

# ONE HUNDRED THIRD LEGISLATURE - FIRST SESSION - 2013

## COMMITTEE STATEMENT

### LR22

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**Hearing Date:** Wednesday March 20, 2013

**Committee On:** Health and Human Services

**Introducer:** Campbell

**One Liner:** Provide the Health and Human Services Committee and the Banking, Commerce and Insurance Committee be designated to convene a Partnership Towards Nebraska's Health Care System Transformation

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**Roll Call Vote - Final Committee Action:**

Report to the Legislature for further consideration with amendment(s)

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**Vote Results:**

**Aye:** 7 Senators Campbell, Cook, Crawford, Gloor, Howard, Krist, Watermeier

**Nay:**

**Absent:**

**Present Not Voting:**

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**Proponents:**

Senator Kathy Campbell

Senator Mike Gloor

Gary Perkins

Tammy Ward

Bruce Rieker

James Goddard

**Representing:**

District #25

District #35

Children's Hospital and Medical Center

Tabitha

Nebraska Hospital Association

Nebraska Appleseed

**Opponents:**

**Representing:**

**Neutral:**

Nick Faustman

**Representing:**

NE Nursing Facility Assn / NE Assisted Living Assn

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**Summary of purpose and/or changes:**

LR 22 outlines challenges regarding the current health care system including the increase in percent of personal income spent on health care; increased cost of insurance premiums; the future shortage in the health care workforce including primary care physicians; and the increase in uninsured individuals, especially in rural areas. The resolution states Nebraska's future economic and fiscal success requires a healthy population, high quality health care at lower cost, and greater efficiency. Health care reform includes not only coverage and increased access, but a systemic reform. True reform is total system transformation into a patient-centric, high-value enterprise. Understanding the challenge of health reform and solving Nebraska's health system crisis requires a new level of cooperation between all health care partner stakeholders and policymakers in Nebraska. Therefore, the State government must provide clear leadership and accountability to health care system transformation efforts and must do so in a way that demands transparency, trust, and full participation from all partner stakeholders.

This resolution requires the Legislature's Health and Human Services Committee, in cooperation with the Banking, Commerce and Insurance Committee, to bring together policymakers and stakeholders at all levels, including state and local governments, public and private insurers, health care delivery organizations, employers, specialty societies, consumer groups, patients, consumers, and all other interested parties, to work in partnership with the shared objectives

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of controlling health care costs and improving health care quality. The Health and Services Committee may conduct public hearings; and with the Banking, Commerce and Insurance Committee of the Legislature work in cooperation with a stakeholder partnership, undertake communication, outreach, and educational activities to convey lessons learned and make recommendations relating to health care for Nebraskans. The committees shall hold a joint hearing prior to November 1, 2013, to be briefed on the information obtained by the Partnership as outlined in the resolution.

The funding of the activities of the Health and Human Services Committee of the Legislature will be provided first by any allowable funds not fully expended under the State Planning and Establishment Grants for the Affordable Care Act exchanges and then from existing appropriations for the Health and Human Services Committee from the Nebraska Health Care Cash Fund.

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**Explanation of amendments:**

The Committee Amendment clarifies that the partnership identified in the resolution involves a broad array of stakeholders in work groups directed by the Health and Human Services Committee in conjunction with the Banking, Commerce and Insurance Committee. The Legislature will maintain the leadership and jurisdiction required to complete the directives of the resolution. Additionally, the Committee Amendment removes references to funding from the State Planning and Establishment Grants for the Affordable Care Act; the funding will be from existing appropriations in the Health Care Cash Fund.

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Kathy Campbell, Chairperson