
Governance Committee

December 18, 2017

Chair: Randall Probst

Present: Joseph Miner, Heather Borski, Randall Probst, Paul Patrick, Marc Babitz, Ralph Clegg, Gary Edwards, Lloyd Berentzen, Jerry Edwards

Visitors: Cameron Mitchell, Kim Beck, Matt McCollough, Holli Childs, Robyn Atkinson, Andy Rohrwasser, Melissa Stevens Dimond

Voting Members: Joseph Miner, Heather Borski, Randall Probst, Paul Patrick, Ralph Clegg, Lloyd Berentzen

Co-Chairs: Heather Borski and Randall Probst

Minutes

1. Approve minutes November 20, 2017 Governance meeting.

Motion to approve: 1st: Paul Patrick 2nd: Heather Borski

Vote Yes: Joseph Miner, Heather Borski, Randall Probst, Paul Patrick, Ralph Clegg, Lloyd Berentzen

Utah Primary Care Office – Matt McCollough and Holli Childs

- This application is for a 5 year grant from HRSA. Applying for \$168,680 for this first year.
- The main purpose of the primary care office grant is to provide technical and non-financial assistance to primary care mental and dental health providers in underserved and vulnerable populations.
- They use a mapping application to survey the demographic population/provider population to increase the health professional shortage areas. Having those shortage areas allows for certain benefits which include the National Health Service Corps, and J-1 (International Medical Graduate) Visa waiver program.
- The National Health Service Corps does a loan repayment program; if a physician works in one of the facilities approved by the Service Corp, they will have help repaying their student loans. The J-1 Visa waiver program is aimed towards foreign physicians who completed their residency in the United States. The waiver program allows them to waive the requirement of leaving the country for two years, and remain in the United States, provided they work as a physician in the underserved areas.
- The Primary Care Office provides support, answers questions, provides technical assistance for these facilities as well as individual providers, etc. They regularly survey over 3500 primary care providers in order to determine the healthcare workforce need in specific areas throughout the state.
- Retain the primary care needs assessment looking at the health outcomes throughout the state that are related to this primary care program. By doing so, this helps them to by guiding them towards what they need to be focusing on, including more designations, and more certifications to providers in those areas to help fill those gaps.
- The majority of the budget goes to personnel costs for surveying, mapping, etc., including supplies, travel, and fringe benefits.

Grant Remains Exempt: No Vote Needed

Support for Newborn Screening Implementation of New RUSP Disorders – Robyn Atkinson and Andy Rohrwasser

- This grant application is from the Association of Public Health Laboratories.
- This funding opportunity is targeted towards three new disorders:
 - Pompe Disease
 - Mucopolysaccharidosis I (MPS1)
 - X-linked Adrenoleukodystrophy (X-ALD)
- The Utah Newborn Screening Advisory Committee (NSAC) recommended the addition of SMA, MPS1, Pompe disease and X-ALD to Utah's newborn screening panel (July 20, 2017)
- Specific Goals:
 - Proof-of-concept of exome sequencing.
 - Validation of an in silico, pre-computational restriction step to a priori defined genes of interest.
 - Validation of the bioinformatics workflow including QC, alignment and variant identification.
 - Compilation of variants based on statistical power.
 - Validation of a workflow examining variants based on i. Known clinical significance ii. Unknown significance iii. Variants identified solely based lack of coverage (false positive, insufficient statistical power).
 - Generation of a consumable clinical report with variant information.
- MPSI, Pompe, and X-ALD require 2nd tier testing to further differentiate false positive from true disease cases.
- The total for the application is \$70,000. The requested funds will be used for a post-doctoral fellow to lead under the mentorship of Drs. Quinlan, Oakeson, Rohrwasser, and Weiss the implementation and validation of the analysis workflows and pipeline.
- Following validation, focus will shift to variant querying and annotation in a scalable format and the integration of this information into a consumable report. This project component will be guided by Ms. Hart. Ancillary focus will address portability of the cleaned and curated exome information accompanying the patient following the immediate newborn period.
- At the end of this funding cycle, we will have 2nd tier molecular testing workflows for Pompe, X-ALD, and MPSI.

Grant Remains Exempt: No Vote Needed

Other Agenda Items:

- Temp funding for EPI response to HEP A – Melissa Stevens Dimond
 - ELC Carryover request for \$278,003 – requesting this funding go towards supporting personnel and supplies in response to the outbreak.
 - Intermountain Healthcare contributed \$247,523 for the purchase of vaccines.
- Three different proposals for carryover request.
 - Proposal 1: PHEP formula, no weighting
 - Proposal 2: PHEP formula (base) + weighting for districts with cases
 - Proposal 3: Proposed allocation for districts based on following outbreak elements to date:
 - Cases
 - Contacts
 - Vaccination campaigns
 - Messaging
- Outbreak associated cases since May 2017: 110. It is anticipated that cases will most likely continue through the summer of 2018.
- Motion to adjust the budget and use option 2 with a slight modification to the base budget:
 - 1st: Lloyd Berentzen 2nd: Ralph Clegg

Vote Yes: Joseph Miner, Heather Borski, Randall Probst, Paul Patrick, Ralph Clegg, Lloyd Berentzen

Next Meeting – January 8, 2018 – 11:30am – Room 401

Motion to adjourn:

Motion 1st: Paul Patrick **2nd:** Lloyd Berentzen

Vote Yes: Joseph Miner, Heather Borski, Randall Probst, Paul Patrick, Ralph Clegg, Lloyd Berentzen

DRAFT