## 1st Sub. H.B. 195 IDENTIFYING WASTEFUL HEALTH CARE SPENDING

	III IIIG WASTEFUL HEALTH CARE SI ENDING
House	COMMITTEE AMENDMENTSAMENDMENT 1FEBRUARY 5, 20201:47 PM
Represe	entative Raymond P. Ward proposes the following amendments:
1. Pag	ge 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
	<ul> <li>solicit input on instances of non-alignment in health care metrics; and</li> </ul>
15	<ul> <li>requires the Department of Health to annually report on the {-results of the</li> </ul>
	analysis } <u>findings of the Health Data Committee</u> .
2. Pag	ge 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 of non-alignment in metrics used to
	<u>measure health care quality that are required by different health systems;</u>
44	{ (d) }
45	stakeholders on methods to avoid overuse of non-evidence-based health care; and
46	{ <u>(f)</u> present the results of the analysis, research, and input described in Subsections
47	(3)(a) through $\{ \underline{(d)} \}$ (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) {-(e); and } (f);
   (b) make recommendations on methods to bring into alignment the various health care quality metrics
   different entities in the state use; and
   (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.