

1 **REAUTHORIZATION OF UTAH HEALTH DATA AUTHORITY**

2 **ACT**

3 2014 GENERAL SESSION

4 STATE OF UTAH

5 **Chief Sponsor: James A. Dunnigan**

6 Senate Sponsor: _____

7
8 **LONG TITLE**

9 **Committee Note:**

10 The Health Reform Task Force recommended this bill.

11 **General Description:**

12 This bill amends provisions of Title 26, Chapter 33a, Utah Health Data Authority Act,
13 and Title 63I, Chapter 1, Legislative Oversight and Sunset Act, related to the Utah
14 Health Data Authority Act.

15 **Highlighted Provisions:**

16 This bill:

- 17 ▶ amends the membership of the Health Data Committee;
- 18 ▶ amends the data sharing authority of the Health Data Committee;
- 19 ▶ makes technical and conforming amendments; and
- 20 ▶ reauthorizes the Utah Health Data Authority Act until July 1, 2024.

21 **Money Appropriated in this Bill:**

22 None

23 **Other Special Clauses:**

24 None

25 **Utah Code Sections Affected:**

26 AMENDS:

27 **26-33a-103**, as last amended by Laws of Utah 2011, Chapter 400



28 **26-33a-106.1**, as last amended by Laws of Utah 2012, Chapter 279
29 **63I-1-226**, as last amended by Laws of Utah 2013, Chapters 32, 60, and 195



31 *Be it enacted by the Legislature of the state of Utah:*

32 Section 1. Section **26-33a-103** is amended to read:

33 **26-33a-103. Committee membership -- Terms -- Chair -- Compensation.**

34 (1) The Health Data Committee created by Section **26-1-7** shall be composed of [~~14~~]
35 15 members [appointed by the governor with the consent of the Senate].

36 (2) (a) One member shall be the commissioner of the Utah Insurance Department or the
37 commissioner's designee.

38 [~~2~~] (b) Fourteen members shall be appointed by the governor with the consent of the
39 Senate in accordance with Subsection (3). No more than seven members of the committee
40 appointed by the governor may be members of the same political party.

41 (3) The [~~appointed~~] members of the committee appointed under Subsection (2)(b) shall
42 [be]:

43 (a) be knowledgeable regarding the health care system and the characteristics and use
44 of health data [and shall be];

45 (b) be selected so that the committee at all times includes individuals who provide
46 care[.];

47 [~~4~~] The membership of the committee shall be:

48 [~~a~~] (c) include one person employed by or otherwise associated with a general acute
49 hospital as defined by Section **26-21-2**, who is knowledgeable about the collection, analysis,
50 and use of health care data;

51 [~~b~~] (d) include two physicians, as defined in Section **58-67-102**:

52 (i) who are licensed to practice in this state;

53 (ii) who actively practice medicine in this state;

54 (iii) who are trained in or have experience with the collection, analysis, and use of
55 health care data; and

56 (iv) one of whom is selected by the Utah Medical Association;

57 [~~c~~] (e) include three persons:

58 (i) who are:

59 (A) employed by or otherwise associated with a business that supplies health care
60 insurance to its employees; and

61 (B) knowledgeable about the collection and use of health care data; and

62 (ii) at least one of whom represents an employer employing 50 or fewer employees;

63 ~~[(d)]~~ (f) include three persons representing health insurers:

64 (i) at least one of whom is employed by or associated with a third-party payor that is
65 not licensed under Title 31A, Chapter 8, Health Maintenance Organizations and Limited
66 Health Plans;

67 (ii) at least one of whom is employed by or associated with a third party payer that is
68 licensed under Title 31A, Chapter 8, Health Maintenance Organizations and Limited Health
69 Plans; and

70 (iii) who are trained in, or experienced with the collection, analysis, and use of health
71 care data;

72 ~~[(e)]~~ (g) include two consumer representatives:

73 (i) from organized consumer or employee associations; and

74 (ii) knowledgeable about the collection and use of health care data;

75 ~~[(f)]~~ (h) include one person:

76 (i) representative of a neutral, non-biased entity that can demonstrate that it has the
77 broad support of health care payers and health care providers; and

78 (ii) who is knowledgeable about the collection, analysis, and use of health care data;

79 and

80 ~~[(g)]~~ (i) include two persons representing public health who are trained in, or
81 experienced with the collection, use, and analysis of health care data.

82 ~~[(5)]~~ (4) (a) Except as required by Subsection ~~[(5)]~~ (4)(b), as terms of current
83 committee members expire, the governor shall appoint each new member or reappointed
84 member to a four-year term.

85 (b) Notwithstanding the requirements of Subsection ~~[(5)]~~ (4)(a), the governor shall~~[-~~
86 ~~(i)]~~, at the time of appointment or reappointment, adjust the length of terms to ensure that the
87 terms of committee members are staggered so that approximately half of the committee is
88 appointed every two years~~[-and]~~.

89 ~~[(ii) prior to July 1, 2011, re-appoint the members described in Subsections (4)(b), (d),~~

90 and (f) as necessary to comply with changes in eligibility for membership that were enacted
91 during the 2011 General Session.]

92 (c) Members may serve after their terms expire until replaced.

93 [~~(6)~~] (5) When a vacancy occurs in the membership for any reason, the replacement
94 shall be appointed for the unexpired term.

95 [~~(7)~~] (6) Committee members shall annually elect a chair of the committee from among
96 their membership. The chair shall report to the executive director.

97 [~~(8)~~] (7) The committee shall meet at least once during each calendar quarter. Meeting
98 dates shall be set by the chair upon 10 working days notice to the other members, or upon
99 written request by at least four committee members with at least 10 working days notice to
100 other committee members.

101 [~~(9) Seven~~] (8) Eight committee members constitute a quorum for the transaction of
102 business. Action may not be taken except upon the affirmative vote of a majority of a quorum
103 of the committee.

104 [~~(10)~~] (9) A member may not receive compensation or benefits for the member's
105 service, but may receive per diem and travel expenses in accordance with:

106 (a) Section 63A-3-106;

107 (b) Section 63A-3-107; and

108 (c) rules made by the Division of Finance pursuant to Sections 63A-3-106 and
109 63A-3-107.

110 [~~(11)~~] (10) All meetings of the committee shall be open to the public, except that the
111 committee may hold a closed meeting if the requirements of Sections 52-4-204, 52-4-205, and
112 52-4-206 are met.

113 Section 2. Section 26-33a-106.1 is amended to read:

114 **26-33a-106.1. Health care cost and reimbursement data.**

115 (1) (a) The committee shall, as funding is available, establish an advisory panel to
116 advise the committee on the development of a plan for the collection and use of health care
117 data pursuant to Subsection 26-33a-104(6) and this section.

118 (b) The advisory panel shall include:

119 (i) the chairman of the Utah Hospital Association;

120 (ii) a representative of a rural hospital as designated by the Utah Hospital Association;

- 121 (iii) a representative of the Utah Medical Association;
- 122 (iv) a physician from a small group practice as designated by the Utah Medical
123 Association;
- 124 (v) two representatives who are health insurers, appointed by the committee;
- 125 (vi) a representative from the Department of Health as designated by the executive
126 director of the department;
- 127 (vii) a representative from the committee;
- 128 (viii) a consumer advocate appointed by the committee;
- 129 (ix) a member of the House of Representatives appointed by the speaker of the House;
- 130 and
- 131 (x) a member of the Senate appointed by the president of the Senate.
- 132 (c) The advisory panel shall elect a chair from among its members, and shall be staffed
133 by the committee.
- 134 (2) (a) The committee shall, as funding is available:
- 135 (i) establish a plan for collecting data from data suppliers, as defined in Section
136 [26-33a-102](#), to determine measurements of cost and reimbursements for risk adjusted episodes
137 of health care;
- 138 (ii) share data with the Utah Insurance Department and health insurers regulated under
139 Title 31A, Insurance Code, regarding insurance claims [and], an individual's and small
140 employer group's health risk factor [with insurers participating in the defined contribution
141 market created in Title 31A, Chapter 30, Part 2, Defined Contribution Arrangements], and
142 characteristics of insurance arrangements that affect claims and usage, only to the extent
143 necessary for:
- 144 (A) establishing rates and [prospective] risk adjusting in the defined contribution
145 arrangement market created in Title 31A, Chapter 30, Part 2, Defined Contribution
146 Arrangements; [and]
- 147 (B) [risk adjusting in the defined contribution arrangement market; and] facilitating a
148 state based risk adjustment program for the health insurance market in accordance with Title
149 31A, Insurance Code;
- 150 (C) promotion of health insurance rate transparency; and
- 151 (D) review and analysis of health insurer's premiums and rate filings; and

152 (iii) assist the Legislature and the public with awareness of, and the promotion of,
153 transparency in the health care market by reporting on:

154 (A) geographic variances in medical care and costs as demonstrated by data available
155 to the committee; and

156 (B) rate and price increases by health care providers:

157 (I) that exceed the Consumer Price Index - Medical as provided by the United States
158 Bureau of Labor statistics;

159 (II) as calculated yearly from June to June; and

160 (III) as demonstrated by data available to the committee.

161 (b) The plan adopted under this Subsection (2) shall include:

162 (i) the type of data that will be collected;

163 (ii) how the data will be evaluated;

164 (iii) how the data will be used;

165 (iv) the extent to which, and how the data will be protected; and

166 (v) who will have access to the data.

167 Section 3. Section **63I-1-226** is amended to read:

168 **63I-1-226. Repeal dates, Title 26.**

169 (1) Title 26, Chapter 9f, Utah Digital Health Service Commission Act, is repealed July
170 1, 2015.

171 (2) Section [26-10-11](#) is repealed July 1, 2015.

172 (3) Section [26-18-12](#), Expansion of 340B drug pricing programs, is repealed July 1,
173 2013.

174 (4) Section [26-21-23](#), Licensing of non-Medicaid nursing care facility beds, is repealed
175 July 1, 2018.

176 (5) Section [26-21-211](#) is repealed July 1, 2013.

177 (6) Title 26, Chapter 33a, Utah Health Data Authority Act, is repealed July 1, [~~2014~~]
178 2024.

179 (7) Title 26, Chapter 36a, Hospital Provider Assessment Act, is repealed July 1, 2016.

180 (8) Section [26-38-2.5](#) is repealed July 1, 2017.

181 (9) Section [26-38-2.6](#) is repealed July 1, 2017.

Legislative Review Note
as of 12-12-13 1:35 PM

Office of Legislative Research and General Counsel