IAN 1 9 2007

#### A BILL FOR AN ACT

RELATING TO HEALTHCARE.

#### BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

- 1 SECTION 1. The legislature finds that it is in the best
- 2 interest of the State of Hawaii for each and every permanent
- 3 resident to have high quality and affordable healthcare
- 4 insurance coverage. Healthcare is more than just medical
- 5 insurance payouts. It includes cost-saving and early
- 6 intervention measures to prevent medical conditions from
- 7 becoming chronic, permanently disabling, or fatal.
- 8 Hawaii's current healthcare insurance complex is a
- 9 disjointed, costly, inefficient, and unnecessarily complicated
- 10 multi-payer private medical insurance model that is mostly
- 11 profit-driven, adversarial, beset with constant cost-shifting
- 12 and reluctant healthcare delivery, onerously bureaucratic, and
- 13 generally economically irrational. Additionally, healthcare
- 14 rates are skyrocketing at or near double-digit annual rates and
- 15 are creating an affordability and accessibility crisis for
- 16 Hawaii's residents.

1	The three biggest cost-drivers of healthcare in the United
2	States and Hawaii today are associated with the following:
3	(1) A profit-driven complex of payment-reluctant multi-
4	payer health insurance bureaucracies competing to
5	insure only the healthy and the wealthy, while leaving
6	those who need healthcare the most, to the taxpayers;
7	(2) The lack of a central electronic healthcare database;
8	and
9	(3) Inordinately high-cost prescription drugs.
10	For more than a quarter of a century, Hawaii was far ahead
11	of most other states and often called itself "the health state"
12	because of the 1974 Prepaid Healthcare Act. In 1994 Hawaii had
13	a low uninsured population of between two and five per cent.
14	But, the crisis in healthcare on the United States continent
15	began coming to Hawaii.
16	Today, more than one hundred thousand Hawaii residents are
17	without any healthcare insurance coverage. More than twelve
18	thousand of the uninsured are children. Many other Hawaii
19	residents are underinsured, unable to use their insurance
20	properly or even at all, because of increasingly expensive
21	deductibles and out-of-pocket co-payments for outpatient visits,
22	diagnostic tests, and prescription drugs, among other factors.

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1 The annual high increase in premium costs translates into increased employer costs. Under the Prepaid Healthcare Act, 2 3 private-sector employers are required to pay health insurance 4 premiums equal to the amount of the premium that exceeds the cap 5 on employee contributions of one and one-half per cent of a 6 full-time employee's pay. Public employers generally pay even 7 more because of their exemption from Prepaid Healthcare Act and 8 must negotiate with their employees for employer-provided family 9 healthcare insurance. 10 The Prepaid Healthcare Act does not require employers to 11 provide health insurance coverage for employees working less than twenty hours per week. Increasing health insurance costs 12 13 prompted some employers to hire individuals to work only part-14 time, or less than twenty hours per week, to avoid having to pay 15 for employee healthcare benefits under the Prepaid Healthcare 16 Act. 17 Even well-insured individuals are experiencing problems 18 with their health maintenance organizations and insurance 19 companies denying, or very reluctantly dispensing, expensive medicines and treatments. A 2005 national study by Harvard 20 21 University found that about half of all bankruptcy filings are 22 partly due medical expenses, and most people who file for

1 bankruptcy protection because of medical problems have health 2 insurance. The legislature further finds that Canada has for many 3 4 years had a tried, tested, and true universal publicly 5 administered healthcare-for-all healthcare insurance model with one payout agency for caregivers and providers. A variation of 6 7 this very successful system adapted to meet the unique 8 conditions in Hawaii would be very beneficial for the following 9 reasons: 10 (1) For union members and their employers, it means taking 11 healthcare off the negotiating table; For patients, as taxpayers and insurance premium-12 (2) 13 payers, it means significant reductions in overall 14 costs, increases in benefits, and the slowing of annual inflation cost increases. It also means a 15 16 transition from increasingly uncaring profit-driven 17 healthcare to the restoration of human-need driven 18 mutually respectful and caring patient-doctor-nurse-19 and other caregiver relationships, which in earlier 20 times were fundamental to meaningful healthcare; 21 (3) For businesses, large and small, it reduces

significant overhead expenses;

1	(4)	For the local economy, it means keeping almost all
2		healthcare dollars in the State;
3	(5)	For government, it means having one integrated
4		electronic health information database for
5		unprecedented planning and cost-containment
6		capabilities. It also means relief from the perceived
7		emerging problem of "unfunded liabilities" associated
8		with long-term funding of government retiree lifetime
9		healthcare benefits;
10	(6)	For physicians, nurses, and other caregivers, it means
11		less paperwork, much less work stress, and much more
12		time with patients;
13	(7)	For hospitals, community health clinics, home-care
14		providers, and long-term care facilities, it means
15		sufficient and dependable annual financing through
16		global budgets; and
17	(8)	For the general public, it means accessible and
18		affordable healthcare for every person, and relief
19		from the increasing stresses of constant worry over
20		the instability of healthcare coverage.

1 The legislature declares that single-payer, uniformly-2 delivered high-quality healthcare-for-all is a basic human right for Hawaii's citizens. 3 4 The purpose of this Act is to create a unified, singlepayer, universal healthcare system covering all Hawaii 5 residents, similar to that of Canada's. 6 SECTION 2. The Hawaii Revised Statutes is amended by 7 8 adding a new chapter to be appropriately designated and to read 9 as follows: 10 "CHAPTER SINGLE-PAYER UNIVERSAL HEALTHCARE SYSTEM 11 -1 Definitions. Unless otherwise clear from the 12 S 13 context, as used in this chapter: "Authority" means the authority. 14 15 "Central unified electronic health information system 16 database, " means a primary, computerized electronic health 17 information system to store and access medical records for the 18 statewide single-payer universal healthcare insurance system. "County healthcare review boards" means the county bodies 19 20 tasked with continuously monitoring healthcare conditions, to 21 assist the authority to maximize the efficiency and cost-

effectiveness of a single-payer universal healthcare system.

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"Global budget" means the annual or monthly lump sum that 1 the authority pays each hospital, community health clinic, home-2 3 care agency, and long-term care facility to cover all operating expenses. 5 "Healthcare registration cards" means a personalized medical identification card showing that a permanent resident is 6 covered by the single-payer universal healthcare system. "Medically necessary" means procedures, treatments, and 8 9 other services that are needed and performed primarily by the physicians and other qualified healthcare practitioners 10 11 according to medical best practices and which are recognized as 12 such by the authority. "Pay-as-we-go" means monthly healthcare funding and 13 14 insurance claims paid-out immediately for those needing 15 "medically necessary" healthcare. 16 "Prepaid" means Hawaii's state-funded single-payer healthcare for all insurance system providing medically-17 18 necessary healthcare services without fees, co-payments, or deductibles at the time healthcare is needed. 19 20 "State healthcare insurance planning and financing 21 authority" means the administrator of the universal single-payer

healthcare insurance system for the State of Hawaii.

- 1 "Single-payer universal healthcare insurance system" means
- 2 covering all permanent residents of the State of Hawaii.
- 3 "Universal" means healthcare for all of Hawaii's permanent
- 4 residents.
- 5 "Universal healthcare provision fund" means the fund used
- 6 by the authority to collect funds and pay out claims, and to
- 7 administer an emergencies and demographic changes contingencies
- 8 reserve fund; and a retraining fund for health field employees
- 9 affected by the transition to the single-payer universal
- 10 healthcare insurance system.
- 11 § -2 Single-payer universal healthcare insurance system;
- 12 established. There is established the single-payer universal
- 13 healthcare insurance system to provide the same uniformly high-
- 14 quality level of "medically necessary" healthcare to all
- 15 Hawaii's permanent residents. Private healthcare insurers are
- 16 prohibited from duplicating the coverages provided by the
- 17 single-payer universal healthcare insurance system.
- 18 § -3 Twenty functional concepts; established. Hawaii
- 19 state-funded single-payer universal healthcare insurance system
- 20 is based upon twenty functional concepts as follows:
- 21 (1) "Universal" the State of Hawaii single-payer universal
- 22 healthcare insurance system finances "healthcare-for-



all" which means quality healthcare is "universally 1 2 available" on a "prepaid" basis to permanent 3 residents: 4 "Prepaid" - Hawaii's state-funded single-payer (2) 5 healthcare-for-all insurance system that provides 6 medically-necessary healthcare services without fees, co-payments, or deductibles at the time of healthcare 7 8 The system operates on a "pay-as-we-go" basis. need. 9 Income and other taxes are collected by the system on 10 an ongoing basis through payroll deduction and/or at 11 retail checkout counters, or through other appropriate revenue raising methods, including existing funding 12 13 from federal and State; including but not limited to 14 medicare/medicaid, and prepaid health care act funds, 15 and employee union trust fund funds, until full 16 transition is completed, as the funds for pre-paying 17 for healthcare services when they are needed. Persons 18 with healthcare needs may present their healthcare 19 registration cards to receive medically necessary 20 healthcare services without ever seeing a bill for 21 This represents great savings over previous them. 22 billing processes;

1	(3)	"Comprehensive" - The State of Hawaii single-payer
2		universal healthcare insurance system is
3		"comprehensive" in that it covers all medically
4		necessary hospital, physician, dentist, home-care, and
5		long-term care services for every Hawaii permanent
6		resident;
7	(4)	"Medically necessary" - Medically necessary
8		procedures, treatments, and other services that are
9		primarily the responsibility of physicians and other
10		qualified healthcare practitioners according to well-
11		established best practices which are recognized by the
12		authority. In addition, the county healthcare review
13		boards shall assess which prescription drugs,
14		appliances, services, and delivery modes are:
15		(A) Medically necessary; or
16		(B) Effective; or
17		(C) Both,
18		and accordingly make their recommendations to the
19		authority;
20	(5)	"Accessible" - There is accessibility to one high-
21		quality level of healthcare-for-all without income or
22		other barriers;

1	(6)	"High-quality" - Uniformly high quality of system-wide
2		healthcare provision is the standard of the single-
3		payer universal healthcare system;
4	(7)	"Choice" - Patients have their choice of physician,
5		dentist, and other single-payer universal healthcare
6		system caregivers;
7	(8)	"Portable" - single-payer universal healthcare system
8		coverage is portable for permanent residents within
9		and outside the State of Hawaii.
10		Portability applies primarily between islands and
11		counties. Also, portability within the State means
12		that when employees change employers there is no
13		problem with having to change healthcare plans. This
14		Act also entitles Hawaii permanent residents to
15		"receive medically necessary services in relation to
16		an emergency when absence from the State is temporary,
17		such as on business or vacation";
18	(9)	"Publicly administered" - The State of Hawaii single-
19		payer universal healthcare insurance system shall be
20		maintained and administered by an elected authority.
21	(10)	"Publicly funded" - Healthcare insurance premiums are

directly and indirectly collected through:

1		(A) Taxes; or
2		(B) Other authority revenue-raising measures; or
3		(C) Both; and
4		deposited immediately into the State's universal
5		healthcare provision fund. It is used by the
6		authority to collect and pay out healthcare insurance
7		claims and global budget funds to institutional
8		providers on a pay-as-we-go basis or allocated as
9		needed into the universal healthcare provision fund
10		healthcare pay-outs reserve or both. There shall be a
11		fiscal firewall between the universal healthcare
12		provision fund and the state budget;
13	(11)	"Single-payer" - Financing of Hawaii's healthcare-for-
14		all system shall be publicly funded and healthcare
15		insurance claims shall be paid out to doctors,
16		dentists, hospitals, and other eligible caregivers and
17		providers by the single pay-out government agency, or
18		the authority, on a "pay-as-we-go" basis;
19	(12)	"Pay-as-we-go" - Healthcare funding is raised each
20		ongoing month and insurance claims are paid-out as
21		soon as practicable, for those needing medically
22		necessary healthcare;

1	(13)	"Universal healthcare provision fund" - The universal
2		healthcare provision fund is fundamental to the
3		single-payer universal healthcare system and is used
4		by the authority to collect and pay out healthcare
5		insurance claims and global budget funds to
6		institutional providers on a pay-as-we-go basis or to
7		be allocated as needed into the universal healthcare
8		provision fund healthcare pay-outs reserve. Part of
9		the purpose of the reserve fund is to provide
10		retraining grants. The other part is for healthcare
11		related contingencies to build capital improvement
12		support funding;
13	(14)	"Fiscal firewall" - Medically necessary is the
14		operative term throughout Hawaii's single-payer
15		universal healthcare system; but, nowhere more so than
16		in regard to the funding of the system. The
17		autonomous authority oversees and maintains the
18		universal healthcare provision fund, which is
19		completely independent of the state budget;
20	(15)	"Central unified electronic health information system
21		database" - The State of Hawaii single-payer universal
22		healthcare insurance system collects and maintains in

1		real-time an up-to-the-minute single central database
2		for comprehensive, complete, and accurate electronic
3		nealthcare information. This is a very significant
4		major source of savings and cost-containment which
5		makes the low-cost financing of comprehensive single-
6		payer universal healthcare possible. This unified
7		nigh-tech health information system, for instance,
8		enables:
9		(A) Accurate future projections;
10		(B) Unprecedented planning and cost-containment
11		capabilities;
12		(C) Early detection of medical mistakes, malpractice
13		and fraud; and
14		(D) Early system-wide sharing of emerging "best
15		practices";
16	(16)	'County healthcare review boards" - County healthcare
17		review boards are elected, independent bodies
18		established by each county government — along the
19		lines of Oahu's elected neighborhood board system — to
20		continuously monitor healthcare conditions in their
21		respective counties to assist the authority in making
22		the State of Hawaii's single-payer universal

1		healthcare insurance system fit the specific
2		healthcare needs of each island;
3	(17)	"Retraining fund" - A retraining fund is collected as
4		part of the universal healthcare provision fund. The
5		purpose is to provide cost-effective funding for
6		health field workers displaced by the transition to
7		the single-payer universal healthcare system;
8	(18)	"Global budgets" - the authority pays each hospital,
9		community health clinic, home-care agency, and long-
10		term care facility an annual or monthly global lump
11		sum to cover all operating expenses - that is, a
12		global budget. Hospitals, long-term care facilities,
13		and home-care agencies, and the authority negotiate
14		the amount of these payments annually, based on past
15		expenditures, previous financial and clinical
16		performance, projected changes in levels of services,
17		wages and input costs, and proposed new and innovative
18		programs. Hospitals, long-term care facilities, and
19		home-care agencies may not bill for non-operating
20		expenses. Hospitals, long-term care facilities, and
21		home-care agencies may not use any of their operating
22		budget for expansion, profit, excessive executives'

1		incomes, marketing, or major capital purchases or
2		leases. Major capital expenditures come from the
3		universal healthcare provision fund, but will be
4		appropriated separately based upon community needs.
5		Investor-owned hospitals will be converted to not-for-
6		profit status, and their owners compensated for past
7		investment. Global budgets for institutional
8		providers eliminate billing, while providing a
9		predictable and stable financial support;
10	(19)	"Lifetime individual identification number" - the
11		authority systematically registers each and every
12		Hawaii permanent resident with an assigned lifetime
. 13		identification number so that they are covered by the
14		system and issues to them a single-payer universal
15		healthcare system healthcare user card. Also, this is
16		the first step in bringing all of Hawaii's healthcare
17		information into one secure, constantly updated,
18		central unified electronic, computerized health
19		information system database; and
20	(20)	"Healthcare registration cards" - Eligible healthcare
21		users of the State of Hawaii single-payer universal
22		healthcare insurance system shall register with the

1	system and be issued a lifetime individual
2	identification number and a healthcare registration
3	card to be able to access system healthcare. Newborn
4	citizens will be registered at birth, in most cases by
5	the facility where the birth occurs.
6	§ -4 State healthcare insurance planning and financing
7	authority. (a) There is established within the department of
8	taxation, for administrative support purposes, the elected
9	autonomous authority, to determine the costs of the system, and
10	to gather the needed financing methods and transition
11	mechanisms, including the retraining of affected personnel.
12	(b) The State of Hawaii office of elections shall prepare
13	and execute all the necessary procedures for the election of a
14	authority members in the 2006 elections in accordance with this
15	Act.
16	(c) Trustee-members of the authority shall be chosen
17	through statewide election. The authority shall be composed of
18	seven voting trustee-members, and meet the same age and state
19	residency requirements as candidates for the state senate.
20	There shall be one trustee-chairperson member elected with no
21	county residency requirement. All trustee-members shall be
22	elected by voters statewide for terms of six years each; except
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- 1 that the terms of the six non-chairperson trustee members in the
- 2 first election shall be:
- 3 (1) Two each for two, four, and six years, respectively,
- 4 with each seat's initial term of two, four, or six
- 5 years being determined by lottery conducted by the
- 7 (2) Three of the non-chairperson trustees shall be
- 8 residents of the city and county of Honolulu; and
- 9 (3) Three, one each, shall be a permanent resident of
- 10 Hawaii county, Kauai county and Maui county,
- 11 respectively.
- 12 (d) Effective Wednesday, November 8, 2007, the authority,
- 13 as soon as possible upon taking office shall move to organize
- 14 according to this Act and in that process to assume the
- 15 functions of the state health planning and development agency,
- 16 which are transferred to the authority, as well as the
- 17 responsibilities associated with being the new State of Hawaii
- 18 liaison with the centers for medicare and medicaid services and
- 19 other federal healthcare agencies, and to assume prepaid health
- 20 care act functions and the Hawaii employer union health benefits
- 21 trust fund. The latter two functions shall be maintained intact

1	and stabl	e until the full integration of each into the system
2	can be co	mpleted by the authority.
3	(e)	The authority in the spirit of and within the
4	parameter	s of the twenty functional-concepts listed herein for
5	Hawaii's	single-payer universal healthcare system, shall:
6	(1)	Start-up and maintain a trust fund comprised of a pay-
7		as-we-go transfer payments system and contingencies
8		and restraining reserve fund;
9	(2)	Negotiate and receive all federal, state, and other
10		appropriate healthcare revenue;
11	(3)	Assess temporary progressive income and general excise
12		surtaxes for start-up and on-going maintenance of the
13		system, based on the medically necessary requirements
14		of healthcare for all Hawaii residents; and for
15		emergency costs as necessary, for instance, during
16		epidemic or other medical catastrophe;
17	(4)	Be the single-payer of universal healthcare financing
18		(the one payout agency) for Hawaii;
19	(5)	Hire a chief executive officer who will be accountable
20		to the authority trustees for the development and
21		success of the single-payer universal healthcare
22		system; and

1	(6) Conduct a continuous and ongoing program of
2	enrollment.
3	(f) The concurrence of a majority of all members shall be
4	necessary to make any action of the authority valid.
5	(g) The salary of the executive director shall be
6	\$ a year and the salaries of the authority chairperson
7	shall be \$ a year, and the other member-directors
8	shall be \$ a year."
9	SECTION 3. This Act shall take effect upon its approval.
10	Au Alum So By Request

#### Report Title:

Healthcare; Universal

#### Description:

Establishes agency to operate a single-payer universal healthcare insurance system.