

HOUSE CONCURRENT RESOLUTION NO. 5
IN THE LEGISLATURE OF THE STATE OF ALASKA
SEVENTEENTH LEGISLATURE - FIRST SESSION

BY REPRESENTATIVES ELLIS, Boyer, Navarre, Koponen, Ulmer

Introduced: 2/13/91

Referred: Health, Education and Social Services, Finance

A RESOLUTION

1 Establishing a Health Resources and Access Task Force.

2 BE IT RESOLVED BY THE LEGISLATURE OF THE STATE OF ALASKA:

3 WHEREAS estimated annual expenditures for health care in Alaska have risen by 300 percent
4 in the last 10 years from \$480 million to over \$1.5 billion; and

5 WHEREAS over 90,000 residents of the state cannot afford to pay their medical bills, are not
6 covered by a group health insurance plan, do not qualify for public assistance programs, and cannot
7 afford to pay individual health insurance premiums; and

8 WHEREAS, if current trends continue, it is estimated that expenditures for health care in the
9 state will increase to at least \$10 billion by the year 2000 and over 25 percent of the state's residents
10 will be uninsured; and

11 WHEREAS the legislature, aided by the Health Care Cost Containment Task Force, has achieved
12 savings in the costs of health care in the state totaling over \$20 million in fiscal years 1990 and 1991;
13 and

14 WHEREAS every resident should have access to a basic level of health care regardless of
15 income and should not become financially destitute before obtaining health care; and

16 WHEREAS the legislature recognizes that there is a continuing need to develop and evaluate

1 ways to manage health care expenditures in the state;

2 **BE IT RESOLVED** by the Alaska State Legislature that the Health Resources and Access Task
3 Force is established with the following primary purposes:

4 (1) to design a cost-efficient program that allows access to a basic level of health care
5 services for all state residents;

6 (2) to continue the work of the Health Care Cost Containment Task Force in seeking
7 ways to achieve savings in the cost of health care in the state; and

8 (3) to define a strategy for implementing a health care program covering all Alaskans and
9 a strategy for continuing to contain the costs of health care in the state; and be it

10 **FURTHER RESOLVED** that the task force shall

11 (1) solicit advice and information from the medically indigent, health care consumer
12 groups, the insurance industry, health care providers, labor organizations, emergency services personnel,
13 large and small businesses, the Medical Care Advisory Committee, the Alaska Native Health Service,
14 actuaries, the public, and others;

15 (2) investigate and gather data relating to health care quality, access, delivery, payment
16 systems, and financing in the state, especially in rural areas;

17 (3) ascertain and review successful health care protection methods in other states,
18 territories, and countries and other health care alternatives, including ways of providing health care for
19 persons without insurance or with limited health care protection;

20 (4) continue to update an accurate estimate of the number of people who are unable to
21 receive necessary health care services in the state, which patients are generating unpaid medical bills,
22 which state residents are uninsured or lack adequate insurance, which health care providers are providing
23 uncompensated care, who is paying for the cost of uncompensated care, and the total cost of
24 uncompensated care in the state;

25 (5) identify those health care services necessary to achieve an acceptable minimum level
26 of health care for all state residents and to examine those health care services that provide the most care
27 for the most people at the least cost, including prevention services;

28 (6) monitor and evaluate experience under the state employee and retiree health plans;

29 (7) evaluate the potential benefits of health education, wellness plans, and prevention
30 plans for all residents;

31 (8) develop strategies to support health care professions training and the retention of
32 health care professionals in the state;

1 (9) recommend ways to coordinate services among nonprofit health care providers, profit
2 making health care providers, the state division of public health, the United States Department of
3 Veterans Affairs, the United States Department of Defense, and the Alaska Native Health Service in
4 order to achieve a more efficient and effective health care delivery system;

5 (10) review ways to maximize the use of federal funds for health care programs in the
6 state;

7 (11) investigate ways to reduce costs associated with malpractice insurance coverage,
8 including its effect on the cost of health care in the state;

9 (12) consider the feasibility of redistributing funds currently spent by the state on health
10 care in order to provide residents with affordable and equitable care;

11 (13) provide advice and assistance to other public agencies involved in health care
12 programs; and

13 (14) pursue other sources of funding for the expenses of the task force; and be it

14 **FURTHER RESOLVED** that the task force shall consist of 14 members and two alternates as
15 follows:

16 (1) three members of the Senate appointed by the President of the Senate, one of whom
17 shall be designated as an alternate;

18 (2) three members of the House of Representatives appointed by the Speaker of the
19 House, one of whom shall be designated as an alternate;

20 (3) two persons representing the executive branch, appointed by the Governor;

21 (4) eight members chosen by the members appointed under paragraphs (1) - (3) as
22 follows: one individual representing the medically indigent, two individuals representing private
23 employers who are not health care providers, two individuals representing health care providers, one
24 individual representing nonprofit organizations, one consumer of health services who is not an employer
25 or health care provider, and one individual representing labor organizations; and be it

26 **FURTHER RESOLVED** that the members of the task force shall elect from among themselves
27 a chair and a vice-chair and that the conduct of the task force meetings shall be in sessions open to the
28 public where all interested parties may provide information; and be it

29 **FURTHER RESOLVED** that, within funds made available for the purpose, the task force may
30 hire staff and contract for services to perform its duties; and be it

31 **FURTHER RESOLVED** that the task force shall report its findings and recommendations to
32 the Governor and the legislature by February 1, 1992, and February 1, 1993; and be it

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FURTHER RESOLVED that the task force is terminated at 11:59 p.m. on February 1, 1993.