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## SENATE JOINT RESOLUTION NO. 298

Offered January 20, 1997

*Directing the Joint Commission on Health Care, in cooperation with the Board and Department of Health, the Board and Department of Medical Assistance Services, the Commonwealth's academic health centers, and various governmental and private entities, to study the provision of health care for the indigent and uninsured.*

Patrons—Walker, Bolling, Gartlan, Lambert, Martin, Schrock and Woods; Delegates: Baker, Brickley, Connally, DeBoer, Diamonstein, Hall, Heilig, Melvin and Morgan

Referred to the Committee on Rules

WHEREAS, indigent and uninsured Virginians are among the most vulnerable populations in terms of access to affordable, quality health care services; and

WHEREAS, research has found that persons without health insurance are less likely than those with insurance to receive needed medical services such as immunizations and routine check-ups, and, as a result, are more likely to develop conditions which could have been prevented or more successfully treated with early intervention and primary care; and

WHEREAS, within the health care marketplace, the indigent and uninsured often pay higher health care costs than persons with insurance because providers have negotiated contracts with insurers to provide services to their enrollees at a discounted price; and

WHEREAS, the provision and financing of health care services for the indigent and uninsured pose important and complex policy issues for state and local governments, the Commonwealth's academic health centers, and for businesses and health care providers; and

WHEREAS, the Virginia Indigent Health Care Trust Fund was established to help offset the expenses incurred by Virginia hospitals in providing care to the Commonwealth's indigent populations; and

WHEREAS, the limited funding available through the Indigent Health Care Trust Fund does not fully reimburse Virginia's hospitals for the total amount of indigent care provided; and

WHEREAS, the Indigent Health Care Trust Fund Technical Advisory Panel has been working for some time to establish a pilot program for subsidizing private health insurance for the working poor, but has not yet been successful in implementing the program; and

WHEREAS, the Commissioner of Health has announced that the Department of Health will sponsor a primary health care summit meeting in cooperation with public and private sector organizations to highlight innovative approaches which are expanding access to primary health care and to identify gaps that still need to be addressed; and

WHEREAS, a recent survey commissioned by the Virginia Health Care Foundation found that approximately 13 percent of Virginians, or 855,500 persons, have no health insurance of any kind; and

WHEREAS, an analysis of the survey data indicates that the percentage of the uninsured who are employed full time has increased 16 percent since 1993; and

WHEREAS, one of the founding purposes of the Joint Commission on Health Care was to ensure that the greatest number of Virginians receive quality, cost-effective health care services, including the indigent and uninsured populations; and

WHEREAS, during the past several years, there has been: (i) no analysis of the underlying reasons why persons are uninsured, (ii) no evaluation of current efforts and programs to reduce the number of uninsured Virginians and to provide services to the indigent, and (iii) no comprehensive analysis of new programs or policies to reduce the number of indigent and uninsured persons; now, therefore, be it

RESOLVED by the Senate, the House of Delegates concurring, That the Joint Commission on Health Care, in cooperation with the Board of Health, the Department of Health, the Board of Medical Assistance Services, the Department of Medical Assistance Services, the Commonwealth's academic health centers, various governmental entities including, but not limited to, local governments, the Virginia Health Care Foundation, the Virginia Indigent Health Care Trust Fund Technical Advisory Panel, the Virginia Primary Care Association, and other appropriate public and private entities, be directed to study the various issues regarding the provision of health care for the indigent and uninsured.

The study shall include, but not be limited to: (i) an analysis of the recently completed survey on the insurance status of Virginians; (ii) an evaluation of the underlying reasons for persons being uninsured; (iii) an assessment of the impact that not-for-profit to for-profit hospital conversions may be having on the indigent and uninsured; (iv) an assessment of the impact that the provision of care for these populations has on individual providers and hospitals, particularly the academic health centers; (v) an

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60 assessment of the role that projects supported by the Virginia Health Care Foundation and the Virginia  
61 Indigent Health Care Trust Fund play in meeting the needs of the uninsured; (vi) an evaluation of the  
62 appropriateness of expanding Medicaid coverage to certain segments of the uninsured population; (vii)  
63 an analysis of accessibility to child health preventive services; and (viii) an analysis of whether subsidies  
64 to purchase private health insurance should be implemented. As part of the study, the Joint Commission  
65 shall develop a program to be presented to the 1998 Session of the General Assembly and, if approved  
66 by the General Assembly, implemented by April 1, 1998, which will provide basic health insurance  
67 coverage for low-income, uninsured Virginians.

68 The Joint Commission on Health Care shall submit its findings and recommendations to the  
69 Governor and the 1998 Session of the General Assembly in accordance with the procedures of the  
70 Division of Legislative Automated Systems for the processing of legislative documents.