

HOUSE RESOLUTION

REQUESTING THE LEGISLATIVE REFERENCE BUREAU TO CONDUCT A FINANCIAL ANALYSIS OF THE MANAGED CARE ORGANIZATIONS THAT ADMINISTER THE EMPLOYER-UNION HEALTH BENEFITS TRUST FUND BY AUDITING THE AMOUNTS PAID FOR HEALTH CARE AND AMOUNTS PAID FOR ADMINISTRATIVE SERVICES.

WHEREAS, Hawaii has long been a leader in advancing medical services and health care, advocating the importance of access to health care without discrimination, and implementing forward-thinking health care policies, such as the Prepaid Health Care Act of 1974; and

WHEREAS, it is in the best interest of the State for every Employer-Union Health Benefits Trust Fund beneficiary to have publicly provided, high-quality, and affordable health care; and

WHEREAS, health care involves more than just medical insurance payouts and also includes cost-saving preventive and early intervention measures, dental coverage, and mental illness treatment to prevent medical health conditions from becoming chronic, permanently disabling, or fatal; and

WHEREAS, under Hawaii's existing health care insurance system, health insurance companies have used their unilateral control over how health care is organized and paid for to erect obstacles to care for patients through excessive prior authorizations, formulary restrictions, and networks with limited physician participation; and

WHEREAS, this system also burdens physicians and hospitals with administrative demands, such as pay for performance, pay for documentation, and capitation, all of which require much more detailed documentation and data reporting while controlling and restricting payment for primary care in particular, which results in physicians being driven out of practice or leaving the State; and

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WHEREAS, health care rates are skyrocketing, creating an affordability and accessibility crisis for Hawaii's residents; and

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WHEREAS, the two largest cost drivers of health care in the United States and Hawaii are:

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High administrative costs due to reliance on a (1)competitive insurance business model that incentivizes denial and obstruction of care, micromanagement of doctors and hospitals, and attempts to avoid covering or paying for sicker and socially disadvantaged patients and populations, resulting in disparities in access to care; and

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(2) The high cost of prescription drugs; and

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WHEREAS, for more than a quarter of a century, Hawaii was far ahead of most other states, often calling itself the "Health State" because of the Hawaii Prepaid Health Care Act of 1974, and was once known for having a low percentage of residents without health insurance, which was between two and five percent in 1994; and

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WHEREAS, as a result of the coronavirus disease 2019 pandemic, thousands of Hawaii residents have lost their jobs and health insurance, making it critical for the State to support struggling families by ensuring preventive care and limiting out-of-pocket costs; and

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WHEREAS, the safeguarding of access to health care, solidification of the essential health benefits that have changed thousands of lives, and improvement of overall access to care requires the preservation of certain important aspects of the federal Patient Protection and Affordable Care Act and the expansion of access to care for residents of Hawaii; and

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WHEREAS, negotiations between the health insurance industry and the Obama Administration in 2011 allowed health insurance plans to reclassify "medical management" costs as health care instead of administrative costs for the purposes of reporting

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medical loss ratios, enabling large administrative costs to be hidden; now, therefore,

 BE IT RESOLVED by the House of Representatives of the Thirty-first Legislature of the State of Hawaii, Regular Session of 2022, that the Legislative Reference Bureau is requested to conduct a financial analysis of the managed care organizations that administer the Employer-Union Health Benefits Trust Fund by auditing the amounts paid for health care and amounts paid for administrative services; and

BE IT FURTHER RESOLVED that in its financial analysis, the Legislature Reference Bureau is requested to:

(1) Conduct an analysis of the effects of payment reforms and payment of primary care physicians with capitation on practice administrative costs and burdens and their contributions to Hawaii's physician shortage;

 (2) Analyze "medical management" administrative costs and the administrative cost of payment reforms from payments to providers for provision of health care; and

(3) Investigate other issues it deems relevant; and

BE IT FURTHER RESOLVED that the Legislative Reference Bureau is requested to submit a report of its findings and recommendations, including any proposed legislation, to the Legislature no later than twenty days prior to the convening of the Regular Session of 2023; and

BE IT FURTHER RESOLVED that certified copies of this Resolution be transmitted to the Director of the Legislative Reference Bureau and Administrator of the Hawaii Employer-Union Health Benefits Trust Fund.

OFFERED BY:

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