



House of Representatives *State of Utah*

UTAH STATE CAPITOL COMPLEX • 350 STATE CAPITOL
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February 5, 2020

Mr. Speaker,

The Health and Human Services Committee recommends **H.B. 195**, IDENTIFYING WASTEFUL HEALTH CARE SPENDING, by Representative S. Harrison, be replaced and reports a favorable recommendation on **1st Sub. H.B. 195**, IDENTIFYING WASTEFUL HEALTH CARE SPENDING with the following amendments:

1. *Page 1, Lines 12 through 15:*

- 12 This bill:
- 13 ▶ requires the Department of Health to contract with an organization ~~{in order~~
-} for an analysis to
- 14 identify potential overuse of non-evidence-based health care; ~~{and}~~
▶ requires the Health Data Committee to:
- review the results from the analysis;
 - review scientific literature and solicit input on duplication in health care; and
 - solicit input on instances of non-alignment in health care metrics; and
- 15 ▶ requires the Department of Health to annually report on the ~~{results of the analysis}~~ findings of the Health Data Committee .

2. *Page 2, Lines 39 through 54:*

- 39 (3) The department, or a third party organization that the department contracts with
in
- 40 accordance with Title 63G, Chapter 6a, Utah Procurement Code, shall:
- 41 (a) analyze the data described in Subsection (2)(b);
- 42 (b) review current scientific literature about medical services that are best practice;
- 43 (c) review current scientific literature about eliminating duplication in health care;
(d) solicit input from Utah health care providers, health systems, insurers, and
other stakeholders regarding duplicative health care quality initiatives and instances

Bill Number



HB0195S01

Action Class



H

Action Code



HCRSUBAMD

of non-alignment in metrics used to measure health care quality that are required by different health systems;

- 44 ~~{(d)}~~ (e) solicit input from Utah health care providers, health systems,
insurers, and other
45 stakeholders on methods to avoid overuse of non-evidence-based health care; and
46 ~~{(e)}~~ (f) present the results of the analysis, research, and input described
in Subsections
47 (3)(a) through ~~{(d)}~~ (e) to the committee.
48 (4) The committee shall:
49 (a) make recommendations for action and opportunities for improvement based on
the
50 results described in Subsection (3) ~~{(c); and}~~ (f);
(b) make recommendations on methods to bring into alignment the various health
care quality metrics different entities in the state use; and
51 ~~{(b)}~~ (c) identify priority issues and recommendations to include in an
annual report.
52 (5) The department, or the third party organization described in Subsection (3) shall:

53 (a) compile the report described in Subsection (4) ~~{(b)}~~ (c) ; and
54 (b) submit the report to the committee for approval.

Respectfully,

Brad M. Daw
Chair

Voting: 12-0-1

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Bill Number



HB0195S01

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