

**HEALTHCARE CONSUMER PROTECTION ADVISORY COMMISSION  
MINUTES OF COMMISSION MEETING  
OCTOBER 2, 2024**

The Healthcare Consumer Protection Advisory Commission met at the Department of Justice in Concord on October 2, 2024, at 10:30 AM, according to the notice.

The members of the Commission who attended:

- Yvonne Goldsberry, Ph.D., MPH (Public Member and President, Endowment for Health)
- Alexandra Sosnowski, Consumer Protection and Antitrust Bureau (Attorney General, designee)
- Melissa St. Cyr (Department of Health and Human Services)
- Michelle Heaton, Esq. (Insurance Commissioner designee)
- Jason Aziz, Ph.D. (Insurance Commissioner designee)
- Senator Regina Birdsell (New Hampshire Senate)
- 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:

- Carrie H. Colla, Ph.D. (The Dartmouth Institute for Health Policy and Clinical Practice)

Yvonne Goldsberry, Chair, presided. She called the meeting to order at approximately 10:35 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 September 16, 2024 meeting be accepted.**
- Made by: Ms. St. Cyr
- Seconded by: Ms. Heaton
- Outcome: Passed (unanimous – Senator Birdsell abstaining)

Dr. Goldsberry recapped the prior meeting for people not in attendance.

The next order of business was to review and discuss the proposal from Dr. Colla for research. Dr. Aziz began the discussion mentioning that areas of interest for the research would be beneficial, especially the pre and post-merger data of hospitals relating to travel flow issues as it relates to time and distance.

Ms. Heaton suggested that the Commission consider creating a research consortium between the Insurance Department, UNH, and Dartmouth given that both research proposals have good ideas, and the Insurance Department has existing data. A consortium would allow a pooling of resources by using existing data and for the purchase data which would be a cost

savings to the State of New Hampshire. The Insurance Department has a significant amount of data currently available from which they can extract data from the confidential database to share with the school researchers who have limited access to such data, however they wouldn't be able to share the raw data. Ms. Heaton mentioned that the Insurance Department will put together a proposal for the Commission's consideration about how a consortium could be formed and how it would operate. Dr. Ramas requested that the Insurance Department include information on how a consortium would be more beneficial than a research center. Dr. Goldsberry commented that a cost savings and collaboration were beneficial given that all entities have abilities and their own data sources. Ms. Heaton clarified that the consortium would be outside of the Commission, and that the proposal would include the suggested governing structure as well as issue of pooling of resources.

Dr. Goldsberry commented that it should be separate from government and that external data would provide more freedom. Ms. Heaton commented that the Insurance Department is not a policy making entity. She also clarified that the purpose of the consortium would be primarily for cost savings. She also clarified that there are disclosure parameters, and that permission would need to be granted. Ms. St. Cyr proffered that DHHS could get those permissions so that the consortium could buy data which DHHS would filter out to the entities. She was not sure that the Commission could act as the consortium as it's not set up for this type of work, and because it is a state agency entity. Dr. Aziz pointed out that a lot of work has been done already, but that improvements in efficiency could be realized. As an example, he referred to the Vermont claims data which would be important to the research and that Dartmouth might actually have Vermont data already. Ms. Heaton reiterated that a lot needs to be worked out with regards to the logistics of the consortium and that one entity having access to data and pulling that data for others might not be the best way to go about the research.

Dr. Goldsberry reiterated that a consortium should not be driven by the Insurance Department but that it be more independent and collaborative. Ms. St. Cyr also mentioned that the information extracted during this research must be available to the public. Dr. Goldsberry recalled that the UNH proposal mentioned that they would be publishing the results, but that issue is not mentioned in the Dartmouth proposal. Dr. Aziz warned that there is a threat to the assurance if sharing with others. However, he points out that New Hampshire has benefited from other states knowledge and research. Ms. Sosnowski said that she would investigate how an independent data proposal could realize cost savings without an additional entity being established, such as potential data use and sharing agreements. It also could run in parallel to the review of research proposals from both schools.

Senator Birdsell asked what the ultimate goal is for the research proposals and Ms. Sosnowski clarified that because the information that the DOJ receives during merger investigations cannot be shared outside its confidential investigations, the goal of this Research Center would be to allow this information on provider consolidation to be available to the public and policymakers. It was clarified that this process is an attempt to be more transparent and proactive on how we regulate health care as a state. Dr. Ramas pointed out that there is no mention of demographic information which is important. She suggested that we also look at hospital procedures with regards to cost and revenue, especially procedures relating to orthopedics, cardiovascular, and dialysis all of which are high cost and high revenue for hospitals. She reiterated that the relationship between cost and spending in New Hampshire is

important to citizens. Dr. Aziz also suggested proposing specific questions for research. For example, how a merger affects the costs for procedures.

Dr. Carrie Colla from Dartmouth College gave a presentation to the Commission regarding her proposal to Study Competition Among Healthcare Providers and Commercial Prices in New Hampshire. Prior to Dr. Colla beginning her presentation, the Commission members asked her to discuss the issue of conflict of interest as it relates to a study that would include information regarding Dartmouth Hitchcock Medical Center. Dr. Colla gave some history as to her background and clarified that she does not report to anyone at Dartmouth Hitchcock. She also mentioned that Dartmouth College has a healthy skepticism about their providers. She does not feel that there will be a conflict or even the perception of one.

Dr. Colla reviewed the objectives of her study which will look at the impact of hospital consolidation on access and affordability over time. She points out that New Hampshire is the fifth highest in the nation for prices for health care and that there is a high commercial cost for outpatient and inpatient care. Her study will compare commercial healthcare prices in New Hampshire, Vermont, Maine, Connecticut, and Massachusetts to assess the level of competition which ensures affordability. Her goal is to provide policy recommendations in the second year and to collaborate with the Commission about how to respond to priorities, and also to produce information for both the consumer and policy maker audiences.

Dr. Colla reviewed who was on her project team with a brief introduction of each person. She then reviewed her research questions and mentioned her understanding that the Insurance Department has conducted a lot of research and that it was her intention not to repeat what they had already done. She expects that the team will be able to get some information out to the media and on social media in the first six months. Dr. Colla reviewed her budget and stated that it is a rough guess because it has to go through Dartmouth approval. After a few clarifying questions from Commission members, Dr. Goldsberry asked about the percentage for indirect costs. Dr. Colla indicated that her indirect costs would be 10% upon approval by Dartmouth.

There being no further business to come before the Commission, Dr. Goldsberry announced that the meeting was adjourned.