## MINUTES

## JOINT COMMITTEE ON HEALTH POLICY OVERSIGHT

March 19, 2009 Room 143-N—Statehouse

## **Members Present**

Senator Jim Barnett, Chairman Senator Roger Reitz Representative Jim Ward

## **Staff Present**

Melissa Calderwood, Kansas Legislative Research Department Kelly Navinsky-Wenzl, Kansas Legislative Research Department Terri Weber, Kansas Legislative Research Department Nobuko Folmsbee, Office of the Revisor of Statutes Doug Taylor, Office of the Revisor of Statutes Jan Lunn, Committee Secretary

Chairman Barnett called the meeting to order at 12:15 p.m., expressing appreciation to Chad Austin and the Kansas Hospital Association for providing lunches. Chairman Barnett also welcomed all those attending.

Chairman Barnett commented that the legislation creating the Kansas Health Policy Authority (KHPA) also created the Joint Committee on Health Policy Oversight which has the exclusive responsibility to study the operations and decisions of KHPA. Chairman Barnett indicated that the legislation creating the agency provides for it to sunset on July 1, 2013; it is appropriate to examine the performance of the agency in anticipation of the legislative decision about continuation of the agency beyond its original sunset date.

Chairman Barnett reviewed the bipartisan effort in the creation of the Kansas Health Policy Authority and spoke about the role of the KHPA Board. He indicated that at the current time, the Joint Committee on Health Policy Oversight does not have processes in place to review the KHPA. Therefore, the purpose of convening this meeting is to introduce the concept and scope of a KHPA review process. Chairman Barnett called attention to three documents previously distributed to Committee members: Oversight Process (<u>Attachment 1</u>), Recommendations for Oversight (<u>Attachment 2</u>), and Targeted Review Guidelines (<u>Attachment 3</u>).

Chairman Barnett indicated KHPA has a number of benchmarks for tracking, and it makes sense to bring those forward regularly. In addition, resolving any ambiguity relative to expectations

on the part of the Legislature and KHPA could be an initial beginning. Chairman Barnett referenced health care purchasing, coordination of aspects of Medicaid policy, quality of care issues, transparency, data coordination and implementing Health Information Technology/Health Information Exchange (HIT/HIE), as well as staff recruitment/retention in key roles, and administrative costs as possible measurement standards/goals.

Chairman Barnett asked Committee members to review performance indicators, the plan for review, and the proposed plan for reporting review results.

Senator Reitz commented that while many credible measurements exist, in his opinion, more should be done for SCHIP and covering dental services in Kansas (which is the biggest weakness in State health care). These two areas represent opportunities for measurement.

Joe Tilghman, Chairman, KHPA Board, indicated he had reviewed the draft documents, and he favorably commented on their comprehensive nature. Mr. Tilghman indicated he had three general comments related to the structure of the documents:

- He supported the draft plans containing a full role for the Governor to be engaged and involved with the Legislature relative to the oversight process, particularly for the Medicaid program.
- He supported a structured oversight process including well-documented measurement standards and expectations, particularly in light of changing environments and individuals involved.
- He supported flexibility as one of the critical success factors for modifications to any plan.

Following discussion of the three key points above, Mr. Tilghman provided a cursory review of the three documents that cite staffing, recruitment and retention as key to KHPA becoming a magnet employer; additionally, Mr. Tilghman continued, administrative costs in relation to return on investment, overall efficiencies, or both, should be evaluated rather than targeting low administrative costs as a measurement standard. In addition, "stretch goals" should be included in order to maximize performance.

Chairman Barnett indicated that as expectations are identified, input and closure from all stakeholders will occur so that goals are better defined and that measurement standards are well documented.

Dr. Andy Allison, Deputy Director, KHPA, commented on the documents in Dr. Marcia Nielsen's absence. Dr. Allison reported that Dr. Nielsen was hosting a conference and was unable to attend. Dr. Allison indicated that the KHPA leadership welcomes the oversight effort and the plan to begin early before the scheduled expiration in 2013. He indicated the task is not simple, however, the distributed plan is structured, well constructed, and provides a careful, deliberate oversight process. He reported that the KHPA Board approved a strategic plan at its meeting on Tuesday, March 17, 2009. The approved strategic plan contains goals relating to leadership in health policy and responsibility in implementing current policy. Dr. Allison indicated they will anticipate interaction in the upcoming process.

Chairman Barnett thanked all those attending and indicated another meeting would be scheduled so that the majority of Committee membership could attend and offer input.

The meeting was adjourned at 12:50 p.m.

Prepared by Jan Lunn Edited by Terri Weber and Kelly Navinsky-Wenzl

Approved by Committee on:

<u>June 12, 2009</u> (Date)

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