

844

HHESS

HB 100 /

200

House Bill 1007 - An Act Relating to Comprehensive Health Planning as outlined in Public Laws 93-641 and 96-79

Issue Area	Current Status AS 18.07	Proposed Change incorporated in HB 1007	Rationale for change	Impact
<u>CERTIFICATE OF NEED</u>				
Coverage of Major Medical Equipment Purchases	Prior review and approval required in institutional setting	Prior approval required for equipment costing more than \$150,000 regardless of location	To resolve a gap which previously allowed physicians to purchase major medical equipment for a facility and thereby avoid the requirement for a review	Since Alaska physicians generally rely on hospitals to purchase such equipment, the impact should be insignificant
Health Maintenance Organization coverage	Alaska presently has no HMOs	Exempts certain HMOs which have enrollments of at least 50,000 from CON review	To allow HMOs to develop without constraint from CON	Since Alaska currently has no HMOs, impact would be insignificant
Coverage of Rehabilitation Facilities	Not covered	Will make rehabilitation facilities subject to CON review	To cover all health care services and settings in review process (with exception of HMO)	Would cover a few Alaska facilities, depending upon the Federal Regulatory Definition
<u>PLANNING CYCLE</u>				
State Health Plan	Done on an annual basis	Done every 3 years with appropriate annual revisions/updates	To provide a longer cycle for plan development and opportunity to implement and evaluate plan	Should allow longer range view of Alaska's health systems and better use of resources to plan for system and status improvements

Issue Area	Current Status AS 18.07	Proposed Change incorporated in HB 1007	Rational for change	Impact
INVOLVEMENT OF OTHER HEALTH RELATED ENTITIES	Done on voluntary, coordinative basis	Includes involvement of authorities from mental and public health and substance abuse	To ensure close working relationships and integration where possible among various planning entities	Fosters continuing working relationships and avoids duplication and overlap
PLAN IMPLEMENTATION	Done on voluntary, coordinative basis	Appropriate agencies and authorities as designated by the Governor will carry out the parts of the State Health Plan which relate to State Government	To use the State Health Plan as a viable document to be used throughout State Government rather than being a document which could/would only be implemented voluntarily	Creates closer working relationships among authorities
GOVERNOR'S ROLE	Governor receives State Health Plans after they are completed. He appoints members of the statewide Health Coordinating Council (SHCC)	Governor can accept or reject State Health Plan on the basis of whether it meets statewide needs assessment. May also appoint chairman of SHCC	To provide a stronger role for the executive branch since the State Health Plan is to be used to guide State health resource allocation and since the SHCC is to advise the State on health policy matters	Affords mutual com- mitment between State Government and an advisory body
VOLUNTARY DISCONTINUANCE OF UNNEEDED HOSPITAL SERVICES	Hospitals can currently discontinue unneeded services following appropriate input	Formalizes mechanism for discontinuance or conversion of unneeded hospital services; authorizes limited funds for such changes	To encourage the best utilization of facilities and services to meet a target population's need	Alaska's situation is one of access rather than excess. The conversion feature may be useful
HEALTH SYSTEMS AGENCY (HSA) BOARD MEM- BERSHIP	Members may currently be suggested/nominated by existing board	Involves the community to a larger extent in the board selection process	To avoid a self perpetuation of these private, nonprofit corporations	May alter composition slightly among Alaska's three HSA boards

Issue Area	Current Status AS 18.07	Proposed Change incorporated in HB 1007	Rational for change	Impact
DATA COLLECTION	Agencies are to use existing data bases wherever possible	Requires Health Systems Agencies to collect information from all hospitals on the rates charged for the most frequently used services and make such available to public	To provide public information/ awareness on health care costs; and foyster competition	Will give Alaskans information on hospital costs
NATION HEALTH PRIORITIES	Currently 10 priorities	Adds priorities for cost containment and encourages competition in allocation of health services	To deveiop additional mechanisms for dealing with rising health care costs	Will not have great impact where access is more important than dealing with an excess