

1

SENATE JOINT RESOLUTION NO. 14

2 INTRODUCED BY

*Jackson, French, Liss, Wahl, Binkley, Johnson, Quinn, McLee, Salazar, Boggay, Christensen, Gottlieb, Denehy*

3 A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF  
4 MONTANA ACCEPTING THE SINGLE PAYOR AND MULTIPLE PAYOR UNIVERSAL HEALTH CARE ACCESS  
5 PLANS PREPARED BY THE MONTANA HEALTH CARE AUTHORITY; URGING CONTINUED ACTIVITY TO  
6 ACCOMPLISH THE GOAL OF UNIVERSAL ACCESS; AND URGING IMPLEMENTATION OF MARKET-BASED  
7 SEQUENTIAL HEALTH CARE REFORM.

8

9  
10 WHEREAS, Senate Bill No. 285 of the 53rd Legislature created the Montana Health Care Authority,  
11 required the Authority to report both a single payor and multiple payor universal health care access plan  
12 to the 1995 Legislature, and requires the 1995 Legislature to vote on both the single payor and multiple  
13 payor plans; and

14 WHEREAS, the Montana Health Care Authority has fulfilled its statutory duties by preparing a final  
15 report containing recommendations for single payor and multiple payor universal health care access plans,  
16 held public hearings on the plans and on the report, and transmitted the plans and report to the Governor  
17 and to the Legislature; and

18 WHEREAS, the single payor plan would cost Montana approximately \$900 million a year to  
19 implement, and the multiple payor plan would cost Montana approximately \$130 million a year to  
20 implement; and

21 WHEREAS, implementation of either plan will require significant legislation and legislative  
22 appropriations, but there is insufficient state revenue at this time to implement either the complete single  
23 payor or multiple payor plan as written; and

24 WHEREAS, nationwide health care reform has been delayed because of the failure of the United  
25 States Congress to pass federal legislation providing for comprehensive health care reform; and

26 WHEREAS, the Employee Retirement Income Security Act of 1974 has not been amended to allow  
27 states to enact comprehensive health care reform laws covering public or private self-insured public health  
28 care plans; and

29 WHEREAS, the goal of affordable access to health care coverage and services to all Montanans is  
30 a laudable goal; and

1           WHEREAS, the Montana Health Care Authority has developed a list of alternatives to the single  
2 payor and multiple payor plans that provides for a market-based sequential approach to health care reform  
3 in Montana.

4

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

7           (1) That the single payor and multiple payor health care access plans prepared by the Montana  
8 Health Care Authority pursuant to section 50-4-301, MCA, and contained in the documents entitled  
9 "Statewide Universal Health Care Access Plans", volumes I through V, dated October 1, 1994, be  
10 accepted.

11           (2) That the plans accepted in subsection (1), portions of those plans, or other features of health  
12 care reform prepared by the Montana Health Care Authority be implemented through a market-based  
13 sequential health care reform process.

14           (3) That the Legislature reaffirm the goal of affordable access to health care coverage and services  
15 for all Montanans and that the State of Montana continue within the limits of legislative appropriations to  
16 work toward the achievement of this goal and toward achievement of the other health care reform goals  
17 expressed in Senate Bill No. 285, including increased access, cost containment, and health care  
18 infrastructure improvements.

19           BE IT FURTHER RESOLVED, that the Secretary of State deliver a copy of this resolution to the  
20 Executive Director and presiding officer of the Board of the Montana Health Care Authority.

21

-END-

SENATE JOINT RESOLUTION NO. 14

14

2 INTRODUCED BY Jacobsen Franklin Hoyle Walt  
3 Brenhoff Johnson Squires McLee Wally Boggs Christiansen  
4 JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF  
5 MONTANA ACCEPTING THE SINGLE PAYOR AND MULTIPLE PAYOR UNIVERSAL HEALTH CARE ACCESS  
6 PLANS PREPARED BY THE MONTANA HEALTH CARE AUTHORITY; URGING CONTINUED ACTIVITY TO  
7 ACCOMPLISH THE GOAL OF UNIVERSAL ACCESS; AND URGING IMPLEMENTATION OF MARKET-BASED  
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14 WHEREAS, the Montana Health Care Authority has fulfilled its statutory duties by preparing a final  
15 report containing recommendations for single payor and multiple payor universal health care access plans,  
16 held public hearings on the plans and on the report, and transmitted the plans and report to the Governor  
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18 WHEREAS, the single payor plan would cost Montana approximately \$900 million a year to  
19 implement, and the multiple payor plan would cost Montana approximately \$130 million a year to  
20 implement; and

21 WHEREAS, implementation of either plan will require significant legislation and legislative  
22 appropriations, but there is insufficient state revenue at this time to implement either the complete single  
23 payor or multiple payor plan as written; and

24 WHEREAS, nationwide health care reform has been delayed because of the failure of the United  
25 States Congress to pass federal legislation providing for comprehensive health care reform; and

26 WHEREAS, the Employee Retirement Income Security Act of 1974 has not been amended to allow  
27 states to enact comprehensive health care reform laws covering public or private self-insured public health  
28 care plans; and

29 WHEREAS, the goal of affordable access to health care coverage and services to all Montanans is  
30 a laudable goal; and

1           WHEREAS, the Montana Health Care Authority has developed a list of alternatives to the single  
2 payor and multiple payor plans that provides for a market-based sequential approach to health care reform  
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12 care reform prepared by the Montana Health Care Authority be implemented through a market-based  
13 sequential health care reform process.

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15 for all Montanans and that the State of Montana continue within the limits of legislative appropriations to  
16 work toward the achievement of this goal and toward achievement of the other health care reform goals  
17 expressed in Senate Bill No. 285, including increased access, cost containment, and health care  
18 infrastructure improvements.

19           BE IT FURTHER RESOLVED, that the Secretary of State deliver a copy of this resolution to the  
20 Executive Director and presiding officer of the Board of the Montana Health Care Authority.

21

-END-

## 1 SENATE JOINT RESOLUTION NO. 14

2 INTRODUCED BY JACOBSON, FRANKLIN, TUSS, WATERMAN, BARNHART, J. JOHNSON, SQUIRES,  
3 MCKEE, HALLIGAN, BROOKE, CHRISTIAENS, BARTLETT, DOHERTY4  
5 A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF  
6 MONTANA ACCEPTING STATING THAT THE SINGLE PAYOR AND MULTIPLE PAYOR UNIVERSAL HEALTH  
7 CARE ACCESS PLANS PREPARED BY THE MONTANA HEALTH CARE AUTHORITY HAVE BEEN RECEIVED;  
8 URGING CONTINUED ACTIVITY TO ACCOMPLISH THE GOAL OF UNIVERSAL ACCESS; AND URGING  
9 IMPLEMENTATION OF MARKET-BASED SEQUENTIAL HEALTH CARE REFORM.10  
11 WHEREAS, Senate Bill No. 285 of the 53rd Legislature created the Montana Health Care Authority,  
12 required the Authority to SUBMIT A report both CONTAINING RECOMMENDATIONS FOR a single payor  
13 and A multiple payor universal health care access plan to the 1995 Legislature, and requires the 1995  
14 Legislature to vote on both the single payor and multiple payor plans; and15 WHEREAS, the Montana Health Care Authority has fulfilled its statutory duties by preparing a final  
16 report containing recommendations for single payor and multiple payor universal health care access plans,  
17 held public hearings on the plans and on the report, and transmitted the plans and report to the Governor  
18 and to the Legislature; and19 WHEREAS, THIS RESOLUTION SIGNIFIES ONLY THAT THE LEGISLATURE HAS RECEIVED THE  
20 FINAL REPORT FROM THE MONTANA HEALTH CARE AUTHORITY AND DOES NOT REFLECT APPROVAL  
21 OR DISAPPROVAL OF THE CONTENTS OF THE REPORT REGARDING THE RECOMMENDATIONS FOR A  
22 SINGLE PAYOR AND A MULTIPLE PAYOR UNIVERSAL HEALTH CARE ACCESS PLAN; AND23 WHEREAS, the single payor plan would cost Montana approximately \$900 million a year to  
24 implement, and the multiple payor plan would cost Montana approximately \$130 million a year to  
25 implement; and26 WHEREAS, implementation of either plan will require significant legislation and legislative  
27 appropriations, but there is insufficient state revenue at this time to implement either the complete single  
28 payor or multiple payor plan as written; and29 WHEREAS, nationwide health care reform has been delayed because of the failure of the United  
30 States Congress to pass federal legislation providing for comprehensive health care reform; and

1 WHEREAS, the Employee Retirement Income Security Act of 1974 has not been amended to allow  
2 states to enact comprehensive health care reform laws covering public or private self-insured public health  
3 care plans; and

4 WHEREAS, the goal of affordable access to health care coverage and services to all Montanans is  
5 a laudable goal; and

6 WHEREAS, the Montana Health Care Authority has developed a list of alternatives to the single  
7 payor and multiple payor plans that ~~provides for a market-based sequential approach to~~ PROVIDE  
8 RECOMMENDATIONS TO IMPLEMENT health care reform in Montana IN A MARKET-BASED SEQUENTIAL  
9 APPROACH, AND THOSE ALTERNATIVES SHOULD BE CONSIDERED SEPARATELY ON THEIR OWN  
10 MERITS.

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

14 (1) That the single payor and multiple payor health care access plans prepared by the Montana  
15 Health Care Authority pursuant to section 50-4-301, MCA, and contained in the documents entitled  
16 "Statewide Universal Health Care Access Plans", volumes I through V, dated October 1, 1994, be accepted  
17 RECEIVED AND THAT THIS RESOLUTION FULFILL THE LEGISLATURE'S OBLIGATION TO VOTE ON BOTH  
18 PLANS.

19 (2) That the plans ~~accepted~~ REFERRED in subsection (1), portions of those plans, or other  
20 features of health care reform prepared by the Montana Health Care Authority be ~~IMPLEMENTED~~ through a  
21 CONSIDERED IN SEPARATE LEGISLATION TO ATTAIN market-based sequential health care reform process.

22 (3) That the Legislature reaffirm the goal of affordable access to health care coverage and services  
23 for all Montanans and that the State of Montana continue within the limits of legislative appropriations to  
24 work toward the achievement of this goal and toward achievement of the other health care reform goals  
25 expressed in Senate Bill No. 285, including increased access, cost containment, and health care  
26 infrastructure improvements.

27 BE IT FURTHER RESOLVED, that the Secretary of State deliver a copy of this resolution to the  
28 Executive Director and presiding officer of the Board of the Montana Health Care Authority.

29 -END-





## HOUSE STANDING COMMITTEE REPORT

March 14, 1995

Page 1 of 1

Mr. Speaker: We, the committee on Joint Select Committee on Health Care report that  
Senate Joint Resolution 14 (third reading copy -- blue) be concurred in as amended.

Signed: Steve Benedict  
Steve Benedict, Chair

Carried by: Rep. Simon

And, that such amendments read:

1. Page 1, line 19.  
Strike: "ONLY"

2. Page 1, line 23 through page 1, line 30.  
Strike: page 1, line 23 through page 1, line 30 in their entirety

3. Page 2, lines 8 through 10.  
Strike: "RECOMMENDATIONS TO IMPLEMENT"  
Insert: "several approaches to"  
Following: "Montana"  
Strike: remainder of line 8 through "MERITS." on line 10  
Insert: "; and  
WHEREAS, the members and staff of the Montana Health Care Authority have devoted significant time to studying the issue of health care, and the people of Montana appreciate their hard work and dedication."

-END-

SJ 14

Committee Vote:  
Yes 10, No 0.

HOUSE

SENATE JOINT RESOLUTION NO. 14

INTRODUCED BY JACOBSON, FRANKLIN, TUSS, WATERMAN, BARNHART, J. JOHNSON, SQUIRES,  
MCKEE, HALLIGAN, BROOKE, CHRISTIAENS, BARTLETT, DOHERTY

5 A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF  
6 MONTANA ~~ACCEPTING STATING THAT~~ THE SINGLE PAYOR AND MULTIPLE PAYOR UNIVERSAL HEALTH  
7 CARE ACCESS PLANS PREPARED BY THE MONTANA HEALTH CARE AUTHORITY HAVE BEEN RECEIVED;  
8 URGING CONTINUED ACTIVITY TO ACCOMPLISH THE GOAL OF UNIVERSAL ACCESS; AND URGING  
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12 required the Authority to SUBMIT A report ~~both~~ CONTAINING RECOMMENDATIONS FOR a single payor  
13 and A multiple payor universal health care access plan to the 1995 Legislature, and requires the 1995  
14 Legislature to vote on both the single payor and multiple payor plans; and

15 WHEREAS, the Montana Health Care Authority has fulfilled its statutory duties by preparing a final  
16 report containing recommendations for single payor and multiple payor universal health care access plans,  
17 held public hearings on the plans and on the report, and transmitted the plans and report to the Governor  
18 and to the Legislature; and

19 WHEREAS, THIS RESOLUTION SIGNIFIES ONLY THAT THE LEGISLATURE HAS RECEIVED THE  
20 FINAL REPORT FROM THE MONTANA HEALTH CARE AUTHORITY AND DOES NOT REFLECT APPROVAL  
21 OR DISAPPROVAL OF THE CONTENTS OF THE REPORT REGARDING THE RECOMMENDATIONS FOR A  
22 SINGLE PAYOR AND A MULTIPLE PAYOR UNIVERSAL HEALTH CARE ACCESS PLAN; AND

23 WHEREAS, the single payer plan would cost Montana approximately \$900 million a year to  
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7 payor and multiple payor plans that ~~provides for a market-based sequential approach to~~ PROVIDE  
8 RECOMMENDATIONS TO IMPLEMENT SEVERAL APPROACHES TO health care reform in Montana IN A  
9 MARKET BASED SEQUENTIAL APPROACH, AND THOSE ALTERNATIVES SHOULD BE CONSIDERED  
10 SEPARATELY ON THEIR OWN MERITS; AND

11        WHEREAS, THE MEMBERS AND STAFF OF THE MONTANA HEALTH CARE AUTHORITY HAVE  
12 DEVOTED SIGNIFICANT TIME TO STUDYING THE ISSUE OF HEALTH CARE, AND THE PEOPLE OF  
13 MONTANA APPRECIATE THEIR HARD WORK AND DEDICATION.

14  
15        NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE  
16 STATE OF MONTANA:

17        (1) That the single payor and multiple payor health care access plans prepared by the Montana  
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24 CONSIDERED IN SEPARATE LEGISLATION TO ATTAIN market-based sequential health care reform process.

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30        BE IT FURTHER RESOLVED, that the Secretary of State deliver a copy of this resolution to the

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