



Nancy Wyman  
LIEUTENANT GOVERNOR

**The Health Care Cabinet  
May 7, 2013 Meeting Minutes**

Cabinet Attendees: Lieutenant Governor Nancy Wyman, Chair; Pat Baker, Vice Chair; Ellen Andrews; Phil Boyle; Roderick Bremby; Kevin Counihan; Joe Drexler; Terry Edelman; Anne Foley; Janice Gruendel; William Handelman; Kevin Lembo; Donna Moore; Jewel Mullen; Frances Padilla; Pat Rehmer; Margaret Smith; Vicki Veltri; Joanne Walsh  
Absent: Bonita Grubbs; Steven Hanks; Thomas Leonardi; Jeffrey Lucht; Terrence Macy; Linda St. Peter; Robert Tessier

Agenda Item	Topic	Discussion	Action
1.	Call to Order & Introductions		
2.	Public Comment	No public comment.	
3.	Review & approval of 11/13/12 minutes	None.	Approved.
4.	Health Equity Intervention Grant	P. Baker described the twofold purpose of this grant, the first of which supports the engagement of a consultant for All Payer Claims Database. Secondly was the consideration of policies and actions concerning health equity that the state could take on. J. Gruendel noted the State Health Plan that DPH is creating while considering equity issues, and the policy statements or reports that have been created by many state agencies. K. Lembo said the Comptroller's office is examining state employee data to gain insights into inequities. W. Handelman pointed out that ACA requires Medicaid and Medicare rates to be equal; he also noted that	Engagement of consultant. Consideration of health equity policies and actions.

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		<p>Medicaid clients have difficulty accessing specialty care. There is a huge gap between rates paid for primary care and specialty care that must be addressed. R. Bremby said the equaling of rates is slated to go into effect 7/1/13; this should increase access.</p>	
5.	Health Insurance Exchange update	<p>K. Counihan stated progress is being made toward the implementation of the exchange which is less than five months away. CT participated in testing with federal hub, gaining experience on data connectivity to very complicated data services hub. User acceptance testing is in process; system integration testing begins 6/4/13, followed by release to user acceptance testing starting in mid July. K. Counihan expressed confidence that the exchange will be up and running on 10/1/13, adding that the biggest challenges are outreach, marketing and enrollment. Radio advertising begins in July. LG Wyman pointed out that the senior population is confused about ACA, adding that it's important that folks know that ACA doesn't affect Medicare. K. Counihan agreed, adding that small businesses also need to be informed that they will be exempt from requirements that are included in ACA. The exchange is contracting with a minority marketing firm to target racial and ethnic inequities as well as building community relationships with the seven major cities in CT, where 85% of the uninsured reside. This effort will utilize media such as community newspapers to advertise and promote the exchange. V. Veltri described exchange positions created as a result of ACA. Navigators will educate consumers about available plans in an unbiased way, conduct outreach activities and connect people to enrollment. In person assisters will provide a grass roots effort to connect people to care, going into communities and engaging with trusted advisors so that those folks can work with people, educating and enrolling them and engaging them in their health more broadly. Currently there is an RFP on</p>	

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		<p><a href="http://www.accesshealthct.com">www.accesshealthct.com</a> and <a href="http://www.ct.gov/oha">www.ct.gov/oha</a> for small grants for community organizations to employ assisters. K. Counihan spoke of the difficulties of getting young people to enroll, particularly young men, with the most difficult segment being young Hispanic men. In MA, this group was targeted with a mothers' day campaign, showing the need for creative means to reach these populations. K. Counihan spoke of the importance of educating doctors on the role of the exchange, how it will affect reimbursement rates, and efforts to do this that have been undertaken. He also said the exchange has hired an independent actuarial consulting firm to assist with rates that are filed with the exchange to ensure they are appropriate in this first year.</p>	
6.	State Innovation Model Grant	<p>V. Veltri spoke of the State Innovation Model (SIM). This initiative was born out of the ACA, which created the Center for Medicare &amp; Medicaid Innovation Center to transform the health system. States were given grants to design models to transform health care, control costs and improve health care delivery. A State Healthcare Innovation Planning Committee (SHIP) has been developed as the policy making arm of the SIM initiative. The ship will drive overarching decisions of the state around the innovation plan. McKinsey &amp; Company's role is to facilitate policy decisions toward the innovation plan. David Nuzum and Pooja Kumar of McKinsey gave this presentation on <a href="#">CT SIM</a>. V. Veltri introduced Michael Michaud and Mark Schaefer, Associate Project Directors for SIM.</p>	<p>Comments and questions are welcome; send to <a href="mailto:SIM@ct.gov">SIM@ct.gov</a>.</p>
7.	Next steps	<p>Next Cabinet meeting will be June 11, 2013 at 9:00 am; location to be determined.</p>	<p>Updated information on stakeholder engagement planning will be continuously posted on SIM and Cabinet websites.</p>
8.	Adjourn		