JOINT TASK FORCE ON UNIVERSAL HEALTH CARE 2021-22 WORK GROUPS

PUBLIC ENGAGEMENT AD HOC WORK GROUP

Roles and Responsibilities: Task Force members in this small work group will be responsible for reviewing plans for public engagement (including community engagement, health care industry engagement and business engagement), recruiting participants, and supporting content development for engagement sessions. Staff will coordinate with public engagement partners, facilitate content development, and summarize key discussions and decisions for consideration by the full Task Force in consultation with public engagement partners.

Timeline and Meeting Frequency: As needed.

Membership: Ad Hoc. Staff: Laurel Swerdlow (OHA).

COMMUNICATIONS AD HOC WORK GROUP

Roles and Responsibilities: Task force members in this small work group will develop messaging to support the communication goals of the Task Force and its members. The work group is not responsible for outreach or public engagement. Staff will be responsible only for scheduling meetings and providing meeting technology. Tasks will include:

- A one-page summary of key messaging points drawn from the Interim Status Report.
- A regularly updated list of Frequently Asked Questions (FAQs).
- Drafting of written communication related to public engagement and other key developments.

Timeline and Meeting Frequency: As needed.

Membership: Ad Hoc. Staff: TBD; staffing limited to scheduling and providing meeting technology.

EXPENDITURE & REVENUE ANALYSIS WORK GROUP

Roles and Responsibilities: This work group will review technical aspects of revenue and expenditure models, consult with the Legislative Revenue Office and the actuarial contractor, and report out to the full Task Force. Task Force members on the work group will be responsible for identifying experts, determining assumptions, and reviewing estimates. Staff will develop meeting materials and summarize key discussions and decisions for consideration by the full Task Force.

Subject Matter Expertise: In consultation with the work group, staff will invite experts with relevant knowledge about health care expenditures, revenue models, and taxation.

Timeline and Meeting Frequency: The work group will start in November and run through May 2022; meetings will be scheduled every 2-3 weeks.

Membership: TBD. Staff: Sarah Knipper (OHA), Daniel Dietz (LPRO).