pearle Vision, Sears Optical and Target Optical stores to ask about program requirements.	1-888-935-4589
PARTNERSHIP FOR PRESCRIPTION ASSISTANCE www.pparx.org Phone or web-based information on free or discounted prescription assistance programs that are offered by pharmaceutical companies, and federal and state programs.	Website; or call 1-888-4PPA-NOW (1-877-477-2669)
PCA (PERSONAL CARE ASSISTANT) WAIVER PROGRAM, Community Options Unit, CONNECTICUT DEPT. OF SOCIAL SERVICES The PCA Waiver Program funds personal care aides for income/asset eligible adults ages 18-64 with severe and permanent physical disabilities who want to live independently.	800-445-5394, Option 4 Apply online at: www.ascendami.com

PLANNED PARENTHOOD OF SOUTHERN NEW ENGLAND http://www.plannedparenthood.org/ppsne/Reproductive health care services for both males and females on a sliding fee basis.	To find nearest clinic (800)230-PLAN
PROTECTIVE SERVICES FOR THE ELDERLY (PSE), CONNECTICUT DEPARTMENT OF SOCIAL SERVICES http://www.ct.gov/dss/cwp/view.asp?a=2353&q=416642 Investigates reports of known or suspected abuse or neglect of any adult ages 60 and over.	(888)385-4225 After Hours – 1-800-203-1234 (2-1-1)
PUBLIC HEALTH, CONNECTICUT DEPARTMENT OF (DPH) www.ct.gov/dph Provides information about licensing status of medical facilities and practitioners, investigates complaints; administers funding for public and community health programs.	(860)509-8000 (860)509-7191 (TDD)
CT QUITLINE Quitline offers smoking/tobacco use cessation information and referrals to cessation programs and resources. CT Quitline is administered by the CT Dept. of Public Health.	866-QUIT-NOW (1-800-784-8669)
SAGA MEDICAL (NOW HUSKY D), CONNECTICUT DEPARTMENT OF SOCIAL SERVICES Health insurance for very low income adults without dependent children.	(877)CT-HUSKY DSS offices and sub offices
SICKLE CELL DISEASE/SICKLE CELL TRAIT TESTING Information, case management, support groups and free sickle cell trait testing: Citizens For Quality Sickle Cell Care: www.cqsgcc.org Sickle Cell Disease Assn. of Southern Conn.: www.scdaaofsouthernct.org	(860)724-0664 (Hartford) (860)223-7222 (New Britain) (888)745-2327 (Southern CT)

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SOCIAL SERVICES CONNECTICUT DEPARTMENT OF (DSS) – CENTRAL OFFICE, PUBLIC INFORMATION LINE http://www.ct.gov/dss/site/default.asp Administers Medicaid, Medicaid and SAGA programs.	(800)842-1508 (800)842-4524 (TTY)
STATEWIDE LEGAL SERVICES www.slsct.org Advocacy and legal representation for low income individuals and families in relation to public welfare health insurance programs such as HUSKY, Medicaid, Healthy Start, SAGA.	(800)453-3320
STD NATIONAL HOTLINE National 24 hr. hotline managed by the Centers for Disease Control gives information and referrals to callers with questions about sexually transmitted diseases.	(800)232-4636 (800)243-6348 (TDD)
SUICIDE HOTLINE, 2-1-1 www.211ct.org If you are in a life threatening situation, dial 9-1-1 If you are in crisis, dial 2-1-1 in Connecticut. Outside Connecticut call at 1-800-273-8255 for the National Suicide Prevention Lifeline In Spanish 1-800-273-8255 (press 2) Connecticut's 24 hour suicide prevention hotline. 2-1-1 is accredited by the American Association of Suicidology	Call 2-1-1
TECH ACT PROJECT, CONNECTICUT BUREAU OF REHABILITATION SERVICES http://www.cttechact.com/index.php Low interest loans for people with disabilities to purchase equipment or make modifications to enhance independence.	(800)537-2549 (860)424-4839 (TDD)
TREVOR HELPLINE www.thetrevorproject.org 24 hour crisis hotline for gay or questioning youth.	(866)488-7386
TUBERCULOSIS CONTROL PROGRAM, CONNECTICUT DEPARTMENT OF PUBLIC HEALTH http://www.ct.gov/dph/cwp/view.asp?a=3136&q=388584&dphNav_GID=1601&dphPNavCtr=#47055 Surveillance, prevention and control program ensures that all cases of TB in Connecticut are monitored and treated. Public tuberculosis clinics provide no fee TB treatment and medications.	(860)509-7722
VETERANS AFFAIRS, CONNECTICUT HEALTHCARE SYSTEM http://www.connecticut.va.gov/ Primary health care, behavioral health care, and prescription drug program for eligible veterans.	VA Health Benefits Call Center (866)808-7921 Eligibility Office at West Haven Medical Center (203)932-5711, Ext. 3328

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