



MINUTES

Legislative Health Care Coverage Commission

January 6, 2010

MEMBERS PRESENT:

Voting Public Members

David Carlyle, Chairperson
Ted Williams, Vice Chairperson
Mike Abbott
Amy Logsdon (alternate for Ms. Betty Ahrens
via telephone)
Jennifer Browne
Diane Crookham-Johnson (via telephone)
Bruce Koepl
Marcia Nichols
Tim Stiles (via telephone)
Joe Teeling

Nonvoting Legislative Members

Senator Jack Hatch
Representative Mark Smith
Representative Linda Upmeyer

Nonvoting Ex Officio Members

Jennifer Vermeer (alternate for Charles
Krogmeier)
Angela Burke Boston (alternate for Susan Voss)

MEETING IN BRIEF

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Organizational staffing provided
by: Ann Ver Heul, Senior Legal
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Minutes prepared by: John
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- I. Procedural Business
- II. Comments on 2010 Legislative Session
- III. Review and Approval of Draft Progress Report
- IV. 2010 Commission and Workgroup Priorities
- V. Materials Filed With the Legislative Services Agency



I. Procedural Business

Meeting Times. The Commission meeting was held at the Statehouse in the Supreme Court Chamber, Committee Room 103, and convened at 10:07 a.m. A short recess was held from 11:11 a.m. until 11:16 a.m. The meeting adjourned at 11:45 a.m.

Minutes Approved. The minutes of the December 2, 2009, meeting were approved as distributed.

II. Comments on 2010 Legislative Session

Senator Hatch. Senator Hatch suggested that the two most important topics for Commission members to track at the state level are the budget, especially the portion addressing the Medicaid program, and efforts to work with health care providers to cushion the effects of any budget reductions. There is a \$200 million gap to deal with in Medicaid. The work by this and previous commissions has put Iowa in a good position to implement federal health care reforms.

Representative Smith. Representative Smith commented that he and Senator Hatch have been working on a bill draft to address the recommendations in the Commission's draft progress report. It is anticipated that the draft will be filed soon after the General Assembly's session begins on January 11, 2010. Both he and Senator Hatch welcome input on the legislation which will first be considered by the House of Representatives.

Representative Upmeyer. Representative Upmeyer opined that Iowa provides high-quality health care at among the lowest costs in the nation. Previous commissions have pledged to base reforms on the current system and to do no harm and she urged this Commission to maintain those goals.

III. Review and Approval of Draft Progress Report

Overview. Chairperson Carlyle invited each member to comment on the draft progress report before a vote was taken on the report. After discussion, the report was approved unanimously.

General Discussion. Chairperson Carlyle noted the report content was based on the efforts of the three workgroups. He and a number of members commented that the Commission would have more in-depth work to perform once federal health care legislation is approved. The draft report is posted on the Commission's Internet site. Members commented individually and there were many comments made about the quality of the process and admiration for the efforts of the members and staff.

Ms. Crookham-Johnson was particularly supportive of the recommendations for expanding the IowaCare Program and developing a diabetic registry. She stressed the importance of health care providers continuing to provide a reasonable level of uncompensated care.



Mr. Koepl focused on the recommendations for regional expansion of the IowaCare Program, pursuing an early opt-in for the state to participate in federal health care reform opportunities, increasing funding for Department of Human Services' technological capacities, beginning the design of an Iowa exchange, and concentrating on transparency.

Mr. Abbott described the increase in knowledge that he and others associated with private insurance had gained concerning IowaCare and other public health care coverage. He emphasized the importance of increasing transparency about pricing, quality, and other aspects of health care and being vigilant about containing costs.

Ms. Browne noted the many areas of agreement among Commission members but expressed reservations about the recommendation for pursuing an early opt-in and the wording of the recommendations for designing an Iowa exchange and increasing transparency.

Mr. Teeling concurred with the many comments made by other members about areas of agreement among members and the high quality of work. He expressed concerns about the clarity in wording of certain recommendations, suggested that more frequent meetings could address these and other concerns, explained that workgroup deliberations focused on public solutions for health care reform, and proposed that more attention should be given to private reform solutions.

Iowa Exchange Discussion. Much discussion centered on recommendation nine, for beginning the process of designing an Iowa exchange. Mr. Abbott, Mr. Teeling, and Ms. Browne expressed the view that until federal health care reform requirements are known, the design should be limited to exchanging information and not extend to regulating the insurance market, addressing coverage, and providing for other related measures. Discomfort on this point caused several members to oppose this recommendation during the December 2 meeting and has engendered reluctance to vote for the progress report at this meeting, even though there is wholehearted support for most other recommendations.

Some members characterized these concerns as a basic philosophical difference among members that has been difficult to address. Ms. Anne Kinzel, the coordinator for the Commission, referred to language within the recommendation that was intended to address the concerns expressed. Senator Hatch and Representative Smith stated their understanding of the concerns, underscored the importance of examining a broad spectrum of design issues, and agreed that actually implementing most provisions affecting the insurance market will require knowledge of the details of any federal health care reform that is ultimately enacted.

Approval of Progress Report. After taking a short recess, the 11 voting members of the Commission unanimously approved the progress report as submitted on a roll call vote. Chairperson Carlyle explained that Ms. Joan Jaimes had submitted a written statement of her support for the report as submitted and her vote was included in the tally without objection.



IV. 2010 Commission and Workgroup Priorities

Additional Workgroup. Chairperson Carlyle outlined a plan to form a fourth workgroup to be chaired by Mr. Teeling that will be charged to consider private sector options to address health coverage needs. He invited other members to express their interest in this workgroup for his consideration in making appointments.

Future Meetings and Activities. Chairperson Carlyle recognized Mr. John Pollak, Committee Services Administrator, Legislative Services Agency, to provide an overview of the typical approaches used by legislative study committees during a legislative session. Mr. Pollak explained that the usual stance of leadership is to discourage such meetings and that with plans to shorten the 2010 Session from 100 to 80 days, gaining approval for such meetings is likely to be more difficult. However, he suggested that the Commission should determine its needs and make a request accordingly.

Ms. Kinzel explained her plans to provide regular updates to the commissioners concerning both federal and state level progress in addressing health care policy. It is anticipated that the workgroups will continue meeting during the legislative session. Several members opined that with progress on federal health care reform seeming more likely, continuing to hold meetings will be important.

Ms. Nichols moved to request that legislative leaders approve continued meetings of the workgroups and one full commission meeting during the legislative session. After discussion, Ms. Nichols accepted an amendment from Senator Hatch to change the number of full commission meetings requested from one to three. The motion was unanimously approved.

Workgroups. Members discussed the near-term focus for the workgroups. Workgroup I (Coverage of Adults), will continue to consider options for expanding the IowaCare program. Workgroup II (Use/Creation of State Pool), will continue investigating approaches around pooling. Workgroup III (Administration of Health Care Reform in Iowa), will consider options for an exchange and improving transparency. Mr. Teeling offered that Workgroup IV (Private Coverage), could consider reviewing areas of inefficiency in the current system, wellness and behavior changes, disease management, and ways to cover small groups of 10 or fewer persons that are more affordable and practical.

V. Materials Filed With the Legislative Services Agency

The following materials listed were distributed at or in connection with the meeting and are filed with the Legislative Services Agency. The materials may be accessed from the <Additional Information> link on the Committee's Internet webpage:

<http://www.legis.state.ia.us/asp/Committees/Committee.aspx?id=484>

1. Draft Progress Report.