

State Innovation Model

Healthcare Innovation Steering Committee

Meeting Minutes

October 11, 2018

Meeting Date	Meeting Time	Location
October 11, 2018	3:00 - 5:00 p.m.	Legislative Office Building, Room 1D, 300 Capitol Avenue, Hartford

Participant Name and Attendance

Healthcare Innovation Steering Committee Members					
Nancy Wyman	X	Terry Gerratana		Mario Garcia for Raul Pino	X
Catherine F Abercrombie		Suzanne Lagarde	X	Joseph L. Quaranta	X
Jeffrey Beadle	X	Sharon Langer		Robin Lamott Sparks	X
Mary Bradley	X	Bruce Liang		Kristina Stevens	X
Kate McEvoy for Roderick L. Bremby	X	Robert McLean	X	Elsa Stone	X
Patrick Charmel		James Michel	X	Jan VanTassel	X
Alyse Chin for Miriam Delphin-Rittmon	X	Frances Padilla		Katharine Wade	
Members Via Phone					
Patricia Baker	X	Thomas Woodruff	X		
Alta Lash	X				
Others Present					
Vicki Veltri - OHS		Stephanie Burnham, OHS			
Jenna Lupi - OHS		Mark Schaefer, OHS			
Laura Morris - OHS					

Meeting Information is located at: <https://portal.ct.gov/OHS/SIM-Work-Groups/Healthcare-Innovation-Steering-Committee>

	Agenda	Responsible Person(s)
1.	Call to Order and Introductions	LG Nancy Wyman
	<p>Call to Order The regularly scheduled meeting of the Healthcare Innovation Steering Committee was held on Thursday, October 11, 2018 at Legislative Office Building, 300 Capitol Avenue, Room 1Dm Hartford, CT.</p> <p>The meeting convened at 3:07 p.m. LG Nancy Wyman presiding.</p> <p>It was determined that a quorum was not present.</p>	
2.	Public Comment	LG Nancy Wyman
	There was no public comment.	
3.	Minutes	LG Nancy Wyman
	The approval of the meeting minutes was postponed.	
4.	Health Enhancement Communities	Deb Zahn

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- Deb Zahn of Health Management Associates (HMA) presented on the Health Enhancement Communities (HEC).
 - The Committee discussed the HEC proposed prevention policies. There was concern expressed about how realistic the Adverse Childhood Experiences (ACEs) list of goals are. It was mentioned that it is a huge goal and could be beyond what an intervention is going to do. Ms. Zahn noted that there is a mix of interventions where some have been shown to work with evidence and others not only work but show evidence on a return of investment. It was mentioned that all of the listed items may not be prevented but there are things that can be done for everything on the list by preventing it or mitigating impact on the child.
 - The Committee continued to discuss the list of ACEs. There was a suggestion to have a separate list of the interventions to show that if it works it could prevent the list of Adverse Childhood Experiences. Ms. Zahn said they have a draft version of the list and there are examples of work that have been done in Connecticut that they can share. There was a suggestion to think about how to adopt a strategy and communicate viable pathways about feasible things that can be done. The Committee discussed the HEC proposed governance framework and structure. It was mentioned that certain parameters should be set around participation. Ms. Zahn said they are still in the design process and to let them know if you see anything that you think there should be changes on.
 - The Committee also talked about community member engagement. Concern was expressed that the process does not include real engagement of communities. There was a suggestion to seek out and have conversations with community people first before structures are created. It was mentioned that to change health outcomes, they need to reach out to people that are not showing up at places where work is already being done to engage the community such as community health centers. There was a suggestion to look at other initiatives that are already doing community outreach in a meaningful way.
 - It was mentioned that some school districts are already doing public health and prevention work. It was suggested that a priority should be to look at existing community groups that really represent the community. It was mentioned that experts should be from within the community and that they be trusted advisors otherwise success is greatly reduced. It was noted that the goal is to have decisions driven on a community level and not by the state. In terms of community member engagement, it makes sense for the state to provide some guidance or requirements.
 - There was a suggestion to have the private sector, chamber of commerce, and local employers involved. There was also a suggestion to look at larger unions in the communities because more are being seen with connection on the opioid crisis. Ms.

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	Zahn said she has great feedback and may want to have additional conversations to avoid some of the issues being raised.	
5.	“Story of Medicaid” Informational Materials	Kate McEvoy
	<ul style="list-style-type: none"> • Kate McEvoy presented on the Story of Medicaid Informational Materials. There were no comments or questions. 	
6.	Preventative Service Initiative	Heidi Arthur
	<ul style="list-style-type: none"> • Heidi Arthur presented the update on the Preventions Service Initiative (PSI). She provided a PSI overview, technical assistance overview, several projects that were recently formed, and some of the lessons learned to date. <ul style="list-style-type: none"> ○ The Committee discussed the PSI update. It was mentioned that at this stage the initiative is successful. Concern was expressed with possible IT issues and return of investment (ROI) issues. Ms. Arthur said these groups have an opportunity to be pioneers in a new space to do some problem solving to figure out some solutions to share with their peers. ○ There issue was raised about addressing social determinants of health (SDOH). Ms. Arthur said they are working with their partners to help them think about proactively planning, holistic approaches to screening, identifying needs, etc. She said they are working with them to be mindful of the fact that it is unwise to over promise and under deliver but much better to be candid about the limits of their capacity. She said they had to do some social determinants of health “one-on-one” around what it looks like to effectively individualize holistic attention to population health needs. There was a question of whether there will be additional PSI updates. It was mentioned that there is a plan to have an update after the first of the year and to have community based organizations (CBOs) and advanced networks (ANs) come to present when the Department of Public Health (DPH) and HMA think they are at a good point to provide a voice from the field 	
7.	Adjourn	Meeting adjourned at 5:05 p.m.
	Kristina Stevens motioned to adjourn and Jan VanTassel seconded; Motion carried.	