CHAPTER 296 FORMERLY HOUSE BILL NO. 328

AN ACT TO AMEND TITLE 16 OF THE DELAWARE CODE RELATING TO DELAWARE HEALTH CARE COMMISSION.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF DELAWARE:

Section 1. Amend § 9901, Title 16 of the Delaware Code by making insertions as shown by underlining and deletions as shown by strike through as follows:

§ 9901. Findings. [Reserved]

(a) The General Assembly finds and declares that substantial numbers of Delawareans have no health care coverage and that most of these residents are wage earners and their dependents. One third of these individuals are children.

(b) The General Assembly further finds and declares that when these individuals enter the health care system they have often foregone preventative care and are in need of more expensive treatment that often exceeds their financial resources. Much of the cost for these uncompensated services to the uninsured are already included in health care systems costs in the form of increased insurance and provider rates.

(c) The General Assembly further finds and declares that spreading these costs among the already insured represents an extremely inefficient method for providing basic preventive and acute care for the uninsured and represents an added cost to employers now providing health insurance to their employees.

(d) The General Assembly further finds and declares that it is necessary to ensure basic and affordable health care to all Delawareans while addressing the economic pressures on the health care system as a whole in Delaware.

(e) The General Assembly further finds and declares that rational cost containment of health care costs is in the interests of all Delaware citizens.

(f) The General Assembly further finds and declares that since Delaware hospitals provide care to all citizens, regardless of their ability to pay, the costs of providing care to the uninsured and indigent are shifted to those who do pay.

(g) The General Assembly further finds and declares that the majority of Delawareans pay for these shifted costs, primarily through inflated insurance premiums.

(h) The General Assembly further finds and declares that in order for the Delaware Health Care Commission to carry out its duties in compliance with these findings, a means of containing health care costs must be developed and implemented.

Section 2. Amend § 9902, Title 16 of the Delaware Code by making insertions as shown by underlining and deletions as shown by strike through as follows:

§ 9902. Delaware Health Care Commission.

(a) (1) There is hereby established the Delaware Health Care Commission, hereinafter in this chapter referred to as the Commission. Said Commission shall consist of 11 members, 5 of whom shall be appointed by the Governor, 1 of whom shall be appointed by the President Pro Tempore of the State Senate and 1 of whom shall be appointed by the Speaker of the House of Representatives. Of the 7 5 appointed members, appointed by the <u>Governor</u>, at least 1 member shall be a resident of each county. The Insurance Commissioner, the Secretary of Finance, the Secretary of Health and Social Services, and the Secretary of Services for Children, Youth and Their Families or their designees shall serve as ex officio members of the Commission.

(2) The Governor shall designate 1 member of the Commission to be chairperson who shall serve at the pleasure of the Governor. The terms of the remaining 6 appointed members shall be for 4 years except that the initial term of each may be for a lesser period. Any vacancy shall be filled by the Governor for the balance of the unexpired term. A member of the Commission shall be eligible for reappointment. No more than -4-3 of the Commission members appointed by the Governor shall be of the same political party.

(b) The Commission is constituted an independent public instrumentality and may call upon the Department of Health and Social Services, the Department of Services for Children, Youth and Their Families, the Insurance Department Delaware Health Information Network and/or the Department of Finance any State Agency for any assistance, information or data that may be necessary to carry out the purposes for which it had been established. For administrative and budgetary purposes only, the Commission shall be placed within the Department of Health and Social Services, Office of the Secretary.

(c) The Commission is authorized to reimburse Commission members for mileage associated with Commission responsibilities.

Section 3. Amend § 9903, Title 16 of the Delaware Code by making insertions as shown by underlining and deletions as shown by strike through as follows:

§ 9903. Duties and authority of the Commission.

(a) The Commission shall have the authority to hire staff, contract for consulting services, conduct any technical and/or actuarial studies which it deems to be necessary to support its work, and to publish reports as required in order to accomplish its purposes in accordance with the provisions of this chapter.

(b) The Commission shall be responsible for overseeing the implementation of the Governor's Indigent Health Care Task Force Report issued May 31, 1990. The Task Force Report specifically identifies programs and initiatives which address the access and affordability problems recognized as the primary barriers to provision of appropriate health care to the uninsured. The Task Force further recognized that the initial report would address only a portion of the problems of indigent/uncompensated health care.

(c) (b) As relates to the pilot health access projects, the Commission is expressly authorized to develop such programs in consultation with the appropriate public and private entities; to assign implementation to the appropriate state agency; to monitor and oversee program progress and to ensure that each pilot program is evaluated by an outside, independent evaluator after no more than 2 years of operations.

(d) (c) The Commission shall be responsible for the administration of the Delaware Institute of Medical Education and Research (DIMER), which shall serve as an advisory board to the Commission, and the Chair of the Health Care Commission shall appoint the Chair of DIMER. The Commission shall have such other duties and authorities with respect to DIMER which are necessary to carry out the intent of the General Assembly as expressed in this chapter.

(e) (d) The Commission shall be responsible for the administration of the Delaware Institute for Dental Education and Research (DIDER), which shall serve as an advisory board to the Commission. The Commission shall have such other duties and authorities with respect to DIDER which are necessary to carry out the intent of the General Assembly as expressed in this chapter.

(f) (e) Other functions which the Commission should may undertake include:

(1) Determining, in conjunction with the State's Health Statistics Center, the additional data needed to carry out its mission and evaluating the effectiveness of pilot programs, preparing appropriate legislation to obtain such data and ensuring that data to support the goals of health access is available and accessible; Serve as the policy body to advise the Governor and General Assembly on strategies to promoting affordable quality health care to all Delawareans and assuring policies are in place to maintain an optimal health care environment. Analyze all aspects of the health care landscape, including, but not limited to, population and health outcomes, service delivery infrastructure, quality, costs, accessibility, utilization, insurance coverage and financing;

(2) Recommending methods to reduce and control health care costs in conjunction with the private sector; Convene, as necessary, public and private stakeholders to identify, analyze and address health policy issues and build consensus around workable solutions. Serve as the coordinating entity between the public and private sectors to implement emerging health initiatives at the federal, state and local levels;

(3) Coordinating efforts with the Health Resources Management Council, which is responsible for overall health planning and the State's Certificate of Need Program, to ensure that Delaware has a balanced approach to access, quality and costs of health care; Function in such a way that fosters creative thinking and problem solving across state agency lines and across the public and private sectors;

(4) Reviewing and recommending changes to state medical insurance regulations (in conjunction with the Insurance Commissioner) to promote efficiency, equity and affordability in health care insurance premiums; Ensure that data to support the activities of the Commission are available and accessible;

(5) Exploring all potential insurance options including size and makeup of risk groups;

Monitor cost trends in order to recommend methods to reduce and control health care costs for public programs and in conjunction with the private sector;

(6) Studying and making recommendations as to incentives to ensure that employers continue to provide health insurance coverage; Coordinate efforts with the Health Resources Board and any other entities the Commission identifies as essential to carry out its mission;

(7) Studying and making recommendations regarding benefits to be covered by health plans that would be available through the health care access programs, including prevention, well child care and prenatal care; Review and recommend changes to state health insurance laws and regulations (in conjunction with the Insurance Commissioner) to promote efficiency, equity and affordability in health insurance premiums;

(8) Identifying cost savings to public programs that would result from implementation of health care access programs; Coordinate and collaborate with the Delaware Health Information Network to assure that the use of health information technology and health information exchange results in cost effective, quality health care for all Delawareans. Consult with DHIN Board of Directors and staff on implementation of health information technology in Delaware and call upon the DHIN to assist in conducting pilot programs, providing technical support, capabilities and expertise, and/or conducting research necessary to achieve the Commission's mission;

(9) Studying alternative financing plans for the state share of premium costs for those who cannot afford health insurance or who are unemployed; Oversee efforts to assure that Delaware has an adequate supply and distribution of health care professionals to provide quality care to all Delawareans in consultation with DIMER, DIDER and other institutions, bodies or agencies as necessary;

(10) Examining and making recommendations as to gatekeeping mechanisms for access to health care services and various benefit and service packages for a minimum care coverage plan; Monitor access to health care programs and make recommendations for changes where necessary; and

(11) Examining and studying actuarial analyses, sliding fee scale analyses, copayment levels and limits on provider reimbursements and covered services in developing proposals for core benefit packages; Conduct other activities it considers necessary to carry out the intent of the General Assembly as expressed in this chapter.

(12) Developing a methodology to coordinate the health care access program with other government subsidized programs; and

(13) Conducting other activities it considers necessary to carry out the intent of the General Assembly as expressed in this chapter.

Approved July 05, 2012