

**MINUTES OF THE MEETING OF THE
ADVISORY GROUP TO THE LEGISLATIVE COMMITTEE ON
HEALTH CARE CONCERNING UPDATE OF STUDY OF
THE UNINSURED IN NEVADA**

(Nevada Revised Statutes 439B.200)

October 22, 1997

Carson City, Nevada

The first meeting of the Advisory Group to the Legislative Committee on Health Care Concerning Update of Study of the Uninsured in Nevada for the 1997-1998 interim was held on Wednesday, October 22, 1997, at 4 p.m. in the Legislative Building, Room 1214, 401 South Carson Street, Carson City, Nevada, via a telephone conference call. Page 3 contains the "Meeting Notice and Agenda."

ADVISORY GROUP MEMBERS PRESENT VIA TELEPHONE:

Senator Raymond D. Rawson, Chairman

Jeanette K. Belz, President and Chief Executive Officer, Nevada Association of Hospitals and Health Systems

Elizabeth Gilbertson, Southwestern Regional Director, HEREIU Fund

Donny L. Loux, representing people with disabilities and their families

Marie H. Soldo, Vice President, Government Affairs, Sierra Health Services, Inc.

Chris Thompson, Administrator, Division of Health Care Financing and Policy, Department of Human Resources

John Yacenda, Ph.D., Executive Director, Great Basin Primary Care Association

OTHERS PRESENT VIA TELEPHONE:

R. Keith Schwer, Ph.D., Director, Center for Business and Economic Research, University of Nevada, Las Vegas (UNLV)

Donald E. Carns, Ph.D., Director, Center for Public Data Research, UNLV

OTHERS PRESENT IN CARSON CITY:

Bill Welch, President, Nevada Rural Hospital Project

LEGISLATIVE COUNSEL BUREAU STAFF PRESENT:

H. Pepper Sturm, Chief Principal Research Analyst

Marla L. McDade, Senior Research Analyst

Melissa Stafford Jones, Senior Research Analyst

Risa L. Berger, Principal Deputy Legislative Counsel

Jeanne Peyton, Senior Research Secretary

MEETING NOTICE AND AGENDA

Name of Organization: Advisory Group to the Legislative Committee
on Health Care

Concerning Update of Study of the Uninsured in Nevada

(Nevada Revised Statutes 439B.200)

Date and Time of Meeting: Wednesday, October 22, 1997

4 p.m.

Place of Meeting: Legislative Building

Room 1214

401 South Carson Street

Carson City, Nevada

Via a Telephone Conference Call

AGENDA

1. Opening Remarks by the Chairman

Senator Raymond D. Rawson

*II. Requirements for the Updated Study of the Uninsured in Nevada

A. Topics to be included

B. Time Lines

C. Other Matters Related to the Study

*III. Directions to Staff

IV. Public Testimony

V. Adjournment

*Denotes items on which the advisory group may take action.

Note: We are pleased to make reasonable accommodations for members of the public who are disabled and wish to attend the meeting. If special arrangements for the meeting are necessary, please notify the Research Division of the Legislative Counsel Bureau, in writing, at the Legislative Building, Capitol Complex, Carson City, Nevada 89701-4747, or call Jeanne Peyton, at 684-6825, as soon as possible.

Notice of this meeting was posted in the following Carson City, Nevada, locations: Blasdel Building, 209 East Musser Street; Capitol Press Corps, Basement, Capitol Building; Carson City Courthouse, 198 North Carson Street; Legislative Building, Room 1214, 401 South Carson Street; and Nevada State Library, 100 Stewart Street. Notice of this meeting was faxed for posting to the following Las Vegas, Nevada, locations: Clark County Office, 500 South Grand Central Parkway; Grant Sawyer State Office Building, 555 East Washington Avenue.

OPENING REMARKS BY THE CHAIRMAN

Chairman Rawson called the meeting to order at 4:10 p.m. He explained that the purpose of this meeting is to discuss what should be included in an updated survey of the uninsured population in Nevada.

REQUIREMENTS FOR THE UPDATED STUDY OF THE UNINSURED IN NEVADA

Dr. Yacenda (identified on page 1) asked if the survey would be separated by county (17 counties) or by medical service area.

R. Keith Schwer, Ph.D.

Dr. Schwer (identified on page 1) said that the previous survey, *Report of Technical Advisory Committee to Study of Persons Not Covered by Health Insurance*, Legislative Counsel Bureau (LCB) Bulletin No. 93-22, dated October 1992 (see Exhibit A for further information), included the southern urban area, the northern urban area, and the rural counties (which were grouped into one region).

The Chairman recommended conducting the survey by medical service area which would include:

- Las Vegas and the southern rural service areas;
- Reno and the western rural service areas; and
- Elko and the surrounding rural areas.

Dr. Schwer concurred with the Chairman.

Bill Welch

Mr. Welch (identified on page 1) mentioned that he is in the process of discussing the proposal submitted by William Hale, Chief Executive Officer, University Medical Center (UMC), Las Vegas, Nevada, which was submitted to the committee at the meeting of the Legislative Committee on Health Care on October 13, 1997, with the staff at UMC. He mentioned the possibility of other counties participating in the program and adding to Mr. Hale's proposal.

Additionally, Mr. Welch offered his assistance in collecting data from the hospitals in Nevada regarding the number of uninsured children.

Responding to questions posed by the advisory group members, Dr. Schwer explained that:

- The 1992 survey was done by a combination of both mail and telephone inquiries. The telephone was mostly used for persons who were difficult to reach and the non-English speaking population. By using multiple approaches, a

greater percentage of the population was able to be surveyed.

- In the rural areas, approximately one-fourth of the population would be missed using a telephone survey, therefore, a mail questionnaire is more effective.
- The last survey had an "excellent" response rate of 40 percent, compared to the national average which is approximately 16 percent.
- Korean and Spanish-speaking persons were contacted by telephone. It is difficult to determine a household that would prefer a Spanish questionnaire.
- Growth estimates on the minority population are available from a census; although, in his opinion, the results are questionable.
- An effort should be made to poll the minority groups and prepare the survey in several languages so that they are able to participate.

Ms. Soldo (identified on page 1) informed the group that some of the information on the last survey was analyzed by ethnicity.

According to Ms. Loux (identified on page 1) the number of uninsured persons with disabilities (children and adults) were not identified in the 1992 survey.

Responding, Dr. Schwer recommended that this might be an issue to place in the updated questionnaire. He explained that the 1992 survey was put together in a more general, readable manner, but he is open to any suggestions on what should be placed in the questionnaire and the final report.

Dr. Yacenda proposed that the new survey should be designed in a manner that could be easily replicated, and in a fashion that will not require a great deal of planning if it became necessary to address this issue again in the future.

Mr. Thompson (identified on page 1) said that more specific data is needed about children relating to:

- Biographical, health status, and economic information.
- The number of uninsured children located in Nevada, identified by age and income.
- The type of insurance the child has; if uninsured, how long; or what kind of insurance he or she previously possessed.

He informed the group that Dr. Carns, Director, Center for Public Data Research, University of Nevada, Las Vegas (UNLV), had worked on collecting Medicaid and Uniform Billing 92 (UB92) data. This information can be used to corroborate some of the uninsured data.

Senator Rawson added that the survey should include information about dental and vision insurance.

H. Pepper Sturm

H. Pepper Sturm (identified on page 2) suggested including the following items in the questionnaire:

- What items does your health insurance cover? Does it include primary health care; dental, prescription drugs, and vision?
- Income level should reflect the federal poverty level. National studies and studies conducted in other states take a percentage of the federal poverty level. In order for Nevada to compare its statistics with the Federal Government or other states, it must collect the same type of data.

- Data collected on children should include a better specificity of age. The best scenario would be a breakdown by year or cluster small groups of ages such as: 0 to 1 year, 1 to 3 years, 3 to 6 years, et cetera.
- Use the same reporting method as the Federal Government.

Mr. Thompson (identified on page 1) agreed that the best scenario would be for the survey document to include children by individual year, but a minimum breakdown could include clusters of ages 0 to 1 year, 2 to 5 years, 6 to 13 years, and 14 to 18 years.

Dr. Schwer informed the committee that the previous survey document included the specific age and gender of each child, and grouped the incomes of families.

Committee discussion covered the following items to consider including in the survey:

- Income level of family.
- Where care is acquired for children (doctor's office, emergency room, urgent care center, et cetera) with a breakdown of insured and uninsured patients.
- Handicapped and high-risk persons who cannot obtain insurance.
- Although the goal of the questionnaire is to obtain information on uninsured children, also apply the questions to the adult population. Therefore, if the Nevada Check-up Plan can be maximized to include adults, the information from this survey can be expanded upon.
- A comparison of the new survey to the 1992 survey.

Mr. Thompson noted that a federal requirement of the Children's Health Program is that a study be conducted on an annual basis as a means of evaluating the success of the project.

Ms. Soldo offered Dr. Schwer data collected for the Health Employer Data Information Set (HEDIS), a report compiled by health maintenance organizations (HMOs) on an annual basis. She suggested that this may be helpful in preparing the survey.

Mr. Thompson also volunteered to assist with any information required from Medicaid which might be helpful in preparing the survey.

Responding to Jeanette Belz (identified on page 1), Dr. Schwer said that a longitudinal study would be much more expensive. He said he would include an item on the survey form to identify persons who would be willing to participate in such a study. This information could be used if additional studies are conducted at a later date.

Mr. Welch suggested to include the following items in the survey:

- Preexisting conditions.
- Male/female ratios in children.
- Most frequent reason for accessing the health care system.

Dr. Carns said that past studies have been conducted on children with special health care needs, which are updated annually. This information and the facilities at UNLV are open to Dr. Schwer's use when compiling the material to be included in the survey questionnaire.

Responding to Ms. Gilbertson (identified on page 1) regarding pinpointing children with chronic illnesses that are not disabling such as asthma or diabetes, Senator Rawson said they might fall into the high-risk group.

Ms. Gilbertson also suggested identifying why certain children are uninsured, particularly if their parents are employed.

Referring to pages 142 through 144 of the mail survey (Exhibit A), committee discussion covered the following topics:

- Considering people who have been uninsured for less than one year, and of that group how many are between jobs or uninsured for other factors.
- Determining whether a financial contribution is made toward premiums.
- Ascertaining whether a person has individual health coverage and his/her family is uninsured.
- Breaking down the employer size into smaller groups.

In response to Mr. Sturm, Dr. Schwer said that he could present the data from the survey to the Nevada State Legislature on a computer disc so that the information can be easily reused by LCB staff to generate additional reports.

Responding to Dr. Yacenda and Senator Rawson, Dr. Carns said that last year there were approximately 1,800 homeless people in Las Vegas who received counseling and job referrals. He said that a survey on the homeless population has been done for the past three or four years, and it would be easy to add health related issues to the questionnaire the next time it is prepared.

Responding to the Chairman regarding the time line for completing the survey, Dr. Schwer made the following comments:

- If the survey is conducted during November and December 1997, the risk of a lower response rate exists due to the holiday season.
- Allow the next 30 days to work on the questionnaire, layout the format, and be ready to go into the field by January 1, 1998.
- If 90 days is allowed to conduct the survey, figures could be available by April 1998.
- The questionnaire will be difficult to conduct by telephone due to the detailed nature of the issues.

Mr. Thompson noted that adequate time must be allowed to complete the survey so the final document has all the information needed and can be useful in the future when conducting additional studies.

In response to Mr. Welch, Mr. Thompson said that modifications to the Children's Health Program can be presented to the Federal Government at any time with prior notice.

PUBLIC TESTIMONY

Janice C. Pine

Ms. Pine, Director, Government Relations, Saint Mary's Regional Medical Center, Reno, Nevada, urged the committee to separate the data collected by county or zip code.

The Chairman advised Dr. Schwer to record the zip code information so it may be placed in the final report.

DIRECTIONS TO STAFF

Senator Rawson directed staff to mail a copy of the draft survey questionnaire, as soon as it is completed by Dr. Schwer,

to the members of the Legislative Committee on Health Care and the extended membership of the committee. After reviewing this document, each member should advise LCB staff of his/her approval or disapproval. At that point, it can be decided if another advisory group meeting is necessary.

The Chairman stressed the importance of completing the draft survey form promptly. He suggested that Dr. Schwer communicate with Dr. Carns and the members of the committee to ensure that their concerns regarding the survey are addressed.

Senator Rawson asked if there was a consensus among the advisory group members to proceed with the suggestions discussed during this meeting. There being no disagreement among the members, the Chairman directed staff to proceed with the preparation and planning of the draft survey form.

Responding to Ms. Belz (identified on page 1), Dr. Schwer said that 4,693 households responded to the mail survey and 1,400 households to the telephone survey in 1992.

In response to Dr. Yacenda, Dr. Schwer said that his telephone number is 702-895-3191 and facsimile number is 702-895-3606.

ADJOURNMENT

Exhibit B is the "Attendance Record" for this meeting.

There being no further business, Chairman Rawson adjourned the meeting.

Respectfully submitted

Jeanne Peyton

Senior Research Secretary

Approved By:

Senator Raymond D. Rawson, Chairman

Date

LIST OF EXHIBITS

Exhibit A is Legislative Counsel Bureau Bulletin No. 93-22, titled *Report of Technical Advisory Committee to Study of Persons Not Covered by Health Insurance*, dated October 1992.

Exhibit B is the "Attendance Record" for this meeting.

Copies of the materials distributed during the meeting are on file in the Research Library of the Legislative Counsel Bureau, Carson City, Nevada. You may contact the library at (702) 684-6827.