

**JOINT MEETING MINUTES:
COST TRENDS AND MARKET PERFORMANCE COMMITTEE & COMMUNITY
HEALTH CARE INVESTMENT AND CONSUMER INVOLVEMENT COMMITTEES**

Meeting of July 5, 2017

MASSACHUSETTS HEALTH POLICY COMMISSION

**COST TRENDS AND MARKET PERFORMANCE & COMMUNITY HEALTH CARE
INVESTMENT AND CONSUMER INVOLVEMENT COMMITTEES OF THE
MASSACHUSETTS HEALTH POLICY COMMISSION
HEALTH POLICY COMMISSION
50 MILK STREET, 8TH FLOOR
BOSTON, MA 02109**

Docket: Wednesday, July 5, 2017 10:00 AM-12:00 PM

PROCEEDINGS

The Massachusetts Health Policy Commission's (HPC) Cost Trends & Market Performance (CTMP) and Community Health Care Investment & Consumer Involvement (CHICI) Committees held a joint meeting on Wednesday, July 5, 2017, at the HPC's offices, 50 Milk Street, 8th Floor, Boston, MA.

Members present included Dr. David Cutler (Chair, CTMP), Mr. Rick Lord (Chair, CHICI), Mr. Tim Foley, Mr. Renato Mastrogiovanni, and Ms. Lauren Peters, designee for Ms. Kristen Lepore, Secretary of Administration and Finance.

The meeting notice and agenda can be found [here](#).

The presentation from the meeting can be found [here](#).

A recording of the meeting can be found [here](#).

Dr. Cutler called the meeting to order at 10:02 AM and offered a brief introduction.

ITEM 1: APPROVAL OF THE MINUTES FROM THE MAY 31, 2017 JOINT MEETING

Dr. Cutler asked for a motion to approve the minutes from the joint CTMP and CHICI Committee meeting on May 31, 2017. Mr. Lord motioned to approve the minutes. Mr. Foley seconded. Committee members voted unanimously to approve the minutes.

Dr. Cutler provided an overview of the day's agenda.

ITEM 2: PRESENTATION ON HPC DATAPOINTS

Mr. David Seltz, Executive Director, welcomed members of the public to the meeting. He noted that the HPC had recently introduced HPC DataPoints, a website that provides data and information on timely health policy issues.

Mr. Seltz stated that HPC DataPoints will build upon the HPC's annual reports, providing "bit-sized" analyses for the public. He stated that the HPC DataPoints web briefs will integrate Tableau graphics that allow the public to directly engage with the data.

Mr. Seltz stated that HPC staff would present on the three published DataPoints as well as analysis concerning new data from the Centers for Medicare and Medicaid Services (CMS).

Ms. Natasha Reese-McLaughlin, Senior Manager for Research and Cost Trends, presented an overview of DataPoint #2: Avoidable Emergency Department Use. For more information, see slides 7-8.

Dr. Cutler stated that this information was extremely well presented. He suggested that the HPC employ different shading to show better contrast for data.

Ms. Reese-McLaughlin presented an overview of DataPoint #1: Preventable Oral Health Emergency Department Visits. For more information, see slides 10-11.

Mr. Seltz noted that the HPC previously released a Research Brief on Oral Health. He stated that this brief discussed an exemplar policy around establishing a new level of dental professional. He stated that, in places where such a policy was introduced, greater access to dental care was available to more vulnerable populations. Mr. Seltz stated that Governor Baker recently released language around this level of licensure.

Dr. Cutler asked whether the HPC could make recommendation to the Legislature on this topic. Mr. Seltz responded that the HPC had provided data on access to oral health care to the Legislature.

Ms. Rachel Salzberg, Research Associate, Research and Cost Trends, presented an overview of DataPoint #3: ACA's Preventative Coverage Mandate's Impact on Spending and Utilization of Contraception in MA. For more information, see slides 13-14.

Mr. Mastrogiovanni asked how this has impacted abortion rates. Ms. Salzberg responded that, due to the lag in data, it is difficult to determine any impact at this time.

Dr. David Auerbach, Director, Research and Cost Trends, presented an update on trends in MA and U.S. Health Spending through 2014 based on new data from CMS. For more information, see slides 16-23.

Dr. Auerbach noted that, as of 2014, Massachusetts is no longer has the highest per capita personal health care spending in the country. He added that Massachusetts has had the fourth lowest average annual rate in health spending growth between 2009 and 2014.

Dr. Cutler suggested that the HPC update slide 19 with data from 2015 and 2016.

Mr. Mastrogiovanni recommended breaking down the trend lines on slide 19 to demonstrate how different areas (e.g. out-of-pockets, premiums) are changing over this period. Dr. Auerbach stated that the HPC would look into such an analysis. Mr. Seltz stated that the HPC planned to present such data at the 2017 Cost Trends Hearing.

Mr. Seltz highlighted the importance of the data on slide 19. He stated that, throughout the 2000s, Massachusetts had the highest growth in health care costs across the country. After 2010, however, he stated that this trend changed. Mr. Seltz noted that this period coincided with the passage of a large amount of health care cost containment legislation.

Dr. Cutler asked the HPC to assess how much of the growth in spending in 2006 and 2007 was due to increased coverage in Massachusetts. He recommended displaying this information by population.

Referring to slide 21, Dr. Cutler asked staff to conduct research into the drivers of the large growth in home health. Mr. Mastrogiovanni added that the 155% increase could be a positive number, leading to decreases in other areas. Mr. Seltz echoed the need to further understand the implications from the increase in home health. Mr. Foley suggested that the HPC delve into home health at the 2017 Cost Trends Hearing.

Mr. Seltz stated that the data from CMS demonstrates that there has been progress from health care cost containment adding, however, that Massachusetts still has 31% greater per capita spending than the national average.

ITEM 3: 2017 COST TRENDS HEARING

Mr. Seltz provided an overview on the 2017 Cost Trends Hearing (CTH). He asked Board members for their feedback on the agenda for the upcoming event. For more information, see slide 25.

Dr. Cutler suggested streamlining the topics discussed at the CTH. He noted that there were three areas on which the HPC should focus: (1) reviewing areas with significant potential savings from improving population health, including behavioral health, (2) conducting a retrospective on consolidation, and (3) promoting value-based payment reform.

Mr. Seltz noted that the discussion of behavioral health would be integrated throughout the entire discussion. He stated that the HPC was working on a retrospective of health care transactions.

Mr. Lord noted that at the 2016 Hearing, the discussion of findings from the HPC's retrospective on the transaction between Lahey Health and Winchester Hospital was extremely interesting. He noted his hope that a similar discussion would occur this year with relation to other transactions.

Mr. Lord suggested that the HPC should again dedicate a panel at the Hearing to the employer perspective on cost containment.

Mr. Foley added that he would also like to see a panel dedicated to front-lined care givers to better understand how the health care workforce is engaged in addressing the cost of

health care. He noted that he enjoyed the 2016 discussion with the pharmaceutical industry.

Mr. Seltz noted that, in addition to these suggestions, the Hearing will include a conversation about the health care cost growth benchmark.

Ms. Peters suggested that the 2017 Hearing should include a panel of payers and providers who have done well in meeting the benchmark. She noted that this would be a good opportunity for organizations to share best practices towards health care cost containment.

Mr. Mastrogiovanni reiterated that the HPC should discuss the rising price of pharmaceutical drugs at the 2017 Hearing. He noted that the HPC should also review the shift in community health care and how it relates to innovation. He emphasized the need to review cost transparency at the Hearing.

Mr. Seltz thanked the Board for their input. He noted that the Center for Health Information and Analysis (CHIA) would be launching a new health care cost transparency website for the Commonwealth this fall.

ITEM 4: INVESTMENT SPOTLIGHT: HCII AWARDEE – BOSTON HEALTH CARE FOR THE HOMELESS PROGRAM

Mr. Griffin Jones, Senior Manager, Strategic Investments, provided an overview of the Health Care Innovation Investment Program (HCII). For more information, see slides 27-28.

Mr. Barry Bock and Ms. Mary Takach from Boston Health Care for the Homeless Program presented on social determinants of health coordinated care hub for homeless adults. For more information, see meeting recording and the associated [presentation](#).

ITEM 5: SCHEDULE OF NEXT MEETING

Dr. Cutler thanked Boston Health Care for the Homeless for their remarks. He asked for any questions or comments from the audience.

Dr. Cutler announced that the committees would next meet in October 2017. Dr. Allen adjourned the meeting at 11:51 AM.