

Wyoming Healthcare Commission Reports List

2003 Reports

1. “Medical Malpractice Insurance Comparisons Of Rates In Wyoming & Surrounding States” (OHIC and Doctor’s Company, October 1, 2003)
By request of the Wyoming Healthcare Commission (WHCC), the two physician liability insurers who write policies for over 80% of Wyoming physicians, The Doctor's Company and CHIC, were asked to provide base rate data which would allow WHCC members to fairly and accurately view variations between physician liability insurance premiums for physicians in Wyoming and all adjacent states.
2. “Affordability and Availability of Medical Malpractice Insurance Survey Summary” (Wyoming Healthcare Commission Survey, October 2003)
In October 2003, the Wyoming Healthcare Commission surveyed the Wyoming Board of Medicine’s 907-physician database regarding the affordability and availability of medical malpractice insurance. There were 365 respondents, or 40% of physicians licensed to practice in Wyoming; 97% of the respondents reported being in active practice while 3% of the respondents were locum tenens, or had retired, moved, were on leave.
3. “Joint Underwriting Association Study” (Wyoming Healthcare Commission & Wyoming Insurance Commissioner October 31, 2003)
This study was done to determine the feasibility of a number of potential alternatives to Wyoming's current medical malpractice insurance market. During the 2003 Legislative Session, House Bill No. 0261 was enacted as Enrolled Act No. 90. (Chapter 151, Session Laws of Wyoming, 2003) This legislation required the Wyoming Health Care Commission, with the support of the Wyoming Insurance Commissioner, to conduct a study on the feasibility of establishing a joint underwriting association for the purpose of providing medical liability insurance on a self-supporting basis.

2004 Reports

1. “Projected Effect Of Capping Non-Economic Damages On Physicians And Surgeons Professional Liability Costs” (Milliman, Inc., October 13, 2004)
Milliman, Inc. (Milliman) was engaged by the Wyoming Healthcare Commission to analyze the potential effect of tort reform on physician professional liability costs in Wyoming. The goal of this project was to estimate the expected effect on medical malpractice losses and allocated loss adjustment expenses of the imposition of a cap on the maximum allowable verdict amount for non-economic damages (primarily,

“pain and suffering”) and to compare claim frequency and malpractice premiums with those of surrounding states, all of which already have tort reform measures in place.

Milliman developed an actuarial model to estimate the effect of a \$250,000; \$350,000; \$500,000; and \$1 million cap on non-economic losses for physicians, using data provided by the Wyoming Department of Insurance, National Practitioner Data Bank loss data, Wyoming insurer data made available from the Wyoming Legislative Office (LSO), data from the Texas Department of Insurance, plus results from a 1997 Milliman study on non-economic damage caps in New York.

2. “WHCC: Unreimbursed Catastrophic and Trauma Care Study” (Navigant Consulting, Oct. 28, 2004)

In response to concerns regarding the ability of hospitals to continue providing trauma care services and catastrophic care services, the Wyoming legislature authorized a study of unreimbursed catastrophic costs, with a focus on trauma care services. The study assisted the WHCC with: 1) Exploring the cost feasibility of a state, county or local hospital district or other innovatively funded catastrophic insurance policy to cover all Wyoming citizens. 2) Considering both a one-time payment and on-going State General Revenue payments for unreimbursed trauma and catastrophic care services. 3) Considering state, county, hospital district and other funding sources to address needs identified through the study.

3. “Physicians And Surgeons Excess Liability Fund Study” (Milliman, Inc., October 29, 2004)

Milliman, Inc. (Milliman) was engaged by the Wyoming Healthcare Commission (WHCC) to analyze programs to provide excess liability coverage to physicians in Wyoming. In particular, Milliman was asked to study the Nebraska Excess Liability Fund (NELF) and the New Mexico Patients Compensation Fund (NMPCF), in order to assess the practicality and cost of introducing a similar fund for Wyoming physicians.

Milliman studied the funds and tort systems in Nebraska, New Mexico, and several other states with excess liability funds. Milliman developed several model scenarios for a Wyoming excess liability fund. These scenarios also include the alternate assumptions 1) that no tort reform is enacted in Wyoming, and 2) that Wyoming enacts a \$250,000 cap on the maximum allowable verdict amount for non-economic damages (primarily, “pain and suffering”).

4. “Physicians And Surgeons Risk Retention Group Study” (Milliman, Inc., November 15, 2004)

Milliman, Inc. (Milliman) was engaged by the Wyoming Healthcare Commission to study the feasibility of establishing a risk retention group (RRG) to provide professional liability insurance coverage to physicians and surgeons in Wyoming to address potential availability and affordability limitations of this coverage in the state. Milliman reviewed the rates and rating structures of several insurance carriers currently providing this coverage in Wyoming. Milliman developed a model for a Wyoming RRG using the current average rates, and representative rating factors and classification system from other carriers in Wyoming, and other relevant information.

5. “A Review Of Healthcare Professional Licensure In Wyoming” (James C. Worthen, November 30, 2004)
This report is a review of the way Wyoming licenses its medical professionals. The purpose of the review was the identification of potential barriers to licensure due to overly-stringent or unfairly-exclusionary provisions in state statutes or professional board rules and regulations. The goal of this review is to ensure that Wyoming’s licensure statutes and professional board rules and regulations do not discourage or prevent qualified healthcare professionals from obtaining licenses to practice in Wyoming, while at the same time not compromising patient safety. The review was conducted in three ways: 1) a review was made of the case law surround the licensing of medical professionals; 2) a comparison was developed between Wyoming’s licensure requirements and procedures and those of five other states; and 3) public comment was compiled from individuals and organizations.

 6. “Alternative Dispute Resolution Mediation And Arbitration” (Wyoming Healthcare Commission, December 20, 2004)
The Wyoming Healthcare Commission compiled a brief review of state statutes and state practices based on telephone and email conversations with state officials, nonprofit organization directors and lobbyists across the country, and combined it with an Internet literature review of arbitration in medical malpractice, at the request of Wyoming state legislators.
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2005 Reports

1. “Waiver Expansion Study” State of Wyoming Department of Health” (Navigant Consulting, January 2005)
In response to Wyoming-specific concerns regarding the personal and financial cost of being uninsured, the Department of Health engaged Navigant Consulting, Inc. in July 2004 to conduct a study of Wyoming’s ability to expand health insurance coverage using Medicaid or State Children’s Health Insurance Program waivers. The study focused on expanding coverage to parents of children in the State’s Children’s Health Insurance Program (Kid Care CHIP) and to low-income adults; the State Planning Grant identified both of these populations for coverage expansions in its final recommendations.

2. “Private Sector Employee Access to Health Insurance & Private Wyo-Care Market” (Research & Planning, Wyoming Department of Employment, February 2005)
The purpose of this report was to provide information on the feasibility of the proposed Wyo-Care program. It presents an analysis of the structure of Wyoming’s Labor market and is intended to contribute to a determination of whether or not the Wyo-Care proposal is viewed by private sector employers as a viable proposal.

3. “Wyoming Rural Healthcare Study” (Navigant Consulting April 28, 2005)
The Wyoming Healthcare Commission’s Access and Affordability Subcommittee engaged Navigant Consulting, Inc. in July 2004 to study Wyoming’s healthcare

delivery system and models in comparable states that might be replicated to increase access and cost effectiveness. As part of this Study, Navigant Consulting, Inc.: 1) identified a need for development and maintenance of a centralized Wyoming healthcare resource database, 2) evaluated access to hospital and nursing facility services, 3) analyzed Wyoming residents use of inpatient hospital services, 4) researched healthcare service delivery models designed for rural and frontier regions, and their advantages and disadvantages relative to Wyoming's current healthcare system, 5) researched initiatives other states have used to address rural and frontier residents healthcare needs, 6) recommended a framework for how Wyoming can organize and prioritize rural and frontier healthcare services, and 7) recommended strategies for developing and implementing initiatives to address rural and frontier Wyoming residents healthcare needs.

4. “Final Report To The Wyoming Healthcare Commission, Information Technology Technical Management Subcommittee On Developing A Wyoming Electronic Health Records Network” (John Snow, Inc. (JSI), September 28, 2005)

This study looked at formalized plans to develop an Electronic Health Records Network to support data exchange among health care constituents across the state. The study evaluated the feasibility of such an effort. The study also looked at recommendations for planning, implementing, and sustaining an Electronic Health Records (EHR) network in Wyoming.

5. “Report On Medical Errors And Medical Injury Compensation” (Wyoming Healthcare Commission, Medical Errors Subcommittee, October 1, 2005)
The Wyoming Healthcare Commission was directed by the Legislature during the 2004 Special Session in Enrolled Act 2, Section 1, to study the feasibility, costs and benefits of a new system to address and resolve health care errors and health care malpractice. The mandated study was broad based and far reaching, requiring pre-analysis of numerous medical errors studies before formation of recommendations was possible. With assistance from Wyoming Department of Health attorney Fran Cadez and Harvard University's Dr. Michelle Mello, the Commission was able to create a framework for logical and feasible steps toward medical errors redress systematically and effectively in Wyoming.

2006 Reports

1. “A Brief Analysis of Health Care Reform in Five States: Utah, Montana, Maine, Massachusetts and Vermont” (Julie E. Robinson, M.A., M.P.A., D.P.A., August 2006)

This report is a brief analysis of health care reform efforts in Utah, Montana, Maine, Massachusetts, and Vermont. The focus of this analysis is to highlight key features of the reforms which might provide lessons for Wyoming as it moves ahead with its strategic planning process. The review is limited to salient features of the various proposals and a summary of “Lessons to be Learned” from these state initiatives as Wyoming moves ahead. The “Closing Thoughts” section provides Dr. Robinson's

suggestion on how the Commission might want to proceed in light of Wyoming's current gubernatorial support for health care reform, history with Medicaid expansions, and identified uninsured populations.

2. “Medicaid Program Redesign: The Long Term Care and Developmentally Disabled Programs” (Milliman, Inc., September 19, 2006)
The Wyoming Healthcare Commission engaged Milliman, Inc. to produce this report on ways to redesign and restructure Wyoming's Medicaid program for people with eligibility through Long Term Care (LTC) and Developmental disability (DD) programs.
 3. “A Report on Medical Specialty Centers in Wyoming” (Center for Studying Health system Change, November 22, 2006)
The purpose of this study was to help understand the impact of medical specialty centers (MSC) on general hospitals and access, quality and costs of health care in Wyoming. This study contains: 1) a descriptive analysis that provides a current snapshot of the status and financial performance of for-profit and not-for-profit general hospitals in Wyoming, 2) an analysis of the estimated likelihood of an MSC locating in a particular market based on the characteristics of that market and a comparison of mean characteristics in Wyoming and in seven other states and 3) a summary of policy implications for Wyoming.
 4. “Issues in Patient Safety Report to the Wyoming Health Care Commission” (Medical Errors Subcommittee, December 31, 2006)
This report addresses issues related to patient safety and alternative systems to compensate those injured through errors in medical treatment, as they relate to Wyoming's efforts in this area. The report relies on current empirical research in the study of patient safety and medical errors, as well as limited interviews with individuals engaged in these activities, both nationally and within the state.
 5. “Wyoming Healthcare Commission Statistical Handbook” (WHCC & HPTC, December 2006)
The statistical handbook is an introductory snapshot of selected healthcare professions and facilities in Wyoming and is just that a “snapshot” of the current information contained in the database. The statistical handbook is a result of a series of surveys with physicians, physician assistants (PAs), advanced practice nurses (APNs), dentists, pharmacists, practice locations, hospitals, and pharmacies. The handbook is divided into three sections. The first is a statewide snapshot of the five surveyed professions. The second section provides greater detail in each of the professions on topics such as specialties, services, retirement timeframes, age, work status and languages spoken. The final section presents county profiles allowing a full representation of the system's abilities. There is also an appendix included in the handbook, which is a compilation of the surveys that were distributed.
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2007 Reports

1. “Policy Options for Expanding Health Insurance Coverage in Wyoming” (Jonathan Gruber, MIT, January, 2007)
This report discusses options that the state of Wyoming can consider as it considers dramatically expanding the share of its population with insurance. The report looks at a variety of routes that can be followed to raise insurance coverage by a large margin if the state injects significant public dollars into the effort.
2. “Status and Future of Health Care Delivery in Rural Wyoming” (RUPRI Center for Rural Health Policy Analysis, June 2007)
This report looks at an integrated strategy for redesigning a health care delivery system in Wyoming. The strategy includes the measure and reporting of outcomes in individual and population health, vitality of the health care delivery system, and sustainable communities. This report provides the structure for implementing such a strategy.
3. “Policy Options for Expanding Health Insurance Coverage in Wyoming: Initial Results” (Jonathan Gruber, MIT, September 2007)
This study involves the consideration of impacts on insurance coverage and the state budget when expanding public insurance in Wyoming, particularly Parents of S-CHIP children and all adults below 200% of the Federal Poverty Level.
4. “Wyoming Healthcare Commission Clinical Trials Study” (Kem P. Krueger, Pharm.D., Ph.D. and Linda Gore Martin, Pharm.D., MBA, BCPS, University of Wyoming, School of Pharmacy, September 24, 2007)
This report examines the literature and stakeholder comments to make a recommendation on the need for a legislative mandate for private insurance coverage of routine medical costs for cancer patients enrolled in clinical trials.
5. “An Inventory of Existing IT Capability in Wyoming’s Medical Community, Access to High Speed Internet Connections, and Systems Interoperability” (Wyoming Health Information Organization (WyHIO), October 2007)
This report looks at the Healthcare Information Technology (HIT) capability of the healthcare providers in Wyoming. This Report provides information on existing HIT capability in the healthcare community, access to high-speed Internet connections, and system interoperability within facilities. The report addresses: 1) an inventory of current and planned capability of healthcare stakeholders; 2) an inventory of access to high-speed internet connections; 3) an assessment of the capability of stakeholders to participate in information exchange; and 4) an assessment and inventory of existing infrastructure that could facilitate information exchange.
6. Policy Options for Expanding Health Insurance Coverage in Wyoming: Scoring the Parents-4-SCHIP Senate Bill (Jonathan Gruber, MIT, November 2007)

This study involves an analysis of the Parents-4-S-CHIP Senate bill, with emphasis on expansion to all eligible parents of S-CHIP children, parents not offered employer sponsored insurance and subsidies to parents offered employer sponsored insurance.

2008 Report

1. “Wyoming Healthcare Commission Statistical Handbook” (WHCC & HPTC, February 2008)
The statistical handbook is a snapshot of the health professions database that the Health Professions Tracking Center maintains for the Wyoming Healthcare Commission. The database is the result of a series of surveys with physicians, physician assistants (PAs), advanced practice nurses (APNs), dentists, pharmacists, practice locations, hospitals, and pharmacies. This is the second “snapshot” of the current information contained in the health professions database. The first snapshot was done in December 2006.
2. “Nurses in Demand: A Statement of the Problem” (Wyoming Department of Employment, Research & Planning, March 1, 2008)
This study looks at the demand for nurses in Wyoming by looking at the following topics: 1) U.S. and Wyoming Demographic Profile, 2) Projections of Registered Nurses Needed to 2014, 3) A Comparison of Employment and Wages in Health Care in Wyoming, 2000 to 2007, 4) Hospital Admissions and Discharges by Age Group, Major Diagnostic Code, Hospital Unit, and Patient Length of Stay, 5) Substate Economic–Demographic Interaction and the Health Care Delivery System.
3. “Final Report: Medicaid Reform” (WHCC, March 15, 2008)
This report is a comprehensive review of what the Wyoming Healthcare Commission’s Medicaid Subcommittee has worked on including: legislative recommendations, Legislature’s response (legislation passed), updates and conclusions.