

**Renumbered 5/12/2015**

**63M-1-2505.5 Reporting on federal health reform -- Prohibition of individual mandate.**

- (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;
  - (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 a leader in the nation for health system reform which includes:
    - (i) developing and using health data to control 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:
    - (i) infringe on state powers;
    - (ii) impose a uniform solution to a problem that requires different responses in different states;
    - (iii) threaten the progress Utah has made towards health system reform; and
    - (iv) infringe on the rights of citizens of this state to provide for their own health care by:
      - (A) requiring a person to enroll in a third party payment system;
      - (B) imposing fines, penalties, and taxes on a person who chooses to pay directly for health care rather than use a third party payer;
      - (C) imposing fines, penalties, and taxes on an employer that does not meet federal standards for providing health care benefits for employees; and
      - (D) threatening private health care systems with competing government supported health care systems.
- (2)
  - (a) For purposes of this section:
    - (i) "Implementation" includes adopting or changing an administrative rule, applying for or spending federal grant money, issuing a request for proposal to carry out a requirement of PPACA, entering into a memorandum of understanding with the federal government regarding a provision of PPACA, or amending the state Medicaid plan.
    - (ii) "PPACA" is as defined in Section 31A-1-301.
  - (b) A department or agency of the state may not implement any part of PPACA unless, prior to implementation, the department or agency reports in writing, and, if practicable, in person if requested, to the Legislature's Business and Labor Interim Committee, the Health Reform Task Force, or the legislative Executive Appropriations Committee in accordance with Subsection (2)(d).
  - (c) The Legislature may pass legislation specifically authorizing or prohibiting the state's compliance with, or participation in provisions of PPACA.
  - (d) The report required under Subsection (2)(b) shall include:
    - (i) the specific federal statute or regulation that requires the state to implement a provision of PPACA;
    - (ii) whether PPACA has any state waiver or options;
    - (iii) exactly what PPACA 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;
    - (v) what is the cost to the state or citizens of the state to implement the federal reform provision;
    - (vi) the consequences to the state if the state does not comply with PPACA;
    - (vii) the impact, if any, of the PPACA requirements regarding:

- (A) the state's protection of a health care provider's refusal to perform an abortion on religious or moral grounds as provided in Section 76-7-306; and
  - (B) abortion insurance coverage restrictions provided in Section 31A-22-726.
- (3)
- (a) The state shall not require an individual in the state to obtain or maintain health insurance as defined in PPACA, regardless of whether the individual has or is eligible for health insurance coverage under any policy or program provided by or through the individual's employer or a plan sponsored by the state or federal government.
  - (b) The provisions of this title may not be used to facilitate the federal PPACA individual mandate or to hold an individual in this state liable for any penalty, assessment, fee, or fine as a result of the individual's failure to procure or obtain health insurance coverage.
  - (c) This section does not apply to an individual who voluntarily applies for coverage under a state administered program pursuant to Title XIX or Title XXI of the Social Security Act.