

AMENDMENTS TO LR 22

Introduced by Health and Human Services

1 1. Strike the original provisions and insert the
2 following new provisions:

3 WHEREAS, spending on health care in the United States has
4 grown faster than the gross domestic product (GDP), the rate of
5 inflation, and the rate of population growth for most of the last
6 four decades; and

7 WHEREAS, the share of GDP devoted to health care in the
8 United States has risen from 5.2% in 1960 to 17.6% in 2009; and

9 WHEREAS, the total public and private health care
10 expenditure in Nebraska in 2009 was \$12,649,000,000; and

11 WHEREAS, since 2000 real hourly wage growth, net of
12 health benefits, has stagnated while inflation-adjusted family
13 health insurance premiums have increased 58%; and

14 WHEREAS, the average employer-based health insurance
15 annual premium cost in Nebraska in 2011 was \$13,776; and

16 WHEREAS, eleven of Nebraska's ninety-three counties have
17 no primary care physicians, and observers believe the lack of
18 primary care physicians will become more acute as more people enter
19 the health care system as a result of the federal Affordable Care
20 Act; and

21 WHEREAS, officials estimate that, under current demand,
22 Nebraska will be short approximately three hundred primary care
23 physicians by 2014. The number of physicians older than sixty-five

1 years of age has jumped by 78% in the past five years; and

2 WHEREAS, it is anticipated by the University of Nebraska
3 Medical Center that by 2014 the state will need at least 1,685
4 primary care physicians, 314 primary care nurse practitioners, and
5 350 primary care physician assistants to meet the increased demand
6 from the newly insured resulting from health care reform; and

7 WHEREAS, Nebraska's uninsured rate for persons younger
8 than sixty-five years of age is 14.9% (more than 232,000), which is
9 an increase of 67.4% since 2000; and

10 WHEREAS, Nebraska counties with uninsured rates of 21% or
11 greater exist only in rural areas; and

12 WHEREAS, Nebraska's future economic and fiscal success
13 requires a healthy population, high quality health care at lower
14 cost, and greater efficiency; and

15 WHEREAS, Nebraska's families and small businesses are
16 faced with increasing and unsustainable health care costs; and

17 WHEREAS, successful transformation of Nebraska's health
18 care system is essential to the state's economic well-being and the
19 quality of care provided to Nebraskans; and

20 WHEREAS, health care reform is not only a matter
21 of coverage or increasing access. True reform is total system
22 transformation into a patient-centric, high-value enterprise; and

23 WHEREAS, understanding the challenge of health care
24 reform and solving Nebraska's health care system crisis requires
25 a new level of cooperation between all health care partner
26 stakeholders and policymakers in Nebraska; and

27 WHEREAS, state government must provide clear leadership

1 and accountability to health care system transformation efforts and
2 must do so in a way that demands transparency, trust, and full
3 participation from all partner stakeholders.

4 NOW, THEREFORE, BE IT RESOLVED BY THE MEMBERS OF THE ONE
5 HUNDRED THIRD LEGISLATURE OF NEBRASKA, FIRST SESSION:

6 1. That the Health and Human Services Committee of
7 the Legislature, in cooperation with the Banking, Commerce and
8 Insurance Committee of the Legislature, be designated to develop
9 policy recommendations towards transformation of Nebraska's health
10 care system.

11 2. In order to develop its policy recommendations,
12 the Health and Human Services Committee of the Legislature, in
13 cooperation with the Banking, Commerce and Insurance Committee of
14 the Legislature, shall bring together through information-gathering
15 meetings and work groups partner stakeholders at all levels,
16 including state and local governments, public and private insurers,
17 health care delivery organizations, employers, specialty societies,
18 consumer groups, patients, consumers, and all other interested
19 parties, to work together with the shared objectives of controlling
20 health care costs and improving health care quality.

21 3. With input from partner stakeholders and in
22 conjunction with the Banking, Commerce and Insurance Committee of
23 the Legislature, the Health and Human Services Committee of the
24 Legislature shall:

25 a. Provide a comprehensive review of Nebraska's health
26 care delivery, cost, and coverage demands;

27 b. Engage stakeholders in dialogue, roundtable

1 discussions, and public policy discourse;

2 c. Develop a framework for health care system
3 transformation to meet public health, workforce, delivery, and
4 budgetary responsibilities; and

5 d. Develop cooperative strategies and initiatives for the
6 design, implementation, and accountability of services to improve
7 care, quality, and value while advancing the overall health of
8 Nebraskans.

9 4. The Health and Human Services Committee of the
10 Legislature may conduct public hearings and, with the Banking,
11 Commerce and Insurance Committee of the Legislature, make
12 recommendations relating to health care for Nebraskans. The Health
13 and Human Services Committee of the Legislature and the Banking,
14 Commerce and Insurance Committee of the Legislature shall hold
15 a joint hearing by November 1, 2013, to discuss the information
16 obtained pursuant to this resolution.

17 5. The Health and Human Services Committee of the
18 Legislature and the Banking, Commerce and Insurance Committee
19 of the Legislature, along with any work groups created pursuant
20 to this resolution, shall rely on information, data, and subject
21 matter expertise and consultation from a wide range of entities,
22 including the Division of Medicaid and Long-Term Care and the
23 Division of Public Health of the Department of Health and Human
24 Services, the Department of Insurance, and any other agencies the
25 committees identify, to provide collaboration with the committees
26 and any such work groups to attain the goals for health care system
27 transformation.

1 6. The funding of the activities of the Health and Human
2 Services Committee of the Legislature under this resolution will be
3 provided from existing appropriations for the committee from the
4 Nebraska Health Care Cash Fund.