



SustiNet Health Partnership

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SUSTINET BOARD RECEIVES POSITIVE RECEPTION
AT PUBLIC BRIEFINGS
Next Step: Briefing to Legislature

Hartford, CT—Connecticut residents and representatives from state professional and community organizations turned out for two public briefings hosted by the Board of the SustiNet Health Partnership. At the briefings, the Board outlined its progress toward creating a set of recommendations on providing a new plan for health care in the state and shared its findings on potential cost savings, timelines, strategies and next steps. The SustiNet Health Partnership is a state effort to identify, recommend and implement an efficient and cost effective health insurance model that will provide affordable access to quality health care for Connecticut residents.

The public briefings were held on December 6th at Hill Regional Career High School Auditorium in New Haven and on December 7th at the Legislative Office Building in Hartford. SustiNet Board co-chairs Nancy Wyman, State Comptroller and Lieutenant Governor-Elect and Kevin Lembo, State Healthcare Advocate and Comptroller-Elect hosted both events. Other members of the SustiNet Board and the Board's consulting team were also in attendance. The evening kicked off with brief statements from Wyman and Lembo, followed by a short presentation on the status of the SustiNet recommendations. The bulk of the meeting gave the audience an opportunity to voice their opinions and ask questions.

"We are charged with a huge task," acknowledged Lembo. "[We need] to look at the \$7 billion we are spending in health care and to figure out how to do that smarter. We are not trying to re-invent the wheel, when the wheel is in fact working. We are looking for the spare tire in places where it is not working."

Currently, Connecticut spends \$7 billion to provide health care for state workers, retirees, prisoners and some 400,000 Medicaid recipients – many of whom are children. Modeling provided by the SustiNet consulting team showed that SustiNet will result in a net savings for Connecticut as it leverages new resources available from the federal government.

"The idea behind SustiNet is that if the state managed health care spending better, it would save money for the taxpayers," said Katherine London, Executive Director of the Massachusetts Health Care Quality and Cost Council and consultant to the SustiNet Board. "SustiNet's goal is to provide better access to affordable, high quality care that promotes health while leveraging purchasing power to improve health care delivery statewide."

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Board members also noted their desire to restructure current fee-for-service models and raise reimbursement levels for health care providers in order to focus on preventative care and promoting better outcomes. Other strategies to streamline and improve quality of care will likely include guidelines on enhanced data collection, electronic records, evidence-based care practices and cultural competence training.

The public reception to SustiNet's preliminary findings was overwhelmingly positive.

"This is a transition point that can make Connecticut a rising star that addresses cost and quality issues that weren't addressed in the federal health care reform," said Dr. Eric Hudson, an Ob Gyn and member of the Connecticut branch of Doctors for Patients, who attended the New Haven briefing.

Dave Nelson, a retired minister from Mansfield, offered support from the grassroots as a member of the Caring Families Coalition. He said, "People are literally dying because they don't have access to healthcare." He concluded, "There is nothing more important we can work on than this."

Though both Wyman and Lembo reiterated that no final decisions have been made, the SustiNet Board outlined a phased roll-out, starting in 2011 with moving coverage for Medicaid recipients, HUSKY enrollees, as well as current and retired state workers under the SustiNet umbrella. The Board hopes that SustiNet will expand to other individuals and as an option to municipalities, non-profit organizations and small businesses by 2012. Finally, by 2014, SustiNet is expected to be offered through Connecticut's federally required insurance exchange.

Based on the feedback from these briefings, the SustiNet Board will make a set of final recommendations on health care in the coming weeks. "The final weeks are critical," said Wyman. "It's like the last couple of weeks of having a child. It's a little painful now, but we are going to get it done."

A subsequent meeting of the SustiNet Board, which is open to the public, is scheduled for December 15 at 9:00 am and a follow up briefing for state legislators and their staff on December 16 at 9:00 am, both in the Legislative Office Building in Hartford. Final recommendations from the SustiNet Board will be brought before the Connecticut General Assembly by January 1, 2011.

More information on SustiNet is available at www.ct.gov/sustinet.

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