

State of Connecticut  
GENERAL ASSEMBLY



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

NASH Working Group

Meeting Summary

Wednesday, December 4, 2024

12:30 PM on Zoom and YouTube Live

I. Convene Meeting

- The meeting was convened by Wajahat Mehal at 12:35 PM.
- Attendance: Dr. Wajahat Mehal, Dr. Bubu Banini, Rep. Cristin McCarthy-Vahey, Dr. Denise Dawson, Allison Giguere, Dr. Jorge Moreno, Dr. Andy Beltran, Elizabeth Conklin, Dr. Xuehong Zhong and Alesia Ricks-Harris.

II. Modify and approve attached list of recommendations to be forwarded to the State Public Health Committee.

- Wajahat Mehal asked how the Working Group would like to proceed regarding the recommendations they have discussed in previous meetings.
- Bubu Banini asked for a brief review of the recommendations thus far.
- Wajahat Mehal summarized the previous topics and the recommendations for each. The first recommendation is creating an electronic medical record screening system to identify individuals or groups of individuals who are at high risk. He added that he has not yet been given guidance as to whom to contact to obtain this information. He believes that those guidelines would come at a

later stage and asked administrative staff for their opinion.

- Administrative staff referred the question to Rep. McCarthy-Vahey.
- Rep. McCarthy-Vahey responded that any specificity is helpful but not necessary.
- Wajahat Mehal thanked Rep. McCarthy-Vahey and stated that they can identify the main electronic medical record systems in Connecticut and some contact information for some people there.
- Rep. McCarthy-Vahey responded that sounds good.
- Bubu Banini asked Wajahat Mehal if he is proposing that they provide contacts for each medical system and how they would do that.
- Wajahat Mehal answered this can be accomplished by providing the name of a contact person within a healthcare system.
- Denise Dawson asked if the Yale electronic medical record system extends into the rural areas.
- Wajahat Mehal answered that it would extend to wherever the healthcare system has a presence. He stated that large groups of people who don't contact the healthcare system would be invisible until they reach the emergency room as well as the people where the healthcare systems don't have a presence. He added that even if an individual was in the electronic medical record system, but there was no medical information on the individual, they would still be invisible as they don't have any information to work from.
- Bubu Banini added that is why they have included the recommendation about a study to prospectively screen but reiterated the different level of commitment and funding that study would require.
- Xuehong Zhong asked how they would define high risk population and what data, or parameters would they be looking for if they access to the electronic medical record screening system.
- Wajahat Mehal answered that this information would be included in each electronic medical record search conducted. He stated that they can give some guidance at this point, or they can leave the recommendation broader.
- Xuehong Zhong responded that they can tailor the search to measure some key risk factors.
- Wajahat Mehal, Bubu Banini and Xuehong Zhong discussed that they will

work to define high risk populations for the Working Group.

- Elizabeth Conklin commented that they can include federally qualified health centers (FQHC) into their recommendations to ensure health equity.
- Wajahat Mehal read recommendation four which is initiating prospective screening in high-risk areas which include individuals who have poor access to healthcare, health foods and areas with high Hispanic populations. This would be going out into the community to screen, and this would require significant resources. He believes that this is an aspirational goal, but this is something that the state should be doing. He also referred to recommendation two which is to develop an outreach program about liver health to providers, educators and students. He asked the Working Group if there were any additional groups they would like to target, and he mentioned subspecialties.
- Elizabeth Conklin asked if this could include pediatricians.
- Wajahat Mehal responded that they would include pediatricians and then explained key points that they would like to address with the program. He added that they would give materials to help assist in outreach for food deserts and social determinants of health.
- Elizabeth Conklin added that recommendation six could be folded into recommendation two as part of that outreach program to primary care providers.
- Wajahat Mehal answered that they separated the recommendations to highlight fructose in soft drinks. He stated that they can do both where they can include it in lifestyle interventions.
- Elizabeth Conklin believes that this could benefit the general public.
- Wajahat Mehal believes that recommendation two will take a lot of work and time to prepare outreach material and asked the Working Group who would be responsible for this process.
- Allison Giguere added that they have dietetic interns who would be able to assist in creating outreach materials.
- Wajahat Mehal thanked Allison Giguere and stated that he was asking from a process perspective.
- Jorge Moreno asked if they could consider community health workers who have more on the ground access to patients.
- Wajahat Mehal asked if those are state employees or private employees of a

healthcare system.

- Elizabeth Conklin added that the Office of Health Strategy (OHS) have worked heavily in the last few years to get community health workers licensed. She stated that community health workers are a catch-all word for individuals who perform various health services. She commented that these workers are employed by the individual agencies, and they tend to be the community clinical liaisons.
- Wajahat Mehal asked if they can be approached as a group and how could this be accomplished.
- Elizabeth Conklin answered that there are about four hundred licensed community health workers and that the Department of Public Health (DPH) is in contact with the Connecticut Community Health Workers Association, and she can provide that contact to the Working Group as well as an advisory board.
- Jorge Moreno added that the legislature creates a fund to have some community health workers who focus on liver health in high-risk populations, and they can assist in the outreach program as well.
- Wajahat Mehal asked if the recommendation would be to hire two community health workers that would focus on liver health and who would they report to.
- Elizabeth Conklin responded that community health workers are usually not DPH employees rather employees of the agencies that DPH is using. She added that there are no community health workers employed by the state as they must be connected to a healthcare system.
- Wajahat Mehal asked if the proposal is practical since the funds would have to go to one of the healthcare systems.
- Elizabeth Conklin agrees in theory and believes that developing tools first would be helpful.
- Wajahat Mehal asked if this recommendation were to pass, what would this look like as he would like to make the recommendations practical.
- Rep. McCarthy-Vahey added that anything that requires funding will be difficult to pass at any level and believes that worrying about the specifics may not be as important as getting across the general sense of what they are hoping to achieve. She thanked the Working Group for all the work they have done.
- Wajahat Mehal stated that for any recommendation that requires funding, he would group separately from the other recommendations. He read then

recommendation three which is designating a Connecticut Liver Health Day and asked about the process to design this.

- Bubu Banini believes that it could be done with minimal resources but at the same time resources would clearly help.
- Wajahat Mehal agrees that resources would help and believes that the designation is a single event and acting upon the day would require the resources. He asked if there are costs in designating a day and hopes that this recommendation moves forward. He added that they had conversations with national organizations that would take advantage of a designated day.
- Allison Giguere that if they can approve the recommendation than it would be good to link it to recommendation two.
- Bubu Banini stated that a minimum number of resources will be needed to spread word about the day.
- Wajahat Mehal stated that he would split the recommendation between designating the day and the resources needed.
- Allison Giguere added that the costs can be cut by using the material that would be used to the outreach groups.
- Wajahat Mehal asked about resources for outreach and if the state has a philanthropic system in place. He asked Denise Dawson about her efforts with the CARE alliance.
- Denise Dawson stated that she reached out to CARE and is awaiting a response from a contact person to engage with the Working Group.
- Wajahat Mehal asked Denise Dawson what CARE mainly does.
- Denise Dawson answered that provide several initiatives like education and outreach to the community as well as more academic initiatives like research. She believes that they will be helpful for the designated day that the Working Group is planning.
- Alesia Ricks-Harris added that one of the premises for CARE is that people will be more apt to get information from people they see are members of their community. The goal is to empower the community to advocate for themselves and get the level of care that they need.
- Wajahat Mehal asked if that is the typical CARE model in reaching out to the community.

- Alesia Ricks-Harris responded affirmatively and reiterated the academic portion.
- Wajahat Mehal believes that it can be a multi-layered approach where they can have community members, as well as professionals do outreach. He read recommendation five which is highlighting the specific risk of fructose in the development of MASH. He mentioned went over the rules and regulations of soda in public schools and read that students access to sodas in public schools can never be sold in cafeterias, vending machines or school stores with some exemptions. He asked what they can contribute to this conversation as the low hanging recommendation of banning soda in schools is already accomplished
- Allison Giguere believes that there is quite a bit of room to improve as they are trying to make an added sugar adjustment in school lunches. As a parent she believes that there is a distance to go with the added sugars portion.
- Wajahat Mehal asked Allison Giguere what she would suggest.
- Elizabeth Conklin suggested they could put that disclaimer about fructose in the outreach material because liver is such a new concept as it is not commonly talked about.
- Wajahat Mehal agreed with the suggestion and mentioned that items other than soda could be highlighted that contain high fructose.
- Elizabeth Conklin agrees that they could highlight other items.
- Allison Giguere added that for breakfast items alone there are a lot more sugars added and that some of the fruit cups are in syrup rather than water. She stated that it would be a tremendous change to have the fruit cups in water.
- Wajahat Mehal asked if fruit cups covered in syrup count as fruits.
- Allison Giguere responded that they do, and some schools count sorbet as fruit. She stated that some things designated as fruit wouldn't be counted by dieticians to be fruits, but she acknowledges that there are restrictions and limits.
- Wajahat Mehal agrees that they must be realistic about it and acknowledges that this area probably already has had countless discussions and believes that they must go with a liver angle.
- Allison Giguere believes that impacting kids at a younger age is a huge benefit.

- Wajahat Mehal added that he will add pediatric MASH documents to the report.
- Elizabeth Conklin added that in public health they empower individuals with the knowledge to make the healthy choices themselves. She shared that even for her, some of the information in the Working Group was new to her and that highlights how beneficial this outreach could be to the general public.
- Wajahat Mehal believes that it is an excellent point as even for liver clinicians they were so focused on their patients that they ignored public education.
- Bubu Banini agreed with Wajahat Mehal.
- Wajahat Mehal added that their professional organizations mainly focus on clinicians and not on the community. He read recommendation six which is communicating with soft drink providers to provide a state level recognition. He asked about the logistics and process of writing the recommendation. He stated that he will try to get an answer.
- Allison Giguere asked what the goal of the recommendation would be concerning sports drinks. This could be potentially a bigger cause.
- Wajahat Mehal added that information about sports drinks can go into the education side and that the communication would put this on the companies radar that Connecticut recognizes that their product causes some level of harm. He read recommendation seven which is identifying partners in Hispanic communities where the dangers of MASH can be highlighted.
- Andy Beltran added that at the Hispanic Health Council has a statewide educator that travels to various locations, and they could include the additional material about the liver. He commented that they have a puppet show and could include a high fructose puppet in presentations. This is something they can work on from their end.
- Wajahat Mehal asked about the programs scale. For example, how many visits they made to schools.
- Andy Beltran responded that they have visited over fifty schools and that the program is statewide. He stated that he will try to get the exact numbers back to the Working Group.
- Wajahat Mehal asked if the program was state supported.
- Andy Beltran responded affirmatively and added that other organizations are doing this too.
- Wajahat Mehal appreciates any material shared as they can submit that as well

and asked how many such state supported activities there are.

- Andy Beltran responded that he is not sure about that.
- Wajahat Mehal stated that it raises the question of state support as they seem to have a mechanism in place.

III. Consider additional recommendations from any member of the Working Group.

IV. Discuss final topic:

- Insurance coverage and affordability issues that affect access to treatments for such disease.
  - Wajahat Mehal read the final topic and stated that this is a broad topic where everyone acknowledges this is a huge problem and asked what they can contribute. He added that affordability encompasses office visits.
  - Bubu Banini reiterated Elizabeth Conklin's point of raising awareness and how lack of access to insurance can be detrimental to a diagnosis. She believes that short of any big recommendation that would increase access to healthcare, she doesn't know how else to proceed with this topic.
  - Wajahat Mehal imagined the person they would most wish to help would be someone genetically pre-disposed to MASH, who doesn't have health insurance, as well as barriers and asked how they can help this individual to get screened. He stated the previous recommendations would help this person with becoming aware of the disease but, this is about insurance and affordability. He believes that they won't be able to do anything related to insurance as a Working Group, but they may be able to do some sort of free screening.
  - Denise Dawson agreed with Wajahat Mehal and asked about recommendation four and if it will be covered by individuals' insurance or will it be provided freely.
  - Wajahat Mehal answered that screening currently is not part of the national guidelines, so someone's insurance won't cover them even if they have good insurance. He highlighted the differences between recommendation four which is for epidemiological reasons and the other aspect that includes the individual. They can cover both aspects. He stated that he would love to see a program where they go out into the community and screen individuals.

- Bubu Banini asked if at the statewide level, they might be able to work with manufacturers to donate equipment.
- Wajahat Mehal believes that stating the amount of funds that they need will be beneficial to do for recommendation four and could as well help with affordability as they would provide this screening for free.
- Elizabeth Conklin added that they can add an aspirational goal to the designated day recommendation by providing free screening in a high-risk area which could build further momentum.
- Wajahat Mehal believes that one of the jobs of the Working Group is to suggest people can come around.
- Andy Beltran added that a lot of there clients do end up using services like FQHCs and free clinics and asked if there is a way to incentivize screening in FQHCs and free clinics as well what would encompass the screening.
- Wajahat Mehal responded that the easiest way is to perform a fibro scan.
- Andy Beltran asked how they can incentivize a free clinic as they wouldn't do procedures themselves.
- Wajahat Mehal answered that they are incentivized to provide healthcare to their community. They could also provide referrals. He asked if he had something else in mind regarding incentives.
- Andy Beltran stated that the screening can be done in a free clinic, and he thought that when he meant screening, he meant a questionnaire.
- Wajahat Mehal answered that it would be an ultrasound test.
- Andy Beltran believes that Wajahat Mehal's van idea is the best so far.
- Wajahat Mehal stated that it doesn't have to be a van as the equipment is highly portable and that a free clinic donating a room for a day could be easier.
- Elizabeth Conklin asked if they should include school-based health centers.
- Wajahat Mehal stated that the recommendation being two staff members, equipment, a private room and somewhere where the patient can recline. He believes that screening children is harder as

you would need permission from their guardians.

- Elizabeth Conklin clarified that they could use the school-based health centers as facilities where they can organize the screening of the community.
- Wajahat Mehal asked if there are any screenings done on children in a school environment.
- Allison Giguere answered that they do vision and hearing screenings.
- Wajahat Mehal responded that this screening can be rolled into the screenings already being done. He stated that the recommendation would be to recommend a screening program which would be two full time employees and a fibro scan machine that can go to various facilities to provide free screening. He believes that the amount of funds needed won't be tremendous as they may potentially apply for federal grants and other avenues of funding.
- Bubu Banini added that she has been trying to raise money for a fibro scan machine for a couple years and she hasn't made much headway, but also that she doesn't live in Connecticut.
- Wajahat Mehal responded that even Connecticut doesn't try to raise money for these things and believes that the recommendations will make a world of difference. He stated that he and Bubu Banini can work on looking for federal grants for equipment.

V. Agree to have a finalized list by Dec 18th, which can be submitted to the Public Health committee.

VI. Announcement of Time and Date of Next Meeting

- Wajahat Mehal announced that the next meeting will occur on December 18<sup>th</sup> at 12:30 PM.

VII. Adjournment

- The meeting adjourned at 1:42 PM