

## **Healthcare Cabinet Meeting Minutes**

January 13, 2015

Members in attendance: Lt. Governor Nancy Wyman, Patricia Baker, Roderick Bremby, Anne Foley, Jim Wadleigh, Anne Melissa Dowling, Bonita Grubbs, William Handelman, Steven Hanks, Kristina Stevens, Kevin Lembo, Lakesha Hyatt, Eugene Market, Katharine Kranz Lewis, Frances Padilla, Patricia Rehmer, Margaret Smith, Shelly Sweatt.

Members absent: Ellen Andrews, Terry Edelstein, Donna Moore, John Orazietti, Linda St. Peter, Robert Tessier, Victoria Veltri, Joanne Walsh.

| Agenda Item | Topic  | Discussion   | Action   |
|-------------|--|--|--|
| 1.          | Call to order & Introductions                                  | None.  |  |
| 2.          | Public Comment   | No public comment.   |  |
| 3.          | Review & Approval of 11/18/14 minutes                          | None.  | 11/18/14 Minutes approved.   |
| 4.          | Access Health CT (AHCT) Update, Jim Wadleigh, acting CEO, AHCT | Acting CEO Jim Wadleigh delivered a brief overview of current happenings at Access Health CT. Mid-open enrollment period; AHCT is taking between 6,000 and 7,000 calls a day and enrolling around 2,000 customers a day. These numbers are expected to ramp up during the final weeks of open enrollment. Volume of enrollment in dental plans has increased overwhelmingly and is expected to reach 1,000 customers before the close of open enrollment. The SHOP | More information and updates will be provided continuously at www.accesshealthct.com |

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|             |       | program has focused on savings for employers. Call centers and staff have readied for the coming tax season and first distribution of the 1095 tax form to those who purchased insurance through the Exchange and received an Advanced Premium Tax Credit in 2014. Preparedness efforts for open enrollment for 2016 have already begun, and notably will start on time to last from October 1, 2015 through December 31 <sup>st</sup> , 2015 for coverage in 2016.  With the marked success of the dental enrollment exceeding prior expectations, Margaret Smith inquired about whether or not the dental plans were being advertised or promoted by staff responsible for enrolling customers in medical insurance. Jim responded that Brokers play a large part in the promotion of dental coverage as they are the point of contact from the call center for customers looking to enroll in dental. |        |
|             |       | Both Lt. Governor Wyman and Bonita Grubbs asked about the data that has been gathered to show just who is enrolling in health insurance plans on the exchange, and when this data would be made available. Lt. Governor Wyman also asked if the positive trend in job growth has had any effect on customers moving from Medicaid coverage to Qualified Health Plans (QHPs) on the Exchange, or employer-sponsored health insurance. Jim explained that both AHCT and DSS would need to align their enrollment numbers in order to provide an accurate reading on how job growth has altered enrollment types in any way. Right now, there is no data to support an assumption that any one factor has lead to a decrease or increase in Medicaid enrollment.  |        |

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| 5.          | Presentation: All Payer Claims Database (APCD) Tamim Ahmed, Access Health Analytics | Tamim provided a broad overview of the function and purpose of the All Payer Claims Database (APCD) as it has developed since its inception through legislation in 2013. He explained that the main purpose of the APCD is to create accessible healthcare information specific to those living in Connecticut. The APCD will house information of individuals in Connecticut on a number of different levels. To questions from Anne Melissa Dowling, Pat Rehmer and Shelly Sweatt, Tamim explained some of the details of the APCD's functionality, including what types of patient information will be readily available; for example, the record that an individual had a test will be available, but not that individual's test results. To a question from Kristina Stevens regarding behavioral health information and dental information, Tamim explained that dental information would be available a year after medical information is made available. Behavioral claims are distinct from other types of claims because they do not include case management data which might allow for a more full picture of an individual's health. To a question from Anne Melissa Dowling regarding subscriptions and accessibility to the APCD, Tamim explained that consumer data will be completely free and available to individuals but it will be some time before the system is designed to support a sustainable business model.  Frances Padilla inquired about how the APCD will serve as a policymaking tool to understand the root causes of variability on all levels of health and healthcare in Connecticut. Tamim explained that there will need to be involvement of state agencies or research universities that can create reports using the data that is available through the APCD. These reports will be vital to informing policy making decisions. | For a more in depth outline of Tamim's update, please find his presentation here. |
| 6.          | State Health Innovation<br>(SIM) Update, Dr. Mark                                   | Dr. Mark Schaefer provided a brief overview of the progress and functions of the various workgroups that have been created and have   | Updated information can be found at the <u>SIM</u> website.                       |
|             | Schaefer, Director of Health  | begun work under the State Innovation Model. He announced that  | Mark's slideshow for this update  |

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|             | Innovation  | the Project Management Office was awarded a grant for \$45 million  | can be found <u>here.</u>      |
|             |             | over 4 years to continue the SIM work.                              |                                |
|             |             |   | Comments and questions related |
|             |             | Both Dr. Schaefer and Commissioner Roderick Bremby of the Dept. of  | to SIM can be submitted to     |
|             |             | Social Services took questions related to Medicaid patients         | sim@ct.gov.                    |
|             |             | conversion to a shared savings model, and further discussion into   |                                |
|             |             | physician reimbursement for Medicaid patients under the Patient     |                                |
|             |             | Centered Medical Home models that SIM is designed around. Pat       |                                |
|             |             | Baker inquired about whether or not health benchmarks that were     |                                |
|             |             | previously established in the beginning of the SIM process, such as |                                |
|             |             | diabetes and asthma for example, would be deemed essential in       |                                |
|             |             | measures as a map for performance going forward. Mark responded     |                                |
|             |             | that those particular benchmarks were outlined in the model that    |                                |
|             |             | was approved by CMS, and would need to be included as               |                                |
|             |             | recommendations for essential measures going forward.               |                                |
| 7.          | Next Steps  | The next Cabinet meeting is scheduled for Tuesday, February 10,     |                                |
|             |             | 2015, Capitol Room 310, 9-11 a.m.                                   |                                |
| 8.          | Adjournment |   |                                |
|             |             |   |                                |