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CONNECTICUT

Health Strategy

QUALITY COUNCIL (QC)

BY-LAWS

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ARTICLE I – MISSION STATEMENT/GOALS & OBJECTIVES

Section I – Mission Statement

The mission of Connecticut’s Office of Health Strategy (OHS) is to implement comprehensive, data-driven strategies that promote equal access to high-quality health care, control costs, and ensure better health outcomes for the people of Connecticut.

The Quality Council’s (QC’s) mission is to advise OHS on the definition and maintenance of an aligned set of quality measures for use in value-based contracts with Advanced Networks. The mission includes recommending measures focused on eliminating health disparities, including by but not limited to race, ethnicity, language, disability status, sexual orientation, gender identity, and sex. The QC’s mission also includes advising OHS on the definition and maintenance of measures and performance targets for OHS’ Quality Benchmarks program [codified in Connecticut General Statute Section 19a-754g](#).

Section II – Goals and Objectives

OHS will ensure that additional stakeholders from across the healthcare landscape, from consumers to providers, employers and the healthcare industry have input and feedback into the maintenance of:

- A. Quality benchmarks and analysis of the impact of cost growth benchmarks and primary care targets on quality and equity and vice versa.
- B. An aligned set of quality measures for use in value-based contracts with Advanced Networks.

ARTICLE II – DUTIES OF THE QC

Section I – Duties

The QC shall:

- A. Convene monthly, or less frequently if indicated by OHS.
- B. Assist OHS in the development and implementation of annual quality benchmarks across all public and private payers.

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- C. Reassess the aligned measure set on a regular basis to identify gaps, incorporate new national measures if appropriate as they become available, and keep pace with changes in quality measurement technology and clinical practice
- D. Ensure the development of clinical quality measures and quality benchmarks that can be stratified by race and ethnicity and advise OHS of capabilities or supports needed to ensure such measures and benchmarks are developed and implemented
- E. Advise OHS on monitoring for unintended consequences to quality produced by OHS' cost growth benchmark program and relay potential solutions to unintended consequences to OHS.
- F. Advise OHS on monitoring existing health inequities that could be exacerbated by the cost growth benchmark and relay potential solutions to OHS.
- G. Convene ad hoc design teams to resolve technical issues that arise in its work.

ARTICLE III – MEMBERSHIP

Section I – Members

The terms “member” or “members,” as used in these by-laws to refer to persons who have been appointed by the OHS Commissioner, the Commissioners of the Department of Social Services, Public Health, Mental Health & Addiction Services and the Office of the State Comptroller, or their designees.

Section II – Composition

The QC shall consist of no less than thirteen (13) members and no more than twenty-five (25) members who reside throughout Connecticut. The QC composition of members will include leaders from across the state representing several organizations across the continuum of healthcare.

Section III – Categories of Membership

At a minimum, membership of the QC, in addition to prescribed members described in Article II, Section II, shall strive to include representation of the following categories:

- A. Health insurers
- B. Health systems
- C. Consumers, patients, and/or consumer advocates
- D. Academic institutions
- E. Philanthropic and nonprofit organizations with experience addressing health equity, health care quality, advocacy and access to health care
- F. National or local health care economics or health policy experts

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- G. Department of Public Health
- H. Department of Social Services
- I. Department of Mental Health & Addiction Services
- J. Office of the State Comptroller
- K. Employer purchaser representatives
- L. Organized labor purchasers
- M. Health care clinicians

Section IV – Term of Membership

The term of membership on the QC shall be two (2) years. Upon expiration of their terms, a member may be reappointed by OHS to an additional two (2) year term.

Section V – Attendance

The proper functioning of the QC depends upon the participation of its members.

Members should inform OHS and the QC Chair(s) if they will be absent from a meeting. Meetings will typically be held virtually but may be held in person on occasion.

QC Members may be administratively discharged after four absences incurred during the calendar year (January 1 – December 31). Members will be notified of their membership status after their third absence in the calendar year.

OHS reserves the right to administratively discharge any member appointed under Article III, Section 7, for cause.

Section VI – Member Preparedness

It is the responsibility of voting members to:

- A. Prepare for meetings by reviewing materials distributed *prior* to meeting, prepare to raise questions and comments about issues being discussed.
- B. Participate in meeting discussions
- C. Listen and speak respectfully to others.
- D. Be respectful of other Committee members, staff, and audience members, and listen to each other to seek to understand the other's perspectives, even if they disagree.
- E. make every effort to bring all aspects of their concerns about these issues into this process to be addressed.
- F. Refrain from personal attacks, intentionally undermining the process, or intentionally misstating the positions taken by any other participants during the process.

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- G. Be mindful of these procedural ground rules in any written communications, including emails, blog and other social networking media, and maintain a respectful tone even if highlighting different perspectives.
- H. Comply with OHS Conflict of Interest policy.

Section VII – Resignation and Removal of Members

A QC member shall serve his/her designated term unless he/she resigns, is removed, or otherwise becomes disqualified to serve.

Section VIII – Resignation by Notice

Any member choosing to leave the QC shall submit a letter of resignation to the Chair(s) and OHS. Resignation by notice shall take effect on the date of receipt of such notice by the Chair(s) and OHS.

Section IX – Termination of Members, other than state officials or their designees, for cause

- A. A member of the QC may be removed from membership for any of the following:
 - 1. Non-attendance at committee meetings without notification, except in the case of an urgent or emergent situation, as described in Section V and VII in this Article;
 - 2. Other causes, such as unethical behavior in violation of the conflict of interest policy, herein, unethical behavior does not include the expression of QC member individual viewpoints.
- B. A member other than the Chair(s) may be removed for cause as determined by OHS or the full Quality Council whenever, in their judgment, the best interests of the OHS and the Quality Council would be served by removal.

Section X – Vacancies

In the event of a vacancy on the QC, OHS will appoint a qualified person to fill the vacancy.

ARTICLE IV – Chair(s)

Section I – Chair Appointments

- A. OHS shall appoint two Co-Chairs from the council.

Section II – Duties of Chairs

- A. The Co-Chairs shall preside at alternating meetings as determined by the Co-chairs and shall perform all other duties necessary or incidental to the position.

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- B. A representative from OHS selected by the Chairs will assume responsibilities of the Chairs in the event of both of the Chairs' absence.

ARTICLE V – MEETINGS: Regular and Special

Section I – Frequency and Location of Meeting

Regular meetings of the QC shall be held at a frequency and such place and time as may be determined. OHS will offer a virtual/call-in option for remote participation. The QC shall ensure that the location and time of meetings are reasonably accessible to members.

All regular meetings of the QC and meetings of workgroups shall comply with the Freedom of Information Act. The QC will reserve time for public comment on the business agenda of each meeting of the QC. QC minutes as well as other documents produced by the QC shall be public documents, and in accordance with the Freedom of Information Act (FOIA).

Action may be taken by the team based on a simple majority of votes of those members present at a meeting.

An annual schedule of regular meetings shall be made available to the public.

Section II – Notice

OHS or its agent shall provide all members with an announcement of each regular QC meeting, the agenda for the meeting, and all related meeting materials at least three days in advance of the meeting.

Section III – Special Meetings

Special meetings of the QC may be held or called by OHS, the Chairs or set by the Chairs after written request of any five (5) members of the QC is received by the Chairs. The special meeting call shall be a written notice e-mailed to members, not less than seven (7) days prior to the date set for such special meeting. Such call must set forth specifically the subject matter of the meeting, and other subjects may not be introduced or considered at such meetings.

Section IV – Meeting Material

OHS staff or an agent acting on behalf of OHS, shall prepare a draft of meeting materials including the minutes of each monthly QC meeting, stating the action taken at such meeting, and shall submit them to members as expeditiously as possible for their review. Any member wishing to propose a correction to the minutes shall propose a correction at the meeting at which the minutes are presented for review and approval. Any such approved corrections

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will be made to the permanent file copy. For substantive or major revisions, any member may request that a copy of the revised minutes be redistributed to all QC members. Meeting minutes and any votes will be posted on the OHS website.

Section V – Quorum

At any QC meeting, the presence of at least one half (1/2) of the members shall be necessary to constitute a quorum for the purpose of engaging in any formal decision-making. The presence of a quorum will be called by the Chairs.

Section VI – Voting

Each member of the QC shall be entitled to one vote upon any matter before it that requires a vote. Voting upon any issue shall be voice vote, or by show of hands, of the members. Rollcall may be utilized for virtual/call-in meetings if a voice vote is unclear.

Section VII – Conduct of Meetings

All meetings will be conducted in an orderly manner and governed by these Bylaws. Regular and Special QC meetings shall be conducted using Robert's Rules of Order Abbreviated.

Section VIII – Public Comment at Meetings

The agenda for each meeting shall contain an item "Public Comment" at the end of regularly scheduled business. The QC Chairs shall manage any public comments and participation at the meeting.

ARTICLE VI – CONFLICT OF INTEREST

Section I – General Statement

All Quality Council members are required to disclose in advance if they, their employer, or any member of their immediate family could possibly benefit financially from the outcome of a QC decision process.

In the event of a matter that raises a potential conflict of interest comes before the QC or a workgroup for consideration, recommendation or decision, the member shall disclose the conflict of interest as soon as he/she becomes aware of it.

This "conflict-of-interest" principle shall not be construed as preventing any member of the QC from full participation in discussion about QC or workgroup needs. Rather, individual members are expected to draw upon their lay and professional experiences and knowledge of the health service delivery system if they disclose verbally any potential conflicts of interest at the beginning of such discussion.

ARTICLE VII – DUTIES OF OHS

- A. OHS shall inform the QC about all changes that impact its mission, which includes Federal and State policy.
- B. OHS shall provide all information, guidance and support to the QC.
- C. OHS shall support the work of the QC by providing administrative support, technical assistance, and support as resources allow.
- D. OHS will ensure on-going communication between the Quality Council, the Cost Growth Technical Team, workgroups, and agency staff and leadership.
- E. OHS staff assigned to the QC will attend all meetings and inform the QC of timely developments.

ARTICLE VIII – OFFICIAL COMMUNICATION AND REPRESENTATION

Section I – Official Communication

Any communication request of the QC to the media or general public should be directed to the OHS Communications Director.

Section II – Representation

No member of the QC or any workgroup shall make any statement or communication under circumstances that might reasonably give rise to an inference that he or she is representing the QC or OHS (including, but not limited to, communications upon OHS stationary, public acts, statements or communications in which he or she is identified as a member of the QC except only in actions or communications that are clearly within the policies of the QC Chair, in consultation with OHS.) An example of an acceptable action is a QC member being asked to provide information about the QC and its activity at a forum being conducted on the cost growth benchmark and primary care target.

ARTICLE IX – MAINTENANCE OF RECORDS

Electronic files shall be maintained by OHS staff in accordance with OHS's record retention policies.

ARTICLE X – NON-DISCRIMINATION

The officers and committee members of the QC along with OHS staff and any of the QC's workgroups shall be selected without discrimination with respect to age, gender, ethnicity, race, religion, disability, sexual orientation, gender identity or expression, or national origin

All QC business and activities shall be conducted fairly and equitably in a manner which does not discriminate with respect to age, gender, ethnicity, race, religion, disability, sexual orientation, gender identity or expression, or national origin.

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Appendix I – Robert’s Rules of Order, Abbreviated

What is Parliamentary Procedure? It is a set of rules for conduct at meetings that allows everyone to be heard and to make decisions without confusion. It’s a time-tested method of conducting business at meetings and public gatherings. It can be adapted to fit the needs of any organization.

Sample Order of Business:

1. Call to order and roll call of members
2. Present the Agenda
3. Consider minutes of last meeting—vote to accept amended minutes.
4. Special orders--important business previously designated for consideration at this meeting
5. Business--motions
6. Announcements
7. Adjournment

Presenting Motions:

1. Obtain the floor
2. Make a motion--avoid personalities and stay on subject.
3. Wait for someone to second the motion.
4. Another member will second the motion, or the Chair will call for a second--if there is no second to motion it is lost.
5. The Chair restates the motion.
6. Debate—concise and focused on content of motion.
7. Keep established time limits.
8. Put the question to the membership--if there is no more discussion, a vote is taken.

Note: Motion to Table – This motion is often used in the attempt to "kill" a motion. The option is always present, however, to "take from the table", for reconsideration by the membership.

Voting on a Motion:

1. By General Consent -- When a motion is not likely to be opposed, the Chair says, "if there is no objection ..." The membership shows agreement by their silence, however if one member says, "I object," the item must be put to a vote.
2. By Voice -- The Chair asks those in favor to say, "aye", those opposed to say "no" and abstentions to indicate as such. Although "voice" is preferred, any member may move for an exact count.

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3. By Ballot -- Members record their votes; this method is used when secrecy is desired.

In summary, parliamentary procedure is an effective means to get things done at your meetings. But, it will only work if you use it properly.

1. Allow motions that are in order.
2. Have members obtain the floor properly.
3. Obey the rules of debate—stay focused

Most importantly, BE COURTEOUS.

Adapted from: <http://www.robertsrules.org/rulesintroprint.htm>

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