GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2009

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SENATE BILL 1022 Health Care Committee Substitute Adopted 5/6/09

	Short Title	: Co	omparat	ive Effectiveness Task Force.	(Public)		
	Sponsors:	Sponsors:					
	Referred to	o:					
				March 26, 2009			
1				A BILL TO BE ENTITLED			
2 3 4	IMPRO	AN ACT TO ESTABLISH THE COMPARATIVE EFFECTIVENESS TASK FORCE TO IMPROVE HEALTH CARE QUALITY AND CONTAIN HEALTH CARE COSTS. The General Assembly of North Carolina enacts:					
5				L.(a) There is established the Joint Legislativ	-		
6	Effectiveness Task Force (Task Force). The purpose of the Task Force is to ascertain how to						
7	improve people's health and contain health care costs by studying the comparative effectiveness of various medical treatments and prescription drugs.						
8 9	of various			(b) The Task Force shall be comprised of 15 members.	are appointed as		
10	follows:	SECI		(b) The Task Porce shall be comprised of 15 memory	ers appointed as		
11	10110 10 5.	(1)	Seven	members appointed by the President Pro Tempore o	of the Senate, as		
			follow		,		
12 13			a.	One member of the Senate to serve as cochair of the T			
14			b.	One member representing and recommended by the	NC Institute of		
15				Medicine.			
16 17			c.	One member representing and recommended by Association.	y NC Hospital		
18			d.	One representative of Area Health Education Centers	_		
19			e.	One member representing and recommended by Duke			
20			f.	One member representing and recommended by			
21				University Medical Center.			
22			g.	One member who is a researcher representing the	pharmaceutical		
23				industry.			
21 22 23 24 25		(2)		members appointed by the Speaker of the House of	Representatives,		
25 26			as foll		wa aa aaabain of		
20 27			a.	One member of the House of Representatives to ser the Task Force.	ve as cochair of		
28			b.	One member representing and recommended by the	North Carolina		
29			0.	Medical Society.	Ttortir Curonna		
30			c.	One member representing and recommended by th	e University of		
31				North Carolina at Chapel Hill.	5		
32			d.	One member representing and recommended by the	North Carolina		
33				Association of Health Plans.			
34			e.	One member representing and recommended by	y Wake Forest		
35				University Medical Center.			
36			f.	One member who is a researcher representing a scho	ool of pharmacy		
37				of a North Carolina university.			



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1	g. One member representing and recommended by the Research				
2	Triangle Institute.				
3	(3) The Director of the Division of Medical Assistance of the Department of				
4	Health and Human Services, ex officio, or the Director's designee.				
5	SECTION 1.(c) The Task Force shall study the following:				
6	(1) How to develop an even more robust research effort in our State, including				
7	the development of initiatives to draw down additional federal funds.				
8	(2) How to organize our State-level efforts in a way that maximizes our				
9	opportunities for additional joint efforts with Agency for Health Care				
10	Research and Quality.				
11	(3) How to organize providers and payors in our State so that dissemination of				
12	comparative effectiveness research findings is as rapid and far-reaching as				
13	possible.				
14	(4) How to develop mechanisms for the ongoing monitoring of these efforts.				
15	SECTION 1.(d) Members of the Task Force shall not be compensated for their				
16	services but shall receive per diem and travel costs as authorized by law.				
17	SECTION 1.(e) On or before February 1, 2011, the Task Force shall report its				
18	findings and recommendations to the Governor and the 2011 General Assembly. Upon				
19	submitting its final report the Task Force shall terminate.				
20	SECTION 2. The Legislative Services Office shall allocate funds appropriated to				
20	the General Assembly to support the activities of the Task Force.				
$\frac{21}{22}$	SECTION 3. This act is effective when it becomes law.				
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