



**Connecticut Office of Health Strategy Testimony in Support of
House Bill 5020 – AA Implementing the Governor’s Budget Recommendations Regarding
Public Health**

Executive Director Victoria Veltri

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Good afternoon, Senator Abrams, Representative Steinberg, Senator Somers, Representative Petit and members of the Public Health Committee. I am Victoria Veltri, Executive Director of the Office of Health Strategy Health (OHS), and I’m here to testify in support of the Governor’s Public Health Implementer.

The General Assembly, in a strong bipartisan effort, established OHS in 2018 to centralize health policymaking, better coordinate existing state resources, and advance the reforms that will drive down healthcare costs; address our state’s deeply entrenched racial, economic, and gender health disparities; and undertake technology-driven modernization efforts.

Fundamental to everything we do is our mission to promote high-quality, affordable, and accessible healthcare for all of Connecticut’s residents. A healthy population creates value for employers, is necessary for a strong economy, and is key to a good quality of life. We have a truly collaborative relationship with a variety of partners, experts, consumers, and stakeholder groups that help us examine and address the barriers in Connecticut’s health system—cost, access, and outcomes.

Pursuant to [Conn. Gen. Stat. § 19a-755a\(b\)](#), OHS is tasked with the “administration of the all-payer claims database program (APCD) for the purpose of collecting, assessing and reporting health care information relating to safety, quality, cost-effectiveness, access and efficiency for all levels of health care”. OHS takes this responsibility seriously and, in the last year, has developed and implemented several key consumer-focused initiatives necessary to increase transparency in the cost of health care in Connecticut, and provide consumers with additional tools to use when deciding where to receive care. For example, we analyzed data available in the APCD to develop [HealthscoreCT](#), as required by [Conn. Gen. Stat. § 19a-755b](#), which compares the quality, price and cost of health care services in the state. In addition, OHS collaborated with the State’s Comptroller to develop a [Self-Sufficiency Standard](#), which provides crucial insight into the real

cost of living in towns and cities across Connecticut. OHS and OSC continue to work on this initiative, and expect to finalize its [Healthcare Affordability Standard](#) in the near future.

In addition to this important work, OHS also relies on the APCD for insight into its regulatory role overseeing the State's hospital and health care providers, including the Certificate of Need process. Finally, in [Executive Order Number 5](#), Governor Lamont directed OHS to develop and implement a cost growth benchmark to control the growth of the cost of health care in the State. The APCD is a crucial tool for OHS to be able to accomplish these important initiatives and therefore it is critical that there be a mechanism to support its costs going forward.

Section 7 of HB 5020 includes such a mechanism and empowers Access Health CT, the state's Health Insurance Exchange under the ACA, to include in its assessments of insurers offering qualified health plans an additional assessment to help fund the ongoing operation of the APCD. This proposal provides stakeholders with certainty about the future of the APCD and demonstrates the State's commitment to improving our healthcare system for everyone. As we continue to work on developing alternate payment and care delivery models that provide high quality, affordable care, maintaining the ability to analyze consumers' experiences with healthcare remains critical. The process for funding the APCD outlined in HB 5020 will provide stability for continued operation of this important work.

Thank you for this opportunity to discuss the Governor's proposed Public Health bill. I am happy to answer any questions.