



STATE OF CONNECTICUT
LIEUTENANT GOVERNOR NANCY WYMAN

Health Care Cabinet

Tuesday, June 12, 2012
Meeting Minutes

Cabinet Attendees: Lieutenant Governor Nancy Wyman, Chair; Patricia Baker, Vice Chair; Ellen Andrews; Ben Barnes; Phil Boyle; Roderick Bremby; Jeannette DeJesus; Bonita Grubbs; Jamesina Henderson; Kevin Lembo; Terrence Macy; John Oraziotti; Frances Padilla; Pat Rehmer; Margaret Smith; Linda St. Peter; Robert Tessier; Vicki Veltri; Joanne Walsh; Peter Zelez

Absent: Steven Hanks; Janice Gruendel; William Handelman; Jeffrey Lucht; Donna Moore; Jewel Mullen

1. Call to Order | Lt. Governor Wyman

Lieutenant Governor Nancy Wyman opened the meeting at 9:00 am by welcoming all attendees.

2. Public Comment | Lt. Governor Wyman

The floor was opened for public comment. Representatives from the Interfaith Fellowship for Universal Healthcare, beginning with Iman Nashif Abulnarim, spoke of obstacles faced by CT residents in obtaining health care and coverage. He emphasized that if these problems aren't solved the health care crisis will worsen. Reverend Josh Pawelek requested that the Cabinet stand with the Fellowship to demand that the Governor and the Legislature act boldly to end the suffering endured by CT residents. These speakers made recommendations for the Cabinet to include in its final report to the governor. First, create a state sponsored public option for health care, pooling all recipients of state health care dollars, and competing on the Exchange with private insurers to offer affordable health insurance to those left out of the current system. Second, eliminate race and class based health disparities. Third, Reverend Damaris Whitaker urged that the state establish a basic health program, thus creating a better system that provides care to everyone.

Dr. Doug Olson spoke, representing a coalition of concerned specialists and primary care doctors supporting the creation of a basic health program as an alternative to private insurance on the Exchange.

Claudia Epright spoke representing small businesses and consumers. She described her own personal experience with health insurance, citing unaffordable premiums, huge deductibles, and denial of services by insurance companies. She implored the Cabinet to support a nonprofit insurance plan to compete on the Exchange.

3. Review and Approval of Minutes | Lt. Governor Wyman

Minutes from the May 16, 2012 meeting were approved with no changes.

4. Office of Health Reform & Innovation - Updates | Special Advisor Jeannette DeJesús

Special Advisor DeJesús reported that some members of the Office will be attending the Governors' Association meeting in Washington DC, which will focus on planning and information on the Patient Protection and Affordable Care Act and the Supreme Court decision. Information on Office activities is available [online](#).

5. Business Plan Development Work Group - Extended Update | Frances Padilla

Ms. Padilla introduced Nancy Yedlin and Alex Hutchinson who gave a presentation on this work group's current activities, [available online](#). Ms. Padilla spoke of the overlapping work of various groups within the Cabinet, emphasizing the importance of communicating with each other. She suggested a meeting of work group co-chairs in order to best capitalize on the various recommendations being presented by the Cabinet as a whole. Secretary of the Office of Policy and Management Ben Barnes mentioned that perhaps this work group should promote a value based strategy through Medicaid, the state employee program, and other large employee sponsored programs in addition to the Exchange. Special Advisor DeJesús offered the assistance of the Office of Health Reform & Innovation in coordinating a meeting of co-chairs and leveraging available resources in moving forward.

Comptroller Kevin Lembo commented on the importance of aligning practice patterns among patient centered medical homes by setting up a common matrix, thus simplifying providers' tasks while they are engaged with patients. Additionally, he praised medical homes and the Health Enhancement Program (HEP) for showing promising dips in utilization which hopefully will lead to positive trends. He added that 96% of state employees participate in HEP and, of those, 98.1% are currently compliant with HEP guidelines. The Comptroller's Office just learned that the Robert Wood Johnson Foundation has agreed to assist the University of Michigan in conducting an assessment of the CT HEP.

Ms. Padilla spoke of the importance of improving the health care delivery system, emphasizing the role of large employers in forming partnerships with payers and employees. Vicki Veltri spoke of the importance of transparency around pricing and costs, and the need for a commitment to try to drive down prices and costs. Pat Rehmer related her personal experiences with state employee insurance, commenting that members of large employee groups have advantages in access to health care that the public sector doesn't have; this a critical issue for the Cabinet to address. Margaret Smith asked if the Business Plan has considered oral health, adding that preventive dental care ultimately reduces health care costs. Ms. Padilla said that the work group embraces the concept of complete health, which encompasses dental health; however, the group has not examined this specific level of benefits. Ms. Yedlin added that the group has not addressed plan design, but as the system evolves to become more value based, dental health should be included. Reverend Bonita Grubbs agreed, adding that while there are

still missing pieces in the recommendations, the most important role for the Cabinet is to provide health care for the uninsured.

Roderick Bremby said that as outcomes are identified, it will be essential to build a robust infrastructure for measuring those outcomes in order to calculate value. He spoke briefly about the Duals Initiative, wherein DSS examines “health neighborhoods,” in ensuring that people remain healthy. Linda St. Peter mentioned the importance of accountability. Joanne Walsh spoke of the inclusion of home care in health neighborhoods. Mr. Hutchinson spoke of the importance of engaging commercial insurers as participants in promoting value based purchasing and care delivery. Ms. Yedlin added that there is much innovation happening with commercial insurers in their partnerships with large employers; this Cabinet needs to extend that innovation to small groups and individuals. There are also opportunities to look at providers and their evolving roles in addition to those of insurers in helping to drive this system. Bob Tessier said the Exchange has a role in promoting value based health care and helping to diversify the insurance marketplace, and he requested this presentation be brought to an Exchange board meeting.

Additional information on the Business Plan work group is posted [online](#).

6. Work Group Updates

All-Payer Claims Database (APCD) | Special Advisor Jeannette DeJesús

This group is focusing on identifying and seeking funding and developing regulations around APCD operations. The Office of Policy and Management (OPM) is assisting with leadership and legal counsel in developing regulations, as OPM will issue the regulations. Further information is available [online](#).

Basic Health Plan | Special Advisor Jeannette DeJesús

This group is working to address coverage needs of the 74,000 people who will become eligible for either the exchange or the Basic Health Plan. There are plans for convening a group of diverse stakeholders for the purpose of conducting a feasibility analysis. Meeting agendas, minutes and proposed meeting dates are posted on the website, [Basic Health Plan](#).

Consumer Advisory Board | Special Advisor Jeannette DeJesús

Members of this group have attended other work group meetings to determine how to best align with existing efforts, with a focus on the Basic Health Plan and essential benefits. Additional information is posted [online](#).

Health Technology | Roderick Bremby

There is nothing new to report at this time. Information for this group is available [online](#).

Delivery System Innovation | Pat Baker

This group's priority recommendations are patient centeredness, the reduction of fragmentation and integration. The current focus is on how to take these broad priorities and turn them into short-term, intermediate action. This work group's information is posted [online](#).

7. Health Insurance Exchange Update

There was no report at this time. Information on the Exchange can be found [online](#).

8. Other Business

Secretary Barnes spoke briefly about the implementer bill being voted upon in today's special session. The bill contains changes in how childhood vaccinations are paid for. Mr. Barnes said this is a positive step, showing improvement over the current system by expanding the number of vaccines available to physicians participating in the state purchasing program which offers the lowest available prices.

Lt. Governor Wyman related the good news that Anthem and Connecticut Children's Medical Center have resolved their contract dispute.

9. Additional Public Comment

Karen Lark remarked on the billions of dollars in aid the US provides to Israel, where the high quality of universal health care offered allows Israeli citizens to enjoy the fourth highest life expectancy in the world. She added that it is time to create a nonprofit public option that allows care for all without regard to insurance companies' profits.

Eva Csejty spoke about the increasing rate of obesity and how this leads to chronic illness. Dealing with this issue now will help prevent a huge increase in health care costs. She added that preventing obesity today is also the humane thing to do.

10. Next Steps

The Office of Health Reform & Innovation will work to convene work group chairs to coordinate efforts.

11. Adjourn

Meeting was adjourned at 11:00 am. **Next meeting – Tuesday July 10, 2012 at 9:00 am.**