

**STATE OF CONNECTICUT**  
**State Innovation Model**  
***Consumer Advisory Board***

**Meeting Summary**  
**November 7, 2017**

**Meeting Location:** The Lyceum, Conference Room A, 227 Lawrence Street, Hartford

**Members Present:** Jeffrey Beadle; Kevin Galvin; Stephen Karp; Theanvy Kuoch; Velandy Manohar; Arlene Murphy; Terry Nowakowski (for Alicia Woodsby); Ann Smith

**Members Absent:** Alan Coker; Alice Ferguson; Bonita Grubbs; Linda Guzzo; Robert Krzys; Nanfi Lubogo; Denise Smith

**1. Call to Order**

The meeting was called to order at 1:09 p.m.

**2. Public Comment**

There was no public comment.

**3. Approve October 10<sup>th</sup> Meeting Summary**

**Motion:** to approve the minutes of the October 10, 2017 Consumer Advisory Board meeting – Kevin Galvin; seconded by Velandy Manohar.

There was no discussion.

**Vote:** All in favor.

**4. CAB Youth Representation Outreach**

Kevin Galvin led the discussion. The CAB has sponsored two youth-oriented events: the young adult forum at Manchester Community College, and the KASA youth forum. At both forums, some of the participants expressed interest in becoming more involved. The CAB discussed what ways they can be involved (full membership, non-voting participants) and what would be needed to support their involvement (Skype, Zoom, alternate meeting times). Quyen Truong suggested they define young adult. She said they could also open up the application process and see who applies. The application would need to be targeted towards younger applicants. Both Mr. Galvin and Ms. Truong said they would reach out to the KASA group and the MCC group for feedback.

**5. Review Summary of Southeast Asian American Outreach Event to Determine Key Findings, Key Messages, Action Items, and Next Steps**

Ms. Truong and Theanvy Kuoch reviewed the summary. Mr. Galvin noted that there is been a progression in the three events with this community where the participants want to be more and more involved. Louise Harmon worked with Khmer Health Advocates on findings. She noted that community drives research. There are 48 different Asian groups. Disaggregation is needed in order to fully demonstrate the problem. She noted that many of the people she interviewed for her research did not know they had a right to an interpreter. There are limits to having family members interpret – particularly with medical terminology. There are laws in place but implementation remains an issue. Mental health services and senior car are also issues due to language and community health worker staff are overburdened. Mark Schaefer said he wanted a deeper understanding of the problems to identify actionable areas. Ms. Harmon noted that one issue is that one needs to know how to speak English in order to use Medicaid transportation services.

The Board discussed possible next steps. These included looking at how to address the identified needs and providing recommendations to the Healthcare Innovation Steering Committee or the appropriate SIM work group. Language and translation services are major issues as are community health workers. Dr. Schaefer noted that in the Community and Clinical Integration Program, the practices are required to hire community health workers to help with condition specific populations. Many providers would look at the data and assume Asian Americans are the best performing ethnic group until they break the data down further. It is difficult to develop strategies for things that cannot be seen. Better segmenting racial and ethnic data is the first step to improving outcomes. Additionally, the Department of Public health is developing prevention service centers to provide needed services. DPH requires those services to be evidence based.

Dr. Schaefer suggested sharing the data they have gathered with Medicaid as language may not be included in the eligibility guidelines. He suggested Khmer Health Advocates meet with the Hispanic Health Council to learn about and potentially partner on its DIALBEST program. It was noted that this discussion should be brought to the Steering Committee. A pathway is needed to enable diversification of evidence based programs. The prevention service initiative should require the inclusion of community health workers. Programs that don't meet the evidence based test need a strategy to become evidence based.

**Motion:** to approve the Southeast Asian Outreach Event summary – Velandy Manohar; seconded by Kevin Galvin.

There was no additional discussion.

**Vote:** all in favor.

#### **6. Update: Healthcare Cabinet Prescription Drug Workgroups**

The Board tabled discussion on the Prescription Drug workgroups.

#### **7. Update: Choosing Wisely Summit**

The Board discussed Choosing Wisely. Velandy Manohar said there is the Civil Rights Act, efforts to eliminate health illiteracy, and promoting patient autonomy can help improve health equity. Arlene Murphy said they will further discuss Choosing Wisely at the December Planning Committee meeting.

#### **8. Update: Consumer Engagement**

Steve Karp discussed the asthma discussion he is organizing at Middlesex Community College. Dr. Prasad Srinivasan will talk about potential resources. The event will also include a mindfulness exercise to help ease anxiety. Members were asked to share the flyer with their respective communities. Ann Smith suggested reaching out to the Capitol Region Education Council and school systems to share findings. She was interested in working on an event in the Hartford area.

#### **9. Update: SIM**

The SIM update will be shared via email.

#### **10. Next Steps and Other Business**

**Motion:** to adjourn – Ann Smith; seconded by Kevin Galvin.

There was no discussion.

**Vote:** All in favor.

The meeting adjourned at 3:13 p.m.