

**MINUTES OF THE
HEALTH SYSTEM REFORM TASK FORCE**

Wednesday, June 15, 2011 – 2:00 p.m. – Room 450 State Capitol

Members Present:

Sen. Wayne L. Niederhauser, Senate Chair
Sen. Gene Davis
Rep. James A. Dunnigan, House Chair
Rep. Rebecca Chavez-Houck
Rep. Merlynn T. Newbold
Rep. Dean Sanpei

Members Absent:

Sen. Peter C. Knudson
Rep. Francis D. Gibson
Rep. Ronda Rudd Menlove

Staff Present:

Mr. Joseph T. Wade, Policy Analyst
Ms. Catherine J. Dupont, Associate General Counsel
Ms. Wendy Bangerter, Legislative Secretary

Note: A list of others present, a copy of related materials, and an audio recording of the meeting can be found at www.le.utah.gov.

1. Task Force Business

Chair Dunnigan called the meeting to order at 2:10 p.m. When Sen. Niederhauser arrived, he assumed the chair.

MOTION: Rep. Newbold moved to approve the minutes of the May 18, 2011 meeting. The motion passed unanimously.

2. Cost Containment Strategies—Examples, Evidence of Effectiveness, and Challenges

Mr. Richard Cauchi, Health Program Director, National Conference of State Legislatures (NCSL), gave a presentation, "Health Cost Containment and Efficiencies: Options for State Legislatures." He reviewed highlights from 15 briefs prepared by NCSL, each describing a health care cost containment strategy for limiting growth in health care spending. He indicated that he could provide additional information to the Task Force on global payments, pay for performance, and one additional strategy—transparency.

Rep. Sanpei suggested that the Task Force invite the Department of Health to report on public health initiatives related to cost containment. He also indicated that providers are working separately on the concept of medical homes, but that there might be some benefit if they collaborated with one another.

3. Cost Containment—Using Cost and Quality Data to Identify Value

Mr. Mark Gaskill, Office of Health Care Statistics (Office), Utah Department of Health, gave a presentation updating the Task Force on the contents and the actual and potential uses of the Utah All Payer Claims Database (APCD). The Office is working with the Office of Consumer Health Services to make cost and quality data available on the Utah Health Exchange. The Office of Consumer Health Services, the office that manages the Exchange, reported that this type of data should be available on the Exchange sometime around the first part of next year.

Mr. Douglas Wolfe, Director, System Improvement, Primary Children's Medical Center, commended those working on the APCD. He suggested allowing providers to purchase de-identified APCD data and run analyses themselves rather than requiring them to rely on the Office of Health Care Statistics to run queries for them.

Mr. Gaskill responded that the two terabyte APCD database is too large to distribute, and that the Office also does not wish to distribute it because some things about the data are still unknown. He indicated that the Office is building a data warehouse of de-identified APCD data for users to analyze but not acquire.

Ms. Michelle McOmber, Utah Medical Association, indicated that physicians are concerned that the APCD includes only claims submitted, not physician orders, and that this could lead to skewed quality data and physicians dropping noncompliant patients. She indicated that this issue can be addressed by tying the APCD to information available through the electronic exchange of clinical health information (cHIE). Mr. Gaskill indicated that APCD analyses can be performed to compensate for physicians' concerns.

Rep. Chavez-Houck indicated that it would be helpful to receive a copy of Mr. Gaskill's presentation and links to additional information sources. She also indicated it would be helpful to know what will be done to help people with varying levels of literacy use APCD data to make decisions.

4. Adjourn

MOTION: Rep. Chavez-Houck moved to adjourn the meeting. The motion passed unanimously. Sen. Davis was absent for the vote.

Chair Niederhauser adjourned the meeting at 4:40 p.m.