

(Draft – Awaiting Approval)
**MINUTES OF THE
HEALTH REFORM TASK FORCE**
Thursday, May 19, 2016 – 1:00 p.m. – Room 30 House Building

Members Present:

Sen. Allen Christensen, Senate Chair
Rep. James A. Dunnigan, House Chair
Sen. J. Stuart Adams
Sen. Gene Davis
Sen. Peter C. Knudson
Rep. Rebecca Chavez-Houck
Rep. Francis D. Gibson
Rep. Michael S. Kennedy
Rep. Edward H. Redd

Rep. Dean Sanpei

Members Absent:

Rep. Marie H. Poulson

Staff Present:

Mr. Mark Andrews, Policy Analyst
Ms. Cathy Dupont, Associate General Counsel
Ms. Lori Rammell, Legislative Assistant

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 1:12 p.m. Rep. Poulson was excused from the meeting.

MOTION: Sen. Christensen moved to approve the minutes of the December 3, 2015, meeting. The motion passed unanimously. Sen. Davis, Rep. Kennedy, and Rep. Redd were absent for the vote.

2. Overview of 2016 Duties

Chair Dunnigan reviewed the task force's charge to review and make recommendations on the following issues:

- 1) substance abuse and mental health,
- 2) telehealth services,
- 3) health professional licensing,
- 4) regulation of health maintenance organizations and preferred provider organizations,
- 5) balanced billing for covered medical services,
- 6) recodification of the health insurance related parts of Title 31A, Insurance Code,
- 7) the state Medicaid program, and
- 8) the efficacy of managed care for dental services under Medicaid.

Rep. Dunnigan briefly discussed how the task force will address each of these issues.

3. Health Insurance Coverage Program – Waiver Development

Chair Dunnigan explained that during the 2016 General Session, the Legislature passed H.B. 437, Health Care Revisions, which required the Utah Department of Health to submit a request for waivers from federal law no later than July 1, 2016, to implement the new Medicaid Health Improvement Coverage Program.

Mr. Nate Checketts, Deputy Director, Utah Department of Health, distributed "Medicaid Adult Expansion Overview, May 2016." He described the coverage groups included in the proposal and explained the process the department is using to gather public comment.

4. Insurance Code Recodification

Ms. Tanji Northrup, Assistant Commissioner, Utah Insurance Department, described the insurance marketplace, including grandfathered plans, transitional plans, and Affordable Care Act-compliant plans, and expressed her opinion that recodification would be more appropriate in 2017. She indicated that the task force could help the Insurance Department by merging the preferred provider and managed care sections of the Insurance Code into one section.

Chair Dunnigan announced that the task force will create two workgroups—one to study the proposed merging of Insurance Code sections and the other to work with a similar group from the Public Utilities, Energy, and Technology Interim Committee to study telehealth issues.

5. Arches

Ms. Northrup briefed the task force on the status of the Arches Health Plan since it was placed in receivership. She explained why available assets have not been used to make partial payments to providers and others creditors.

6. “Surprise” Balance Billing for Out-of-Network Services

Mr. Andrews distributed "Surprise Medical Bills," published by the Kaiser Family Foundation, and "Answering the Thousand-Dollar Debt Question: An Update on State Legislative Activity to Address Surprise Balance Billing," published by the National Academy for State Health Policy.

Ms. Northrup described situations where insureds are balance billed for out-of-network services provided or initiated at in-network settings. She outlined ways the Insurance Department is attempting to address consumer concerns.

Mr. Chet Loftis, Executive Director, Public Employees Health Program (PEHP), and Mr. Paul Anderton, Chief Actuary, PEHP, presented "Insurance Perspective on Hidden Providers." Mr. Loftis explained the nature of the problem and PEHP's strategies for detecting and containing balance billing practices.

Ms. Michelle McOmber, Chief Executive Officer, Utah Medical Association, requested that she be allowed, at the task force's next meeting, to respond to comments made by other presenters.

Mr. Scott Swift, retired physician, explained the connection between bankruptcies and balance billing for out-of-network services. He outlined recently passed New York legislation that addresses the issue of balance billing through alternate dispute resolution.

Mr. Dave Gessel, Executive Vice President, Utah Hospital Association, suggested that hospitals, physicians, and insurance providers need to come together, perhaps in a workgroup, to discuss consensus solutions to this problem.

Chair Dunnigan indicated that a workgroup will be created to address this issue.

7. Adjourn

MOTION: Sen. Davis moved to adjourn the meeting. The motion passed unanimously with Rep. Gibson and Rep. Kennedy absent for the vote.

Chair Dunnigan adjourned the meeting at 3:00 p.m.