

SustiNet Health Partnership

Board of Directors

Co-Chairs
Nancy Wyman
State Comptroller

Kevin Lembo
State Healthcare Advocate



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Board of Directors Special Meeting

June 1, 2010

Summary

Attendees (22): Nancy Wyman, Comptroller, Co-Chair; Kevin Lembo, State Healthcare Advocate, Co-chair; Jeannette DeJesus; Margaret Flinter; Bruce Gould; Paul Grady; Bonita Grubbs; Norma Gyle; Alex Hutchinson; Nancy Heaton; Jeffrey Kramer; Sal Luciano; Joseph McDonagh; Jamie Mooney; Lucy Nolan; ; Rafael Perez-Escamilla; Andrew Salner; Marlene Schwartz; Marie Smith; Marie Spivey; C. Todd Staub; Cristine Vogel; Tory Westbrook

Office of the Healthcare Advocate (3): Africka Hinds-Ayala; Marilyn Rice; Vicki Veltri

Office of the State Comptroller (1): David Krause

SustiNet Consultants (3): Linda Green (Goddard Associates); Katherine London (UMass Medical School); Anya Rader Wallack (Arrowhead Health Analytics)

Absent (6): Ellen Andrews; Michael Critelli; David Henderson; Estela Lopez Michael Starkowski; Thomas Sullivan

Kevin Lembo opened the meeting by welcoming all attendees and asking board members and co-chairs to introduce themselves.

The approval of the May 14, 2010 was tabled until June 9, 2010.

Anya Rader Wallack explained the process for the presentations stating that each committee/taskforce co-chair(s) will have ten minutes to present with timing indicators given at 5, 2, and 1 minute(s) remaining to complete the presentation of recommendations. There will be feedback to committee/taskforces by June 8, 2010 to the respective co-chairs to fill in any gaps or clarify recommendations. The consultants will work with the Office of the Healthcare Advocate (OHA) and Office of the State Comptroller (OSC) Staff to compile a listing of recommendations and final report from the Board. The final report with the listed recommendations will be submitted by July 1, 2010.

The committee/taskforce co-chair(s) presented their recommendations from the SustiNet Advisory Committee and Task Forces: Templates Summarizing Work to Date – May 26, 2010; please click [here](#) to view this master document. After each presentation, there was a brief discussion / question & answer period. The presentations were done in the same order as in the above stated document and as follows:

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Bruce Gould • Paul Grady • Bonita Grubbs • Norma Gyle • Jeffrey Kramer
Estela Lopez • Sal Luciano • Joseph McDonagh • Jamie Mooney

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- **HEALTH DISPARITIES and EQUITY ADVISORY COMMITTEE (Marie Spivey and Rafael Perez-Escamilla)**

The recommendations were presented from the Master Template. There were no questions or additional recommendations for this committee.

- **TOBACCO and SMOKING CESSATION TASK FORCE (Jeannette DeJesus and Andrew Salner)**

The recommendations were presented from the Master Template. There were several questions and noted bullet points as follows:

- A 60% reimbursement rate grant missed for the Medicaid population under the federal healthcare reform law
- Cigarette vending machines still exist in restaurants, bowling alleys, and other public places
- As tobacco costs increase there is an increased rate in cessation
- There is no fair trade law with tobacco products, thus, certain retailers can mark-up prices for increased profit
- Of the \$450M received from tobacco settlement fund, CT only place \$10M towards cessation services
- Tax difference among tobacco products (i.e. cigarettes v. chewing tobacco); no parity-only cigarettes are taxed
- Employers should be given financial incentive to offer cessation services / counseling to employees
- Increase monthly health insurance premium for smokers

- **CHILDHOOD and ADULT OBESITY TASK FORCE (Lucy Nolan and Marlene Schwartz)**

The recommendations were presented from the Master Template. There were several questions and noted bullet points as follows:

- Connecticut has no Body Mass Index (BMI) for children; BMI laws exist in 21 states
- BMI indicators can/should be included with school records
- Obesity begins before conception; therefore, target health eating and feeding habits with parents
- Should increase the number of baby friendly hospitals; only two exist in Connecticut
- Taxation on sugar beverages
- Consider health insurance premium based on body weight (controversial issue that can be viewed as discriminatory)
- Consider the low-income population's access to health foods
- Reward system / Incentives for positive action

- **HEALTHCARE QUALITY and PROVIDER ADVISORY COMMITTEE (Margaret Flinter and C. Todd Staub)**

The recommendations were presented from the Master Template. There were several questions and noted bullet points as follows:

- Must increase translation services availability, accessibility, and languages
- Consider ACOs and medical homes
- Develop Uniform Standards; Transparency
- SustiNet should drive provider payment

- **PREVENTIVE HEALTHCARE ADVISORY COMMITTEE (Nancy Heaton)**

The recommendations were presented from the Master Template. There were several questions and noted bullet points as follows:

- Develop individualized health plans with packages for premium payment and reimbursement rates
- Create built-in incentives with each individualized plan
- SustiNet governance body should have flexibility and authority with a clinical advisory group
- Develop community initiative groups
- SustiNet to authorize entity by legislative action
- Medical Home Model compliments the preventive plan especially in the health disparity/equity arena
- Standardized healthcare delivery at different age levels through the employer (complete test at age XX)

- **HEALTH INFORMATION TECHNOLOGY ADVISORY COMMITTEE (Marie Smith and Alex Hutchinson)**

The recommendations were presented from the Master Template. There were several questions and noted bullet points as follows:

- Implementation of patient-carried card
- Healthcare Insurance plans to require same information
- Standardized HIT services across all areas of SustiNet
- Review technologies of other states.

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▪ HEALTHCARE WORK FORCE TASK FORCE (Anya Rader-Wallack)

The recommendations were presented from the Master Template. There were several questions and noted bullet points as follows:

- Potential disconnect between vision of SustiNet and healthcare workforce (*SustiNet role v. good state policy*)
- Medical Assistants are core of the work force but held back because of education; APRNs can have patients
- Scope of Practice Laws are restrictive
- Training and recruitment continues to be an issue, especially among men
- Nursing Instructor shortages
- Must address financial barriers for primary care physicians – loans, housing, cost-of-living wages, etc.
- Must increase workforce diversity

▪ PATIENT-CENTERED MEDICAL HOME ADVISORY COMMITTEE (Anya Rader-Wallack and Tory Westbrook)

The recommendations were presented from the Master Template. There were several questions and noted bullet points as follows:

- Designed for a range of patient needs; severity of issues
- Allows for care coordination
- Redesign the Care Team for a patient's panel
- Availability of the Patient-Centered Medical Home across the State of Connecticut

▪ RECURRING THEMES AMONG THE ADVISORY COMMITTEES and TASK FORCES

- SustiNet plan governance: Who will have the authority?
- Availability of specific Funding Streams (Tobacco Cessation, HIT, HDEC, etc.)
- Must provide Care Payment Reform (Pay-for-Performance)
- Must include Data and Evaluation Measurement
- Must consider Dual Eligibles (Medicare and Medicaid)

There was no unfinished business to come before the Board.

The meeting was adjourned.

Next meeting will be on June 9, 2010 at 9:30 AM to 12:00 PM.

Location: Legislative Office Building – Room 1B