

Utah Partnership for Value Driven Healthcare (UPV)
TAG Transparency Advisory Group (TAG)

This document is to confirm the charter of the Transparency Advisory Group of the UPV Steering committee and serve as a guide to its activities.

Vision Statement

High-value information on health care cost and quality is displayed to the Utah general public and consumers use it to make the best health care decisions.

Purpose: Make useful cost and quality data available to Utah patients and providers.

DRAFT Goals for 2017

- 1. TAG to support development, community feedback process, and dissemination of office based medical provider data review for publication summer 2017.**
- 2. TAG to assist the OHCS in development of use cases and data reports that benefit Utah Employers by October 31, 2017.**
- 3. TAG will review OHCS data quality assessment of dental claims and use-cases before September 30, 2017 and provide guidance.**
- 4. TAG will review OHCS plan for calculating opioid utilization measures before May 31, 2017 and provide input on transparency mechanisms for those utilizing only the APCD (if any).**
- 5. Placeholder for a community engagement goal*

Long term objectives:

- Respond to requests for and accomplish work tasks related to transparency from the UPV Steering Committee under the UPV strategy of “Build Stakeholder Empowerment through Transparency and Actionability of Healthcare Data with Focus and Attention on Consumers”
- Engage and influence the Utah healthcare community through transparency towards improving quality and cost of care.
- Partner with Utah organizations to publish information based upon local data that:
 - Is actionable and understandable to health care consumers
 - Is a reliable source to inform payors, employers, and others in their efforts to redesign incentives
 - Is accepted as reasonably valid and reliable by the provider community and is linked to resources that providers can readily use to improve their measures
 - Is consistent with nationally accepted benchmarks or measures
 - May be useful for policy, quality improvement, public health, and research purposes.

- Act as a subcommittee for the Utah Health Data Committee (HDC) on issues relating to the publication of transparency information to the general public (quality, cost, access, and health policies)
- Act as an ongoing advisory body for other organizations that request input on transparency reporting for internal or external use
- Educate data users and work to elevate the understanding and skill in use of data for transparency in the Utah community
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Funding Sources

- HealthInsight and OHCS will work together to seek federal and other funding to support healthcare transparency reporting

Operating Guidelines

Member responsibilities:

- Attend meetings as often as possible
- Be prepared for each meeting to be able to participate to the fullest extent possible.
- General courtesy and respect for one another.
- Dissemination of key information to represented organizational counterparts.
- Seek feedback from key organizational counterparts as requested.

TAG Roles:

- A chair and a co-chair are appointed by the Health Data Committee and approved by UPV Steering Committee
- A total of six members (including the co-chairs and four others appointed by the co-chairs) make up the core members of the TAG
- To encourage broad participation and representation, all members of the UPV are invited to participate and all meetings are open to all community members
- HealthInsight and OHCS will provide staff support to the TAG, including facilitating meetings and maintaining membership relations
- OHCS will also provide staff support to the TAG in setting meeting agendas and developing minutes or reports
- The TAG chair will report to the HDC often (at least once a year) on the TAG's work plan and recommendations on transparency reporting.

Taskforce Guidelines:

- Meet once per month (Scheduled second Tuesday monthly, unless holiday) or as needed, telemeeting options will be available by conference line call or virtual meeting
- Progress to be assessed every six (6) months and strategies will be adjusted as needed.
- Meeting materials will be sent one (1) weeks prior to the meeting allowing all participants time to review and be prepared for meeting participation
- Minutes or Meeting notes published within 7 working days from meeting.
- Decisions will be consensus based

Membership composition:

TAG will maintain a mix of members with an interest and expertise in clinical data, claims and encounter data, utilization data, statistical methods, healthcare administration, improvement methodology, and consumer interests.

Note: Guidelines for Actionable Recommendations from the TAG. TAG recommendations to the HDC should:

- Demonstrably relate to one or more of the following:
 - promoting quality health care,
 - managing health care costs, or
 - improving access to health care services (from HDC code)
- Relate to one or more key HDC audiences, including patients, providers (individuals, clinics, hospitals, or ambulatory surgery centers), payers, purchasers, and policy makers
- Be based on available and usable data and take into account known limitations
- Allow technical flexibility in the choice of measures
- Consider alternative plans and include multiple phases to assure having a release on schedule
- Focus initially on geographic or community-level information, but contemplate eventual development at the provider or payer level