



Consumer Advisory Board

Welcome Letter

Insert Date

Insert Inside Address

Dear Insert Name:

We are pleased to welcome you as a new member of the Consumer Advisory Board on Healthcare Innovation. Your term will begin (insert date). You will receive information via email with further details about the (date) meeting.

The Consumer Advisory Board is dedicated to bringing the consumer voice to Connecticut healthcare innovation policies and initiatives. We greatly appreciate your willingness to serve and look forward to working together towards this goal.

Attached is the Consumer Advisory Board Member Guide.

Please don't hesitate to contact us if you have questions about the Consumer Advisory Board of your responsibilities as a member.

Sincerely,


CONNECTICUT
Office of Health Strategy



Consumer Advisory Board

Member Guide

January 4, 2019

Consumer Advisory Board Member Guide

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FACT SHEET

Consumer Advisory Board Mission

To advocate for consumers and provide for **strong** public and consumer input in Connecticut health reform policies.

Consumer Advisory Board Vision

The overarching vision of the Consumer Advisory Board (CAB) is to ensure that Connecticut healthcare innovations lead to positive health outcomes and health equity for consumers across Connecticut.

Background

In March 2013, Connecticut received a Federal State Innovation Model (SIM) Phase 1 grant to improve the quality and reduce the cost of health care through changes in how health care is delivered, paid for and how quality of care is measured. The Consumer Advisory Board was established under this grant to promote consumer involvement in this process. Under the SIM Phase 2 grant awarded December 2014, the Consumer Advisory Board membership was increased and its activities expanded.

The OHS was created in 2017 and formally established in February 2018 by a strong bipartisan effort of the Connecticut General Assembly. The legislation re-organized existing state resources into one centralized healthcare policymaking body to advance health reform initiatives that will drive down consumer costs and undertake modernization efforts made possible by advancements in technology and communication.

The CAB was initially interested in strengthening the positive impact of SIM innovations on consumers, particularly those who are at-risk and underserved and strengthening the communication between the SIM and consumers of health services and ensuring statewide engagement and input of consumers into the activities of the SIM initiative. With the creation of the OHS, the CAB, while continuing their work with consumer engagement and input on SIM, will now have a broader reach to include Health Information Technology (HIT) and Health Systems Planning (HSP) and other efforts within the OHS, including the Health Care Cabinet (HCC).

What Does Consumer Advisory Board Do?



Provides advice and guidance on healthcare innovation policies

Recommends consumer representatives to OHS Advisory Groups, Design Groups and Committees

Ensures meaningful consumer participation in healthcare policy decisions

Engages consumers and promotes community input in OHS health care innovation planning and implementation

For More Information

For more information on the Office of Health Strategy and the Consumer Advisory Board (CAB) go to <https://portal.ct.gov/ohs>

Consumer Advisory Board Meetings

The Consumer Advisory Board meets monthly. In addition, Consumer Advisory Board Members are asked to participate in Community Listening Sessions, Forums, and Issue Focused Webinars. A calendar of CAB meetings and activities is posted at <https://portal.ct.gov/OHS/SIM-Work-Groups/Consumer-Advisory-Board>

Consumer Advisory Board Members

Jeffrey G. Beadle	Terry Nowakowski
Linda Guzzo	Jason Prignoli
Robert Krzys, Interim Chair	Kelly Ray
Theanvy Kuoch, MA, LPC	Ann R. Smith, JD, MBA
Nanfi Lubogo	Denise O. Smith
Velandy Manohar, MD	Christiane Pimentel

Contact Information for the Office of Health Strategy

Leslie Greer at the Office of Health Strategy can be reached at Leslie.Greer@ct.gov or 860-418-7013.

Consumer Advisory Board (CAB) Member Responsibilities

1. **Attend** meetings consistently to ensure active participation and quorum
 - a. Contact staff if you will be absent from a meeting
 - b. Contact staff prior to meeting if circumstances prevent you from attending in person and you require participation via conference call.
2. **Prepare** for meetings by:
 - a. Reviewing materials distributed prior to meeting
 - b. Prepare to raise questions and comments about issues being discussed
3. **Participate** in meeting discussions by raising questions and comments, and making recommendations
4. **Listen Respectfully and Speak Respectfully** to others
5. **Assist** in planning and implementation of CAB consumer engagement activities and efforts to promote healthcare policies important to consumers
6. **Uphold** Consumer Advisory Board Values
7. **Comply with** OHS Conflict of Interest policies.

In the event, that a Consumer Advisory Board member is unable or unwilling to fulfill the above responsibilities, Consumer Advisory Board may recommend their replacement.

Consumer Advisory Board Values

The mission of the Consumer Advisory Board is to advocate for consumers and provide for **strong public** and consumer input in Connecticut health reform policies. To accomplish this mission, Consumer Advisory Board meetings and activities are open to the public and strive to uphold such values as;

- Respect
- Diversity
- Accountability for meeting CAB goals and objectives
- Commitment to overcoming language and other barriers to meeting participation
- Understanding there are many different “consumer” perspectives.
- Listening to and learning from other points of view
- Appreciation of CAB member time and effort
- Dedication to healthcare innovation efforts that improves healthcare for Connecticut consumers

Conflict of Interest Policies

All Consumer Advisory Board (CAB) Members are required to disclose in advance if they, their employer or any member of their immediate family could possibly benefit financially from the outcome of a CAB decision process. A Conflict of Interest Disclosure Form is completed by each Consumer Advisory Board Member and submitted to the Office of Health Strategy (OHS). Once disclosed, the individual can choose to abstain from a vote or be recused from a discussion.

Glossary of Terms and Abbreviations

A **Community Conversation** is a group of individuals invited to help identify and prioritize community needs. Normally done in small group sessions, (i.e., 6 to 15 participants), it can be conducted with small subgroups in a larger, community setting.

www.unitedwaywi.org/sites/.../Community%20Conversations%20Guide.pdf

Behavioral health refers to both mental health and substance use conditions.

Care experience is the actual experience a consumer has with the services that are provided. This can include the timeliness of scheduling an appointment, the courteousness of administrative staff, and the perceived willingness of the doctor to answer questions in a way that is understandable to the consumer.

Comprehensive multichannel engagement and communication plan is an approach to sharing and receiving information through a variety of strategies that is tailored to the target audience.

Health disparities can be understood as inequalities that exist when members of certain population groups do not benefit from the same health status as other groups (www.fccc.edu)

Health equity is when all people have "the opportunity to 'attain their full health potential' and no one is 'disadvantaged from achieving this potential because of their social position or other socially determined circumstance'" <http://www.cdc.gov/socialdeterminants/Definitions.html>

Health information technology involves sharing health related information through electronic based platforms. <http://www.hhs.gov/ocr/privacy/hipaa/understanding/special/healthit/>

Healthcare workforce is the actual number of individuals who are providing health services, across disciplines and levels of care. <http://bhpr.hrsa.gov/healthworkforce/>

Interactive information portal is located on the internet as a webpage that brings information together and makes it accessible to multiple groups and individuals. https://en.wikipedia.org/wiki/Web_portal

Linguistically and culturally relevant services means effective, equitable, understandable and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy and other communication needs.

Population health is defined as the health outcomes of a group of individuals, including the distribution of such outcomes within the group.

Population health plan extends beyond the individual and incorporates health outcomes of a group of individuals. Often, population is defined by geography, but can also include another defining group characteristic. <http://www.improvingpopulationhealth.org/blog/what-is-population-health.html>

Primary care is the care provided by a personal physician that is trained in health promotion, disease prevention, health maintenance, counseling, patient education, diagnosis and treatment of acute and

chronic illnesses in a variety of health care settings. This person is typically the first contact with a consumer of health services. <http://www.aafp.org/about/policies/all/primary-care.html>

Quality measure alignment is the process of developing a more systematic approach to value-based payment in which payers tie financial rewards for providers to the same or similar quality targets.

Social determinants of health are the conditions in which people are born, grow, work, live, and age. Social determinants of health also include the wider set of forces and systems shaping the conditions of daily life. Examples of social determinants of health are access to health services, safe housing, food, education and employment. http://www.who.int/social_determinants/en/

Stakeholders can be understood as those individuals or groups that would be substantially affected by reforms to the system. The primary stakeholders in healthcare are consumers, providers, pharmaceutical firms, employers, insurance companies, and government.

<https://sites.sju.edu/icb/health-care-reform-duties-and-responsibilities-of-the-stakeholders/>

Value-based Insurance Design is an approach to increasing the quality of care a consumer receives while also lowering the costs of providing care by using financial incentives to promote cost efficient services and consumer choices. <http://www.ncsl.org/research/health/value-based-insurance-design.aspx>