



STATE OF CONNECTICUT
LIEUTENANT GOVERNOR NANCY WYMAN

The SustiNet Health Care Cabinet

Tuesday, January 10, 2012
Meeting Minutes

Cabinet Attendees: Nancy Wyman, Lieutenant Governor, Chair; Patricia Baker, Vice Chair; Ellen Andrews; Phil Boyle; Roderick Bremby; Jeannette DeJesus; Bonita Grubbs; Janice Gruendel; William Handelman; Sarah Kolb; Kevin Lembo; Jeffrey Lucht; Terrence Macy; Donna Moore; Jewel Mullen; John Orazietti; Frances Padilla; Lou Pozella; Pat Rehmer; Margaret Smith; Linda St. Peter; Alfreda Turner; Vicki Veltri; Joanne Walsh; Peter Zelez

Absent: Secretary Ben Barnes; Steven Hanks; Jeffrey Lucht; Robert Tessier; Tory Westbrook

Invited: David Gilbertson, Health Information Technology Exchange of CT

Lieutenant Governor Nancy Wyman opened the meeting by welcoming all attendees and having Cabinet members introduce themselves. She welcomed new Cabinet members Donna Moore and John Orazietti.

Minutes from the December 8, 2011 meeting were approved with no changes.

Commissioner Jewel Mullen spoke of the development of the Health Information Technology Exchange of CT (HITE), a health reform initiative the Department of Public Health is overseeing. HITE will allow providers to share pertinent information on patients' care. Axway is the vendor that will create HITE, and David Gilbertson has been chosen to be the CEO for HITE. Mr. Gilbertson provided an overview of HITE, saying this isn't simply the implementation of a new technology project but rather is a central part of health care transformation. Mr. Gilbertson emphasized the importance of networking to inform providers about HITE, adding that the Cabinet will be essential with this. He expressed hope that providers who utilize HITE will demonstrate its value and be the best advocates for getting the word out. There was discussion about the eventual inclusion of mental health and dental records in HITE and the importance of protecting patient records. Further information on HITE is available [online](#).

The Governor's Special Advisor Jeannette DeJesus provided updates on initiatives undertaken by the Office of Health Reform & Innovation. She reported on the Statewide Multi-Payer Data Initiative, saying that a work plan and timeline have been created, funding sources are being identified, and there is ongoing discussion about the need for enabling legislation. Further information on the Initiative is posted [online](#). The Office is also working in collaboration with

the Comptroller's Office, DSS, and OPM in applying for a grant to assist with strengthening primary care in CT. This funding would support seventy-five practices in several areas such as developing the technology needed to participate in integrated service care delivery. Special Advisor DeJesús spoke of the establishment of the Consumer Advisory Board, sharing the names and affiliations of eight members who have been selected. The list of member names and information for this initial meeting can be found [online](#). Cabinet member Frances Padilla questioned why there were no consumers on the Board. Special Advisor DeJesús responded that each member represents consumers. In addition, this Board will appoint additional members and will host a consumer at each Board Meeting.

Commissioner Roderick Bremby reported on activities of the Health Technology work group. He said this group conducted an inventory of systems currently in place and initiatives being launched. The group believes that its biggest challenges are governance, integration and alignment of various efforts in order to achieve the desired outcome. Policy issues have been identified and will be further examined and presented to the Cabinet. Information on the activities of the Health Technology work group is posted [online](#).

Vice Chair Pat Baker reported briefly on the Delivery System Reform work group. This group had presentations from the Comptroller's Office and DSS regarding delivery system innovations and reforms being done, particularly regarding medical homes. This group's work is still in the preliminary stage; input from the Cabinet is welcome. More information on Delivery System Reform is available [online](#).

Special Advisor DeJesús asked if Cabinet members had anything to report on grant activities. She reported that the Office of Health Reform and Innovation has applied to the CT Health Foundation for a grant to support its work in eliminating health disparities. Cabinet member Bonita Grubbs asked what efforts were being made in terms of health equity and what the focus of this grant would be. Special Advisor DeJesús responded that the grant follows guidelines from the National Association of State Health Policy to assist in addressing equity issues. The Office has created a work plan that includes working with DPH in coordinating training. Healthcare Advocate Vicki Veltri mentioned that Dr. Raja Staggers-Hakim serves as Director of the Commission on Health Equity and suggested she address the Cabinet on disparities.

There was no report from the Health Insurance Exchange.

Cabinet member Frances Padilla provided an extended update on activities of the Business Plan Development work group. She described some of the groups that may be left out of the Exchange or will have inadequate subsidies, including legal immigrants with very low incomes. She explained that this population would benefit from the Basic Health Program. Slides from Ms. Padilla's presentation are posted [online](#). Healthcare Advocate Vicki Veltri said the Business Plan work group is looking at data in a broader scope than the Exchange is, and this work group's efforts can help the Cabinet in developing broader-based health care reform in addition to informing the Exchange as it evolves. Ms. Padilla added that this work group will share its findings with the Exchange Board after conducting further data analysis. Ms. Veltri said she feels the work of the Exchange will inform the Cabinet and the Business Plan work group of efforts for modeling potential options, whereas this work group could develop a public option (an alternative insurance plan) among other things which will not be addressed by the

Exchange. When Dr. Margaret Smith asked if dental care would be considered an essential benefit, Ms. Padilla replied that dental benefits will be included. Special Advisor DeJesús emphasized that the patient is at the center of all health care reform efforts, adding that there needs to be constant integration of the work done by the Cabinet and work groups with efforts done by various agencies and communities. Deputy Commissioner Janice Gruendel asked where the increase in autism fits into this. Special Advisor DeJesús replied that this is a significant problem that needs to be addressed, adding that one member of the Consumer Advisory Board was chosen because of her experience in working with autism issues. Special Advisor DeJesús welcomed suggestions from Cabinet members regarding other groups and issues that have not yet been addressed.

Vice Chair Baker led the discussion on Cabinet priorities for 2012. She asked that work groups each submit one to three priorities to the Cabinet before the February meeting. There was discussion about inviting Consumer Advisory Board members to join the Cabinet at the next meeting in order to learn work group priorities. Ms. Padilla suggested holding a longer, more in-depth Cabinet meeting, perhaps in a less structured setting, to have a strategic discussion. Special Advisor DeJesús said that work groups were established with the goal of organizing available data in order to inform the Cabinet in making decisions. Vice Chair Baker reminded the Cabinet members that their role is to make recommendations to the Governor, Lieutenant Governor and Office of Health Reform & Innovation on issues related to health reform implementation.

Lt. Governor Wyman summed up by saying that at the next meeting, Cabinet members can discuss the possibility of having a different type of meeting if necessary.

Meeting was adjourned.

Next meeting will be held Tuesday February 14, 2012 at 9:30 am.