

Community Health Subgroup Meeting Minutes November 17, 2021

Meeting Date	Meeting Time	Location
September 17, 2021	2:00 p.m. - 4:00 p.m.	Webinar and Conference Call

Participant Name and Attendance

Community Health Subgroup Members			
Kate Breslin	X	Martha Page	X
Rick Brush	X	Deb Polun	
Angie DeMello		Lyn Salsgiver	X
Paul Dworkin	X	Megan Smith	X
Kiley Gosselin		Lisa TepperBates	
Rita Kuwahara	X	Orlando Velazco	X
Ashley McAuliffe			
Others Present			
Kelly Sinko, OHS	X	Brent Miller, OHS	X
Hanna Nagy, OHS	X	Jeannina Thompson, OHS	X

Meeting information is located at: <https://portal.ct.gov/OHS/Pages/Community-Health-Subgroup/Meeting-Agendas>

Agenda	Responsible Person(s)
1. Welcome, Roll Call, and Introductions The regularly scheduled meeting of the Community Health Subgroup (CHS) was held on Wednesday, September 17, 2021 by webinar. <ul style="list-style-type: none"> • Brent Miller welcomed subgroup members and called the meeting to order at 2:03 p.m. • Attendance was taken by roll call. It was determined that a quorum was present. 	Brent Miller, OHS
2. Public Comment There was no public comment.	Members of the Public
3. Approval of the September 22nd Meeting Minutes <ul style="list-style-type: none"> • Lyn Salsgiver motioned to approve the minutes of the Community Health Subgroup's September 22, 2021 meeting. Martha Page seconded the motion. There was no discussion. The motion passed. 	Members of the CHS
4. Primary Care Roadmap Michael Bailit and Erin Campbell, of Bailit Health, presented the Primary Care Roadmap (see meeting presentation here). <ul style="list-style-type: none"> • Highlights of the presentation included: <ul style="list-style-type: none"> ▪ An update on the work of the OHS Primary Care Subgroup ▪ An overview of Connecticut's primary care infrastructure ▪ The goals and benefits of improving primary care for patients and practices ▪ OHS has solicited and engaged broad input from stakeholders on the Roadmap ▪ The status of the draft Roadmap for strengthening and sustaining primary care ▪ Core functions adopted by OHS and essential practice functionalities. 	Bailit Health

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- Parameters for an alternative payment model to maximize overall success for both providers and payers and to ensure patients are not harmed
 - The Roadmap next steps and timeline were reviewed.
- The Subgroup discussed the presentation. There was a discussion about the 11 core functions that OHS adopted and believes will lead to high-quality primary care. It was mentioned that at the last Community Health Subgroup meeting a lot of focus was on number four and number eleven from the core functions. The discussion included questions related to how to have the community health members that were interested in the implementation phase next year, see whether a practice is community oriented and how to know if they are coordinating care. The Subgroup will work to help determine what that means to be both of those.
- There was a discussion about the alternative, voluntary payment options. There was a question regarding what the reception has been from both the practice provider side as well as the payer insurance side and if the reception is generalized to participating in these. It was noted that it is voluntary and primary care providers do not have to move to prospective payment if they are not comfortable doing so, or if they do not want to. It was mentioned that OHS has heard from a lot of providers and they are interested in this type of model, especially because of examples such as COVID-19, because prospective payment offers and much more. It was also noted that it is not being mandated for insurers at this point. Meetings are being held with insurers to obtain commitments.
- It was mentioned that there is a new Health Benchmark Initiative Steering Committee that began meeting last month. The Committee consist of various stakeholders including representatives of major insurance companies and a goal is to have them board with the Governor's vision as well.
- A question was raised on where there have been any pushbacks on the prospective payment options. It was noted that there have been some pushbacks from certain advocates that are concerned about some of the downsides of a prospective payment model. Some of the issues that people site for capitated and prospective payment models were previously discussed. It was mentioned that clarification attempts have been made about the new prospective payment model regarding incentive concerns and measures and safeguards will be put in place. It was also mentioned that some primary care practices have declined the payment model and decided they are happy with the fee for service payment. This is fine because it is a voluntary option. There are other practices that want to be free from the fee for service.
- There was a discussion about the perspective on the intersection of the Roadmap and the work of the Community Health Group. It was noted that a goal is to have a Community Health Theme in the Roadmap. There was a suggestion that it would be important for communication to be shared about the experience of other states and learning from what other states have learned with this proposal.

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	<p>Mr. Miller thanked Erin Campbell and Michael Bailit for the presentation. Several discussions ensued, for more information please see the link below. https://ctvideo.ct.gov/ohs/CHSG_Meeting_Recording_11172021.mp4</p>	
5.	HEC Playbook	Brent Miller, OHS
	<p>Brent Miller presented on the HEC Playbook.</p> <ul style="list-style-type: none"> • Highlights of the presentation included: <ul style="list-style-type: none"> ▪ An overview of the HEC Framework including goals and health priorities. ▪ An update regarding data and measurement on Connie and P20 WIN ▪ Information on the governance structure ▪ An overview of aligned strategies regarding the primary care roadmap and various state agencies. ▪ Technical support opportunities including additional resources and possible funding ▪ The HEC Playbook will be on the next Community Health Subgroup meeting agenda for discussion. <p>For more information on this presentation, please see the link below. https://ctvideo.ct.gov/ohs/CHSG_Meeting_Recording_11172021.mp4</p>	
6.	Meeting Adjournment	All
	<ul style="list-style-type: none"> • The next Community Health Subgroup meeting is scheduled on December 15^h at 2:00 p.m. • The motion was made by Rick Brush and seconded by Lyn Salsgiver to adjourn the meeting. • The meeting adjourned at 3:08 p.m. 	