

**State of Connecticut
State Innovation Model
Population Health Council**

**Meeting Summary
July 26, 2018**

Meeting Location: Connecticut Hospital Association, 110 Barnes Road, Wallingford, CT

Call to Order: Co-Chair Steve Huleatt called the meeting to order at 3:00 pm.

Public Comments: There were no public comments.

Co-Chair Steve Huleatt made a motion to approve the June 27, 2018 Population Health Council meeting summary. The meeting summary was approved.

Health Management Associates (HMA) opened by discussing HEC model elements based on feedback to date. Feedback was obtained from previous Population Health Council meetings, Health Innovation Steering Committee meetings, the first-round of “deep dives” with Reference Communities, other stakeholder engagement, State Management Team (SMT) meetings, and initial Center for Medicare & Medicaid Services (CMS) meetings.

Throughout the meeting, HMA solicited additional feedback from the Council by asking defining questions on specific **HEC model elements**. First, the HEC definition to date was revisited, along with identifying a potential HEC’s function and role as a collaborative in the community. Next, HMA presented parameters and guiding questions to obtain input on how **HEC geographies** will be determined within the scope of implementing interventions, establishing accountability, measuring outcomes and sustaining successful financing models.

HEC **structure and governance** was then explored by reviewing recommendations received thus far from Reference Community and stakeholder engagement. Additionally, it was discussed how community members and stakeholders can be engaged and involved in HECs outside of formal meetings. Recommendations from the council considered requirement options to support meaningful engagement and inclusion.

HMA also revisited the two **primary prevention aims** that HECs will seek to achieve—Improving Child Well-Being and Increasing Healthy Weight and Physical Fitness. HECs will implement upstream prevention programs aimed at improving health and health equity that are evidence-based or evidence-informed, and have some evidence of a return on investment (ROI). **HEC interventions** will also be implemented in all four categories: programmatic, policy, systems, and cultural norm. Ample community buy-in and a demonstrated financial and performance outcome measures portfolio will be a must. HECs will need to have a logic model demonstrating anticipated outcomes that tie back to state’s outcomes and on a timeline congruent with evidence-based ROI. Lastly, health equity will be embedded throughout the HEC initiative to provide all people with fair opportunities to achieve optimal health.

HMA presented a discussion on how **HECs will be held accountable** for decreasing incidence and prevalence of priority aims in their defined geographic area. HECs will need to be accountable to measure interventions and report to the state regularly. Data management protocols, measures, and reporting were discussed, along with a data analytics solution as a centralized approach to ensure the ability to compare across HECs.

Lastly, it discussed **how HECs will be funded** using outcomes-based financing. For example, a prevention oriented shared savings arrangement would complement the existing Medicare Shared Savings Program with Accountable Care Organizations. HECs will also work on pursuing sustainability strategies including with other payers, health care providers, state agencies, and other sectors. Monetizing and delivering prevention savings is at the core of the HEC model and HECs will be measured on success with upstream prevention efforts using prevention benchmarks.

Finally, HMA presented **next steps** with the Population Health Council, which include distributing the draft HEC report by early September; making edits to the report based on feedback and sending to the HISC for approval and release for public comment; three weeks in September and October are allocated for public comment; after which, comments from the public, SMT, PHC, and HISC will be incorporated for a final HEC report review and approval.

Next Meeting Date: September 27, 2018

Meeting adjourned at 5:00 pm.