ENGROSSED SENATE AMENDMENT
TO
ENGROSSED HOUSE BILL NO. 1578

BY: MONSON, STOTTLEMYRE, HUTCHCROFT, BOYD, GLOVER, HAMILTON (Jeff), HUDSON, LARASON, LESTER, MASS, MATLOCK, McCORKELL, MONKS, NIEMI, PAULK, PELTIER, ROBERTS (Walt), ROSS, SMITH (Dale), STANLEY, STITES, THOMAS, WILLIAMS and YORK of the HOUSE

and

HORNER of the SENATE

(PUBLIC HEALTH AND SAFETY - UNIVERSAL HEALTH CARE ACT - CODIFICATION)

AUTHORS: Add the following Senate Coauthors: MILES-LaGRANGE, ROBINSON and WILLIAMS (Penny)

AMENDMENT NO. 1. Strike the stricken title, enacting clause and entire bill and insert

AN ACT RELATING TO PUBLIC HEALTH AND SAFETY; CREATING THE UNIVERSAL HEALTH CARE ACT; PROVIDING SHORT TITLE; STATING LEGISLATIVE FINDINGS; STATING PURPOSE; DEFINING TERMS; CREATING THE HEALTH CARE STUDY COMMISSION AND PROVIDING FOR MEMBERSHIP AND OFFICERS; PROVIDING FOR TRAVEL REIMBURSEMENT; PROVIDING FOR STAFF AND ADMINISTRATIVE SUPPORT OR TECHNICAL ASSISTANCE; PROVIDING FOR A COMPREHENSIVE EXAMINATION OF CERTAIN SYSTEMS; PROVIDING FOR CONTENTS OF CERTAIN STUDY; PROVIDING FOR SUBMISSION

OF RECOMMENDATIONS; PROVIDING FOR CONSIDERATION OF CERTAIN PLAN; CREATING THE HEALTH CARE STUDY REVOLVING ACCOUNT; PROVIDING FOR CODIFICATION; AND PROVIDING AN EFFECTIVE DATE.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 2521 of Title 63, unless there is created a duplication in numbering, reads as follows:

This act shall be known and may be cited as the "Universal Health Care Act".

SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 2522 of Title 63, unless there is created a duplication in numbering, reads as follows:

It is the finding of the Oklahoma Legislature that health care is a basic social right that should be available to all of the residents of this state. The purpose of the Universal Health Care Act is to provide access to health care and to promote and preserve the good health of the people of this state.

SECTION 3. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 2523 of Title 63, unless there is created a duplication in numbering, reads as follows:

As used in the Universal Health Care Act, unless the context clearly requires otherwise:

1. "Commission" means the Health Care Study Commission created by Section 4 of this act; and

2. "Plan" means the Universal Health Care Plan established by Section 6 of this act.

SECTION 4. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 2524 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. There is hereby created within the Office of the Governor until January 1, 1994, the Health Care Study Commission.

B. The Health Care Study Commission shall be composed of not more than thirty-one (31) appointed members as follows:

1. Three members of the Oklahoma State Senate, appointed by the President Pro Tempore of the Senate;

2. Three members of the Oklahoma House of Representatives, appointed by the Speaker of the House of Representatives; and

3. Twenty-five members appointed by the Governor as follows:

a. ten persons who are or who represent health care providers,

b. three persons who represent private health insurers,

c. eight persons who are consumers or who represent consumer groups,

d. two persons who represent small employers. For purposes of this act, "small employer" means firms with twenty-five or fewer employees, and

e. two persons who represent large employers.

C. The Director of the Department of Human Services, or his designee; the Commissioner of Health, or her designee; the Commissioner of Mental Health and Substance Abuse Services, or his designee; the Dean of the University of Oklahoma College of Public Health, or his designee; and the Director of the State and Education Employees Group Insurance Board, or his designee, shall be ex officio, nonvoting members of the Commission.

D. The Governor shall appoint a chairman and vice-chairman of the Health Care Study Commission. The Commission shall meet at least monthly, and may meet more often as necessary. The members of the Commission shall serve without compensation and shall be

reimbursed pursuant to the provisions of the State Travel Reimbursement Act, Section 500.1 et seq. of Title 74 of the Oklahoma Statutes. Members shall be appointed to serve until January 1, 1995, and any vacancies occurring on the Commission shall be filled by the appointing authority from the same class or category as the original appointment.

E. From funds appropriated or otherwise available for that purpose, the Commission may employ staff personnel necessary to ensure the proper performance of the duties and responsibilities of the Commission. The Commission may provide for administrative support or technical assistance through interagency agreements pursuant to the Interlocal Cooperation Act, Section 1001 et seq. of Title 74 of the Oklahoma Statutes, with the other state agencies represented on the Health Care Study Commission, including public institutions for higher education. For purposes of this act, technical assistance may include, but not be limited to, a contract with a public agency for the development of a health care statistical reporting system.

SECTION 5. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 2525 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. The Health Care Study Commission shall conduct a comprehensive examination of the Oklahoma health care delivery and financing systems and design and recommend changes in the Oklahoma health care system that will result in:

1. Universal health insurance coverage;

2. Health care cost containment;

3. Appropriate allocation of resources; and

4. Increased public knowledge of the health system.

B. As a part of its study the Health Care Study Commission shall:

1. Hold public hearings or community meetings in all regions of the state;

2. Consider the following issues and concerns:

a. universal health care coverage for all citizens,

b. methods of reducing administrative expenses and other expenses not related to the direct provision of medical services,

c. methods of achieving a rational balance between health care cost controls, resource allocation, and incentives for the achievement of high levels of efficiency within the health care delivery and financing systems,

d. methods of providing for the continued funding of medical research, particularly with regard to research related to clinical decision-making and patient outcomes,

e. methods of ensuring the public accountability of the health care delivery and financing systems,

f. methods for providing for training and continuing education programs and recruiting and retraining needed health care professionals and other health service providers, and for ensuring appropriate distribution of health care service providers statewide, and

g. medical malpractice review and litigation;

3. Study and make recommendations regarding:

a. the Universal Health Care Plan described in Section 6 of this act,

b. the Small Employers Health Insurance Availability Model Act of the National Association of Insurance Commissioners,

c. proposals providing for individual and family health care accounts, and

d. other appropriate models and proposals;

4. Make public the projected costs of any and all recommendations and the financial impact of said recommendations upon health care providers, insurers and their policyholders, and the citizens of Oklahoma.

C. The Commission shall submit recommendations regarding statutory enactments to the Legislature prior to January 1, 1994. Any plan recommended by the Commission shall be approved by the Legislature prior to implementation.

SECTION 6. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 2526 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. The Health Care Study Commission shall consider a Universal Health Care Plan for the state. The Plan shall provide, for all residents of this state, for coverage of the following health care services necessary to maintain health, or to diagnose, treat or rehabilitate following a disease, injury or disability:

1. Inpatient or outpatient hospital services;

2. Services of physicians and other licensed health care professionals;

3. Prescription drugs;

4. Mental health treatment;

5. Substance use or abuse treatment; and

6. Services which promote health and the prevention of illness and injury.

B. The Plan shall provide:

1. That no services in connection with cosmetic surgery shall be covered unless such cosmetic surgery is reconstructive;

2. For reimbursement of health care service providers located outside this state who provide emergency services or other urgently needed health care services to persons covered under the Plan;

3. That participants in the Plan shall have freedom to choose the physician, hospital or other provider of health care services under the Plan;

4. That providers of health care services covered under the Plan shall be reimbursed on a fee-for-service, salaried or capitation basis, as established by the Commission, and that no provider accepting reimbursement under the Plan shall charge a person who receives a service covered under the Plan an amount for that service which exceeds the amount of the reimbursement for that service;

5. For the designation of hospitals to provide trauma and tertiary care services under the Plan, based upon the geographic distribution of service providers and the need for those services;

6. For the establishment of a uniform state contracting process for the provision of prescription drugs, durable medical equipment and supplies, eyeglasses, hearing aids, and oxygen and related services;

7. For the development of, before the beginning of every fiscal year, a state health care services budget which is adequate to meet the health care services needs of the residents of this state. The budget shall take into consideration monies expected to be available from federal, state and other sources;

8. For the establishment of, for purposes of determining reimbursement rates, a budget for each hospital which seeks reimbursement under the Plan. The budget shall be based upon historical data and projected changes and shall allow retrospective adjustments in reimbursement rates based upon unforeseen circumstances; and

9. That capital development projects and the acquisition of major pieces of medical treatment or testing equipment by health care service providers shall be approved separately from those providers' operating budgets and shall be based on health care service delivery needs in the state.

SECTION 7. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 2527 of Title 63, unless there is created a duplication in numbering, reads as follows:

There is hereby created in the Revolving Fund of the Office of the Governor, an account for the Health Care Study Commission, to be designated the "Health Care Study Revolving Account". The account shall be a continuing account, not subject to fiscal year limitations, and shall consist of all monies received by the Commission, from monies received pursuant to this act. All monies accruing to the credit of said account are hereby appropriated and may be budgeted and expended by the Governor for the purpose of implementing the provisions of this act. Expenditures from said fund shall be made upon warrants issued by the State Treasurer against claims filed as prescribed by law with the Director of State Finance for approval and payment.

SECTION 8. This act shall become effective September 1, 1992."

Passed the Senate the 15th day of April, 1992.

President of the Senate

Passed the House of Representatives the ____ day of _____, 1992.

Speaker of the House of Representatives