HF 479 (Gottwalt (R-St. Cloud)) – Health Insurance Exchange created

Five Major Concerns:

• Implementation of OBAMACARE in Minnesota.
  o The federal Patient Protection and Affordable Care Act—Obamacare—is mentioned 38 times in the bill.
  o The Secretary of Health and Human Services (HHS) within the Obama Administration is mentioned 20 times in the bill.
  o Secretary of HHS and Inspector General of U.S. allowed to examine all properties and records of the exchange (11.36)
  o Submit financial statements annually to U.S. Secretary of HHS. (11.29)

• New State Government Bureaucracy
  o Exchange authorized “to exist in perpetuity” (4.21)
  o 9 political appointees on Board of Directors (2.33)
  o Exchange directors exempt from anti-trust law (4.3)
  o Exchange can operate in and outside Minnesota (5.2) – building the federal Exchange?
  o Operations controlled by Commissioner of Commerce (6.29, 12.11)
  o All individual and health plan data treated as government data under Ch. 13 Government Data Practices Act (7.19, 14.27)

• Federal ‘Command and Control’ Infrastructure of Obamacare
  o “Facilitate access to qualified health plans available to qualified individuals and qualified employers, effective January 1, 2014.” (as defined by Obamacare) (2.28)
  o “The exchange must not make available access to any health plan that is not a qualified health plan.” (as defined by Obamacare) (7.25)
  o Adopts standards of Obamacare (8.5)
  o Must offer Obamacare’s bronze, silver, gold and platinum plans (8.15)
  o Implements Obamacare prohibition on catastrophic coverage over age 29 (13.7)

• Infringement on Individual Rights
  o Assist with enforcement of unconstitutional individual mandate (9.33, 10.3)
  o Transfer data on individuals to the US. Treasury to assist with enforcement of the Obamacare mandate to purchase government-approved insurance (10.21)
  o Winners and Losers–individuals prohibited public input or redress during rulemaking (6.1) but health plans granted opportunity for input and redress (16.1)
  o Information-sharing with “federal and state agenices and other state exchanges.” (7.4)
  o No consent from employees or enrollees for data-sharing (7.12)
  o Tracking employee enrollment and sharing data with employers (9.17)
  o Broad Surveillance system: the Commissioners of Commerce and Health must monitor the network, essential community pro9viders, accreditation, quality improvement (NO definition), enrollment forms, descriptions of coverage, and information on quality measures. (16.20)

• Higher costs
  o “User fees” for operational and administrative costs – collected directly from qualified individuals or employees (16.1)
  o “other fees” (16.12)
  o Directors reimbursed “for expenses incurred by them as directors.” (no definitions)