

**Summary of U-SHARE coalition meeting  
July 19, 2011**

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

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

Attendance:

Deena Ned, U of U Soc Work  
Sister Miriam  
Randal Topper, Prudential  
Steve White, AFLCIO  
Judy Christiansen, Pfizer  
Danny Harris, AARP  
Sheila Walsh-McDonald, SLCAP  
Kim Meyers, UHPP

Janet Shipton  
Jen Donnelly, League Women Voters  
Rep. Dave Clark  
Tom Metcalf, Utah AAP  
Noah Harper, U of U/UHPP  
Missy Corchoran, Prudential  
Barbara Munoz, Voices  
Shelly Braun, UHPP

U-SHARE (Utahns for Sustainable HeAlth REform) held its monthly meeting on July 19 from 11:30-1:00. We thank the Catholic Diocese for allowing us to use their facilities.

- **Strategic Work Group report:**

The strategic work group reported on their meeting with Rep. Dunnigan, chair of the Health System Reform Task force. Rep. Dunnigan agrees that the cost of health care is too high. He's interested in wellness programs, tort reform, and governance of the Utah Health Exchange. He feels like affordability (premium subsidies to help individuals pay for the high cost of insurance premiums) is not as important as addressing the systemic issues of the high cost of health care.

Rep. Dunnigan's interest in establishing appropriate governance for the Utah Health Exchange is in line with U-SHARE's goals. The work group suggests this as an issue the coalition can take on for the 2012 legislative session.

- **Rep. Dave Clark**

Rep. Dave Clark attended our coalition meeting today to answer questions we may have about implementing health reform measures in Utah.

Rep. Clark suggested that the function of the "navigator" is a more important issue than that of governance. Our Exchange ([UHE](#)) is housed in an existing state agency and can continue there. He also stated that the general rules for the exchange are out there and in his opinion Utah's exchange doesn't have to do anything to be compliant. He also thinks that Utah will let the federal government run the [American Benefits Exchange](#) (ABE)—the exchange for the individual market (Utah's exchange is a SHOP, or small business exchange). He is optimistic that we can impact the cost of health care with payment and delivery reform, as demonstrated by the projects now underway with [HealthInsight](#).

Rep. Clark expressed his opinion that whether or not the ACA holds after all the court challenges, Congress has an "appetite to take over insurance" – a state role. Rep. Clark also stated that the exchange is only a tool: if you think about other insurance you have you own that policy (car, etc.) but you don't own your health insurance, you rent it from your employer, owning it would solve job lock. We value buying insurance with pretax dollars and the only way we'd be able to do that is through an exchange. However, he identified a key problem with working in the private market for reform: the "secret sauce"

each insurer uses to set premium rates. The challenge is to get all the insurers to play by the rules, which, in his opinion, they have been doing the last 3-4 months.

When asked what role U-SHARE can play in reform implementation in Utah, Rep. Clark stated that the governance structure of the exchange doesn't really matter; insurance is insurance. U-SHARE however, countered that it does matter to consumers. He went on to say that no-one is talking about "navigators" in Utah but it's big in the ACA. He pointed to DWS (Dept. Workforce Service) electronic enrollment and the savings that has brought, and stated that innovation could have a big impact on health care.

The discussion then moved to the use of subsidies in the exchange and wellness. *Subsidies*: Utah has a subsidy program [UPP](#) (Utah Premium Partnership) and it might make more sense for Utah to use the federal subsidies of the ACA and re-direct UPP (state) money to other priorities. Rep. Clark answered in praise of UPP and thinks that if the feds run the ABE they will send eligibility to the state level, probably DWS. *Wellness*: if we take care at the community level, for the long term, we'll alleviate some costly medical issues. Rep. Clark pointed out that as coverage is expanded through reform we will run into the problem of not enough providers, specialists included.

Rep. Clark summed up by suggesting we also take a look at the essential benefit package—it is still being determined at the federal level—if it is a rich package it will drive costs up. He closed by saying he hopes U-SHARE will look at what's taking place with Valley Mental Health and their contractor.

- **Next Steps:**
  - The Strategy Work Group will meet before the August U-SHARE meeting and make a draft action plan for the governance issue, to be presented at the Aug 24 meeting.
  - We will meet in August while the legislature is on break, in order to build our strategy as a coalition promoting reform implementation.
  
- **Next Meeting:**
  - Wednesday, Aug 24, 11:30-1:30
  - Catholic Diocese, 27 C Street
  - Bishop Kearney Room