## 2007 SESSION

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1	HOUSE JOINT RESOLUTION NO. 645
2	Offered January 10, 2007
3	Prefiled January 9, 2007
4	Establishing a joint subcommittee to develop a market-based, consumer-driven health insurance model
5 6	for the Commonwealth. Report.
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8	Referred to Committee on Rules
9 10	WHEREAS, prices for health care have been rising faster than prices of other goods and services for
10	several years; and
12	WHEREAS, much of the rate of increase in health care costs may be attributed to the structure of
13	the current system by which people pay for medical services; and
14	WHEREAS, the current system, under which individuals rely on third parties such as
15	employer-funded health insurance or government programs to pay for their health care services, has
16	eliminated market forces that would temper the cost of health care; and
17	WHEREAS, according to the National Center for Policy Analysis, health care costs over the past 40
18 19	years have risen as the proportion of health care paid for by third parties has increased because individuals have no incentive to take actions to control health care expenditures when they do not
20	directly benefit from the savings; and
$\overline{21}$	WHEREAS, recent efforts to increase the stake that individuals have in the expenditure of health
22	care resources, including the use of health savings accounts and requiring the payment of deductibles
23	and copayments, offer evidence that market-based solutions hold the promise of tempering runaway
24 25	health care inflation; and WUEPEAS the surrant system's reliance on employer funded health insurance has placed large firms.
25 26	WHEREAS, the current system's reliance on employer-funded health insurance has placed large firms in several industries at a competitive disadvantage to their global competitors who do not bear the
27	burden of insuring the health of employees and retirees; and
28	WHEREAS, many healthy persons who could afford health insurance coverage voluntarily elect to
29	forego such coverage, as a result of which the health care delivery system bears negative consequences
30	through unreimbursed costs incurred when such persons receive unplanned medical care and through the
31 32	higher premiums that are paid by other persons who do obtain health insurance coverage; and WHEREAS, employers who employ undocumented employees, knowing that they will not have
32 33	health insurance converge, force hospitals and other health care providers either to pass on the costs of
34	unreimbursed care to taxpayers or to those patients who are insured or to absorb these costs; and
35	WHEREAS, a consumer-driven, market-based system could encourage those who have opted out of
36	acquiring or providing traditional health insurance to participate, at lower costs and with fewer
37	uncovered persons; and WHEPEAS more than the second s
38 39	WHEREAS, market-based measures hold the promise of increasing the efficiency of the current system, which in turn may provide lower costs for health care for more Virginians; now, therefore, be it
<b>40</b>	RESOLVED by the House of Delegates, the Senate concurring, That a joint subcommittee be
41	established to develop a market-based, consumer-driven health insurance model for the Commonwealth.
42	In conducting its study, the joint subcommittee shall (i) examine the costs to Virginia's taxpayers of the
43	expense of unreimbursed health care provided by hospitals and other providers to the uninsured and (ii)
44 45	develop recommendations for legislation to implement the joint subcommittee's recommendations.
45 46	The joint subcommittee shall have a total membership of eight. Members shall be appointed as follows: five members of the House of Delegates to be appointed by the Speaker of the House of
47	Delegates in accordance with the principles of proportional representation contained in the Rules of the
<b>48</b>	House of Delegates; and three members of the Senate to be appointed by the Senate Committee on
49	Rules. The joint subcommittee shall elect a chairman and vice chairman from among its membership.
<b>50</b>	Administrative staff support shall be provided by the Office of the Clerk of the House of Delegates.
51 52	Legal, research, policy analysis, and other services as requested by the joint subcommittee shall be provided by the Division of Legislative Services. Technical assistance shall be provided by Bureau of
52 53	Insurance of the State Corporation Commission. All agencies of the Commonwealth shall provide
54	assistance to the joint subcommittee for this study, upon request.
55	The joint subcommittee shall be limited to four meetings for the 2007 interim, and the direct costs of
56	this study shall not exceed \$8,000 without approval as set out in this resolution. Approval for
57 58	unbudgeted nonmember-related expenses shall require the written authorization of the chairman of the
58	joint subcommittee and the respective Clerk. If a companion joint resolution of the other chamber is

59 agreed to, written authorization of both Clerks shall be required.

No recommendation of the joint subcommittee shall be adopted if a majority of the House members
or a majority of the Senate members appointed to the joint subcommittee (i) vote against the
recommendation and (ii) vote for the recommendation to fail notwithstanding the majority vote of the
ioint subcommittee.

The joint subcommittee shall complete its meetings by November 30, 2007, and the chairman shall submit to the Division of Legislative Automated Systems an executive summary of its findings and recommendations no later than the first day of the 2008 Regular Session of the General Assembly. The executive summary shall state whether the joint subcommittee intends to submit to the General Assembly and the Governor a report of its findings and recommendations for publication as a House or Senate document. The executive summary and the report shall be submitted as provided in the procedures of the Division of Legislative Automated Systems for the processing of legislative documents and reports and shall be posted on the General Assembly's website.

Implementation of this resolution is subject to subsequent approval and certification by the Joint
 Rules Committee. The Committee may approve or disapprove expenditures for this study, extend or
 delay the period for the conduct of the study, or authorize additional meetings during the 2007 interim.