

HOUSE JOINT RESOLUTION NO. 48

INTRODUCED BY MACLAREN, MCGEE, BECKER, DUTTON, W. JONES, MCGILLVRAY, CAMPBELL

A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF MONTANA REQUESTING THAT AN INTERIM COMMITTEE STUDY HEALTH INSURANCE REFORM AND PUBLICLY FUNDED HEALTH CARE PROGRAMS.

WHEREAS, the cost of health care is increasing at a rate higher than the rate of consumer inflation and is driving up costs of businesses, workers, retirees, and state and local governments for health insurance or health care coverage; and

WHEREAS, an estimated 19% of the Montana population remains without health insurance coverage while still needing access to health care; and

WHEREAS, the State of Montana has previously sought to expand health insurance coverage by establishing the Insure Montana program to help small employers provide health insurance to employees, the Montana Comprehensive Health Association plan to help high-risk individuals obtain health insurance coverage, and the Children's Health Insurance Program to provide health insurance coverage for uninsured, low-income children; and

WHEREAS, health care insurance represents a significant component of public budgets, and the control of escalating health insurance costs would help to control public budgets; and

WHEREAS, states regulate health insurance and have the flexibility to revise and reform the way in which health insurance is offered at the state level; and

WHEREAS, many states are determining how best to reform their health care or health insurance systems in an attempt to reduce costs to individuals and employers and reduce the number of uninsured residents; and

WHEREAS, the health care and health insurance systems are complex, and changes to these systems are of interest to health care providers, health insurers, businesses, labor groups, government bodies, and consumers.

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

That the Legislative Council be requested to designate an appropriate interim committee or an

appropriate combination of interim committees, pursuant to section 5-5-217, MCA, or direct sufficient staff resources to study and make recommendations on reforms of the Montana health insurance and health care systems, including publicly funded health care programs. The study must include all interested parties in addressing:

(1) the creation of a system of universal, portable, AFFORDABLE private health insurance coverage for all Montanans THAT INVOLVES PRIVATE HEALTH INSURANCE ISSUERS AND THAT INCORPORATES EXISTING PUBLIC PROGRAMS; and

(2) ways to improve the quality, AFFORDABILITY, and delivery of health care.

BE IT FURTHER RESOLVED, that in exploring options for a universal, portable, AFFORDABLE, private health insurance system, the study examine the concept of a health insurance exchange and the ways in which a health insurance exchange could be implemented in Montana.

BE IT FURTHER RESOLVED, that in exploring the options for providing a universal, portable, AFFORDABLE, private health insurance system, the study consider the following factors:

(1) similar reforms enacted in other states, including the cost of the reforms to the state and to consumers, the extent to which the reforms have improved the availability and affordability of health insurance coverage, and barriers that states may have encountered and overcome to improve newly enacted health insurance coverage systems;

(2) THE ADVANTAGES AND DISADVANTAGES OF MANDATING THE PRIVATE UNIVERSAL COVERAGE;

~~(2)~~(3) the ways in which existing state-supported private insurance programs, including the Insure Montana program and the Montana Comprehensive Health Association plan, may be incorporated into any reforms;

~~(3)~~(4) whether public employee health benefit programs should be included in a reformed system;

~~(4)~~(5) potential changes to publicly funded health care programs, including the Medicaid program and the Children's Health Insurance Program, to maximize the use of federal funds and to ensure broader coverage of those in need of assistance;

~~(5)~~(6) the ways in which health care providers handle uncompensated care, including whether those costs are shifted to other entities or individuals, and an estimate of the uncompensated costs;

~~(6)~~(7) ways in which the state could work with the federal government on integrating aspects of health care services and programs operated by the federal government, including the Indian Health Service, into the state's health care system;

~~(7)~~(8) other issues related to access to health care, including access in rural areas; and

~~(8)~~(9) the potential for coordinating state health care workforce planning with federal, state, and private funding for medical education.

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

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

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

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