THE LARGER VISION: UNIVERSAL COVERAGE AS A STRATEGY TO TRANSFORMATIONAL CARE

	Please rate using numerical scale of 1 - 10 with 1 as least important and 10 as most important	**Impact**	**Safe**	**Effective**	**Efficient**	**Timely**	**Patient Centered**	**Equitable**	**Affordable**
	OVERALL OBJECTIVES								
1	Value Based Health Care that is transformational for individuals, communities, and state of Ct.								
2	Encourage behaviors for both providers, plans, and patients that result in good use of the health care system and good health outcomes								
3	Invest in health optimization and disease/injury prevention								
4	Design health care to drive behaviors that can improve health, improve adherence to treatment plans for heath problems, and improve quality of care for illnesses, disease, and injuries.								
	QUALITY								
5	Data Transparency: mandatory submission by all state-controlled plans for purpose of further health plan design and public health interventions								
6	Funding and infrastructure support to use data for predictive modeling and guide for investing healthcare resources								
7	Consider public/private authority to oversee all state controlled health plans								
8	P4P for public plans								
9	annual review and dissemination of evidence based guidelines								
	PREVENTION								
10	Incorporate principles into both public health and private coverage								
11	DPH focus on tobacco and obesity								

	Please rate using numerical scale of 1 - 10 with 1 as least important and 10 as most important	**Impact**	**Safe**	**Effective**	**Efficient**	**Timely**	**Patient Centered**	**Equitable**	**Affordable**
12	evidence based: cover tobacco cessation products, vaccinations, U.S. Preventive Task Force type A recommendations								
13	school, workplace based prevention services								
14	public health measures (trans fat, smoke free, school lunches, fitness								
15	upstream prevention and secondary prevention								
	ACCESS								
16	universal access to care/coverage								
17	advanced access scheduling.								
18	eliminate regulatory barriers to practice								
19	assigned medical homes with accountability								
20	inc. MD participation in medicaid, inc. fees/supprt.								
21	primary care case management								
22	plan for safety net expansion (CHCs, schools)								
23	worksite based health services								
24	oral health benefit as part of any state controlled health care plan								
25	address care and coverage issues for undocumented residents								
	SAFETY								
26	Disclosure of adverse events								
27	Universal Electronic Prescribing								
28	Non payment for never events								
	HEALTH INFORMATION TECHNOLOGY								
29	Support acceleration								
30	Incentives to offices that implement E.M.R.								
31	on-going infrastructure support								
32	support interoperability (RHIO, ehealth								
33	Support consumer use of personal health record								

	Please rate using numerical scale of 1 - 10 with 1 as least important and 10 as most important	Impact	Safe	Effective	Efficient	Timely	Patient Centered	Equitable	Affordable
34	electronic application for Medicaid and auto screening into benefits								
	HEALTH DISPARITES								
35	Address health literacy (ask me 3 AMA campaign?)								
36	support work of Minority Health Council								
37	design system so "average person" can navigate and understand it								
	Focus on high perf. Health system(Commonwealth Fund data)								
38	focused recruitment of minority students into health professions (all of them)								
	WORKFORCE ISSUES								
39	Primary care providers: strategies for recruitment and retention								
40	address regulatory barriers to practice for all								
41	on-line licensure renewal for providers:design to capture data for workforce planning								
42	Increase capacity to meet demand for nursing students								
43	scholarships, loan repayment, nurse faculty salary adjustments								
44	Specialty providers: payment for electronic referral consults prior to in-person visit								
45	Focus during training on primary care strategies and models for health improvement								
46	Incentives for location of high need services in high need areas (child psychiatry, specialties)								
	MEDICAL HOME								
47	Develop Ct. goal and definition								
48	Universal access to care/coverage								
49	Identified PCP accountable for prevention								

	Please rate using numerical scale of 1 - 10 with 1 as least important and 10 as most important	**Impact**	**Safe**	**Effective**	**Efficient**	**Timely**	**Patient Centered**	**Equitable**	**Affordable**
50	Perf. bonus for primary care actices that meet medical home criteria								
51	Support integration of behavioral health provider into medical practice								
	CHRONIC DISEASE MANAGEMENT								
52	Patient centered and community based								
53	For large practices may be practice based								
54	Timely access to real time clinical data , not claims data								
55	Timely access to full and comprehensive past health history records								
56	Innovate: care vs. case management: nurses/social workers vs. lay workers								
57	available in the language and cultural context of diverse population								
	CARE COORDINATION								
58	co-locate (virtual or real), integrate with chronic disease managements: different functions, same structure								
59	available in the language and cultural context of diverse population								

	Please rate using numerical scale of 1 - 10 with 1 as least important and 10 as most important	**Impact**	**Safe**	**Effective**	**Efficient**	**Timely**	**Patient Centered**	**Equitable**	**Affordable**
	INNOVATIONS								
60	role of retail clinics?								
61	e-consults, group visits, telephonic visits								
62	school and workplace delivery of care								
63	patient education on personal records, portals								
64	remove barriers to chronic disease treatment								
65	Role of pharmacists in treatment, counseling, education (e.g. tobacco cessation products)								
66	Consumer education: evidence based: information that is accurate and easy to comprehend								
67	Use electronic licensure renewal process to drive targeted provider education (new evidence based guidelines)								
68	Community engagement: health care report cards based on submitted data with annual report and goals								
69	Reduce adverse impact of malpractice environment on patients and providers								
70	Use and documentation of evidence based standards								
71	Training and use of "no blame apology" when adverse events and outcomes occur								
72	Review models like FTCA, vaccine injury compensation fund								