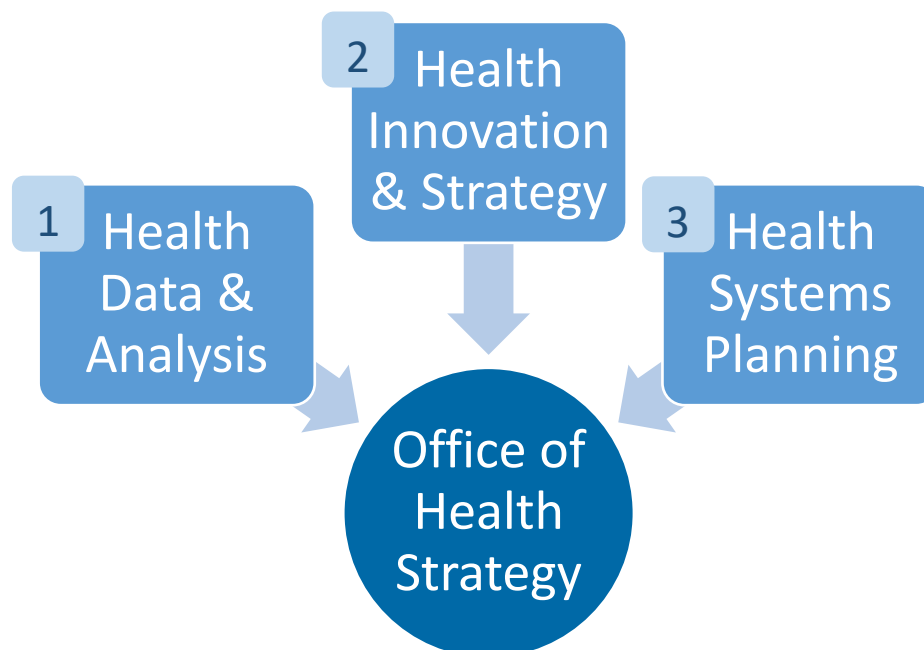

The mission of Connecticut's Office of Health Strategy is to implement comprehensive, data driven strategies that promote equal access to high quality health care, control costs, and ensure better health outcomes for the people of Connecticut.

What We Do

June Special Session PA 17-2 established a new Office of Health Strategy, effective January 1, 2018.

The OHS develops health policy that improves health outcomes and limits health care cost growth across all sectors, whether private or public, including hospitals, physicians and clinical services and prescription drugs. Creation of this office brings together critical data sets and health information exchange efforts and allows for collaboration with many stakeholders, including state agency partners. Working with comprehensive data and experts from inside and outside government, OHS will develop and support state-led multi-payer healthcare payment and service delivery reforms.

The Office of Health Strategy will include three teams, working together:



HEALTH DATA & ANALYSIS

- Create and administer a state **Health Information Exchange (HIE)** to facilitate coordination across care settings, reduce costs associated with preventable readmissions, duplicative testing and medical errors, and provide patient access to personal medical records.
- Establish and administer the **Core Data Analytics Solution (CDAS)** to enable in-depth data analytics, including electronic Clinical Quality Measures (eCQMs) to support payment and practice reforms.
- Administer the **All-Payer Claims Database (APCD)** program for the purpose of collecting, assessing and reporting health care information relating to safety, quality, cost-effectiveness, access and efficiency for all levels of health care.
- Create and administer a **consumer health information website** for the public to find accurate and reliable information to help make informed decisions when choosing health plans and providers.
- Prepare the statewide **Health Information Technology Plan (HIT Plan)** to ensure that appropriate governance, oversight and accountability measures achieve the state's health information technology goals.
- Establish **electronic health information standards** for use by health care providers and institutions including provisions relating to security, privacy, data content, structures and format, vocabulary and transmission protocols.

HEALTH INNOVATION & STRATEGY

- Develop state-led, multi-payer healthcare **payment and service delivery reforms**;
- Provide **technical assistance to providers** to support participation in model reforms;
- Develop and promote **health insurance and coverage innovations** that remove financial barriers to, or introduce rewards for healthy behavior, preventive care, medication adherence, chronic disease management, and use of high-value services and providers;
- Develop innovations for the management and financing of **cross-sector community initiatives to improve health**;
- Promote **healthcare workforce innovations**, and
- Seek and administer state and federal demonstration programs that support these activities.

3 HEALTH SYSTEMS PLANNING – COMING SOON!

On or before July 1, 2018, the Office of Health Care Access (OHCA) will be consolidated within the Office of Health Strategy as the Health Systems Planning Unit to continue and enhance health systems planning. The HSP Unit will continue to have statutory authority to **gather and analyze specified hospital financial, billing and discharge data** such as hospital expenses and revenues, uncompensated care volumes, hospital utilization, demographic, clinical, charge, payer and provider statistics.

The unit's major functions are to:

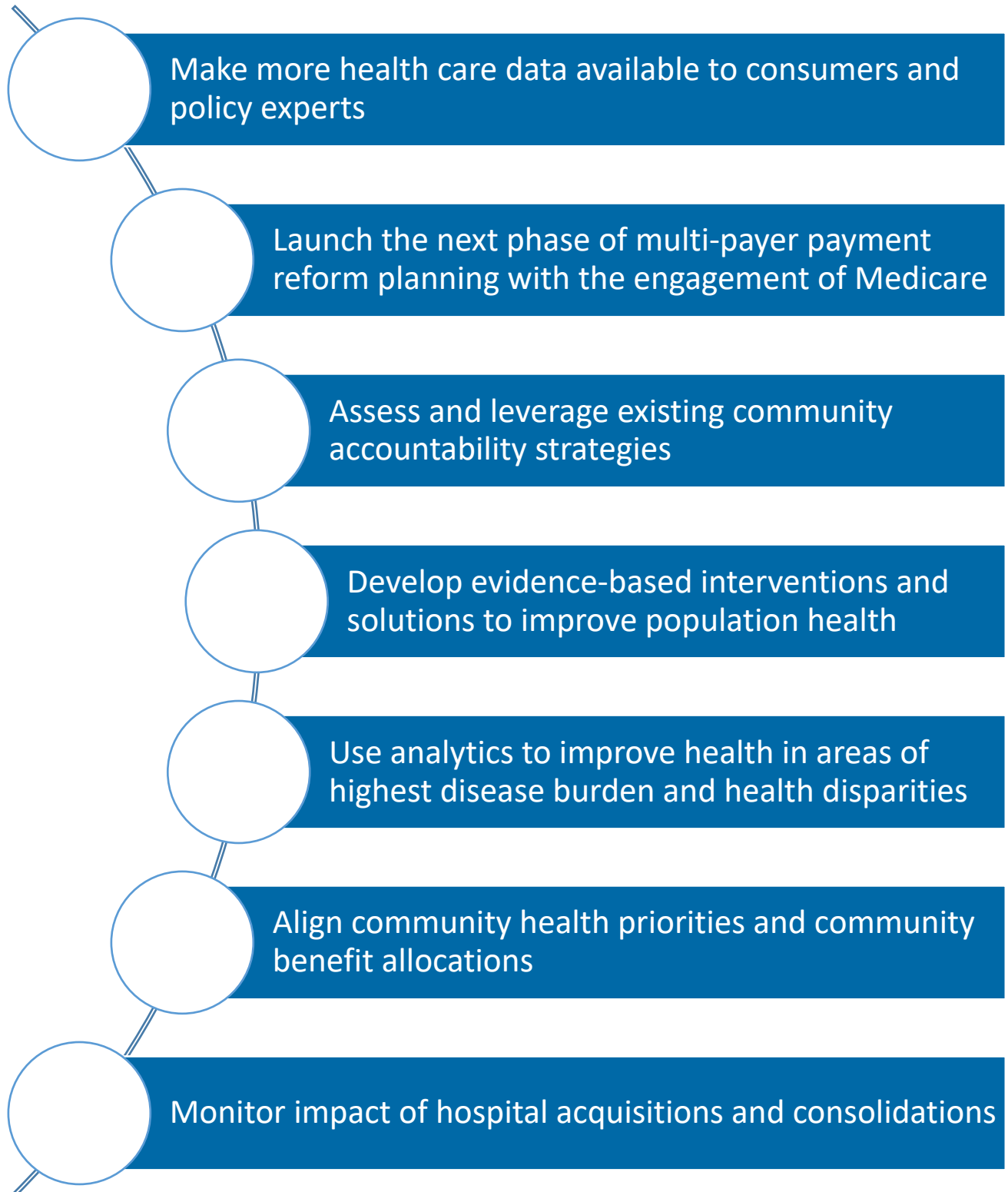
- Administer the **certificate of need (CON) program** to promote appropriate development of health facilities and services that addresses a public need. The CON program strives to ensure accessibility for needed services while limiting duplication or excess capacity of facilities and services;
- Prepare the **Statewide Health Care Facilities and Services Plan**;
- **Collect and analyze health care data and issue reports** including the biennial utilization study; and
- **Review hospital financial information and issue reports** including an annual acute care hospital financial stability report.

Existing State Resources Used in New Ways

The Office of Health Strategy was created by combining existing state projects and personnel: the Chief Health Policy Advisor from the Lt. Governor's office; the State Innovation Model (SIM) Project Management Office; the Health Information Technology Office; the Office of Health Care Access; and the All Payers Claims Database.

By combining experts, data and goals, the new OHS will provide integrated, comprehensive leadership to improve health care systems and health in Connecticut.

OHS Goals for FY 2019



WORKING TOGETHER TO FIND THE BEST SOLUTIONS

Input and guidance from all sectors is a key ingredient to the success of the Office of Health Strategy. The Executive Director will continue to convene and work closely with the Healthcare Cabinet whose members represent state leaders, providers, consumers, payers and policy experts. The State Innovation Model Steering Committee and its working groups, and the Statewide Health Information Technology Advisory Council will continue to meet to drive the best solutions to improve health and healthcare in our state.

For Consumers

- Consumer Health Information website
- Innovation to improve health and health care while controlling costs
- State oversight to ensure that services provided by hospitals and other facilities are equitably available to meet the needs of consumers across the state
- Public input through work groups and hearings
- Regular news and fact sheets about health care in Connecticut

For Physicians, Hospitals, and other Providers

- Health Information Exchange
- Technical Assistance
- Innovation to improve health care delivery
- Regulation of new services provided to specific populations to prevent higher costs or inequity
- Access to data and analysis to assist in community service and financial stability

For Policy Advocates, Researchers, and Experts

- Access to comprehensive data through the APCD and other sources
- Opportunities for data linkage between clinical, administrative, insurance, and financial data systems
- Data and analysis about hospital acquisitions and overall changes to health care delivery systems
- Reporting of national and statewide health care trends and issues
- Leadership and collaboration