Second Substitute H.B. 67 (to be offered by Rep. Carol Spackman-Moss)

This bill will be proposed as a substitute to Representative Carl Wimmer’s HB67 substitute bill:

1 HEALTH SYSTEM AMENDMENTS

2 2010 GENERAL SESSION

3 STATE OF UTAH

4 Chief Sponsor: Carl Wimmer

5 Senate Sponsor: _____________

6 7 LONG TITLE
7 General Description:
8 This bill prohibits a state agency or department from implementing federal health care reform passed by the United States Congress after March 1, 2010, unless the state Legislature specifically authorizes the implementation by statute.

9 Highlighted Provisions:
10 This bill:
11 • makes legislative findings;
12 • prohibits a state agency or department from implementing any provision of the federal health care reform unless the Legislature approves the implementation in statute after receiving a report regarding:
13 • whether the federal act compels the state to adopt the particular federal provision;
14 Inserted on new lines 20-23: • whether and to what extent the state has achieved any of the goals pursuant to state health reforms, including cost containment, quality improvement, and access to affordable health insurance coverage for currently uninsured Utah citizens,
15 • consequences to the state if the state refuses to adopt the particular federal provision; and
16
impact to the citizens of the state if reform efforts are implemented or not
implemented.

Monies Appropriated in this Bill:
None

Other Special Clauses:
This bill provides an immediate effective date.

Utah Code Sections Affected:
ENACTS:
63M-1-2505.5, Utah Code Annotated 1953

Be it enacted by the Legislature of the state of Utah:
Section 1. Section 63M-1-2505.5 is enacted to read:

63M-1-2505.5. Freedom from federal health reform efforts -- Preservation of state
reform efforts.

(1) The Legislature finds that:
(a) the state has embarked on a rigorous process of implementing a strategic
plan for health system reform pursuant to Section 63M-1-2505; and
(b) the health system reform efforts for the state were developed to address the
unique circumstances within Utah and to provide solutions that work for Utah;
(c) Utah is poised to become a leader in the nation for health system reform
which includes:
(i) developing and using health data to control, improve transparency around
costs and quality; and
(ii) creating a defined contribution insurance market to increase options for
employers and employees; and
(d) the federal government proposals for health system reform, which have yet
to be voted on:
(i) may or may not infringe on state powers;
(ii) may or may not impose a uniform solution to a problem that may or may not
require different responses in
different states;
(iii) threaten the possible future progress that Utah has made
in health system reform; and
(iv) infringe on the rights of citizens of this state to provide for their own health

by:
(A) possibly requiring a person to enroll in a third party payment system;
possibly imposing fines on a person who chooses to pay directly for health care rather than use a third party payer; and
(B) possibly imposing fines on an employer that does not meet federal standards for providing health care benefits for employees; and
(D) possibly threatening private health care systems with competing government supported health care systems.

(2) (a) A department or agency of the state may not implement any part of federal health care reform passed by the United States Congress after March 1, 2010, unless:
(i) the department or agency reports to the Legislature’s Health Reform Task Force and the Legislative Executive Appropriations Committee in accordance with Subsection (2)(b); and
(ii) the Legislature passes legislation specifically authorizing the state’s compliance with, or participation in, federal health care reform.
(b) The report required under Subsection (2)(a) shall include:
(i) the specific federal statute or regulation that requires the state to implement a federal reform provision;
(ii) whether the reform provision has any state waiver or options;
(iii) exactly what the reform provision requires the state to do, and how it would be implemented;
(iv) who in the state will be impacted by adopting the federal reform provision, or not adopting the federal reform provision;
Added: whether those persons and needs are better served by state health reform provisions;
(v) what is the cost to the state or citizens of the state to implement the federal reform provision; and
(vi) the consequences to the state if the state does not comply with the federal reform provision, including the cost to the state, in terms of Medicaid funds and cost shifting.

Section 2. Effective date.
If approved by two-thirds of all the members elected to each house, this bill takes effect.
upon approval by the governor, or the day following the constitutional time limit of Utah Constitution Article VII, Section 8, without the governor’s signature, or in the case of a veto, the date of veto override.