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Date: (Filing No. S- )

**HEALTH COVERAGE, INSURANCE AND FINANCIAL SERVICES**

Reproduced and distributed under the direction of the Secretary of the Senate.

**STATE OF MAINE  
SENATE  
131ST LEGISLATURE  
FIRST SPECIAL SESSION**

COMMITTEE AMENDMENT “ ” to S.P. 150, L.D. 329, “An Act to Ensure Health Care for All Maine Residents”

Amend the bill by striking out the title and substituting the following:

**'Resolve, to Establish the Blue Ribbon Commission on Guaranteed Health Care'**

Amend the bill by striking out everything after the title and inserting the following:

**'Sec. 1. Commission established. Resolved:** That the Blue Ribbon Commission on Guaranteed Health Care, referred to in this resolve as "the commission," is established to study the design and implementation of options for a system that guarantees health care for all residents of the State as follows.

**Sec. 2. Appointments; composition. Resolved:** That, notwithstanding Joint Rule 353, the commission consists of 21 members as follows:

1. Four members of the Senate, appointed by the President of the Senate, including 2 members of the party holding the largest number of seats in the Senate and 2 members of the party holding the 2nd largest number of seats in the Senate, of whom at least one member is a member of the Joint Standing Committee on Health Coverage, Insurance and Financial Services and at least one member is a member of the Joint Standing Committee on Health and Human Services;

2. Four members of the House of Representatives, appointed by the Speaker of the House of Representatives, including 2 members of the party holding the largest number of seats in the House of Representatives and 2 members of the party holding the 2nd largest number of seats in the House of Representatives, of whom at least 3 members are members of the Joint Standing Committee on Health Coverage, Insurance and Financial Services or the Joint Standing Committee on Health and Human Services;

3. One member representing the interests of hospitals, appointed by the President of the Senate;

**COMMITTEE AMENDMENT**

1           4. Three members representing the diverse interests of health care providers, including  
2 members representing licensed health care practitioners, one appointed by the President of  
3 the Senate and 2 appointed by the Speaker of the House of Representatives;

4           5. Two members representing the interests of health insurance carriers, including one  
5 member who is a nonprofit health insurance carrier, one appointed by the President of the  
6 Senate and one appointed by the Speaker of the House of Representatives;

7           6. Two members representing the interests of consumers, one appointed by the  
8 President of the Senate and one appointed by the Speaker of the House of Representatives;

9           7. One member representing the interests of employers with 50 or more employees,  
10 appointed by the President of the Senate;

11           8. One member representing the interests of employers with fewer than 50 employees,  
12 appointed by the Speaker of the House of Representatives; and

13           9. Three ex officio, nonvoting members:

14           A. The director of the Office of Affordable Health Care or the director's designee;

15           B. The Commissioner of Health and Human Services or the commissioner's designee;  
16 and

17           C. The Superintendent of Insurance or the superintendent's designee.

18           **Sec. 3. Chairs. Resolved:** That the first-named Senate member is the Senate chair  
19 and the first-named House of Representatives member is the House chair of the  
20 commission. Notwithstanding Joint Rule 353, the chairs may appoint, as nonvoting  
21 members, individuals with expertise in health care policy, health care financing or health  
22 care delivery. Any additional members appointed pursuant to this section are not entitled  
23 to compensation or reimbursement under section 6.

24           **Sec. 4. Appointments; convening of commission. Resolved:** That all  
25 appointments must be made no later than 30 days following the effective date of this  
26 resolve. The appointing authorities shall notify the Executive Director of the Legislative  
27 Council once all appointments have been completed. After appointment of all members,  
28 the chairs shall call and convene the first meeting of the commission. If 30 days or more  
29 after the effective date of this resolve a majority of but not all appointments have been  
30 made, the chairs may request authority and the Legislative Council may grant authority for  
31 the commission to meet and conduct its business.

32           **Sec. 5. Duties; design options. Resolved:** That the commission shall consider,  
33 evaluate and make recommendations, including implementation plans, for creating a  
34 system of health care that guarantees all residents of the State affordable, quality health  
35 care. The options considered by the commission must, at a minimum, include:

36           1. The Maine Health Care Plan established in the Maine Revised Statutes, Title 24-A,  
37 section 7502, including determination of the necessary steps that must be taken on a policy  
38 and legislative basis in order to fully implement the plan and an assessment of what  
39 information is needed to apply for a federal waiver;

40           2. A model following the German model of nonprofit employer-based insurance with  
41 the ability to seamlessly transition individuals to public health coverage when they leave

1 or change employment, including the establishment of standard coverage and uniform  
2 agreed-upon payments for all health care services and treatments; and

3 3. A design for a government-administered and publicly financed universal payer  
4 health benefits system for all children in the State, beginning with children under 5 years  
5 of age and continuing until all children under 18 years of age are covered.

6 The commission may consider additional options as determined by the commission.  
7 The commission shall consider each option in sufficient detail to allow the commission to  
8 report to the Legislature to enable the Legislature to consider the option and to determine  
9 whether further legislative action is warranted. The commission shall review the findings  
10 and reports from previous studies of health care reform in the State, including the studies  
11 and reports provided to the Legislature.

12 **Sec. 6. Compensation. Resolved:** That the legislative members of the commission  
13 are entitled to receive the legislative per diem, as defined in the Maine Revised Statutes,  
14 Title 3, section 2, and reimbursement for travel and other necessary expenses related to  
15 their attendance at authorized meetings of the commission. Public members not otherwise  
16 compensated by their employers or other entities that they represent are entitled to receive  
17 reimbursement of necessary expenses and, upon a demonstration of financial hardship, a  
18 per diem equal to the legislative per diem for their attendance at authorized meetings of the  
19 commission.

20 **Sec. 7. Quorum. Resolved:** That a quorum is a majority of the voting members of  
21 the commission.

22 **Sec. 8. Staffing. Resolved:** That the Legislative Council shall provide staff support  
23 for the commission. To the extent staff support is needed when the Legislature is in session,  
24 the Legislative Council may contract for such staff support if sufficient funding is available.

25 **Sec. 9. Consultants; additional staff assistance. Resolved:** That the  
26 commission may solicit the services of one or more outside consultants to assist the  
27 commission to the extent resources are available. Upon request, the Office of Affordable  
28 Health Care, the Department of Health and Human Services, the Department of  
29 Professional and Financial Regulation, Bureau of Insurance, the Maine Health Data  
30 Organization and the University of Maine System shall provide any additional staffing  
31 assistance to the commission to ensure the commission and its consultant or consultants  
32 have the information necessary to fulfill the requirements of this resolve.

33 **Sec. 10. Reports. Resolved:** That, notwithstanding Joint Rule 353, the commission  
34 may submit an initial report, including suggested legislation, no later than February 1, 2024  
35 to the Joint Standing Committee on Health Coverage, Insurance and Financial Services and  
36 the Joint Standing Committee on Health and Human Services. Either committee may  
37 submit legislation based on the initial report to the Second Regular Session of the 131st  
38 Legislature. No later than November 1, 2024, the commission shall submit a final report  
39 that includes its findings and recommendations, including suggested legislation, to the joint  
40 standing committee of the Legislature having jurisdiction over health coverage, insurance  
41 and financial services matters and the joint standing committee of the Legislature having  
42 jurisdiction over health and human services matters. Following submission of the final  
43 report, either committee may submit legislation to the 132nd Legislature in 2025.

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**Sec. 11. Additional funding; sources. Resolved:** That the commission may apply for and receive funds, grants or contracts from public and private sources to support its activities.'

Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.

**SUMMARY**

This amendment, which is the majority report of the committee, replaces the bill, which is a concept draft, with a resolve. The amendment establishes the Blue Ribbon Commission on Guaranteed Health Care to consider, evaluate and make recommendations for creating a system of health care that guarantees all residents of the State affordable, quality health care.

**FISCAL NOTE REQUIRED**

**(See attached)**