Time: 5:00 PM  
Location: S8121A  

Voting Members Present: D. Lafreniere MD, M. Douglas MD, P. Luthra MD, B. Shames MD, R. Simon  

Non-Voting Members Present: G. Geoghegan  

Clinical Council Subcommittee Present: J Greenfield MD, M. Metersky MD, C. Pickett MD, D. Stanley MD, J. Suchecki MD  

Guests: G. Boucher, G. Sznaj, S. Tannenbaum MD  

1. The minutes of the February 2019 Clinical Council meeting were approved as written.  

2. Faculty Requests  

- **Department of Cardiology**  
  Division of Cardiology – Non-Invasive  
  Assistant Professor/Clinical  
  New – 0.95 Clinical FTE  
  Approved Unanimously  

- **Department of Medicine**  
  Division of Pulmonary  
  Assistant Professor/Clinical  
  New – 0.95 Clinical FTE (0.65 UMG)  
  Approved Unanimously  

- **Department of Medicine**  
  Division of General Medicine  
  Assistant Professor/Opioid Researcher  
  New – 0.45 Clinical FTE  
  Approved Unanimously  

- **Department of Medicine**  
  Division of Medical Oncology w/o Infusion  
  Assistant Professor  
  Replacement – 0.90 Clinical FTE (0.80 UMG)  
  Approved Unanimously  

- **Department of Surgery**  
  Division of Cardiovascular  
  Associate Professor/Clinical  
  New – 0.85 Clinical FTE  
  Approved Unanimously  

- **Department of Emergency Medicine**  
  Division of Emergency Medicine  
  Assistant Professor/Clinical  
  New – 0.77 Clinical FTE (0.00 UMG)  
  Approved Unanimously
3. **Financial Update** – J. Geoghegan provided an update on the State budget process and the efforts to seek relief for the Health Center from the inordinate fringe benefit burden on the organization. Adding to this burden this year 500 employees (123 from UMG) transitioned from the alternate benefit retirement plan to the pension. Five months of impact will be added to the current FY. As of the end of February UConn Health is overall favorable to budget YTD. Clinical operations are overall unfavorable related to inpatient volume (decrease in Influenza and Pneumonia admissions over the prior year), and some long LOS patients. UMG is favorable YTD by $1.5M attributed to steady growth.

4. **PTN Update** – The program is in its final stages and will be finished at the end of September. Work continues towards developing relationships with the State Comptroller’s Office and the Office of Health Strategy. Carry over funds from CMMI are supporting the startup of Connecticut Comprehensive Pain Center. The state SIM is contributing $300,000 to support outreach through the e-health project. Geriatrics is launching an e-health pilot to follow up on post-operative patients at two nursing homes.

5. **HealthONE Update** – The leadership team is working to stratify the needs for ongoing IT support in the face of limited resources. Projects will be prioritized based on overall institutional need. A physician committee lead by Dr. Lafreniere will be integral in this process. Kaleidoscope (Ophthalmology specific section of Epic) is scheduled to go live on April 1st.

6. **Population Health** – Dr. Lafreniere announced the arrival of the new AVP for Population Health Khadija Poitras-Rhea and recognized the contributions of Beata Labunko for her efforts in facilitating the application for and the transition for our primary care practices to becoming NCQA recognized Patient Centered Medical Homes.

Adjourned at 6:03 PM.

Respectfully Submitted,

Grace Boucher, MS, RN
Director of Quality and Performance Improvement