

2003 Senate Resolution 7

## **ENGROSSED RESOLUTION**

Relating to: urging the Wisconsin congressional delegation to work to enact legislation that would reform the current Medicare system and create a funding method that will dispense equal benefits regardless of geography.

Whereas, the archaic and complex Medicare reimbursement formula rewards Medicare providers in areas with high historic health costs while penalizing those providers in low-cost areas for the same services; and

Whereas, Wisconsin and other upper midwestern states have traditionally been paid less per Medicare enrollee due to our efficient, low-cost management of health care services; and

Whereas, Wisconsin receives the 8th lowest Medicare payments per enrollee in the nation; and Whereas, if Wisconsin received Medicare payments at the national average, an additional \$1,000,000,000 in benefits would flow to our seniors and their health care providers; and

Whereas, Wisconsin should no longer be a "donor" state by contributing its fair share to the federal program while receiving fewer benefits and lower reimbursements in return; and

Whereas, the failure of Wisconsin Medicare to cover the cost of health care for its beneficiaries shifts the cost burden to employers and the privately insured, translating into a hidden tax increase that contributes to rising health insurance premiums and the uninsured population; and

Whereas, an increase in the uninsured would have a detrimental impact on the health of many Wisconsin citizens, would drive up health care costs, and could lead to a significant rise in the use of government programs such as BadgerCare or Medical Assistance, thus requiring additional funding from Wisconsin taxpayers; and

Whereas, another practical result of this payment inequity is that Wisconsin's seniors are denied access to the broad range of affordable benefits and services that seniors in many other states take for granted; and

Whereas, in places where reimbursement rates are high, such as Florida, Medicare health maintenance organizations can offer their plans without a premium, while in Wisconsin the Medicare population has limited access to health maintenance organization care; and

Whereas, Wisconsin's hospitals are paid 14% less than their costs and thus rank 45th nationally in percentage of costs paid for providing services to Medicare beneficiaries; and

Whereas, Wisconsin physicians are paid approximately one-third or less of their costs, and Wisconsin consistently ranks nationally as one of the 10 lowest states in Medicare reimbursement for medical services provided; and

Whereas, the impact of this inequity has now translated into the delay, by 50% of Wisconsin physicians who treat Medicare patients, in the purchase of new and needed equipment; and

Whereas, 15% of physicians have started restricting the number of new Medicare patients that they will accept while another 9% can no longer afford to accept new Medicare patients, despite an aging Wisconsin population; and

Whereas, physicians who are still currently seeing Medicare patients have reduced their number of weekly appointments by 18%; and

Whereas, the Medicare cuts cost Wisconsin physicians \$40,000,000 last year, forcing 6% of physicians to close their private practices because they could no longer cover their overhead costs and pay their staff; and

Whereas, the impact of this inequity means the poor, disabled, and elderly will face serious challenges trying to access care; and

Whereas, the impact of this inequity threatens the viability of our health care providers, especially in rural Wisconsin where Medicare enrollees typically constitute over 50% of a hospital's costs; and

Whereas, allowing the Medicare reimbursement formula to exist in its current form will guarantee even greater cost-shifting, unending double-digit health insurance premium increases, an increase in the uninsured, a continued decrease in physicians accepting Medicare patients, and fewer hospitals; and

Whereas, Wisconsin hospitals, physicians, and insurers stand united in their effort to ensure that Wisconsin providers receive the payments that they deserve, and that patients receive the benefits that they deserve; now, therefore, be it

Resolved by the senate, That the Wisconsin senate urges the members of the congressional delegation from this state to work to enact legislation that would reform the current Medicare system and create a funding method that will dispense equal benefits regardless of geography; and, be it further

Resolved, That the senate chief clerk shall send copies of this resolution to the President of the United States, the speaker of the U.S. house of representatives, the president of the U.S. senate, and all of the members of the congressional delegation from this state.

State Capitol Madison, Wisconsin	Senator Alan J. Lasee President of the Senate
Date	Donald J. Schneider Senate Chief Clerk

## BILL HISTORY FOR SENATE RESOLUTION 7 (LRB -2490)

Relating to: urging the Wisconsin congressional delegation to work to enact legislation that would reform the current Medicare system and create a funding method that will dispense equal benefits regardless of geography.

2003

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04–29. S.	Introduced by Senators Cowles, Roessler, Brown, Robson, Darling, Schultz, S. Fitzgerald, Lazich, Harsdorf, Jauch, Breske and Wirch.
04–29. S.	Read and referred to committee on Senate Organization
04–30. S.	Executive action taken.
04–30. S.	Report adoption recommended by committee on Senate Organization, Ayes 5, Noes 0 154
04–30. S.	Available for scheduling.
04–30. S.	Placed on calendar 5–6–2003 by committee on Senate Organization.
05–06. S.	
05–06. S.	Senator Hansen added as a coauthor.
05-06. S.	Senator Moore added as a coauthor.
05-06. S.	Adopted.
05-06. S.	Senator Erpenbach added as a coauthor.
05-06. S.	Senator Risser added as a coauthor.
05-06. S.	Entire membership of the Senate added as coauthors

2003 Resolution On "Certificate" Form Res ENGROSS SIMPLE RES 03en -ADOPTED DOCUMENTS: 03-249 SubAmdt Amendments to above (if none, write "NONE"): Corrections – show date (if none, write "NONE"): Creat a after **ELECTRONIC PROCEDURE:** Follow automatic or manual enrolling procedures in TEXT2000 Reference Guide, Document Specific Procedures, Ch. 20, Engrossing and Enrolling Make 24 copies of ENGROSSED RESOLUTION and distribute copies. **DISTRIBUTION:** LRB: REVISOR OF STATUTES: 1 copy Drafting file ..... 1 copy HOUSE OF ORGIN: Legislative editors ...... 1 copy each Secretary of State's envelope containing 4 copies plus newspaper notice LPS file ..... 1 copy Original and all remaining copies plus bill Index librarian ..... 1 copy jacket

## 2003 SENATE RESOLUTION 7

April 29, 2003 – Introduced by Senators Cowles, Roessler, Brown, Robson, Darling, Schultz, S. Fitzgerald, Lazich, Harsdorf, Jauch, Breske and Wirch. Referred to Committee on Senate Organization.

1	<b>Relating to:</b> urging the Wisconsin congressional delegation to work to enact
2	legislation that would reform the current Medicare system and create a funding
3	method that will dispense equal benefits regardless of geography.
4	Whereas, the archaic and complex Medicare reimbursement formula rewards
5	Medicare providers in areas with high historic health costs while penalizing those
6	providers in low-cost areas for the same services; and
7	Whereas, Wisconsin and other upper midwestern states have traditionally
8	been paid less per Medicare enrollee due to our efficient, low-cost management of
9	health care services; and
10	Whereas, Wisconsin receives the 8th lowest Medicare payments per enrollee in
11	the nation; and
12	Whereas, if Wisconsin received Medicare payments at the national average, an
13	additional \$1,000,000,000 in benefits would flow to our seniors and their health care
14	providers; and

Whereas, Wisconsin should no longer be a "donor" state by contributing its fair share to the federal program while receiving fewer benefits and lower reimbursements in return; and

Whereas, the failure of Wisconsin Medicare to cover the cost of health care for its beneficiaries shifts the cost burden to employers and the privately insured, translating into a hidden tax increase that contributes to rising health insurance premiums and the uninsured population; and

Whereas, an increase in the uninsured would have a detrimental impact on the health of many Wisconsin citizens, would drive up health care costs, and could lead to a significant rise in the use of government programs such as BadgerCare or Medical Assistance, thus requiring additional funding from Wisconsin taxpayers; and

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Whereas, in places where reimbursement rates are high, such as Florida, Medicare health maintenance organizations can offer their plans without a premium, while in Wisconsin the Medicare population has limited access to health maintenance organization care; and

Whereas, Wisconsin's hospitals are paid 14% less than their costs and thus rank 45th nationally in percentage of costs paid for providing services to Medicare beneficiaries; and

Whereas, Wisconsin physicians are paid approximately one—third or less of their costs, and Wisconsin consistently ranks nationally as one of the 10 lowest states in Medicare reimbursement for medical services provided; and 

	Whereas, the impact of this inequity has now translated into the delay, by $50\%$	
	of Wisconsin physicians who treat Medicare patients, in the purchase of new and	
	needed equipment; and	
	Whereas, 15% of physicians have started restricting the number of new	
	Medicare patients that they will accept while another 9% can no longer afford to	
	accept new Medicare patients, despite an aging Wisconsin population; and	
	Whereas, physicians who are still currently seeing Medicare patients have	
	reduced their number of weekly appointments by 18%; and	
	Whereas, the Medicare cuts cost Wisconsin physicians \$40,000,000 last year,	
	forcing 6% of physicians to close their private practices because they could no longer	
	cover their overhead costs and pay their staff; and	
	Whereas, the impact of this inequity means the poor, disabled, and elderly will	
	face serious challenges trying to access care; and	
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	providers, especially in rural Wisconsin where Medicare enrollees typically	
	constitute over 50% of a hospital's costs; and	
	Whereas, allowing the Medicare reimbursement formula to exist in its current	
	form will guarantee even greater cost-shifting, unending double-digit health	
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	Whereas, Wisconsin hospitals, physicians, and insurers stand united in their	
	effort to ensure that Wisconsin providers receive the payments that they deserve,	
	and that patients receive the benefits that they deserve; now, therefore, be it	
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	congressional delegation from this state to work to enact legislation that would	

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Resolved, That the senate chief clerk shall send copies of this resolution to the President of the United States, the speaker of the U.S. house of representatives, the president of the U.S. senate, and all of the members of the congressional delegation from this state.

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