

Senate Resolution 13 - Introduced

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S.R. _____ H.R. _____

1 1 SENATE RESOLUTION NO. _____
1 2 BY HATCH, HORN, BOLKCOM, RAGAN, McCOY,
1 3 APPEL, DANIELSON, QUIRMBACH, JOCHUM, OLIVE,
1 4 SCHOENJAHN, HECKROTH, BEALL, SODDERS, SCHMITZ,
1 5 DOTZLER, GRONSTAL, DVORSKY, WARNSTADT, WILHELM,
1 6 SENG, DEARDEN, BLACK, STEWART, COURTNEY, KIBBIE,
1 7 FRAISE, KREIMAN, HOGG, and DANDEKAR
1 8 A Resolution encouraging a federal state collaboration
1 9 to achieve quality, affordable health care for all.
1 10 WHEREAS, the United States is facing a worsening
1 11 health care crisis of ever-higher costs, inconsistent
1 12 quality, and lack of access to necessary coverage and
1 13 medical care for tens of millions of uninsured and
1 14 underinsured residents; and
1 15 WHEREAS, reforming the United States' health care
1 16 system to achieve a high-performing, affordable, and
1 17 quality system covering all residents is central to a
1 18 sustainable economic recovery and the health and
1 19 financial security of all residents, businesses, and
1 20 governments; and
1 21 WHEREAS, reform of the United States' health care
1 22 system is a paramount and immediate priority for
1 23 President Barack Obama, his administration, and the
1 24 111th Congress; and
1 25 WHEREAS, each state has unique economic, social,
1 26 geographic, and demographic factors that must be
1 27 accommodated to reach quality and affordable health
1 28 care for all; and
1 29 WHEREAS, states play a vital role in health care
1 30 for tens of millions of Americans by administering and
2 1 funding public programs such as Medicaid and the State
2 2 Children's Health Insurance Program (SCHIP) that
2 3 improve access to quality and affordable health care;
2 4 and
2 5 WHEREAS, states can help improve health care for
2 6 all residents of the United States by using public
2 7 programs and regulatory power to influence, guide, and
2 8 direct the broader health care system toward improved
2 9 and less costly care; and
2 10 WHEREAS, the federal government looks to states for
2 11 guidance in improving health care, and federal health
2 12 care reform is informed by state initiatives; and
2 13 WHEREAS, since the current health care system is
2 14 unsustainable and the cost of doing nothing would be
2 15 far greater than the cost of health care reform; and
2 16 WHEREAS, all states and the federal government
2 17 share a common mission to protect and provide for the
2 18 general welfare of all the people of the United
2 19 States; NOW THEREFORE,
2 20 BE IT RESOLVED BY THE SENATE, That the Iowa Senate
2 21 urges both state governments and the federal
2 22 government to collaborate with one another to reach
2 23 the goal of providing quality and affordable health
2 24 care to all Americans; and
2 25 BE IT FURTHER RESOLVED, That each state exercise
2 26 its inherent responsibility to assist in providing
2 27 access to quality health care; and
2 28 BE IT FURTHER RESOLVED, That all of the following
2 29 guiding principles be incorporated into a national
2 30 health care policy:
3 1 1. Stabilize financing through payment reform.
3 2 a. Implement a patient-centered medical home.
3 3 This practice emphasizes reimbursement of services
3 4 based on patient needs, with effective financial
3 5 incentives for coordinated care among
3 6 multispecialties.
3 7 b. Prioritize payments for primary and preventive
3 8 care. This prioritization will steer patients to
3 9 cost-effective treatments that promote wellness and
3 10 health. Equally important is to end Medicare's
3 11 regional reimbursement discrimination, whereby states
3 12 receive considerably more or less for the same

3 13 procedure based upon geographic location.
3 14 c. Support value-based purchasing efforts.
3 15 Value-based purchasing uses transparent quality and
3 16 cost data and patient incentives to steer care toward
3 17 high-quality, cost-effective providers.
3 18 d. Restructure national financing for long-term
3 19 care. As baby boomers age, long-term care needs will
3 20 skyrocket. A comprehensive financing strategy that
3 21 takes into account states' financial capabilities is
3 22 critical.

3 23 2. Improve cost containment policies.
3 24 a. Advance cost containment strategies. To ensure
3 25 a financially stable system, national standards for
3 26 cost containment should be advanced in areas such as
3 27 chronic care management and medical homes, pay for
3 28 performance, electronic health records, administrative
3 29 efficiency, public health measures, drug and medical
3 30 device negotiations, and sunshine laws to increase
4 1 transparency of financial arrangements among industry
4 2 stakeholders.

4 3 b. Establish national electronic medical record
4 4 standards. National standards should be established
4 5 for the states controlling the use and distribution of
4 6 electronic medical records.

4 7 c. Provide financial and technical assistance for
4 8 the creation and utilization of electronic medical
4 9 records. Modernizing medical records using current
4 10 technology will improve care and lower costs.

4 11 d. Facilitate the confidential sharing of patient
4 12 data within and across state borders. A national
4 13 interoperational standard will allow providers to
4 14 access patient records anywhere.

4 15 3. Increase access to affordable health insurance
4 16 coverage.

4 17 a. Expand coverage to everyone. Using private
4 18 market and publicly financed plans, affordable
4 19 coverage must be guaranteed to every resident. Total
4 20 health care costs for individuals, families, and
4 21 employers must be limited to an affordable percentage
4 22 of household income or payroll.

4 23 b. Allow for greater flexibility in state
4 24 regulation of federal Employee Retirement Income
4 25 Security Act (ERISA)-regulated insurance plans. ERISA
4 26 precludes effective state oversight of self-insured
4 27 employer-offered insurance coverage. This unintended
4 28 consequence of ERISA distorts policy and interferes
4 29 with a state's ability to provide for consistency in
4 30 coverage.

5 1 c. Eliminate preexisting conditions exemptions and
5 2 require guaranteed issue of insurance. Permitting
5 3 insurers to reject applicants based on health status
5 4 leaves those who most need coverage without any
5 5 affordable options, defeating the purpose of health
5 6 insurance.

5 7 d. Strengthen the health care safety net.
5 8 Increase the investments in public programs
5 9 administered by states and the federal government,
5 10 such as Medicaid, community health centers, and SCHIP.

5 11 e. Support state innovation by creating robust
5 12 national standards that serve to raise the floor for
5 13 state action, rather than limit state efforts to
5 14 achieve the goal of quality and affordable health care
5 15 for all.

5 16 f. Invest in increasing the number of primary care
5 17 providers, midlevel practitioners, direct care
5 18 workers, and laboratory and community health workers.

5 19 g. Carefully monitor the supply of specialists.
5 20 Certain specialists are in short supply, and
5 21 policymakers need to be attentive to these shortages.

5 22 4. Increase quality.

5 23 a. Develop evidence-based standards using robust
5 24 clinical and cost comparative-effectiveness findings.
5 25 Care options need to take into account both
5 26 effectiveness and price. Comparative-effectiveness
5 27 research that evaluates treatments in terms of
5 28 efficacy and price will allow for the greatest value
5 29 in health improvement.

5 30 b. Require the use of informed, shared decision
6 1 making between the provider and patient. Patients
6 2 need to bring their preferences and values to the
6 3 medical decision-making process, just as providers

6 4 bring their experience and knowledge of medicine.
6 5 Informed joint decision making has been shown to
6 6 improve outcomes and increase patient and family
6 7 satisfaction.
6 8 c. Eliminate disparities and inequality. Numerous
6 9 social factors lead to widespread racial and ethnic
6 10 disparities in health care. The health care system
6 11 needs to systematically address these disparities if
6 12 the promise of health care for all is to be honored.
6 13 d. Invest in proven prevention programs and health
6 14 promotion activities. Public health activities such
6 15 as promoting healthy behaviors and teaching disease
6 16 management can improve overall health and lower costs.
6 17 e. Reduce unwarranted variation in care. Wide
6 18 variations in care, not matched by improved health
6 19 outcomes, show that much superfluous care is being
6 20 provided. Rooting out unnecessary care will both
6 21 improve health and save money.
6 22 f. Demand more effective public quality reporting
6 23 by all providers. Reporting allows consumers to
6 24 choose high-quality providers and encourages providers
6 25 to improve care; and
6 26 BE IT FURTHER RESOLVED, That a copy of this
6 27 resolution be transmitted to:
6 28 President Barack Obama; Vice President Joe Biden;
6 29 Speaker of the United States House of Representatives,
6 30 Nancy Pelosi; the Secretary of Health and Human
7 1 Services; Senator Edward Kennedy, Chair, Senate
7 2 Health, Education, Labor and Pensions Committee;
7 3 Representative Henry Waxman, Chair, Oversight and
7 4 Government Reform; Senator Max Baucus, Chair, Senate
7 5 Finance Committee; Senator Harry Reid, Senate Majority
7 6 Leader; Representative Steny Hoyer, House Majority
7 7 Leader; Senator Mitch McConnell, Senate Minority
7 8 Leader; Representative John Boehner, House Minority
7 9 Leader; the members of Iowa's congressional
7 10 delegation; Iowa Governor Chet Culver; and Dr. Jeanne
7 11 Lambrew, Deputy Director, White House Task Force on
7 12 Health Care Reform.
7 13 LSB 2640SS 83
7 14 pf/rj/8.1