Connecticut Statewide Facilities and Services Plan Addendum Report Healthcare Cabinet Discussion

Altarum Institute

September 24, 2024

Agenda

Project Goals and Overview

Section 1: Social Determinants of Health

Section 2: Access and Affordability

Section 3: Health Outcomes

Q&A and Closing

Project Goals and Overview

Overview of the FSP

- The plan is a blueprint for health care delivery in Connecticut
- It serves as a resource for policymakers and those involved in the CON process
- It provides information, policies, and projections of need to guide planning for specific health care facilities and services

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Goals of the FSP

- Prevent excess capacity, duplication of services, and underutilization of medical facilities
- Identify gaps in services and unmet need
- Provide clear guidelines for adding services
- Foster fair competition and a level playing field for entry into the healthcare market
- Improve access to services through transparency and data on geographic distribution

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Goals of the FSP Addendum Report

The FSP addendum focuses on the implications of health outcomes on the health care needs and utilization.

Draw on components of the State Health Assessment, State Health Improvement Plan, and future AHEAD Health Equity Planning priorities.

Identify the role of healthcare providers in promoting SDOH initiatives.

The Relationship Between the SHA, SHIP, and FSP Addendum Report

- The **State Health Assessment (SHA)** examines the overall health of the state's population, including health conditions and social determinants of health.
- Drawing on the SHA and extensive stakeholder input, the **Healthy Connecticut 2025 State Health Improvement Plan (SHIP)** is a strategic plan that lays out state priorities and policy recommendations to improve health outcomes for Connecticut residents.
    - It focuses on cross-sector partner collaboration and addresses social, economic, and environmental determinants of health.
- The **FSP addendum report** focuses on how health conditions and social determinants impact health care needs and utilization.
    - Along with the next SHA, the data analyses in the addendum report will lay the foundation for developing the goals and objectives of future SHIPs.
    - It focuses on public health and health services, so the Office of Health Strategy (OHS) and the Department of Public Health (DPH) both contribute to its development.

Proposed Sections of the Addendum Report

1. **Social Determinants of Health:** Demographic, Economic, Household, and Community Characteristics
2. **Access and Affordability:** Health Care Coverage, Cost-Related Barriers, and Access to Care
3. **Health Outcomes:** Health Behaviors, Physical and Behavioral Health, and Chronic Conditions

Cross-Cutting Features: Light literature reviews, data analyses/visualizations, and related policies and programs in Connecticut and comparable states

Cross-Tabulations: gender, age group, race/ethnicity, household income, geographic areas, and limited English proficiency

Primary Data Sources

- **U.S. Census Bureau American Community Survey (ACS)**: socioeconomic characteristics, health coverage types, and disability.
- **U.S. Census Bureau Current Population Survey**: food security and household spending on insurance premiums and out-of-pocket medical costs.
- **Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System (BRFSS):** gender identity, sexual orientation, care access, health behaviors, and health outcomes.
- **Agency for Healthcare Research and Quality Medical Expenditure Panel Survey**: insurance premiums and deductibles.
- **Substance Abuse and Mental Health Services Administration (SAMHSA) National Survey on Drug Use and Health (NSDUH)**: mental health and substance abuse.

Project Timeline

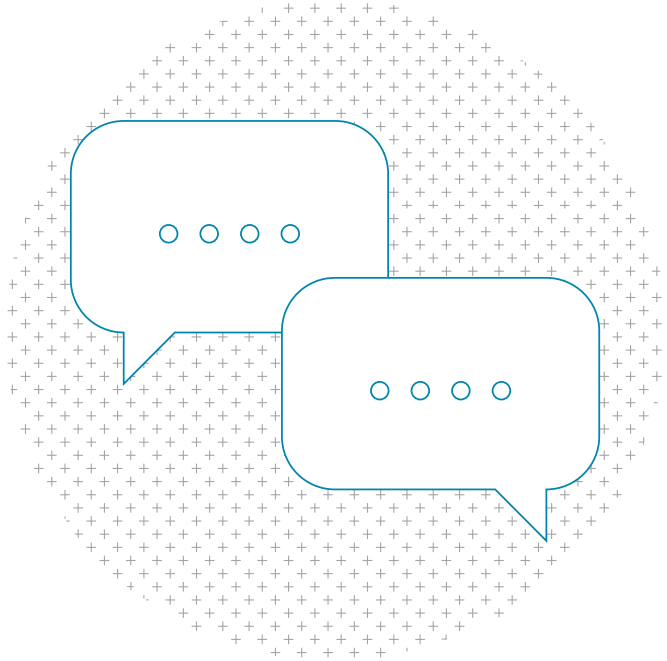
September 2024: Conduct two listening sessions to inform the addendum report approach

October 2024: Finalize the main FSP report based on public comment

November–February 2024: Collaborate with the Connecticut Office of Health Strategy and Department of Public Health to draft, review, and refine the FSP addendum report

March 2025: Finalize the FSP addendum report

Discussion Questions to Consider Today



Are additional data points critical for understanding health care needs, utilization, and outcomes?

Are there additional data sources we should explore?

Are there specific population groups we should consider adding to our comparative analysis?

Section 1: Social Determinants of Health

1.1 Demographic Characteristics

AGE, GENDER, RACE/ETHNICITY, AND SEXUAL ORIENTATION

Variables	Cross-Tabulations
Age distribution	Year, Connecticut Planning Region
Gender	Year, Connecticut Planning Region
Race/ethnicity	Year, Connecticut Planning Region
Transgender Status	Metro Area
Sexual Orientation	Metro Area

1.1 Demographic Characteristics (Continued)

NATIVITY AND LANGUAGE

Variables	Cross-Tabulations
Citizenship status	Year, Connecticut Planning Region
Countries of origin for immigrants	Year, Connecticut Planning Region
People with limited English proficiency	Year, Connecticut Planning Region
Languages spoken by people in limited English-speaking households	Year, Connecticut Planning Region
Percentage of people in limited English-speaking households	Year, Connecticut Planning Region

1.2 Household Composition

PARENTS, CHILDREN, FAMILIES, AND HOUSEHOLDS

Variables	Cross-Tabulations
Marital status	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency
Parental status	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency
Mean family size	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency
Children in single-parent households	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency
Adults in single-parent households	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency
Older adults 65+ living alone	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency

1.3 Employment and Economic Security

EDUCATION, EMPLOYMENT, AND INCOME

Variables	Cross-Tabulations
Educational Attainment	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency
Labor force participation and unemployment	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency
Personal and household income	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency
Poverty level	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency
Reliance on any public benefits	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency

1.3 Employment and Economic Security (Continued)

HOUSING OWNERSHIP AND AFFORDABILITY

Variables	Cross-Tabulations
Housing ownership status	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency
Housing affordability	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency
Homelessness	Year, Continuum of Care (CoC) Geographic Service Area, Age Group, Gender, Race/Ethnicity

Social Determinants of Health Discussion

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Are there specific population groups we should consider adding to our comparative analysis?

Section 2: Access and Affordability

2.1 Health Insurance Coverage

COVERAGE SOURCE AND UNINSURANCE

Variables	Cross-Tabulations
Uninsurance rates	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency, Educational Attainment, Poverty Level
Medicaid	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency, Educational Attainment, Poverty Level
State-funded insurance programs	Year
Medicare	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency, Educational Attainment, Poverty Level
Health insurance through employer/union	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency, Educational Attainment, Poverty Level
Health insurance purchased directly	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency, Educational Attainment, Poverty Level
Marketplace insurance	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency, Educational Attainment, Poverty Level

2.1 Health Insurance Coverage (Continued)

PREMIUMS AND DEDUCTIBLES

Variables	Cross-Tabulations
Private health insurance premiums for individual, individual-plus-one, and family plans	Year, wage quartiles
Private health insurance deductibles for individual, individual-plus-one, and family plans	Year, wage quartiles
Individuals enrolled in high-deductible plans	Year, wage quartiles
Private health insurance premiums as a percentage of household income	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Poverty Level

2.2 Care Affordability

COST BARRIERS AND OUT-OF-POCKET COSTS

Variables	Cross-Tabulations
Could not see a doctor due to cost	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Out-of-pocket healthcare costs	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Poverty Level

2.3 Access to Care

ACCESS LOGISTICS AND PHYSICIAN CONCORDANCE

Variables	Cross-Tabulations
Access to internet	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency, Educational Attainment, Poverty Level
At least one vehicle available in the household	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency, Educational Attainment, Poverty Level
Has a personal health care provider	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Gender concordance of physicians and population	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency, Educational Attainment, Poverty Level
Racial/ethnic concordance of physicians and population	Year, Connecticut Planning Region, Gender, Age Group, Race/Ethnicity, Limited English Proficiency, Educational Attainment, Poverty Level

2.3 Access to Care (Continued)

CARE UTILIZATION

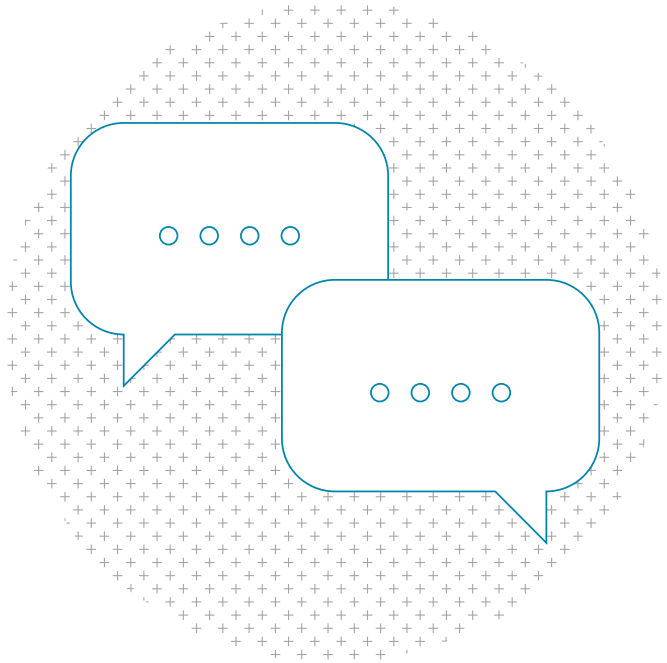
Variables	Cross-Tabulations
Routine check-up in the past year	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Dental visit in the past year	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Mammogram in past two years	Year, Metro Area, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Met colorectal cancer screening recommendation	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income

2.3 Access to Care (Continued)

IMMUNIZATIONS

Variables	Cross-Tabulations
Flu shot in past year	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Pneumonia vaccination ever	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Tetanus vaccination since 2005	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Shingles or zoster vaccine ever	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Current COVID-19 vaccination	N/A

Access and Affordability Discussion



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Section 3: Health Outcomes

3.1 Health Behaviors

NUTRITION AND EXERCISE

Variables	Cross-Tabulations
Fruit and vegetable consumption	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Household food security scale	Year, Metro Area
Areas with low access to food	Connecticut Planning Region, Race/Ethnicity
Physical activity	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Weight classification by Body Mass Index (BMI)	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income

3.1 Health Behaviors (Continued)

DRINKING AND SMOKING

Variables	Cross-Tabulations
Binge drinking	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Heavy drinking	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Smoker status	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
E-cigarette status	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income

3.2 Physical and Mental Health

DRINKING AND SMOKING

Variables	Cross-Tabulations
Fair or poor health	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
14+ days when physical health not good	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Age-Adjusted Mortality	Year

3.2 Physical and Mental Health (Continued)

CHRONIC CONDITIONS

Variables	Cross-Tabulations
Hypertension	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Skin Cancer	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Cardiovascular Disease	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
COPD	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Asthma	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
Diabetes	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income

3.2 Physical and Mental Health (Continued)

ORAL HEALTH

Variables	Cross-Tabulations
Any natural teeth extracted	Year, Metro Area, Gender, Age Group, Race/Ethnicity, Educational Attainment, Household Income
All natural teeth extracted	Year, Metro Area, Gender, Race/Ethnicity, Educational Attainment, Household Income

3.2 Physical and Mental Health (Continued)

MENTAL HEALTH

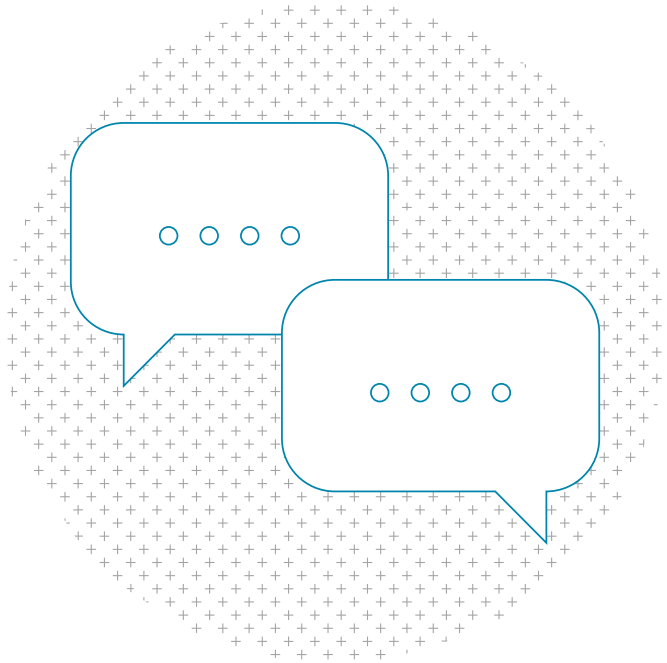
Variables	Cross-Tabulations
Past year any mental illness	Rural/Urban, Gender, Sexual Identity, Age Group, Race/Ethnicity, Educational Attainment, Poverty
Past year serious mental illness	Rural/Urban, Gender, Sexual Identity, Age Group, Race/Ethnicity, Educational Attainment, Poverty
Adults thought seriously about suicide	Rural/Urban, Gender, Sexual Identity, Age Group, Race/Ethnicity, Educational Attainment, Poverty
Adults made suicide plans	Rural/Urban, Gender, Sexual Identity, Age Group, Race/Ethnicity, Educational Attainment, Poverty
Youth thought seriously about suicide	Rural/Urban, Gender, Sexual Identity, Age Group, Race/Ethnicity, Educational Attainment, Poverty
Youth made suicide plans	Rural/Urban, Gender, Sexual Identity, Age Group, Race/Ethnicity, Educational Attainment, Poverty

3.2 Physical and Mental Health (Continued)

SUBSTANCE USE DISORDER

Variables	Cross-Tabulations
Either alcohol or drug use disorder	Rural/Urban, Gender, Sexual Identity, Age Group, Race/Ethnicity, Educational Attainment, Poverty
Alcohol use disorder	Rural/Urban, Gender, Sexual Identity, Age Group, Race/Ethnicity, Educational Attainment, Poverty
Drug use disorder other than marijuana	Rural/Urban, Gender, Sexual Identity, Age Group, Race/Ethnicity, Educational Attainment, Poverty
Opioid use disorder	Rural/Urban, Gender, Sexual Identity, Age Group, Race/Ethnicity, Educational Attainment, Poverty

Health Outcomes Discussion



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Question & Answers

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