

Attestations of Support

1. Lieutenant Governor Nancy Wyman
2. Access Health Analytics
3. Access Health CT
4. Aetna
5. American College of Physicians – Connecticut Chapter
6. Anthem Blue Cross Blue Shield
7. Bridgeport Child Advocacy Coalition
8. Cigna
9. City of Hartford HIV/AIDS Commission
10. Community Health Center Association of Connecticut
11. Community Health Center, Inc.
12. ConnectiCare
13. Connecticut Academy of Family Physicians
14. Connecticut Association for Healthcare at Home
15. Connecticut Association of Health Plans
16. Connecticut Association of School Based Health Centers
17. Connecticut Business Group on Health
18. Connecticut Center for Primary Care
19. Connecticut Health Foundation
20. Connecticut Hospital Association
21. Connecticut Institute for Primary Care Innovation
22. Connecticut Insurance Department
23. Connecticut League for Nursing
24. Connecticut Nurses' Association
25. Connecticut Nursing Collaborative Action Coalition
26. Connecticut Voices for Children
27. Cornell Scott Hill Health Corporation
28. Council on Medical Assistance Program Oversight (known as MAPOC)
29. Day Kimball Healthcare
30. Department of Children and Families
31. Department of Developmental Services
32. Department of Mental Health and Addiction Services
33. Department of Public Health
34. Eastern Area Health Education Center, Inc.
35. Fair Haven Community Health Center
36. Griffin Hospital
37. H. Andrew Selinger, MD
38. Hartford HealthCare Bone and Joint Institute
39. Hartford Healthcare Medical Group
40. Harvard Pilgrim Healthcare
41. HealthyCT
42. Khmer Health Advocates, Inc.
43. Northeast Business Group on Health
44. Norwalk Community Health Center
45. Office of Policy and Management
46. Office of the Nonprofit Liaison
47. Office of the State Comptroller

48. PATH Parent-to-Parent Family
Voices of Connecticut
49. Pitney Bowes, Inc.
50. ProHealth Physicians
51. Qualidigm
52. Quinnipiac University - Frank H.
Netter MD School of Medicine
53. SIM Consumer Advisory Board
54. St. Vincent's Health Partners
55. Stamford Hospital
56. StayWell Health Center
57. The Mohegan Tribe
58. UCONN School of Medicine Health
Disparities Institute
59. United Connecticut Action for
Neighborhoods
60. United Connecticut Family Services
61. United Way of Connecticut
62. UnitedHealthcare
63. Universal Health Care Foundation of
Connecticut
64. UCONN Center for Public Health
and Health Policy
65. UCONN Health Center
66. UCONN School of Pharmacy
67. University of Michigan Center for
Value Based Insurance Design
68. Western Connecticut Health
Network
69. Wheeler Clinic
70. Windham Regional Community
Council, Inc.
71. Women's Health Connecticut
72. Yale School of Medicine



Nancy Wyman

LIEUTENANT GOVERNOR
STATE OF CONNECTICUT

July 17, 2014

The Honorable Dannel P. Malloy
Governor
The State of Connecticut
State Capitol
210 Capitol Avenue
Hartford, CT 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

I am pleased to submit this letter of endorsement for Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI) to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

As you are more than familiar, Connecticut has been in the vanguard in the implementation of federal healthcare reforms designed to improve access to more affordable and higher quality healthcare for its residents. We have demonstrated leadership on a national scale in the successful implementation of initiatives funded under the Affordable Care Act. I have been honored to serve, at your request, both as the Chair of Connecticut's implementation of Access Health and as the Chair of the SIM Steering Committee. I am proud of our track record to date and am confident that our SIM initiative will be equally successful because of the collaboration between State Healthcare Advocate Victoria Veltri (Office of the Healthcare Advocate and SIM Program Management Office), Commissioner Roderick Bremby (Department of Social Services and our state's Medicaid Program and HIT office), Commissioner Jewel Mullen (Department of Public Health), and legislative partners.

Our Model Test application is the product of broad stakeholder engagement and commitment to innovation, including members of the Connecticut Hospital Association, Connecticut Association of Health Plans, Connecticut Business Group on Health, Connecticut Business and Industry Association, FQHCs, a wide range of consumer advocacy groups, behavioral health providers and members of the Connecticut General Assembly. Our Innovation Plan would not have been possible without cross-agency collaboration, including our state's academic institutions. Innovation partners have provided separate letters of support.

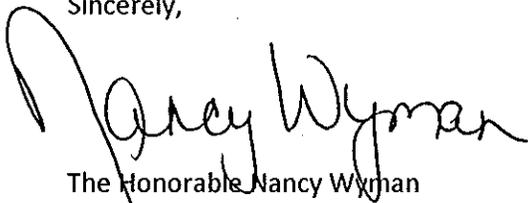
As described in the attached Model Test application, the SIM initiative provides the opportunity for Connecticut to build upon its momentum and align systems change efforts across payers, providers, and populations (Medicaid, CHIP, Medicare, and commercially insured) to accelerate value based principles

in care delivery and payment reform. The initiative will enable our state to address current barriers to quality primary care and prevention, while building a plan for improving our state's population health through novel approaches to community integration. It will empower consumers through the advancement of shared decision making, transparency of aligned quality measures and cost information, and removal of financial barriers to preventive care through value based insurance design. Consumers' experience of care will be measured and will matter.

Funds will be used to advance primary care practices to an accountable care delivery model based on whole-person-centered and team-based coordinated care, with evidence-based informed decision making and integration of clinical and community resources. Our primary care providers will be paid based on value, not volume, and will migrate toward shared savings payment arrangements with our state's payers. Our practice transformation glide path program, targeted technical assistance, learning collaboratives, and innovation awards will enable this advancement. We will make investments in our primary care workforce, leveraging medical and community health worker training programs to develop a workforce with the capacity to meet our state's healthcare needs. The SIM Model Test grant award will also provide Connecticut with strategic investments in health information technology needed to expand data collection, analytics, and reporting capacity at the state, practice, and consumer levels.

I appreciate your support of the work we have done and of Connecticut's Model Test application. I believe this grant proposal represents a significant opportunity to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,

A handwritten signature in black ink that reads "Nancy Wyman". The signature is fluid and cursive, with a large initial "N" and "W".

The Honorable Nancy Wyman
Lieutenant Governor
The State of Connecticut
State Capitol
210 Capitol Avenue
Hartford, CT 06106



Connecticut's Official Health Insurance Marketplace

280 Trumbull Street, 15th Floor
Hartford, CT 06103

July 18, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

All-Payer Claims Database (A PCD) was created by CT's House Bill # 5038, PA # 12-166, to receive PHI ("protected health information") data from various carriers via a state mandate, including public payer data like Medicare. The House Bill 13-247 moved APCD to be part of the Health Insurance Exchange in Connecticut known as Access Health CT (AHCT). AHCT created a division called Access Health Analytics (AHA) to focus on the planning, development and implementation of the APCD. This will be a large database from multiple payers, which can act as an anchor to create a centralized repository of other data sources – HIE, Master Provider Index, payer analytics/reports, provider analytics, care management and other intervention program metrics and analytics, and create other value added information like episode grouping, risk profile of patients, quality metrics derived from evidence based medicine, pharmacy utilization, etc. AHA brings in three types of strengths – historical claims data, connectivity keys based on members' identification which links disparate data from a variety of sources, and analytic capabilities. These three characteristics will be important for the success of the SIM project.

AHA is committed to supporting the SIM initiative. It is already part of the Steering Committee and will serve as a subject matter expert (SME) in all subcommittees. It will also play a large role in the HIT and Analytics space.

July 18, 2014
Page -2-

Our agency fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,

A handwritten signature in black ink that reads "T. Ahmed". The signature is written in a cursive style with a large, prominent initial "T".

Tamim Ahmed, PhD
Executive Director
Access Health Analytics



Connecticut's Official Health Insurance Marketplace

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

Dear Governor Malloy,

It is my pleasure to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

As the CEO of Access Health CT, the state's official health insurance Exchange, I am acutely aware of the need for continued innovations in our state to improve access to quality healthcare services, produce better healthcare outcomes and reduced costs. Specifically, Accountable Care Organizations, Patient-Centered Medical Homes, and outcomes, value-based reimbursement provide rich opportunities for Connecticut. Such models as the Geisinger Clinic and Virginia Mason Hospital in Seattle prove that collaborative, data-driven, evidence-based care can improve quality and lower costs.

Connecticut's Office of the Healthcare Advocate and our SIM workgroup have been very thoughtful about providing practical, actionable solutions to improve the quality and efficiency of the patient experience in Connecticut. Access Health CT is proud to support our SIM application, and we are fully committed to its success.

Sincerely,

A handwritten signature in blue ink, appearing to read "Kevin Counihan". The signature is fluid and cursive, with a long horizontal stroke at the end.

Kevin Counihan
CEO
Access Health CT



Martha Temple
President, New England Region
151 Farmington Ave, RWAB
Hartford, CT 06156
860-273-3565

July 14, 2014

The Honorable Dannel P. Malloy
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

As you know, Aetna is headquartered here in Connecticut and is one of the nation's leading diversified health care benefits companies, serving an estimated 44 million people, including over 400,000 Connecticut residents, with information and resources to help them make better informed decisions about their health care. Aetna is dedicated to improving the quality of health care, restraining consumer costs, and delivering maximum member value. Aetna is the foremost industry pioneer driving innovation in health care delivery, financing, and system reform – including innovations in consumer price and quality transparency, consumer-directed care, wellness, prevention, and population health. Aetna is also a leader in advancing integrated value-based products as successors to outmoded fee-for-service models – including value-based insurance design (VBID), patient-centered medical homes (PCMHs), and accountable care organizations (ACOs).

Therefore, we share Connecticut's SIM vision to:

- Establish primary care as the foundation of a care delivery system that is patient and family centered, coordinated, and evidence driven, and which rewards value over volume.
- Increase focus on prevention, population health and integration with community resources.
- Achieve a whole-person-centered health care system that improves community health and eliminates health inequities; ensures superior access, quality, and care experience; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs.

Aetna has internal subject matter experts actively serving on the various SIM workgroups including the Equity & Access Council, the Quality Council and the Practice Transformation Taskforce. In addition, with a subject matter expert serving as the insurance industry representative on the Advisory Committee of Connecticut's All Payer Claims Database (APCD), Aetna has been especially active in its formation. The APCD will help inform the SIM of various strategies, including on population health.

We look forward to a continued active participation in the development of the various committees' work plans, including:

- The development of a common quality and care experience measures and a common performance scorecard that provides carriers' with sufficient implementation flexibility.
- The identification of methods to monitor and protect against under-utilization and patient selection.
- The development of a shared savings program (SSP) arrangements similar to those employed in the Medicare SSP and which gives carriers and providers the flexibility to determine the specific terms.
- The development of multi-payer Advanced Medical Home standards that will support primary care practices undergoing transformation.

Aetna supports the outstanding work of the SIM Program Management Office in its efforts to secure CMMI funding that builds on the marketplace's existing efforts to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in cursive script that reads "Martha R. Temple".

Martha Temple
President



Robert J. Nardino, MD, FACP
Governor, ACP

CONNECTICUT CHAPTER

July 10, 2014

The Honorable Dannel P. Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

The American College of Physicians (ACP) is a diverse community of internal medicine specialists and subspecialists united by a commitment to excellence. Internists apply scientific knowledge and clinical expertise to the diagnosis, treatment and compassionate care of adults across the spectrum from health to complex illness. With 137,000 members, including 2100 in the State of Connecticut, ACP is the largest medical-specialty society in the world. ACP and its physician members lead the profession in education, standard-setting, and the sharing of knowledge to advance the science and practice of internal medicine.

ACP shares Connecticut's vision to establish primary care as the foundation of a care delivery system that is consumer and family centered and which rewards value over volume. We support an increasing focus on prevention, population health and integration with community resources. Through these efforts, we can achieve a whole-person-centered health care system that improves community health and eliminates health inequities; ensures superior access, quality, and care experience; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs.

We support helping primary care practices become Advanced Medical Homes, the core elements of which include whole-person centered care, enhanced access, population health management, team-based coordinated care, and evidence-based informed clinical decision making. SIM test grant funding provides the opportunity to invest in this critical component of our health care system. The AMH glide path, targeted technical assistance and innovation awards programs will provide many primary care providers with the opportunity to transform their practices.

We are fully committed to quality measure alignment among Connecticut's payers. We will actively participate in the SIM Quality Council in support of common quality and care experience measures and a common performance scorecard. This is an important innovation that will better focus the efforts of providers and reduce administrative burden.



Robert J. Nardino, MD, FACP
Governor, ACP

CONNECTICUT CHAPTER

Finally, we support the transition to value-based payment methods similar to the Medicare Shared Savings Program, which will help drive a much needed change in focus from volume to value. Use of new data aggregation and analytic tools will help providers succeed in this new environment. We recognize the importance of provider involvement throughout the planning and implementation process and pledge our continued participation and engagement.

ACP fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Nardino MD', is positioned above the typed name.

Robert J. Nardino, MD, FACP
Governor, Connecticut Chapter
American College of Physicians

Jill Rubin Hummel
President
www.anthem.com

Anthem Blue Cross and Blue Shield
108 Leigus Road
Wallingford, CT 06492
Tel 203-677-8170
jill.hummel@anthem.com



July 16, 2014

The Honorable Dannel P. Malloy
Governor of Connecticut
210 Capitol Avenue
Hartford, CT 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

On behalf of Anthem Blue Cross and Blue Shield (Anthem), I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application, which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

As the largest health insurer in the state with more than 75 years of local experience, it is Anthem's mission to improve our members' health and their access to health care, while also addressing the underlying drivers of rising health care costs.

Because we know that half of Connecticut residents suffer from a chronic disease that can have a significant impact on the quality of their life - and which accounts for 75% of all health care spending - Anthem has developed market-leading health and wellness programs and collaborated with primary care providers to create the largest patient-centered initiative of its kind in Connecticut. Our Enhanced Personal Health Care program, launched in 2013, has more than 1,500 primary care physicians in CT participating, or more than 50% of our primary care network. The program is focused on preventive care, chronic condition management, medication adherence, and avoidable emergency room utilization and is well aligned with the SIM Proposal.

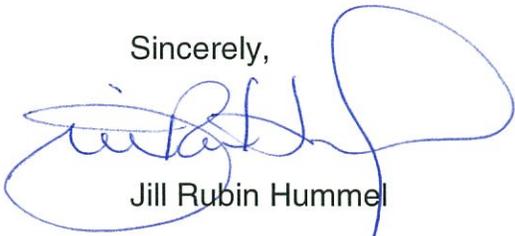
Our Enhanced Personal Health Care program allows us to maximize collaboration with our provider network. Some important elements of this program include: actionable data transfer, so physicians can better manage the health care of their patients; care management tools; and transformation resources. A central facet of this program is payment redesign, moving from payment based on volume to payment based on value. Practices are reimbursed for care coordination activities and also have an opportunity to earn shared savings upon reaching quality targets.

Anthem is focused on provider collaboration models and believes this joint approach focused on implementing innovative opportunities will change health care. We are committed to quality measure alignment among Connecticut's payers. We are pleased to be participating in the SIM Quality Council in support of a developing common quality and care experience measures and a common performance scorecard. We recognize the importance of value-based payment methods and we will participate in both the Equity and Access Council and Practice Transformation Council in order to align efforts and create standards for a successful multi-payer Advanced Medical Home model.

Finally, we recognize the importance of Value-based Insurance Design (VBID) to ensure consumer engagement in health improvement and we are committed to developing and offering such programs to our customers. We are also interested in contributing to the body of knowledge regarding what VBID strategies seem to have the greatest impact on quality, health status and cost and how a patient's relationship with a primary care provider who has adopted patient centered principles of care may impact the effectiveness of these benefit designs. Towards that end, we are in the process of developing a study proposal that would explore the effectiveness of VBID and patient centered care models, alone and in concert, and hope to leverage the results of this research under the programs implemented by virtue of the SIM grant.

Anthem has partnered with the State of CT on healthcare initiatives and serves as a carrier for the State's employee health benefits. In addition, Anthem was the only established Connecticut insurance company to participate in both the Individual Exchange and Small Group (or "SHOP") exchange in 2014 and we are pleased to have re-signed for next year. We recognize and value the opportunity that SIM provides to invest in and develop the primary care foundation for Connecticut's healthcare system. We fully support the work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable health care that produces better outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,



Jill Rubin Hummel

cc: Lieutenant Governor Nancy Wyman
Victoria Veltri, Office of the Healthcare Advocate



2470 Fairfield Avenue
Bridgeport, CT 06605
T: 203.549.0075
F: 203.549.0203

bcacct.org

July 16, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

Please accept this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI). I believe that this grant proposal describes an innovative approach to reforming the healthcare system in Connecticut.

The Bridgeport Child Advocacy Coalition is a coalition of organizations, parents, and other concerned individuals committed to improving the well-being of Bridgeport's children through research, education, advocacy, and mobilization. We have been a leader in the healthcare reform movement in Connecticut, mobilizing parents to advocate for better access to healthcare, and advocating for system changes that will improve the health of our children and families. Not only do we assist families obtain safety net services for which they qualify, but we also host meetings of community health workers from throughout the State to share information about HUSKY (Connecticut's state healthcare insurance). Through these meetings, we have been able to educate the health care community about the program, identify system problems through our discussions, and work with state officials to implement feasible solutions. Working collaboratively is inherent in everything that we do as an organization.

Connecticut currently ranked as one of the highest in per capita expenditures for healthcare in the country. The current economic model is not sustainable and escalating costs will make it even more difficult for our families to achieve health equity. This grant includes a unique proposal to begin to change the culture of how we approach our health, use the healthcare system, and how that healthcare is delivered in Connecticut. We concur that changes are needed to our healthcare delivery system. Yet at the same time, we must continue to protect those who are most vulnerable in our society, especially our children.

Even though much of the details for implementing this grant have yet to be formulated, I am pleased that consumer and advocate concerns regarding the process have been considered. The State's commitment to an inclusive, deliberative, and transparent process for developing the implementation details is a positive result of our ongoing discussions. As a member of the Steering Committee, I look forward to continuing to be a part of the team that is developing a program that will work for Connecticut.

Regards,

A handwritten signature in black ink that reads 'Robin Lamott Sparks'. The signature is written in a cursive, flowing style.

Robin Lamott Sparks
Senior Director, Policy and Research

Donald M. Curry
President/General Manager
New England Region



Two College Park Drive
Hooksett, NH 03106
Don.curry@cigna.com
603-268-7774

July 11, 2014

The Honorable Dannel P. Malloy
Governor, State of Connecticut
State Capitol
210 Capitol Avenue, Room 200
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

Cigna is pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application that is being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

Connecticut is a key priority state for Cigna in terms of growth, community presence and partnerships. As you know, our corporate headquarters are located in Bloomfield and we have almost 5,000 employees working in the state – making Connecticut our 2nd largest site globally. In addition to administering the medical plans for a diverse client base and offering fully insured coverage in the individual and large group markets in Connecticut, Cigna is proud to partner with the State of Connecticut through the State Employee Dental Plan. As such, we are an active and engaged stakeholder in Connecticut's efforts to implement the Affordable Care Act (ACA) and the practice transformation and quality improvements envisioned as part of the State Innovation Model (SIM) Grant Application. We welcome a continued dialogue and hope to remain active participants in the planning discussion moving forward.

As has been demonstrated throughout the implementation of the ACA, Cigna has not only embraced a value-centered philosophy, but has acted upon it. We have made substantial investments in our Collaborative Accountable Care models, which combine elements of the accountable care organization (ACO) and medical home models envisioned under SIM and the carriers are experienced leaders in supporting provider practices that have demonstrated their commitment to transforming into high value and efficient primary care settings that employ care teams and practice population management. Cigna has several ACO relationships throughout Connecticut, including the Greenwich Physicians Association, Integrated Care Partners/Hartford Healthcare, New Haven Community Medical Group, ProHealth Physicians, Inc., Saint Francis HealthCare Partners and others. As such, we are very supportive of any SIM elements that build upon these efforts without compromising any of the programs or standards we have already implemented.

July 11, 2014

Cigna shares Connecticut's vision to establish primary care as the foundation of a care delivery system that is consumer and family centered, team based, coordinated, and evidence driven, and which rewards value over volume. We support an increasing focus on prevention, population health and integration with community resources. Through these efforts, we can achieve a whole-person-centered health care system that improves community health and eliminates health inequities; ensures superior access, quality, and care experience; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs.

We are committed to applying our best efforts to align quality measures among Connecticut's payers. We will actively participate in the SIM Quality Council in support of developing common quality and care experience measures and a common performance scorecard. This is an important innovation that will better focus the efforts of providers and reduce administrative complexity. We will make provider performance information available to our enrollees so that they can consider this information in making their healthcare decisions.

Cigna also recognizes the importance of value-based payment methods that hold primary care providers accountable for quality, care experience and total cost of care. We support applying our best efforts to financially align with other payers in the adoption of shared savings program (SSP) arrangements similar to those employed in the Medicare SSP. Where feasible we intend to use Connecticut's common quality and care experience performance measures in determining whether and to what extent our providers qualify for shared savings. We will also participate in the Equity and Access Council and undertake methods to monitor and protect against under-service and patient selection.

Finally, Cigna will participate in the development of multi-payer Advanced Medical Home standards and will support primary care practices undergoing transformation where feasible. We recognize the enormous opportunity that SIM provides to invest in and develop the primary care foundation for Connecticut's health care system.

Cigna fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,



President/General Manager
New England Region
Cigna



July 14, 2014

The Honorable Daniel Malloy

Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

- The Hartford HIV/AIDS Commission is committed to advocating for administrative and legislative reforms supported by our body pertaining to HIV/AIDS for all persons living with and affected by HIV/AIDS before local, state and federal agencies. We promote the availability of services needed by this community and support the development and coordination of governmental and non-governmental agencies and organizations having kindred functions. We seek to contribute to and enhance agendas established that strengthen the lives persons of this community.
- We wholeheartedly embraces improving access to quality healthcare equity in the variety of service needs dictated by HIV/AIDS and consumers overall. We seek to improve availability and the establish a positive overall care experience by moving provider reimbursement from FFS to value based payment; augmenting consumer participation and know-how by empowering consumers through value based insurance design; making cost, quality, and performance data a seamless effort to consumers; improving population health, reducing costs associated with preventing hospitalizations and emergency room visits.
- As representatives of this and the larger consumer community we:
 1. Support provider representation in SIM governance via works of the Steering Committee.
 2. Support provider participation in Workgroups; Quality, Practice Transformation, Equity & Access.
 3. Support Advanced Medical Home standards, targeted technical assistance, Innovation Awards.
 4. Support value based payment reforms tied to common scorecard and care experience.
 5. Support data aggregation necessary for consumer transparency.

The Hartford HIV/AIDS Commission fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

Alice Nelson Ferguson
Chair, Hartford Commission on HIV/AIDS



Community Health Center Association of Connecticut

100 Great Meadow Road, Suite 400 • Wethersfield, CT 06109
860.667.7820 • Fax 860.667.7835 • www.chcact.org

July 3, 2014

The Honorable Dannel P. Malloy, Governor
210 Capitol Avenue
Hartford, CT 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

The Community Health Center Association of Connecticut (CHCACT), on behalf of its thirteen member Federally Qualified Health Centers (FQHCs), supports the State of Connecticut's application to the Center for Medicare and Medicaid Innovation (CMMI) for a State Innovation Model (SIM) Test Grant. CHCACT appreciates and is committed to Connecticut's plan for health care innovation expressed in the proposal.

CHCACT works closely with FQHC providers to improve the health of over 340,000 state residents on both the individual and population levels. Over 200,000 FQHC patients are Medicaid enrollees. FQHCs by mission, by design and pursuant to federal law, provide high-quality, comprehensive, culturally-sensitive health care to all people, regardless of ability to pay. In addition to improving *access to care*, FQHCs enhance health equity by providing person-centered care, including wrap-around social services that improve people's ability to get and stay healthy.

While FQHCs can and do innovate, the State has a unique role in providing support and coordination of efforts, developing structures for sharing data and bringing together stakeholders to consider reforms. State policy influences payment and service delivery at every level of the health care system, as well as the adequacy and training of the health care workforce.

SIM will allow Connecticut to develop a high-value, integrated plan for delivery system transformation and payment reform. This type of reform requires full stakeholder participation – government, consumers, providers, payers, employers and community members – throughout the process of development and implementation. CHCACT and the FQHCs were pleased to actively participate in this process, through representation on the SIM Steering Committee and related task forces/workgroups.

Two key SIM initiatives will work in tandem and are critical to improving population health in the communities served by FQHCs-- the Teaching Health Center Initiative and the Advanced Medical Home. Both initiatives build on existing successes and leverage the resources necessary to provide the workforce and enhance the FQHC infrastructure to transform the delivery system and manage the total cost of care.

Federal support and local collaboration can help achieve the vision of improved well-being of all Connecticut residents. Connecticut's FQHCs look forward to continuing to work with you towards improved health across Connecticut through the SIM process.

Sincerely,

Evelyn Barnum, J.D.
Chief Executive Officer

Cc: Lt. Governor Nancy Wyman
Dr. Mark Schaefer, Director, SIM Program Management Office



Administrative:
635 Main Street
Middletown, CT 06457
860.347.6971

Locations:

CHC of Bristol
395 North Main Street
Bristol, CT 06010
860.585.5000

CHC of Clinton
114 East Main Street
Clinton, CT 06413
860.664.0787

CHC of Danbury
8 Delay Street
Danbury, CT 06810
203.797.8330

CHC of Enfield
5 North Main Street
Enfield, CT 06082
860.253.9024

CHC of Groton
481 Gold Star Highway
Groton, CT 06340
860.446.8858

CHC of Meriden
134 State Street
Meriden, CT 06450
203.237.2229

CHC of Middletown
675 Main Street
Middletown, CT 06457
860.347.6971

CHC of New Britain
85 Lafayette Street
New Britain, CT 06051
860.224.3642

CHC of New London
One Shaw's Cove
New London, CT 06320
860.447.8304

CHC of Old Saybrook
263 Main Street
Old Saybrook, CT 06475
860.388.4433

CHC of Waterbury
51 North Elm Street
Waterbury, CT 06702
203.574.4000

Day Street CHC
49 Day Street
Norwalk, CT 06854
203.854.9292

Franklin Street CHC
141 Franklin Street
Stamford, CT 06901
203.969.0802

www.chc1.com

Facebook/CHCInc
Twitter@CHCConnecticut

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

Since 1972, Community Health Center, Inc. has been one of the leading healthcare providers in the state of Connecticut, building a world-class primary health care system committed to caring for uninsured and underinsured populations. CHC is focused on improving health outcomes for its more than 130,000 patients as well as building healthy communities. Currently, CHC delivers services in over 200 locations statewide, offering primary care in medical, dental, and behavioral health services.

CHC, Inc. is a leader in the field of innovation with involvement in Project ECHO, retinopathy screening, electronic health records, E-consults, and care coordination. CHC is one of the first community health centers in the nation to replicate the Project ECHO program, which provides patients with the most advanced treatments for a variety of illnesses that might otherwise require consultation with a specialist. We recognize the hurdles our patients encounter in getting to an appointment, and we are working to remove those so that all patients are able to receive the care they need and deserve. We believe that this effort, in addition to our commitment to care coordination will greatly help our patients avoid preventable hospitalizations.

As Connecticut's largest Federally Qualified Health Center (FQHC), we are prepared to work in partnership with the CT SIM team. This will include active participation in the SIM governance or steering committee, as appropriate, including participation in workgroups on quality and practice transformation initiatives. As Connecticut's only state-wide primary-care practice that is PCMH designated both by the Joint Commission and NCQA, we take seriously the commitment to the standards outlined in the State's Innovation Model. We are excited about the State's commitment to value-based payment reforms tied to common score card and care experience. This will help improve the health outcomes of our patients. Finally, we recognize the importance that data-aggregation plays in implementing the SIM initiative; not only for its impact on patients, but also for consumer transparency.



Serving underserved and uninsured patients at Connecticut's largest network of community health centers.

Community Health Center, Inc. fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in black ink, appearing to read 'Mark Masselli', written in a cursive style.

Mark Masselli
President/CEO



Administrative:

635 Main Street
Middletown, CT 06457
860.347.6971

Locations:

CHC of Bristol

395 North Main Street
Bristol, CT 06010
860.585.5000

CHC of Clinton

114 East Main Street
Clinton, CT 06413
860.664.0787

CHC of Danbury

8 Delay Street
Danbury, CT 06810
203.797.8330

CHC of Enfield

5 North Main Street
Enfield, CT 06082
860.253.9024

CHC of Groton

481 Gold Star Highway
Groton, CT 06340
860.446.8858

CHC of Meriden

134 State Street
Meriden, CT 06450
203.237.2229

CHC of Middletown

675 Main Street
Middletown, CT 06457
860.347.6971

CHC of New Britain

85 Lafayette Street
New Britain, CT 06051
860.224.3642

CHC of New London

One Shaw's Cove
New London, CT 06320
860.447.8304

CHC of Old Saybrook

263 Main Street
Old Saybrook, CT 06475
860.388.4433

CHC of Waterbury

51 North Elm Street
Waterbury, CT 06702
203.574.4000

Day Street CHC

49 Day Street
Norwalk, CT 06854
203.854.9292

Franklin Street CHC

141 Franklin Street
Stamford, CT 06901
203.969.0802

www.chc1.com

Facebook/CHCInc
Twitter/@CHCConnecticut)

July 17, 2014
The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI). I am speaking from my perspective as an APRN/Family Nurse Practitioner, primary care provider, and executive leader in one of the country's largest community health centers. In my role as Senior VP/Clinical Director, I have had the opportunity to develop the country's first post-graduate NP Residency Training Program, now replicated in many FQHCs across the country, and designed specifically to train new NPs to both the clinical complexity of care, and to a model of transformative health care. This SIM application speaks directly to creating the transformed health care system for which we are preparing the next generation of primary care providers—physicians and nurse practitioners alike---and we need to make this transformation happen.

Since 1972, Community Health Center, Inc. has been one of the leading healthcare providers in the state of Connecticut, building a world-class primary health care system committed to caring for uninsured and underinsured populations. CHC is focused on improving health outcomes for its more than 130,000 patients as well as building healthy communities. Currently, CHC delivers services in over 200 locations statewide, offering primary care in medical, dental, and behavioral health services.

CHC, Inc. shares Connecticut's vision to establish primary care as the foundation of a care delivery system that is consumer and family centered and which rewards value over volume. We support an increasing focus on prevention, population health and integration with community resources. Through these efforts, we can achieve a whole-person-centered health care system that improves community health and eliminates health inequities; ensures superior access, quality, and care experience; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs.

We support helping primary care practices become Advanced Medical Homes, the core elements of which include whole-person centered care, enhanced access, population health management, team-based coordinated care, and evidence-based informed clinical decision making. SIM test grant funding provides the opportunity to invest in this critical component of our health care system. The AMH glide path, targeted



technical assistance and innovation awards programs will provide many primary care providers with the opportunity to transform their practices.

We are fully committed to quality measure alignment among Connecticut's payers. We will actively participate in the SIM Quality Council in support of common quality and care experience measures and a common performance scorecard. This is an important innovation that will better focus the efforts of providers and reduce administrative burden.

Finally, we support the transition to value-based payment methods similar to the Medicare Shared Savings Program, which will help drive a much needed change in focus from volume to value. Use of new data aggregation and analytic tools will help providers succeed in this new environment. We recognize the importance of provider involvement throughout the planning and implementation process and pledge our continued participation and engagement.

Community Health Center, Inc. fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in black ink, appearing to read "Margaret Flinter". The signature is fluid and cursive, with a large initial "M" and a distinct "F".

Margaret Flinter, APRN, PhD, C-FNP, FAAN, FAANP
Senior Vice President; Clinical Director
Community Health Center, Inc.

July 10, 2014

The Honorable Dannel Malloy
Governor
State of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

I am writing on behalf of ConnectiCare Inc. and its affiliated companies (collectively, "ConnectiCare") in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

ConnectiCare was founded in 1981 with the mission of improving the health of its members. Today, as one of the top-ranked health plans in the United States, ConnectiCare continues to further its mission by providing excellent service and products to more than 275,000 members in Connecticut and Western Massachusetts. ConnectiCare is located in Farmington, Connecticut. Our more than 600 employees live and work in the local communities that we are privileged to serve.

ConnectiCare's deep local roots and community commitment drive all that we do and benefit all whom we serve. ConnectiCare offers health insurance products that are the choice of a broad range of entities - from small businesses to large companies to hospitals to municipalities across the State. We take great pride in developing and implementing strategies, initiatives and programs that facilitate our customers' access to health care services. ConnectiCare's current suite of health insurance offerings includes health savings accounts, Medicare Advantage products, large and small group products, and individual products both on and off the Connecticut Exchange. While addressing the present, we also maintain a focus on the future by continually developing new products to meet the changing needs and demands of our customers.

Care Management Solutions, Inc. (CMSI), a ConnectiCare affiliate, currently is pleased to be the administrator of the State of Connecticut Health Enhancement Program (HEP). The HEP represents a collaboration among the State Employee Bargaining Agent Coalition (SEBAC), the Office of the State Comptroller and ConnectiCare. CMSI is administering a Value Based Insurance Design (VBID) that was developed by SEBAC and the Office of the State Comptroller. The goal of the HEP is to decrease healthcare costs and to improve participants' health status through engaging State employees and their dependents in their health and wellness, with an emphasis on primary care services and improving care coordination among healthcare practitioners and facilities.

Successful VBID programs align incentives to encourage the right service at the right time and in the right place while adhering to appropriate treatment and encouraging healthy lifestyles. The HEP has two components: (1) preventive care; and (2) chronic condition education and counseling. The HEP's preventive care component is designed to motivate employees and their family members to get age/gender appropriate wellness exams and screenings (e.g., colorectal cancer screening, Pap test, vision exam). The HEP's chronic condition component supports individuals with one of seven qualifying chronic conditions to appropriately access healthcare services by means of such incentives as waiver of co-pays for certain doctor visits and prescription medications. In 2013 there were 122,654 participants enrolled in the HEP, with a 96% overall compliance rate with the HEP performance standards.

ConnectiCare has a long track record of supporting reforms and innovations aimed at improving the healthcare delivery system throughout the State of Connecticut. We work to enhance the patient care experience and to improve population health through innovative partnerships with practitioners and facilities that focus on quality, efficiency and cost effectiveness. We continue to explore payment reform methodologies and innovation structures that promote accountable care, patient centered primary care, and behavioral health integration. We embrace the concept of developing medical home standards and cross-payer analytics that support the health insurance industry's current efforts.

By means of this letter, ConnectiCare is declaring its support for the *Connecticut State Innovation Model Test*. Specifically, ConnectiCare is committed to:

- Work with the SIM Steering Committee and other stakeholders in the State towards a goal of achieving better alignment of payment and contracting strategies that reward value over volume;
- Explore value-based benefit designs that meet the needs of our customers ;
- Offer alternative risk-based reimbursement models that may include shared savings program (SSP) arrangements similar to those employed in the Medicare SSP, pay for performance, and global or capitated payments designed to meet the needs of our customers and provider partners;
- Work to align reimbursement with nationally recognized quality and other performance measures;
- Continue to work with our plan sponsors, customers and provider partners to address their data needs; and
- Continue to explore the development of a common scorecard that incorporates both quality outcomes and care experience, and that serves as a mechanism to measure provider performance.

ConnectiCare has been an active and engaged participant in the formation of the All Payer Claims Database (APCD) designed to assist consumers with information regarding cost and quality of healthcare services so that consumers can make informed decisions. The goal of the APCD is to help inform population health strategies for the improvement of the overall well-being of Connecticut residents. ConnectiCare has dedicated, and will continue to dedicate, time, personnel and resources toward the success of the APCD.

The Honorable Dannel Malloy

July 10, 2014

Page | 3

ConnectiCare is an active and engaged stakeholder in Connecticut's efforts to implement the federal Patient Care and Affordable Care Act (ACA) as well as in the practice transformation and quality improvements envisioned as part of the State Innovation Model (SIM) Grant Application. Representatives from ConnectiCare currently participate on the Practice Transformation Workgroups as well as on the Quality Council.

Because of its mission, history, location and business vision, ConnectiCare supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding for activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all the residents of the State of Connecticut.

Sincerely,

A handwritten signature in black ink, appearing to read "M. R. Wise".

Michael R. Wise

President

ConnectiCare, Inc. and Affiliated Companies



CONNECTICUT ACADEMY OF
FAMILY PHYSICIANS
CARING FOR CONNECTICUT'S FAMILIES

Mark Schaefer, PhD.
Office of the Healthcare Advocate
ATTN: Healthcare Innovation
PO Box 1543
Hartford, CT 06144

July 18, 2014

Dear Dr. Schaefer,

The Connecticut Academy of Family Physicians applauds Connecticut's pursuit of the SIM initiative. We believe in and support many of the concepts of the SIM grant such as its emphasis with primary care, practice transformation, coordinated patient-centered care, enhanced access, and population management. This important initiative will require continued, extensive work by many stakeholders in order to achieve the necessary transformations across our healthcare delivery system which the SIM initiative is envisioned to accomplish. As an essential, foundational stakeholder group, Connecticut's family physicians are deeply invested in seeing these system changes come to fruition for the sake of our patients and communities. We commit to continue to offer our assistance to you through our ongoing support from those family physicians participating with the SIM Workgroups and Taskforces, as well as any further, future involvement of our members which can help to define and shape the SIM initiative's programs more precisely. Please continue to ask the CAFP for such assistance as the process continues.

Sincerely,

Edmund Kim, M.D.
President
Connecticut Academy of Family Physicians



July 9, 2014

The Honorable Dannel P. Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

The Connecticut Association for Healthcare at Home represents 60 Connecticut DPH licensed/Medicare certified home health and hospice agencies that foster cost-effective, person-centered healthcare in the setting people prefer most – their own home. Collectively, our agency providers deliver care to more CT residents each day than those housed in CT hospitals and nursing homes combined. As a major employer with a growing workforce, our on-the-ground army of 17,000 home health care workers is providing high-tech and tele-health interventions for children, adults and seniors.

The Association shares Connecticut's vision to establish primary care as the foundation of a care delivery system that is consumer and family centered and which rewards value over volume. We support an increasing focus on prevention, population health and integration with community resources. Through these efforts, we can achieve a whole-person-centered health care system that improves community health and eliminates health inequities; ensures superior access, quality, and care experience; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs.

We support helping primary care practices become Advanced Medical Homes, the core elements of which include whole-person centered care, enhanced access, population health management, team-based coordinated care, and evidence-based informed clinical decision making. SIM test grant funding provides the opportunity to invest in this critical component of our health care system. The AMH glide path, targeted technical assistance and innovation awards programs will provide many primary care providers with the opportunity to transform their practices.

We also applaud the proposed Community and Clinical Integration Program. This program will offer targeted technical assistance and Innovation Awards to spur investments and accelerate advancement in community linkages with social service (e.g., housing, food assistance), home health, long term supports and services (LTSS), and preventive health providers; "hot spotting" models of integrated care; and integrated behavioral health.

Finally, we support the transition to value-based payment methods similar to the Medicare Shared Savings Program, which will help drive a much needed change in focus from volume to



CONNECTICUT ASSOCIATION FOR
HEALTHCARE AT HOMESM

value. We recognize the importance of provider involvement throughout the planning and implementation process and pledge our continued participation and engagement.

The Association fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

Deborah R. Hoyt
President & CEO
Connecticut Association for Healthcare at Home



Quality is Our Bottom Line

July 18, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

The Connecticut Association of Health Plans (CTAHP) and its member companies, Aetna, Anthem, Cigna, ConnectiCare, United, and Harvard Pilgrim, are pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application that is being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

CTAHP represents all of the major health insurance carriers in the state as well as the 2 million plus members that they serve. Connecticut's carriers range from large national companies, to those whose primary focus is Connecticut specific and the Association is inclusive of both for-profit and not-for-profit organizations.

Aetna is a national carrier active in all commercial lines and Medicare with their home base in Connecticut. Likewise, Cigna is also a national carrier that calls Connecticut home and participates in the Connecticut state employee dental program. Anthem and United both currently serve as the medical carriers to the state employee health care program. In addition, Anthem serves as a participating carrier in the individual Exchange market and both Anthem and United serve as participating carriers on the small group Exchange. ConnectiCare, a locally owned and operated health plan, has a strong presence in the state in both the individual and small group markets and also participates on the individual Exchange. Harvard Pilgrim, a large not-for-profit organization out of neighboring Massachusetts and new entry to the Connecticut market, joined the Association last year and is an valued member of our group. The Association, and its member companies, are pleased to be active and engaged stakeholders in Connecticut's efforts to implement the Affordable Care Act (ACA) and the practice transformation and quality improvements envisioned as part of the State Innovation Model (SIM) Grant Application. We welcome a continued dialogue and hope to remain active participants in the planning discussion moving forward.

As has been demonstrated throughout the implementation of the ACA, the commercial industry has not only embraced a value centered philosophy, but has acted upon it. Connecticut's carriers have made substantial investments in the accountable care organization (ACO) and medical home models envisioned under SIM and the carriers are experienced leaders in supporting provider practices that have demonstrated their commitment to transforming into high value and efficient primary care settings that employ care teams and practice population management. As such, the industry is very supportive of any SIM elements that build upon these efforts without compromising any of the reforms already underway by the carriers.

Likewise, the carriers have led the way in developing on-line tools, such as electronic portals, that allow for their members and providers to directly access both cost and quality information. Commercial members currently have access to highly secure websites for disease management, claims issues, healthcare questions, provider search, and cost information – all of which empower consumers to make informed decisions about their health care. Providers also have access to secure sites allowing them to easily identify patient-specific gaps in care and check their claims status among other things. Given the national reach of many of our payers, these provisions not only stand to benefit Connecticut's health care status but also that of other states across the country.

It's important to recognize that Association members have also been active and engaged participants in the formation of a Connecticut All Payer Claims Database (APCD) that will help inform population health strategies to improve the overall wellbeing of Connecticut residents across the payer continuum. Carriers have dedicated considerable resources toward the APCD process and to aligning their claims submission data with the use cases identified by a multi-stakeholder advisory group.

The SIM process has been an open and transparent process in Connecticut with a multitude of committees and councils employed to engage as much varied input as possible. The Connecticut Association of Health Plans and its member companies have been actively engaged in the SIM design dialogue with numerous carrier representatives of diverse backgrounds serving on the SIM Steering Committee and its various workgroups as follows:

- **Steering Committee:**
 - Bernadette Kelleher, Vice President Provider Engagement, Anthem

- **Equity & Access Council:**
 - Robert Willig, Medical Director, Aetna Northeast Region
 - Peter Bowers, Connecticut Medical Director, Anthem
 - Amy Lazzaro, Public Policy
 - Donna Laliberte O'Shea, Medical Director, United

- **Quality Council:**
 - Todd Varricchio, Director of Value Based Contracting, Aetna Northeast Region
 - Aileen Broderick, Director of Clinical Quality Commercial and Exchanges, Anthem
 - GiGi Hunt, Cigna
 - Deb Dauser Forrest, Director of Predictive Analytics, ConnectiCare
 - Donna Laliberte O'Shea, Medical Director, United

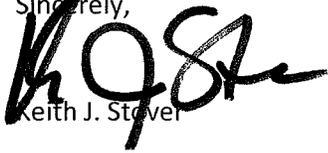
- **Practice Transformation Taskforce:**
 - David Finn, Executive Director of Network Management for CT and RI, Aetna

- Bernadette Kelleher, Vice President Provider Engagement, Anthem
- Joseph Wanklerl, Provider Contracting, Cigna
- Claudia Coplein, Vice President, Senior Medical Director, ConnectiCare

We look forward to a continued discussion around the potential alignment of performance scorecards and care experience surveys and embrace the concept of developing medical home standards and cross-payer analytics that support the industry's current efforts providing that all payers, commercial and government, are included in the proposed initiative and that any associated costs are born fairly across the full stakeholder spectrum.

On behalf of the Connecticut Association of Health Plans, we respectfully request your support of the Connecticut Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost in Connecticut.

Sincerely,



Keith J. Stover



Susan J. Halpin



July 15, 2014

The Honorable Dannel P. Malloy, Governor
210 Capitol Avenue
Hartford, CT 06106

Re: Connecticut State Innovation Model Test Grant Application

Dear Governor Malloy,

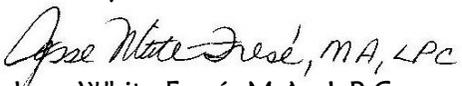
The Connecticut Association of School Based Health Centers (CASBHC), on behalf of its eighteen member School Based Health Centers (SBHCs), supports the State of Connecticut's application to the Center for Medicare and Medicaid Innovation (CMMI) for a State Innovation Model (SIM) Test Grant. CASBHC is committed to Connecticut's plan for health care innovation expressed in the proposal.

CASBHC works closely with its school based health center providers to improve the health of more than 40,000 children and adolescents annually through the provision of primary care medical, behavioral health, and oral health services co-located in the school setting. This integrated model of care ensures that the services provided are comprehensive, coordinated, and cost-effective. The SBHC model of care offers prevention and early intervention services, coordinated care with community providers, and *barrier-free access to care* to children in grades pre-K – 12 in elementary, middle, and high school sites in eighty-eight Connecticut schools.

SBHCs are a critical element of the safety-net system for children in the state. Addressing medical, behavioral health, and oral health problems in the educational setting keeps students healthy and in school, allows youth to be served regardless of insurance status, and prevents more costly problems that result from untreated disease. School based health centers have been shown to reduce the use of emergency departments for health issues that are better managed in the primary care setting. For young people with chronic diseases such as asthma and diabetes, the SBHC provides skill-building and self-management for both the student and their family. In Satisfaction Surveys, students rate the care they receive in the SBHC very highly and can identify improved health behaviors as a result of their interaction with the clinical staff. All of these factors are included in the goals of delivery system transformation as identified in the SIM.

CASBHC appreciates the opportunity to serve on the Practice Transformation Taskforce and looks forward to working with you to improve the health of the residents of Connecticut.

Sincerely,



Jesse White-Fresé, M.A., L.P.C.

Executive Director

Healthy Kids Make Better Learners

CASBHC

P.O. Box 771

North Haven, CT 06473

203-230-9976

www.ctschoolhealth.org

CONNECTICUT BUSINESS GROUP ON HEALTH

Promoting a better healthcare delivery system

July 9, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am writing today on behalf of the Connecticut Business Group on Health (CTBGH), in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI). We are a group of 70+ employers of all sizes who are actively working to improve health and health care delivery in Connecticut. Additional information about us can be found at www.ctbgh.com.

Since its creation three years ago, CTBGH has been involved in efforts to improve primary care in Connecticut through the development of Patient Centered Medical Homes (PCMH). CTBGH, Connecticut's Healthcare Policy & Benefits Services Division of the Office of the State Comptroller, Connecticut's Health Advocate, and Connecticut's Department of Social Services have been encouraging payers and primary care physicians to adopt these new models. This focus has had very positive results, with insurers committing to PCMH initiatives in Connecticut and primary care physicians transforming their practices. Other CTBGH initiatives include: payment transformation, improved price and quality transparency, and improved consumer / provider communication fostered by a Choosing Wisely initiative.

As an organization actively involved in efforts to improve the value of health care delivered in Connecticut, we have learned about the importance of improving communication and collaboration among stakeholders. The nature of how health care is paid for today requires a multi-stakeholder, collaborative approach because any single insurer/payer typically represents only a fraction of a physician or hospital's patient base. It does not make economic sense for a physician or hospital to transform their practice if only one or two payers/insurers are willing to pay them to take innovative approaches.

During the last year, CTBGH has actively been involved in the SIM initiative and support its goals. We appreciate the business community's inclusion in this important initiative.

Our organization fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,

Lori Pasqualini
President
Connecticut Business Group on Health

July 10, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

The Connecticut Center for Primary Care (CCPC) is a 501(c)(3) not-for-profit research and education organization with a vision of contributing to measurable changes in the health status of Connecticut residents. CCPC's mission is to become Connecticut's premier CENTER for research in establishing evidence for primary care best practices, CENTER for the translation of best practices (new delivery models, quality, patient safety) into everyday primary care practice, and CENTER for the transformation of the Connecticut primary care system.

CCPC has long standing collaborative relationships with primary care practitioners throughout Connecticut. Although not a formal corporate entity, the Primary Care Coalition of Connecticut (PCCC) meets monthly under the auspices of the CCPC. The PCCC serves as an advocate to the public, a resource to legislative and payer policymakers, a clearing house for ideas, and a focal point for activity to improve the existing primary care base. The PCCC vision is "to serve as the unified voice for the essential role of high quality primary care in assuring a sustainable healthcare system and improving the health of all Connecticut residents". The PCCC mission is "promote efforts to transform the current primary care structure into a more effective model, including the principle of a medical home for all people. PCCC collaborates with legislators, payers, employers, and citizens to build and sustain a well-organized primary care foundation as the best way to achieve universal access, improve quality, and control costs".

CCPC shares Connecticut's vision to establish primary care as the foundation of a care delivery system that is consumer and family centered and which rewards value over volume. CCPC supports an increasing focus on prevention, population health and integration with community resources. Through these efforts, we can achieve a whole-person-centered health care system that improves community health and eliminates health inequities; ensures superior access, quality, and care experience; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs.

CCPC supports helping primary care practices become Advanced Medical Homes, the core elements of which include whole-person centered care, enhanced access, population health management, team-based coordinated care, and evidence-based informed clinical decision making. SIM test grant funding provides the opportunity to invest in this critical component of our health care system. The AMH glide path, targeted technical assistance and innovation

awards programs will provide many primary care providers with the opportunity to transform their practices.

CCPC applauds the proposed Community and Clinical Integration Program. This program will offer targeted technical assistance and Innovation Awards to spur investments and accelerate advancement in community linkages with social service (e.g., housing, food assistance), home health, long term supports and services (LTSS), and preventive health providers; “hot spotting” models of integrated care; and integrated behavioral health.

Quality measure alignment among Connecticut’s payers is long overdue. The development of common quality and care experience measures and a common performance scorecard is an important innovation that will better focus the efforts of providers and reduce administrative burden.

CCPC supports the transition to value-based payment methods similar to the Medicare Shared Savings Program, which will help drive a much needed change in focus from volume to value. We recognize the importance of provider involvement throughout the planning and implementation process and pledge our continued participation and engagement.

Finally, CCPC fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut’s residents.

Sincerely,



John Lynch, MPH
Executive Director
Connecticut Center for Primary Care, Inc.



The Honorable Dannel P. Malloy
Governor of Connecticut
State Capital
210 Capital Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

I am pleased to submit this letter of support of Connecticut's test application to the Center for Medicare and Medicaid Innovation (CMMI).

The Connecticut Health Foundation (CT Health) as the state's largest independent health foundation is particularly pleased with the state's efforts to take on the daunting task of transforming the health delivery system. The foundation believes everyone deserves the opportunity to optimal health regardless of race/ethnicity, income, education, etc. In order to fulfill this mission CT Health is helping more people gain access to better care, especially for those who currently lack it now – people of color. The foundation defines better care as care that is comprehensive, including oral, mental, and physical health, accountable for improving health, and affordable.

As a member of the State Innovation steering committee it is particularly exciting to see Connecticut recognize the inequities within the health delivery system, but more importantly to take on the challenge of reducing health inequities in this application. For as exciting as the ACA is, if implementation takes place without addressing racial and ethnic health disparities, it can unintentionally perpetrate these disparities. In Connecticut, African Americans fare worse in every category vs. the majority population. Real change requires vigilance and expertise, and mindfulness if transformation is to achieve its ultimate goal. Connecticut has not backed away from this difficult issue rather embraced it which is why the Connecticut Health Foundation stands ready to partner with the state of Connecticut in this significant undertaking.

Sincerely,

A handwritten signature in blue ink that reads "Patricia Baker".

Patricia Baker
President and CEO
Connecticut Health Foundation



July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

We are writing regarding the Connecticut's State Innovation Model (SIM) Test Grant Application, which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office to the Center for Medicare and Medicaid Innovation (CMMI).

The Connecticut Hospital Association is dedicated to advocating for practical options for implementing federal healthcare reform and innovation at the state level, including leveraging unprecedented opportunities to expand access and improve quality of care for all patients, make healthcare more affordable for families and businesses, provide cost savings for the state, and improve funding for hospital and other primary care providers.

We support SIM's goals of establishing a whole-person-centered healthcare system that improves health and eliminates health inequities; ensures superior access, quality, and care experience; empowers individuals to participate actively in their health and healthcare; and improves affordability by reducing healthcare costs. CHA's main objectives – clinical and operational excellence, performance-based reimbursement, and population health – align with the SIM Test Grant, which prioritizes areas of needed health improvement, identifies relevant barriers, and determines evidence-based strategies and interventions to address barriers and improve population health in the prioritized areas.

CHA and its members have been very active with the Department of Social Services (DSS) in developing ideas on how to measure quality and create incentives and shared savings. In the SIM Test Grant, DSS embraced shared savings for Federally Qualified Health Centers (FQHCs) and advanced networks. Hospitals are essential and, as sponsors of and participants in advanced networks, central to the project's success.

As you know, hospitals play a unique and vital role in the delivery of services to those enrolled in Medicaid. They provide or arrange for a substantial amount of primary care, specialty care, testing services, therapy services, and mental health services, as well as acute and emergency care services. In addition to Connecticut hospitals' commitment to serving the Medicaid population, over the last year

The Honorable Dannel Malloy
July 17, 2014
Page 2

hospitals have committed to provide data and real-time ED, transfer, and admit notices, participate in Inpatient Discharge Care Management (ICDM) and Intensive Care Management (ICM) programs, and work on clinical initiatives to improve quality and reduce cost for Medicaid.

Connecticut hospitals are engaged in the SIM project, supportive of its concepts, and committed to driving change that will improve health and well-being for all Connecticut residents.

Sincerely,

A handwritten signature in black ink that reads "Jennifer Jackson". The signature is written in a cursive, flowing style.

Jennifer Jackson
President and CEO

JDJ:mrs:ljs
By E-mail

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

On behalf of the Connecticut Institute for Primary Care Innovation (CIPCI), please consider this a formal letter of strong support for Connecticut's State Innovation Model (SIM) Test Grant Application, to be by the Office of the Healthcare Advocate's SIM Program Management Office to the Center for Medicare and Medicaid Innovation (CMMI).

CIPCI (www.cipci.org) is a collaborative enterprise between Saint Francis Care and the UConn School of Medicine that was launched in November 2010 as a key component of the Bioscience Connecticut initiative. CIPCI's mission is to deliver practical value for patients, providers, and payers by transforming primary care in ways that are palpable and sustainable. In the context of primary care transformation, our aims are to: (1) serve as a trusted partner and resource; (2) improve training; (3) increase retention; (4) conduct groundbreaking research; and (5) help practicing providers manage change. We recently developed and hosted a demonstration of the Primary Care Office of the Future, which drew attendees from across the State.

CIPCI faculty and staff have provided the SIM leadership with information and input related to primary care transformation. We share and fully support Connecticut's vision to establish primary care as the foundation of a care delivery system that is consumer and family centered and which rewards value over volume. We support an increasing focus on prevention, population health and integration with community resources. Through these efforts, we can achieve a whole-person-centered health care system that improves community health and eliminates health inequities; ensures superior access, quality, and care experience; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs.

We fully support helping primary care practices become Advanced Medical Homes, the core elements of which include whole-person centered care, enhanced access, population health management, team-based coordinated care, and evidence-based informed clinical decision making. SIM Test Grant funding will provide the opportunity to invest in this critical component of our health care system. The AMH glide path, targeted technical assistance and innovation awards programs will provide many primary care providers with the opportunity to transform their practices.

We also applaud the proposed Community and Clinical Integration Program. This program will offer targeted technical assistance and Innovation Awards to spur investments and accelerate advancement in community linkages with social service (e.g., housing, food assistance), home health, long term supports and services (LTSS), and preventive health providers; “hot spotting” models of integrated care; and integrated behavioral health. Moreover, alignment of quality measures among Connecticut’s payers is long overdue. The development of common quality and care experience measures and a common performance scorecard is an important innovation that will better focus the efforts of providers and reduce administrative burden. Finally, we support the transition to value-based payment methods similar to the Medicare Shared Savings Program, which will help drive a much needed change in focus from volume to value. We recognize the importance of provider involvement throughout the planning and implementation process and pledge our continued participation and engagement.

In sum, the Connecticut Institute for Primary Care Innovation fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut’s residents.

Sincerely,

A handwritten signature in blue ink, appearing to read 'G. Makoul', is positioned below the word 'Sincerely,'.

Gregory Makoul, PhD, MS
Founding Director | Connecticut Institute for Primary Care Innovation (CIPCI)
Chief Innovation Officer and Chief Academic Officer | Saint Francis Care
Professor of Medicine | University of Connecticut School of Medicine
Senior Fellow | Health Research and Educational Trust

State of Connecticut



Hartford

THOMAS B. LEONARDI
INSURANCE COMMISSIONER

P. O. BOX 816
HARTFORD, CT 06142-0816

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

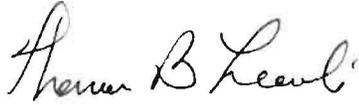
Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

- The Connecticut Insurance Department regulates the commercial insurance industry, ensuring that Connecticut consumers have full protection under state and federal insurance laws and that companies doing business in Connecticut undergo regular rigorous and comprehensive monitoring during the licensing, financial accounting and market conduct processes.
- Innovations in health care delivery, reimbursement, insurance plan designs, provider incentives, transparency in services and costs and more are among the essential complements to the Affordable Care Act. In Connecticut, where so much has been accomplished under the ACA in a relatively short amount of time, obtaining the SIM grant is critical in implementing these next steps.
- Implementing health care reform in Connecticut has and will continue to be a statewide effort with many stakeholders bringing a variety of expertise and vision. Deputy Insurance Commissioner Anne Melissa Dowling has been engaged in this effort from the start. She is a member of the SIM steering committee and is the Department's liaison on the governing board of Access Health CT, the state-sponsored exchange. With a professional staff of actuaries, financial analysts and examiners and insurance law experts, the Department has been a technical adviser to the exchange throughout its development and has worked closely with your administration and the state Legislature to bring Connecticut laws in compliance with the ACA. The Department has regularly engaged the carriers for their input on enhancements and improvements. As a regulator the Department ensures that companies adhere to the laws and regulations of the ACA, including those that will arise from any and all SIM initiatives.

Our agency fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks to secure the SIM grant for funds that will help bring meaningful and positive change to health care for all our citizens and employers. By moving forward with the innovations on which so many stakeholders in the state of Connecticut have worked together, we believe we can revolutionize the many facets of health care – its delivery, its financing and its role in our economy – the way the ACA intended all along.

Sincerely,

A handwritten signature in cursive script that reads "Thomas B. Leonardi". The signature is written in black ink and is positioned above the printed name.

Thomas B. Leonardi
Commissioner
Connecticut Insurance Department



July 16, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

The Connecticut League for Nursing (CLN) is the premier nursing education organization within the State of Connecticut and dedicated to expanding educational access and opportunity for all nursing faculty, practitioners and students. CLN is also designated as the Connecticut Center for Nursing Workforce by the National FORUM of State Nursing Workforce Centers and is committed to promoting and providing collection, aggregation and analysis of our State's nursing workforce data to build a strong and diverse nursing workforce to advance the health of our residents.

As a nursing and healthcare champion within Connecticut, CLN supports the effort to implement healthcare innovation that improves access to quality, equitable, and value-based care. We look forward to active participation in workgroups pertaining to practice transformation, access and to add nurse-specific input to the development of an interdisciplinary patient centered care delivery system.

CLN fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in blue ink that reads "Marcia B. Proto".

Marcia B. Proto, M.Ed, CAS
Executive Director
Connecticut League for Nursing & the Connecticut Center for Nursing Workforce

Connecticut League for Nursing (CLN)
377 Research Parkway, Suite 2D, Meriden, CT 06450
203-494-1121 www.ctleaguefornursing.org



Connecticut Nurses' Association
377 Research Parkway Drive
Meriden, CT 06450

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

Connecticut Nurses' Association (CNA) represents the unified voice for nurses in the state of Connecticut and promotes practices and legislation that supports positive health outcomes. CNA shares Connecticut's vision to establish primary care as the foundation of a care delivery system that is consumer and family centered and which rewards value over volume. We support an increasing focus on prevention, population health and integration with community resources. Through these efforts, we can achieve a whole-person-centered health care system that improves community health and eliminates health inequities; ensures superior access, quality, and care experience; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs.

We support helping primary care practices become Advanced Medical Homes, the core elements of which include whole-person centered care, enhanced access, population health management, team-based coordinated care, and evidence-based informed clinical decision making. SIM test grant funding provides the opportunity to invest in this critical component of our health care system. The AMH glide path, targeted technical assistance and innovation awards programs will provide many primary care providers with the opportunity to transform their practices.

We are fully committed to quality measure alignment among Connecticut's payers. We will actively participate in the SIM Quality Council in support of common quality and care experience measures and a common performance scorecard. This is an important innovation that will better focus the efforts of providers and reduce administrative burden.

Finally, we support the transition to value-based payment methods similar to the Medicare Shared Savings Program, which will help drive a much needed change in focus from volume to value. Use of new data aggregation and analytic tools will help providers succeed in this new environment. We recognize the importance of provider involvement throughout the planning and implementation process and pledge our continued participation and engagement.



CNA fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

Kimberly A. Sandor MSN, RN, FNP
Executive Director
Connecticut Nurses' Association



July 15, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application, which will be submitted by the Office of Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

The Connecticut Nursing Collaborative-Action Coalition (CNC-AC) is part of the Future of Nursing: *Campaign for Action*, a nationwide movement to improve health and health care through nursing. An initiative of AARP and the Robert Wood Johnson Foundation, the *Campaign* includes Action Coalitions in 50 states and District of Columbia working to implement the Institute of Medicine's *Future of Nursing* recommendations. CNC-AC is achieving its mission by:

1. Collecting and analyzing data to ensure Connecticut has enough practicing nurses to respond to changing health care needs in the state.
2. Facilitating the revision of nursing education to reflect priorities around wellness, disease prevention, and treatment, care coordination of care and collaboration.
3. Building nursing leadership capacity to respond to health care needs from bedside to community to boardroom and to inform health care policy.
4. Serving the cultural and ethnic needs of our communities by welcoming and building a broadly diverse nursing workforce.

We support the effort to implement healthcare innovation that improves access to quality, equitable, value based care. We look forward to participating in workgroups to add critical input to the development of interdisciplinary patient centered care delivery systems.

CNC-AC fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely

Linda Berger Spivack, RN, MS, CENP

Statewide Director

Connecticut Nursing Collaborative- Action Coalition

Connecticut Nursing Collaborative – Action Coalition (CNC-AC)
377 Research Parkway, Suite 2D
Meriden, CT 06450
www.cnc-ac.org

July 17, 2014

The Honorable Dannel P. Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, CT 06106

Re: Connecticut State Innovation Model Test Grant Application

Dear Governor Malloy:

We write in support of the Connecticut's State Innovation Model (SIM) Test Grant application to be submitted by the Office of Healthcare Advocate to the federal Center for Medicare and Medicaid Innovation.

Connecticut Voices for Children is a research and advocacy organization that includes staff with a deep knowledge and experience in HUSKY program policy and operations. Our senior policy staff has directed independent monitoring of HUSKY enrollment and healthcare utilization for almost 20 years, and has coordinated the Covering Connecticut's Kids & Families Coalition that brings together Department of Social Services and community partners to share information about HUSKY (and now Access Health CT) in order to improve coverage and access to care in the program. In addition, senior staff members are longstanding members of the Council on Medical Assistance Oversight and the Connecticut Behavioral Health Partnership Oversight Council. As of July 2014, Ms. Langer co-chairs the latter Council. Staff currently sits on the Consumer Advisory Board to the SIM office, and All-Payer Claims Database (APCD) Advisory Group, within Access Health CT and a key component of the SIM proposal. Through all these efforts we have worked with the executive and legislative branches of government to increase access to health coverage for our state's most vulnerable children, families and pregnant women.

We agree with the overall thrust of the SIM grant application to better integrate and coordinate care for patients, and to incentivize the entire health care system to value quality in health care and improve health outcomes over quantity of services. We know that having robust consumer protections will be essential to ensuring that low-income and vulnerable populations will not be adversely affected by systems change.

We look forward to working with the SIM stakeholders:

1. To ensure that children and families benefit from this project, and to understand how many will be targeted for participation in any new model of care.
2. To ensure that the guarantees of comprehensive health care, mandated by federal and state law under the "Early Periodic Screening, Diagnostic and Treatment" program, will not be comprised.
3. To monitor that "shared savings" do not result in "under-service" or "cherry picking" of patients by providers, and to ensure that the Department of Social Services will not implement a Medicaid shared savings program until reasonable, necessary and timely methods of monitoring under-service are in place.

4. To provide the Department of Social Services with the resources to conduct oversight and administration of any “shared savings” program.
5. To ensure that health care system innovations be monitored across third party payers, and that Medicaid data be incorporated into the APCD since the latter is an integral to understanding where our health care dollars are being spent.
6. To better understand how the health care system innovations will be monitored and how providers will be “rewarded” in a program where enrollees do not remain insured for extended periods of time; how children and families who go on and off coverage “share” in the positive effects of the SIM.

We look forward to continuing to partner with the SIM stakeholders on bringing this project to fruition in a manner that serves well lower-income children, families and pregnant women.

Very truly yours,



Ellen Shemitz, JD
Executive Director



Sharon D. Langer, MEd, JD
Advocacy Director



Mary Alice Lee, PhD
Senior Policy Fellow



July 14, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

Cornell Scott-Hill Health Center (CS-HHC) is pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

CS-HHC is Connecticut's oldest and one its largest federally qualified health centers. We provide integrated primary medical, dental and behavioral health and a broad range of sub-specialty and health education services to more than 36,000 patients annually from 19 care sites located across metropolitan New Haven and the Naugatuck Valley.

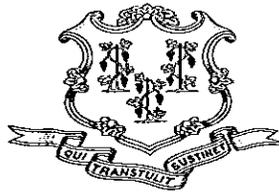
As an accredited Patient-Centered Medical Home, CS-HHC embraces any innovation that improves the health of the communities we serve and increases our value to public and private payors. We also embrace any innovation that fortifies and expands the state's primary care capacity and infrastructure as a cost effective alternative to preventable hospitalizations and emergency room visits.

CS-HHC fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost. We look forward to working as an active partner to: achieve advance medical home standards; determine the impact of value based payment reform based on common metrics and patient experience; implement reform that sustains primary care capacity; and enable data aggregation necessary for consumer transparency.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael R. Taylor", is written over a light blue horizontal line.

Michael R. Taylor
Chief Executive Officer



Council on Medical Assistance Program Oversight

Legislative Office Building Room 3000, Hartford CT 06106
(860) 240-0321 Info Line (860) 240-8329 FAX (860) 240-5306
www.cga.ct.gov/med/

July 18, 2014

The Honorable Dannel P. Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, CT 06106

Re: Connecticut Innovation Model Test Grant

Dear Governor Malloy:

We are pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

As co-chairs of the Medical Assistance Program Oversight Council of the General Assembly, we are very aware of the rapid changes in our healthcare system. Our priority is the delivery of quality services to our state's residents. We support the fundamental shift from one that is fee-based to one that is value-based. Our state has already taken steps to insure that healthcare is patient centered and quality focused. MAPOC was formed to ensure that our Medicaid system of services are innovative and allows all providers, public and private, to meet on a regular basis and discuss on-going programs and we continually look for ways to serve our constituents better.

MAPOC has been on the frontlines of innovation. This was demonstrated when Connecticut became the first state to establish a shift from a fee driven system to one that includes value and managed care services. This advancement came about with our involvement and advocacy. The shift to an Administrative Services Organization has greatly improved the health of our residents

who receive their healthcare through a public source and formed a more comprehensive delivery system. As a state, we are in the forefront of all the states and we are the only state to develop and use this particular model.

MAPOC has shown an interest in the current SIM work of the Office of Healthcare Advocate and the Department of Social Service, administrator of the Medicaid program. As a result, members of our Council will be working on this project and enthusiastically support the efforts made to move ahead and transform Connecticut's health system into one of excellence. MAPOC members will join with the SIM committees and liaise with our MAPOC as a whole. We view this as another way to enhance the SIM proposal and collaborate for a strong and healthy community.

We fully support the efforts of Connecticut's Office of the Healthcare Advocate-SIM Program Management office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes.

Sincerely,



Sen. Terry Gerratana
Co-Chair



Rep. Betsy Ritter
Co-Chair

July 9, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

Day Kimball Healthcare is a non-profit, integrated medical services provider comprised of Day Kimball Hospital, healthcare centers in Danielson, Dayville, Plainfield and Putnam, Day Kimball HomeCare, Hospice & Palliative Care of Northeastern CT, Day Kimball HomeMakers, and Day Kimball Medical Group. Its service area includes Northeast Connecticut as well as nearby Massachusetts and Rhode Island communities. Day Kimball Healthcare's comprehensive network offers more than 1,400 employees including nearly 300 associated, highly-skilled physicians, surgeons and specialists.

Day Kimball Healthcare shares Connecticut's vision to establish primary care as the foundation of a care delivery system that is consumer and family centered and which rewards value over volume. We support an increasing focus on prevention, population health and integration with community resources. Through these efforts, we can achieve a whole-person-centered health care system that improves community health and eliminates health inequities; ensures superior access, quality, and care experience; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs.

We support helping primary care practices become Advanced Medical Homes, the core elements of which include whole-person centered care, enhanced access, population health management, team-based coordinated care, and evidence-based informed clinical decision making. SIM test grant funding provides the opportunity to invest in this critical component of our health care system. The AMH glide path, targeted technical assistance and innovation awards programs will provide many primary care providers with the opportunity to transform their practices.

We also applaud the proposed Community and Clinical Integration Program. This program will offer targeted technical assistance and Innovation Awards to spur investments and accelerate advancement in community linkages with social service (e.g., housing, food assistance), home health, long term supports and services (LTSS), and preventive health providers; "hot spotting" models of integrated care; and integrated behavioral health.

Quality measure alignment among Connecticut's payers is long overdue. The development of common quality and care experience measures and a common performance scorecard is an important innovation that will better focus the efforts of providers and reduce administrative burden.

Finally, we support the transition to value-based payment methods similar to the Medicare Shared Savings Program, which will help drive a much needed change in focus from volume to value. We recognize the importance of provider involvement throughout the planning and implementation process and pledge our continued participation and engagement.

Day Kimball Healthcare fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in black ink, appearing to read "R. E. Smanik". The signature is fluid and cursive, with a large initial "R" and "S".

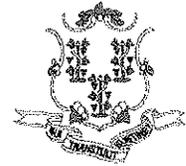
Robert E. Smanik, FACHE
President & Chief Executive Officer
Day Kimball Healthcare, Inc.



Joette Katz
Commissioner

DEPARTMENT of CHILDREN and FAMILIES

Making a Difference for Children, Families and Communities



Dannel P. Malloy
Governor

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

As Connecticut's child welfare agency, DCF has a broad consolidated mandate to serve children, youth and their families across child welfare, juvenile justice and behavioral health. Connecticut's SIM project is highly aligned with several of DCF's strategic initiatives that focus on improving child safety, and advancing overall health and well-being for all children in Connecticut. Our efforts will benefit from this type of healthcare innovation by improving access, quality, equity, and care coordination for Connecticut's families. Through Connecticut's SIM model, we expect that the overall health of our families to improve, while we reduce the number of hospitalizations and emergency room visits, a chronic factor for DCF-involved families.

DCF is committed to implement the CT SIM project and will participate as a member of the steering committee, workgroups, subcommittees, etc. We will collaborate on grant-related activities, as needed, to support practice transformation and payment reform, and develop the project's population health plan, reports and data analytics, as outlined in the application.

On behalf of DCF, I pleased to offer our support to Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Thank you.

Sincerely,

Joette Katz
Commissioner

STATE OF CONNECTICUT
Phone (860) 550-6300 - Fax (860) 560-7086
505 Hudson Street, Hartford, Connecticut 06106-7107
E-Mail: commissioner.dcf@ct.gov
www.ct.gov/dcf
An Equal Opportunity Employer



State of Connecticut
Department of Developmental Services

DDS

Dannel P. Malloy
Governor

Terrence W. Macy, Ph.D.
Commissioner

Joseph W. Drexler, Esq.
Deputy Commissioner

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol, 210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

The Department of Developmental Services (DDS) is responsible for the planning, development, and administration of complete, comprehensive, and integrated statewide services for persons with intellectual disability and persons medically diagnosed as having Prader-Willi Syndrome. The Division of Autism Spectrum Services operates a program for individuals with autism spectrum disorder who do not have intellectual disability and the Birth to Three System assists and strengthens the capacity of families to meet the developmental and health-related needs of infants and toddlers who have delays or disabilities.

As an active member of Lt. Governor Wyman's Health Care Cabinet I have been fully informed about the work of the SIM test grant project and fully support its goals. My staff and I have had discussions with Dr. Mark Schaefer, Director of Health Care Innovation and will continue to speak to him about the SIM test grant's potential positive impact on access to health care for persons with intellectual disability.

Our agency fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,

Terrence W. Macy, Ph.D., Commissioner
Connecticut Department of Developmental Services



STATE OF CONNECTICUT
DEPARTMENT OF MENTAL HEALTH AND ADDICTION SERVICES
A Healthcare Service Agency

DANNEL P. MALLOY
GOVERNOR

PATRICIA A. REHMER, MSN
COMMISSIONER

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

Dear Governor Malloy:

It is my pleasure to write in support of the application submitted by the State of Connecticut Office of the Healthcare Advocate for a State Innovation Model (SIM) Test Grant funded through the Center for Medicare and Medicaid Innovation (CMMI).

The Connecticut Department of Mental Health and Addiction Services (DMHAS) promotes and administers comprehensive, recovery-oriented services in the areas of mental health treatment and substance abuse prevention and treatment throughout Connecticut. DMHAS is the state's lead agency for the prevention and treatment of alcohol and other substance abuse. As such, it provides a variety of treatment services on a regional basis to persons with substance use disorders, including ambulatory care, residential detoxification, long-term care, long-term rehabilitation, intensive and intermediate residential services, methadone or chemical maintenance, outpatient, partial hospitalization, and aftercare. DMHAS also provides prevention services designed to promote the overall health and wellness of individuals and communities by delaying or preventing substance use.

DMHAS fully support the goals of this grant and believes that it will enhance the state's capacity to achieve a coordinated and comprehensive approach to addressing healthcare innovation. Funding through the SIM Test Grant will improve access, quality, equity and care experience while moving provider reimbursement from a FFS model to a value based payment model. DMHAS is committed to participating in the implementation of CT's SIM project in any capacity that is deemed necessary.

DMHAS fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost. Thank you for your time and attention to this important matter.

Sincerely,

A handwritten signature in black ink that reads "Patricia A. Rehmer".

Patricia A. Rehmer, M.S.N.
Commissioner

(AC 860) 418-7000
410 Capitol Avenue, P.O. Box 341431, Hartford, Connecticut 06134
www.dmhas.state.ct.us
An Equal Opportunity Employer

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH



Jewel Mullen, M.D., M.P.H., M.P.A.
Commissioner

Dannel P. Malloy
Governor
Nancy Wyman
Lt. Governor

Office of the Commissioner

July 15, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

Please accept this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

The Department of Public Health (DPH) is the state's premier public health agency, with a mission to protect and improve the health and safety of the people of Connecticut by: assuring the conditions in which people can be healthy; preventing disease, injury, and disability, and promoting the equal enjoyment of the highest attainable standard of health, which is a human right and a priority of the state. Public health is a critical partner in a transformed health system that focuses on both assuring conditions to maximize population health and delivering care that is higher quality, less costly, and more patient-centered.

The SIM Test Grant Application requires that states suggest new and innovative ways to: "(1) improve population health; (2) transform health care delivery systems; and (3) decrease per capita total health care spending." The DPH is perfectly positioned to lead the state on the population health component as we recently released our comprehensive State Health Assessment and State Health Improvement Plan (SHA/SHIP). This places Connecticut ahead of many states since the ground work required to assess the health of the state has already been completed.

Within the SHIP are specific goals, objectives and strategies for improving population health that are currently being or ready to be, implemented. Leading the population health planning component of SIM allows us to develop more sophisticated population health assessments such as small area analyses, focusing on detailed planning and implementing specific models of public health/healthcare integration. This integration will ultimately benefit residents since population health outcomes can be linked to alternative health care delivery models and costs.

The DPH has led the effort, as part of the SIM core team, to ensure that population health measures, social determinants of health and health equity are adequately reflected throughout the application. The DPH will further contribute to the health equity, workforce and quality portions of the SIM proposal with expertise that spans the entire health system.

Sincerely,

A handwritten signature in black ink that reads "Jewel Mullen".

Jewel Mullen, MD, MPH, MPA



Phone: (860) 509-7101 • Fax: (860) 509-7111 • VP: (860) 899-1611
410 Capitol Avenue, P.O. Box 34038
Hartford, Connecticut 06134-0308

www.ct.gov/dph

Affirmative Action/Equal Opportunity Employer



Area Health Education Centers

Eastern AHEC, Inc.

322 Main St. Suite E-2-1R

Willimantic, CT 06226

Phone: (860)465-8281

Fax: 860-760-6230

www.easternctahec.org

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI). Eastern Area Health Education Center (AHEC), is a nonprofit 501c(3) which aims to enhance access to quality health care for medically under- served and under- represented populations by increasing the supply and distribution of health care providers. This is accomplished by creating community and academic partnerships that provide current and future health care providers with exposure and opportunities to effectively work with diverse communities. Our strategic goals include the importance to assess, recruit, train, and retrain community health workers and institute advanced career paths through higher education. In addition, we provide health career recruitment programs to high school and college students by introducing future health professions and, at the same time, provide care to those who are currently underserved medically. Ultimately, our programs aim to cultivate and promote interest in developing international approaches and strategies to meet the healthcare needs of our community.

As a constituent that serves on the Consumer Advisory board, I fully support the importance of aggregating data that will foster consumer transparency. This workgroup is representative of individuals that represent diverse backgrounds and expertise, all which are committed to work together to promote consumer and community input in Connecticut's healthcare innovation planning process.

Eastern AHEC, Inc. fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in blue ink that reads "M. Bond". The signature is written in a cursive, flowing style.

Maritza Bond, MPH
Executive Director
Eastern AHEC, Inc.



July 11, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am extremely pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application

I currently serve as the Chief Executive officer of Fair Haven community Health Center, a Federally Qualified Health Center in New Haven which cares for 16,000 underserved patients. In operation for over 43 years, we provide the full spectrum of holistically integrated care including pediatrics, women's health, primary care, dentistry and behavioral health for our patients.

Fair Haven Community Health Center has long been at the forefront of innovative care. Among many initiatives, attention is called to our diabetes prevention program which includes weekly intergenerational exercise programs, a farming program and weekly cooking classes. We collaborate closely with Clifford Beers Clinic in its innovative program, WrapAround New Haven. Since our patient population is comprised almost exclusively of uninsured patients or those enrolled in CT Husky, we are well versed in the delivery of innovative care despite limited financial resources.

We have studied the proposal being put forth by the state of CT with respect to the SIM Test Grant Application. We fully support its basic tenets, most notably its effort to bring meaningful payment reform to our Medicaid delivery system. Unless we can figure out a way to innovate in the care of our patients and bring about an improvement in quality measures while reducing or limiting costs, we will all fail in our well-intentioned goal of achieving the triple aim of quality care with a good patient experience and at an affordable cost.

In conclusion, Fair Haven Community Health Center fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,

Suzanne Lagarde, MD
Chief Executive Officer

Fair Haven Community Health Center



July 18, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

Griffin Hospital is a 160-bed acute care community teaching hospital serving more than 200,000 residents in southwestern Connecticut. Griffin Hospital is home to the Centers for Disease Control funded Yale-Griffin Prevention Research Center and also serves as the flagship hospital for Planetree, an international leader in patient-centered care.

Griffin Hospital shares Connecticut's vision to establish primary care as the foundation of a care delivery system that is consumer and family centered and which rewards value over volume. We support an increasing focus on prevention, population health and integration with community resources as demonstrated by our operation of Connecticut's only Preventive Medicine Graduate Medical Education Training Program, the founding of the Valley Council of Health and Human Services Organizations, and the establishment of a Medicare Shared Savings ACO. Through these efforts, we can achieve a whole-person-centered health care system that improves community health and eliminates health inequities; ensures superior access, quality, and care experience; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs.

We support helping primary care practices become Advanced Medical Homes, the core elements of which include whole-person centered care, enhanced access, population health management, team-based coordinated care, and evidence-based informed clinical decision making. SIM test grant funding provides the opportunity to invest in this critical component of our health care system. The AMH glide path, targeted technical assistance and innovation awards programs will provide many primary care providers with the opportunity to transform their practices.

We also applaud the proposed Community and Clinical Integration Program. This program will offer targeted technical assistance and Innovation Awards to spur investments and accelerate



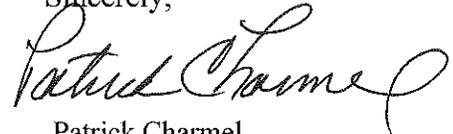
advancement in community linkages with social service (e.g., housing, food assistance), home health, long term supports and services (LTSS), and preventive health providers; “hot spotting” models of integrated care; and integrated behavioral health.

Quality measure alignment among Connecticut’s payers is long overdue. The development of common quality and care experience measures and a common performance scorecard is an important innovation that will better focus the efforts of providers and reduce administrative burden.

Finally, we support the transition to value-based payment methods similar to the Medicare Shared Savings Program in which Griffin Hospital participates in order to drive a much needed change in focus from volume to value. We recognize the importance of provider involvement throughout the planning and implementation process and pledge our continued participation and engagement.

Griffin Hospital fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut’s residents.

Sincerely,

A handwritten signature in cursive script, reading "Patrick Charmel".

Patrick Charmel
President and CEO

July 13, 2014

Jonathan H. Rosen, MD
H. Andrew Selinger, MD
Michael J. Liptman, MD
Jeffrey R. Goldberg, MD
Lea M. Bailey, MD
Vijai Muthukrishnan, MD
Kelli Reola, APRN

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

I work in a highly integrated primary care medical group located in over 100 sites throughout the state of Connecticut. We work on the same EHR platform, function as a NCQA certified patient centered medical home (PCMH), have achieved MU 2 status and have deployed clinical activities consistent with our status as a CMS certified accountable care organization (ACO). I utilize ALL of the above deployed systems of care for most of my commercially insured patients, medicare and all Medicare Advantage patients. Yet, I cannot take advantage of these financially supported care coordination or outreach services for my Medicaid population because I do not have the shared savings contract to support and promote these activities.

My clinical practice's use of these innovative healthcare activities demonstrates our commitment to restructuring the very fabric of the patient clinical experience. When patients seek our help, we are determined to merge the patient's agenda with our clinical agenda to maximize our patient's health and wellness. As healthcare providers, we strive to improve access, quality, health equity, and care. We emphasize empowering consumers by delivering greater value driven healthcare and to make cost, quality, and performance data transparent to consumers. We practice population health management and work to reduce costs attributed to preventable hospitalizations and emergency room visits.

I am a member of the Medicaid Assistance Program Oversight Council (MAPOC) and the SIM Quality Council. As Chairman of the Family Medicine Department at the Frank Netter School of Medicine at Quinnipiac University I hope to participate in the SIM workforce council to help create a more enlightened primary care workforce in Connecticut. My educational goal is to introduce our medical students to team-based healthcare delivery that improves access, quality, reduces disparity and recognizes the importance of the social determinants of health that directly impact chronic disease and wellness. I fully support the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher

quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,



H. Andrew Selinger M.D.

Department Chair of Family Medicine

Frank H. Netter MD School of Medicine

Quinnipiac University

275 Mount Carmel Avenue

Hamden, CT 06518-1908 Clinical Practice: (860) 584-4531

Cell: (860) 940-7749 tel:(860) 209-40-7749

haselinger@quinnipiac.edu

Campus Office Location

North Haven Campus

370 Bassett Road, Room MNH

North Haven, CT 06473

Campus Phone: (203) 582-7917 Fax (203) 582-1418



Bone & Joint Institute

Hartford Hospital

June 27, 2014

The Honorable Dannel P. Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

The Hartford Healthcare Bone & Joint Institute is a multidisciplinary program based at Hartford Hospital. While focused on specialty care in musculoskeletal medicine, we recognize the importance of advancing population health. Depending upon the survey, between 35% and 55% of all PCP visits involve problems related to the musculoskeletal system. We are committed to advancing the preventive care of the citizens of Connecticut through injury prevention and obesity management programs.

Our organization is based on alignment of patient, physician and hospital incentives to improve the value of musculoskeletal care in the region. Through a co-management contractual arrangement, the physicians run the service line and are accountable for quality and cost performance. We are committed to transparency for consumers around cost and quality with a primary focus on preventable hospital readmissions and emergency room visits.

We will participate in the Connecticut SIM project via:

1. Support of provider representation in SIM governance via Steering Committee
2. Support of value based payment reforms tied to common scorecard and care experience
3. Support of data aggregation necessary for consumer transparency
4. Support of innovative programs in musculoskeletal population health.

Our organization fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,

Courtland G. Lewis, MD
Physician in Chief



July 18, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application, which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

Hartford Healthcare is committed to the transformation of Healthcare delivery in the state of Connecticut. Through the development of Integrated Care Partners our physician lead clinical integration organization we are moving forward to successfully deliver value-based population health with the dedication of over 1900 providers. We are committed to measure and manage quality, provide cost effective healthcare focused on seamless care delivery for our patients. We have taken major steps to improve access through our 24 hour pledge to a patient appointment for both primary care and specialty services.

Hartford Healthcare shares Connecticut's vision to establish primary care as the foundation of a care delivery system that is consumer and family centered. We have created an organization that is focused on prevention, population health and integration with community resources. Through these efforts, we can achieve a whole-person-centered health care system that improves community health and eliminates health inequities.

SIM test grant funding provides the opportunity to invest in these critical components of our health care system. The AMH glide path, targeted technical assistance and innovation awards programs will provide many primary care providers with the opportunity to transform their practices. The proposed Community and Clinical Integration Program will offer targeted technical assistance and Innovation Awards to spur investments and accelerate advancement in community linkages with social service (e.g., housing, food assistance), home health, long term supports and services (LTSS), and preventive health providers; "hot spotting" models of integrated care; and integrated behavioral health. The transition to value-based payment methods similar to the Medicare Shared Savings Program, will help drive a much-needed change in focus from volume to value

We have been involved with the SIM project since it began well over a year ago as we recognized the importance of provider involvement and leadership throughout the planning process. Hartford HealthCare supports the SIM grant application in its efforts to secure funding for better access to quality healthcare at a reduced cost.

Sincerely,



James Cardon, MD
Executive Vice President and
Chief Clinical Integration Office
Hartford HealthCare



Harvard Pilgrim Health Care

July 14, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

Harvard Pilgrim Health Care currently serves more than 1.2 million members throughout Massachusetts, New Hampshire, Maine, and now Connecticut. As the state's only regional, non-profit health plan, Harvard Pilgrim's mission – to improve the quality and value of health care for the people and communities we serve – aligns perfectly with the goals of the SIM initiative underway in Connecticut. At its core, the SIM initiative seeks to transition from a volume-based health care delivery system to value-centered approach focused on the individual. By doing so, important advancements are proposed, including: new value-based payment methodologies; enhanced collaboration with providers in the community through practice transformation initiatives; and consumer empowerment through increased transparency.

Harvard Pilgrim recognizes the importance of value-based payment designs as a tool to improve the quality of care for members. We support the importance placed on these payment designs in the SIM test grant, and as a company hold significant experience with alternative payment methodologies. As you are undoubtedly aware, Massachusetts has undertaken its own initiative in payment reform. Harvard Pilgrim embraced the goals outlined in this effort, and the company currently employs a number of risk-based (both upside and downside risk) contracts with providers throughout New England. We have found that these arrangements provide enormous value to our members because their care now focuses on health outcomes and places primary care providers at the center of a larger care management team.

The importance of strong provider partners, and specifically the advancement of primary care providers, fits well within Harvard Pilgrim's culture. The company began operations as a staff-model HMO operating out of a single health care center in Boston and has since maintained a culture of provider partnership. Harvard Pilgrim has piloted a number of initiatives to assist providers update their health information technology and transform their practice to comply with NCQA's Patient Centered Medical Home standards. Often these pilots include an advanced payment as part of a larger shared savings or risk contract, and tracks key milestones as part of the transformation. We support efforts included in the SIM test grant that align with this approach to practice transformation and believe that NCQA may provide an appropriate benchmark on which to measure this transformation and ensure quality.

Harvard Pilgrim Health Care, Inc.
93 Worcester Street, Suite 100
Wellesley, Massachusetts 02481

Harvard Pilgrim also shares Connecticut's vision to empower individuals to actively participate in their health and health care. Harvard Pilgrim has been a leader in the effort to provide members with intuitive, online tools that allow members to make informed decisions about their health. Specifically, through a new transparency tool called Now iKnow, Harvard Pilgrim members will have access to a new quality and cost calculator that allows members to enter a specific service without a diagnostic code and view the varying cost of that service at a number of providers in their area. Members will also be able to view quality ratings on each provider, from national benchmark data, and how choosing a specific provider may impact their own out-of-pocket expenses depending on their plan. In time, we hope to bring this important tool to Connecticut.

Finally, Harvard Pilgrim will remain committed as a partner with the state and the SIM Program Management Office. Although we are not a formal participant in the SIM workgroups as a result of begin a new participant in the state, we have expressed our interest in being a resource as the project continues. Harvard Pilgrim has been engaged in this process, both as a member of the Connecticut Association of Health Plans and directly with the Healthcare Advocate and Director Schaefer, and will continue to engage in the process.

Harvard Pilgrim recognizes the opportunity provided by the SIM initiative to transform care delivery in Connecticut and we support the efforts of the Program Management Office to secure funding necessary to achieving the goals of improving the quality and value of health care.

Sincerely,



William J. Graham
Senior Vice President for Public Affairs and Government Programs
Harvard Pilgrim Health Care



July 16, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to support Connecticut's State Innovation Model (SIM) Test Grant Application to be submitted to the Center for Medicare and Medicaid Innovation (CMMI) by the Office of the Healthcare Advocate's SIM Program Management Office.

HealthyCT is Connecticut's only Consumer Operated and Oriented Plan (CO-OP). CO-OP's like HealthyCT were developed through the Affordable Care Act (ACA) to drive healthcare reform as does the SIM proposal. As a member-run, nonprofit health plan founded by CT physicians providing individuals, families and businesses with comprehensive, quality healthcare coverage at fair, consistent rates, HealthyCT is ideally positioned to support Connecticut's State Innovation Model.

HealthyCT shares the vision outlined in the application to establish primary care as the foundation of a care delivery system that is consumer and family centered and which rewards value over volume. Over the past two years, HealthyCT and its founding organizations have provided funding support through Qualidigm for over 40 primary care practices to successfully complete the NCQA PCMH recognition process. Our A-PMPM (Advanced-Practice Medical Payment Model) PCMH sustainability program has been shared with SIM Program Management Office leadership and is consistent with and aligned with the proposal in the grant application. In addition to supporting the transformation of nascent Patient Centered Medical Homes, our program places special emphasis on 13 key attributes of primary care transformation including, for example, expanded access, care planning for chronic and complex patients, and behavioral health integration. Through these efforts to support the sustainability of primary care transformation, we support a person-centered health care system that meets the population health management goals of the triple aim of improving health, improving health care, at lower costs.



We applaud helping primary care practices become Advanced Medical Homes, the core elements of which include person centered care, enhanced access, population health management, team-based coordinated care, and evidence-based informed clinical decision making. SIM test grant funding provides a key opportunity to invest in this critical component of Connecticut's health care system. The AMH glide path, targeted technical assistance and innovation awards programs should provide many more primary care providers with opportunities to transform their practices.

We are fully committed to quality measure alignment among Connecticut's payers. We are prepared to actively participate in the SIM Quality Council in the development of common quality and care experience measures. This is an important innovation that provides administrative simplification and serve to better focus the efforts of providers measurably improve quality, patient satisfaction and person centeredness.

Finally, our A-PMPM program aligns nicely with the SIM grant proposal in supporting the transition to value-based payment methods which should help drive a much needed change in focus from volume to value. Use of new data aggregation and analytic tools should enhance provider's management of their patients and their needs to ultimately succeed in this new environment. HealthyCT is founded on the importance of provider involvement throughout the planning and implementation process and has successfully established a provider advisory council in this regard. Only through continued participation and engagement with providers will the SIM proposal find ultimate success.

HealthyCT fully supports the work of the SIM Program Management Office in its efforts to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in black ink that reads "Ken Lalime".

Ken Lalime
CEO
HealthyCT



Khmer Health Advocates, Inc.

សមាគមកម្រិតសុខភាពខ្មែរ

Treatment and Advocacy for Victims of Torture

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

Khmer Health Advocates is the National Health Organization for survivors of the Cambodian holocaust and their families operating one of the oldest torture treatment programs in the United States. In addition, KHA is the host organization for the National Cambodian American Health Initiative (NCAHI) and the lead organization for the Connecticut Southeast Asian American Health Coalition. Our Southeast Asian American community in Connecticut numbers only 22,000 but we have complex health problems and the health care costs of the City of Waterbury, the fifth largest city in the state.

On behalf of KHA, NCAHI and Connecticut Southeast Asian American Health Coalition (CSEAAHC) we the State's Health Innovation model in particular because of the focus on ending disparities in health. As community based organizations we are well aware of the health issues of our communities and the many barriers to health. We believe that this model offers meaningful solutions while assuring protection of the most vulnerable members of our state.

Innovation requires change and change requires a measure of risk. We support the move to value base reimbursement as well as the request for a waiver (1115) to implement new approaches to improving outcomes believing that sufficient safeguards will be used to assure equitable care for all citizens of the state. We endorse the plan's commitment to "person centered care" and population based efforts for improving the health of special populations.

As community based organizations we are making a commitment to engaging in this process of change and applaud the states opportunity for us to be part of a process that promises inclusion and transparency. On behalf of our organizations, we fully support the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Respectfully yours,

Theanvy Kuoch, MA, LPC.
Executive Director of Khmer Health Advocates
Chair of NCAHI and CSEAAHC

July 10, 2014

The Honorable Dannel P. Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

Northeast Business Group on Health (NEBGH) is a non-profit business coalition representing self-insured employers and other stakeholders. Our mission is to empower our members to drive excellence in health and achieve the highest value in healthcare delivery and the consumer experience. I think you would agree that our mission is very aligned with what the SIM is hoping to accomplish.

NEBGH continually educates our employer members on how to improve the value of the healthcare they purchase by using strategies like value-based insurance design (VBID), making cost and quality data transparent to employees and supporting payment reform. Population health has been a priority for our members and we assist them in learning about best practices. We also bring together stakeholders to work on delivery system reform and are the organization in the region that convenes and expects health plans to work together as we spearhead multi-payer initiatives. NEBGH also was the first organization to aggregate health plan data in NY and NJ to assess individual physician performance.

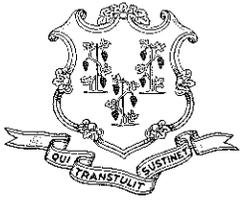
So, as you can see, the work proposed in the SIM grant is "right up our alley" and we stand ready to support the activities. We will serve on any Steering Committees and Work Groups and have already been part of the planning process. We will work to engage employers to accelerate VBID, support value-based payment reforms for provider reimbursement and data aggregation.

NEBGH fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,



Laurel Pickering
President & CEO



STATE OF CONNECTICUT

OFFICE OF POLICY AND MANAGEMENT

July 18, 2014

The Honorable Dannel P. Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI) today.

The Office of Policy and Management has a unique role in state government to provide analyses, evaluation and recommendations to you and to develop and implement state policies, including those related to health and human services, that will improve the lives of the residents of the state. In that regard, the Office of Policy and Management fully supports the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

This initiative will transform health care in Connecticut using four major strategies: (1) a comprehensive, evidence-based plan for improving population health; (2) strengthening primary care and integrating community and clinical care; (3) value-based payment and insurance design; and (4) multi-payer alignment on common quality and care experience measures. The combination of all four of these strategies will improve the health of Connecticut's residents, reduce health inequities in our state, and improve affordability by reducing health care costs.

We support the transition to value-based payment methods, similar to the Medicare Shared Savings Program, which will help drive a much needed change in focus from volume to value. This initiative offers the unique opportunity to maximize benefits by utilizing a multi-payer approach which ensures that all payers are investing in tandem. As you know, a core responsibility of the Office of Policy and Management is to ensure the efficient use of resources and make recommendations to you regarding the financial implications of state policies and practices. The SIM initiative represents a comprehensive strategy for the state to reduce health care costs while improving quality of care to individuals and families.

While we have committed some state funding to this effort, I am excited by the opportunity presented by the use of federal dollars to more fully invest in these strategies and move the initiative forward at an

appropriate pace. The Office of Policy and Management applauds the Connecticut's State Innovation Model Test Grant Application and stands ready to fully engage in this effort.

Sincerely,

A handwritten signature in black ink, appearing to read 'Benjamin Barnes', written over the word 'Sincerely,'.

Benjamin Barnes
Secretary



14 July 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

Re: Connecticut State Innovation Model Test Grant Application

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

Norwalk Community Health Center is one of Connecticut's Federally Qualified Health Centers. NCHC delivers high-quality, evidence-based care to the neediest citizens of the State of Connecticut. We are constantly improving our delivery care to improve its timeliness, access and cost. We have had conversations with multiple partners to explore reimbursement models from fee-for-service to new reimbursement models that emphasize quality and effectiveness over and are actively engaged in these ongoing discussions. We have received recent State funding to further improve our electronic medical record, implement robust population health management systems, and make our metrics more clinically available with an eye towards improved transparency and quality improvement. In essence, we are well-poised to execute all deliverable of the "triple aim": improved outcomes, decreased cost and improved patient satisfaction.

Norwalk Community Health Center is fortunate to represent the FQHCs of the state on the SIM Practice Transformation Workgroup. We support both of these providers' contributions to this initiative as well as the many objectives that the SIM is poised to achieve. We are participating in data sharing for improved population health management via PopHealth and data warehouse capabilities, and after our own successful Patient Centered Medical Home designation, have helped other health centers become certified as PCMHs as well.

The Norwalk Community Health Center fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in blue ink that reads "Craig Glover" with a circled "CS" to the right.

Craig Glover, MBA, CHCEF
Chief Executive Officer

A handwritten signature in black ink that reads "Douglas Olson" with a long horizontal line extending to the right.

Douglas Olson, MD
Chief Medical Officer

A handwritten signature in black ink that reads "Rebecca Mizrachi" in a cursive style.

Rebecca Mizrachi, MSN, RN
Family Nurse Practitioner





STATE OF CONNECTICUT

OFFICE OF THE NONPROFIT LIAISON

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

In my role as the Governor's Nonprofit Liaison I interact and communicate with nonprofit community-based health and human services providers and provide advice on policy matters that affect nonprofit organization particularly with regard to their partnership with the state.

I have been pleased to have been a participant in the development of the State's Innovation Model Test Grant Application as a member of the Lieutenant Governor's Healthcare Cabinet and as a member of the SIM design phase Workforce Taskforce.

The Lieutenant Governor's Healthcare Cabinet provided an opportunity for individuals and organizations representing a myriad of interests to receive regular briefings on the status of the many healthcare initiatives in the state including the rollout of the ACA and Connecticut's Exchange and the SIM application and provided an opportunity for comment from the public and from Cabinet members in a public forum.

As a participant in the SIM process, I convened a several focus groups for nonprofit healthcare providers and their trade association representatives to provide information about the SIM development process, to garner input about community-based provider participation in the envisioned healthcare system and to solicit comment about the workforce sections of the state's application.

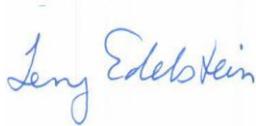
Subsequent to those meetings, I provided recommendations to the Workforce Taskforce about ways to enhance and maximize access to services through use of the nonprofit healthcare workforce.

An adequate, trained workforce is key to providing healthcare. These workers are responsible for the health and welfare of vulnerable people who often have difficulty accessing the healthcare system on their own. Given adequate supports, individuals can enter the healthcare system earlier and at less cost than if their access to service is delayed, making the most efficient use of community-based resources while assuring that the broader population has access to healthcare. It is important to support workforce retention and skill acquisition and to begin career ladders early in the educational process.

My office fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

I look forward to continuing to be a resource as the State of Connecticut addresses the critical healthcare needs of its residents.

Sincerely,

A handwritten signature in blue ink that reads "Terry Edelstein". The signature is written in a cursive style with a clear, legible font.

Terry Edelstein, M.P.H.
Governor's Nonprofit Liaison
Office of the Nonprofit Liaison

State of Connecticut

KEVIN LEMBO
COMPTROLLER



Hartford

July 16, 2014

The Honorable Dannel P. Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

- As you know the Office of the State Comptroller, in addition to its constitutional duties, is responsible for the administration of all employee benefit programs for state employees and retirees, including our medical, dental, and pharmacy benefit programs. Currently, these programs cover over 210,000 lives, making our plan the largest single purchaser of health insurance in the commercial market.
- For the past five years, we have worked with our ASOs and primary care practices throughout the state to support practice transformation and movement away from fee-for-service only payments through Patient Centered Medical Home transformation and contracting. In the past eighteen months, we have worked closely with these providers and our ASOs in the further transformation of many of these practices, as well as others, to shared savings contracting and further transformation to integrated networks and total population health management. Today, approximately 60% of primary care providers are under shared savings arrangements.
- In addition, in 2011, you negotiated an innovative value based insurance design (VBID) program with the state employee unions that my office administers. To date, we have experienced much higher engagement of our employees in the management of their health, our costs have trended lower, and our compliance with the plan's requirements remains high.
- During the whole SIM planning process, the Office of the State Comptroller has fully supported the initiative. I have assigned Dr. Thomas C. Woodruff, Director, Healthcare Policy & Benefit Services Division to serve on the Steering Committee as well as the Care Delivery and Payment Reform Workgroups. He has also worked on the core team of agency personnel to support SIM. In addition, I have assigned Joshua Wojcik, Policy Director, to the HIT workgroup. These roles will continue as the planning process transforms into the test grant activities.

- With the implementation of a VBID program covering over 120,000 lives, along with our extensive shared savings contracting, the Office of the State Comptroller can offer a unique contribution to SIM and the efforts of CMMI to evaluate the effectiveness of patient engagement with value based purchasing and practice transformation.

Our agency fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,

A handwritten signature in cursive script that reads "Kevin Lembo". The signature is written in black ink and is positioned above the printed name and title.

Kevin Lembo
State Comptroller



PO Box 117 Northford, CT 06472 (203)234-9554

July 14, 2014

Co-Directors

Carmina Cirioli

Nanfi Lubogo

Board of Directors

Ruth Nuss
President

Ariana Balayan
Vice-President

Katherine Cocoran
Treasurer

Guy Riddick
Secretary

Patricia Dotson

Pamela Riddick

Robin Planeta

Samantha Mraz

Tiffany Katz

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

PATH Parent to Parent/family Voices of CT (PATH/FVCT) is a statewide organization of families whose children and youth have special health care needs, such as disabilities or chronic illnesses, and the professionals who serve them. Our organization's mission is to provide one to one family support and information to families children and youth with special health care needs (CYSHCN).

PATH/FVCT also serves as the Family to Family Health Information Center (F2F HIC) funded under Grant Award #H84MC21663 from the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau, Division of Services for Children with Special Health Needs. Through the F2F HIC we assist families of children and youth with special health care needs (CYSHCN) to make informed choices about health care in order to promote good treatment decisions, cost-effectiveness and improved health outcomes. We assist families navigate the health care system so that their children can get the care and benefits they need through CT Medicaid, SSI, Birth to Three, private insurance and other programs. In addition, we provide leadership and training for health care providers and policymakers to work toward the goal of a family-centered "medical home" for every child.

PATH/FVCT is committed to support the work of CT's SIM by:

- Providing representation as a member of the SIM Consumer Advisory Board
- Participating in any required workgroups particularly, Equity & Access and/or Quality
- Supporting advanced Medical Home Standards
- Providing technical assistance for any special health care needs issues
- Providing support for any innovation awards

We fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in black ink, appearing to read "Nanfi N. Lubogo". The signature is written in a cursive, flowing style.

Nanfi N. Lubogo
Co-Executive Director
PATH Parent to Parent/Family Voices of CT



Andrew R. Gold
Vice President
Total Rewards

Pitney Bowes Inc.
1 Elmcroft Road MSC 51-05
Stamford, CT 06926-0700
T: 203-351-7776
F: 203-460-5221
e-mail: andrew.gold@pb.com
www.pb.com

July 14, 2014

The Honorable Dannel P. Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

On behalf of Pitney Bowes Inc., a fortune 1000 company headquartered in Stamford, CT, I am pleased to inform you of our commitment to the implementation of a state-wide health transformation. As a business operating in CT, it is extremely important to us to eliminate waste and inefficiency and to control the growth in health care spending.

We share your vision of establishing primary care as the foundation of care delivery that includes expanded provider hours, team based integrated and evidence based care. We strongly support the value based payment changes aligned across all payers as this eliminates conflicting payer incentives and allows providers to invest in advanced practice and performance improvement. We have had continual involvement with our Director of Health Care Strategy, Mary Bradley, being a member of the Steering Committee.

We acknowledge that employer engagement is fundamental to achieving care delivery and payment reforms. At Pitney Bowes Inc. we have realized great value in employing the following principles:

- An employer's ability to influence consumers through plan design. As an early adopter of a prescription drug value based design (VBID), we saw improvement in chronic condition medication adherence and an overall decrease in total medical spend.
- The importance of value-based payment and price transparency. We employ a tiered network which gives our employees an incentive to access care based on quality and efficiency measures. Additionally, we are a member of the Catalyst for Payment reform whose mission is to accelerate reforms to payment that promote the Institute of Medicine's six aims.
- Incentives for employees and family members to adopt healthier lifestyles. Our Healthy Rewards program centers around knowing your health risk, taking action on biometric markers outside of the normal range and being compliant with routine exams and cancer screenings.

We are in strong support of a plan emphasizing improved access to higher quality providers and equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,

A handwritten signature in cursive script, appearing to read "Andrew R. Gold".

Andrew R. Gold

July 13, 2014

Jonathan H. Rosen, MD
H. Andrew Selinger, MD
Michael J. Liptman, MD
Jeffrey R. Goldberg, MD
Lea M. Bailey, MD
Vijai Muthukrishnan, MD
Kelli Reola, APRN

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

I work in a highly integrated primary care medical group located in over 100 sites throughout the state of Connecticut. We work on the same EHR platform, function as a NCQA certified patient centered medical home (PCMH), have achieved MU 2 status and have deployed clinical activities consistent with our status as a CMS certified accountable care organization (ACO). I utilize ALL of the above deployed systems of care for most of my commercially insured patients, medicare and all Medicare Advantage patients. Yet, I cannot take advantage of these financially supported care coordination or outreach services for my Medicaid population because I do not have the shared savings contract to support and promote these activities.

My clinical practice's use of these innovative healthcare activities demonstrates our commitment to restructuring the very fabric of the patient clinical experience. When patients seek our help, we are determined to merge the patient's agenda with our clinical agenda to maximize our patient's health and wellness. As healthcare providers, we strive to improve access, quality, health equity, and care. We emphasize empowering consumers by delivering greater value driven healthcare and to make cost, quality, and performance data transparent to consumers. We practice population health management and work to reduce costs attributed to preventable hospitalizations and emergency room visits.

I am a member of the Medicaid Assistance Program Oversight Council (MAPOC) and the SIM Quality Council. As Chairman of the Family Medicine Department at the Frank Netter School of Medicine at Quinnipiac University I hope to participate in the SIM workforce council to help create a more enlightened primary care workforce in Connecticut. My educational goal is to introduce our medical students to team-based healthcare delivery that improves access, quality, reduces disparity and recognizes the importance of the social determinants of health that directly impact chronic disease and wellness. I fully support the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher

quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,



H. Andrew Selinger M.D.

Department Chair of Family Medicine

Frank H. Netter MD School of Medicine

Quinnipiac University

275 Mount Carmel Avenue

Hamden, CT 06518-1908 Clinical Practice: (860) 584-4531

Cell: (860) 940-7749 tel:(860) 209-40-7749

haselinger@quinnipiac.edu

Campus Office Location

North Haven Campus

370 Bassett Road, Room MNH

North Haven, CT 06473

Campus Phone: (203) 582-7917 Fax (203) 582-1418



July 15, 2014

The Honorable Dannel P. Malloy
Governor of Connecticut
State Capitol, 210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application, which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office to the Center for Medicare and Medicaid Innovation (CMMI).

Qualidigm is a mission-driven, not-for-profit, healthcare consulting company that provides innovative, scientifically-based solutions to transform health care and improve patient outcomes. As the CMS funded Quality Improvement Organization (QIO) for the State of Connecticut, we work with hospitals, nursing homes, home care organizations and physician providers to promote quality improvement, best practices and appropriate technology use in support of the creation of a value-based patient-centered healthcare system. In our capacity as the Connecticut QIO, we have been working with providers to protect Medicare beneficiaries for nearly thirty years.

In addition to our QIO work, Qualidigm acts as the neutral convener across the state to pull together healthcare stakeholders who are interested in improving healthcare quality and placing the patient at the center of the healthcare delivery system. In 2012, Qualidigm formed the CT Partners of Health (CPH), a group of 40 local healthcare organizations who work together to identify healthcare related issues that present challenges to consumers and the provider community in Connecticut. The CPH mission is to engage consumers to become active, informed partners in "managing" their health and healthcare. Under the Qualidigm leadership, this group has worked closely with the SIM grant architects to insure that the consumer's voice is heard. Moreover, CPH has included the SIM Program Office in reaching out to key media channels to create a media plan to spread the SIM message relating to patient engagement and education in support of healthier living and improved chronic care management. Additionally, because of Qualidigm's experience in providing consulting and technical services to assist provider practices in becoming NCQA Patient Centered Medical Homes (PCMHs), Qualidigm recognizes the merits of the SIM proposal in assisting practices become advanced medical homes through their concentration on the CT glide path program.

Therefore, it is without reservation or qualification that Qualidigm fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in black ink, appearing to read "Tim Elwell".

Tim Elwell, MBA
President & CEO
Qualidigm

QUINNIPIAC UNIVERSITY

FRANK H. NETTER MD
SCHOOL OF MEDICINE

Office of the Dean

July 16, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capital
210 Capital Avenue
Hartford, CT 06106

Re: Connecticut State Innovation Model Test Grant Application

Dear Governor Malloy,

I am pleased to submit this letter of support of Connecticut's State Innovation Model (SIM) Test Grant Application, which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CCMI).

The Frank H. Netter, MD School of Medicine at Quinnipiac University was founded with a vision to become a model for educating diverse, patient-centered physicians who are partners and leaders in an inter-professional primary care workforce, responsive to healthcare needs in the communities they serve. We are building the school and its programs around an interprofessional model that includes our colleagues in Quinnipiac's schools of Health Science and Nursing. We believe patient access and outcomes are improved if patient care is provided by teams of clinicians. Given the importance and need for primary care services, the key members of such teams are physicians, physician assistants, and nurses, all of whom are now being educated at Quinnipiac. As such the elements of the SIM Test Grant Application are closely aligned with our vision, and our plans for the development of the School of Medicine.

In April of 2013, I had the privilege of testifying before the U.S. Senate's Subcommittee on Primary Health and Aging about "Successful Primary Care Programs: Creating the Workforce We Need". In my testimony I noted the need to take new and innovative approaches in order to build the primary care workforce Connecticut and the country needs. Much of what is proposed in the SIM Test Grant Application represents real innovation. For example, the application proposes to

develop and operate two or more primary care medical residencies. These residencies would be housed in the exact settings where primary care services are provided, rather than in tertiary care hospitals where most residency training currently takes place. High quality primary care keeps patients out of the hospital. Therefore the training of primary care physicians needs to take place outside of tertiary care hospitals. Creating these residency training programs makes perfect sense.

As an educational institution dedicated to training the healthcare workforce, we would support all of the educational aspects embedded within the application. We have that expertise, and are willing to assist as needed.

In summary, the Frank H. Netter, MD School of Medicine fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in black ink, appearing to read "B. M. Koeppen". The signature is written in a cursive, slightly stylized font.

Bruce M. Koeppen, MD, PhD
Dean and Vice President for Health Affairs
Frank H. Netter, MD, School of Medicine
Quinnipiac University

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

The Consumer Advisory Board is a sixteen member independent consumer advisory board that provides advice and guidance directly to the Steering Committee (on which it has a seat) and the PMO. The Consumer Advisory Board (CAB) is racially and ethnically diverse, with members involved in advocacy and community development, services, health, and housing.

The Connecticut Consumer Advisory Board (CAB) of the State Innovations Model (SIM) grant wishes to offer our support for the CT SIM initiative and, in particular, support for the guiding principles on which the CT SIM grant was created. We further support the active engagement of consumers in this process and look forward to comprehensive and meaningful consumer involvement as the initiative moves forward.

As the CAB, we understand that with appropriate consumer protections, CT SIM has the ability to advance health care reform efforts for the most vulnerable consumers in our State. Most importantly, the SIM grant submission includes strategies to decrease disparities in health care delivery for racial and ethnic minorities, and for the poor. Additionally, the SIM initiative builds upon the foundation of the Department of Social Services' PCMH program including that program's Glide Path and attribution methodology.

We look forward to working with the State to move SIM forward.

Sincerely;



Patricia J. Checko, DrPH, MPH

Co-Chairman



Arlene Murphy

Co-Chairman



July 14, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

- In response to the rapidly-changing healthcare environment, regional physicians and St. Vincent's Medical Center developed a new physician hospital organization (PHO), St. Vincent's Health Partners, Inc. (SVHP). St. Vincent's Health Partners was incorporated May 18, 2012. Currently, SVHP has over 370 member providers, and represents 45 specialties including adult and pediatric primary care. Additionally, SVHP has alignment with 3 Skilled Nursing Facilities and 4 home health care agencies to help improve the transitions of care, ensure the appropriate care in the appropriate setting, and provide quality coordinated services at lower cost. SVHP is the first organization in the country and in Connecticut to achieve accreditation for Clinical Integration by the national accrediting body URAC.
- The healthcare innovation project aligns well with our organizational objectives. SVHP works to achieve the Institute for Healthcare Improvement's "Triple Aim"-quality cost-effective care with patient satisfaction. This is achieved by providing the right care, at the right time, using the right resource. SVHP values efficient, cost-effective, quality healthcare so that patients can embrace and enjoy healthier lives. To improve population health, engaging each patient to participate in his/her care with his/her primary care provider who utilizes medical home processes, allows the "healthcare team" to manage and coordinate care for each patient, each physicians' impanelled patients, as well as the practice group's population. This model will ultimately demonstrate high quality and cost-effective care aligned with patient's participation and choice.

SVHP Care Coordination guides and challenges each location to implement the Patient Centered Medical Home care philosophy locally to affect the outcome of the population. Utmost value is given to the nature of communication between providers partnering with patients along the continuum of care. This value anchors the expectations set for referrals between providers and in the management of patient transitions. Given the nature of transition and the implicit risks, every patient in the network is assumed to be at some degree of risk for unsafe transitions of care if they are in motion between settings of care. Thus the best practice approaches known and available are included such as the identification of the primary caregiver, the use of teach back to ascertain accuracy of understanding of the information that is communicated with



patients and the shared decision making that comes with self- management principles focus on the *combination* of services necessary to realize improved population metrics.

- St. Vincent's Health Partners, Inc. specifically supports the goals of the SIM as follows:
 1. We support provider representation in SIM governance via Steering Committee
 2. We support the promotion of Patient Centered Medical Homes for all PCPs
 3. We support a "glide path" to provide practices the support to develop the infrastructure as they transform toward becoming patient centered medical homes
 4. We support the expansion of value-based payment broadly consistent with the Medicare SSP to all covered populations, including Medicaid.
 5. We support providing assistance at the network level to help provide individual practices the necessary tools to transform, and to develop the interoperability of various electronic systems throughout the network. We support value based payment reforms tied to common scorecard and care experience.
 6. We support data aggregation necessary for consumer transparency.

Our organization fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,

A handwritten signature in black ink, appearing to read "Raskauskas", written over a light blue horizontal line.

Thomas A. Raskauskas, MD, MMM
President/CEO
St. Vincent's Health Partners, Inc.

July 15, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application, which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

Stamford Hospital is a 305-bed, not-for-profit community teaching hospital serving Stamford and the surrounding communities for more than 115 years. We provide access to the latest technology with a compassionate, patient-centered approach. The Hospital is an affiliate of the New York-Presbyterian Healthcare System, a major teaching affiliate of the Columbia University College of Physicians & Surgeons, and a member of the Planetree Alliance, a group of hospitals nationwide focused on patient-centered care. Below, I will outline our organization's support for healthcare innovation, as well as our specific support and alignment with the State's SIM Test Proposal.

Quality and Patient Safety Improvement

At Stamford Hospital, we believe that patient safety and quality go hand in hand and are committed to continually improving how we care for our patients and their families. Ensuring our patients receive appropriate, safe and effective care is a challenging process that requires the dedication of every member of the Stamford Hospital team – from our physicians, to our employees and our volunteers. Our top priority is to ensure patient safety and delivery of the highest quality of patient-centered care and we support the SIM Test's goal of developing an all payer quality and safety platform.

To that end, Stamford Hospital is pleased that our Vice President of Quality and Chief Quality Officer, Rohit Bhalla, MD, MPH, has been selected to serve on the SIM Quality Council. We are confident Dr. Bhalla will bring a wealth of knowledge to the council as they work to prioritize measures recommended by CMMI in the areas of Care Experience, Prevention / Screening, Chronic Illness Management, Care Coordination / Patient Safety, and Resource Efficiency. As the SIM Test is implemented, Stamford Hospital welcomes additional opportunities to be engaged in the governance and continued design of the Model.

Payment Reform and Value Based Insurance Design

Against the backdrop of a changing healthcare landscape, we are working to position ourselves for payment reform. This includes the execution of contracts with payers participating in the Connecticut Healthcare Exchange. In addition, as of January 2014, we have been participating in the Centers for Medicare and Medicaid Services Bundled Payments for Care Improvement Initiative. In 2015, we will be implementing our own Employee Accountable Care Organization. We look forward to the opportunity to share our learnings and experiences, while also learning from other employers across the State to share best practices in Value Based Insurance Design.

Primary Care Transformation

Through our employed physician network, Stamford Health Integrated Practices (SHIP), we continue to expand the scope of primary care services offered throughout our primary and secondary service area. As we prepare to pilot Advanced Medical Home (AMH) design in selected SHIP practices, we look forward to the possibility of partnering with the State in its three part strategy to advance primary care in Connecticut – whether through the AMH Glide Path, the Community and Clinical Integration Program or through Innovation Awards. We also look forward to participating in the Statewide Learning Collaborative(s) on this initiative.

Improving Population Health

In follow up to our 2013 Community Health Needs Assessment, we have developed an action plan that will serve as a roadmap for population health. Through this roadmap, and in collaboration with key partners, the Hospital will aim to:

- Improve lifestyle and address social/ environmental factors that contribute to chronic disease, and that lead to preventable hospitalizations and unnecessary Emergency Department visits.
- Improve access to primary, specialty and preventive services for all community residents.
- Improve the coordination of care between the Hospital, outpatient providers, the home and the patient to facilitate a more seamless connection between the Hospital system and the communities we serve.

In order to accomplish this, Stamford Hospital, in partnership with Charter Oak Communities, Stamford's public housing authority, has convened a Community Collaborative which brings together expertise in health care delivery, workforce development, nutrition and healthy eating, physical fitness and lifestyle, the built environment as well as community advocacy and support. Initially, the collaborative will focus its efforts on the Vita Health and Wellness District – two census tracts on Stamford's West Side which exhibit some of the greatest disparities in health and social determinants. As we proceed in our work, we are excited about the possibility of partnering with the State to have the Vita Health and Wellness District designated as one of the first Health Enhancement Communities in Connecticut.

Consumer Empowerment and Health Information Exchange

Understanding that the delivery of whole-person-centered care requires a transformation in how we respect and enable patients to be active participants in the management of their health, Stamford Hospital is working continuously to equip consumers with information, resources, tools and

opportunities to take an active role in managing their health at all points of interaction with our system. We have recently released the *mySH* Stamford Hospital Patient Portal – granting patients access to their own health information including visit history, medications, and test results. Furthermore, in our commitment to cost transparency and accountability - our services are rendered attainable by innovations such as price estimation, which informs patients of costs up front, not after the fact.

Finally, in an effort to better integrate and coordinate care across our Health System, we are actively implementing a Health Information Exchange to enable the seamless integration and sharing of clinical data between our SHIP practices and the Hospital. Further roll out will allow for connections with third parties (e.g. FQHCs, SNFS, Home Health Agencies, etc.) to enable the sharing of clinical information and smooth coordination of care across the full continuum of providers. We look forward to opportunities to partner with the State to enable broader data sharing and integration Statewide in support of the SIM Test.

In closing, Stamford Hospital supports the diligent work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

A handwritten signature in black ink, appearing to read "David L. Smith". The signature is fluid and cursive, with a large initial "D" and "S".

David L. Smith, FACHE
Senior Vice President, Strategy
Chief Strategy and Network Development Officer
Stamford Health System



July 8, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

StayWell Health Care, Inc. is a Federally Qualified Health Center founded in 1972, is a 501(c)(3) charitable organization located in Waterbury. StayWell provides medical, dental, mental health, and social services at six Waterbury locations. In 2013, StayWell served over 20,000 people from the Greater Waterbury area. Services provided by the agency include Women's Health, Adult Medicine, Pediatrics, Mental Health, Specialty Care Services, Dental Services, Wellness Care, on-site laboratory, Podiatry, a Diabetes Management Program, and child wellness and abuse prevention programs.

StayWell supports healthcare innovation by improving access, quality, equity, and care experience; empowering consumers through value based insurance design; making cost, quality, and performance data transparent to consumers; improving population health; reducing costs attributed to preventable hospitalizations and emergency room visits.

StayWell's participates in and commits to implementing CT's SIM through supporting provider participation in Workgroups: Quality, Practice Transformation, Equity & Access; advanced medical home standards, targeted technical assistance, Innovation Awards; and supporting data aggregation necessary for consumer transparency.

Our organization fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,

Donald Thompson
President / CEO

80 Phoenix Avenue, Suite 201, Waterbury, CT 06702 Phone: 203.756.8021 Fax: 888.965.5624 www.staywellhealth.org



July, 11, 2014

Mark Schaefer, PhD
Director of Healthcare Innovation
450 Capitol Avenue, 2nd Floor
Hartford, CT 06106

Dear Director Schaefer,

The Mohegan Tribe Health and Human Services Department supports Connecticut's State Innovation Model application to the Center for Medicare and Medicaid Services (CMS). This funding opportunity provides critical transformation steps of the health care delivery system for all Connecticut residents.

This key funding would allow Connecticut's Healthcare Innovation Plan to forge ahead in its efforts to establish a whole-person centered health system. The plan would foster implementation plans to improve care coordination, consumer empowerment, value based payment, workforce advances, along with the necessary policy and regulatory changes. These steps are critical to enhance the health of our populations, along with assuring quality and cost saving measures.

Sincerely,

Connie Hilbert, Executive Director
Health and Human Services

THE MOHEGAN TRIBE



University of Connecticut
School of Medicine

Health Disparities Institute

Salome Raheim, PhD, ACSW
Interim Co-Director

Judith Fifield, PhD
Interim Co-Director

July 1, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

The Bioscience Connecticut Health Disparities Institute (HDI) is sponsored by the University of Connecticut, bolstered by a network of community partnerships, and focused on enhancing research and the delivery of care to minority and underserved populations in the state.

Our current healthcare system doesn't work especially well for many of us, and hardly works at all for some of us. The demographic profile of Connecticut reflects the striking health inequities facing the state. On average, our residents have some of the highest per capita income and education levels of any other state, and many residents benefit from generous insurance coverage rates. Despite these indicators of wealth and progress, health inequities are persistently found in Connecticut. Poor health outcomes have consistently been found among Black/African-American, Latino and other racial-ethnic groups; persons with disabilities; sexual and gender minorities; the urban and rural poor; and other socially and economically disadvantaged groups.

HDI supports systems change that eliminates health disparities and promotes health equity. We support the state's SIM initiatives that will result in whole-person-centered care, the broad adoption of CLAS standards, the integration of population health and health equity indexing in the delivery of care, linkages between care delivery and the greater community in which that care is delivered, and the development of a primary care workforce responsive to the needs of all with the capacity to care for disparity populations.

We are committed to continued support and engagement for systems change through the SIM initiatives and are particularly supportive of the Consumer Advisory Board's sub-committee on Health Equity, ensuring Equity in all [SIM] Policy (EiaP), and the work of the Equity and Access Council.

An Equal Opportunity Employer

263 Farmington Avenue, MC 6229
Farmington, CT 06030-6229

Telephone: (860) 679-3815

Facsimile: (860) 679-1434

Web: <http://healthdisparities.uhc.edu>

Our organization fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,

A handwritten signature in dark ink that reads "Salome Raheim". The script is fluid and cursive.

Salome Raheim, PhD, ACSW
Dean and Professor
School of Social Work
University of Connecticut

A handwritten signature in dark ink that reads "Judith Fifield". The script is fluid and cursive.

Judith Fifield, Ph.D.
Professor and Director
Ethel Donaghue TRIPP Center
University of Connecticut Health Center



July 18, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Ave.
Hartford, CT 06106

RE: Connecticut State Innovation Model Test Grant Application

Dear Governor Malloy:

I am submitting this letter in support of the Connecticut's State Innovation Model (SIM) Test Grant Application that will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office to the Center for Medicare and Medicaid Innovation (CMMI).

United Connecticut Action for Neighborhoods mobilizes grassroots low-income consumers of healthcare through its Caring Families Project. Since 1984 UCAN has organized health care consumers on a variety of issues identified by consumers as important to them. For the past several years Caring Families' Leadership Team has focused on Medicaid and the Department of Social Services.

While Connecticut has made some positive changes to Medicaid as evidenced by the Person Centered Medical Home (PCMH) model, a better care delivery system with attention paid to equity and access, quality improvement, and consumer empowerment is possible. As payment systems shift from fee for service which is no longer sustainable to other types of systems UCAN is especially concerned that issues related to underservice be addressed and that patients experience enhanced quality of care. UCAN is aware of the risks entailed with shifting Medicaid patients into shared savings. We commit to participating in this process to insure that SIM promotes better access, health equity, and better quality of care. The current SIM plan represents the input of a number of consumer advocates and, more importantly, allows for participation throughout the design and implementations phases.

Improving access to higher quality and more equitable healthcare that produces better outcomes while controlling costs is a worthy goal for all.

Sincerely,

Alta Lash
Executive Director
United Connecticut Action for Neighborhoods

July 7, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

United Community and Family Services, Inc. (UCFS) is a Federally Qualified Health Center Look-Alike (FQHCLA) serving Eastern CT. We provide medical, women's health, dental, behavioral health, psychiatry, substance abuse and gambling addiction services to all, regardless of insurance status or ability to pay. In 2013, UCFS provided 15,492 clients with 104,325 visits. Overall, 65% of our clients are on Medicaid. Recently, UCFS received Level Three recognition as a Patient-Centered Medical Home from NCQA. Unlike the state's other FQHCs, UCFS receives no federal funding to support the services we provide.

UCFS is also a critical component of the healthcare workforce development system in CT, providing residency and internship opportunities for local colleges and universities. So far this year, we have provided rotations for 10 medical students and 9 Advanced Practice Registered Nurses; residency placements for 2 medical residents and 3 dental residents; and, internships for 3 dental interns and 60 behavioral health interns. UCFS is currently working with Three Rivers Community College to provide support and work placements for the Dental Assisting program, and with Quinnipiac University to provide a residency program for Advanced Practice Registered Nurses (APRNs).

UCFS supports healthcare innovation, particularly in those areas that improve quality; reduce disparities and support avenues towards addressing barriers to care; encourage transparency for consumers and providers; examine payment reform in a way that is fair, data-driven and patient-centered; and, reduce unnecessary and preventable hospitalizations and emergency room visits.



UCFS is specifically committed to:

- allowing providers and staff to participate in SIM governance, workgroup and other committee work;
- working towards advancing medical home standards, including informing and participating in technical assistance opportunities and awards initiatives;
- exploring workforce development opportunities, particularly targeted towards providers;
- supporting data aggregation efforts for consumer transparency; and,
- supporting value based payment reforms tied to common scorecard and care experience.

UCFS fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost.

Sincerely,



Chuck Seeman
President/CEO



July 14, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

Dear Governor Malloy,

Please accept this letter of support for Connecticut's State Innovation Model (SIM) Test Grant Application.

United Way of Connecticut operates Connecticut's 2-1-1 Health and Human Services Contact Center and related specialized contact centers. In this capacity, we help thousands of Connecticut residents each year who are looking for help finding and accessing health care services. We learn first-hand what obstacles many of Connecticut's health care consumers encounter as they attempt to secure the health care they need. In particular, the majority of our work is with populations that have traditionally had difficulty securing insurance coverage and accessing services.

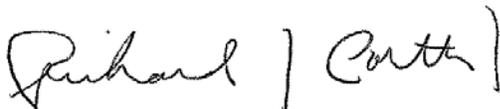
Connecticut's SIM initiative, and its SIM Test Grant Application, is intended to achieve the goals of: 1) better health for all residents regardless of race, socioeconomic status or location; 2) better health care quality and consumer experience; and 3) a decrease in the rate of growth of health care costs.

Thanks to the strong leadership of your office and that of Lieutenant Governor Wyman, Connecticut has been a national leader in implementation of the Affordable Care Act. And if Connecticut successfully secures the SIM test grant, it can lead again in efforts to improve the health care delivery system. In turn, this will greatly benefit Connecticut's health care consumers.

Connecticut's state leaders have demonstrated a commitment to opening up access and improving services for previously under-served populations. As such, I anticipate that the SIM test grant will be implemented in a way that monitors the impact of proposed service delivery and payment reforms on under-served populations and Medicaid clients, with the goal of doing no harm as innovative strategies are tested.

We support the SIM Program Management Office and the state in its effort to secure the SIM grant.

Sincerely,



Richard J. Porth
President & CEO
United Way of Connecticut



Stephen J. Farrell
Chief Executive Officer
475 Kilvert Street, Suite 310
Warwick, RI 02886
p 401.732.7348 p 800.447.1245
Stephen_J_Farrell@uhc.com

July 11, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, CT 06106

Re: UnitedHealthGroup Letter of Support for Connecticut's State Innovation Plan and Model Test Grant Application for the Center for Medicare and Medicaid State Innovation Model Grant Program.

Dear Governor Malloy:

UnitedHealth Group represents both UnitedHealthcare and Optum, and we are committed to modernizing our health care system by using innovative solutions to improve quality, and reduce variability and health care costs for all Americans. We have dedicated substantial time and resources to projects and initiatives that are aimed at achieving these goals. We strongly believe in innovative and transformative approaches to coordinate payment and delivery in our health care system, and that will improve population health outcomes in all states. That is why we are pleased to provide this letter of support for the general concepts and principals outlined in the State of Connecticut's State Innovation Plan- Model Test Grant application that is part of the State's Center for Medicare and Medicaid Innovation (CMMI) – State Innovation Model Grant. We look forward to continuing to work with the State on this important initiative; however we also would like to reserve the right to make any final determinations until more specific program details are made available to UnitedHealth Group.

UnitedHealth Group continues to work collaboratively with many varied stakeholders across the country to test and sustain new payment and service delivery models, and to help implement well-designed programs to improve comprehensive and integrated care coordination that we believe will better serve and treat our Members, and ultimately improve the quality of care and lower costs for everyone. These important collaborations include working with States to implement all-payer medical homes, price and provider transparency tools for our Members, and other value-based payment reform programs. Our deliberate evaluation of these programs proves that they are successful and have meaningful outcomes for quality and cost.

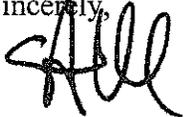
Recently, much of our collaborative work has included supporting States like Connecticut to design and implement their State Innovation Model Programs. UnitedHealth Group hopes to continue to work with the State to assist in implementing Connecticut's State Innovation Plan and its Model Test Grant application. Our experience is extensive in working with primary care

practices and other providers across the country to set up medical home models, to share data and information that meet critical milestones to ensure that our members are getting the most comprehensive and holistic care needed, to create successful value-based and incentive-based provider payment programs to increase the quality of care for our members and reduce costs, and we have sophisticated and well used member transparency tools for both cost and provider performance information. UnitedHealth Group is eager to share our expertise as you move forward with your innovation plan.

Given our company-wide commitment to modernize health care, create member and provider transparency and improve more comprehensive integration of health care to better our Members' health outcomes, we are again pleased to offer this letter of support to the State of Connecticut's State Innovation Plan.

We thank you for your leadership in this area and look forward to continued collaboration to meet Connecticut's goals and opportunities.

Sincerely,

A handwritten signature in black ink, appearing to read "S. Farrell", written over the word "Sincerely,".

Stephen J. Farrell
Chief Executive Officer



July 16, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

Dear Governor Malloy:

I write this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

As you know, Universal Health Care Foundation of Connecticut's (UHCF) mission is to be a catalyst for universal access to quality and affordable health care in our state. Since its inception, UHCF has been committed to leading change in how health care is both delivered and financed. Through our funding of organizing and advocacy, research and communications work, the Foundation has kept the patient and consumer perspective front and center. It is with this perspective that I serve as a member of the Health Innovation Steering Committee.

The Foundation is able to support the SIM Test Grant Application because the application proposes innovations that have the potential for expediting the transformation of health care in Connecticut. The advanced medical home, with its characteristic features of care coordination, patient empowerment and engagement with providers, and emphasizes on prevention, early detection and management of chronic illness holds promise for improving the quality of care and health outcomes.

A recent household survey commissioned by UHCF and five partner foundations found an extremely high prevalence of chronic illness -- 28% among respondents ages 18-44 reporting they have been told they have these conditions. Latino and African American respondents were more likely than their white counterparts to report a doctor diagnosing chronic conditions. Even among those covered by health insurance, cost was frequently cited as a reason why respondents delayed care. Among the 28% of adults who reported not receiving the care they needed and/or postponing needed medical care within the prior year, worrying about the cost was the predominant reason for their unmet medical needs (59%).

The SIM Application ties together a number of important elements to ultimately improve quality and reduce cost, including advancing toward universal access to patient-centered medical homes; value based insurance design that empowers consumers; moving provider reimbursement from fee-for-service to value based payment; making cost, quality and performance data transparent to consumers; employing nationally accredited standards and developing our own relevant standards (where needed) for monitoring progress in improving access, quality, equity and the care experience. The focus on improving population health brings a much needed public health perspective to health care reform.

One aspect of the SIM Test Grant, the inclusion of Medicaid in a shared savings arrangement, warrants proceeding cautiously in program design and implementation. Because of historically low reimbursement rates, most private health care providers in Connecticut have refrained from accepting Medicaid. This trend has begun to turn for the better through the program's implementation of the Person Centered Medical Home (PCMH). The SIM proposal to introduce shared savings into the Medicaid program raises concerns that incentives not be created to drive physicians away from participating in the program, cherry-pick patients or reward under-service.

There is the general assumption, with American health care, that people receive too much care, and we can save money while improving quality via shared savings initiatives. But that may be much less true with Medicaid than with Medicare or private coverage. According to the Congressional Budget Office's recently released long-term budget forecastⁱ, during the period between 1990 and 2012, Medicare average annual spending per capita, adjusted for age and other beneficiary characteristics, rose 1.2% faster than the maximum possible GDP growth per capita. For private insurance, that average annual rate of excess cost growth was 1.3%. Medicaid's excess cost growth, during that period was almost nothing -- 0.1%.

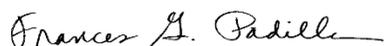
The Foundation is strongly in favor of reorganizing health care delivery – for Medicaid and the general population-- to better organize care, as we in Connecticut have already begun through PCMH. But the assumption that the same kinds of cost savings theories apply to Medicaid as to Medicare and private coverage in Connecticut must be carefully analyzed. The SIM proposal includes a deliberative, transparent and inclusive process that will be necessary for ensuring that we as a state avoid negative consequences on those served by Medicaid, a population of people who already must scrape and scratch for every-day survival.

The Foundation believes it is critical that the SIM Test Grant operational implementation be carried out with a meaningful and demonstrated commitment to be deliberative, transparent and inclusive of a cross-section of consumers, advocates, state officials, health care providers, and multiple other stakeholders to ensure that adverse effects are avoided, particularly on Medicaid beneficiaries. The Foundation supports an especially well-facilitated process for examining all the financing options available to address the socio-economic determinants affecting chronic illness in populations served through Medicaid.

It is generally critical that consumers participate meaningfully in the deliberations, design and operations of SIM initiatives. Therefore, the Consumer Engagement activities outlined in the proposal, accompanied by consumer representation on the Health innovation Steering Committee, its work-groups and the Consumer Advisory Board are all instrumental to the SIM Test Grant's ultimate success in Connecticut.

With the provisos noted, the Universal Health Care Foundation of Connecticut offers its support to the Connecticut Office of the Health Care Advocate's SIM Program Management Office as it seeks to secure funding for innovations to ultimately improve health outcomes for the people of our state.

Sincerely,



Frances G. Padilla
President
Universal Health Care Foundation of Connecticut

ⁱ See Table 2-1 at page 34 of <http://cbo.gov/sites/default/files/cbofiles/attachments/45471-Long-TermBudgetOutlook.pdf>



University of Connecticut
Center for Public Health and Health Policy

publichealth.uconn.edu

July 16, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

The Center for Public Health and Health Policy provides leadership in public health programing, research, and policy analysis at the University of Connecticut. We have an extensive track record of providing program evaluation services and policy analysis related to federal, state, and local healthcare reform initiatives. The Center has expertise in survey methodology, qualitative research methods, and the statistical analysis and modeling of complex data.

The Center will partner with Yale University to provide program evaluation and monitoring services for the SIM test grant. We will provide expertise for both the rapid-cycle evaluation activities described in the application and the more focused analysis of changes in healthcare delivery and access to care associated with reform efforts. Our faculty and staff have extensive experience in the data collection, management, analytic and reporting activities described in the application and are accustomed to working collaboratively with federal agency personal and external evaluation contractors in these activities.

The Center for Public Health and Health Policy fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,

Robert H. Aseltine, Jr., PhD
Professor and Deputy Director
Center for Public Health and Health Policy
UConn Health



University of Connecticut Health Center

Frank M. Torti, M.D., M.P.H.
Executive Vice President for
Health Affairs
Dean, School of Medicine

July 16, 2014

The Honorable Dannel P. Malloy
Governor of the State of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application being submitted by the Office of the Healthcare Advocate to the Center for Medicare and Medicaid Innovation (CMMI).

The University of Connecticut Health Center, our state's only public academic medical center, and the University of Connecticut (UConn), our state's flagship university, have both been integrally involved in the development of Connecticut's State Healthcare Innovation Plan (SHIP) and Connecticut's SIM test grant proposal. We endorse the plan and the proposal and will actively participate in their fulfillment.

UConn Health includes a hospital, a medical group, the only state-supported medical and dental schools, public health programs that grant both master's and doctoral level degrees, master's and doctoral level graduate programs, and a wide array of research activities. UConn Health has four missions: clinical care, research, education, and service to our community – particularly to Connecticut's disadvantaged populations. UConn Health is a safety-net provider and a major participant in Connecticut's Medicaid program. The schools of nursing, pharmacy and social work – and a number of allied health professions programs – are based at the main UConn campus.

As Dean of the UConn School of Medicine and Executive Vice President for Health Affairs, I represent UConn Health and UConn on the Healthcare Innovation Steering Committee which has overseen the development of the plan and proposal. I will remain on the steering committee through the implementation of our SIM program. UConn and UConn Health have provided expertise and staffing to the SIM core planning team. My office supported the development of the workforce initiatives and drafted the language that describes them in both the plan and proposal. UConn Health will contribute to the execution of all of the workforce initiatives and, in some instances, lead them. We will also participate in and provide administrative support to the Workforce Council, which is charged with building collaborations among our

An Equal Opportunity Employer

Suite AG087
263 Farmington Avenue, Mail Code 1920
Farmington, Connecticut 06030

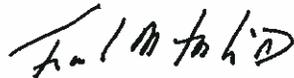
Telephone: (860) 679-2594
email: ftorti@uchc.edu

schools, providers, and payers to ensure that Connecticut has the health workforce it needs in terms of numbers, composition, and education to meet our residents' need for services and to do so in keeping with the new models of care delivery envisioned in this proposal. Toward this end, I will work directly with my colleagues across UConn, including the Health Center, and with the leadership of the Connecticut State Colleges and Universities, Yale University, and Quinnipiac University, all of which have also participated in SIM and will continue to do so.

UConn Health supports the value-based payment reforms outlined in our SIM proposal, particularly shared savings. Like other academic medical centers, we are working to expand our market, as well as control our unit costs while enhancing both the quality of our services and their outcomes. We are striving toward coming in under cost projections for our services and – considering the problem of fixed costs – receiving a portion of the savings is important to us.

Our organization fully supports the efforts of Connecticut's Office of the Healthcare Advocate - SIM Program Management Office as it seeks funding to support activities to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost. I urge CMMI to award a State Innovation Model Test Grant to the State of Connecticut. This effort has engaged a broad coalition of professionals and representatives of state agencies, private institutions and pertinent interests for nearly two years. The grant money is important to jumpstarting the implementation phase, and working in concert with CMMI to drive health delivery and payment reforms is potentially of even greater importance to our state. We see the fruits of these combined efforts in the states that surround us and feel it is time for Connecticut to join in.

Sincerely,

A handwritten signature in black ink, appearing to read "Frank M. Torti". The signature is written in a cursive, slightly slanted style.

Frank M. Torti
Dean and Executive Vice President
UConn Health Center

July 8, 2014

Hon. Dannel P. Malloy
Office of the Governor
210 Capitol Avenue
Hartford, CT 06106

Dear Governor Malloy,

We are writing to express our full commitment to the State of Connecticut's plan for health care innovation. We strongly support the State's application to CMS for the State Health Care Innovation Model Test grant.

Over the past 7 years, UConn School of Pharmacy faculty members have been actively involved in several health care initiatives led by the CT Office of Health Reform and the Departments of Social Services and Public Health:

- Health Care Cabinet Health Technology Workgroup (Dr. Marie Smith)
- Sustinet Committees - Health Info Technology (Dr. Marie Smith) and Preventive Healthcare (Professor Tom Buckley)
- CMS Medicaid Transformation Grant (Dr. Marie Smith, Professor Tom Buckley, Dr. Devra Dang)
- CDC Immunization Grant (Professor Tom Buckley)
- CMS Application for CT Dual Eligibles (Dr. Marie Smith)
- SIM Practice Transformation Taskforce (Dr. Marie Smith)

We also have several clinical pharmacists/faculty members who provide medication management services for Medicaid beneficiaries at the Burgdorf Clinic, Brownstone Clinic, Institute of Living, and Community Health Center Inc, and UConn Health Center. Our clinical faculty members collaborate with multiple health care clinicians, patients, and their caregivers at these sites and provide medication management services that assure safe, evidence-based, and cost-effective medication use. In addition, we have conducted research that demonstrates the expertise of pharmacists to *identify, resolve, monitor, and coordinate* medication-related problems through better care coordination and collaboration across patients, caregivers/families, and multiple health care professionals and providers.

Based on our previous work with the CT Department of Social Services with the CMS Medicaid Transformation Grant project "***Impact of Pharmacist-provided Medication Therapy Management Services in a Medical Home Model,***" we demonstrated that pharmacist-provided medication management services improve patient care quality and contribute to total health care savings in primary care settings.:

- Medicaid beneficiaries take an average of 15 active medications each day
- 51% of all medication discrepancies were related to discontinued medications by either the patient or the prescriber that required further evaluation by the pharmacist
- 76% of all medication-related problems involved preventable medication errors
- Pharmacists resolved 83% of medication-related problems within 4 face-to-face medication management encounters with patients and their caregivers/family
- Pharmacist-provided medication management services resulted in an estimated annual savings in drug costs (23%) and total health care costs (24%)

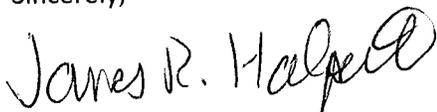
As clinical practitioners and health services researchers, we are committed to reforms and innovations that will improve the health care delivery system in Connecticut, as well as the health of the state's residents:

- Primary care must be a focus of delivery system reforms
- The primary care workforce needs to include pharmacists who provide direct patient care and collaborative medication management services
- The health care workforce must be trained or re-trained to deliver team-based care and community-based health care teams
- State must develop structures, policies, and procedures for sharing electronic medical records, actionable treatment plans, and all-payer claims data
- State can convene multiple stakeholders -- payers, providers, consumers, policymakers, state agencies, educators, and researchers -- to consider the cost of care and new models for health care delivery and payment reform

The CMS State Health Care Innovation Model Test grant will provide Connecticut with the opportunity for a multi-stakeholder approach to develop a much needed high-value, integrated plan for delivery system reform and transition. This type of transformational reform requires full stakeholder participation – government, providers, payers, employers, patients, and community members – in all aspects of development and implementation. Connecticut is in the unique position to enhance its existing collaboration between agencies, UCONN, and community organizations.

We support and look forward to working with the State and other stakeholders on the SIM Test Grant to achieve a team-based approach to innovative health care delivery and payment reforms.

Sincerely,



James Halpert, PhD
Dean and Professor



Marie A. Smith, PharmD
Asst. Dean, Practice and Public Policy Partnerships

July 18, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

The University of Michigan Center for Value-Based Insurance Design is pleased to submit this letter in support of the State of Connecticut's application for a State Innovation Model (SIM) Testing grant to the Center for Medicare & Medicaid Innovation. Enhancing the consumer health care experience, controlling medical spending growth, and improving quality through clinically nuanced benefit designs and payment models is of utmost importance to our organization. The goals of this SIM proposal: 1) establish primary care as the foundation of a care delivery; 2) integrate and coordinate care to meet consumer needs; 3) increase transparency to allow better decisions; and, 4) provide incentives that encourage value over volume, are clearly aligned with our Center's mission. We laud your efforts to engage a broad multi-stakeholder group as part of the process to reinvent Connecticut's healthcare system.

We were most pleased to see Value-Based Insurance Design (V-BID) principles included in this SIM proposal. The premise of V-BID is to align patients' out-of-pocket costs, such as copayments and deductibles, with the value of health services. By reducing barriers to high-value treatments (through lower costs to patients) and discouraging low-value treatments (through higher costs to patients), these plans can enhance transparency, improve health outcomes, reduce disparities and reduce health care cost growth. The Health Enhancement Program for Connecticut state employees is one of the best known and most successful implementations of V-BID nationwide. The V-BID Center supports a consistent value-based approach for organizing and paying for healthcare in Connecticut, with a goal of person-centered and integrated care.

The V-BID Center is pleased to be a part of this process. We are already working closely with several state agencies and are committed to collaborate with all stakeholders to ensure its success. To that end, we stand ready to work with the State on the implementation of the State Innovation Models initiative and are willing to commit to providing representation on the SIM Advisory Committee and/or appropriate Workgroup(s).

Best of luck with this most important initiative,

Sincerely,



A. Mark Fendrick, MD
Director, University of Michigan Center for Value-Based Insurance Design

July 11, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

I am pleased to send this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

Western Connecticut Health Network (WCHN) is the region's premier, patient-centered health care organization serving residents of Western Connecticut and adjacent New York. Our University-affiliated network is now anchored by three nationally recognized hospitals, Danbury Hospital, New Milford Hospital, and Norwalk Hospital, as well as their affiliated organizations. In addition to the three hospitals, our not-for-profit organization provides a continuum of care including numerous medical practices and sub-specialties across the region, home health care services, and a nationally renowned biomedical research institute.

WCHN shares Connecticut's vision to establish primary care as the foundation of a care delivery system that is consumer and family centered and which rewards value over volume. We are implementing many strategies with an increasing focus on prevention, population health and integration with community resources. These include partnering with our local Federally Qualified Health Centers in new and innovative ways engaging our Residents and students in the primary care setting to cultivate the next generation of practitioners. Through these efforts, we can achieve a holistic, patient-centered health care system that improves community health and access to care; ensures superior access, quality, and care experience; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs for our diverse community.

We support helping primary care practices become Advanced Medical Homes, the core elements of which include whole-person centered care, enhanced access, population health

management, team-based coordinated care, and evidence-based informed clinical decision making. SIM test grant funding provides the opportunity to invest in this critical component of our health care system. The AMH glide path, targeted technical assistance and innovation awards programs will provide many primary care providers with the opportunity to transform their practices.

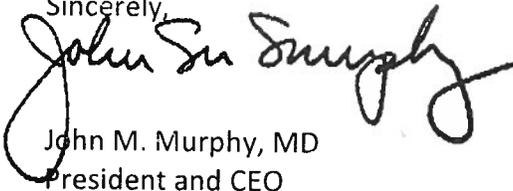
We also applaud the proposed Community and Clinical Integration Program. This program will offer targeted technical assistance and Innovation Awards to spur investments and accelerate advancement in community linkages with social service (e.g., housing, food assistance), home health, long term supports and services (LTSS), and preventive health providers; “hot spotting” models of integrated care; and integrated behavioral health.

Quality measure alignment among Connecticut’s payers is long overdue. The development of common quality and care experience measures and a common performance scorecard is an important innovation that will better focus the efforts of providers and reduce redundancies and associated administrative costs.

Finally, we support the transition to value-based payment methods similar to the Medicare Shared Savings Program, which will help drive a much needed change in focus from volume to value. We recognize the importance of provider involvement throughout the planning and implementation process and pledge our continued participation and engagement.

WCHN fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut’s residents.

Sincerely,

A handwritten signature in black ink that reads "John M. Murphy". The signature is fluid and cursive, with a large initial "J" and "M".

John M. Murphy, MD
President and CEO

Western Connecticut Health Network



WHEELER CLINIC
Fostering positive change.

July 10, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application, which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

Wheeler Clinic is a private non-profit community organization providing a comprehensive continuum of mental health, substance abuse recovery, child welfare, prevention, early childhood, community and juvenile justice, primary care and special education services. Established in 1968, Wheeler Clinic provides direct services to over 17,000 individuals and families each year including individuals of all ages and from all socio-economic and cultural backgrounds. It is the mission of Wheeler Clinic to foster positive change in the lives of individuals, families and the community.

Wheeler Clinic shares Connecticut's vision to establish primary care as the foundation of a care delivery system that is consumer and family centered and which rewards value over volume. We support an increasing focus on prevention, population health and integration with community resources. Through these efforts, we can achieve a whole-person-centered health care system that improves community health and eliminates health inequities; ensures superior access, quality, and care experience; empowers individuals to actively participate in their health and healthcare; and improves affordability by reducing healthcare costs.

We support helping primary care practices become Advanced Medical Homes, the core elements of which include whole-person centered care, enhanced access, population health management, team-based coordinated care, and evidence-based informed clinical decision making. SIM test grant funding provides the opportunity to invest in this critical component of our health care system. The AMH glide path, targeted technical assistance and innovation awards programs will provide many primary care providers with the opportunity to transform their practices.

We also applaud the proposed Community and Clinical Integration Program. This program will offer targeted technical assistance and Innovation Awards to spur investments and accelerate advancement in community linkages with social service (e.g., housing, food assistance), home health, long term supports and services (LTSS), and preventive health providers; “hot spotting” models of integrated care; and integrated behavioral health.

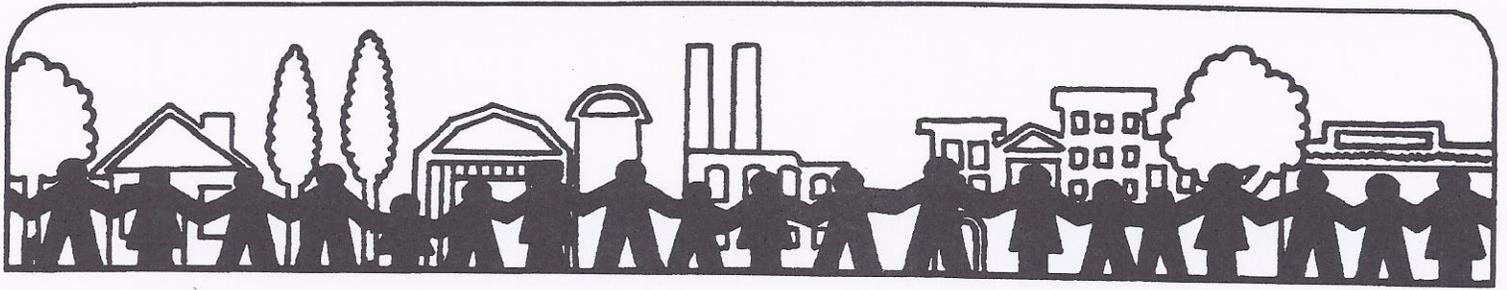
Finally, we support the transition to value-based payment methods similar to the Medicare Shared Savings Program, which will help drive a much-needed change in focus from volume to value. We recognize the importance of provider involvement throughout the planning and implementation process and pledge our continued participation and engagement.

Wheeler Clinic fully supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut’s residents.

Sincerely,

A handwritten signature in blue ink that reads "Susan Walkama". The signature is fluid and cursive, with the first name "Susan" being larger and more prominent than the last name "Walkama".

Susan Walkama, LCSW
President and CEO



Windham Regional Community Council, Inc.

July 15, 2014

Jeffrey G. Beadle, Executive Director

The Honorable Dannel Malloy
Governor, State of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Ct. 06106

Dear Governor Malloy,

On behalf of our Board of Directors, I am very pleased to have the opportunity to submit a letter in support of the Connecticut State Innovation Model Test Grant Application being submitted by the Office of the Health Care Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation.

The Windham Regional Community Council, [WRCC], is a community-based agency that creates and administers a broad range of services that directly affect the lives of citizens in Eastern Connecticut.

WRCC is overseen by a volunteer Board of Directors and operates as a 501 [c] 3 agency organized for charitable purposes. Primary services of the Agency include the operation of a State licensed and NAEYC accredited Early Child and Education Center, a Graustein-funded Children's First and Discovery Program focused upon parental engagement, The Windham Youth Services Bureau offering prevention and intervention services, mentoring, afterschool and teen pregnancy prevention services and a Juvenile Review Board diversionary program, The Windham AIDS Program offering medical case management and medication adherence services, The Greater Windham area Veteran's Advisory Center providing direct benefit assistance to Veterans and their families, the Eastern Ct. Assistive Technology Center providing technical assistance to increase the independence of people with disabilities, and in addition to managing the region's multi partner Ten Year Plan to End Homelessness, WRCC offers direct housing services that include Rapid Rehousing, Eviction and Foreclosure Prevention Intervention, HUD funded Supportive Housing Programs and Property Management services.

The provision of these services provides an in depth understanding of the challenges that economically and culturally diverse populations confront in sustaining a stable and healthy life for themselves their families and their children.

WINDHAM AIDS PROGRAM • WINDHAM YOUTH SERVICES BUREAU • WINDHAM VETERAN'S CENTER
WINDHAM IMMUNIZATION PROGRAM • WINDHAM CHILDREN'S FIRST INITIATIVE
BEYOND SHELTER • HOUSING MANAGEMENT • WINDHAM FAMILY LIVING PROGRAM • PROJECT HOME
A PLACE TO STAY • FETAL AND INFANT MORTALITY REVIEW • WILLIMANTIC FARMER'S MARKET
WINDHAM HEIGHTS DAY CARE CENTER AND THE NEW HEIGHTS CHILD DEVELOPMENT PROGRAM

872 MAIN STREET • WILLIMANTIC, CT 06226 • PHONE (860) 423-4534 • FAX (860) 423-2601 • www.wrccinc.org

A common thread that weaves throughout all our citizens in Eastern Ct. whether it is the parents of a three year old or an adolescent, an individual of family impacted by HIV, a Veteran of a foreign war, a person with disabilities or a person or family confronting or overcoming homelessness, is their need for accessible, quality, and affordable health care services. And though we present as an urban center in Windham, the fact is that Eastern Ct. is primarily a rural area with the largest access disparity in the State despite the very best efforts of our FQHC, the Generations Community Health Center and other Providers to address the disparity gap in access to physical, behavioral and dental health care.

We are proud to be part of a State that was one of the Nation-wide leaders in the ACA Health Insurance rollout and the achievement of a record signup and we are very enthused to participate in the State's effort to participate in the ACA's SIM grant program enhance the delivery system to address the need for quality, affordable and accessible Health care for all our citizens in Connecticut.

To demonstrate our organization's commitment to a successful SIM initiative in our State, the WRCC Board of Directors has volunteered the services of it's Executive Director to serve on both the Consumer Advisory Board and the Steering Committee of the SIM. Since December of 2013 , he has spend considerable time and effort on this endeavor and the agency will continue to endorse his participation in this initiative throughout the coming six month plus planning period for the balance of 2014 and throughout the four years implementation period.

In closing, I wish to commend Governor Malloy for prioritizing the need for Health Care Reform in Connecticut, his designation of Lt. Governor Nancy Wyman to lead the effort as Chairperson of the SIM Steering Committee, and I wish to acknowledge the work of the State's SIM Management Team led by Dr. Mark Schaeffer. Under their leadership I have no doubt in my mind that Connecticut will be in the forefront of the nation in transforming the quality, accessibility and affordability of Health care in our State.

Sincerely,

A handwritten signature in blue ink that reads "Jeffrey G. Beadle". The signature is written in a cursive style with a large initial "J".

Jeffrey G. Beadle
Executive Director

July 21, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

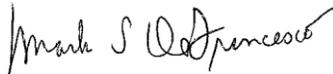
Dear Governor Malloy,

I am pleased to submit this letter in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted by the Office of the Healthcare Advocate's SIM Program Management Office, to the Center for Medicare and Medicaid Innovation (CMMI).

- Physicians for Women's Health / Women's Health Connecticut (PWH/WHC) is a statewide practice of more than 200 ObGyns who provide healthcare for over 300,000 women in the state.
- We are dedicated to improving healthcare for women in Connecticut, and have long been committed to providing patient centered, value-based care.
- We support Connecticut's SIM, and are committed to helping it succeed. As our Vice President, and former Chief Medical Officer, I will be personally participating on the quality committee of the SIM.

PWH/WHC supports the outstanding work of the SIM Program Management Office in its efforts to secure funding to improve access to higher quality and more equitable healthcare that produces better health outcomes at a reduced cost for all of Connecticut's residents.

Sincerely,



Mark S. DeFrancesco, MD, MBA, FACOG

Vice President

Physicians for Women's Health / Women's Health Connecticut

Yale SCHOOL OF MEDICINE

PAUL TAHERI, MD, MBA
*Deputy Dean for Clinical Affairs
Chief Executive Officer, Yale Medical Group*

PO Box 208067
New Haven CT 06520-8067
T 203 785-5790
F 203 737-3593
paul.taheri@yale.edu

courier
Sterling Hall of Medicine (SHM)
Room I-213
333 Cedar Street
New Haven CT 06510

July 17, 2014

The Honorable Dannel Malloy
Governor of Connecticut
State Capitol
210 Capitol Avenue
Hartford, Connecticut 06106

RE: CONNECTICUT STATE INNOVATION MODEL TEST GRANT APPLICATION

Dear Governor Malloy:

I am pleased to write in support of Connecticut's State Innovation Model (SIM) Test Grant Application which will be submitted to the Center for Medicare and Medicaid Innovation (CMMI). I am the CEO of the Yale Medical Group, a multispecialty physician practice comprised of more than 1,200 physicians which supports the clinical teaching and research missions of the Yale University School of Medicine.

My colleagues and I commend your Administration for developing an ambitious plan to promote a care delivery system that is consumer and family centered and which rewards value over volume. We support an increased focus on prevention, population health and integration with community resources. We share your vision for helping primary care practices become Advanced Medical Homes which emphasizes whole-person centered care, enhanced access, population health management, team-based coordinated care, and evidence-based informed clinical decision making.

We look forward to working with the Office of the Healthcare Advocate to implement the proposal. We look forward to helping to develop the information systems and analytical tools to support a transition to value-based payment similar to the Medicare Shared Savings Program. My colleagues and I also hope to work with the Office of the Healthcare Advocate and Connecticut's payers to align quality measures across the clinical spectrum. We will actively participate in the SIM Quality Council. This is an important innovation that will better focus the efforts of providers and reduce administrative burden.

The Yale Medical Group applauds the SIM Program Management Office for developing this application, and we look forward to working together to improve access to affordable, high quality, health care for all of Connecticut's residents.

Sincerely,



Paul Taheri, MD MBA
CEO, Yale Medical Group

