

## EXECUTIVE ORDER NO. 30

**WHEREAS**, the health and well being of every citizen is a matter of public concern and the object of multiple programs of the state government; and

**WHEREAS**, the State of Connecticut expends considerable tax dollars assuring the health and well being of children, the elderly and the disadvantaged in our state; and

**WHEREAS**, costs of health care have risen dramatically over the last several years; and

**WHEREAS**, access to health care is a continuing issue for many of our citizens; and

**WHEREAS**, high-quality health care is a proud achievement of the American health care system and has produced many important discoveries and innovations that have treated or cured many diseases and improved the standard of living and quality of life for people all over the world; and

**WHEREAS**, public policy reforms may be necessary to control health care costs or improve access to care while assuring the continuation of the high quality of care we have come to expect in this country; and

**WHEREAS**, President Obama and the United States Congress are currently developing, analyzing and discussing significant reforms to the nation's health care system, which ongoing discussions will be a critical source of information as to the strengths, weaknesses and costs associated with the proposals put forth; and

**WHEREAS**, there will be a need to prepare a policy response specifically tailored to the federal health care reforms actually and finally adopted and to develop a corresponding range of health care policy changes that reduce or mitigate costs, improve access and assure quality health care for all residents of this state; and

**WHEREAS**, the ultimate success and effectiveness of these health reform efforts depend upon truly having all stakeholders—advocates, providers, labor leaders, businesses, the insurance industries and government leaders—“at the table” in developing and achieving support for the changes and reforms recommended; and

**WHEREAS**, the reforms will only be achievable and sustainable if they are joined together with recommendations that specifically and fully identify the costs of the proposed changes and sources of funding in enacting these changes.

**NOW, THEREFORE**, I, M. Jodi Rell, Governor of the State of Connecticut, by virtue of the authority vested in me by the Constitution and Statutes of the State of Connecticut, do hereby **ORDER** and **DIRECT**:

1. There is established the Connecticut Health Care Reform Advisory Board. The board shall consist of fifteen members, as follows:
  - a. The Comptroller, or her designee;

- b. the Secretary of the Office of Policy and Management, or his designee;
- c. a member appointed by the Governor, who shall be a representative of the nursing or allied health professions;
- d. a member appointed by the Governor, who shall be a representative of the health insurance industry;
- e. a member appointed by the Governor, who shall be a representative of the business community;
- f. a member appointed by the Governor, who shall be a representative of the hospital industry;
- g. a member appointed by the President Pro Tempore of the Senate, who shall be a primary care physician;
- h. a member appointed by the Speaker of the House of Representatives, who shall be a representative of organized labor;
- i. a member appointed by the Majority Leader of the Senate, who shall have expertise in the provision of employee health benefit plans for small businesses;
- j. a member appointed by the Majority Leader of the House of Representatives, who shall have expertise in health care economics or health care policy;
- k. a member appointed by the Minority Leader of the Senate, who shall have expertise in health information technology;
- l. a member appointed by the Minority Leader of the House of Representatives, who shall have expertise in the actuarial sciences or insurance underwriting; and
- m. the Commissioners of the Departments of Social Services and Public Health and the Office of Health Care Access, or their designees.

The Governor shall appoint the chairman of the board. Initial appointments to the board shall be made on or before August 15, 2009. Any vacancy shall be filled by the appointing authority. Any member of the board may be removed by the appointing authority for misfeasance, malfeasance or willful neglect of duty.

2. The Connecticut Health Care Reform Advisory Board shall not be construed to be a department, institution or agency of the state. The staff of the Office of Policy and Management shall provide administrative support to the board.
3. The Connecticut Health Care Reform Advisory Board shall prepare a set of proposed health care policies in response to federal health care reforms. Such policies shall emphasize cost containment, maximizing federal matching funds, best practices designed to enhance access to preventive care, and assuring health care coverage for all children entering the primary and secondary school system. The board shall evaluate current state

health care policies and the health care industry in this state and shall consider changes to (a) improve the health of state residents; (b) improve the quality of health care and access to health care; (c) provide for health insurance coverage for Connecticut residents who would otherwise be uninsured; (d) increase the range of health care insurance coverage options available to residents and employers; (e) slow the growth of per capita health care spending both in the short-term and in the long-term; (f) the potential establishment of an individual mandate, together with guaranteed issue, the elimination of pre-existing condition exclusions and the implementation of auto-enrollment; (g) the expansion of the Charter Oak health plan, Medicaid eligibility and other methods of making health coverage more affordable for lower-income families and individuals; and (h) consideration of new or added responsibilities for businesses not providing health insurance coverage for their employees . The board shall consider the effect of any policy change on the state's economy and the number and quality of jobs in this state.

4. The board shall consider policies that provide that: (a) Health care coverage should be affordable to individuals and families; (b) the health insurance system should be affordable and sustainable for society; and (c) health care coverage should enhance health and well-being by promoting access to high-quality care that is effective, efficient, safe, timely, patient-centered and equitable.
5. The board shall fully analyze the cost of its recommendations, including through actuarial analysis and other analytical means, and specifically identify all funding sources to be used to finance and administer its recommendations.
6. The board shall recommend programs to expand the implementation of health care information technology, including the provision of fully interoperable electronic medical records software and hardware packages for health care providers.
7. The board may consult with the health insurance industry, health information technology specialists, physicians, nurses, hospitals and other health care providers, as deemed appropriate by the board, to identify potential reforms that meet the needs of the full array of health care practices in the state.
8. The board may develop recommendations to facilitate the development of patient-centered medical homes that provide health care services to Connecticut residents.
9. The board may recommend a clearinghouse that would develop specifications for data that show for each health plan quality of care, outcomes for particular health conditions, access to care, utilization of services, adequacy of provider networks, patient satisfaction, rates of disenrollment, grievances and complaints, and any other factors the board determines relevant to assessing health plan performance and value.
10. The board may develop recommendations to identify uninsured individuals in the state.
11. The board shall develop a work plan to submit to prospective public, including the state, and private donors and shall request and solicit donations for funding to carry out the provisions of this order.

12. The board shall make interim recommendations on or before February 1, 2010, and shall make final recommendations to the Governor and to the General Assembly on or before January 1, 2011, and shall terminate on said date.

This order shall take effect immediately.

Dated in Hartford, Connecticut, this 8th day of July 2009.

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M. Jodi Rell  
Governor

By Her Excellency's Command

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Susan Bysiewicz, Secretary of the State