Wyoming Healthcare Commission

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Executive Summary

INTERIM REPORT OF PRELIMINARY FINDINGS

Date: 30 June 2004

From: T. Chris Muirhead, Chairman

The full draft of the WHCC's preliminary report follows. The legislation that created the WHCC required our group to address 10 specific healthcare problems:

1. Access to affordable, effective, and quality healthcare
2. Access to affordable health insurance
3. Wellness and personal responsibility
4. Disease prevention and management
5. Healthcare tort and medical liability insurance reform
6. Workforce shortages
7. Cost-shifting as a result of low reimbursements
8. Long term care and an aging population in Wyoming
9. Impacts of reforms in other non healthcare activities
10. Investigating and reducing medical errors and compensating injured patients

An eleventh element was also added that charged the WHCC with responsibility for addressing other issues "deemed appropriate". Studies involving healthcare information technology and a recommendation involving the state's Prescription Drug Assistance Program (P-DAP) serve as good examples of what was not specifically included in the legislation that was subsequently considered important.

Also during the 2003 Legislative Session, a study of the feasibility and affordability of joint underwriting associations (JUAs) and other state-sponsored insurance mechanisms was mandated. Through the legislation, the WHCC and Wyoming Insurance Department were directed to work together to complete this study by October 15, 2003. Since no funds were appropriated for the study, the WHCC budgeted $20,000 for actuarial consulting work and the Wyoming Insurance Commissioner, Ken Vines, provided extensive in-kind services to help complete the study.

Nine recommendations were sent forward from the WHCC to the joint labor, health and social services committee in November 2003. These initial recommendations addressed elements contained in the list above; notably affordable health insurance, disease management,

healthcare workforce issues, healthcare tort, medical liability and the reduction of medical errors. The medical liability issue has demanded immediate and on-going WHCC attention, but progress has been made in all mandated areas.

As of December 2003, the subcommittee structure of the WHCC was redesigned to better distribute workloads and ensure that progress would continue to be made in all areas of our legislatively-defined mission. During the 2004 Legislative Session, two additional studies were directed toward the WHCC, so now each of the four subcommittees is responsible for managing one major study:

- Healthcare Access & Affordability subcommittee has just awarded a $150,000 contract to Navigant Consultants to help the WHCC study options for rural healthcare delivery systems. The goal of this study is to make recommendations about which models might work most effectively and efficiently in Wyoming.
- Affordable Healthcare Coverage subcommittee is carrying on the work started by the SPG Taskforce on the Uninsured. The goal is to develop innovative mechanisms for covering more of Wyoming's uninsured and underinsured citizens.
- Healthcare Information Technology (HCIT) & Disease Management subcommittee helped organize the $400,000 study to determine the feasibility of integrating HCIT, including an Electronic Medical Record, into Wyoming's healthcare infrastructure. This group is also working to define a comprehensive, coordinated approach to addictive disease, with emphasis on prevention and disease management. The goals of this group are to facilitate the work of the HCIT Technical Management Committee as defined in the HCIT study legislation (SF29) and to address tobacco use and obesity in Wyoming.
- Medical Liability Insurance & Uncompensated Catastrophic Care subcommittee has been researching viable options for a mandatory pretrial screening process that can be recommended if voters approve Constitutional Amendment C in November. This group is also responsible for managing the study of unreimbursed catastrophic and trauma care in Wyoming hospitals (SF34). The goals will be to recommend strategies for creating viable mechanisms for addressing both of these issues.

When the decision was made to call a special session of the legislature for July 12-17, 2004, the WHCC presented three recommendations along with a request that the Legislature use the special session to consider crisis responses rather than to adopt hastily formulated long-term solutions. The WHCC will present recommendations for potential long-term solutions in time for the 2005 General Session.

During its first year of operation, the WHCC designed and instituted transparent public processes for conducting meetings and made conscious efforts to conduct unbiased, open-ended research. Our studies, agendas, minutes, and many research documents are posted on our website and our e-mail contacts list now numbers over 300 individuals, many of whom are single contacts for large organizations.

Our central mission is to act as a knowledgeable and dependable resource for Wyoming decision-makers and citizens alike, offering viable responses to a broad range of Wyoming healthcare issues.

P.O. Box 2760 · Casper, WY 82602
E-Mail: dharro@state.wy.us · www.wyominghealthcarecommission.org
FAX (307) 235-3266 · PHONE (307) 235-3227