

2013 HOUSE HUMAN SERVICES

HB 1036

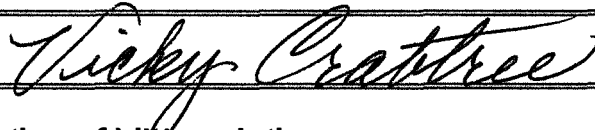
2013 HOUSE STANDING COMMITTEE MINUTES

House Human Services Committee Fort Union Room, State Capitol

HB 1036
January 16, 2013
Job # 17290

☐ Conference Committee

Committee Clerk Signature



Explanation or reason for introduction of bill/resolution:

Relates to membership, powers and administrative authority of health care data committee and publication of comparative physician fee.

Minutes:

Testimony 1 and 2 Attached

Chairman Weisz: Opened the hearing on HB 1036.

Shelia Sandness: Legislative analyst gave information on the bill. (See Testimony #1)

2:50 Rep. Porter: What does a repealer do?

Sandness: It takes away the requirement. It repeals Section 23.01.1-02.1. That section requires the data committee create a data collection retention and processing and reporting system. By repealing that you remove that requirement of the data committee.

Rep. Porter: During the course of discussion at the interim, it seems like there is nothing left. As people testified during the interim what were they were telling the committee was left to do? Why keep the statute at all?

Sandness: There was some discussion about the new Masters of Public Health Program requiring information. Also some discussion that there could be information going from Health Department reports and additional data collected that could be useful for grants.

Rep. Porter: Was it discussed about moving the authority from the health council to the school of medicine and let them do the data collection?

Sandness: Don't remember discussion in that regard.

5:34 Howard Anderson: Chairman of the Health Care Data Committee of ND Health Council testified in support of the bill. (See Testimony #2)

9:28 Rep. Porter: How much is in the health department budget for the committee to do their data collection?

Anderson: We only spend a few dollars a year. Most of the activities are in other parts of the Health Dept. budget. We do have some epidemiologists, like Dr. Pickart and a couple of day analysts who do work within the Health Dept. Usually they are under other federal grant programs not necessarily the data committee. No budget line for the data committee.

Rep. Porter: As we morph this committee to its new purpose, would this be the time to dissolve this or change the title or put the authority under the medical school?

Anderson: No. Most of these data collection points now are in the Health Dept. Once the Health Dept. has the data and a researcher asks for specific data, it is the Health Dept.'s responsibility that the elements of that our confidential.

12:50 Arvy Smith: Assistant Deputy Director of the Health Dept. We have many data systems in the Health Dept. One big one is the behavioral risk factor survey that the federal government funds. We look at data carefully and this past interim we looked at our cancer data registry and found having UND access to the data was helpful. We moved that data collection to the UND.

Rep. Porter: If this committee were to go away, you would still collect the data, and have it available. If you expanded the access to registries where does this committee inside the health council really have a purpose?

Smith: If that language would to go away there would be no impact on us regarding the data collection or sharing we do. If we want to look at the future and electronic health records we might want to analyze or use for various purposes, it may be appropriate to have the health council to weigh in on how we use that data. Looking to future it might be important.

Rep. Silbernagel: It appears to me that this legislation was intended to help make cost effective health care purchasing decisions. Has any of this data been provided to help in those decisions and if you don't have this data in the future, would it impact your decision making process?

Smith: We use to do reports of cost comparison for nursing homes. We did it annually or biannually. We rarely had requests for that and so we stopped doing that report. We are one of the few states in the nation that does not get hospital discharge data. We lost funding to have any ability to get the data or analyze it and haven't had requests for that information.

Chairman Weisz asked for more support and then for opposition. No response so he closed the hearing on HB 1036

19:18 Chairman Weisz continued on with discussion of HB 1036.

Rep. Laning: Government is not known with doing away with things. I think this is an opportune time to kill this whole committee and let the Health Dept. carry on.

Rep. Fehr: Arvy Smith said in the future it may be useful for some things. I am assuming that an Adhoc committee could be formed at any time if something is needed to be addressed. Is that not correct?

Chairman Weisz: The Health Dept. can put together any group they want to discuss whatever. It is not costing us anything to have the health data committee.

Rep. Porter: We might put an expiration date on the whole chapter to make them come back to the next session so they can redefine themselves and we can see what they are doing.

Chairman Weisz: We could do that. You could sunset 2301.1 which is the whole chapter.

Rep. Mooney: If you have a case where we are being asked to leave it for future reference, why do we want to disband it if it actually does have a purpose or are you saying there is no purpose?

Chairman Weisz: The legislation was passed to be a data repository. If we sunset it they have to look at what they are doing and what their duties should be in the 21st Century.

Rep. Porter: I use them as a reminder notice of what happens over the 18 months from the time we adjourn until we come back. The only way to make them come back in front of us and define their purpose and re-explain it is to put the expiration date on there.

Rep. Oversen: Regarding UND medical, has there been any discussion from their end in interest in taking part in this research or having some control of it?

Rep. Porter: In their testimony they made the reference in how it is being used for the research component of their Master's program. It made sense that the Health Dept. could still be the collector of the data with access from the research component that this committee is spinning in the center doing nothing.

Rep. Oversen: Is there an additional cost for the medical school to gain access to public record the state has?

Chairman: There is no charge from the Health Department, but they have to have a data use agreement protecting the security and confidentiality.

Rep. Oversen: I would agree the committee needs to look at what the council's purpose is and the sunset clause would be reasonable.

Chairman Weisz: There would be an amendment that says this chapter would sunset on...

Rep. Porter: July 1, 2015.

Chairman Weisz: I'm not supportive of doing away with the committee. A sunset clause does not change anything.

Rep. Porter: I move that we amend HB 1036 to include the sunset clause of the expiration date of this chapter on July 1, 2015.

Vice-Chair Hofstad: Second.

VOICE VOTE: MOTION CARRIED

Rep. Hofstad: I move a DP as amended.

Rep. Anderson: Second

ROLL CALL VOTE: 13 y 0 n 0 absent

MOTION CARRIED

January 17, 2013

VK
1/17/13

PROPOSED AMENDMENTS TO HOUSE BILL NO. 1036

Page 1, line 4, remove "and"

Page 1, line 4, after "23-01.1-02.1" insert "and chapter 23-01.1"

Page 1, line 5, after "information" insert "and the health care data committee; and to provide an effective date"

Page 3, after line 8, insert:

"SECTION 6. REPEAL. Chapter 23-01.1 of the North Dakota Century Code is repealed.

SECTION 7. EFFECTIVE DATE. Section 6 of this Act becomes effective on August 1, 2015."

Renumber accordingly

Date: 1-16-13
Roll Call Vote #: 1

2013 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 1036

House Human Services Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken: ☐ Do Pass ☐ Do Not Pass ☒ Amended ☐ Adopt Amendment

☐ Rerefer to Appropriations ☐ Reconsider

Motion Made By Rep. Porter Seconded By Rep. Hofstad

Representatives	Yes	No	Representatives	Yes	No
CHAIRMAN WEISZ			REP. MOONEY		
VICE-CHAIRMAN HOFSTAD			REP. MUSCHA		
REP. ANDERSON			REP. OVERSEN		
REP. DAMSCHEN					
REP. FEHR					
REP. KIEFERT					
REP. LANING					
REP. LOOYSEN					
REP. PORTER					
REP. SILBERNAGEL					

Total (Yes) _____ No _____

Absent _____

Floor Assignment _____

If the vote is on an amendment, briefly indicate intent:

*Voice
Vote
Motion
Carried* *add a sunset Clause
of July 1, 2015 to
Chapter 2301.1*

Date: 1-16-13
Roll Call Vote #: 2

2013 HOUSE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 1036

House Human Services Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken: ☒ Do Pass ☐ Do Not Pass ☒ Amended ☐ Adopt Amendment
☐ Rerefer to Appropriations ☐ Reconsider

Motion Made By Rep. Hofstad Seconded By Rep. Anderson

Representatives	Yes	No	Representatives	Yes	No
CHAIRMAN WEISZ	✓		REP. MOONEY	✓	
VICE-CHAIRMAN HOFSTAD	✓		REP. MUSCHA	✓	
REP. ANDERSON	✓		REP. OVERSEN	✓	
REP. DAMSCHEN	✓				
REP. FEHR	✓				
REP. KIEFERT	✓				
REP. LANING	✓				
REP. LOOYSEN	✓				
REP. PORTER	✓				
REP. SILBERNAGEL	✓				

Total (Yes) 13 No 0

Absent _____

Floor Assignment Rep. Laning

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

HB 1036: Human Services Committee (Rep. Weisz, Chairman) recommends **AMENDMENTS AS FOLLOWS** and when so amended, recommends **DO PASS** (13 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING). HB 1036 was placed on the Sixth order on the calendar.

Page 1, line 4, remove "and"

Page 1, line 4, after "23-01.1-02.1" insert "and chapter 23-01.1"

Page 1, line 5, after "information" insert "and the health care data committee; and to provide an effective date"

Page 3, after line 8, insert:

"SECTION 6. REPEAL. Chapter 23-01.1 of the North Dakota Century Code is repealed.

SECTION 7. EFFECTIVE DATE. Section 6 of this Act becomes effective on August 1, 2015."

Renumber accordingly

2013 SENATE HUMAN SERVICES

HB 1036

2013 SENATE STANDING COMMITTEE MINUTES

Senate Human Services Committee Red River Room, State Capitol

HB 1036
02/19/2013
19178

☐ Conference Committee

Committee Clerk Signature

Explanation or reason for introduction of bill/resolution:

Relating to the membership and posers of the health care data committee, and to the publication comparative physicians fee information and the health care data committee.

Minutes:

See attached testimony.

Chairwoman J. Lee opens the hearing for HB 1036

Senator Anderson Chairman of the Health Care Data Committee of the State Health Council. See attachment #1 (meter 0:35)

Chairwoman J. Lee questioned **Senator Anderson** what the repeals in section 5 and section 6.

Senator Dever and **Chairwoman J. Lee** discussed the definition of the repeals. **Senator Anderson** discussed the sunset clause with in the bill. (Meter 4:41)

There was no other testimony

Senator Larsen discussed about how the research data may help in future research ideas. (Meter 7:12)

Chairwoman J. Lee discussed how the information that is being collected, that it is not orderly, it's not available so we are not using it. The information collected, it would be useful for outcomes in the future. (Meter 9:57)

Senator Anderson discussed how the data needs to be tied together and that it is the best interest for the public and the treatment of patients. (Meter 10:30)

Senator Larsen questioned were the "clearing house" for the data would be located.

Senator Anderson stated that it would be kept at the health department, and that the information would be not identified. (Meter 13:19)

Senator Dever is concerned with confidentiality of the information and that it is covered in the bill.

Senator Anderson: all information that is collected is all confidential; those policies are already in place within the Dept. of Health. (Meter 14:54)

Senator Dever motioned for Do Pass

Senator Larsen seconded

Do pass 5-0-0

Senator Anderson will carry it to the floor.

Date: 2-19-13
Roll Call Vote #: 1

2013 SENATE STANDING COMMITTEE
ROLL CALL VOTES
BILL/RESOLUTION NO. 1036

Senate Human Services Committee

☐ Check here for Conference Committee

Legislative Council Amendment Number _____

Action Taken: ☒ Do Pass ☐ Do Not Pass ☐ Amended ☐ Adopt Amendment
☐ Rerefer to Appropriations ☐ Reconsider

Motion Made By Sen Dever Seconded By Sen. Larsen

Senators	Yes	No	Senator	Yes	No
Chairman Judy Lee	✓		Senator Tyler Axness	✓	
Vice Chairman Oley Larsen	✓				
Senator Dick Dever	✓				
Senator Howard Anderson, Jr.	✓				

Total (Yes) 5 No 0

Absent _____

Floor Assignment Sen. Anderson

If the vote is on an amendment, briefly indicate intent:

REPORT OF STANDING COMMITTEE

HB 1036, as engrossed: Human Services Committee (Sen. J. Lee, Chairman)
recommends **DO PASS** (5 YEAS, 0 NAYS, 0 ABSENT AND NOT VOTING).
Engrossed HB 1036 was placed on the Fourteenth order on the calendar.

2013 TESTIMONY

HB 1036

Mr. Chairman, members of the committee:

For the record, my name is Sheila Sandness and I am a Senior Fiscal Analyst for the Legislative Council. I am here to present information on House Bill No. 1036 to change the duties of the Health Care Data Committee. I appear neither for nor against the bill, but just to provide information and answer any questions you may have.

The interim Health Services Committee reviewed information from the Health Care Data Committee of the Health Council regarding the mission of the Health Care Data Committee. The interim Health Services Committee learned the Health Care Data Committee was created by the Legislative Assembly in 1987, and its purpose is to make public the information necessary for health care provider price comparisons. The committee learned since the legislation was passed, Medicare began charging for data, and there has been a reduction in the amount of information available. The committee learned costs associated with the compilation and transmission of the data and potential difficulties in the comparability of health care services have resulted in concerns among health care providers. The committee learned information comparing the cost of various health care services will continue to be available through the Centers for Medicare and Medicaid Services.

The committee learned other health care data currently available at the State Department of Health could be used for medical research in the new Master of Public Health Program at the state's two universities.

The interim Health Services Committee recommends House Bill No. 1036 to change the duties of the Health Care Data Committee. The bill changes the name of the Health Care Data Committee to the Health Data Committee. The bill removes provisions that require the data committee to compile information related to charges, operating costs, revenues, capital expenditures, and utilization at hospitals in the state and to prepare a report to provide information to the public. The bill also

repeals Section 23-01.1-02.1 which requires the data committee to create a data collection, retention, processing, and reporting system that will allow the distribution of information comparing the average fees charged by physicians practicing in the state and requires insurers, nonprofit health service corporations, health maintenance organizations, and state agencies provide data and information.

The Health Services Committee's findings and recommendation regarding the duties of the Health Care Data Committee can be found in the "Report of the North Dakota Legislative Management".

That concludes my testimony and I would be happy to answer any questions you may have.

#2

House Human Services Committee
House Bill 1036
Wednesday, January 16, 2013
Fort Union Room 9:30 AM

Chairman Weisz and members of the House Human Services Committee, for the record I am Howard C. Anderson, Jr, R.Ph., Chairman of the Health Care Data Committee of your State Health Council.

I and Marlene Kouba, who was at that time the President of the Health Council and is also a member of the Health Care Data Committee, spoke with the interim Health Services committee on a couple of occasions over the past year. We asked the Department of Health to consider the Data Committee charge and these suggested changes in the legislation, to make it work with the Department's vision and goals. The result is House Bill 1036.

In this bill draft, you will notice that we have removed the word "Care" out of Health Care in the legislation. This is not because we do not like Health Care, but because it is the feeling of State Health Officer Dr. Terry Dwelle that "Health Care" gives the impression that we are referring only to clinical data, when actually the Health Department has many data sources that are public health as opposed to clinical data. Most of the things that the Health Department does are not clinical, that is, we do not actually care for patients, but it is our intention to provide data that clinicians might use to improve the health care of their patients, and provide you with information you might use to focus resources on solving the problems, which analysis of the data will make more clear.

We have intentionally moved away from gathering data on costs and charges toward a focus on data for tools and research in helping you and our North Dakota practitioners in making decisions relative to care of their patients.

We look at this as a great opportunity for the Department of Health to gather and be a repository for data, which then can become a rich resource for our new public health program at our two research universities. This new program, for which you have appropriated substantial funds, will have master degree students, who will need to do research as they progress towards their degree. Obtaining data is often the biggest challenge for these researchers. While the Health Department does not have the resources and researchers to do the actual data analysis, we can be a source of data which these and other researchers can use in their work and in their studies. The state of North Dakota and the Department of Health can then use the results of that research in the decisions about where best to allocate your resources to have a positive impact on the health of all North Dakota citizens.

In summary, we have chosen to change the focus of the Data Committee. Rather than focusing on the price of specific services, we wish to focus on providing information practitioners, legislators, the Health Council and researchers can use to improve the health of North Dakota citizens.

Thank you.

**Senate Human Services Committee
House Bill 1036
Tuesday, February 19, 2013
Red River Room 9:30 AM**

Chairman Lee and members of the Senate Human Services Committee, for the record I am Howard C. Anderson, Jr, R.Ph., Chairman of the Health Care Data Committee of your State Health Council.

I and Marlene Kouba, who was at that time the President of the Health Council and is also a member of the Health Care Data Committee, spoke with the interim Health Services committee on a couple of occasions over the past year. We asked the Department of Health to consider the Data Committee charge and these suggested changes in the legislation, to make it work with the department's vision and goals. The result is House Bill 1036.

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The sunset clause added by the House should not be a problem, as the Data Committee will be pleased to report its progress to you next session. If there is no progress, the committee should go away.

In summary, we have chosen to change the focus of the Data Committee. Rather than focusing on the price of specific services, we wish to focus on providing information practitioners, legislators, the Health Council and researchers can use to improve the health of North Dakota citizens.

Thank you.