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Connecticut Education Leaders Meet with Hospital Executives

On April 10, Connecticut Education Commissioner Stefan Pryor and Ramani Ayer, PhD, former Chairman and CEO of The Hartford Financial Services Group, Chair of the Hartford HealthCare Board of Directors, and Vice-Chair of the Connecticut Council for Education Reform, met with Connecticut hospital leaders at CHA to discuss education reform.

Not only is education a priority topic for Governor Dannel Malloy during the 2012 legislative session, but it is also an important subject for Connecticut hospitals, which are the largest or among the largest employers in their communities.

"Connecticut hospitals need a well-educated work force, particularly in the areas of science and math," said Kurt Barwis, President and CEO of Bristol Hospital and Chairman of the CHA CEO Forum. "Education is a healthcare issue."

Dr. Ayer agreed, noting that Connecticut has the largest achievement gap in the country and 40% of low-income students don't graduate. He presented a compelling case for education reform, illustrating how education reform is critical to the state's children, employee base, and the state's economy.

Commissioner Pryor and Dr. Ayer urged support from hospital leaders to restore Governor Malloy's original proposal for comprehensive education reform, which they say takes effective steps to address the achievement gap while raising academic outcomes for students in Connecticut. Governor Malloy's proposal enhances families' access to early childhood education; authorizes interventions to turn around the state's lowest-performing schools; expands the availability of high-quality school models like magnets and charters; removes red tape and other barriers to success; develops high-quality teachers and principals; and provides more resources to districts with the greatest need when they embrace reforms that position students for success.

"We need to begin as a state to recruit our best and brightest to teach and lead in our schools. We need to grow aspiring leaders," said Commissioner Pryor. "We can become a preeminent state when it comes to education."

Commissioner Pryor told the group that improving education would not only lead to a more skilled workforce, but would help attract and retain businesses in the state, reduce crime, enhance fiscal contributions from residents, and reduce healthcare costs—since, ultimately, education is a social determinant of health. Those who are educated are more likely to enjoy better long-term health and quality of life.

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CHA-Backed Bills Advance



On Wednesday, April 11, the Public Health Committee met and released [HB 5329](#), *An Act Concerning The Use Of Telepharmacy By Hospitals*. HB 5329, a [CHA-sponsored bill](#), would permit all of Connecticut's hospitals to participate in the telepharmacy initiative, originally established as a pilot program in 2011, on a permanent basis, provided the hospitals meet the same quality standards outlined in the original pilot and are in compliance with Department of Consumer Protection (DCP) pharmacy regulations. This is the second legislative committee to give approval of the legislative proposal. After unanimously approving the proposal, the bill was referred to the House for further action.

Also on Wednesday, the House and Senate met in session to debate and vote on a number of bills. The House session consisted of a series of votes to approve a number of Judicial and Executive nominations, with the balance of the 12-hour session being dedicated to passing the repeal of the death penalty, a bill passed by the Senate [last week](#).

The Senate took action on a number of bills of interest to hospitals and the healthcare community. Of note, the Senate amended, passed on consent, and sent to the House for further action [SB 252](#), *An Act Authorizing Flavoring Agents For Prescription Products*. The bill was [amended](#) to take into account CHA's [request](#) to allow pharmacists, acting on behalf of hospitals, to add flavoring agents to prescriptions. Also, the Senate passed and sent to the House [SB 99](#), *An Act Concerning Letters Of Protection*. SB 99 requires physicians and physical therapists to inform a patient whether they would provide care and treatment to such patient in return for a letter of protection guaranteeing payment from any settlement or judgment that may be received by the patient. Finally, the Senate referred to the Higher Education and Employment Advancement Committee [SB 78](#), *An Act Concerning The Learn Here, Live Here Program*, a bill originating in the Commerce Committee and [supported](#) by CHA.

It is expected that the House and Senate will meet twice next week, with more sessions scheduled as the General Assembly enters the final weeks of the 2012 Legislative Session. The 2012 Regular Session adjourns on Wednesday, May 9.

Nationally Recognized Experts Headline CHA Executive Summit

The 2012 CHA Healthcare Executive Summit, to be held April 23, will highlight provocative insights and practical ideas to address the key economic, market, and social drivers of change facing hospitals and healthcare systems. The summit will feature nationally recognized experts Leonard Greenhalgh, PhD, Professor of Management, Tuck School of Business at Dartmouth, and Andrew J. Majka, Managing Director and Chief Operating Officer, Kaufman, Hall & Associates.



Dr. Greenhalgh will present *Strategy for a Different Future: Minorities in the U.S. Economy*. Based on his extensive business and teaching experience, Dr. Greenhalgh will present the business case and chart a path for the full participation of minority businesses in the U.S. economy. He will explore the impact of demographic changes in America and why it's in the national interest to foster not only the survival, but the prosperity and growth of minority-owned businesses. This presentation will focus on what governments, corporations, and support organizations ought to be doing to foster minority inclusion and develop minority businesses that will fully contribute to our national prosperity and economic growth.

Mr. Majka will present *Industry Consolidation: Key Drivers, Transactional Trends and Market Implications*. He will highlight



the key drivers behind the changing trends in industry consolidation and market implications, identify new organizational core competencies that will be needed to build a successful business model, and discuss how those competencies will be evaluated by others considering merger and acquisition strategies. Discussion will include the leadership roles played by finance, operations, and physician management executives, as organizations evaluate these new relationships and work through critical transactions.

The CHA Healthcare Executive Summit will be held from 9:00 a.m. - 12:00 p.m. on April 23. For more information, click [here](#). To register, click [here](#).

CHA's Popular HCAHPS Learning Network to Hold Teleconference

On Wednesday, April 18, CHA, in partnership with the Health Research & Educational Trust (HRET) and the U.S. Agency for Healthcare Research and Quality (AHRQ), will present the teleconference, *Using HCAHPS Data Effectively*.

Carrie Brady, JD, MA, consulting for HRET, will present the teleconference. Ms. Brady is the author of *HCAHPS Basics: A Resource Guide for Healthcare Managers* (HCPPro, 2009) and co-author of book chapters on patient-centered quality and safety, and breaking down the barriers to patient-centered care.

The teleconference is part of CHA's three-month Patient Safety Learning Network curriculum. The program is focused on using the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey to improve quality, patient safety, and patient experience in Connecticut hospitals.

To date, 21 Connecticut hospitals have joined the HCAHPS Patient Safety Learning Network, which runs through June 6, 2012. More than 200 healthcare professionals from across Connecticut participated in the first teleconference.

The teleconference will be held from 9:30 a.m. - 11:00 a.m. on Wednesday, April 18, 2012. For more information, contact Alison Hong, MD, at hong@chime.org.

One-Year Delay Proposed for ICD-10

The Department of Health and Human Services proposed to delay implementation of the International Classification of Diseases, 10th Edition (ICD-10) by one year, because of government concern that healthcare providers would not meet a 2013 deadline. The new compliance date, October 1, 2014, will apply to both diagnosis and procedure codes.

Nearly 1,000 hospitals responded to a recent AHA member survey assessing ICD-10 Readiness. According to AHA, 70 percent of respondents thought that a short delay in ICD-10 compliance would be helpful, given the many competing initiatives, including health reform implementation and the adoption of electronic health records. Of those responding in favor of a delay, the majority indicated that a delay of no more than 12 months was needed.

The proposed rule will be published in the April 14 *Federal Register* and comments will be accepted for 30 days.

Report: How Physician Compensation is Evolving from Volume- to Value-Based Metrics

Historically, incentive-based compensation for physicians has consisted of base salary and incentive compensation based on productivity and/or volume-based metrics. But healthcare is changing, as both hospitals and physicians are charged with delivering better care for more people, at a lower cost. As such, the way in which physicians are being compensated is also changing.

Merritt Hawkins, a leading physician search firm that works with CHA's Shared Services Program, released the whitepaper, *Trends in Incentive-Based Physician Compensation*. The report describes evolving physician compensation models, and the factors that will have the most impact on compensation changes in the future.

If you would like a free copy of this report, contact Jeremy Robinson, Merritt Hawkins' Associate Director of Marketing, at 1-800-306-1330 or via e-mail at Jeremy.Robinson@MerrittHawkins.com.

