HOUSE JOINT RESOLUTION NO. 43

INTRODUCED BY WINSLOW

IN THE HOUSE

MARCH	14,	1987	INTRODUCED AND REFERRED TO COMMITTEE ON HUMAN SERVICES & AGING.
MARCH	17,	1987	COMMITTEE RECOMMEND BILL DO PASS AS AMENDED. REPORT ADOPTED.
MARCH	18,	1987	PRINTING REPORT.
MARCH	20,	1987	SECOND READING, DO PASS.
MARCH	21,	1987	ENGROSSING REPORT.
			THIRD READING, PASSED. AYES, 96; NOES, 0.
			TRANSMITTED TO SENATE.
		I	N THE SENATE
MARCH	23,	1987	INTRODUCED AND REFERRED TO COMMITTEE ON BUSINESS & INDUSTRY.
MARCH	26,	1987	COMMITTEE RECOMMEND BILL BE CONCURRED IN. REPORT ADOPTED.
MARCH	30,	1987	ON MOTION, CONSIDERATION PASSED FOR THE DAY.
MARCH	31,	1987	SECOND READING, CONCURRED IN.
APRIL	1, 3	1987	THIRD READING, CONCURRED IN. AYES, 48; NOES, 1.
			RETURNED TO HOUSE.
		I	N THE HOUSE
APRIL	1, 3	1987	RECEIVED FROM SENATE.

SENT TO ENROLLING.

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1	House Joint Resolution No. 43
2	INTRODUCED BY Wineles
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4	A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF
5	REPRESENTATIVES OF THE STATE OF MONTANA REQUESTING AN
6	INTERIM STUDY OF THE FEASIBILITY OF REQUIRING INSURERS TO
7	OFFER LONG-TERM CARE INSURANCE; AND REQUIRING A REPORT OF
В	THE FINDINGS TO THE 51ST LEGISLATURE.
9	
10	WHEREAS, the cost of long-term care in Montana
11	increased by 270% between 1975 and 1983; and
12	WHEREAS, the portion of long-term care financed by
13	Medicaid increased from \$7 million to \$46.3 million during
l 4	the same period; and
15	WHEREAS, the number of elderly persons in Montana is
16	expected to increase by 50% during the next 20 years, to an
17	estimated 150,000 persons; and
18	WHEREAS, the cost of long-term care is not covered by
19	any insurance program other than Medicaid and is beyond the
20	means of most elderly Montanans; and
21	WHEREAS, the Montana Health Care Cost Containment
22	Advisory Council recommended in its 1987 report that the
23	Legislature study the issue of long-term care insurance.
24	

NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSE

2	That an appropriate interim committee be assigned to
3	study:
4	(1) ways in which the state can promote the
5	development of a range of services to infirm elderly
6	persons, including independent living with home services,
7	respite care, adult day care, full-time in-home care,
8	personal care facilities, and other alternatives to skilled
9	nursing care in an institutional setting;
10	(2) sources of revenue that could be used to subsidize
11	the cost of nursing homes and other long-term care options
12	in order to make them available to low- and middle-income
1.3	families that are not eligible for Medicaid;
14	(3) the effect of requiring the Montana Comprehensive
15	Health Association, established by 33-22-1503, to include as
16	a minimum benefit under the Association plan all or part of

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including independent living with home services, care, adult day care, full-time in-home care, care facilities, and other alternatives to skilled care in an institutional setting; sources of revenue that could be used to subsidize of nursing homes and other long-term care options r to make them available to low- and middle-income that are not eligible for Medicaid; the effect of requiring the Montana Comprehensive ssociation, established by 33-22-1503, to include as num benefit under the Association plan all or part of the expenses of long-term care; 17 (4) appropriate standards for 18 long-term 19 insurance; and (5) incentives that the state could offer private 20 insurers to develop and offer long-term care insurance to 21 22 Montana citizens. 23 BE IT FURTHER RESOLVED, that the committee report the 24 findings of the study to the 51st Legislature and, if 25 necessary, draft legislation implement its

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OF REPRESENTATIVES OF THE STATE OF MONTANA:

care

LC 0598/01

1 recommendations.

-End-

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study:

APPROVED BY COMM. ON HUMAN SERVICES AND AGING

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THEREFORE. BE IT RESOLVED BY THE SENATE AND THE HOUSE

HOUSE JOINT RESOLUTION NO. 43

persons, including independent living with home services,
respite care, adult day care, full-time in-home care,
personal care facilities, and other alternatives to skilled
nursing care in-an-institutional-setting;
(2) sources of revenue that could be used to subsidize
the cost of nursing homes and other long-term care options
in order to make them available to low- and middle-income
families that are not eligible for Medicaid;
(3) the effect of requiring the Montana Comprehensive

Health Association, established by 33-22-1503, to include as

a minimum benefit under the Association plan all or part of

(5) incentives that the state could offer private insurers to develop and offer long-term care insurance to

(6) INCENTIVES THE STATE COULD OFFER TO INDIVIDUALS

That an appropriate interim committee be assigned to

(1) ways in which the state can promote the

development of a range of services to infirm elderly

OF REPRESENTATIVES OF THE STATE OF MONTANA:

INSURANCE.

the expenses of long-term care;

insurance; and

Montana citizens; AND

(4) appropriate standards for

AND FAMILIES FOR THE PURCHASE OF THE LONG-TERM CARE

long-term

1 BE IT FURTHER RESOLVED, that the committee report the 2 findings of the study to the 51st Legislature and, if 3 necessary, draft legislation to implement its 4 recommendations.

-End-

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That	an	appropriate	interim	committee	be	assigned	to
study:							

OF REPRESENTATIVES OF THE STATE OF MONTANA:

- 4 (1) ways in which the state can promote the
 5 development of a range of services to infirm elderly
 6 persons, including independent living with home services,
 7 respite care, adult day care, full-time in-home care,
 8 personal care facilities, and other alternatives to skilled
 9 nursing care in-an-institutional-setting:
- (2) sources of revenue that could be used to subsidize the cost of nursing homes and other long-term care options in order to make them available to low- and middle-income families that are not eligible for Medicaid;
 - (3) the effect of requiring the Montana Comprehensive Health Association, established by 33-22-1503, to include as a minimum benefit under the Association plan all or part of the expenses of long-term care;
- 18 (4) appropriate standards for long-term care
 19 insurance; and
- (5) incentives that the state could offer private insurers to develop and offer long-term care insurance to Montana citizens; AND
- 23 (6) INCENTIVES THE STATE COULD OFFER TO INDIVIDUALS
 24 AND FAMILIES FOR THE PURCHASE OF THE LONG-TERM CARE
 25 INSURANCE.

BE IT FURTHER RESOLVED, that the committee report the findings of the study to the 51st Legislature and, if necessary, draft legislation to implement its recommendations.

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17	the expenses of long-term care;
18	(4) appropriate standards for long-term care
19	insurance; and
20	(5) incentives that the state could offer private
21	insurers to develop and offer long-term care insurance to
22	Montana citizens; AND

That	an app	ropriat	e interim	committe	e be	assigned	to
study:							
(1)	ways	in w	hich the	state	can	promote	the
developme	ent of	a ran	ge of se	rvices	to in	firm eld	erly
persons,	includ	ling in	dependent	living	with h	ome servi	ces,
respite	care,	adult (day care,	fu11-t	ime i	n-home c	are,
personal	care f	aciliti	es, and ot	her alte	rnativ	es to ski	lled
nursing o	care in-	an-inst	itutional-	setting;			
(2)	source	s of re	venue that	could b	e used	to subsi	dize

- (3) the effect of requiring the Montana Comprehensive Mealth Association, established by 33-22-1503, to include as minimum benefit under the Association plan all or part of the expenses of long-term care;
- (4) appropriate standards long-term care insurance; and
- (5) incentives that the state could offer private nsurers to develop and offer long-term care insurance to Montana citizens; AND
- 23 (6) INCENTIVES THE STATE COULD OFFER TO INDIVIDUALS AND FAMILIES, FOR THE PURCHASE OF THE LONG-TERM CARE 24 INSURANCE. 25

BE IT FURTHER RESOLVED, that the committee report the findings of the study to the 51st Legislature and, if necessary, draft legislation to implement its recommendations.

-End-