AN ACT establishing a commission to assess the benefits and costs of a "health care for all" program for New Hampshire.


COMMITTEE: Commerce and Consumer Affairs

ANALYSIS

This bill establishes a commission to study the benefits and costs of a "health care for all" program for New Hampshire.

STATE OF NEW HAMPSHIRE

In the Year of Our Lord Two Thousand Seventeen

AN ACT establishing a commission to assess the benefits and costs of a "health care for all" program for New Hampshire.

Be it Enacted by the Senate and House of Representatives in General Court convened:

1 Statement of Intent. The general court recognizes that despite dramatic changes in the federal health insurance programs, many residents of New Hampshire remain uninsured or underinsured, and costs continue to soar. The general court further recognizes that the state has an interest in containing the costs of delivering care within the financial means of the stakeholders in our state. Because of the unique demographic, political, and fiscal characteristics of New Hampshire, a program that assures universal access to health care for all individuals residing within New Hampshire by combining all funds should be carefully evaluated and considered. Therefore, the general court hereby establishes a commission to assess the benefits and cost of a "health care for all" program in New Hampshire.

2 New Subdivision; Commission to Study Developing a "Health Care for All" Program for all Residents of New Hampshire. Amend RSA 126-A by inserting after section 72 the following new subdivision:

Commission to Study Developing a "Health Care for All" Program for all Residents of New Hampshire

126-A:73 Commission to Study Developing a "Health Care for All" Program for all Residents of New Hampshire.

1. There is established a commission to study developing a "health care for all" program for all residents of New Hampshire.
(a) The members of the commission shall be as follows:

(1) Three members of the house of representatives, appointed by the speaker of the house of representatives.

(2) One member of the senate, appointed by the president of the senate.

(3) The insurance commissioner, or designee.

(4) The commissioner of the department of health and human services, or designee.

(5) Two public members who shall represent New Hampshire patients, appointed by the governor.

(6) A representative of the New Hampshire Hospital Association, appointed by the association.

(7) A representative of the New Hampshire Medical Society, appointed by the society.

(8) One member representing the private health insurance industry in New Hampshire, appointed by the speaker of the house of representatives.

(9) A representative of the University of New Hampshire Institute for Health Policy and Practice, appointed by the institute.

(10) A representative of the Business and Industry Association of New Hampshire, appointed by the association.

(11) A representative of organized labor, appointed by the speaker of the house of representatives.

(12) A representative of the New Hampshire chapter of the Physicians for a National Health Program, appointed by the organization.

(13) A representative of the New Hampshire Council of Churches, appointed by the council.

(b) Legislative members of the commission shall receive mileage at the legislative rate when attending to the duties of the commission.

II. (a) The commission shall review the costs and benefits of establishing a comprehensive publically-funded program of health insurance to cover all residents of New Hampshire. The commission's study shall include, but not be limited to:

(1) How such a system would affect the number of citizens who are protected with insurance.

(2) The impact on the state budget of a system that funnels all health care money through a single pipeline.

(3) The amount of money which would be saved for employers and state residents by such a publically-funded system.

(4) How a publically-funded system would improve targeted health indicators for New Hampshire such as cancer deaths and drug-related deaths.

(5) Other issues that would be related to a single pipeline system.
(b) The commission may solicit input from any person or entity the commission deems relevant to its study.

III. The members of the commission shall elect a chairperson from among the members. The first meeting of the commission shall be called by the first-named house member. The first meeting of the commission shall be held within 45 days of the effective date of this section. Nine members of the commission shall constitute a quorum.

IV. The commission shall make an interim report with its findings and any recommendations for proposed legislation on or before November 1, 2017 and a final report on November 1, 2018 to the speaker of the house of representatives, the president of the senate, the house clerk, the senate clerk, the governor, and the state library.

3 Repeal. RSA 126-A:73, relative to a commission to study developing a "health care for all" program for all residents of New Hampshire, is repealed.

4 Effective Date.

I. Section 3 of this act shall take effect November 1, 2018.

II. The remainder of this act shall take effect upon its passage.