

**Meeting Notes**  
**State-Wide Health Care Facilities and Services Plan Advisory Body**  
**October 12, 2011**  
**9:00 a.m.**

<b>Agenda Item</b>	<b>Discussion</b>	<b>Action/Results</b>
Item I  Opening Remarks	Kimberly Martone opened the meeting. She welcomed back the Advisory Body members and welcomed the subcommittee members that also were in attendance either in person or through conference call. Kimberly introduced OHCA's new Deputy Commissioner, Lisa Davis. All committee members introduced themselves. During the Advisory Body hiatus subcommittees were formed and its members were working on identifying data sources and sharing their expertise to enhance the content of the plan.	The subcommittees will continue to meet and move forward through the end of this year.
Item II  Minutes	Kimberly Martone asked if anyone had any objections to the draft minutes.	No objections were noted for the Minutes from the May 11, 2011 meeting.
Item III  Update on Inventory Database	Karen Roberts gave an update on the Inventory Database. The Ambulatory Survey was sent out (100% of outpatient surgical facilities and 100% of hospitals have responded). Karen gave status of responses received for the imaging survey. Since this is not a licensure category OHCA had to use other means to get providers. Imaging and other reports will be created from the database. This will be a good source to be used for CON decision making, which is in development. Imaging Providers will be surveyed every 2 years. We will continuously receive extracts from licensure, which will allow us to update the database with providers that are licensed. Kim thanked everyone for their help in completing the surveys.	Ambulatory Survey is complete and now in the process of verifying results.  OHCA will continue to work on completion of Imaging Survey.  Asked CHA to help with a contact list to make sure the right person gets the survey to complete
Item IV  Update on Facilities Plan Progress	Kaila Riggott gave an update on Facilities Plan Progress. Help for this portion was solicited from DPH staff with expertise and wealth of information was provided. Thanks were also given to Karen Goyette, Al Bidorini and Evelyn Burnam for heading up the subcommittees. Kaila handed out a draft chapter outline and went over it. 1. Acute/Ambulatory Care was given as a sample. 2. Description of Data Sources, 3. Map of the Planning Area(s), 4. Map of Current Service Locations, 5. Standards/Guidelines, 6. Discussion of unmet need and gaps in services, capacity issues, etc., 7. Exceptions, 8. Recommendations.	The Plan is current 5 years out and we plan on looking into changing the Statute every 2 years.

<p>Item V</p> <p>Presentations by Subcommittee Facilitators</p>	<p>Presentations by Subcommittee Facilitators</p> <ul style="list-style-type: none"> <li>• <b>Karen Goyette</b> presented on Acute/Ambulatory Care using power point. The timelines for this subcommittee were robust and aggressive. Standards and guidelines were reviewed for those listed on the handout. They were presented with challenges and benefits. Licensed beds, available staffed beds and impact of Healthcare Reform have been the biggest challenges. Benefits in meeting as a group were networking with colleagues, expert insight, healthy discussions and OHCA’s dedication to engage subcommittee.</li> <li>• <b>Al Bidorini</b> presented on Behavioral Health. Handout was distributed. After the first meeting representation was added to include Federally Qualified Health Centers and Value Options of which DMHAS and DSS are members. OHCA is preparing a report regarding behavioral health services delivered by general hospitals based upon discharge data. There is a large database from which information can be extracted. Hyperlinks will be critical.</li> <li>• <b>Evelyn Barnum</b> presented on Primary Care. This group has met 3 times in person and once by phone. They are looking to define primary care and establish an inventory of primary care services. Private practitioners were a huge challenge; could not figure out a way to come up with an accurate representation. Hospital outpatient services and primary care services and how we can capture them is the next frontier.</li> </ul>	<p>Next meeting of the Acute/Ambulatory Care subcommittee is October 20, 2011. Review Emergency Department and Cardiology Feedback, Discussion with OHCA regarding missing elements from previously submitted documents. Draft of Guidelines by OHCA and Review by Sub-Committee.</p> <p>More work will be covered over the next two or three meetings. The subcommittee, with OHCA, will begin to draft the chapter introduction describing CT’s behavioral health system.</p> <p>More work will be covered over the next two or three meetings. The subcommittee, with OHCA, will begin to draft the chapter introduction describing CT’s primary care system.</p>
<p>Item VI</p> <p>Imaging Workgroup Presentation of Draft Standards</p>	<p>Imaging Workgroup Presentation of Draft Standards. Jim Iacobellis and Andrew Lawson reported on this committee’s progress. It is a small but spirited group that jumped right in to create standards. They are close to coming up with standards. The goal was to provide standards that OHCA can use in CON’s. Some Connecticut specific information has been a challenge. They were looking into quality and accessibility. Some factors are: the equipment being used for clinical research; is there a specific need for hospital use; and history of the applicant. How do you determine the needs analysis? Define Utilization rate.</p> <p>Andrew Lawson elaborated on what determines need for new scanner to come in. No one state has the right solution for Connecticut. Taking information from other states to come up with a solution. Capacity is a critical area they are working on. Imaging is changing dramatically is the challenge.</p>	<p>Still working on trying to come up with capacity, have given OHCA some fence posts.</p> <p>The group anticipates that this will promulgate into new regulations. There is no disagreement amongst the group that the regulations will center on Quality/Safety/Access.</p>
<p>Item VII</p> <p>Next steps</p>	<p>Moving forward will populate database with inventory, continue with imaging survey to completion, format for the inventory (add inventory to Plan as an appendix). Subcommittees will continue to meet for the next couple of months. Advisory Body will meet in November and December. The Advisory Body will then meet again in the Spring to look at the draft plans. Members were asked to please attend the next two meetings either in person or by phone conference call.</p> <p>The location for the OHCA website is <a href="http://www.ct.gov/dph/ohca">www.ct.gov/dph/ohca</a>. To access all information about the Plan, meeting presentations, materials, agenda and schedule, click on the <a href="#">CT State-Wide Health Care Facilities and Services Plan Advisory Body</a> link.</p>	<p>Information will be posted on our website. We will be looking for a date in November to meet. The meeting in December will be on the 14<sup>th</sup>. There will be one additional short hospital survey focused on Primary Care Services that will be sent to the appropriate individuals at the hospitals for completion</p>

**Attending in person: Jim Iacobellis, Al Bidorini, Evelyn Barnum, Karen Goyette, Kennedy Hudner, Lisa Davis, Lisa Winkler, Meg Hooper, Paula Chenail, Stan Soby, Stuart Markowitz, Wendy Furniss**

**Also attending: Andrew Lawson, Liza Collins, Nwando Olayiwola, Steven Cowherd**

**Conference call-in: Sally F. Herlihy, Terrier B. Estes, Bob Smanik, Patrick Monahan, Jean Ahn, Dr. Alan Kaye, Karen Weeks, Linda Kowalski, Yvette Highsmith Francis**

**Absent: Ken Ferrucci, Lauren Siembab,**