



Office of Health Strategy

2019/2020 STRATEGIC PLANNING

CONSULTATION WITH CONSUMER ADVISORY BOARD

Developing a Health Care Vision for Connecticut

Thank you for taking the time to discuss our draft goals and strategies. This document includes our mission statement, excerpts from the statutory mandate for the Office of Health Strategy, and the draft goals developed by our agency. During this Strategic Planning Consultation, we would like to hear your thoughts on the following questions:

1. **The degree of relevance and impact of the OHS goals, as drafted, on the people you serve or represent.**
2. **What is the best and most useful role that OHS can play to achieve shared goals?**
3. **Are there any goals with which you disagree or that may lead to conflict with goals or work that you support?**
4. **What's missing from our list of goals?**

OHS's mission is to implement comprehensive, data-driven strategies that promote equal access to high-quality health care, control costs, and ensure better health outcomes for all Connecticut residents.

Public Act 18-91, codified as CGS 19a-754a, defined the mandate of the Office of Health Strategy as follows:

Sec. 19a-754a. Office of Health Strategy established. (a) There is established an Office of Health Strategy, which shall be within the Department of Public Health for administrative purposes only. The department head of said office shall be the executive director of the Office of Health Strategy, who shall be appointed by the Governor in accordance with the provisions of sections 4-5 to 4-8, inclusive, with the powers and duties therein prescribed.

(b) The Office of Health Strategy shall be responsible for the following:

(1) Developing and implementing a comprehensive and cohesive health care vision for the state, including, but not limited to, a coordinated state health care cost containment strategy; [bold added]

(2) Promoting effective health planning and the provision of quality health care in the state in a manner that ensures access for all state residents to cost-effective health care services, avoids the duplication of such services and improves the availability and financial stability of such services throughout the state;

(3) Directing and overseeing the State Innovation Model Initiative and related successor initiatives;

(4) (A) Coordinating the state's health information technology initiatives, (B) seeking funding for and overseeing the planning, implementation and development of policies and procedures for the administration of the all-payer claims database program established under section 19a-775a, (C) establishing and maintaining a consumer health information Internet web site under 19a-755b, and (D) designating an unclassified individual from the office to perform the duties of a health information technology officer as set forth in sections 17b-59f and 17b-59g;

(5) Directing and overseeing the Health Systems Planning Unit established under section 19a-612 and all of its duties and responsibilities as set forth in chapter 368z; and

(6) Convening forums and meetings with state government and external stakeholders, including, but not limited to, the Connecticut Health Insurance Exchange, to discuss health care issues designed to develop effective health care cost and quality strategies.

OHS STRATEGIC PLANNING

The OHS Strategic Planning process will help us build a “comprehensive and cohesive health care vision for the state” that includes specific recommended steps toward achieving the vision and key measures of progress. The vision will be a roadmap for state policies and actions intended to improve the health of Connecticut residents, ensure equal access to health care services, and reduce and contain costs. The articulated vision will reflect the expertise of the OHS staff, the input of state government leaders and partners, and the input and advice of key stakeholders that are convened and consulted by OHS.

Our OHS Strategic Plan will articulate our vision, goals and plans.

Strategic planning is a process intended to define the goals of an organization, develop the strategies that will be used to pursue the goals, align people and resources to implement the strategies, and identify the metrics that will measure the degree of success or progress toward the goals including a timeline for actions and measures.

A good strategic plan is a living document that should be consulted regularly to guide actions and also adjusted, as needed, to reflect changing conditions or unexpected outcomes.

OHS is a mission-driven agency within the executive branch of the Connecticut state government, under the leadership of the governor. We choose and measure our policies and proposals based on data and on the input and advice of healthcare consumers, state leaders, providers, payers and advocates. Our guiding principle, above all else, is that policies and practices lead to better health for all residents of our state.

DRAFT GOALS FOR THREE-YEAR OHS STRATEGIC PLAN

GOAL #1: The rate of growth of total health care expenditures on a per capita basis across all public and private payers and populations in Connecticut is contained within annual **health care cost growth benchmarks to begin in 2021.**

GOAL 1A: The **costs of prescription medications are transparent and monitored** within an overall state cost growth benchmark in order to make them more affordable to consumers.

GOAL 1B: Connecticut **investment in primary care services is increased** to 10% of total health care expenditures within the health care cost growth benchmark across all payers and populations by 2025 in order to ensure greater access to screening, prevention and other services that keep people healthier and reduce costs.

GOAL #2: The **quality of health care improves** through measurement of clinical quality, over- and under-utilization and patient safety against annual health care quality benchmarks beginning in 2023.

GOAL #3: Patient **health care information is available to health and community service providers through a trusted platform** to enhance their ability to treat patients.

GOAL #4: Patient **health care data is available, in the aggregate, to planners, payers and consumers** to help analyze and improve health care delivery in Connecticut.

GOAL #5: Barriers to care on the basis of intersecting factors including race, gender, sexual orientation and gender expression, income, disability and others are reduced and **disparities in health outcomes** such as differential rates of diabetes, infant mortality and maternal mortality **are reduced.**

GOAL #6: Health care delivery and spending are **integrated with community needs and with supports that address the social determinants of health** and is culturally and linguistically competent.

GOAL #7: Healthcare facilities and services in Connecticut are **financially stable, accessible and appropriate to meet the medical needs of consumers in all geographic areas** without unnecessary duplication or excess cost.

GOAL #8: **High quality, comprehensive healthcare coverage is affordable** for households throughout Connecticut so that everyone can maintain good health and secure needed healthcare without sacrificing the ability to meet other basic needs and without sinking into debilitating debt.