

HB 143 -- Missouri Universal Health Insurance Act

Sponsor: Hughes

Upon voter approval, this bill establishes the Missouri Universal Health Insurance Act, administered by the Department of Health and Senior Services, to provide comprehensive and necessary health care services for Missouri residents. No deductibles, co-payments, co-insurance, or other cost-sharing measures will be imposed.

Only public or nonprofit institutions meeting state quality and licensing guidelines can be a participating provider in the program. Private health insurers cannot sell insurance coverage that duplicates benefits provided by the program.

The program will establish regional offices; and the department director will provide funding, subject to appropriations, for each region's expenditures. The program and regional offices will pay the expenses of institutional providers of health care, and each provider is required to negotiate an annual budget with the program which will cover anticipated expenses. The program will reimburse independent providers of health care on a fee-for-service basis. Other insurers and employers may offer benefits that do not duplicate those offered by the program.

The program will be funded:

- (1) By vastly reduced paperwork;
- (2) By requiring a rational bulk procurement of medications;
- (3) From existing sources of state revenue for health care;
- (4) By increasing personal income taxes on the top 5% income earners;
- (5) By instituting a modest payroll tax; and
- (6) By instituting a small tax on stock and bond transactions.

The State Board of Universal Quality and Access is established consisting of 15 members appointed by the Governor, with the advice and consent of the Senate. The board will meet at least twice a year to advise and report to the department director, Governor, and General Assembly on the program to ensure quality, access, and affordability.