

**Summary of U-SHARE coalition meeting
June 14, 2011**

Utahns for Sustainable Health Reform **U-SHARE**

Working toward affordable, high-quality health care for all Utahns.

Attendance:

Barbara Munoz, Voices

Danny Harris, AARP

Derrek Larson (for Yvette Woodland), DWS

Judi Hilman, UHPP

Kim Meyers, UHPP

Missy Bird, PPAU

Noah Harper, U of U/UHPP

Sheila Walsh-McDonald, SLCAP

Shelly Braun, UHPP

Steve While, Utah AFL-CIO

U-SHARE (Utahns for Sustainable HeAlth REform) held its monthly meeting on June 14 from 11:30-1:00. We thank the Catholic Diocese for allowing us to use their facilities.

- **Health System Reform Task Force**

Meets June 15, 2011 in Room 450, State Capitol. The Task Force has 2 items on the [agenda](#):

1. [Potential cost containment strategies](#), including (but not limited to): administrative simplification, provider payment strategies, prescription drug payment and purchasing, health promotion + public health, combating fraud and abuse, collecting data (All Payer Database), and the medical home. Notably absent from the list are key issues that U-SHARE agrees are vital to containing costs in our health care system, the state, and for the individual. These include **affordability standards**, **premium subsidies**, **rate review**, ensuring an adequate supply of **primary care providers**, to name a few.
2. All Payer Database

U-SHARE members are encouraged to attend. Shelly requested that those who do attend send her an email (shelly@healthpolicyproject.org) indicating which strategies look like they are aligned with U-SHARE's principles, what is not on the table but should be, and any legislators who might be useful to our goals.

- **U-SHARE Implementation Principles**

Shelly reported that 30 people took the survey she sent out to garner input on the revised principles (drafted by Shelly and Deborah Brown) the group began in May. The group discussed the [draft principles](#), our priorities, how education fits in, and developing an action strategy for the coalition. We acknowledged that most items listed in our draft principles are linked. Education could be our mission, or an action plan for the principles we adopt, yet on the other hand, Sheila pointed out that education is a key part of what our coalition was formed around. Judi suggested we add language to our principles that indicates a balance, non-partisan approach to implementation. We did not discuss each item on our draft principles, however, we did discuss the following:

Affordability Standards: Shelly suggested these are important, and that increasing access and containing costs hinge on having affordability standards. Judi pointed out that the ACA has standards and that U-SHARE should use these, emphasizing *why* they are included (a "carrot" approach to bringing people into coverage). Barbara mentioned that HUD has affordability standards for housing, which are well known and accepted—why not health care?

Medical Home + Primary Care Providers: Danny suggested we consider these two items together as the medical home (care among providers is coordinated for each patient) relies on having each patient in a relationship with a primary care provider. It's commonly assumed that Utah will have a shortage of primary care providers (doctors, physician assistants, nurse practitioners) as more people come into coverage, especially with the ACA led Medicaid expansion. Shelly asked: what can U-SHARE actually do about increasing/ensuring the supply? Judi suggested allying with the Utah Medical Education Council—they have the capacity to do an assessment of the state of Utah's primary care. With that in hand we could better advocate for Utah's needs. She also suggested we work with nurse practitioners and physician assistants—they should be a key piece of Utah's primary care base. Noah suggested we identify someone in the School of Medicine (U of U) who is instrumental in distributing medical residencies around Utah, and ask him or her to speak at (or join) our coalition.

Premium Subsidies: Danny asked what that state of subsidies is outside what is included in the ACA? Utah has a premium subsidy program called "Utah Premium Partnership" ([UPP](#)). It is underutilized. Sheila and Shelly reviewed some of the things discussed about UPP at the last Exchange Advisory Board meeting: the Exchange staff report that they are at work using UPP to attract more small businesses to health insurance; there are enrollment timing issues; the plan is to train brokers about UPP and recruit businesses that way. Not all plans are qualified for UPP, and our group discussed the fact that UPP subsidies can only be used to buy plans that do *not* cover abortions. We discussed a few things our coalition can do to raise awareness about this issue: Kim suggested that a small business owner who gets insurance through the Exchange and is using UPP for her employees could write an op-ed; Judi suggested that U-SHARE work towards marketing to brokers and small businesses.

- **U-SHARE strategy for action**

Attendees had a number of ideas for getting the coalition active. These include:

- op-eds written by small business owners or other constituencies
- using social media (like facebook) to increase awareness of both our coalition and implementation issues
- re-visiting editorial boards to let them know about our coalition and that we will be active on certain issues. Sheila explained how the coalition did this initially (years ago) and Judi suggested we do this with a concrete "hook" for the boards: a story, an issue, an item on the Task Force agenda, a bill we write with the legislator who sponsors it
- Danny asked who is our target, who are the key player, what will it take to shift our policy makers to "good" implementation?
 - Kim suggested talking with people in Rep. Dunnigan's district (and broader); Danny talked about making strategy based on our priorities. So we need to get those set first.
 - Sheila suggested we start with the Chamber West.
 - Judi reminded us about the delicate interface between what the state will do and federal reform.
 - We discussed the public vs policy makers as our target. Judi suggested the policy makers are our primary target, Steve agreed, and that the public is our secondary group.
- Steve commented that it will be interesting to see what the Task Force does with the [NCSL recommendations](#)—once we know this, we can see who is our ally, who an opponent
- Organize the brokers + the Chambers
- Steve said that committee members (legislators) need the "aha" moment when they realize what it really means to pay for health care, because they just don't have to (personally) think about it

Danny, Shelly, Noah, Steve, and (maybe) Sheila will meet next week to draft a U-SHARE action/implementation strategy—based on our 6-12 month priorities. We will send it to the group and it will be on the agenda for our July meeting.

- **Who should we invite as guest presenters to future U-SHARE meetings?**

We discussed that these invitees can be linked to our specific strategies. Ideas (in no particular order):

- Rate Review: Tanji Northrup (DOI)
- Utah Health Exchange: Norm Thurston (GOED) or Patty Connor (UHE)
- Primary Care: someone from the School of Medicine?
- Governance: Pat Richards (SelectHealth)
- Utah's Health Reform: Rep. Jim Dunnigan
- Premium Subsidies: Michele Smith (or Jeff Nelson or Eva Chacon)
- Other legislators: Sanpei, Draxler

- **Next Steps:**

- Principles finalized (Shelly with Deborah Brown)
- Action strategy (Danny, Noah, Steve, Shelly, and Sheila)
- Invite someone to speak next month (Danny? re: successful tobacco tax strategic campaign)

- **Next Meeting:**

Tuesday, July 21, 11:30-1:00
Catholic Diocese, 27 C Street
Bishop Kearney Room