

**HEALTHCARE CONSUMER PROTECTION ADVISORY COMMISSION  
MINUTES OF COMMISSION MEETING  
SEPTEMBER 16, 2024**

The Healthcare Consumer Protection Advisory Commission met at the Department of Justice in Concord on September 16, 2024, at 11:00 AM, according to the notice.

The members of the Commission who attended:

- Yvonne Goldsberry, Ph.D., MPH (Public Member and President, Endowment on Health)
- Brandon Garod, Consumer Protection and Antitrust Bureau Chief (Attorney General, designee)
- Michelle Heaton, Esq. (Insurance Commissioner designee)
- Patricia Tilley (Department of Health and Human Services designee)
- Representative Tim McGough (New Hampshire House of Representatives)
- Marie Ramas, M.D. (Public Member)

Staff of the Commission:

- Christine L. Rioux (Investigative Paralegal, DOJ, Consumer Protection and Antitrust Bureau)

Those who appeared before the Commission:

- Bradley Herring, Ph.D. (McKerley Professor of Health Economics, University of New Hampshire)

Yvonne Goldsberry, Chair, presided. She called the meeting to order at approximately 11:05 AM. Members of the Commission and others in attendance introduced themselves. The Commission's first order of business was to vote to accept the minutes of the last meeting.

- Motion: **That the minutes of the August 20, 2024 meeting be accepted.**
- Made by: Ms. Heaton
- Seconded by: Dr. Ramas
- Outcome: Passed (unanimous)

The next order of business was to review the draft guidelines for what the Commission will use to evaluate Research Center proposals the Commission expects to receive from various research entities. Mr. McGough began the discussion mentioning that the emphasis should be on evaluating human outcomes rather than on academic clinical outcomes, and the results of the research need to be reported to the public. Dr. Ramas also added that it is a micro versus macro level of looking at data and looking at what the picture is currently for New Hampshire so that the Commission can then tell the researchers what goals they would like to accomplish with the research. She pointed out that the current guidelines provide flexibility to find the gaps and request that the researchers fill in those gaps. Mr. McGough mentioned that he hears a lot of complaints from citizens of New Hampshire that access is a real problem in the state. It was reiterated that the focus should be on cost, quality, and access to healthcare. Ms. Heaton pointed

out that we have access to data from various sources already, and that the research needs to be more specific to New Hampshire and to what type of access we are referring to. For example, access in insurance is different than access to providers, or how long one must wait to see a particular provider. Another important factor discussed was how we can tailor the information to present it to consumers.

Dr. Herring from the University of New Hampshire (“UNH”) gave a presentation to the Commission regarding his proposal for a Center for Studying Healthcare Markets at the University of New Hampshire with funding from the Healthcare Consumer Protection Advisory Commission Trust Fund. His proposal for research includes three aims or goals. The first would be to evaluate the trends in healthcare market concentration in New Hampshire. He proposes using data that is currently already available, but to also conduct original research with the goal of collecting new information to provide a resource for the state’s use moving forward. The focus of this evaluation would be to analyze where New Hampshire hospitals, insurance and physician markets compare to those of Maine and Vermont, and also to New England and the United States. With an emphasis on updating data that currently exists, disseminating results via a consumer friendly website, and having the ability to provide data analytics support, Dr. Herring is confident that the Center could be a resource for the Department of Justice, Health and Human Services, and the Insurance Department.

After Dr. Herring responded to a few clarifying questions from Commission members, Mr. McGough pointed out to Dr. Herring that the indirect costs percentage was too high, and that he was confident the proposal would not make it through an Executive Council vote. He mentioned that the fund is also set up to address secondary uses and that state would need to look at immediate impact issues in comparison to a non-clinical study with high indirect costs. Dr. Herring said that they would be amenable to adjusting that percentage for indirect costs with guidance from the Department of Justice. Mr. Garod assured him that guidance could be provided. Dr. Goldsberry suggested that a motion be made to deny the UNH proposal and request a revised more formal proposal.

- Motion: **That the UNH proposal be denied and a request be made for a more formal proposal.**
- Made by: Ms. Heaton
- Seconded by: Dr. Ramas
- Outcome: Passed (unanimous)

Dr. Herring departed the meeting. Mr. McGough also departed the meeting to attend another.

The remaining members further discussed the issues that they hope the research center will address, specifically the effects of market concentration on New Hampshire consumers and access to care. Additionally, it was discussed that the research should not simply be a repeat of what is already available from other data sources. Ms. Heaton mentioned there are gaps in data as it relates to self-funded plans, Medicaid and Medicare consumers, given that the Insurance Department does not regulate or have access to that information. Dr. Ramas reiterated that consumers care about the things that affect them directly, and that from a policy standpoint the research needs to measure outcomes between hospitals, outpatient facilities, and insurance. She

also mentioned that any analysis where the data is risk adjusted, should be pointed out and addressed. Also need to consider critical access hospitals as a subgroup, and obstetrics and labor and delivery. Also, mental health services, substance use disorder services and primary care. All agreed that results must be translated to consumers in a way that is easy to understand. Mr. Garod also mentioned the importance of making this Research Center a sustainable entity going forward, as the initial funds will eventually dissipate but the need for on-going research will be important and necessary to New Hampshire.

The members also discussed the Dartmouth College proposal and that their representative would be invited to the next meeting. The Commission discussed potential conflicts of interest with Dartmouth College given that Dartmouth Hitchcock Medical Center is large provider in the state. The Commission agreed that Dartmouth should be prepared to address this. It was agreed that Dartmouth would be given a chance to present and to receive feedback from the Commission in the same way that UNH was provided feedback on their proposal.

Dr. Goldsberry also reiterated that the secondary use of the funds in the Trust is important to address given the recent issue with Exeter Hospital's announcement that it would be discontinuing its Advanced Life Support program. Dr. Ramas queried how secondary uses would be addressed. Ms. Sosnowski clarified that any secondary use of the funds would still need to be consistent with language in any settlement agreement and we would likely need to develop similar guidelines as we have done for the research entity. The current priority is the research entity.

Dr. Goldsberry reminded those in attendance that the next meeting of the Commission is scheduled for October 2, 2024. There being no further business to come before the meeting, Dr. Goldsberry announced that the meeting was adjourned.