House Bill 461

By: Representatives Jasperse of the 12<sup>th</sup>, Meadows of the 5<sup>th</sup>, Bearden of the 68<sup>th</sup>, England of the 108<sup>th</sup>, Williams of the 4<sup>th</sup>, and others

## A BILL TO BE ENTITLED AN ACT

- 1 To amend Title 31 of the Official Code of Georgia Annotated, relating to health, so as to
- 2 adopt the Health Care Compact; to provide for related matters; to repeal conflicting laws; and
- 3 for other purposes.
- 4 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:
- 5 SECTION 1.
- 6 Title 31 of the Official Code of Georgia Annotated, relating to health, is amended by adding
- 7 a new chapter to read as follows:
- 8 "<u>CHAPTER 48</u>
- 9 31-48-1.
- 10 The Health Care Compact is entered into and enacted into law with all jurisdictions legally
- joining therein, in the form substantially as follows:
- 12 <u>'The Health Care Compact</u>
- WHEREAS, the separation of powers, both between the branches of the federal
- 14 government and between federal and state authority, is essential to the preservation of
- individual liberty; and
- WHEREAS, the Constitution creates a federal government of limited and enumerated
- powers, and reserves to the States or to the people those powers not granted to the federal
- 18 government; and

19	WHEREAS, the federal government has enacted many laws that have preempted state
20	laws with respect to Health Care, and placed increasing strain on State budgets, impairing
21	other responsibilities such as education, infrastructure, and public safety; and
22	WHEREAS, the Member States seek to increase individual liberty and control over
23	personal Health Care decisions, and believe the best method to achieve these ends is by
24	vesting regulatory authority over Health Care in the States; and
25	WHEREAS, by acting in concert, the Member States may express and inspire confidence
26	in the ability of each Member State to govern Health Care effectively; and
27	WHEREAS, the Member States recognize that consent of Congress may be more easily
28	secured if the Member States collectively seek consent through an interstate compact;
29	NOW THEREFORE, the Member States hereto resolve, and by the adoption into law
30	under their respective state constitutions of the present Health Care Compact, agree, as
31	<u>follows:</u>
32	Sec. 1. Definitions. As used in this Compact, unless the context clearly indicates
33	otherwise:
34	"Commission" means the Interstate Advisory Health Care Commission.
35	"Effective Date" means the date upon which this Compact shall become effective for
36	purposes of the operation of state and federal law in a Member State, which shall be the
37	<u>latter of:</u>
38	(a) The date upon which this Compact shall be adopted under the laws of the Member
39	State; or
40	(b) The date upon which this Compact receives the consent of Congress pursuant to
41	Article I, Section 10, of the United States Constitution, after at least two Member States
42	adopt this Compact.
43	"Health Care" means care, services, supplies, or plans related to the health of an
44	individual and includes, but is not limited to:
45	(a) Preventative, diagnostic, therapeutic, rehabilitative, maintenance, or palliative care
46	and counseling, service, assessment, or procedure with respect to the physical or mental
47	condition or functional status of an individual or that affects the structure or function
48	of the body;
49	(b) Sale or dispensing of a drug, device, equipment, or other item in accordance with
50	a prescription; and

11 LC 28 5619 51 (c) An individual or group plan that provides, or pays the cost of, care, services, or 52 supplies related to the health of an individual, 53 except any care, services, supplies, or plans provided by the United States Department 54 of Defense and United States Department of Veterans Affairs, or provided to Native 55 Americans. 56 "Member State" means a State that is signatory to this Compact and has adopted it under 57 the laws of that State. 58 "Member State Base Funding Level" means a number equal to the total federal spending 59 on Health Care in the Member State during federal fiscal year 2010. On or before the 60 Effective Date, each Member State shall determine the Member State Base Funding 61 Level for its State, and that number shall be binding upon that Member State. The 62 preliminary estimate of the Member State Base Funding Level for the State of Georgia 63 is \$21,556,000,000.00. 64 "Member State Current Year Funding Level" means the Member State Base Funding Level multiplied by the Member State Current Year Population Adjustment Factor. 65 66 "Member State Current Year Population Adjustment Factor" means the average 67 population of the Member State in the current year less the average population of the Member State in federal fiscal year 2010, divided by the average population of the 68 69 Member State in federal fiscal year 2010, plus 1. Average population in a Member State 70 shall be determined by the United States Census Bureau. 71 "Current Year Inflation Adjustment Factor" means the Total Gross Domestic Product 72 Deflator in the current year divided by the Total Gross Domestic Product Deflator in federal fiscal year 2010. Total Gross Domestic Product Deflator shall be determined by 73 74 the Bureau of Economic Analysis of the United States Department of Commerce. 75 Sec. 2. Pledge. The Member States shall take joint and separate action to secure the 76 consent of the United States Congress to this Compact in order to return the authority to 77 regulate Health Care to the Member States consistent with the goals and principles 78 articulated in this Compact. The Member States shall improve Health Care policy within 79 their respective jurisdictions and according to the judgment and discretion of each 80 Member State.

- 81 Sec. 3. Legislative Power. The legislatures of the Member States have the primary
- 82 <u>responsibility to regulate Health Care in their respective states.</u>
- 83 <u>Sec. 4. State Control. Each Member State, within its State, may suspend by legislation</u>
- 84 <u>the operation of all federal laws, rules, regulations, and orders regarding Health Care that</u>

are inconsistent with the laws and regulations adopted by the Member State pursuant to
this Compact. Federal and state laws, rules, regulations, and orders regarding Health
Care will remain in effect unless a Member State expressly suspends them pursuant to its
authority under this Compact. For any federal law, rule, regulation, or order that remains
in effect in a Member State after the Effective Date, that Member State shall be
responsible for the associated funding obligations in its State.

- 91 <u>Sec. 5. Funding.</u>
- 92 (a) Each federal fiscal year, each Member State shall have the right to federal monies up
- 93 to an amount equal to its Member State Current Year Funding Level for that federal fiscal
- year, funded by Congress as mandatory spending and not subject to annual appropriation,
- 95 <u>to support the exercise of Member State authority under this Compact. This funding shall</u>
- not be conditional on any action of or regulation, policy, law, or rule being adopted by
- 97 <u>the Member State.</u>
- 98 (b) By the start of each federal fiscal year, Congress shall establish an initial Member
- 99 <u>State Current Year Funding Level for each Member State based upon reasonable</u>
- estimates. The final Member State Current Year Funding Level shall be calculated and
- funding shall be reconciled by the United States Congress based upon information
- provided by each Member State and audited by the United States Government
- 103 <u>Accountability Office.</u>
- Sec. 6. Interstate Advisory Health Care Commission.
- 105 (a) The Interstate Advisory Health Care Commission is established. The Commission
- consists of members appointed by each Member State through a process to be determined
- by each Member State. A Member State may not appoint more than two members to the
- 108 <u>Commission and may withdraw membership from the Commission at any time. Each</u>
- 109 <u>Commission member is entitled to one vote. The Commission shall not act unless a</u>
- majority of the members are present, and no action shall be binding unless approved by
- a majority of the Commission's total membership.
- (b) The Commission may elect from among its membership a Chairperson. The
- 113 Commission may adopt and publish bylaws and policies that are not inconsistent with this
- 114 <u>Compact. The Commission shall meet at least once a year, and may meet more</u>
- frequently.
- (c) The Commission may study issues of Health Care regulation that are of particular
- 117 <u>concern to the Member States.</u> The Commission may make non-binding
- recommendations to the Member States. The legislatures of the Member States may

119	consider these recommendations in determining the appropriate Health Care policies in
120	their respective states.
121	(d) The Commission shall collect information and data to assist the Member States in
122	their regulation of Health Care, including assessing the performance of various State
123	Health Care programs and compiling information on the prices of Health Care. The
124	Commission shall make this information and data available to the legislatures of the
125	Member States. Notwithstanding any other provision in this Compact, no Member State
126	shall disclose to the Commission the health information of any individual, nor shall the
127	Commission disclose the health information of any individual.
128	(e) The Commission shall be funded by the Member States as agreed to by the Member
129	States. The Commission shall have the responsibilities and duties as may be conferred
130	upon it by subsequent action of the respective legislatures of the Member States in
131	accordance with the terms of this Compact.
132	Sec. 7. Congressional Consent. This Compact shall be effective on its adoption by at
133	least two Member States and consent of the United States Congress. This Compact shall
134	be effective unless the United States Congress, in consenting to this Compact, alters the
135	fundamental purposes of this Compact, which are:
136	(a) To secure the right of the Member States to regulate Health Care in their respective
137	States pursuant to this Compact and to suspend the operation of any conflicting federal
138	laws, rules, regulations, and orders within their States; and
139	(b) To secure federal funding for Member States that choose to invoke their authority
140	under this Compact, as prescribed by Section 5 above.
141	Sec. 8. Amendments. The Member States, by unanimous agreement, may amend this
142	Compact from time to time without the prior consent or approval of Congress and any
143	amendment shall be effective unless, within one year, the Congress disapproves that
144	amendment. Any State may join this Compact after the date on which Congress consents
145	to the Compact by adoption into law under its State Constitution.
146	Sec. 9. Withdrawal; Dissolution. Any Member State may withdraw from this Compact
147	by adopting a law to that effect, but no such withdrawal shall take effect until six months
148	after the Governor of the withdrawing Member State has given notice of the withdrawal
149	to the other Member States. A withdrawing State shall be liable for any obligations that
150	it may have incurred prior to the date on which its withdrawal becomes effective. This
151	Compact shall be dissolved upon the withdrawal of all but one of the Member States."

152 **SECTION 2.** 

153 All laws and parts of laws in conflict with this Act are repealed.