JAN 28 2011

## SENATE CONCURRENT RESOLUTION

REQUESTING THE AUDITOR TO CONDUCT AN IMPACT ASSESSMENT REPORT ON LEGISLATION MANDATING COVERAGE OF PALLIATIVE CARE.

WHEREAS, palliative care is the medical specialty focused on the relief or management of pain, stress, and other debilitating symptoms of serious or chronic disease; and

WHEREAS, palliative care is a patient-centered discipline that seeks to address physical, mental, emotional, and spiritual issues facing a person affected by chronic or serious disease through holistic treatment modalities; and

WHEREAS, palliative care may be provided at any stage of a disease and in conjunction with other treatments, including curative treatment; and

WHEREAS, palliative care is an important component of treatment for chronic or serious illness or disorders that manifest complex and interconnected physical, mental, and emotional symptoms; and

WHEREAS, palliative care can reduce the cost of treating chronic or serious disease by reducing the need for medical or pharmaceutical intervention to treat symptoms such as emotional distress or pain; and

WHEREAS, palliative care may incorporate services provided to the affected individual as well as to family or caregivers; and

WHEREAS, palliative care is often provided by a team of providers that includes both traditional medical practitioners such as doctors, nurses, physical therapists, and psychologists and by a variety of other licensed practitioners such as naturopathic physicians, massage therapists, nutritionists, counselors, and social workers; and

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WHEREAS, the Robert Wood Johnson Foundation identified several barriers to accessing palliative care including a financial structure that prioritizes curative care and disincentivizes palliative care; and

WHEREAS, mandatory insurance coverage of palliative care would accomplish the twin goals of eliminating financial barriers to access for individuals and incentivizing the inclusion of palliative care in mainstream health care, therefore eliminating structural barriers to its provision; and

 WHEREAS, section 23-51, Hawaii Revised Statutes, requires that "[b]efore any legislative measure that mandates health insurance coverage for specific health services, specific diseases, or certain providers of health care services as part of individual or group health insurance policies, can be considered, there shall be concurrent resolutions passed requesting the auditor to prepare and submit to the legislature a report that assesses both the social and financial effects of the proposed mandated coverage"; and

WHEREAS, section 23-51, Hawaii Revised Statutes, further provides that "[t]he concurrent resolutions shall designate a specific legislative bill that:

(1) Has been introduced in the legislature; and

(2) Includes, at minimum, information identifying the:

(A) Specific health service, disease, or provider that would be covered;

(B) Extent of the coverage;

(C) Target groups that would be covered;

(D) Limits on utilization, if any; and

(E) Standards of care.

For purposes of this part, mandated health insurance coverage shall not include mandated optionals"; and

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WHEREAS, section 23-52, Hawaii Revised Statutes, further specifies the minimum information required for assessing the social and financial impact of the proposed health coverage mandate in the Auditor's report; and

WHEREAS, S.B. No. (2011) mandates that health insurers provide coverage for palliative care, effective July 1, 2011; now, therefore,

BE IT RESOLVED by the Senate of the Twenty-sixth Legislature of the State of Hawaii, Regular Session of 2011, the House of Representatives concurring, that the Auditor is requested to conduct an impact assessment report, pursuant to sections 23-51 and 23-52, Hawaii Revised Statutes, of the social and financial impacts of mandating health insurance coverage for palliative care, effective as of July 1, 2011 as provided in S.B. No. (2011); and

BE IT FURTHER RESOLVED that the Auditor is requested to submit its findings and recommendations to the Legislature, including any necessary implementing legislation, not later than twenty days prior to the convening of the Regular Session of 2012; and

 BE IT FURTHER RESOLVED that certified copies of this Concurrent Resolution be transmitted to the Auditor and to the Insurance Commissioner, who, in turn, is requested to transmit copies to each insurer in the State that issues health insurance policies.

OFFERED BY:

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