HOUSE JOINT RESOLUTION 19

Introduced by Boharski, et al.

	Introduced Referred to Human Services & Aging First Reading Hearing Committee ReportBill Passed 2nd Reading Passed 3rd Reading Passed
3/01 3/01 4/06 4/13 4/14 4/15	Hearing
4/21 4/23 4/26	Returned to House Signed by Speaker Signed by President Filed with Secretary of State

LC 1561/01

INTRODUCED BY Willinger 3

4 A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF
5 REPRESENTATIVES OF THE STATE OF MONTANA URGING THE CONGRESS
6 OF THE UNITED STATES TO ENACT LEGISLATION TO PROVIDE FOR
7 INDIVIDUAL MEDICAL CARE SAVINGS ACCOUNTS.

8

9 WHEREAS, it is estimated that 145,000 Montanans and 37 10 million Americans are without health insurance, many while 11 between jobs; many more people are underinsured because of 12 the effects of rising health care costs and spending; and 13 these rising health care costs are forcing employers to trim 14 the level and availability of health care benefits to their 15 employees; and

16 WHEREAS, overuse of health care services for relatively 17 small claims is one of the most significant causes of health 18 care cost and spending increases; and currently, more than 19 two-thirds of all insurance claims for medical spending are 1ess than \$3,000 per family per year in this country; and

21 WHEREAS, in response to the runaway cost increases on 22 health care spending in this country, the private sector has 23 developed the concept of individual medical care savings 24 accounts; this initiative is designed to ensure health 25 insurance availability for Americans; and it is predicated



on providing incentives to more efficiently use medical
 treatment, encourage competition, and reduce cost in the
 health care industry; and

WHEREAS, through employer and employee-funded individual 4 5 medical care savings account arrangements and reduced costs of gualified higher deductible insurance policies, millions 6 7 of Americans could insure themselves for both routine and major medical services; under the concept of individual 8 9 medical care savings accounts, an employer or individuals 10 could instead purchase lower cost, high deductible major 11 medical policies; an employer and individuals could then set 12 aside the saved premium differential in an individual 13 medical care savings account: participating individuals 14 would use the money in the account to pay their medical care 15 expenses up to the deductible; however, any account money 16 unspent by the participating individuals in a plan year 17 would then belong to the individuals to save, spend on 18 medical care, or use otherwise; and this would be a strong incentive for people not to abuse health care expenditures 19 20 and to institute "cost-shopping" for medical care services; 21 and

WHEREAS, by setting aside money to spend on health care, employees could change jobs and use the money they had so far saved to buy interim health insurance or to cover health care expenses, thereby eliminating the problem of uninsureds

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1 between jobs and helping reduce "job-lock"; and 2 WHEREAS, by making their own medical care decisions, individual policyholders would have a strong stake in 3 reducing costs; this simple financial mechanism would expand 4 5 health insurance options to others who presently have no 6 insurance; and most importantly, this move to decrease health care cost burdens in this country would require no 7 8 new federal bureaucracy.

9

10 NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSE 11 OF REPRESENTATIVES OF THE STATE OF MONTANA:

12 That the Congress of the United States be urged to enact 13 legislation swiftly and in good faith to enable Montanans 14 and all Americans to establish individual medical care 15 savings accounts.

16 BE IT FURTHER RESOLVED, that copies of this resolution 17 be transmitted to the President of the United States, the 18 President of the United States Senate, the Speaker of the 19 United States House of Representatives, and all members of 20 the Montana Congressional Delegation.

-End-

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APPROVED BY COMM. ON HUMAN SERVICES AND AGING

1	HOUSE JOINT RESOLUTION NO. 19
2	INTRODUCED BY BOHARSKI, BOHLINGER, SMITH, BARNETT, MILLS,
3	HERRON, PECK, COBB, SIMON, KASTEN, WISEMAN
4	
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6	REPRESENTATIVES OF THE STATE OF MONTANA URGING THE CONGRESS
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8	INDIVIDUAL MEDICAL CARE SAVINGS ACCOUNTS.
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10	WHEREAS, it is estimated that 145,000 Montanans and 37
11	million Americans are without health insurance, many while
12	between jobs; many more people are underinsured because of
13	the effects of rising health care costs and spending; and

these rising health care costs are forcing employers to trim 14 15 the level and availability of health care benefits to their 16 employees; and

17 WHEREAS, overuse of health care services for relatively small claims is one of the most significant causes of health 18 care cost and spending increases; and currently, more than 19 20 two-thirds of all insurance claims for medical spending are 21 less than \$3,000 per family per year in this country; and

22 WHEREAS, in response to the runaway cost increases on 23 health care spending in this country, the private sector has developed the concept of individual medical care savings 24 25 accounts; this initiative is designed to ensure health



1 insurance availability for Americans; and it is predicated 2 on providing incentives to more efficiently use medical 3 treatment, encourage competition, and reduce cost in the 4 health care industry; and

5 WHEREAS, through employer and employee-funded individual 6 medical care savings account arrangements and reduced costs 7 of qualified higher deductible insurance policies, millions 8 of Americans could insure themselves for both routine and 9 major medical services; under the concept of individual medical care savings accounts, an employer or individuals 10 could instead purchase lower cost, high deductible major 11 12 medical policies; an employer and individuals could then set 13 aside the saved premium differential in an individual 14 medical care savings account; participating individuals would use the money in the account to pay their medical care 15 16 expenses up to the deductible; however, any account money 17 unspent by the participating individuals in a plan year 18 would then belong to the individuals to save, spend on 19 medical care, or use otherwise; and this would be a strong 20 incentive for people not to abuse health care expenditures 21 and to institute "cost-shopping" for medical care services; 22 and

23 WHEREAS, by setting aside money to spend on health care, 24 employees could change jobs and use the money they had so 25 far saved to buy interim health insurance or to cover health

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care expenses, thereby eliminating the problem of uninsureds
 between jobs and helping reduce "job-lock"; and

3 WHEREAS, by making their own medical care decisions, 4 individual policyholders would have a strong stake in 5 reducing costs; this simple financial mechanism would expand 6 health insurance options to others who presently have no 7 insurance; and most importantly, this move to decrease 8 health care cost burdens in this country would require no 9 new federal bureaucracy.

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-End-

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53rd Legislature

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2 INTRODUCED BY BOHARSKI, BOHLINGER, SMITH, BARNETT, MILLS, 3 HERRON, PECK, COBB, SIMON, KASTEN, WISEMAN 4 5 A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF 6 REPRESENTATIVES OF THE STATE OF MONTANA URGING THE CONGRESS 7 OF THE UNITED STATES TO ENACT LEGISLATION TO PROVIDE FOR 8 INDIVIDUAL MEDICAL CARE SAVINGS ACCOUNTS. 9

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THIRD READING

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