

2010 -- H 7747

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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2010

JOINT RESOLUTION

CREATING A SPECIAL LEGISLATIVE COMMISSION TO STUDY COST
CONTAINMENT, TRANSPARENCY, AND EFFICIENCY IN THE DELIVERY OF
QUALITY HEALTH CARE

Introduced By: Representative Michael J. Marcello

Date Introduced: February 25, 2010

Referred To: House Health, Education & Welfare

1 RESOLVED, That a special legislative commission be and the same is hereby created
2 consisting of ten (10) members: one of whom shall be the Rhode Island Health Insurance
3 Commissioner, or designee, who shall serve as chair of the commission; one of whom shall be the
4 Director of the Rhode Island Department of Health, or designee; one of whom shall be the
5 Director of the Rhode Island Department of Human Services, or designee; one of whom shall be a
6 representative of the Rhode Island Department of Administration who is involved with the
7 procurement of health care coverage for state employees and retirees, to be appointed by the
8 Director of the Department of Administration; one of whom shall be a member of the general
9 public, to be appointed by the Speaker of the House; one of whom shall be a member of the
10 general public, to be appointed by the President of the Senate; one of whom shall be a
11 representative from the Rhode Island Medical Society, to be appointed jointly by the Speaker of
12 the House and President of the Senate; one of whom shall be a representative from the Hospital
13 Association of Rhode Island, to be appointed jointly by the Speaker of the House and President of
14 the Senate; and two (2) of whom shall be representatives from the health insurance industry, to be
15 appointed jointly by the Speaker of the House and President of the Senate.

16 The purpose of said commission shall be to:

17 (1) Examine payment methodologies and purchasing strategies, including, but not
18 limited to, alternatives to fee-for-services models such as blended capitation rates, episodes-of-
19 care payments, medical home models, and global budgets; pay-for performance programs and

1 performance-based contracting; risk- and gain-sharing payment models; tiering of providers; and
2 evidence-based purchasing strategies;

3 (2) Recommend payment methodologies that promote coordination of care and chronic
4 disease management; reward primary care physicians for improving health and cost outcomes;
5 reduce waste and duplication in clinical care; decrease unnecessary hospitalizations and use of
6 ancillary services; and provide appropriate reimbursement for investment in health information
7 technology that reduces medical errors and enables coordination of care; and

8 (3) Recommend a plan for the implementation of payment methodologies across all
9 public and private payers in the state, including a plan under which the state shall seek a waiver
10 from federal Medicare rules to facilitate the implementation of the revised payment system.

11 In making its investigation, the commission shall consult with the Office of the Health
12 Insurance Commissioner, the Rhode Island Department of Health, the Rhode Island Department
13 of Human Services, health care economists, and other individuals or organizations with expertise
14 in state and federal health care payment methodologies and reforms. The commission shall use
15 data and recommendations gathered in the course of these consultations as a basis for its findings
16 and recommendations.

17 Before a final vote on any recommendations, the commission shall consult with a
18 reasonable variety of parties likely to be affected by its recommendations, including, but not
19 limited to, the Office of Medicaid, the Office of the Health Insurance Commissioner, the Rhode
20 Island Health Care Association, the Quality Partners of Rhode Island, the Rhode Island Health
21 Center Association, one or more Taft-Hartley Plans, one or more self-insured plans with
22 membership of more than 500, one or more academic medical centers, one or more hospitals with
23 a high proportion of public payors, and organizations representing health care consumers.

24 Forthwith upon passage of this resolution, the members of the commission shall meet at
25 the call of the Speaker of the House and President of the Senate and organize. The first meeting
26 of the commission shall be held no later than September 15th of 2010.

27 Vacancies in said commission shall be filled in like manner as the original appointment.

28 The membership of said commission shall receive no compensation for their services.

29 All departments and agencies of the state shall furnish such advice and information,
30 documentary and otherwise, to said commission and its agents as is deemed necessary or
31 desirable by the commission to facilitate the purposes of this resolution, including full subpoena
32 power, which may only be exercised with the prior approval of the Speaker of the House and the
33 President of the Senate.

34 The Joint Committee on Legislative Services is hereby authorized and directed to

1 provide suitable quarters for said commission; and be it further

2 RESOLVED, That the commission shall report its findings and recommendations to the
3 clerk of the House of Representatives and the clerk of the Senate no later than March 31, 2011,
4 and said commission shall expire on December 31, 2011.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
JOINT RESOLUTION
CREATING A SPECIAL LEGISLATIVE COMMISSION TO STUDY COST
CONTAINMENT, TRANSPARENCY, AND EFFICIENCY IN THE DELIVERY OF
QUALITY HEALTH CARE

- 1 This resolution would create a ten (10) member special legislative commission whose
2 purpose it would be to make a comprehensive study of cost containment, transparency, and
3 efficiency in the delivery of quality health care, and who would report back to the General
4 Assembly no later than March 31, 2011, and whose life would expire on December 31, 2011.

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