HOUSE JOINT RESOLUTION NO. 40

INTRODUCED BY S. RICE, HANSEN, ELLIOTT, L. NELSON, NISBET, CODY, SCOTT, STEPPLER, MENAHAN, QUILICI, FORRESTER

IN THE HOUSE

FEBRUARY 19, 1991 INTRODUCED AND REFERRED TO COMMITTEE ON HUMAN SERVICES & AGING.

FEBRUARY 20, 1991 FIRST READING.

FEBRUARY 23, 1991 COMMITTEE RECOMMEND BILL DO PASS. REPORT ADOPTED.

POSTED ON CONSENT CALENDAR.

FEBRUARY 25, 1991 CONSENT CALENDAR, QUESTIONS AND ANSWERS.

ENGROSSING REPORT.

FEBRUARY 26, 1991 THIRD READING, PASSED. AYES, 98; NOES, 0.

TRANSMITTED TO SENATE.

IN THE SENATE

FEBRUARY 26, 1991

FIRST READING.

MARCH 27, 1991

COMMITTEE RECOMMEND BILL BE CONCURRED IN AS AMENDED. REPORT ADOPTED.

APRIL 3, 1991 SECOND READING, CONCURRED IN.

APRIL 4, 1991 THIRD READING, CONCURRED IN. AYES, 49; NOES, 1.

RETURNED TO HOUSE WITH AMENDMENTS.

INTRODUCED AND REFERRED TO COMMITTEE

ON PUBLIC HEALTH, WELFARE, & SAFETY.

IN THE HOUSE

APRIL 10, 1991

RECEIVED FROM SENATE.

SECOND READING, AMENDMENTS CONCURRED IN.

APRIL 11, 1991

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THIRD READING, AMENDMENTS CONCURRED IN.

SENT TO ENROLLING.

REPORTED CORRECTLY ENROLLED.

LC 2033/01

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JOINT RESOLUTION NO. 40 1 INTRODUCED BY ' 2 L JOINT RESOLUTION THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF MONTANA URGING CONGRESS TO 5 6 ADEQUATELY FUND MEDICARE. 7

8 WHEREAS, the Legislature is concerned that all citizens 9 of the State of Montana 65 years of age and older do not 10 have access to physician services but should have such 11 access regardless of their ability to pay; and

12 WHEREAS, 18 counties in the State of Montana are without13 physician services; and

14 WHEREAS, this loss of access to medical care in many 15 areas of our state will only increase unless the factors 16 causing physicians to leave and causing physicians not to 17 come into the state to replace those who are retiring are 18 reversed; and

19 WHEREAS, when physician services become unavailable,
20 hospitals are forced to close, further exacerbating the lack
21 of access to medical care; and

22 WHEREAS, this lack of access to medical care is 23 particularly difficult for persons over 65, many of whom 24 have fixed incomes, because of the increased necessity to 25 obtain medical care by traveling further distances, in many

Montana Legislative Counci

cases with the complications of physical disabilities, hearing and sight loss, need for a traveling companion, and resultant increased costs for that transportation, food, and lodging: and

5 WHEREAS, a contributing factor to the lack of physician 6 services in the State of Montana is the low level at which 7 the federal government funds Medicare reimbursement in this 8 state; and

9 WHEREAS, Congress has slashed billions of dollars from 10 the Medicare program during the 1980s and the current 11 administration is proposing further cuts in the 12 appropriations for Medicare; and

13 WHEREAS, the number of Medicare recipients has been14 increasing; and

15 WHEREAS, reimbursement of physician fees under Medicare 16 Part B have been either frozen or substantially limited 17 since July 1, 1984, even though the costs to physicians who 18 provide Medicare services have increased during the same 19 period; and

20 WHEREAS, Medicare recipients are required to pay a 21 greater proportion of physician fees because of reduced 22 appropriations to the Medicare program, together with an 23 increased number of Medicare recipients, and not because 24 physician fees have increased; and

25 WHEREAS, Montana citizens contribute to the Medicare

-2- INTRODUCED BILL HJR 40

LC 2033/01

program amounts equal to those contributed by citizens of
 other states, yet Part B payments for Medicare services to
 Montana citizens are considerably less than those paid in
 most other states.

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NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSE
OF REPRESENTATIVES OF THE STATE OF MONTANA:

8 That the Montana Congressional Delegation be requested 9 to seek Medicare funding at a level sufficient to cover the increasing number of Medicare recipients and the increasing 10 costs to physicians who provide care to Medicare recipients. 11 BE IT FURTHER RESOLVED, that the Montana Congressional 12 13 Delegation and the President of the United States be urged not to make further cuts in appropriations to Medicare, but 14 15 to increase those appropriations particularly to Medicare 16 beneficiaries in rural states.

BE IT FURTHER RESOLVED, that the Secretary of State send 17 copies of this resolution to each member of the Montana 18 19 Congressional Delegation, the President of the United 20 States, the Montana Medical Association, the Montana Nurses Association, and each senior citizen organization currently 21 22 registered as a lobbying organization before the Montana 23 Legislature, and other senior citizen organizations known to the Secretary of State. 24

-End-

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52nd Legislature

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INTRODUCED BY 2 OF THE SENATE AND THE JOINT RESOLUTION HOUSE OF 5 REPRESENTATIVES OF THE STATE OF MONTANA URGING CONGRESS TO б ADEQUATELY FUND MEDICARE. 7 ß WHEREAS, the Legislature is concerned that all citizens 9 of the State of Montana 65 years of age and older do not 10 have access to physician services but should have such 11 access regardless of their ability to pay; and 12 WHEREAS, 18 counties in the State of Montana are without

JOINT RESOLUTION NO. 40

WHEREAS, this loss of access to medical care in many 14 15 areas of our state will only increase unless the factors 16 causing physicians to leave and causing physicians not to 17 come into the state to replace those who are retiring are 18 reversed; and

physician services; and

19 WHEREAS, when physician services become unavailable, 20 hospitals are forced to close, further exacerbating the lack 21 of access to medical care: and

22 WHEREAS, this lack of access to medical care is 23 particularly difficult for persons over 65, many of whom 24 have fixed incomes, because of the increased necessity to 25 obtain medical care by traveling further distances, in many



cases with the complications of physical disabilities, 1 2 hearing and sight loss, need for a traveling companion. and 3 resultant increased costs for that transportation, food, and lodging; and

5 WHEREAS, a contributing factor to the lack of physician 6 services in the State of Montana is the low level at which 7 the federal government funds Medicare reimbursement in this я state; and

9 WHEREAS, Congress has slashed billions of dollars from 10 the Medicare program during the 1980s and the current administration is proposing further 11 cuts in the 12 appropriations for Medicare; and

13 WHEREAS, the number of Medicare recipients has been 14 increasing; and

15 WHEREAS, reimbursement of physician fees under Medicare 16 Part B have been either frozen or substantially limited 17 since July 1, 1984, even though the costs to physicians who 18 provide Medicare services have increased during the same 19 period; and

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25 WHEREAS, Montana citizens contribute to the Medicare

> THIRD READING - 7 -HJR YO CONSENT CALENDAR

LC 2033/01

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 other states, yet Part B payments for Medicare services to
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 most other states.

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NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSE
OF REPRESENTATIVES OF THE STATE OF MONTANA:

8 That the Montana Congressional Delegation be requested 9 to seek Medicare funding at a level sufficient to cover the 10 increasing number of Medicare recipients and the increasing 11 costs to physicians who provide care to Medicare recipients. 12 BE IT FURTHER RESOLVED, that the Montana Congressional 13 Delegation and the President of the United States be urged 14 not to make further cuts in appropriations to Medicare, but to increase those appropriations particularly to Medicare 15

BE IT FURTHER RESOLVED, that the Secretary of State send 17 18 copies of this resolution to each member of the Montana 19 Congressional Delegation, the President of the United 20 States, the Montana Medical Association, the Montana Nurses 21 Association, and each senior citizen organization currently registered as a lobbying organization before the Montana 22 23 Legislature, and other senior citizen organizations known to the Secretary of State. 24

beneficiaries in rural states.

-End-

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SENATE STANDING COMMITTEE REPORT

Page 1 of 1 March 27, 1991

HJR 40

MR. PRESIDENT. We, your committee on Public Health, Welfare, and Safety having had under consideration House Joint Resolution No. 40 (third reading copy -- blue), respectfully report that House Joint Resolution No. 40 be amended and as so amended be concurred in: 1. Page 2, line 6. Following: "in" Strike: "the State of" Insert: "rural" 2. Page 2, line 13. Following: "Medicare" Strike: "recipients" Insert: "beneficiaries" 3. Page 2, line 16. Following: "B" Strike: "have" Insert: "has" 4. Page 2, lines 20 through 24. Strike: lines 20 through 24 in their entirety Insert: "WHEREAS, Medicare beneficiaries are paying an increasingly greater percentage of their income for medical care, including at least 20% of the approved medical bill, a \$100 deductible on medical expenses, a deductible of \$628 for hospitalization, and all costs of medicine; and" 5. Page 3, line 10. Following: "Medicare" Strike: "recipients" Insert: "beneficiaries" 6. Page 3, line 11. Following: "Medicare" Strike: "recipients" Insert: "beneficiaries" Signed: Chairman And. Coord. $\frac{3B3-37}{\text{Sec. of Senate}}$ 2:20 SENATE

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HOUSE JOINT RESOLUTION NO. 40 1 INTRODUCED BY S. RICE, HANSEN, ELLIOTT, L. NELSON, NISBET, 2 CODY, SCOTT, STEPPLER, MENAHAN, QUILICI, FORRESTER 3 4 A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF 5 REPRESENTATIVES OF THE STATE OF MONTANA URGING CONGRESS TO 6 ADEQUATELY FUND MEDICARE. 7 8 WHEREAS, the Legislature is concerned that all citizens 9 of the State of Montana 65 years of age and older do not 10 have access to physician services but should have such 11 access regardless of their ability to pay; and 12 13 WHEREAS, 18 counties in the State of Montana are without 13 14 physician services; and WHEREAS, this loss of access to medical care in many 15 15 16 areas of our state will only increase unless the factors 16 causing physicians to leave and causing physicians not to 17 come into the state to replace those who are retiring are 18 18 19 reversed; and 19 WHEREAS, when physician services become unavailable, 20 20 21 21 hospitals are forced to close, further exacerbating the lack of access to medical care; and 22 22 23 WHEREAS, this lack of access to medical care is 23 24 particularly difficult for persons over 65, many of whom 2425 have fixed incomes, because of the increased necessity to 25

obtain medical care by traveling further distances, in many cases with the complications of physical disabilities, hearing and sight loss, need for a traveling companion, and resultant increased costs for that transportation, food, and lodging; and WHEREAS, a contributing factor to the lack of physician services in the-State-of RURAL Montana is the low level at which the federal government funds Medicare reimbursement in this state; and WHEREAS, Congress has slashed billions of dollars from the Medicare program during the 1980s and the current proposing further cuts administration is in the appropriations for Medicare; and WHEREAS, the number of Medicare recipients BENEFICIARIES has been increasing; and WHEREAS, reimbursement of physician fees under Medicare Part B have HAS been either frozen or substantially limited since July 1, 1984, even though the costs to physicians who provide Medicare services have increased during the same period; and WHEREAS,-Medicare--recipients--are--required--to--pay--a greater--proportion--of--physician--fees--because-of-reduced appropriations-to-the-Medicare--program7--together--with--an

increased--number--of--Medicare--recipients;-and-not-because

physician-fees-have-increased;-and

HJR 40 -2-REFERENCE BILL AS AMENDED

HJR 0040/02

HJR 0040/02

HJR 40

HJR 0040/02

1 MEDICARE BENEFICIARIES WHEREAS, ARE PAYING AN 2 INCREASINGLY GREATER PERCENTAGE OF THEIR INCOME FOR MEDICAL 3 CARE, INCLUDING AT LEAST 20% OF THE APPROVED MEDICAL BILL, A 4 \$100 DEDUCTIBLE ON MEDICAL EXPENSES, A DEDUCTIBLE OF \$628 5 FOR HOSPITALIZATION, AND ALL COSTS OF MEDICINE; AND 6 WHEREAS, Montana citizens contribute to the Medicare 7 program amounts equal to those contributed by citizens of 8 other states, yet Part B payments for Medicare services to 9 Montana citizens are considerably less than those paid in

10 11 most other states.

NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSEOF REPRESENTATIVES OF THE STATE OF MONTANA:

14 That the Montana Congressional Delegation be requested 15 to seek Medicare funding at a level sufficient to cover the 16 increasing number of Medicare recipients <u>BENEFICIARIES</u> and 17 the increasing costs to physicians who provide care to 18 Medicare recipients BENEFICIARIES.

BE IT FURTHER RESOLVED, that the Montana Congressional Delegation and the President of the United States be urged not to make further cuts in appropriations to Medicare, but to increase those appropriations particularly to Medicare beneficiaries in rural states.

24 BE IT FURTHER RESOLVED, that the Secretary of State send 25 copies of this resolution to each member of the Montana

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1 Congressional Delegation, the President of the United 2 States, the Montana Medical Association, the Montana Nurses 3 Association, and each senior citizen organization currently 4 registered as a lobbying organization before the Montana 5 Legislature, and other senior citizen organizations known to 6 the Secretary of State.

-End-

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