

# CT State Health Improvement Plan (SHIP) Access to Health Care Action Team Meeting

June 6, 2022



**CONNECTICUT**  
HEALTH IMPROVEMENT COALITION  
Partnering to Advance and Improve Population Health

[www.ct.gov/dph/SHIPCoalition](http://www.ct.gov/dph/SHIPCoalition)

# Agenda

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- Introductions
- Review & Discuss Indicator Input for Objectives
- Next Steps

# Introductions



| 3

Name

Organizational

Previous involvement in the SHIP

What brings you the most joy in summer?

Facilitators introduce themselves first to model.

# Ground Rules



Start and end on time



This is a process;  
remember, Rome was  
not built in a day!



Value all ideas in the  
spirit of creative  
inquiry



Respect each other



One person, one  
voice, one at a time....  
succinctly!



Be data driven (based  
on data we have  
available)



Goal is to focus on  
collective impact and  
collaboration

Revise, add as the Action Team sees fit

## Action Team Charge

- Action Teams of the Connecticut Health Improvement Coalition are created for implementation of the Healthy Connecticut 2025 State Health Improvement Plan (SHIP).
- They will develop and implement annual Action Plans and report progress quarterly to the Advisory Council of the Connecticut Health Improvement Coalition.
- In developing Action Plans, the Action Teams may prioritize objectives and strategies, and identify and recommend refinements to the Healthy Connecticut 2025 State Health Improvement Plan.
- Action Teams may also create subcommittees to identify specific strategies and action steps for a prioritized objective, and/or address issues that require concentrated subject matter expertise.

## Action Team Lead Conveners

Priority	Lead Conveners
Access to Health Care	Nancy Hamson, <i>Yale New Haven Health</i> Kelly Sinko, <i>CT Office of Health Strategy</i>
Economic Stability	Supriyo Chatterjee, <i>Independent Consultant</i> Tim Larson, <i>CT Office of Higher Education</i>
Healthy Food & Housing	Robyn Gulley, <i>North Central Area Agency on Aging</i> Erin Windham, <i>CT Dept of Agriculture</i>
Community Strength & Resilience	Andrea Duarte, <i>CT Dept of Mental Health &amp; Addiction Services</i> TBD

# 2022 Implementation Roles & Responsibilities

## Lead Conveners

- **Host & coordinate** meetings (*with assistance from DPH*)
- **Report progress** to DPH and SHIP Advisory Council
- **Ongoing outreach** to potential partners/identify and help recruit members for the Action Team
- **Content Expert Facilitation:** Provide expert input to group discussions; share knowledge about current initiatives underway and groups engaging in similar activities; provide evidence-based strategy guidance, as needed.
- **Process Facilitation:** Lead the group through discussion and resolution of key agenda items; manage the discussion; capture key ideas/outcomes with support from group members.

## Action Team Members (including Lead Conveners)

- **Conduct** supplemental research and engage in other outreach or data gathering activities between Action Team meetings as needed and determined by group
- **Outreach** to other Action Teams, as needed, to learn about their work and/or solicit feedback on Action Plans and implementation efforts, particularly around Key Objectives
- **Implement** action plan strategies/activities to address priority area objectives
- **Return** to your own coalitions/organizations/programs to align/refine your work to align with the Action Plan

**Time Commitment:** Recommend one, 1-hour meeting/month for Action Teams to get implementation efforts underway in 2022. Meeting duration and frequency can be adjusted moving forward.



Timeframe: 2022 Calendar Year

# Priority Area Goal Statements

Priority	Goal
<b>Access to Health Care</b>	Ensure all Connecticut residents have knowledge of, and equitable access to affordable, comprehensive, appropriate, quality health care
<b>Economic Stability</b>	Achieve equitable economic wellbeing, stability and security so all Connecticut residents have the opportunity to work here, and can afford to live, stay, and retire here.
<b>Healthy Food and Housing</b>	Ensure that all Connecticut residents have equitable access to safe and affordable: <ul style="list-style-type: none"><li>• nutritious and culturally appropriate food</li><li>• fair, stable, healthy housing</li></ul>
<b>Community Strength and Resilience</b>	Ensure community strength, safety and resiliency by providing equitable and sustainable access to community resources to address the unique physical, social, and behavioral health needs of all Connecticut residents.



## Access to Health Care

**Goal A:** Ensure all Connecticut residents have knowledge of, and equitable access to affordable, comprehensive, appropriate, quality health care.

### Objectives

- A1:** Increase the number of traditional and alternative (community- and technology-based) places people can access health care by 2025.
- A2:** Increase adoption of accepted best practices and standards of care among clinical health care providers by 2025.
- A3:** Increase adoption of accepted best practices and standards of care among community health preventive care providers by 2025.
- A4:** Develop a comprehensive, across-the-lifespan, statewide health education framework by 2025.
- A5:** Increase the availability and diversity of primary care providers, community partners, and care management services by 2025, while respecting patients' rights to privacy and choice.
- A6:** Decrease the number of CT residents who are at risk of spending more than 10% of their income on health care services and coverage by 2025.

Highlighted objectives reflect those for strategies selected for the first year of implementation

# Input on Indicators

## A1: Increase the number of traditional and alternative (community- and technology-based) places people can access health care by 2025.

- Which of these devices do you have? (CT Data haven Wellbeing Survey)
- Internet subscription rates (Broadband in CT report)
- ACS Device Ownership (Broadband in CT report)
- Residential Fixed Connections and Households by State (U.S. FCC)
- Connections by Type of End User by State (U.S. FCC)
- Connections by Technology (U.S. FCC)
- Type of Internet subscription (ACS)

### **Healthy People 2030 Health Care Access and Quality Objectives:**

- Increase the use of telehealth to improve access to health services – AHS-R02

## A2: Increase adoption of accepted best practices and standards of care among clinical health care providers by 2025.

- Within the past 10 years, have you had a colonoscopy? (Medical Expenditure Panel Survey – Preventive Care Self-Administered Questionnaire by Gender/Language)
- Within the past 5 years, have you had a sigmoidoscopy? (Medical Expenditure Panel Survey – Preventive Care Self-Administered Questionnaire by Gender/Language)
- During the past 12 months, have you had either a flu shot or a flu vaccine that was sprayed in your nose? (Medical Expenditure Panel Survey – Preventive Care Self-Administered Questionnaire by Gender/Language)
- During the past 24 months, have you had your blood pressure checked by a doctor, nurse, or other health care professional? (Medical Expenditure Panel Survey – Preventive Care Self-Administered Questionnaire by Gender/Language)
- Within the past 5 years, have you had your blood cholesterol checked by a doctor, nurse, or other health care professional? (Medical Expenditure Panel Survey – Preventive Care Self-Administered Questionnaire by Gender/Language)
- Is there a particular doctor's office, clinic, health center, or other place that you usually go if you are sick or need advice about your health? (MEPS)
- CDC EHDI Hearing Screening & Follow-up Survey (CDC)
- During the past 12 months, was there any time when this child needed healthcare but it was not received – which type? (National Survey of Children's Health)

## A2: Increase adoption of accepted best practices and standards of care among clinical health care providers by 2025.

### Healthy People 2030 Health Care Access and Quality Infrastructure Objectives:

- Increase the proportion of adults who get recommended evidence-based preventive health care – AHS-08
- Increase the proportion of adults who get screened for lung cancer – C-03
- Increase the proportion of females who get screened for breast cancer – C-05
- Increase the proportion of adults who get screened for colorectal cancer – C-07
- Increase the proportion of females who get screened for cervical cancer – C-09
- Increase the number of community organizations that provide prevention services – ECBP-D07
- Increase the proportion of women who get needed publicly funded birth control services and support – FP-09
- Increase the proportion of people with a usual primary care provider – AHS-07
- Increase the proportion of pregnant women who receive early and adequate prenatal care – MICH-08
- Increase the proportion of infants who didn't pass their hearing screening who get evaluated for hearing loss by age 3 months - HOSCD-02
- Increase the proportion of newborns who get screened for hearing loss by age 1 month – HOSCD-01
- Increase the proportion of low-income youth who have a preventive dental visit – OH-09
- Increase the proportion of adults with limited English proficiency who say their providers explain things clearly – HC/HIT-D11
- Increase the proportion of adults whose health care provider checked their understanding – HC/HIT-01

### A3: Increase adoption of accepted best practices and standards of care among community health preventive care providers by 2025.

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- No data source found

#### Healthy People 2030 Health Care Access and Quality Objectives:

- Increase the number of community organizations that provide prevention services – ECBP-D07

A4: Develop a comprehensive, across-the-lifespan, statewide health education framework by 2025.

- No data source found
  
- None

A5: Increase the availability and diversity of primary care providers, community partners, and care management services by 2025, while respecting patients' rights to privacy and choice.

- Total Active Licenses (DPH Licensing statistics )

Healthy People 2030 Health Care Access and Quality Objectives:

- None



## A6: Decrease the number of CT residents who are at risk of spending more than 10% of their net income on health care services and coverage by 2025.

- Did you not get the medical care you needed or have delays getting medical care you needed for any of the following reasons? Cost (CT Data Haven Wellbeing Survey)
- Was there a time in the past 12 months when you needed to see a doctor but could not because of cost? (BRFSS)
- What is the main reason you do not have a usual source of health care? (MEPS)
- In the last 12 months, have you delayed seeking dental care, or anyone in the household, because of worry about the cost? (MEPS)
- Have you delayed getting prescription medicines, or anyone in the household, because of worry about the cost? (MEPS)

### Healthy People 2030 Health Care Access and Quality Objectives

- Reduce the proportion of people who can't get medical care when they need it – AHS-04

# Survey Results

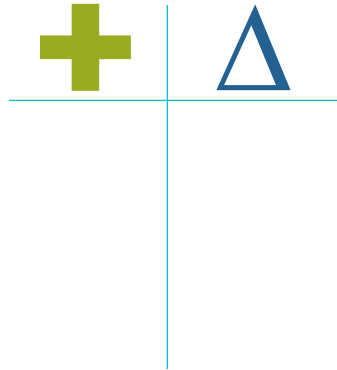
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- Day of the month
  - Second Tuesday
- Time of Day – Morning
  - 11:00AM
- SharePoint Access – 50:50 – will set up a test

## Next Steps

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- What worked well and what could be changed or improved (+/Δ)
- Next Action Team Meeting
  - Complete discussion on indicators
  - Begin implementation work!



# Thank You!

## Access to Health Care Action Team Meeting Notes from June 6, 2022

### Indicators

#### **A1: Increase the number of traditional and alternative (community- and technology-based) places people can access health care by 2025.**

- **Other**
  - Clarification requested on community- and technology-based: What is community-based? Does it include alternative providers where people can get healthcare? Because we don't have a measure for that
  - HUSKY health is considering alternative-based access to HC by bringing on community-based organizations who have never been part of the paying system
  - Other community-based places: the only other source I can think of is DPH in regard to licensing of providers.
  - (chat) Could Medicaid/DSS possibly provide # of telehealth visits done annually in CT? That could be measured over time
  - What about CHW's? Or would CHW's belong under other objective(s) (it's okay that it is under more than one)
  - It's not only about the technology, but about how people feel about using the technology (under A4) – may want to survey people about how they like the apps that exist
  - There has been discussion about bringing broadband all over CT – wherever you go, you can connect. What is the state doing on this? Is there a way to measure the initiatives that are bringing broadband to where there isn't already broadband? Connections technology. This is beyond people's homes. Should be coordinating with other state agencies to know what they are doing
  - (chat) This may also fit in to this in some capacity in terms of educating the community on affordable internet - <https://www.whitehouse.gov/getinternet/>
  - OHS is collecting data from primary care visits
  - See what the measure is that comes out this first year from the legislation recently passed, then see
- Which of these devices do you have? (CT Data haven Wellbeing Survey)
  - Data Haven changed their methodology in this survey – doesn't have as many data points, so it may not capture the full picture.
  - (chat) Just consider that even if people have devices they don't always have room or enough data for them to use apps or certain website, etc.
- Internet subscription rates (Broadband in CT report)
- ACS Device Ownership (Broadband in CT report)
- Residential Fixed Connections and Households by State (U.S. FCC)
- Connections by Type of End User by State (U.S. FCC)
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- Type of Internet subscription (ACS)

## Access to Health Care Action Team Meeting Notes from June 6, 2022

### Healthy People 2030 Health Care Access and Quality Objectives:

- Increase the use of telehealth to improve access to health services – AHS-R02

### **A2: Increase adoption of accepted best practices and standards of care among clinical health care providers by 2025.**

- **Other**
  - Would remove medical home indicators. Want to know what the practitioners are doing when they see people, not numbers about people seeking care.
  - Need to be looking at quality of care as opposed to access to care.
  - Need to be something where we can track data from the state – work on HC quality measures under Medicaid program and SIM program. There are a lot of reports and discussions on those metrics that we should explore.
  - OHS quality benchmarks – is currently a build-off of what was the SIM initiative. We do have some of these measures that we will be putting forward in the next few months. A lot of the screening measures are much easier to collect data and report back on. The more you get to outcome measures, the harder and more intensive the data collection is. OHS will be collecting quality measures, but not for another year.
  - Is there something about access to primary care under one of the other objectives. **Access to primary care** is a best practice.
  - Prenatal Care, screenings recommended, and the last two bullets on HP2030 –
    - Increase the proportion of adults with limited English proficiency who say their providers explain things clearly – HC/HIT-D11
    - Increase the proportion of adults whose health care provider checked their understanding – HC/HIT-01
  - 
  - Within the past 10 years, have you had a colonoscopy? (Medical Expenditure Panel Survey – Preventive Care Self-Administered Questionnaire by Gender/Language)
  - Within the past 5 years, have you had a sigmoidoscopy? (Medical Expenditure Panel Survey – Preventive Care Self-Administered Questionnaire by Gender/Language)
  - During the past 12 months, have you had either a flu shot or a flu vaccine that was sprayed in your nose? (Medical Expenditure Panel Survey – Preventive Care Self-Administered Questionnaire by Gender/Language)
  - During the past 24 months, have you had your blood pressure checked by a doctor, nurse, or other health care professional? (Medical Expenditure Panel Survey – Preventive Care Self-Administered Questionnaire by Gender/Language)
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  -

## **Access to Health Care Action Team Meeting Notes from June 6, 2022**

- Is there a particular doctor's office, clinic, health center, or other place that you usually go if you are sick or need advice about your health? (MEPS)
- CDC EHDI Hearing Screening & Follow-up Survey (CDC)
- During the past 12 months, was there any time when this child needed healthcare but it was not received – which type? (National Survey of Children's Health)
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### Healthy People 2030 Health Care Access and Quality Infrastructure Objectives:

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- Increase the proportion of adults with limited English proficiency who say their providers explain things clearly – HC/HIT-D11
- Increase the proportion of adults whose health care provider checked their understanding – HC/HIT-01

### **A3: Increase adoption of accepted best practices and standards of care among community health preventive care providers by 2025.**

- **Other**
  - CHW's might fit in well here
  - Screenings – who is conducting screenings and where – don't know how to measure that
  - OHS is coming up with SDoH screening measure, it's a year or so out, but can incorporate that.

## Access to Health Care Action Team Meeting Notes from June 6, 2022

- The US Preventative Services task force is a good place to start, then branch out to different practices. There may be surveys that they can identify.
- (chat) FQHCs are very local/community based and school-based health centers may have data <https://www.uspreventiveservicestaskforce.org/uspstf/>
- DSS has their maternity bundle that they are working on (future data). They may have some pieces on access that can be included here.
- Screening and CHW's – are they doing the screenings? Would they be counted, or just encouraging people to get screened (promotion vs. screening)
- No data source found

### Healthy People 2030 Health Care Access and Quality Objectives:

- Increase the number of community organizations that provide prevention services – ECBP-D07

#### **A4: Develop a comprehensive, across-the-lifespan, statewide health education framework by 2025.**

- **Other**

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- No data source found
- None

#### **A5: Increase the availability and diversity of primary care providers, community partners, and care management services by 2025, while respecting patients' rights to privacy and choice.**

- **Other**

- 

- Total Active Licenses (DPH Licensing statistics )

### Healthy People 2030 Health Care Access and Quality Objectives:

- None

#### **A6: Decrease the number of CT residents who are at risk of spending more than 10% of their net income on health care services and coverage by 2025.**

- **Other**

- 

- Did you not get the medical care you needed or have delays getting medical care you needed for any of the following reasons? Cost (CT Data Haven Wellbeing Survey)
- Was there a time in the past 12 months when you needed to see a doctor but could not because of cost? (BRFSS)
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## Access to Health Care Action Team Meeting Notes from June 6, 2022

### Healthy People 2030 Health Care Access and Quality Objectives

- Reduce the proportion of people who can't get medical care when they need it – AHS-04

### Survey Results

- Day of the month
  - Second Tuesday
- Time of Day – Morning
  - 11:00AM
- SharePoint Access – 50:50 – will set up a test

### Zoom Chat 6/6/22

Time	From	Chat Comment
16:14:55	CT OHS Abby Alter	Don't forget Alison from March of dimes
16:27:21	Alison Tyliczszak, March of Dimes	Could Medicaid/DSS possibly provide # of telehealth visits done annually in CT? That could be measured over time
16:27:52	Rose Swensen HRiA	Best indicators? Additional or other indicators?
16:34:19	Alison Tyliczszak, March of Dimes	This may also fit in to this in some capacity in terms of educating the community on affordable internet - <a href="https://www.whitehouse.gov/getinternet/">https://www.whitehouse.gov/getinternet/</a>
16:41:02	CT OHS Abby Alter	Just consider that even if people have devices they don't always have room or enough data for them to use apps or certain website, etc.
16:42:23	Rose Swensen HRiA	Thank you, Abby!
16:55:14	CT OHS Abby Alter	FQHCs are very local/community based and school based health centers may have data
16:55:50	M.Garcia	<a href="https://www.uspreventiveservicestaskforce.org/uspstf/">https://www.uspreventiveservicestaskforce.org/uspstf/</a>
16:58:35	Alison Tyliczszak, March of Dimes	I can do that day/time. Thank you.
16:59:28	Kelly Sinko Steuber, OHS (she/hers)	I can't do June 14th at 11. but I can do July 12th at 11
16:59:36	Erica Garcia-Young, DSS-HUSKY Health	I can commit to 2nd Tues at 11:00 - but time-to-time may have a conflict
16:59:43	Nancy Hamson	next Tuesday is fine. Date/Time is fine for monthly meetings
16:59:54	CT OHS Abby Alter	next Tuesday works for me
16:59:55	Hanna Nagy, CT OHS (she/her)	The date/time usually works for me--but I would not be able to meet next week
17:00:17	Ken Lalime	Date Time ok. Next Tuesday - ok
17:00:22	Marijane Carey, Carey Consulting	Not available next Tuesday, but looks good for others
17:00:29	Rose Swensen HRiA	Thank you!
17:00:56	Marijane Carey, Carey Consulting	Thanks. Good bye everyone