

1 _____ JOINT RESOLUTION NO. _____

2 INTRODUCED BY _____
3 (Primary Sponsor)

4 A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF
5 MONTANA REQUESTING A LEGISLATIVE INTERIM STUDY OF A SINGLE-PAYER HEALTH INSURANCE
6 SYSTEM, INCLUDING COMPONENTS, COSTS, BENEFITS, LIMITATIONS, FUNDING OPTIONS, AND
7 SUPPLEMENTAL COVERAGE PLANS.

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9 WHEREAS, the federal and state governments pay more than 50% of the U.S. health care bill directly,
10 according to a 2006 report to the Citizen's Health Care Working Group by the Public Citizen's Health Research
11 Group; and

12 WHEREAS, a National Bureau of Economic Research paper in 2004 reviewed the use of tax policies,
13 such as those that now provide \$140 billion annually in tax breaks for employer-provided health insurance, and
14 compared their use unfavorably to public insurance programs as a way of increasing coverage of the
15 lowest-earning uninsured if offered directly to employees rather than to employers because the cost to
16 government of public insurance programs ranged from \$1.17 to \$1.33 for each dollar of insurance, while the cost
17 to government of tax policies ranged from \$2.36 to \$12.98 for each dollar of insurance provided; and

18 WHEREAS, the debate over how to increase access to health care coverage in this country has
19 generated numerous conflicting analyses, including those reported by the Physicians for a National Health
20 Program of 11 states since 1994 that have studied the option of a single-payer health insurance program, with
21 the studies generally indicating savings in health care costs from administration and increased coverage of
22 uninsured residents, which contrasts with a 1998 report by the Heritage Foundation of 16 states in which
23 regulation on health insurance increased the number of uninsured; and

24 WHEREAS, interviews in Montana by the Bureau of Business and Economic Research under a state
25 planning grant administered by the Department of Public Health and Human Services found in 2003 that three
26 main themes surfaced among responses on health care access and insurance, including cost as a chief reason
27 that people do not have health insurance, a view that the current system is broken and cannot be fixed, and an
28 opinion that some type of universal or single-payer plan is the only way to replace the current system; and

29 WHEREAS, a 2006 survey of Montana businesses by the Bureau of Business and Economic Research
30 indicated that more employers are asking employees to shoulder additional premium costs and that employees



1 are not offered health insurance coverage at 37% of Montana businesses with 5 or fewer employees, 48% of
2 businesses with 6 to 10 employees, and roughly 20% to 25% of businesses with 11 to 100 employees, although
3 employers of more than 100 people almost uniformly offer health insurance; and

4 WHEREAS, having health insurance does not guarantee that people will access the coverage out of
5 concern about paying deductibles or co-pays, which raises questions about the breadth of coverage and whether
6 people are self-rationing their own health care at the early, possibly more manageable stage of intervention and
7 waiting to obtain health care at a stage when costs are higher to both health and the pocketbook; and

8 WHEREAS, a single-payer system challenges business-as-usual approaches to health care coverage
9 in the United States and involves many advocates, opponents, and interested parties as either payers, insurers,
10 providers, or consumers.

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12 NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE
13 STATE OF MONTANA:

14 (1) That the Legislative Council be requested to designate an appropriate interim committee, pursuant
15 to section 5-5-217, MCA, or direct sufficient staff resources to work with interested parties to study the concept
16 of implementing a single-payer health insurance system in Montana, including in the study:

- 17 (a) businesses that provide full health insurance coverage for employees;
18 (b) businesses that do not provide health insurance coverage for employees;
19 (c) businesses that require employees to contribute equally to health insurance premiums;
20 (d) consumers of health care who are insured;
21 (e) consumers of health care who are uninsured;
22 (f) consumers of health care who are underinsured;
23 (g) insurers, including workers' compensation insurers;
24 (h) health care providers; and
25 (i) health care regulators.

26 (2) BE IT FURTHER RESOLVED, that the study examine:

- 27 (a) the benefits, the problems, and the costs of implementing a single-payer health care system as well
28 as the coordination that might be necessary with the federal government;
29 (b) the costs and the benefits of tax policies related to health insurance paid by employers;
30 (c) any alternate systems of providing single-payer health care, including coverage under an expansion

1 of federal programs like Medicare or the Children's Health Insurance Program;

2 (d) any system that combines a single-payer system for basic or initial coverage with a multiple-payer
3 system as a supplemental alternative; and

4 (e) the impact on the workers' compensation system under a single-payer health care system.

5 (3) BE IT FURTHER RESOLVED, that if the study is assigned to staff, any findings or conclusions be
6 presented to and reviewed by an appropriate committee designated by the Legislative Council.

7 (4) BE IT FURTHER RESOLVED, that all aspects of the study, including presentation and review
8 requirements, be concluded prior to September 15, 2008.

9 (5) BE IT FURTHER RESOLVED, that the final results of the study, including any findings, conclusions,
10 comments, or recommendations of the appropriate committee, be reported to the 61st Legislature.

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