As healthcare undergoes significant transformation, hospitals and health systems are focused on providing the leadership necessary to ensure the health and well-being of every Connecticut resident. The four key aspirations for healthcare in Connecticut will be met when: individuals, communities, and the economy are healthy; quality and patient safety are paramount and patients are engaged in their care; providers, payers, community partners, and policy leaders are aligned; and healthcare financing is sustainable and linked to outcomes.

**Improve the Health of Our Communities**

**Building Blocks:**

- Reduce healthcare disparities and improve health equity
  - Address social determinants of health and reduce health disparities related to race/ethnicity, income, and disability
  - Support community partnerships that advocate for population health priorities, especially those that target social determinants of health
  - Foster care continuity through the use of technology and best practices

- Advocate for policies that improve women’s and children’s health

- Seek statutory and regulatory changes to support hospitals’ efforts to fight the coronavirus pandemic, including in the areas of immunity, hospital emergency preparedness, scope of practice and licensure

- Make permanent changes to telehealth law that improve access to care and utilize the full range of telehealth modalities, including the use of audio-only, for new and established patients, reimbursement at the same level as the in-person equivalent, and broad flexibility with respect to the physical location of both the patient and the physician or other practitioners

- Strengthen behavioral healthcare for children and adults
  - Enhance access to targeted mental health and substance use services during and after the pandemic by matching available resources to evolving needs
  - Promote a robust, patient-centered behavioral health service delivery system by preserving telehealth as an essential delivery method, using the full range of modalities, and reimbursing at the same level as in-person services
  - Address gaps in the funding of services to achieve seamless integration of treatment for individuals of all ages experiencing developmental and behavioral health disorders while addressing racial and social inequities that were exacerbated by the global pandemic
  - Fortify access to care by establishing reimbursement rates that better approximate the cost of care and are sufficient to recruit and retain providers of these services
  - Implement integrated service delivery models including medical, mental health, substance use, social, and residential needs by funding high-risk navigators for community care teams, recovery coaches, recovery support specialists, and intensive case managers
  - Support the creation of community-based psychiatric assessment centers with the capacity to evaluate and stabilize patients in the current behavioral health crisis, to improve access to care at the optimal level of care
Enhance Quality and Safety

Building Blocks:
- Coordinate federal and state requirements, as well as align regulatory oversight, through evidence-based practices and approaches that improve care
- Protect and strengthen the hospital infrastructure in Connecticut by ensuring a level playing field in care delivery through Certificate of Need and other regulations that recognize hospitals' unique role in the delivery system, and by preparing for new competitive entrants into the healthcare system
- Enhance statewide commitment to high quality care with zero events of avoidable harm, and satisfied, activated, and engaged patients; promote worker satisfaction and engagement through the cultivation of safe and supportive workplaces
- Support efforts to improve public health, including initiatives to ensure all individuals who are medically able are vaccinated, and reduce smoking and vaping
- Advocate for patients to receive advanced therapies in care settings close to home

Shape a Sustainable Performance-Based Reimbursement System

Building Blocks:
- Support care delivery models that are integrated, focused on optimal patient outcomes, and appropriately financed
- Support efforts to ensure a strong and sustainable commercial health insurance market in Connecticut
  - Ensure that consideration of coverage proposals, such as a public option or enhanced financial assistance for marketplace coverage, build on a commercial insurance foundation, while ensuring reimbursement that supports high-quality, integrated, and person-centered care
  - Reduce burdensome and wasteful administrative processes that harm patients and contribute to avoidable costs
- Support Connecticut’s current surprise billing law that protects patients from surprise billing and allows providers and insurers to negotiate payment rates for services provided after the patient is protected

Promote Transparency

Building Blocks:
- Support efforts that provide communities and patients with access to meaningful quality and pricing data

Ensure a Workforce for the Future

Building Blocks:
- Stabilize Connecticut’s medical malpractice liability environment
- Allow healthcare professionals to work to the full extent of their education and training
- Ensure hospitals have the ability to manage human resources appropriately to meet ever-changing patient care needs
- Develop and sustain a robust, highly trained, and culturally competent healthcare workforce, and strengthen the health careers pipeline to ensure that Connecticut has the workforce necessary to meet the needs of a rapidly changing healthcare system

Approved by the CHA Board of Trustees at its December 18, 2020 meeting

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