

1st Sub. S.B. 152
MEDICAID TASK FORCE

Representative **Rebecca D. Lockhart** proposes the following amendments:

1. *Page 1, Lines 11 through 12:*

11 This bill:
12 ▶ amends the membership of the task force {~~.~~} and
▶ amends the duties of the task force.

2. *Page 1, Line 24 through Page 2, Line 26:*

24 AMENDS UNCODIFIED MATERIAL:
25 Uncodified Section 1, Chapter 255, Laws of Utah 2005
Uncodified Section 2, Chapter 255, Laws of Utah 2005
26 Uncodified Section 3, Chapter 255, Laws of Utah 2005

3. *Page 2, Lines 51 through 52:*

51 task force, contract with an economist, a financial analyst, and an actuary for services to the
52 task force.

= Section 2. Uncodified Section 2, Chapter 255, Laws of Utah 2005 is amended to read:

Section 2. Duties -- Interim report.

- (1) The task force shall review and make recommendations on the following issues:
- (a) market penetration, geographic distribution, and contracting arrangements of integrated health care systems in the health insurance and health care markets in the state;
 - (b) the impact of divestiture of integrated health care systems in the health care market in the state;
 - (c) state policies that promote fair and appropriate competition in the health care market, including the adequacy and application of antitrust provisions to health care organizations;
 - (d) business and financial practices of health care organizations and how they may impede or enhance a fair and competitive health care market place and impact consumers;
 - (e) the tax exempt status of nonprofit health care organizations;
 - (f) the statutory definition of charitable care;
 - (g) the contracting practices of health care organizations that promote cost-effective health care;
 - (h) the need for consumer protections from health care provider conflicts of interest;
 - (i) the impact of proliferation of medical technology and facilities;
 - (j) patient choice of, and access to, health care providers including:
 - (i) the impact of any willing provider laws as applied to health maintenance organizations and preferred

provider organizations; and

(ii) the use of medical non-compete provisions; ~~{and}~~

(k) the effect of Subsections (1)(a) through (g) on:

(i) the state's Medicaid program;

(ii) other government delivered health care services;

(iii) patients of the government programs described in this Subsection (1)(k) ~~{,}~~ ; and

(iv) the health care delivery systems of the government programs described in this Subsection

(1)(k) ~~{,}~~ ; **and**

(i) the following issues with respect to the state's Medicaid program:

(i) improving access, quality, cost effectiveness, and sustainability of the Medicaid program; and

(ii) the role of Medicaid and the Primary Care Grant Program in mitigating the problem of the

uninsured in the state.

(2) Notwithstanding the provisions of Section 52-4-5, the task force may close a meeting to review or discuss a record which:

(a) is a trade secret; or

(b) contains commercial information; and

(c) is classified as a protected record under Section 63-2-304.

(3) (a) An initial report shall be made to the Business and Labor Interim Committee and Revenue and Taxation Interim Committee by November 30, 2005.

(b) A final report, including any proposed legislation, shall be presented to the Business and Labor Interim Committee and Revenue and Taxation Interim Committee before November 30, 2006.

Renumber remaining sections accordingly.

4. Page 3, Lines 76 through 77:

76 with appropriate expert services for evaluating and making recommendations on the state's

77 Medicaid program **including recommendations for improving access, quality, cost effectiveness, and sustainability of the Medicaid program** .