

Representative Steven R. Mascaro proposes the following substitute bill:

**TASK FORCE STUDYING PRIVATE SECTOR
APPROACHES TO COVERING THE UNINSURED**

2004 GENERAL SESSION

STATE OF UTAH

Sponsor: Steven R. Mascaro

LONG TITLE

General Description:

This bill creates the task force studying private sector approaches to covering the uninsured.

Highlighted Provisions:

This bill:

- ▶ creates a task force to analyze past, current, and model approaches to providing comprehensive, affordable, accessible, and quality health care for the working uninsured; and
- ▶ focuses on the extent to which each approach reduces the use of uncompensated health care, contributes to improved health outcomes, and how successful each program is in leveraging both public and private resources.

Monies Appropriated in this Bill:

This bill appropriates for fiscal year 2004-05 only:

- ▶ \$2,500 to the Senate;
- ▶ \$5,000 to the House of Representatives; and
- ▶ \$20,000 to the Office of Legislative Research and General Counsel.

Other Special Clauses:

This bill is repealed on November 30, 2004.



Be it enacted by the Legislature of the state of Utah:

Section 1. Task Force Studying Private Sector Approaches to Covering the Uninsured -- Creation -- Membership -- Quorum -- Compensation -- Staff.

(1) There is created the Task Force Studying Private Sector Approaches to Covering the Uninsured consisting of the following six legislative members and eleven ex officio members:

(a) two members of the Senate appointed by the president of the Senate, no more than one of whom may be from the same political party;

(b) four members of the House of Representatives appointed by the speaker of the House of Representatives, no more than two of whom may be from the same political party;

(c) eleven ex officio members appointed by the president of the Senate and the speaker of the House of Representatives including:

(i) the executive director of the Department of Health or the director's designee;

(ii) a member representing a federally qualified health center located in the state;

(iii) two members from the general public with demonstrated expertise and interest in private approaches to covering the uninsured and underinsured;

(iv) a chief executive officer of a health insurance company designated by the Utah Health Insurance Association; and

(v) six representatives:

(A) three of whom are chief executive officers or presidents of large Utah businesses; and

(B) three of whom are chief executive officers or presidents of small Utah businesses.

(2) (a) The president of the Senate shall designate a member of the Senate appointed under Subsection (1)(a) as a cochair of the task force.

(b) The speaker of the House of Representatives shall designate a member of the House of Representatives appointed under Subsection (1)(b) as a cochair of the task force.

(3) A majority of the legislative members of the task force constitute a quorum. The action of a majority of a legislative quorum constitutes the action of the task force.

(4) (a) Salaries and expenses of the members of the task force who are legislators shall be paid in accordance with Section 36-2-2 and Legislative Joint Rule 15.03.

(b) A member of the task force who is not a legislator or a state employee may not receive compensation for the member's work associated with the task force, but may receive per diem and reimbursement for travel expenses incurred as an ex officio member of the task force at the rates established by the Division of Finance under Sections 63A-3-106 and 63A-3-107.

(5) The Office of Legislative Research and General Counsel shall provide staff support to the task force.

Section 2. Duties -- Interim report.

(1) The task force shall review and make recommendations on the following issues:

(a) the extent to which current private sector approaches to covering the uninsured address the need for comprehensive, affordable, accessible, and quality health care, including:

(i) the Covered at Work component of the Primary Care Network;

(ii) the state Primary Care Grants Program; and

(iii) other relevant approaches identified by the task force;

(b) models or past approaches to covering the working uninsured and addressing the need for comprehensive, affordable, accessible, and quality health care, including:

(i) purchasing cooperatives;

(ii) the Trade Adjustment Assistance Reform Act;

(iii) Maine's Dirigo plan;

(iv) insurance products based on exclusion of medical conditions; and

(v) other models or approaches identified by the task force;

(c) the cost effectiveness and public health impact of the programs in Subsections (1)(a) and (1)(b) in terms of the following:

(i) the extent to which each program reduces the use of uncompensated care;

(ii) the extent to which each contributes to improved health outcomes; and

(iii) the success of each program in leveraging federal and private sector financial resources for covering the working uninsured; and

(d) other issues that may be recommended by the task force including a review of available studies and reports.

(2) A final report, including any proposed legislation shall be presented to the Health and Human Services Interim Committee before November 30, 2004.

88 Section 3. **Appropriation.**

89 There is appropriated from the General Fund for fiscal year 2004-05 only:

90 (1) \$2,500 to the Senate to pay for the compensation and expenses of senators on the
91 task force;

92 (2) \$5,000 to the House of Representatives to pay for the compensation and expenses
93 of representatives on the task force; and

94 (3) \$20,000 to the Office of Legislative Research and General Counsel to pay for
95 staffing the task force.

96 Section 4. **Repeal date.**

97 This bill is repealed on November 30, 2004.