## State of Connecticut GENERAL ASSEMBLY



## PUBLIC HEALTH COMMITTEE LEGISLATIVE OFFICE BUILDING HARTFORD, CT 06106-1591

NASH Working Group

Meeting Summary

Wednesday, November 6, 2024

12:30 PM on Zoom and YouTube Live

- I. Convene Meeting
  - The meeting was convened by Wajahat Mehal at 12:35 PM.
  - Attendance: Rep. Cristin McCarthy-Vahey, Dr. Wajahat Mehal, Dr. Bubu Banini, Dr. Jorge Moreno, Dr. Elizabeth Richardson, Alison Giguere, Elizabeth Conklin and Xuehong Zhang
- II. Agree on the conclusions and recommendations from the previous meeting.
  - Wajahat Mehal went over the conclusions and recommendations that were discussed during the last meeting. He believes that recommendation A1 should be revisited because of information shared by Elizabeth Conklin. He went over the data and believed that a flaw could be still using the ICD codes which means that they could be missing some segment of the population. He believes that the issues present in the public data arise in the Medicaid data provided.
  - Xuehong Zhang asked if a diagnosis require a pathology.

- Wajahat Mehal replied that it doesn't require a pathology and it is very rare.
- Bubu Banini added that an issue could be terminology as there are multiple terms that can be used for NASH.
- Wajahat Mehal agrees that the terminology is confusing and added that all the terms will get distilled down to an ICD code and suggested using a broader grouping of ICD codes. He believes that the underlying issue is that there are many individuals with the disease that aren't being identified in the sense that the condition is not ending up on the medical record as a distinct diagnosis. He suggested having a recommendation where they encourage the development of algorithms that can screen medical records. He believes that they can screen medical record sinstead of the population as there is a lot of information in the medical record system that isn't being utilized. He suggests that ICD codes won't capture the disease as they would like and recommending a statewide electronic medical record (EMR) screening program might be helpful.
- Bubu Banini added that she thinks it's a good idea and asked if he sees the recommendation as fulfilling the earlier question of epidemiology and prevalence or implementation or both.
- Wajahat Mehal replied that he sees the screening as both. He believes that screening medical records is doable instead of doing an in-person screening of patients for a set number of years as the resources required would be significant. He believes that getting accurate data will be very difficult regarding ICD codes and suggests not pursuing ICD codes as he believes it won't generate the information that the Working Group wants. He also suggests recommending EMR screening approaches that will be up to the Working Group to determine.
- Bubu Banini agrees with the limitation of using ICD codes and believes that an EMR screening might have more utility. She wondered what modality or perimeter would provide the highest yield and if they are too nonspecific, she believes that they can catch a ton of people who don't have NASH.
- Wajahat Mehal agrees with Bubu Banini. He believes that the discussion on how to screen medical records is a big discussion and the discussion is more about if they believe the approach is helpful. The specifics of the screening of medical records can be done down the line. He went over the meeting summary for the meeting of October 21<sup>st</sup>. He shared a presentation from the AACE Obesity Resources Center, and a review titled "AGA Clinical Practice Update on Lifestyle Modification Using Diet and Exercise to Achieve Weight Loss in the Management of Nonalcoholic Fatty Liver Disease: Expert Review". He asked the Working Group if these guidelines can be used for making recommendations for the Working Group.

- The Working Group agreed.
- Wajahat Mehal stated that he will share the guidelines with the Working Group to review and went over a CT Mirror article regarding food deserts in Connecticut as well as highlighting House Bill 6941 and the food desert provision that was passed into Public Act 23-204.
- Alison Giguere added that coming from the school system standpoint regarding availability to food that it is a big area, and they can look at the makeup of the nutritional component of the meal.
- Wajahat Mehal thanked Alison Giguere for bringing that up and believes that it is related somewhat to the geographic issues. He stated that he reached out to a contact at the Department of Education (DOE) but was unsuccessful in having a conversation. He stated that he will investigate these bills and what has happened to them and figuring out where the momentum on this topic is at the state level.
- Rep. Cristin McCarthy-Vahey added that she would be glad to reach out to the contact at DOE and establish a meeting.
- Wajahat Mehal thanked Rep. Cristin McCarthy-Vahey and asked Elizabeth Richardson if she can circle back on the contact from the State's Chapter of the American College of Physicians (ACP).
- Elizabeth Richardson responded that she will.
- III. Review and discuss the second set of topics:(B) POLICY AND OTHER INTERVENTIONS TO REDUCE DISEASE BURDEN
  - (3) Strategies for preventing such disease in high-risk populations and how such strategies can be implemented state-wide.
    - Wajahat Mehal believes that the food desert topic is an obvious suggestion to follow up on as well as the school meal situation. Another strategy he believes would be helpful is identifying from the EMR how many people have the condition and where the condition is most prevalent.
  - (6) Policy changes necessary to improve care and outcomes for patients with such disease.
    - Wajahat Mehal believes that the biggest recommendation is having access to healthcare professionals. He believes that the information is there in the EMR, and they need to encourage primary care physicians to act upon it.

- (9) The way social determinants of health influence the risk and outcomes of such disease and interventions needed to address such determinants.
  - Wajahat Mehal believes that this is mainly an academic question where they can identify the main social determinants. He believes that the intervention required will be aspirational.
  - Bubu Banini added that in the last meeting the Working Group discussed that there were five main social determinants to health, and they would each take a social determinant and find a subset in the determinant to focus on.
  - Wajahat Mehal asked if Bubu Banini can go through the social determinants of health and identify two that can be shared with the Working Group.
  - Bubu Banini agreed that she can.
  - Wajahat Mehal thanked Bubu Banini and asked the Working Group if they believe they are moving too quickly.
  - Bubu Banini stated that she doesn't believe that the Working Group is moving too quickly as the issues are interconnected and that they also need time to digest and review the recommendations.
  - Wajahat Mehal agreed and went over the timetable of the Working Group as well as making sure that the Working Group isn't losing the opportunity to make recommendations.
  - Elizabeth Conklin commented that the Medicaid Data showed earlier as well as the food desert article and asked the Working Group if there is a connection between the two.
  - Wajahat Mehal stated that it is troublesome to make recommendations that seem too obvious. He states that they can make statements like that but hesitates to tell people what they already know.
  - Elizabeth Conklin commented that she was looking if the Medicaid data was matching up with geographic locations of the food deserts.
  - Wajahat Mehal stated that the trouble with diagnosis is the access to healthcare as this is an indolent condition.
  - Elizabeth Conklin and Wajahat Mehal compared the Medicaid data and the geographic locations of food deserts.

- Wajahat Mehal commented that the pickup rate is low, and the rate could vary based on the prevalence.
- Elizabeth Conklin added that it could correlate with less-than-ideal food options which as Wajahat Mehal indicated does not seem in preventing NASH.
- Wajahat Mehal asked Elizabeth Conklin if she means that the benefits do not outweigh the cost of pushing obesity guidelines in food desserts.
- Elizabeth Conklin agreed with Wajahat Mehal and reiterated that it will be a challenge.
- Wajahat Mehal stated that it is a real-world issue and believes that access to medical care would overlap with food deserts. He asked the Working Group for any additional recommendations or suggestions.

IV. Reach some preliminary conclusions and recommendations.

- Wajahat Mehal stated that since a lot of these topics are interrelated, they circle back on the same methods to increase public awareness of the disease. He believes that the public awareness campaign won't reach the level of actively advertising.
- Bubu Banini disagrees and believes that they should actively advertise like other public health issues.
- Wajahat Mehal stated that he was hesitating as he doesn't have a public health background and if the Working Group believes it will be effective, he will support it. He reminded the Working Group is mainly considering recommendations that they feel are effective.
- Elizabeth Conklin commented that they should include the Working Groups wish list into the report without consideration of the cost. She also asked about micro level education as NASH isn't commonly known but being healthy is.
- Wajahat Mehal agreed with Elizabeth Conklin and stated that he thinks of three groups on which to focus, primary care physicians, educators, and parents. He stated that they can create material to allow NASH to be more easily known.
- Xuehong Zhang stated that would be very helpful.

- Elizabeth Richardson added that social media can be used as a resource like what the World Health Organization (WHO) did when they wanted to eradicate Hepatitis C.
- Wajahat Mehal agreed with Elizabeth Richardson and stated that they will need to hire a social media professional to accomplish that. He added that a recommendation would be suggesting the state to do something for Global Fatty Liver Disease Day. He asked the Working Group what the state does regarding recognizing special days.
- Elizabeth Conklin stated that she worked at the Department of Health's (DPH) office of communication and worked on several campaigns. She added that there are various levels of campaigns that are typically mediated through a medium provider. She stated that through a social media campaign they will be able to personalize and target the advertisements towards intended communities.
- Wajahat Mehal thanked Elizabeth Conklin and believed that linking it to a national day or another organization will be helpful.
- Elizabeth Conklin suggests raising awareness through conferences or networks of physicians.
- Wajahat Mehal agreed with Elizabeth Conklin and added that they should reach out to patients as well. He stated that patients typically act when told that they have a problem with their liver. He stated that a state-wide screening program recommendation would be an EMR screening instead of a real-world screening program.
- Bubu Banini asked Elizabeth Conklin if DPH has done a state-wide screening program for other diseases.
- Elizabeth Conklin stated that the DPH has many programs but can certainly say that usually they have awareness of general data of where the high-risk populations are.
- Xuehong Zhang believes that this is valuable regarding the previous discussion in establishing a new cohort in the general population so that they can identify the high-risk population along with the public campaign that can help create the groundwork for future work.
- Wajahat Mehal asked the Working Group if they are discussing active screening and if a demographic population data map is readily available. He stated that the Hispanic population based on genetics is a high-risk group and will try to see if that information is available. He believes that for the point of creating a patient advocacy and support networks for patients with NASH they

can lean on the American Liver Foundation.

- Bubu Banini agrees with Wajahat Mehal and added that she is on the National Advisory Board of the American Liver Foundation, and they have NASH as a main area of focus. She believes it would be useful to link patients to national and state organizations.
- Wajahat Mehal commented that the efforts done by the American Liver Foundation are tremendous and added that it isn't obvious for patients and people in general to figure out where to acquire information. He believes that this would be a relatively easy impact recommendation and suggests that it could be part of the outreach.
- Bubu Banini added that they could raise awareness to medical providers and that the American Liver Foundation is also doing outreach, and they can look at what they are doing.
- Wajahat Mehal added that this can be a two-way street.
- Elizabeth Conklin added that related to a campaign they may have resources already created and the Working Group can use as inspiration.
- Wajahat Mehal asked Bubu Banini if she can contact the American Liver Foundation to help with "stuff" in relation to a campaign.
- Bubu Banini agreed to reach out.
- Jorge Moreno asked if the Working Group if they discussed creating a website where resources and information can be accessed.
- Wajahat Mehal answered that they discussed several ideas to create resources to help raise awareness but not specifically a website.
- Jorge Moreno commented that looking at the website there is certain information that is present and creating an informational video from the commissioner can be a recommendation.
- Wajahat Mehal asked Jorge Moreno if this will be a permanent website or part of the DPH's website which highlights certain things.
- Jorge Moreno commented that they can ask for the website and link it to the main site but doesn't know the exact process.
- Wajahat Mehal agrees that it could be part of the recommendation for outreach.

- Bubu Banini added that they can add links to the website to act as a hub of information and resources.
- Wajahat Mehal added that they can reach out to influencers to further raise awareness as he is not sure how many people will go onto a state website to look for information.
- Jorge Moreno believes that it could be part of the "Liver Day" or "Liver Week" concept where the website is advertised.
- Wajahat Mehal agrees that it would be helpful and that they could focus more on the Live Health instead of Fatty Liver to bring in more people.
- Bubu Banini commented that on the state level the data is more comprehensive as they group everything together.
- Wajahat Mehal asked Bubu Banini that there is a state website that groups together this data.
- Bubu Banini replied that the website is national, and they break down the data into different states and don't differentiate between conditions.
- Wajahat Mehal was thinking more in terms of, if they are having an outreach event that will either be for a day or week, then they should rather focus on the liver in general instead of focusing on Fatty Liver to be more inclusive.
- Jorge Moreno asked what the ask from the state was regarding what they group would like to focus on Fatty Liver or is it about Liver Health.
- Wajahat Mehal stated that the mandate is Fatty Liver and commented that if the Working Group believes it will be helpful then they can consider it.
- Elizabeth Conklin commented on DPH webpages as DPH does create webpages for content but typically they are associated with programs with funding. She asked the Working Group if the social media campaign would be run by DPH or someone else.
- Wajahat Mehal commented that when he was making these recommendations, he intentionally did not specify a pathway through the state as he isn't sure which state body would be the best path for each recommendation.
- Elizabeth Conklin stated that DPH currently doesn't have a program that deals with Liver Health issues of various kinds. She added that seeing DPH doing other chronic disease campaigns, she believes that a broader Liver Health focus instead of Fatty Liver would be able to raise awareness better.

- Wajahat Mehal agrees with Elizabeth Conklin as Fatty Liver Disease is easier to ignore than Liver Health.
- Elizabeth Conklin added that she is overseeing a program dealing with Alzheimer's disease and that they start with Brain Health instead of Dementia as it a starting point.
- Wajahat Mehal added that another advantage to making it Liver Health as there are other liver diseases and they can help in each other's work. He stated that he will draft recommendations and circulate them to members.
- V. Announcement of Time and Date of Next Meeting
  - Wajahat Mehal announced that the next meeting will occur on November 20th at 12:30 PM.

VI. Adjournment

• The meeting adjourned at 1:41 PM