## FIRST REGULAR SESSION

## **SENATE BILL NO. 166**

## 91ST GENERAL ASSEMBLY

INTRODUCED BY SENATOR BLAND. Pre-filed December 1, 2000, and 1,000 copies ordered printed. TERRY L. SPIELER, Secretary. 0498S.011

## AN ACT

To amend chapter 191, RSMo, by adding thereto one new section relating to the establishment of the joint committee on health care policy and planning, with an expiration date.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Chapter 191, RSMo, is amended by adding thereto one new section, to be known as section 191.826, to read as follows:

191.826. 1. There is established a permanent joint committee of the general assembly to be known as the "Joint Committee on Health Care Policy and Planning". The joint committee shall be comprised of five members of the house of representatives appointed by the speaker of the house and five members of the senate appointed by the president pro tempore of the senate. The appointment of each member shall continue during his term of office as a member of the general assembly or until a successor has been duly appointed to fill his place when his term of office as a member of the senate or three members of the house shall be of the same political party.

2. Members of the joint committee shall receive no compensation in addition to their salary as members of the general assembly, but may receive their actual and necessary expenses incurred in the performance of their official duties as members of the joint committee. Such expenses shall be paid from the joint contingency fund. The meetings of the joint committee shall be in Jefferson City.

3. The joint committee shall meet within ten days after its establishment and organize by selecting a chairman and a vice chairman, one of whom shall be a member of the senate and the other a member of the house of representatives. The joint committee shall meet at least quarterly. A majority of the members shall constitute a quorum.

4. The joint committee may, within the limits of its appropriations, employ such persons as it deems necessary to carry out its duties. The compensation of such personnel shall be paid from the joint contingency fund. The joint committee may, within limits of appropriations for that purpose, enter into contracts to provide such professional, legal or technical assistance as may be necessary for it to perform its functions.

5. The duties of the joint committee shall include, but not be limited to:

(1) Monitoring the design and implementation of initiatives enacted by conference committee substitute for senate substitute for senate committee substitute for house substitute for house committee substitute for house bill no. 564, eightyseventh general assembly, first regular session, to ensure that mechanisms are established to permit effective evaluation of the efficiency and efficacy of those initiatives;

(2) Monitoring the effect of conference committee substitute for senate substitute for senate committee substitute for house substitute for house committee substitute for house bill no. 564, as enacted by the eighty-seventh general assembly, first regular session, and other legislative action upon the delivery of health care services in Missouri. The joint committee shall provide for an independent evaluation of the costs and benefits of the initiatives enacted in conference committee substitute for senate substitute for senate substitute for house bill no. 564, as enacted by the eighty-seventh general assembly, first regular session, using funds designated for that purpose from the health initiatives fund established by section 191.831;

(3) Analyzing and developing policy proposals to improve the delivery of health care services in Missouri;

(4) Making recommendations for administrative or procedural changes in the internal management or organization of the state agencies which provide or regulate the delivery of health care services;

(5) Compiling a report of its activities which shall be submitted to the members of the general assembly and the governor not later than January fifteenth of each year;

(6) Making recommendations to the general assembly for legislative action regarding health care policy and planning;

(7) Developing a health care plan for spending, considering health care expenditures, costs, resources and practices including expansion of public health services and managed care organizations, preferred providers, caps, curbs on malpractice suits, choice of physicians and antitrust relief to enable physicians to negotiate fees with any government board setting budgets.

6. Any state funded agency which provides or regulates health care services shall cooperate with and assist the joint committee in the performance of its duties and shall make available all books, records and information as requested by the joint committee.

7. The joint committee shall have the power to subpoena witnesses, take testimony under oath, compel the attendance of witnesses, the giving of testimony and the production of records.

8. The provisions of this section shall expire on December 31, 2006.

Unofficial

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