Marie Spivey opened the meeting by welcoming committee members and the Office of the Healthcare Advocate staff. Marie announced that the Federal Health Care Reform bill had passed on March 21, 2010.

Marie requested that all present in person and via phone stated their names and respective organizations.

The March 1, 2010 meeting minutes were tabled until the next meeting.

Marie provided to the SustiNet Board of Directors a written report of the HDEC advancements to date, please click here.

Marie, Estela Lopez, and Bonita Grubbs provided the committee with a summarized update of the SustiNet Board of Directors meeting held on March 10, 2010 as follows:

- Committee verbal / written reports were provided to the SustiNet Board
- Sustinet has 60-days to provide the Connecticut legislature with a written report about SustiNet Plan
- Nancy Wyman discussed funding from the Connecticut Health Foundation
- Stan Dorn and Congressman Chris Murphy joined the meeting via phone
- Development with Obesity Task Force to track body mass index

Marie informed the group that she had a call with Stan Dorn of the Urban Institute, Inc. on March 11, 2010 regarding the direction of the committee and the opportunities that are ahead to reduce or eliminate health disparities under SustiNet. There was discussion regarding verbiage of federal legislation that addresses health disparities / inequities, Stan indicating that Connecticut is in a good position because of SustiNet, and interface with other committees to reach a finalized plan about health disparity / inequity. Marie provided a written report of the meeting call with Stan Dorn, please click here.
Marie announced that Sandra Brown has been appointed by the SustiNet Board of Directors to serve on the committee at the March 10, 2010 meeting and that Elizabeth Krause, Senior Program Officer for the Connecticut Health Foundation, has accepted the invitation to serve as a permanent committee member. Ms. Krause will be approved and appointed at the next SustiNet Board of Directors meeting.

The presentation by Dr. Margaret Hynes was tabled to a future meeting. Marie Spivey will call Meg Hooper at the Department of Public Health and Rafael Perez-Escamilla will reach out to Margaret Hynes to schedule a future presentation.

Stephanie Paulmeno announced that Marie Spivey has been appointed as the Chairman of the Commission on Health Equity. Marie stated that the Commission on Health Equity still has three vacant positions. The Data Committee has researched and recommended to the Commission 5 health priorities which need direct attention. The Commission will interview and collaborate with various state agencies to discover what their plans are and how their objectives – if met – will eliminate health disparities. The commission’s responsibility is to learn what barriers/ accomplishments the departments have encountered, and what role will the Commission can play to assist them. Stephanie suggested publications such as the Connecticut Heart, Cancer, and Stroke Plan to include actual health equity wording.

Rafael Perez-Escamilla addressed the HDEC Strategic Plan on how it would be accomplished. Estela Lopez questioned how the committee would go about getting the objectives as a part of the agenda or policy and where would these recommendations from the committees go. Sharon Mierzwa mentioned that Section 11 of PA 09-148 speaks to a Clearinghouse that can be used to address certain health disparity issues. Marie stated that she will send an e-mail to all committee co-chairs asking how health disparity / equity is being addressed within their committee work, plan, and reports. Bonita stated that PA09-148 is a plan to design a system where action is to be taken. Grace Damio questioned if other committees would need information from the HDEC to answer the questions that are being asked. Leo Canty questioned if the committee felt comfortable with stating or indicating a baseline.

Arvind Shaw stated that the committee should look at the minority population served within each health insurance plan and use the historical data published by these plans that go before the managed care council. Grace said the language is usually incremental and not provided in an objective/measure format. Elizabeth indicated that it is the process versus the process of care that can aid in the reduction of mortality. Arvind and Elizabeth stated that they will get data to share at the next meeting.

Sharon indicated that she would provide a link to the National Healthcare Quality Report. Arvind stated that the Connecticut Department of Public Health reported preventable hospitalizations that cost approximately $45 million and there are Connecticut county health rankings done by the Robert Wood Johnson Foundation. Sharon stated that these ranking are not reliable because of how the reporting is done. Marie will be going to DPH on March 24, 2010 to discuss other issues, but will try to get more information that speaks to this data.

Leo Canty asked is there is a common theme to standardizing cultural competency in healthcare. Yolanda said there is information out there that has been tested and can be used. Grace implied that a national standard can create a simplistic stereotype used to train medical faculty. Elizabeth stated that cultural competency should be placed on the public agenda because it aides healthcare delivery. Bonita requested that the committee pays special attention to the original SustiNet bill because it framed the issue of immigrants who are not citizens and cannot receive healthcare. Leo said that Ct in the current state cannot survive with the current pool of workers and therefore need to bring in more workers.

Estela stated that there was a bill that grants immigrant high school graduates who have been in state for at least five years can attend a state college and pay in-state tuition, which was vetoed by Governor Rell. Arvind stated that US population growth is slow and the restrictions on immigrants to 970 thousand per year do not help. Rafael said there are very vulnerable groups within the US and if there is immigration reform are we ready to absorb them with in the new healthcare system. Yolanda stated that immigrants use the emergency room as primary healthcare.

The April 2010 meeting dates and times were agreed to be Tuesday, April 6 and Monday, April 19, with both meetings being held at AFT-Connecticut beginning at 7:30am.

Meeting was adjourned.