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

July 12, 2022

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HEALTH IMPROVEMENT COALITION
Partners Integrating Efforts and Improving Population Health

www.ct.gov/dph/SHIPCoalition

Welcome & Introductions

Name and Organization
Did you watch fireworks to celebrate the Fourth of July?
If yes, where?

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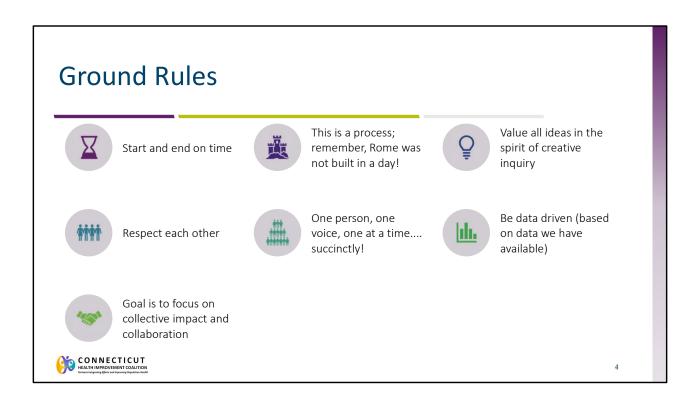*Partners Integrating Efforts and Improving Population Health*

Name
Organizational
Previous involvement in the SHIP
What brings you the most joy in summer?

Facilitators introduce themselves first to model.

Agenda

- Welcome & Introductions
- Overview of Implementation Process
- Finish Review of Proposed Data Indicators
- Next Steps

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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		

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Revise, add as the Action Team sees fit

Overview of Where We are in the Process. . .

- Plan launched September 2021 *(third quarter 2021)*
- Action Plan objectives and strategies prioritized *(fourth quarter 2021)*
- Activities and additional partners brainstorm *(first quarter 2022)*
- Action Plans approved by SHIP Advisory Council *(second quarter 2022)*
- Data Committee launch has been moved to August *(third quarter 2022)*

- **TODAY**
  - Finish review of proposed data indicators

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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.

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

Input on Indicators

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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

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Health Priorities

- Obesity
- Drug Overdose
- Suicide
- Domestic Violence/Sexual Violence
- Percent Insured
- Use of Emergency Room Visits

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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)
- Withing 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)

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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

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SHIP Health Priorities

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- Use of Emergency Room Visits

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

- 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

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SHIP Health Priorities

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

- No data source found

- None

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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

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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

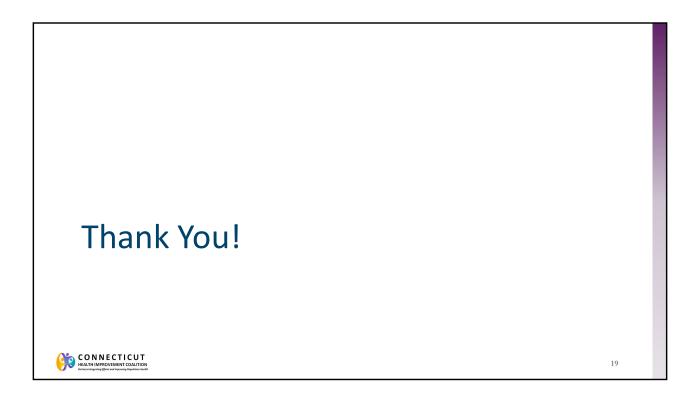- Reduce the proportion of people who can't get medical care when they need it – AHS-04

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Next Steps

- What worked well and what could be changed or improved (+/Δ)
- Ad Hoc SHIP Data Committee – estimated to convene in August to continue indicator identification discussion
- Next Action Team Meeting
  - 2nd Tues @ 11:00
  - August 9, 2022, 11:00-12:00

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Thank You!

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Healthy Connecticut 2025
State Health Improvement Plan

**Access to Health Care ACTION Team Meeting AGENDA & NOTES**

Access to Health Care ACTION Team Meeting AGENDA & NOTES

Date: 07-12-2022
Time: 11:00am-12:00pm
Virtual Meeting Link: https://hria.zoom.us/j/82146447615?pwd=dVRrMkJTYUlxTzVsN0hXc1liZlB2dz09

Attendees *(Please list all who participated)*: Marijane Carey, Kelly Sinko, Abby Alter, Sandra Gil, Mario Garcia Kate Parker-Reilly. Karen for Linda from Kowalski group, Robin Tousey-Ayers, Jeanette Goyzueta

Agenda Items	Time	Discussion	
Welcome	11:00	• Name & Organization	• Abby Alter

Action Plan Discussion	11:10	• **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.
		    o Kelly brought up whether the last question not really capturing the insurance priority. Maybe take that out?
		    o Robin said the Health Screening measure was also not really matching our priority areas.
		    o Other ideas: Hospitals are asking about Depression/Substance abuse, can we find out if there is data like this.
		    o From Robin Tousey-Ayers - Encourage primary care providers and oral care providers to screen for substance use during routine visits.
		    o Abby brought up adding pediatric screenings for Maternal Depression from Medicaid.
		    o PHQ-9 has become a standard depression screening tool in primary care settings and is become standard practice for PCMH standards.
			•

- there is also the PHQ-2 and the Edinburgh are all acceptable in peds for Medicaid
- Original planning discussions included reference to a "scorecard" but Mario says that project not really happening.
- Kelly mentioned that OHS has a Quality Benchmark program going on: https://portal.ct.gov/OHS/Pages/Quality-Council/Quality-Benchmarks
- Kate brought up the idea that oral health and medical should overlap.
  - For pediatric providers: Oral Health Assessment and Fluoride Varnish application in compliance with EPDST schedule - https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf   For
  - adults - Oral health screening can lead to early detection of ENT cancers and oral health influences diabetes, cardio vascular disease, etc. The leading screen is the Oral Health Assessment Tool (OHAT)

- **A3:** Increase adoption of accepted best practices and standards of care among community health preventive care providers by 2025.
  - Mario Garcia suggested we use the Preventive Taskforce and choose the ones that match our priorities and then figure out where we can get the data.
    - https://www.uspreventiveservicestaskforce.org/uspstf/
  - Robin wanted a definition of prevention. Many Community orgs are screening for SDOHs. Using Unite Us and Aunt Bertha? Can we get data from that?
  - Marijane - Plan of Safe Care. For more info go to https://portal.ct.gov/DMHAS/Programs-and-Services/Women/CAPTAPlan-of-Safe-Care . Bridget Aliaga at the SEI-FASD Initiative is a good person to start with. baliaga@wheelerclinic.org . She will direct you to DMHAS and DCF folks.
- **A4: Comment:** Robin -   https://www.nccih.nih.gov/about/disease-prevention-and-health-promotion-across-the-lifespan
- **A5 Comment:** Mario suggested other sources besides DPH licenses, CT Chapter of AMA, DSS has information on social service providers.
- **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
  - Group agreed on these three from this slide:
    - Was there a time in the past 12 months when you needed to see a doctor but could not because of cost? (BRFSS)

		- 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 - Robin did not like the current term medical care from "Reduce the proportion of people who can't get medical care when they need it "– AHS-04; Said it needed a definition. - Abby mentioned that the Census may have the number of insured versus uninsured for CT. That could be a better objective, just finding out how many are uninsured in the state. - A thought that would need to be vetted through payors (DSS) is the use of social determinants of health billing codes (z-codes) procedures to identify patient barriers.	
Next Steps	11:55	- Evaluate Meeting (+/-) - Review Action Items for next month - Next Meeting Date/Time: August 9, 2022 @11:00am via Zoom	Abby