

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

**Meeting Summary**  
**September 13, 2016**

**Meeting Location:** Legislative Office Building Room 1B, 300 Capitol Avenue, Hartford

**Members Present:** Patricia Checko; Jeffrey G. Beadle; Alice Ferguson; Christi Holmes (for Alicia Woodsby); Kevin Galvin; Bonita Grubbs; Stephen Karp; Robert Krzys; Theanvy Kuoch; Arlene Murphy

**Members Absent:** Michaela I. Fissel; Nanfi Lubogo; Fernando Morales; Ann Smith

**1. Call to Order**

Arlene Murphy called the meeting to order at 1:07 p.m. It was determined a quorum was present. Participants introduced themselves.

**2. Public Comment**

There was no public comment.

**3. Acceptance of Meeting Minutes**

***Motion: to accept the minutes of the August 9, 2016 Consumer Advisory Board meeting – Kevin Galvin; seconded by Theanvy Kuoch.***

There was no discussion.

***Vote: all in favor.***

**4. Consumer Engagement Update**

Quyen Truong presented the update on behalf of the North Central Regional Mental Health Board (NCRMHB).

- ***Feedback from follow up with attendees of CAB forums/listening sessions***  
NCRMHB contacted attendees of previous CAB events and received feedback from around two dozen people. The major themes were transportation, health equity, and differences between rural and urban health. Ms. Truong noted that the Southeast Asian Listening Session made a huge impact to both the community and to those who attended. She said people cited that event as an important part of their learning and also seeing themselves as part of the picture. Some of the respondents had specific ideas about how to respond to the issues while others had a more general interest. Alice Ferguson noted that the Planning Committee will address how to invite those they reach in the community to become part of the process. Jeffrey Beadle noted that DMHAS has a forum scheduled for September 28<sup>th</sup>. Information will be shared with the CAB.
- ***Approval of CAB Event Project Application***  
Ms. Truong reviewed the application form and the proposed event. The format was shared with the Planning Committee. They tested the form at NCRMHB and an idea came back for a young adult listening session at Manchester Community College (MCC). MCC would provide the room and help recruit student participants. There is funding requested for the speakers.

Patricia Checko expressed concerns over the availability and approval of grant funds. Mark Schaefer said that he wouldn't want uncertainty about funding to disrupt the planning to make the event happen. He said that if the CAB supports the activity, they should proceed and the SIM PMO will work with CMMI to obtain the necessary approvals. With respect to budget questions, Dr. Schaefer noted that the SIM governance structure is meant to be advisory without the authority to authorize the use of funds. Bonita Grubbs noted that one item missing from the form is how the event helps to advance the work of the CAB.

Ms. Ferguson said she was in favor of the forum and said the CAB can benefit from knowing what young adults are thinking. Kevin Galvin said what he is looking for is ways to touch communities that are difficult to touch. He said he knows nothing about how a young person looks at healthcare. He noted that opportunities will present themselves that may not meet the grant timeline; that will require the CAB to make decisions. He added that one of the failures with Access Health CT was not moving quickly or fluidly enough. Jeffery Beadle said that they should include a brief overview of SIM so they understand what SIM is. Theanvy Kuoch said that forums could be used to find potential CAB members and that they need young people to be on board.

***Motion: to endorse moving forward with the listening session – Patricia Checko; seconded by Jeffrey Beadle.***

Mr. Galvin said the remaining consumer engagement items could be discussed at a future meeting.

***Vote: All in favor.***

- ***Potential forum/listening sessions***  
This was not discussed due to lack of time.
- ***Potential use of social media***  
This was not discussed due to lack of time.

## **5. Consumer Representative Composition, Solicitation and Review Process**

Dr. Checko provided an overview of the process and Planning Committee discussion. They have lost three CAB members in the last six months: Bryte Johnson, Sharon Langer, and Jackie Ortiz Miller. The Planning Committee decided to focus on filling those positions. The committee decided to focus on appointing consumers and that they wanted to make the application more consumer friendly and to get the application in places where consumers are found. She turned the discussion over to Ms. Ferguson, who had suggested changing the application.

Ms. Ferguson said she came to the CAB as a consumer and one of her first tasks was to approve 70 applications for work group membership. The CAB reviewed them together with scoring taking place afterwards. She noted that there is more than just appointing an individual and that they will need to mentor new members. They came up with critical questions to include at the Planning Committee. Ms. Kuoch noted that consumers are not experts and it may be difficult for them to answer what perspective they would bring to health care discussions. Ms. Ferguson said she didn't think they should "dummy down" the application a lot but she wasn't opposed to rewording: what would you bring to group discussions. Dr. Checko noted they were not looking to do separate applications for consumers and advocates. Ms. Murphy said they can include an introduction that explains what the CAB is and provides a guide that will help answer questions.

Ms. Ferguson noted that when she joined the CAB she had no idea what SIM was. She was expected to be an outlet for her community. She said they should recognize that not everyone will come to the CAB. She said she is still learning every day.

Mr. Beadle said that “perspective” may be a tough word. He also asked why the employment question was eliminated. Dr. Checko said it was a bit of an oversight. The draft should have asked the question, if applicable. The Board discussed alternative wording for the “perspective” question. It was suggested the language be changed to “What would you bring to healthcare reform discussions and how would your participation contribute to the overall process of improving healthcare.” Mr. Karp said they will know the application works after they use it. Dr. Checko noted there is no reference to attaching a resume or a bio. The suggestion was to limit that information to one page.

Mr. Galvin suggested translating the form so that it could be completed by those for whom English was not a first language. Rev. Grubbs said she wanted to try to find a way of determining what area of health reform a candidate is interested in. Robert Krzys said that everyone on the CAB got involved for a different reason. He said they can ask two simple questions: 1) What is the most important problem with the system and what is the reason for your answer; and 2) What is the most important part of the system that has worked for you. Mr. Beadle suggested including where someone is employed and include where the majority of meetings are. Dr. Checko said that would be included in the introductory paragraph.

Other items the CAB will need to consider include the scoring process. Some of the possibilities include weighting particular questions. They could also choose six potential candidates as part of a first cut and set up a process where they come and meet with the CAB as a whole. They also need to discuss ways to increase the reach of the solicitation, including having paper forms in places where consumers are likely to be, such as hospitals and community health centers. The Consumer Engagement team may be able to help. Dr. Checko said she would work on the opening paragraph and provide it to the group for feedback.

## **6. PMO Update**

Dr. Schaefer provided a brief update. Work Stream Updates will likely be released the next day. The PMO can also share the summary of activities that was sent to the Healthcare Innovation Steering Committee. A lot of planning has come to term with the AMH, CCIP, and PCMH+. The PMO conducted a procurement for a health IT consultant. That consultant will help support work with DSS and CMMI around alert notification (which involves sending hospital information to clinicians). There is a HIT Advisory Committee meeting on Thursday, September 15. Members of the PMO attended meeting of the Office of the National Coordinator around electronic health records and plans for producing clinical quality measures which is a really critical capability. The operational plan has been submitted which, hopefully, will result in a second year award. The PMO is also working on an alignment grid which calls out four or five major populations or conditions and shows how the state will solve for it.

## **7. Next Steps and Adjournment**

The CAB Planning Committee is next scheduled to meet on October 4, 2016. Members are welcome to send comments or attend the meeting. The CAB will next meet on October 13<sup>th</sup>.

***Motion: to adjourn – Bonita Grubbs; seconded by Alice Ferguson.***

There was no discussion.

***Vote: all in favor.***

Meeting adjourned at 3:03 p.m.