

2006 - Tax on Jobs / Employer Mandated Healthcare Legislation

Red = Republican, Blue = Democratic, O = Other, V = Vacancy

State	Governor (Next Election)	Party	Senate				House				Projected Session Dates
			D	R	O	V	D	R	O	V	
Alabama	<b>Bob Riley</b> (11/7/06) No employer mandated health care legislation has been introduced	R	25	10			62	42		1	1/10/06 - 4/25/06
Alaska	<b>Frank Murkowski</b> (11/7/06) No employer mandated health care legislation has been introduced	R	8	12			14	26			1/09/06 - 5/09/06
Arizona	<b>Janet Napolitano</b>  <b>HC MANDATE</b>  <b>RISK: UNCERTAIN</b>	D	12	18			21	39			1/09/06 - 5/26/06
	<b>ARIZONA S.B. 1232 - EMPLOYER FINANCED HEALTH CARE</b> <b>Sponsor:</b> Senator Richard Miranda (D) <b>Summary:</b> Requires employers of 100 or more to reimburse the state for costs incurred by the Arizona Health Care Cost Containment System for the provision of health care coverage for their employees. Effective 90 days subsequent to adjournment. <a href="http://www.azleg.state.az.us/legtext/47leg/2r/bills/sb1232p.htm">http://www.azleg.state.az.us/legtext/47leg/2r/bills/sb1232p.htm</a> <b>Status:</b> Introduced January 19, 2006.										
	<b>ARIZONA S.B. 1233 - EMPLOYER FINANCED HEALTH CARE</b> <b>Sponsor:</b> Senator Richard Miranda (D) <b>Summary:</b> Requires applicants for public health benefits under the Arizona Health Care Cost Containment System (AHCCS) to report the names of their employers. Requires AHCCS to report the names of employers and their respective numbers of employees and their dependents who have applied for such benefits to the Governor and the Legislature. Effective 90 days subsequent to adjournment. <a href="http://www.azleg.state.az.us/legtext/47leg/2r/bills/sb1233p.htm">Bill text: http://www.azleg.state.az.us/legtext/47leg/2r/bills/sb1233p.htm</a> <b>Status:</b> Introduced January 19, 2006. Referred to Committee on Commerce and Economic Development, Committee on Health, and Committee on Rules January 25. <u>Health Committee hearing scheduled February 6.</u>										
	<b>ARIZONA H.B. 2383 - EMPLOYER FINANCED HEALTH CARE</b> <b>Sponsor:</b> Representative Kyrsten Sinema (D) <b>Summary:</b> Requires applicants for publicly-funded health care to report the names of their employers and their spouses' employers. Directs the Arizona Health Care Cost Containment System to report to the Legislature the names of employers of 250 or more, the number of people employed, and the number of employees receiving publicly-funded health care. Effective 90 days subsequent to final adjournment. <a href="http://www.azleg.state.az.us/legtext/47leg/2r/bills/hb2368p%2Ehtm">Bill text: http://www.azleg.state.az.us/legtext/47leg/2r/bills/hb2368p%2Ehtm</a> <b>Status:</b> Introduced January 10, 2006.										
	<b>ARIZONA H.B. 2522 - EMPLOYER FINANCED HEALTH CARE</b> <b>Sponsor:</b> Representative Manuel "Manny" Alvarez (D) <b>Summary:</b> Requires employers of 100 or more to reimburse the Arizona Health Care Cost Containment System for the cost of services funded publicly on behalf of their employees. Effective 90 days subsequent to adjournment. <a href="http://www.azleg.state.az.us/legtext/47leg/2r/bills/hb2522p%2Ehtm">Bill text: http://www.azleg.state.az.us/legtext/47leg/2r/bills/hb2522p%2Ehtm</a> <b>Status:</b> Introduced January 17, 2006.										

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Arkansas	Michael Huckabee (Lame Duck, 11/7/06)	R	27	8		72	28					No regular 2006 Session
No regular 2006 Session												
California	Arnold Schwarzenegger (11/7/06)	R	25	15		48	32					12/6/04 - 8/31/06
<p><b>REPORTING</b></p> <p><b>RISK: LOW VETO OVERRIDE</b></p> <p><b>DEADLINE: 3/6/06</b></p>	<p><b>CALIFORNIA A.B. 89 - EMPLOYER FINANCED HEALTH CARE, STATE REGISTRIES, WELFARE REFORM-MEDICAID FRAUD</b></p> <p><b>Sponsor:</b> Assemblymember Jerome Horton (D)</p> <p><b>Summary:</b> Final version (July 6) would require the Department of Health Services and the Managed Risk Medical Insurance Board to collaborate to, on or before March 16, 2005, transmit to the Legislature a report identifying all employers who employ 25 or more persons who are beneficiaries or who support beneficiaries of these programs. Requires the department and the board to make the report available to the public as provided in the bill. Effective January 1, 2006.</p> <p>Final version: <a href="http://www.leginfo.ca.gov/pub/bill/asm/ab_0051-0100/ab_89_bill_20050706_amended_sen.html">http://www.leginfo.ca.gov/pub/bill/asm/ab_0051-0100/ab_89_bill_20050706_amended_sen.html</a> ~Veto message: <a href="http://www.governor.ca.gov/govsite/pdf/vetoes_2005/AB_89_veto.pdf">http://www.governor.ca.gov/govsite/pdf/vetoes_2005/AB_89_veto.pdf</a></p> <p><b>Status:</b> Introduced in Assembly January 10, 2005. Referred to Assembly Health Committee January 24. Amended by sponsor March 9. Hearing held March 15. Amended and rereferred to Appropriations Committee March 31. Referred to Appropriations Committee suspense file April 13. Hearing held for suspense file May 25. Passed committee May 25. Amended May 26. Passed Assembly May 31. Introduced and referred to Senate Rules Committee for assignment June 1. Referred to Committee on Health and Committee on Business, Finance and Insurance June 9. Amended June 15. Hearing held and passed committee June 22. Referred to Banking, Finance and Insurance Committee June 23. Passed committee June 29. Referred to Appropriations Committee July 6. Amended July 6. Hearing held and referred to suspense file August 15. Hearing held and passed committee August 25. Passed Senate August 31. Delivered to Governor September 9. Vetoed by Governor Arnold Schwarzenegger (R) October 7.</p>											
<p><b>REPORTING</b></p> <p><b>RISK: HIGH</b></p>	<p><b>CALIFORNIA A.B. 1840 - EMPLOYER FINANCED HEALTH CARE</b></p> <p><b>Sponsor:</b> Assemblymember Jerome Horton (D)</p> <p><b>Summary:</b> Requires the Department of Health Services and the Managed Risk Medical Insurance Board to collaborate to, on or before March 15, 2007, transmit to the Legislature a report identifying all employers who employ 25 or more persons who are beneficiaries or who support beneficiaries of the Medi-Cal, Healthy Families and Access for Infants and Mothers programs. Requires the department and the board to make the report available to the public.</p> <p><a href="http://www.leginfo.ca.gov/pub/bill/asm/ab_1801-1850/ab_1840_bill_20060111_introduced.html">http://www.leginfo.ca.gov/pub/bill/asm/ab_1801-1850/ab_1840_bill_20060111_introduced.html</a></p> <p><b>Status:</b> Introduced in Assembly January 11, 2006. Referred to Committee on Health January 26</p>											
<p><b>HC MANDATE</b></p> <p><b>RISK: UNCERTAIN</b></p>	<p><b>CALIFORNIA - EMPLOYER FINANCED HEALTH CARE</b></p> <p><b>Sponsor:</b> Senator Carole Migden (D)</p> <p><b>Summary:</b> Senator Migden plans to introduce legislation that would require businesses with more than 10,000 employees to spend at least 8% of total wages on health care benefits. If employers fail to meet the 8% threshold, they would have to contribute the difference between what they pay and the 8% to Medi-Cal. Sixty-nine businesses in the state employ more than 10,000 workers, according to the Department of Economic Development.</p> <p><b>Status:</b> This bill has not yet been introduced. A link to an article describing this legislation is attached. Article: <a href="http://www.sfgate.com/cgi-bin/article.cgi?f=/c/a/2006/02/02/BAGNQH199F1.DTL&amp;hw=migden&amp;sn=001&amp;sc=1000">http://www.sfgate.com/cgi-bin/article.cgi?f=/c/a/2006/02/02/BAGNQH199F1.DTL&amp;hw=migden&amp;sn=001&amp;sc=1000</a></p>											

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<b>Colorado</b>	<b>Bill Owens</b> (Lame Duck, 11/7/06)	R	18	17		35	30			1/11/06 - 5/10/06
<b>HC MANDATE</b>	<b>COLORADO H.B. 1316 - EMPLOYER FINANCED HEALTH CARE</b>									
<b>RISK: MODERATE</b>	<p><b>Sponsor:</b> Representative Judy Solano (D)</p> <p><b>Summary:</b> Requires employers who employ 3,500 or more employees in this state to submit information to the Executive Director of the Department of Labor and Employment regarding the number of part-time and full-time employees and the amount spent on health care for the employees. Creates a penalty for employers who fail to timely submit the required information. Requires the Director to submit a report annually to the Governor and the General Assembly that compiles the information reported to the Director from each employer. Requires an employer to spend 11 percent of total payroll expenditures on health care for his or her employees. Requires an employer to pay the difference between the 11 percent and the actual amount spent on health care costs to the Director for failure to pay the required amount. Creates the Colorado Fair Share Health Care Cash Fund, and requires such fines and penalty amounts to be transferred to the fund. Requires that moneys in the fund be annually appropriated to the Department of Health Care Policy and Financing for the purposes of the "Colorado Medical Assistance Act". Effective July 1, 2006.</p> <p><a href="http://www.leg.state.co.us/clics2006a/csl.nsf/fsbillcont3/FF4F78FD23CF86872570BA007CCF4B?Open&amp;file=1316_01.pdf">http://www.leg.state.co.us/clics2006a/csl.nsf/fsbillcont3/FF4F78FD23CF86872570BA007CCF4B?Open&amp;file=1316_01.pdf</a></p> <p><b>Status:</b> Introduced and referred to Committee on Business Affairs and Labor February 6, 2006.</p>									
<b>Connecticut</b>	<b>M. Jodi Rell</b> (11/7/06)	R	24	12		98	52		1	2/8/06 - 5/3/06
	No employer mandated health care legislation has been introduced, session began 2/8/06.									
<b>Delaware</b>	<b>Ruth Ann Minner</b> (Lame Duck, 11/4/08)	D	13	8		15	26			1/10/06 - 6/30/06
	No employer mandated health care legislation has been introduced									
<b>Florida</b>	<b>Jeb Bush</b> (Lame Duck, 11/7/06)	R	14	26		36	84			3/07/06 - 5/05/06
<b>HC MANDATE</b>	<b>FLORIDA H.B. 813 - EMPLOYER FINANCED HEALTH CARE</b>									
<b>RISK: MODERATE</b>	<p><b>Sponsor:</b> Representative Susan Bucher (D)</p> <p><b>Summary:</b> Creates the Fair Share Health Care Fund to provide health care coverage to uninsured residents of the State. Requires employers, with more than 10,000 employees, organized as a nonprofit organization that do not spend at least seven percent of total earnings of employees on health care costs, to pay an amount equal to the difference between what the employer spends for health care costs and an amount equal to seven percent. Requires employers, with more than 10,000 employees, not organized as a nonprofit organization that do not spend at least nine percent of total earnings of employees on health care costs, to pay an amount equal to the difference between what the employer spends for health care costs and an amount equal to nine percent. Requires employers to report certain information regarding their employees and the health care coverage they receive to the Agency for Health Care Administration. Effective January 1, 2007.</p> <p><a href="http://www.myfloridahouse.gov/Sections/Documents/loaddoc.aspx?FileName=_h0813_.doc&amp;DocumentType=Bill&amp;BillNumber=0813&amp;Session=2006">http://www.myfloridahouse.gov/Sections/Documents/loaddoc.aspx?FileName=_h0813_.doc&amp;DocumentType=Bill&amp;BillNumber=0813&amp;Session=2006</a></p> <p><b>Status:</b> Prefiled January 23, 2006. Session begins 3/7/06.</p> <p><b>Companion Bill:</b> 2006 S.B. 1618</p>									
<b>HC MANDATE</b>	<b>FLORIDA S.B. 1618 - EMPLOYER FINANCED HEALTH CARE</b>									
	<b>Sponsor:</b> Senator Walter Campbell (D)									

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<p><b>RISK: MODERATE</b></p>	<p><b>Summary:</b> Creates the Fair Share Health Care Fund to provide health care coverage to uninsured residents of the State. Requires employers, with more than 10,000 employees, organized as a nonprofit organization that do not spend at least seven percent of total earnings of employees on health care costs, to pay an amount equal to the difference between what the employer spends for health care costs and an amount equal to seven percent. Requires employers, with more than 10,000 employees, not organized as a nonprofit organization that do not spend at least nine percent of total earnings of employees on health care costs, to pay an amount equal to the difference between what the employer spends for health care costs and an amount equal to nine percent. Requires employers to report certain information regarding their employees and the health care coverage they receive to the Agency for Health Care Administration. Effective January 1, 2007.  <a href="http://www.myfloridahouse.gov/Sections/Documents/loaddoc.aspx?FileName=_s1618_.html&amp;DocumentType=Bill&amp;BillNumber=1618&amp;Session=2006">http://www.myfloridahouse.gov/Sections/Documents/loaddoc.aspx?FileName=_s1618_.html&amp;DocumentType=Bill&amp;BillNumber=1618&amp;Session=2006</a>  <b>Status:</b> Prefiled January 25, 2006.  <b>Companion Bill:</b> 2006 H.B. 813</p>
<p><b>Georgia</b></p>	<p><b>Sonny Perdue (11/7/06)</b>      R   22   34      79   100   1      1/09/06 - 4/07/06</p>
<p><b>REPORTING  RISK: LOW</b></p>	<p><b>GEORGIA H.B. 548 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Stephanie Benfield (D)  <b>Summary:</b> Requires the submission of data relating to an individual's employer for applicants and their dependents receiving health care benefits under the state Medicaid program, PeachCare for Kids Program, or any other state funded or administered health care program.  <a href="http://www.legis.state.ga.us/legis/2005_06/fulltext/hb548.htm">http://www.legis.state.ga.us/legis/2005_06/fulltext/hb548.htm</a>  <b>Status:</b> Introduced and referred to House Health and Human Services Committee February 18, 2005.</p>
<p><b>Hawaii</b></p>	<p><b>Linda Lingle (11/7/06)</b>      R   20   5      41   10      1/18/06 - 5/04/06</p>
<p><b>REPORTING  RISK: UNCERTAIN</b></p>	<p><b>HAWAII H.B. 334 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Roy Takumi (D)  <b>Summary:</b> Current version (February 1) requires the Department of Human Services to submit an annual report to the Legislature on private sector employers with more than fifty employees who receive medical care or benefits from public assistance programs.  <a href="http://www.capitol.hawaii.gov/sessioncurrent/bills/hb334_hd1_.htm">http://www.capitol.hawaii.gov/sessioncurrent/bills/hb334_hd1_.htm</a>  <b>Status:</b> Introduced and referred to Human Services, Labor and Finance committees January 24, 2005. Hearing held in Health Committee, amended, and passed unanimously February 2. Carries over to 2006 session, which convenes January 18. This legislation is similar to SB 1772 of 2005 which was vetoed by Governor Lingle and subsequently re-approved by legislative override.</p>
<p><b>REPORTING  RISK: UNCERTAIN</b></p>	<p><b>HAWAII H.B. 336 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Roy Takumi (D)  <b>Summary:</b> Requires DHS to annually identify employers of applicants for medical assistance programs and disclose them to the legislature. Requires report to include cost of medical assistance to these applicants. Requires DHS to make public these employers without identifying individual applicants.  <a href="http://www.capitol.hawaii.gov/sessioncurrent/bills/hb336_.htm">http://www.capitol.hawaii.gov/sessioncurrent/bills/hb336_.htm</a>  <b>Status:</b> Introduced and referred to Human Services, Judiciary, and Finance committees January 24, 2005. Human Services Committee held hearing and voted to hold the bill February 1. Carries over to 2006 session, which convenes January 18. This legislation is similar to SB 1772 of 2005 which was vetoed by Governor Lingle and subsequently re-approved by legislative override.</p>
<p><b>Idaho</b></p>	<p><b>Dirk Kempthorne (11/7/06)</b>      R   7   28      13   57      1/09/06 - 4/09/06</p>
<p></p>	<p>No employer mandated health care legislation has been introduced</p>

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Illinois	Rod Blagojevich (11/7/06)	D	31	27	1	65	53			1/11/06 - 4/7/06
<b>REPORTING</b>	<b>ILLINOIS H.B. 1044 - EMPLOYER FINANCED HEALTH CARE</b>									
<b>RISK: LOW</b>	<p><b>Sponsor:</b> Representative Mary E. Flowers (D)</p> <p><b>Summary:</b> Current version (April 14) provides that the Department of Public Aid or its successor agency, in collaboration with the Department of Human Services and the Department of Financial and Professional Regulation, shall annually prepare a public health access program beneficiary employer report to be submitted to the General Assembly. Requires the reporting of information for each employer who has more than 100 employees and 50 or more public health access beneficiaries. Specifies the information to be included in the report, adding information concerning health insurance benefits offered by the employer. Requires the reports to be submitted by October 1, 2006 and annually thereafter.</p> <p><a href="http://ilga.gov/legislation/fulltext.asp?DocName=09400HB1044ham002&amp;SessionID=50&amp;GA=94&amp;DocTypeID=HB&amp;DocNum=1044&amp;print=true">http://ilga.gov/legislation/fulltext.asp?DocName=09400HB1044ham002&amp;SessionID=50&amp;GA=94&amp;DocTypeID=HB&amp;DocNum=1044&amp;print=true</a></p> <p><b>Status:</b> Introduced in House February 3, 2005. Referred to Human Services Committee February 8. Passed Committee February 24. Amended April 14. Failed to pass House April 15. In order to be considered again, the House must vote on the bill for reconsideration.</p>									
Indiana	Mitch Daniels (11/4/08)	R	17	33		48	52			1/04/06 - 3/14/06
	Previously introduced legislation failed to meet state reporting deadlines.									
Iowa	Tom Vilsack (11/7/06)	D	25	25		49	51			1/09/06 - 4/18/06
<b>SM. BUSINESS HC PLAN</b>	<b>IOWA H.F. 78 - EMPLOYER FINANCED HEALTH CARE</b>									
<b>RISK: LOW</b>	<p><b>Sponsor:</b> Representative Cindy Winckler (D)</p> <p><b>Summary:</b> Establishes a Healthy Iowa For All (HIFA) program which includes the HIFA health insurance program, the HIFA program fund, the Iowa quality forum, the HIFA high-risk pool, and state health planning. Establishes the HIFA program within the Iowa Department of Public Health to provide access to health care coverage to eligible employers, including the self-employed, their employees and dependents, state employees and their dependents, local government employees and their dependents, and individuals and their dependents. The HIFA health insurance program is to provide health benefits coverage through health insurance carriers that apply to the board and meet the qualifications specified. Provides that if a sufficient number of health insurance carriers do not apply to offer and deliver health insurance, the board may propose the establishment of a nonprofit health care plan or may propose the expansion of an existing public plan.</p> <p><a href="http://coolice.legis.state.ia.us/Cool-ICE/default.asp?Category=billinfo&amp;Service=Billbook&amp;menu=false&amp;hbill=HF78">http://coolice.legis.state.ia.us/Cool-ICE/default.asp?Category=billinfo&amp;Service=Billbook&amp;menu=false&amp;hbill=HF78</a></p> <p><b>Status:</b> Introduced and referred to House Commerce, Regulations and Labor Committee January 19, 2005. Legislators of both parties agree that the rising cost of health care and health insurance is a very serious problem and intend to address the issue during the 2006 session which convened January 9. Governor Tom Vilsack (D) says he'll ask the Legislature to approve a plan, modeled after programs in Arizona and New York, to help small businesses and school districts with the cost of health care for their employees. Governor Vilsack (D) also wants to create an insurance pool of up to \$40 million, using revenue from his renewed proposal to raise the cigarette tax by 80 cents a pack. In recent years the Legislature and Governor have expanded programs extending health care coverage to children from families with modest incomes. During the 2005 session, legislators revamped portions of Medicaid.</p>									
<b>IOWA OUTLOOK</b>										
<b>REPORTING</b>	<b>IOWA H.F. 426 - EMPLOYER FINANCED HEALTH CARE</b>									
<b>RISK: LOW</b>	<p><b>Sponsor:</b> Representative Todd Taylor (D)</p> <p><b>Summary:</b> Requires an individual who is the recipient of health care services in a hospital and is uninsured to disclose to the hospital the identity of their employer. Requires an applicant for the medical assistance program must disclose the identity of the employer and a report is later to be provided to the legislature.</p> <p><a href="http://coolice.legis.state.ia.us/legislation/Bills/HouseFiles/Introduced/HF426.html">http://coolice.legis.state.ia.us/legislation/Bills/HouseFiles/Introduced/HF426.html</a></p> <p><b>Status:</b> Introduced and referred to Committee on Human Resources February 23, 2005. Carries over to 2006.</p>									
<b>REPORTING</b>	<b>IOWA S.F. 199 - EMPLOYER FINANCED HEALTH CARE</b>									
	<b>Sponsor:</b> Senator Joe Bolkcom (D)									

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<p><b>RISK: LOW</b></p>	<p><b>Summary:</b> Requires an individual who is the recipient of health care services in a hospital and is uninsured to disclose to the hospital the identity of their employer. Requires an applicant for the medical assistance program must disclose the identity of the employer and a report is later to be provided to the legislature.  <a href="http://coolice.legis.state.ia.us/legislation/Bills/SenateFiles/Introduced/SF199.html">http://coolice.legis.state.ia.us/legislation/Bills/SenateFiles/Introduced/SF199.html</a>  <b>Status:</b> Introduced and referred to Committee on Human Resources February 23, 2005. Carried over to 2006.</p>										
<p><b>Kansas</b></p>	<p><b>Kathleen Sebelius</b> (11/7/06)</p>	<p>D</p>	<p>10</p>	<p>30</p>			<p>42</p>	<p>83</p>			<p>1/09/06 - 5/26/06</p>
<p><b>HC MANDATE</b>  <b>RISK: LOW</b></p>	<p><b>KANSAS H.B. 2579 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Geraldine Flaharty (D)  <b>Summary:</b> Requires employers of 10,000 or more to report annually the number of employees and amount of employee payroll and health care expenditures. Requires for-profit entities that do not spend at least 8% of payroll expenditures on employee health care to pay the difference between the amount spent and 8% of payroll into the Fair Share Health Care Fund. Requires non-profit entities to spend at least 6% of payroll on employee health care under the same arrangement. Directs money in the Fair Share Health Care Fund to be used to supplement Medicaid and the State Children's Health Insurance Program (SCHIP). Directs the Secretary of Labor to report annually to the legislature and the Governor the names of employers of 10,000 or more, their employee payroll and health expenditures, and the source of health insurance for their employees for whom they are not providing health insurance coverage. Effective upon passage.  <b>Bill text:</b> <a href="http://www.kslegislature.org/bills/2006/2579.pdf">http://www.kslegislature.org/bills/2006/2579.pdf</a>  <b>Status:</b> Introduced January 9, 2006. Referred to Committee on Commerce and Labor January 10. Withdrawn from Commerce and Labor Committee and referred to Insurance Committee January 24.</p>										
<p><b>Kentucky</b></p>	<p><b>Ernie Fletcher</b> (11/6/07)</p>	<p>R</p>	<p>15</p>	<p>22</p>	<p>1</p>		<p>56</p>	<p>44</p>			<p>1/03/06 - 4/11/06</p>
<p><b>HC MANDATE</b>  <b>RISK: LOW</b></p>	<p><b>KENTUCKY H.B. 98 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Melvin Henley (R)  <b>Summary:</b> Requires an employer of 10,000 or more employees, not including non-profit or governmental entities, to submit annually to the Commissioner of the Department of Labor the number of employees in Kentucky as of January 1 of the previous year, the amount spent by the employer during that previous year on health insurance costs in the state, and the percentage of payroll that was spent by the employer in the previous year on health insurance costs in the state. Requires an employer that does not spend 8% of the total wages paid to employees in the state on health insurance costs to pay to the Commissioner an amount equal to the difference between what the employer pays up to 8% of the total wages paid to its employees in the state. Assesses a \$250 civil penalty for each day that the report is not made, and a \$250,000 civil penalty for failure to make the required payment. This act would be entitled the "Fair Share Health Care Act." Effective date: January 1, 2007.  <b>Bill text:</b> <a href="http://www.lrc.ky.gov/record/06RS/HB98/bill.doc">http://www.lrc.ky.gov/record/06RS/HB98/bill.doc</a>  <b>Status:</b> Prefiled (B.R. 194) November 17, 2005. <u>Introduced and referred to Committee on Banking and Insurance January 3, 2006.</u></p>										
<p><b>REPORTING</b>  <b>RISK: MODERATE</b></p>	<p><b>KENTUCKY H.B. 230 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Joni Jenkins (D)  <b>Summary:</b> Requires applicants for public medical and financial assistance to identify their employers. Requires the Cabinet for Health and Family services to provide the Legislative Research Commission with an annual report containing the names of employers that employ 25 or more applicants for public assistance. Requires that the report be made available to the public upon request.  <b>Bill text:</b> <a href="http://www.lrc.ky.gov/record/06RS/HB230/bill.doc">http://www.lrc.ky.gov/record/06RS/HB230/bill.doc</a>  <b>Status:</b> Introduced January 4, 2006. Referred to Committee on Health and Welfare January 5.</p>										
<p><b>HC MANDATE</b></p>	<p><b>KENTUCKY H.B. 493 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Melvin Henley (R)</p>										

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<p><b>RISK: LOW</b></p>	<p><b>Summary:</b> Creates the Fair Share Health Care Fund to provide support to the state's Medicaid programs. Requires that on January 1, 2007 and annually thereafter, for-profit employers of 10,000 or more submit to the Commissioner of the Department of Labor the number of employees in Kentucky as of January 1 of the previous year, the amount spent by the employer during that previous year on health insurance costs in the state, and the percentage of payroll that was spent by the employer in the previous year on health insurance costs in the state. Requires an employer that does not spend 10% of the total wages paid to employees in the state on health insurance costs to pay to the Commissioner an amount equal to the difference between what the employer pays up to 10% of the total wages paid to its employees in the state. Assesses a \$250 civil penalty for each day that the report is not made, and a \$250,000 civil penalty for failure to make the required payment. Requires the Commissioner to report by March 15 each year to the Governor on various aspects of the program. Requires the Commissioner to verify each year the number of employers in Kentucky with 10,000 or more employees. Eff  <a href="http://www.lrc.ky.gov/record/06RS/HB493/bill.doc">http://www.lrc.ky.gov/record/06RS/HB493/bill.doc</a>  <b>Status:</b> Introduced February 1, 2006. <u>Referred to House Banking and Insurance Committee February 2.</u></p>																								
<p><b>Louisiana</b></p>	<table border="1"> <tr> <td><b>Kathleen Blanco</b> (10/20/2007-Open Primary)</td> <td>D</td> <td>24</td> <td>15</td> <td></td> <td></td> <td>64</td> <td>40</td> <td>1</td> <td></td> <td></td> <td>3/27/06 - 6/19/06</td> </tr> <tr> <td colspan="12">No employer mandated health care legislation has been introduced</td> </tr> </table>	<b>Kathleen Blanco</b> (10/20/2007-Open Primary)	D	24	15			64	40	1			3/27/06 - 6/19/06	No employer mandated health care legislation has been introduced											
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<p><b>Maine</b></p>	<table border="1"> <tr> <td><b>John Baldacci</b> (11/7/06)</td> <td>D</td> <td>19</td> <td>16</td> <td></td> <td></td> <td>73</td> <td>73</td> <td>5</td> <td></td> <td></td> <td>1/3/06 - 3/30/06</td> </tr> </table>	<b>John Baldacci</b> (11/7/06)	D	19	16			73	73	5			1/3/06 - 3/30/06												
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<p><b>REPORTING</b>  <b>RISK: HIGH</b></p>	<p><b>MAINE L.D. 1927 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Beth Edmonds (D)  <b>Summary:</b> Requires the Department of Health and Human Services to collect and disclose the names of the employers of applicants for MaineCare, and of persons requesting uncompensated care in a hospital. In addition, the Department is directed to disclose the total cost to the State of providing MaineCare benefits for the employees of each named employer and their enrolled dependents.  <a href="http://janus.state.me.us/legis/LawMakerWeb/externalsiteframe.asp?ID=280020040&amp;LD=1927&amp;Type=1&amp;SessionID=6">http://janus.state.me.us/legis/LawMakerWeb/externalsiteframe.asp?ID=280020040&amp;LD=1927&amp;Type=1&amp;SessionID=6</a>  <b>Status:</b> Introduced and referred to Joint Health and Human Services Committee January 5, 2006. Hearing scheduled March 1.</p>																								
<p><b>Maryland</b></p>	<table border="1"> <tr> <td><b>Bob Ehrlich</b> (11/7/06)</td> <td>R</td> <td>33</td> <td>14</td> <td></td> <td></td> <td>98</td> <td>43</td> <td></td> <td></td> <td></td> <td>1/11/06 - 4/10/06</td> </tr> </table>	<b>Bob Ehrlich</b> (11/7/06)	R	33	14			98	43				1/11/06 - 4/10/06												
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<p><b>HC MANDATE</b>  <b>VETO OVERRIDE</b> <b>1/12/06; LEGAL</b> <b>PROCEEDINGS</b> <b>PENDING;</b> <b>LEGISLATION</b> <b>EFFECTIVE</b> <b>1/7/07</b></p>	<p><b>MARYLAND H.B. 1284/ MARYLAND S.B. 790 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsors:</b> Delegate Anne Healey (D) / Senator Gloria Lawlah (D)  <b>Summary:</b> Final version (April 7) establishes the Fair Share Health Care Fund, funded by any revenue received from employer payments and other sources. Requires an employer with 10,000 or more employees that does not spend at least 6% of total wages (for a nonprofit employer) or 8% of total wages (for a for-profit employer) on health insurance costs must pay the Department of Labor, Licensing and Regulation (DLLR) an amount equal to the difference between what the employer spends on health insurance and the required percentage of total wages paid. Requires that the Fund be subject to an audit by the Office of Legislative Audits (OLA), and that the funds may be used only to support the operations of the Medicaid program. Requires that an employer, beginning January 1, 2007, must submit a report to the DLLR specifying the amount and the percentage of payroll that was spent on health insurance costs during the previous calendar year. DLLR must annually verify which employers have 10,000 or more employees and ensure that all employers with 10,000 or more employees have made the required report. Failure to report this information or to make a payment may result in a \$250,000  <a href="http://mlis.state.md.us/2005rs/bills/hb/hb1284e.pdf">http://mlis.state.md.us/2005rs/bills/hb/hb1284e.pdf</a>  <b>Status:</b> Introduced and referred to House Health and Government Operations Committee February 11, 2005. Hearing held March 8. Passed committee with amendment March 22. Amended on House floor March 23. Passed House March 24. Introduced and referred to Senate Budget and Taxation Committee March 28. Hearing held April 6. Passed committee with amendments April 7. Passed Senate April 9. House adopted Senate amendments April 10. Vetoed by Governor Bob Ehrlich (R) May 19. <u>Governor's veto overridden by General Assembly January 12, 2006. The General Assembly has overridden Governor Bob Ehrlich's (R) veto on H.B. 1284 and its companion bill, S.B. 790. The Senate voted by a margin of 30-17 to override the Governor's veto. The Assembly voted by a margin of 88-50.</u></p>																								

Massachusetts	Mitt Romney (Not running, 11/7/06)	R	34	6		139	20	1	1/4/06 - 7/31/06
	<p><b>MASSACHUSETTS MASSACT: INITIATIVE PETITION FOR A LAW TO ACHIEVE HEALTH REFORM - EMPLOYER FINANCED HEALTH CARE, SPECIAL REQUEST</b></p> <p><b>Summary:</b> A coalition organized as MassACT filed an initiative petition, August 3, for a law to achieve health reform in November 2006 if legislative reform efforts fail or fall short. The Coalition includes Health Care for All (HCFA), FamiliesUSA, Greater Boston Interfaith Organization, Mass. AFL-CIO, Service Employees International Union, Neighbor to Neighbor, and the Coalition for Social Justice. The proposed initiative would: (1) Help uninsured workers buy affordable health insurance on a sliding scale, (2) Expand MassHealth for lower income uninsured, (3) Lower health premiums for all currently insured, (5) Set fair payments for hospitals, physicians and health centers, (6) Level the playing field between businesses that provide insurance and those that don't and raise cigarette taxes. On October 27, the coalition announced that it had already acquired enough signatures to put the initiative on the 2006 ballot.</p> <p><a href="http://www.statehousenews.com/cgi/as_web.exe?pr05.ask+B+HC%20Coalition#HC%20Coalition~Health Care for All, a universal healthcare advocacy">http://www.statehousenews.com/cgi/as_web.exe?pr05.ask+B+HC%20Coalition#HC%20Coalition~Health Care for All, a universal healthcare advocacy</a></p> <p>If enough signatures are gathered, the measure will be sent to the Legislature in January of 2006. The Legislature can then either approve or disapprove the measure, proposes a substitute, or take no action. Unless the Legislature has enacted the measure before the first Wednesday in May of 2006, the proponent may gather additional signatures by early July, and, if they gather 65,000+, the measure and any legislative substitute will be submitted to the people at the next biennial state election (in this case, November of 2006).</p> <p><a href="http://www.ago.state.ma.us/filelibrary/petition05-08.rtf">Text of proposed initiative: http://www.ago.state.ma.us/filelibrary/petition05-08.rtf</a></p>								
<p>SM. BUSINESS HC PLAN</p> <p>RISK: MODERATE</p>	<p><b>MASSACHUSETTS H.B. 2777 - STATE FUNDED HEALTH CARE PROGRAMS, MEDICAID, EMPLOYER FINANCED HEALTH CARE</b></p> <p><b>Sponsor:</b> Representative Deborah D. Blumer (D)</p> <p><b>Summary:</b> Provides that there shall be a moderate-income worker health insurance assistance program administered by the assistant secretary for health access. The assistant secretary shall promulgate regulations to implement the provisions of this section. The moderate-income worker health insurance assistance program shall provide premium assistance pursuant to this section to persons whose financial eligibility is less than 400% of the federal poverty level and who are ineligible for medical benefits under chapter 118E. Assistance amounts shall be provided on a sliding scale based on the income as a percent of the federal poverty level of the enrolled household. Assistance amounts shall be based on the cost of basic coverage in a qualified individual/small group plan. Provides that assistance shall be available to individuals or families enrolled in a qualified individual/small group plan or an employer-sponsored group health insurance plan that provides coverage actuarially equivalent or greater than coverage in a qualified individual/small group plan. The assistant secretary shall establish minimum employer contribution requirements for persons enrolled in an employer-spons</p> <p><a href="http://www.mass.gov/legis/bills/house/ht02/ht02777.htm">http://www.mass.gov/legis/bills/house/ht02/ht02777.htm</a></p> <p><b>Status:</b> Prefiled December 15, 2004. Introduced and referred to Health Care Financing Committee April 20, 2005. Hearing held June 8.</p>								
<p>HC MANDATE</p> <p>RISK: HIGH CONFERENCE PENDING</p>	<p><b>MASSACHUSETTS H.B. 4479 / S. 2282 - EMPLOYER FINANCED HEALTH CARE</b></p> <p><b>Sponsor:</b> Joint Committee on Health Care Financing</p> <p><b>Summary (Courtesy of Retailers Association of Massachusetts):</b> a Conference Committee is currently considering two health care reform plans that would address how the state plans to cover its uninsured population. The state is at risk of losing hundreds of millions of dollars in Medicare and Medicaid funding if it does not present a plan to the Centers for Medicare &amp; Medicaid (CMS). CMS has set a 1/15/06 deadline for this plan, but this deadline has slipped to mid to late February. Compromise legislation being considered includes a number of positive aspects including initiatives in transparency, the ability to lower cost, more flexible insurance products, the creation of an insurance exchange or connector to facilitate the purchase of insurance using pre-tax dollars. However, there are a number of serious issues that must be worked through including the following:</p> <p>The <b>House</b> plan proposes: a new 5-7% payroll tax on all employers with more than 10 employees, the wages of employees who have health insurance from another source (i.e. spouse, another job bit NOT Medicaid) are not included in the wage base for purposes of calculating the payroll tax, after calculating the tax, employers may deduct what they currently spend for HC benefits and finally, the tax is effective 7/1/06 at 3-5% and increases 1% every six months, capped at 5-7% beginning 7/1/07.</p>								



	<p>The <b>Senate</b> plan proposes the following: a "free rider surcharge" provision to bill employers of 51 employers or more, who do not offer health insurance, for 100-150% of the cost of any fee care services used by their employees, includes part timers and does not recognize employer waiting periods for new employees and finally, if health insurance is offered to an employee and the employee turns it down , the employee is personally liable for the cost of any free care.</p> <p><b>Both the House and Senate Plans include an individual mandate that all MA residents obtain health insurance.</b>  <a href="http://www.mass.gov/legis/bills/house/ht04/ht04463.htm">http://www.mass.gov/legis/bills/house/ht04/ht04463.htm</a></p> <p><b>Status:</b> The Conference Committee failed to meet the CMS deadline of 1/15/06, but a final bill is expected before the end of February. Governor Mitt Romney will likely sign any plan that does NOT include a tax and will claim credit for the individual mandate, a policy proposal which was originally his idea and is now a part of all plans. Despite the low employee threshold included in this legislation, the House payroll tax fails to create enough revenue to support the Medicaid expansion that it wants. The Senate plan, on the other hand does not include a drastic expansion, but remains open ended. On 2/7/06 HHS Secretary Leavitt indicated to MA legislators that the federal government will not accept a plan that relies on expanding the state's Medicaid program. In the conference report does not include an employer mandate and payroll tax, several interest groups will continue to move forward with a ballot campaign for the 2006 election.</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: MODERATE</b></p>	<p><b>MASSACHUSETTS H.B. 4622 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> No Sponsor</p> <p><b>Summary:</b> Creates the Affordable Health Care Fund to assist small business and moderate-income households to buy health insurance and allow the state MassHealth (Medicaid) program to cover more lower-income adults and children. Establishes a payroll assessment on those employers who do not spend specified amounts on health insurance for their workers. Requires public and private employers to pay a percentage of their payroll into the fund after the first \$50,000: five percent for employers of up to 100 workers and seven percent for larger employers. Effective January 1, 2007.</p> <p><b>Status:</b> Introduced and referred to Joint Committee on Health Care Financing January 11, 2006. Senate referred to Joint Committee on Health Care Financing January 25. Aspects of this legislation are similar to proposals currently being considered by a Conference Committee (on H.4479 and S. 2282). Additionally, this legislation corresponds to the initiative petition for the Massachusetts Quality Affordable Health Care Act.</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: MODERATE</b></p>	<p><b>MASSACHUSETTS S.B. 695 - STATE FUNDED HEALTH CARE PROGRAMS, EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Thomas M. McGee (D)</p> <p><b>Summary:</b> Establishes and regulates the operation of the adult medical security plan; charges said program with providing primary and preventative health care for eligible uninsured persons above the age of eighteen. Articulates financial qualifications for beneficiaries under said program, including, but not limited to ineligibility for benefits under Medicaid, MassHealth, Medicare or employer-provided health insurance. Increases reimbursement rates for employers providing health insurance for low income employees pursuant to the employer health care incentive program. Increases reimbursement rates for self employed individuals. Requires employers with more than ninety-nine employees to pay employer fair share health care assessments for each employee. Directs the Division of Medical Assistance and the Division of Health Care Finance and Policy to establish a plan to increase the health insurance coverage of employees of private human service providers who contract with the commonwealth.</p> <p><a href="http://www.mass.gov/legis/bills/senate/st00/st00695.htm">http://www.mass.gov/legis/bills/senate/st00/st00695.htm</a></p> <p><b>Status:</b> Introduced and referred to Joint Committee on Health Care Financing March 16, 2005.</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: MODERATE</b></p>	<p><b>MASSACHUSETTS S.B. 696 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Thomas M. McGee (D)</p> <p><b>Summary:</b> Requires employers liable for payments to the unemployment compensation fund to pay an employer fair share uncompensated care assessment for each employee, as defined. Directs the Commissioner of the Division of Health Care Finance and Policy to regulate the maximum contributions by any employer. Authorizes employers to deduct the costs of providing health insurance to employees from said assessment amount. Requires the deposit of said assessments in the uncompensated care trust fund.</p> <p><a href="http://www.mass.gov/legis/bills/senate/st00/st00696.htm">http://www.mass.gov/legis/bills/senate/st00/st00696.htm</a></p>

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	<b>Status:</b> Introduced and referred to Joint Committee on Health Care Financing March 16, 2005. Hearing held September 14. Aspects of this legislation are similar to proposals currently being considered by a Conference Committee on H.4479 and S. 2282.									
<b>HC MANDATE</b>	<b>MASSACHUSETTS S.B. 743 - EMPLOYER FINANCED HEALTH CARE</b>									
<b>RISK: MODERATE</b>	<p><b>Sponsor:</b> Senator Marc R. Pacheco (D)</p> <p><b>Summary:</b> Reduces cost of health care by establishing surcharges on employers that do not offer health insurance to their employees as a way to provide more money for the Uncompensated Care Pool.  <a href="http://www.mass.gov/legis/bills/senate/st00/st00743.htm">http://www.mass.gov/legis/bills/senate/st00/st00743.htm</a></p> <p><b>Status:</b> Introduced and referred to Joint Committee on Health Care Financing March 16, 2005. Hearing held September 14. Aspects of this legislation are similar to proposals currently being considered by a Conference Committee (on H.4479 and S. 2282).</p>									
<b>Michigan</b>	<b>Jennifer Granholm</b> (11/7/06)	D	16	22		52	58			1/11/06 - 12/31/06
<b>HC MANDATE</b>	<b>MICHIGAN S.B. 734 - EMPLOYER FINANCED HEALTH CARE</b>									
<b>RISK: LOW</b>	<p><b>Sponsor:</b> Senator Raymond E. Basham (D)</p> <p><b>Summary:</b> Establishes the Fair Share Health Care Fund to assist in funding medical assistance under the state's Medicaid program solely for the benefit of employees of contributors to the fund. Provides for the collection and administration of a fee payable by certain employers and requires employers to submit certain information to the Department of Community Health.  <a href="http://www.legislature.mi.gov/documents/2005-2006/billintroduced/senate/htm/2005-SIB-0734.htm">http://www.legislature.mi.gov/documents/2005-2006/billintroduced/senate/htm/2005-SIB-0734.htm</a></p> <p><b>Status:</b> Introduced and referred to Commerce and Labor Committee September 6, 2005.</p>									
<b>Minnesota</b>	<b>Tim Pawlenty</b> (11/7/06)	R	37	29	1	66	68			3/1/06 - 5/22/06
<b>REPORTING</b>	<b>MINNESOTA H.F. 870 - EMPLOYER FINANCED HEALTH CARE</b>									
<b>RISK: UNCERTAIN</b>	<p><b>Sponsor:</b> Representative Paul Thissen (DFL)</p> <p><b>Summary:</b> Requires disclosure of employers of applicants for publicly funded health programs.  <a href="http://www.revisor.leg.state.mn.us/bin/bldbill.php?bill=H0870.0&amp;session=ls84">http://www.revisor.leg.state.mn.us/bin/bldbill.php?bill=H0870.0&amp;session=ls84</a></p> <p><b>Status:</b> Introduced and referred to Committee on Health Policy and Finance February 7, 2005. Session convenes 3/1/06.  <b>Companion Bill:</b> S.F. 828</p>									
<b>REPORTING</b>	<b>MINNESOTA S.F. 828 - EMPLOYER FINANCED HEALTH CARE</b>									
<b>RISK: UNCERTAIN</b>	<p><b>Sponsor:</b> Senator Becky Lourey (DFL)</p> <p><b>Summary:</b> Current version (March 10) requires disclosure of employers of applicants for publicly funded health programs.  <a href="http://www.revisor.leg.state.mn.us/bin/bldbill.php?bill=S0828.1&amp;session=ls84">http://www.revisor.leg.state.mn.us/bin/bldbill.php?bill=S0828.1&amp;session=ls84</a></p> <p><b>Status:</b> Introduced and referred to Committee on Health and Family Security February 7, 2005. Amended and passed Committee March 10. Referred to Finance Committee March 10. Session convenes 3/1/06.  <b>Companion Bill:</b> H.F. 870</p>									
<b>REPORTING</b>	<b>MINNESOTA H.F. 1422 - EMPLOYER FINANCED HEALTH CARE</b>									
<b>RISK: LOW</b>	<p><b>Sponsor:</b> Representative Fran Bradley (R)</p> <p><b>Summary:</b> Current version (May 4) requires by January 15, 2007, for the previous fiscal year, the commissioner shall submit to the legislature a report identifying all employers that employ 50 or more employees who are Minnesota health care program recipients.  <a href="http://www.revisor.leg.state.mn.us/bin/bldbill.php?bill=S2278.2&amp;session=ls84">http://www.revisor.leg.state.mn.us/bin/bldbill.php?bill=S2278.2&amp;session=ls84</a></p> <p><b>Status:</b> Introduced and referred to House Health Policy and Finance Committee February 28, 2005. Hearing held, amended, reported from committee</p>									

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	and re-referred to Ways and Means Committee April 26. Hearing held and reported from committee April 28. Amended and passed House April 29. Substituted by SF 2278 passed Senate May 4. Conference Committee requested May 6. Died upon adjournment May 23. Carries over to 2006 session. Aspects of this legislation were incorporated into legislation that passed in 2005.									
<b>HC MANDATE</b>  <b>RISK: MODERATE</b>	<b>MINNESOTA H.F. 2573 - EMPLOYER FINANCED HEALTH CARE</b> <b>Sponsor:</b> Representative Joe Mullery (DFL) <b>Summary:</b> Establishes the Fair Share Health Care Fund. Requires an employer with more than 10,000 employees in the state that is not organized as a nonprofit organization and does not spend at least ten percent of total wages paid to employees in the state for health care costs shall pay to the fair share health care fund an amount equal to the difference between what the employer spends for health care costs and ten percent of total wages paid to employees in the state. Requires an employer with more than 10,000 employees in the state that is organized as a nonprofit organization and does not spend at least eight percent of total wages paid to employees in the state for health care costs shall pay to the fair share health care fund an amount equal to the difference between what the employer spends for health care costs and eight percent of total wages paid to employees in the state. <a href="http://www.revisor.leg.state.mn.us/bin/bldbill.php?bill=H2573.0.pdf&amp;session=ls84">http://www.revisor.leg.state.mn.us/bin/bldbill.php?bill=H2573.0.pdf&amp;session=ls84</a> <b>Status:</b> Prefiled and referred to House Health Policy and Finance Committee January 19, 2006.									
<b>REPORTING</b>  <b>RISK: LOW</b>	<b>MINNESOTA S.F. 2278 - MEDICAL RECORDS TECHNOLOGY, EMPLOYER FINANCED HEALTH CARE</b> <b>Sponsor:</b> Senator Richard Cohen (DFL) <b>Summary:</b> Requires by January 15, 2007, for the previous fiscal year, the commissioner shall submit to the legislature a report identifying all employers that employ 50 or more employees who are Minnesota health care program recipients. <a href="http://www.revisor.leg.state.mn.us/bin/bldbill.php?bill=S2278.2&amp;session=ls84">http://www.revisor.leg.state.mn.us/bin/bldbill.php?bill=S2278.2&amp;session=ls84</a> <b>Status:</b> Introduced and referred to Senate Finance Committee May 2, 2005. Hearing held and reported from committee May 3. Passed Senate and substituted for H.F. 1422 May 4. Died upon adjournment May 23. Carries over to 2006 session. Aspects of this legislation were incorporated into legislation that passed in 2005.									
<b>Mississippi</b>	<b>Haley Barbour</b> (11/6/07)	R	28	24			75	47		1/03/06 - 4/2/06
	Previously introduced legislation failed to meet state reporting deadlines.									
<b>Missouri</b>	<b>Matt Blunt</b> (11/4/08)	R	11	22		1	65	96	3	1/4/06 - 5/30/06
<b>REPORTING</b>  <b>RISK: LOW</b>	<b>MISSOURI H.B. 1406 - EMPLOYER FINANCED HEALTH CARE</b> <b>Sponsor:</b> Representative Clint Zweifel (D) <b>Summary:</b> Establishes the "Public Assistance Beneficiary Employer Disclosure Act." Provides that any applicant for health care benefits under public assistance programs, including, but not limited to, state Medicaid assistance, shall identify the employer or employers of the proposed beneficiary of the <a href="http://www.house.mo.gov/bills061/biltxt/intro/HB1406l.htm">http://www.house.mo.gov/bills061/biltxt/intro/HB1406l.htm</a> <b>Status:</b> Introduced and first read January 17, 2006. Second read January 18.									
<b>REPORTING</b>  <b>RISK: LOW</b>	<b>MISSOURI S.B. 657 - EMPLOYER FINANCED HEALTH CARE</b> <b>Sponsor:</b> Senator Joan Bray (D) <b>Summary:</b> Requires any applicant for public assistance programs, including Medicaid and the children's health insurance program, to identify the employer or employers of the proposed beneficiary of the health care benefits. Requires that if the proposed beneficiary is not employed, the applicant shall identify the employer of the adult who is providing some or all of the proposed beneficiary's support. <a href="http://www.senate.mo.gov/06info/pdf-bill/intro/SB657.pdf">http://www.senate.mo.gov/06info/pdf-bill/intro/SB657.pdf</a> <b>Status:</b> Prefiled December 1, 2005. First read January 4, 2006. Second read and referred to Senate Pensions, Veterans' Affairs and General Laws Committee January 9.									

<p><b>REPORTING</b></p> <p><b>RISK: LOW</b></p>	<p><b>MISSOURI S.B. 671 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Timothy Green (D)  <b>Summary:</b> Requires public assistance recipients, including but not limited to Medicaid recipients, to identify the employer or employers of the proposed beneficiary of the health care benefits provided. Also requires an annual report to be submitted to the General Assembly by the Department of Social Services identifying all such employers who employ 25 or more public assistance program beneficiaries. Effective August 28, 2006.  <a href="http://www.senate.mo.gov/06info/pdf-bill/intro/SB671.pdf">http://www.senate.mo.gov/06info/pdf-bill/intro/SB671.pdf</a>  <b>Status:</b> Prefiled December 1, 2005. First read January 4, 2006. Second read and referred to Senate Pensions, Veterans' Affairs and General Laws</p>										
<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>MISSOURI S.B. 944 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Joan Bray (D)  <b>Summary:</b> Requires employers in the State with 10,000 or more employees to provide certain information regarding the amount of money spent by the employer on health care costs to the Department of Labor and Industrial Relations. Provides that each non-profit employer that does not spend up to eight percent of the total wages paid to employees and each for-profit employer that does not spend up to ten percent of the total wages paid to employees on health care costs shall pay an amount equal to the difference between either eight or ten percent and the amount actually spent on health care costs. Provides that the monies shall be deposited into the Uncompensated Care Fund to reimburse licensed hospitals and federally qualified health centers that provide uncompensated care. Effective August 28, 2006.  <a href="http://www.senate.mo.gov/06info/pdf-bill/intro/SB944.pdf">http://www.senate.mo.gov/06info/pdf-bill/intro/SB944.pdf</a>  <b>Status:</b> Introduced and first read January 24, 2006. Second read and referred to Senate Small Business, Insurance &amp; Industrial Relations Committee</p>										
<p><b>Montana</b></p>	<p><b>Brian D. Schweitzer</b> (11/4/08)</p>	<p>D</p>	<p>27 23</p>	<p></p>	<p>50 50</p>	<p></p>	<p></p>	<p></p>	<p></p>	<p>No regular 2006 session</p>	
<p>No regular 2006 session</p>											
<p><b>Nebraska</b></p>	<p><b>Dave Heineman</b> (11/7/06)</p>	<p>R</p>	<p>Unicameral/Nonpartisan; 49</p>				<p>1/4/06 - 4/12/06</p>				
<p>No employer mandated health care legislation has been introduced</p>											
<p><b>Nevada</b></p>	<p><b>Kenny Guinn</b> (Lame duck, 11/7/06)</p>	<p>R</p>	<p>9 12</p>	<p></p>	<p>26 15</p>	<p></p>	<p>1</p>	<p>No regular 2006 session</p>			
<p><b>NEVADA 2005 INTERIM LEGISLATIVE COMMITTEE ON HEALTH CARE - EMPLOYER FINANCED HEALTH CARE</b>  <b>Summary:</b> The Committee is next scheduled to meet February 9. Agenda: <a href="http://www.leg.state.nv.us/73rd/Interim/StatCom/HealthCare/Agendas/IA-HealthCare-20060209-1175.pdf">http://www.leg.state.nv.us/73rd/Interim/StatCom/HealthCare/Agendas/IA-HealthCare-20060209-1175.pdf</a>  The committee met January 10, 2006 and heard presentations regarding health-oriented educational institutions in Nevada. The Committee also heard presentations regarding certain health care professionals licensed by the state. Committee staff indicate more information about the January 10 meeting <a href="http://www.leg.state.nv.us/73rd/Interim/StatCom/HealthCare/Agendas/IA-HealthCare-20060110-1175.pdf">January 10 agenda: http://www.leg.state.nv.us/73rd/Interim/StatCom/HealthCare/Agendas/IA-HealthCare-20060110-1175.pdf</a>  The Legislative Committee on Health Care met December 13. The Committee received presentations regarding efforts to address obesity, health disparities research and a study of uninsured populations in the state. Committee staff were unable to provide additional information. Minutes from the <a href="http://www.leg.state.nv.us/73rd/Interim/StatCom/HealthCare/Agendas/IA-HealthCare-20051213-1175.pdf">An agenda is available at: http://www.leg.state.nv.us/73rd/Interim/StatCom/HealthCare/Agendas/IA-HealthCare-20051213-1175.pdf</a>  The Legislative Committee on Health Care met November 15. The Committee received a presentation concerning various health care planning organizations' proposals to assist the Legislative Committee on Health Care in its development of a comprehensive plan from Marshellah D. Lyons, Senior Research Analyst, Research Division, Legislative Counsel Bureau. The Committee also received a presentation regarding Nevada health planning efforts from Michael J. Willden, Director, Department of Health and Human Services (DHHS).  <a href="http://www.leg.state.nv.us/73rd/Interim/StatCom/HealthCare/Agendas/IA-HealthCare-20051115-1175.pdf">http://www.leg.state.nv.us/73rd/Interim/StatCom/HealthCare/Agendas/IA-HealthCare-20051115-1175.pdf</a>  The Nevada Legislative Committee on Health Care held its first meeting for the 2005 interim October 25. At the hearing, the committee began a wide-ranging study of health issues and needs in Nevada. Chairman Senator Maurice Washington (R), said the goal is to produce a comprehensive report on <a href="http://www.leg.state.nv.us/73rd/Interim/StatCom/HealthCare/Agendas/IA-HealthCare-20051025-1175.pdf">http://www.leg.state.nv.us/73rd/Interim/StatCom/HealthCare/Agendas/IA-HealthCare-20051025-1175.pdf</a></p>											

	<a href="http://www.leg.state.nv.us/73rd/Interim/StatCom/HealthCare/">Committee webpage: http://www.leg.state.nv.us/73rd/Interim/StatCom/HealthCare/</a>										
<b>New Hampshire</b>	<b>John Lynch (11/7/06)</b>	D	8	16			147	253			1/4/06 - 6/14/06
<b>REPORTING</b> <b>RISK: LOW</b>	<p><b>NEW HAMPSHIRE H.B. 1703 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Mary Beth Walz (D)  <b>Summary:</b> Requires employers of 500 or more to report to the legislature and the Governor on the percentage of payroll that is being spent on health insurance premiums for employees and the source of health insurance for those employees who do not receive health insurance benefits from their employers. Effective January 1, 2007.  <b>Bill text:</b> <a href="http://www.gencourt.state.nh.us/legislation/2006/HB1703.html">http://www.gencourt.state.nh.us/legislation/2006/HB1703.html</a>  <b>Status:</b> Prefiled (L.S.R. 2278) December 6, 2005. Introduced and referred to Committee on Labor, Industrial, and Rehabilitative Services January 4, 2006. <u>Hearing held January 25.</u></p>										
<b>HC MANDATE</b> <b>RISK: LOW</b>	<p><b>NEW HAMPSHIRE H.B. 1704 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Marcia Moody (D)  <b>Summary:</b> Establishes the "Fair Share Health Care Fund" to finance Medicaid costs, and requires employers of 1,500 or more who do not spend at least 10.5% of total wage related expenditures on the provision of health care coverage as a for-profit entity or 8.5% as a not-for-profit entity to pay the difference into the fund. Requires such employers to report annually information regarding employer provided health coverage to the Department of Health and Human Services to be published in a report to the General Court and the Governor. Effective January 1, 2007.  <b>Bill text:</b> <a href="http://www.gencourt.state.nh.us/legislation/2006/HB1704.html">http://www.gencourt.state.nh.us/legislation/2006/HB1704.html</a>  <b>Status:</b> Prefiled (L.S.R. 2279) December 6, 2005. Introduced and referred to Committee on Commerce January 4, 2006. Hearing held January 11. Work session held January 25. Executive Session held and measure defeated February 7. The committee recommendation will be considered on the House floor February 15.</p>										
<b>REPORTING</b> <b>RISK: UNCERTAIN</b>	<p><b>NEW HAMPSHIRE L.S.R. 2278 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Mary Beth Walz (D)  <b>Summary:</b> Requires certain employers to report on the percentage of payroll that is being spent on health insurance premiums for employees. Bill text is not available for prefiled measures.  <b>Status:</b> Prefiled December 6, 2005.</p>										
<b>New Jersey</b>	<b>Jon Corzine (11/3/09)</b>	D	22	18			48	32			1/10/06 - 12/29/06
<b>REPORTING</b> <b>RISK: MODERATE</b>	<p><b>NEW JERSEY A.B. 932 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Assemblymember Reed Gusciora (D)  FamilyCare enrollees. Provides that the report is to identify those larger employers in the State whose employees and their dependents do not have access to employer-based health insurance coverage and receive, instead, insurance coverage through the publicly-funded NJ FamilyCare program. Requires the Commissioner to distribute the report to the Governor and the chairs of several Senate and Assembly committees. Effective upon becoming a law.  <b>Bill text:</b> <a href="http://www.njleg.state.nj.us/2006/Bills/A1000/932_11.HTM">http://www.njleg.state.nj.us/2006/Bills/A1000/932_11.HTM</a>  <b>Status:</b> Introduced and referred to Assembly Health and Senior Services Committee January 10, 2006.</p>										
<b>HC MANDATE</b>	<p><b>NEW JERSEY A.B. 1705 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Assemblymember Douglas Fisher (D)</p>										

2006 - Tax on Jobs / Employer Mandated Healthcare Legislation

<b>RISK: HIGH</b>	<p><b>Summary:</b> Requires any private business which employs 10,000 or more employees in the State to pay those employees a benefits rate of not less than \$4.17 per hour. Provides that the \$4.17 benefit rate is based on the average amount paid by employers who provide health insurance to employees, plus the average additional amount for other benefits, not counting benefits which the employer is required by law to pay. Requires that the benefit level be annually increased by amounts corresponding to increases in federal poverty guidelines. Effective on the ninetieth day after enactment.  <a href="http://www.njleg.state.nj.us/2006/Bills/A2000/1705_11.HTM">http://www.njleg.state.nj.us/2006/Bills/A2000/1705_11.HTM</a>  <b>Status:</b> Introduced and referred to Assembly Labor Committee January 10, 2006. Similar legislation has been introduced in the Senate.</p>									
<b>HC MANDATE</b>	<p><b>NEW JERSEY A.B. 2513 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Assemblymember Neil Cohen (D)  <b>Summary:</b> Requires certain large employers to either provide a specified level of health benefits to employees or pay an assessment fee to the State.  <b>Status:</b> Filed February 6, 2006. Full text is not yet available.  <b>Companion Bill:</b> 2006 S.B. 1320</p>									
<b>RISK: MODERATE</b>										
<b>HC MANDATE</b>	<p><b>NEW JERSEY S.B. 477 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Stephen Sweeney (D)  <b>Summary:</b> Requires any private business which employs 10,000 or more employees in the State to pay those employees a benefits rate of not less than \$4.17 per hour. Provides that the \$4.17 benefit rate is based on the average amount paid by employers who provide health insurance to employees, plus the average additional amount for other benefits, not counting benefits which the employer is required by law to pay. Requires that the benefit level be annually increased by amounts corresponding to increases in federal poverty guidelines. Effective on the ninetieth day after enactment.  <a href="http://www.njleg.state.nj.us/2006/Bills/S0500/477_11.HTM">http://www.njleg.state.nj.us/2006/Bills/S0500/477_11.HTM</a>  <b>Status:</b> Introduced and referred to Senate Labor Committee January 10, 2006. Hearing held by the Senate Labor Committee 2/6/06. The Committee drafted substitute legislation which lowered the employer threshold to apply to all employers with 1,000 employees or more in the state.</p>									
<b>RISK: HIGH</b>										
<b>REPORTING</b>	<p><b>NEW JERSEY S.B. 539 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Barbara Buono (D)  <b>Summary:</b> Requires the Commissioner of Human Services to prepare an annual report on Access to Employer-Based Health Insurance for NJ FamilyCare Enrollees. Provides the purpose of the report is to identify those larger employers in the State whose employees and their dependents do not have access to employer-based health insurance coverage and receive, instead, insurance coverage through the publicly-funded NJ FamilyCare program. Effective upon becoming a law.  <a href="http://www.njleg.state.nj.us/2006/Bills/S1000/539_11.PDF">http://www.njleg.state.nj.us/2006/Bills/S1000/539_11.PDF</a>  <b>Status:</b> Introduced and referred to Senate Health, Human Services and Senior Citizens Committee January 10, 2006. Hearing held, reported from committee with amendments and second read February 6.</p>									
<b>RISK: MODERATE</b>										
<b>HC MANDATE</b>	<p><b>NEW JERSEY S.B. 1320 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Joseph Vitale (D)  <b>Summary:</b> Requires certain large employers to either provide a specified level of health benefits to employees or pay an assessment fee to the State.  <b>Status:</b> Filed January 30, 2006. Introduced and referred to Senate Labor Committee February 6. Text is not yet available.  <b>Companion Bill:</b> 2006 A.B. 2513</p>									
<b>RISK: UNCERTAIN</b>										
<b>New Mexico</b>	<b>Bill Richardson (11/7/06)</b>	D	24	18		42	28			1/17/06 - 2/17/06
No employer mandated health care legislation has been introduced										
<b>New York</b>	<b>George Pataki (11/7/06)</b>	R	27	35		105	45			1/4/06 - 12/31/06
<b>HC MANDATE</b>	<p><b>NEW YORK A.B. 4129 - EMPLOYER FINANCED HEALTH CARE</b></p>									

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<p><b>RISK: LOW</b></p>	<p><b>Sponsor:</b> Assemblyman Alexander B. Grannis (D)  <b>Summary:</b> Enacts the Working New Yorkers Health Insurance Act to provide insurance coverage to working people not covered by their employer or other programs through a fee paid by employers. Requires employers with 200 or more employees to pay fee by January 1, 2007, and employers with 26 to 199 to pay fee by January 1, 2008.  <a href="http://www.assembly.state.ny.us/leg/?bn=A04129&amp;sh=t">http://www.assembly.state.ny.us/leg/?bn=A04129&amp;sh=t</a>  <b>Status:</b> Introduced and referred to Assembly Insurance Committee February 9, 2005. Hearing held and reported from committee May 18. Referred to Codes Committee May 18.</p>
<p><b>COMMISSION</b>  <b>RISK: LOW</b></p>	<p><b>NEW YORK A.B. 6575 - STATE FUNDED HEALTH CARE PROGRAMS, MEDICAID PRESCRIPTION COST CONTROL, EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Assemblyman Richard Gottfried (D)  <b>Summary:</b> Creates the Legislative Commission on Health Coverage Reform to examine, evaluate and make recommendations concerning mechanisms for providing comprehensive health coverage to all New Yorkers, which include universal health care and employer financed health care. Provides for the repeal of such commission six months after submission of the required report.  <a href="http://assembly.state.ny.us/leg/?bn=a6575">http://assembly.state.ny.us/leg/?bn=a6575</a>  <b>Status:</b> Introduced and referred to Assembly Health Committee March 16, 2005. Hearing held and reported from committee May 3. Referred to Ways and Means Committee May 3.</p>
<p><b>HC MANDATE</b>  <b>RISK: LOW</b></p>	<p><b>NEW YORK A.B. 6576 - STATE FUNDED HEALTH CARE PROGRAMS, EMPLOYER FINANCED HEALTH CARE, MEDICAID PRESCRIPTION COST CONTROL</b>  <b>Sponsor:</b> Assemblyman Richard Gottfried (D)  <b>Summary:</b> Creates the New York State Health Plan to provide a comprehensive system of access to health insurance for New York state residents. Provides for administrative structure of the plan, including its status as a public benefit corporation. Provides for powers and duties of the governing board, the scope of benefits, payment mechanisms and cost controls. Establishes the New York Health Trust Fund which would hold monies from a variety of sources to be used solely to finance the plan. Establishes a mechanism to collect plan premium payments (an 8% employer premium and a 2% employee payroll premium, which may be paid by an employer, plus a 9% premium payment on self-employment income).  <a href="http://assembly.state.ny.us/leg/?bn=A06576&amp;sh=t">http://assembly.state.ny.us/leg/?bn=A06576&amp;sh=t</a>  <b>Status:</b> Introduced and referred to Assembly Health Committee March 16, 2005. Hearing held and reported from committee May 3. Referred to Ways and Means Committee May 3.  <b>Companion Bill:</b> S.B. 3459</p>
<p><b>HC MANDATE</b>  <b>RISK: LOW</b></p>	<p><b>NEW YORK A.B. 7407 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Assemblyman Roger L. Green (D)  <b>Summary:</b> Requires every employer of four or more persons to make available to its employees a policy or contract of group accident and group health insurance.  <a href="http://www.assembly.state.ny.us/leg/?bn=A07407&amp;sh=t">http://www.assembly.state.ny.us/leg/?bn=A07407&amp;sh=t</a>  <b>Status:</b> Introduced and referred to Assembly Labor Committee April 15, 2005.</p>
<p><b>COMMISSION</b>  <b>RISK: LOW</b></p>	<p><b>NEW YORK A.B. 7568 - EMPLOYER FINANCED HEALTH CARE, STATE FUNDED HEALTH CARE PROGRAMS, MANDATED BENEFITS</b>  <b>Sponsor:</b> Assemblyman John W. Lavalley (D)  <b>Summary:</b> Establishes the Legislative Commission on Health Care to review and make recommendations on the numbers of citizens in New York who do not have health care coverage. Requires the commission to conduct a review of health insurance coverage to determine if it conforms to constitutionally required insurance mandates. Grants to commission subpoena power to compel testimony. Appropriates \$500,000 to fund the expenses of the commission.  <a href="http://www.assembly.state.ny.us/leg/?bn=A07568&amp;sh=t">http://www.assembly.state.ny.us/leg/?bn=A07568&amp;sh=t</a></p>

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	<p><b>Status:</b> Introduced and referred to Assembly Health Committee April 20, 2005.  <b>Companion Bill:</b> S.B. 4928</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: UNCERTAIN</b></p>	<p><b>NEW YORK A.B. 9534 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Assemblymember Daniel O'Donnell (D)  <b>Summary:</b> Requires employers with more than ten thousand employees to report to the Department of Labor their numbers of employees, amounts spent on health insurance benefits for their employees, and the percentage of total wages paid that was spent on health insurance benefits. Requires employers subject to the program to contribute the difference between the amount the employer spends on health care benefits for employees and either 6% (not-for-profit employers) or 8% (for profit employers) to the fair share health fund. Effective the 120th day subsequent to when it has become law.  <b>Bill text:</b> <a href="http://www.assembly.state.ny.us/leg/?bn=A09534&amp;sh=t">http://www.assembly.state.ny.us/leg/?bn=A09534&amp;sh=t</a>  <b>Status:</b> Introduced and referred to Committee on Labor January 17, 2006.</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: UNCERTAIN</b></p>	<p><b>NEW YORK A.B. 9776 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Assemblymember Jose Peralta (D)  <b>Summary:</b> Requires any entity that operates at least one retail store located in New York state where groceries or other foods are sold for off-site consumption, has at least five hundred employees statewide, and where either (a) ten thousand square feet or more of the store's selling area floor space is used for the sale of groceries or other foods for off-site consumption, or (b) five percent or more of the store's selling area floor space is used for the sale of groceries or other foods for off-site consumption and the store contains at least one hundred thousand square feet of selling area floor space, to make minimum health care expenditure each year of not less than three dollars multiplied by the total number of hours worked by employees of the entity over the year, beginning in the first full calendar year after the effective date of this section. Requires employers who make health care expenditures during a given year that fall short of its minimum health care expenditure to pay a civil penalty equal to the amount of the shortfall and to correct such violation by increasing its health care expenditures to make up for the past shortfall within ninety days of such determination. Assesses additional  <b>http://assembly.state.ny.us/leg/?bn=A09776&amp;sh=t</b>  <b>Status:</b> Introduced and referred to Committee on Labor February 1, 2006.  <b>Companion Bill:</b> 2006 S.B. 6472</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>NEW YORK S.B. 3459 - STATE FUNDED HEALTH CARE PROGRAMS, EMPLOYER FINANCED HEALTH CARE, MEDICAID PRESCRIPTION COST</b>  <b>Sponsor:</b> Senator Eric T. Schneiderman (D)  <b>Summary:</b> Creates the New York State Health Plan to provide a comprehensive system of access to health insurance for New York state residents. Provides for administrative structure of the plan, including its status as a public benefit corporation. Provides for powers and duties of the governing board, the scope of benefits, payment mechanisms and cost controls. Establishes the New York Health Trust Fund which would hold monies from a variety of sources to be used solely to finance the plan. Establishes a mechanism to collect plan premium payments (an 8% employer premium and a 2% employee payroll premium, which may be paid by an employer, plus a 9% premium payment on self-employment income).  <b>http://www.assembly.state.ny.us/leg/?bn=s3459</b>  <b>Status:</b> Introduced and referred to Senate Health Committee March 17, 2005.  <b>Companion Bill:</b> A.B. 6576</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>NEW YORK S.B. 3474 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator George Onorato (D)  <b>Summary:</b> Requires employers to provide part-time employees with health insurance in cases where full-time employees are provided the same benefits, but on a pro rata basis reflecting the percentage of hours worked. Defines "employer" as one having 26 or more employees.  <b>http://www.assembly.state.ny.us/leg/?bn=s3474</b>  <b>Status:</b> Introduced and referred to Senate Labor Committee March 21, 2005.  The New York Legislature is currently in recess. Both chambers meet every few days in order to maintain the ability to address any issue that may arise,</p>



<p><b>COMMISSION</b></p> <p><b>RISK: LOW</b></p>	<p><b>NEW YORK S.B. 4928 - EMPLOYER FINANCED HEALTH CARE, STATE FUNDED HEALTH CARE PROGRAMS, MANDATED BENEFITS</b>  <b>Sponsor:</b> Senator John J. Marchi (R)  <b>Summary:</b> Establishes the Legislative Commission on Health Care to review and make recommendations on the numbers of citizens in New York who do not have health care coverage. Requires the commission to conduct a review of health insurance coverage to determine if it conforms to constitutionally required insurance mandates. Grants to commission subpoena power to compel testimony. Appropriates \$500,000 to fund the expenses of the commission.  <a href="http://www.assembly.state.ny.us/leg/?bn=S04928&amp;sh=t">http://www.assembly.state.ny.us/leg/?bn=S04928&amp;sh=t</a>  <b>Status:</b> Introduced and referred to Senate Finance Committee April 18, 2005.                      The New York Legislature is currently in recess. Both chambers meet every few days in order to maintain the ability to address any issue that may arise,  <b>Companion Bill:</b> A.B. 7568</p>										
<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>NEW YORK S.B. 6472 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Diane Savino (D)  <b>Summary:</b> Requires any entity that operates at least one retail store located in New York state where groceries or other foods are sold for off-site consumption, has at least five hundred employees statewide, and where either (a) ten thousand square feet or more of the store's selling area floor space is used for the sale of groceries or other foods for off-site consumption, or (b) five percent or more of the store's selling area floor space is used for the sale of groceries or other foods for off-site consumption and the store contains at least one hundred thousand square feet of selling area floor space, to make minimum health care expenditure each year of not less than three dollars multiplied by the total number of hours worked by employees of the entity over the year, beginning in the first full calendar year after the effective date of this section. Requires employers who make health care expenditures during a given year that fall short of its minimum health care expenditure to pay a civil penalty equal to the amount of the shortfall and to correct such violation by increasing its health care expenditures to make up for the past shortfall within ninety days of such determination. Assesses additional  <a href="http://assembly.state.ny.us/leg/?bn=S06472&amp;sh=t">http://assembly.state.ny.us/leg/?bn=S06472&amp;sh=t</a>  <b>Status:</b> Introduced and referred to Committee on Labor January 20, 2006.  <b>Companion Bill:</b> 2006 A.B. 9776</p>										
<p><b>REPORTING</b></p> <p><b>RISK: HIGH</b></p>	<p><b>NEW YORK S.B. 6645 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator George Maziarz (R)  <b>Summary:</b> Requires the Department of Labor, in consultation with the Department of Health, to collaborate with all other necessary agencies and parties to transmit to the legislature a report identifying all employers who employ 200 or more persons who are beneficiaries or who support beneficiaries in a state-funded public health program. Provides that the report include the names of the employers, their employment statistics, and the total cost incurred by the state as a result of providing health care for their employees. Effective immediately.  <a href="http://www.assembly.state.ny.us/leg/?bn=S06645&amp;sh=t">http://www.assembly.state.ny.us/leg/?bn=S06645&amp;sh=t</a>  <b>Status:</b> Introduced and referred to Committee on Labor February 7, 2006.</p>										
<p><b>North Carolina</b></p>	<p><b>Mike Easley</b> (Lame duck, 11/4/08)</p>	<p>D</p>	<p>29</p>	<p>21</p>	<p></p>	<p></p>	<p>63</p>	<p>57</p>	<p></p>	<p></p>	<p>5/9/06 - 7/26/06</p>
<p>Session convenes 5/9/06.</p>											
<p><b>North Dakota</b></p>	<p><b>John Hoeven</b> (11/4/08)</p>	<p>R</p>	<p>15</p>	<p>32</p>	<p></p>	<p></p>	<p>27</p>	<p>67</p>	<p></p>	<p></p>	<p>No regular 2006 session</p>
<p>No regular 2006 session.</p>											
<p><b>Ohio</b></p>	<p><b>Bob Taft</b> (Lame duck, 11/7/06)</p>	<p>R</p>	<p>11</p>	<p>22</p>	<p></p>	<p></p>	<p>39</p>	<p>60</p>	<p></p>	<p></p>	<p>1/3/06 - 12/31/06</p>
<p><b>REPORTING</b></p>	<p><b>OHIO H.B. 111 - EMPLOYER FINANCED HEALTH CARE</b></p>										

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<p><b>RISK: LOW</b></p>	<p><b>Sponsor:</b> Representative John E. Bradley (D)  <b>Summary:</b> Requires applicants for CHIP, Disability Medical Assistance, and Medicaid to provide information about their employers, to require hospitals to gather employer information from patients who receive treatment under the Hospital Care Assurance Program, and to require an annual report, to be delivered to the governor and each member of the general assembly, identifying the employers.  <a href="http://www.legislature.state.oh.us/bills.cfm?ID=126_HB_111">http://www.legislature.state.oh.us/bills.cfm?ID=126_HB_111</a>  <b>Status:</b> Introduced March 2, 2005. Referred to House Health Committee March 8.</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>OHIO H.B. 263 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Michael Skindell (D)  <b>Summary:</b> Establishes the Ohio Health Care Plan, which will be administered by the Ohio Health Care Agency under the direction of the Ohio Health Care Board. Funding for the plan will be received from various sources, including taxes levied on employer payrolls. Requires the plan to provide universal and affordable health care coverage for all Ohio residents consisting of a comprehensive benefit package that includes benefits for prescription drugs. Requires the plan to work simultaneously to control health care costs, control health care spending, achieve measurable improvement in health care outcomes, increase all parties' satisfaction with the health care system, implement policies that strengthen and improve culturally and linguistically sensitive care, and develop an integrated health care database to support health care planning.  <a href="http://www.legislature.state.oh.us/bills.cfm?ID=126_HB_263">http://www.legislature.state.oh.us/bills.cfm?ID=126_HB_263</a>  <b>Status:</b> Introduced in House and referred to Insurance Committee May 17, 2005.  <b>Companion Bill:</b> 2005 S.B. 68</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>OHIO H.B. 471 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Jennifer Garrison (D)  <b>Summary:</b> Creates in the State Treasury the Fair Share Health Care Fund. Requires every employer, other than a nonprofit employer, in the state who employs 30,000 or more employees and who do not incur total health insurance costs equal to at least eight percent of the total amount of qualifying wages paid to employees make contributions to a fund to be used to supplement this state's share of Medicaid costs. These employers shall remit to the Director of Job and Family Services an amount equal to the difference between: (a) Eight per cent of the total amount of qualifying wages paid by the employer to employees in this state during the second preceding calendar year; and (b) The amount the employer expended on health insurance costs during the second preceding calendar year. Any amount required to be paid by a nonprofit employer or other employer under this section shall be paid by the employer and shall not be deducted from the wages or other remuneration paid by that employer to its employees. Any amount required to be paid by an employer under this section shall be paid in conjunction with the employer's filing of the report required under section 5101.912 of the Revised Code.  <a href="http://www.legislature.state.oh.us/bills.cfm?ID=126_HB_471">http://www.legislature.state.oh.us/bills.cfm?ID=126_HB_471</a>  <b>Status:</b> Introduced in House January 17, 2006. Referred to Finance and Appropriations Committee January 18. Hearing held January 24</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>OHIO S.B. 68 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Robert F. Hagen (D)  <b>Summary:</b> Establishes the Ohio Health Care Plan, which will be administered by the Ohio Health Care Agency under the direction of the Ohio Health Care Board. Funding for the plan will be received from various sources, including taxes levied on employer payrolls. Requires the plan to provide universal and affordable health care coverage for all Ohio residents consisting of a comprehensive benefit package that includes benefits for prescription drugs. Requires the plan to work simultaneously to control health care costs, control health care spending, achieve measurable improvement in health care outcomes, increase all parties' satisfaction with the health care system, implement policies that strengthen and improve culturally and linguistically sensitive care, and develop an integrated health care database to support health care planning.  <a href="http://www.legislature.state.oh.us/bills.cfm?ID=126_SB_68">http://www.legislature.state.oh.us/bills.cfm?ID=126_SB_68</a>  <b>Status:</b> Introduced in Senate February 17, 2005. Referred to Senate Insurance Committee February 22. Hearing held March 15.</p>
<p><b>REPORTING</b></p>	<p><b>OHIO S.B. 103 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Robert F. Hagan (D)</p>

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<p><b>RISK: LOW</b></p>	<p><b>Summary:</b> Requires applicants for CHIP, Disability Medical Assistance, and Medicaid to provide information about their employers, to require hospitals to gather employer information from patients who receive treatment under the Hospital Care Assurance Program, and to require an annual report for the Governor and each member of the Legislature identifying the employers.  <a href="http://www.legislature.state.oh.us/bills.cfm?ID=126_SB_103">http://www.legislature.state.oh.us/bills.cfm?ID=126_SB_103</a>  <b>Status:</b> Introduced in Senate March 9, 2005. Referred to Committee on Health, Human Services &amp; Aging March 15.</p>										
<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>OHIO S.B. 256 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Daniel Brady (D)  <b>Summary:</b> Creates in the State Treasury the Fair Share Health Care Fund. Requires every employer, other than a nonprofit employer, in the state who employs 10,000 or more employees and who do not incur total health insurance costs equal to at least eight percent of the total amount of qualifying wages paid to employees make contributions to a fund to be used to supplement this state's share of Medicaid costs. These employers shall remit to the Director of Job and Family Services an amount equal to the difference between: (a) Eight per cent of the total amount of qualifying wages paid by the employer to employees in this state during the second preceding calendar year; and (b) The amount the employer expended on health insurance costs during the second preceding calendar year. Any amount required to be paid by a nonprofit employer or other employer under this section shall be paid by the employer and shall not be deducted from the wages or other remuneration paid by that employer to its employees. Any amount required to be paid by an employer under this section shall be paid in conjunction with the employer's filing of the report required under section 5101.912 of the Revised Code. Re  <a href="http://www.legislature.state.oh.us/bills.cfm?ID=126_SB_256">http://www.legislature.state.oh.us/bills.cfm?ID=126_SB_256</a>  <b>Status:</b> Introduced in Senate January 18, 2006. Referred to Health, Human Services and Aging Committee January 24.</p>										
<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>OHIO S.B. 258 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Robert Hagan (D)  <b>Summary:</b> Creates the Fair Share Health Care Fund. Requires that beginning January 1, 2007, every employer, including every nonprofit employer, located in this state that, as of the first day of a calendar year, employs one thousand or more employees in this state and that, in the preceding calendar year, did not incur total health insurance costs equal to at least eight per cent of the total amount of wages paid to employees in this state during that preceding calendar year, shall remit to the director of job and family services an amount equal to the difference between: (A) Eight per cent of the total amount of wages paid by the employer to employees in this state during the preceding calendar year; and (B) The amount the employer expended on health insurance costs during the preceding calendar year. Requires that any amount required to be paid by an employer under this section shall be paid by the employer and shall not be deducted from the wages or other remuneration paid by that employer to its employees. Provides that an employer that fails to remit the payment required under this section on or before the first day of February of the following calendar year shall pay a fine of two hundred fifty  <a href="http://www.legislature.state.oh.us/bills.cfm?ID=126_SB_258">http://www.legislature.state.oh.us/bills.cfm?ID=126_SB_258</a>  <b>Status:</b> Introduced in Senate January 19, 2006. Referred to Insurance, Commerce and Labor Committee January 24.</p>										
<p><b>Oklahoma</b></p>	<p><b>Brad Henry</b> (11/7/06)</p>	<p>D</p>	<p>26</p>	<p>22</p>			<p>44</p>	<p>57</p>			<p>2/06/06 - 5/26/06</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: UNCERTAIN</b></p>	<p><b>OKLAHOMA H.B. 2678 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Darrell Gilbert (D)  <b>Summary:</b> Creates the Fair Share Health Care Fund. Requires employers of 3,000 or more to report to the Department of Labor the number of people they employ, the amount they spent on employee health care the year prior, and the percentage of total payroll spent on employee health care. Requires for-profit employers who do not spend at least 9% of total payroll on employee health care benefits to pay the difference between what was spent and 9% of total payroll into the Fund. Requires the Department of Labor to report information about such employers to the legislature and the Governor. Effective November 1, 2006.  <a href="http://webserver1.lsb.state.ok.us/2005-06HB/HB2678_int.rtf">http://webserver1.lsb.state.ok.us/2005-06HB/HB2678_int.rtf</a>  <b>Status:</b> Prefiled January 19, 2006. Referred to Committee on Insurance January 27. Introduced February 6.</p>										
<p><b>Oregon</b></p>	<p><b>Ted Kulongoski</b> (11/7/06)</p>	<p>D</p>	<p>18</p>	<p>12</p>			<p>27</p>	<p>33</p>			<p>No regular 2006 session</p>

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	The AFL-CIO has announced that they will file a ballot initiative requiring Oregon employers with more than 4,500 workers to spend at least 9% of payroll on employee health insurance										
<b>Pennsylvania</b>	<b>Ed Rendell</b> (11/7/06)	D	20	30			93	110			1/3/06 - 11/30/06
<b>REPORTING</b>	<b>PENNSYLVANIA H.B. 1105 - EMPLOYER FINANCED HEALTH CARE</b>										
<b>RISK: MODERATE</b>	<p><b>Sponsor:</b> Representative Mark B. Cohen (D)</p> <p><b>Summary:</b> Establishes an annual public health access program beneficiary employer report that identifies employers who have 50 or more beneficiaries of medical assistance. Requires beneficiaries of medical assistance to disclose employer.  <a href="http://www.legis.state.pa.us/WU01/LI/BI/BT/2005/0/HB1105P1267.HTM">http://www.legis.state.pa.us/WU01/LI/BI/BT/2005/0/HB1105P1267.HTM</a></p> <p><b>Status:</b> Introduced and referred to Health and Human Services Committee March 24, 2005.</p>										
<b>REPORTING</b>	<b>PENNSYLVANIA H.B. 1336 - EMPLOYER FINANCED HEALTH CARE</b>										
<b>RISK: LOW</b>	<p><b>Sponsor:</b> Representative Jake Wheatley (D)</p> <p><b>Summary:</b> Provides for an annual public health program employer report that includes: the number of public health program beneficiaries who are employees of the employer, the number of public health program beneficiaries who are spouses or dependents of employees of the employer, whether the employer offers health benefits to its employees, and the cost to the Commonwealth of providing public health program benefits for the employer's employees and their enrolled dependents.  <a href="http://www.legis.state.pa.us/WU01/LI/BI/BT/2005/0/HB1336P1594.HTM">http://www.legis.state.pa.us/WU01/LI/BI/BT/2005/0/HB1336P1594.HTM</a></p> <p><b>Status:</b> Introduced and referred to Health and Human Services Committee April 12, 2005.</p>										
<b>HC MANDATE</b>	<b>PENNSYLVANIA H.B. 1460 - EMPLOYER FINANCED HEALTH CARE, STATE FUNDED HEALTH CARE PROGRAMS</b>										
<b>RISK: LOW</b>	<p><b>Sponsor:</b> Representative Kathy Manderino (D)</p> <p><b>Summary:</b> Establishes the Workers Health Insurance Fund to pay for basic health insurance for working Pennsylvanians and their families that are not covered under existing employer insurance, the state Adult Basic Insurance Program or the Children's Health Insurance Program. To be administered by the Insurance Department of the Commonwealth and financed by appropriations, participation fees, and non-participation penalties. Defines three classes of employers according to number of employees; subscribes specific coverage for various classes of employers. Mandatory participation with a few exceptions; outlines penalties for nonparticipation.  <a href="http://www.legis.state.pa.us/WU01/LI/BI/BT/2005/0/HB1460P1778.HTM">http://www.legis.state.pa.us/WU01/LI/BI/BT/2005/0/HB1460P1778.HTM</a></p> <p><b>Status:</b> Introduced and referred to House Insurance Committee May 2, 2005.</p>										
<b>HC MANDATE</b>	<b>PENNSYLVANIA H.B. 1965 - EMPLOYER FINANCED HEALTH CARE</b>										
<b>RISK: MODERATE</b>	<p><b>Sponsor:</b> Representative Camille George (D)</p> <p><b>Summary:</b> Requires every employer to offer employees working thirty hours or more each week the option to enroll in an employer-sponsored health insurance plan. Requires the employer-sponsored health insurance plan to be paid for by a combination of employee contribution as provided for in section 4(a)(6) and a matching contribution by the Commonwealth. Allows participating employers to apply for and receive a matching contribution by the Commonwealth for each employee who elects to participate in the health insurance plan. The matching contributions by the Commonwealth shall be funded through the Master Settlement Agreement relating to tobacco litigation entered into in 1998 by the Commonwealth and leading United States tobacco product manufacturers.  <a href="http://www.legis.state.pa.us/WU01/LI/BI/BT/2005/0/HB1965P2698.HTM">http://www.legis.state.pa.us/WU01/LI/BI/BT/2005/0/HB1965P2698.HTM</a></p> <p><b>Status:</b> Introduced and referred to the House Labor Relations Committee September 26, 2005.</p>										
<b>HC MANDATE</b>	<b>PENNSYLVANIA S.B. 1085 - EMPLOYER FINANCED HEALTH CARE</b>										
	<b>Sponsor:</b> Senator Jim Ferlo (D)										

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<b>RISK: LOW</b>	<p><b>Summary:</b> Requires employers who are not part of a collective bargaining agreement whereby the health care benefits are no less generous than those provided under the Pennsylvania Health Care Plan shall pay an assessment to the state of 10% of gross payroll. Provides that those employers offering benefits no less generous than the plan shall be excused from paying 90% of the assessment. Effective November 1, 2007.  <a href="http://www.legis.state.pa.us/WU01/LI/BI/BT/2005/0/SB1085P1504.HTM">http://www.legis.state.pa.us/WU01/LI/BI/BT/2005/0/SB1085P1504.HTM</a>  <b>Status:</b> Introduced and referred to Senate Public Health and Welfare Committee February 6, 2006.</p>
<b>Rhode Island</b>	<p><b>Don Carcieri (11/7/06)</b>      R    33   5    60   15    1/3/06 - 6/30/06</p>
<b>REPORTING</b>  <b>RISK: UNCERTAIN</b>	<p><b>RHODE ISLAND H.B. 5789 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Steven Constantino (D)  <b>Summary:</b> Requires the Department of Human Services to prepare an annual report on employers of people who apply for benefits through RItte-Care, RItte Share, and/or Medicaid.  <a href="http://www.rilin.state.ri.us/BillText/BillText05/HouseText05/H5789.htm">http://www.rilin.state.ri.us/BillText/BillText05/HouseText05/H5789.htm</a>  <b>Status:</b> Introduced and referred to House Finance Committee February 17, 2005. Continued by Committee April 6.</p>
<b>REPORTING</b>  <b>RISK: HIGH</b>	<p><b>RHODE ISLAND H.B. 6703 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Eileen Naughton (D)  <b>Summary:</b> Requires Department of Human Services to report all employers who employ 25 or more persons who are beneficiaries of state funded health care programs or who support beneficiaries of such programs. Effective upon passage.  <b>Bill text:</b> <a href="http://www.rilin.state.ri.us/BillText/BillText06/HouseText06/H6703.htm">http://www.rilin.state.ri.us/BillText/BillText06/HouseText06/H6703.htm</a>  <b>Status:</b> Introduced and referred to House Committee on Finance January 4, 2006.</p>
<b>REPORTING</b>  <b>RISK: HIGH</b>	<p><b>RHODE ISLAND H.B. 6796 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Eileen Naughton (D)  <b>Summary:</b> Requires Department of Human Services to, on or before March 1, 2007, transmit to the General Assembly, a report identifying all employers who employ 25 or more persons who are beneficiaries of state funded public health care or who support beneficiaries of state funded public health care. Effective upon passage.  <a href="http://www.rilin.state.ri.us/BillText/BillText06/HouseText06/H6796pdf">http://www.rilin.state.ri.us/BillText/BillText06/HouseText06/H6796pdf</a>  <b>Status:</b> Introduced and referred to Committee on Finance January 17, 2006.</p>
<b>HC MANDATE</b>  <b>RISK: UNCERTAIN</b>	<p><b>RHODE ISLAND H.B. 6917 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Amy Rice (D)  <b>Summary:</b> Creates a Fair Share Health Care Fund. Requires employers of 1,000 or more to report the number of employees and information about the amount spent on payroll and health care benefits. Beginning January 30, 2007, if an employer did not spend at least 8% of total payroll expenses on health care the preceding year, then the employer is responsible for contributing an amount equal to the difference between what was paid and the 8% or \$250,000, whichever is greater, to the Fair Share Health Care Fund. Beginning January 30, 2008, if an employer did not spend at least the average percentage of payroll spent among all Rhode Island employers on health benefits for its employees, then it is responsible for contributing an amount equal to the difference between what was spent and the average percentage of payroll or \$250,000, whichever is greater, to the Fair Share Health Care Fund. Requires the Department of Labor and Training to report annually related information to the Governor and the legislature. Effective upon passage.  <b>Bill text:</b> <a href="http://www.rilin.state.ri.us/Billtext/BillText06/HouseText06/H6917.pdf">http://www.rilin.state.ri.us/Billtext/BillText06/HouseText06/H6917.pdf</a>  <b>Status:</b> Introduced and referred to Committee on Finance January 25, 2006.</p>
<b>HC MANDATE</b>	<p><b>RHODE ISLAND H.B. 6984 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Eileen Naughton (D)</p>

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<p><b>RISK: HIGH</b></p>	<p><b>Summary:</b> Establishes a Fair Share Health Care Fund. Requires non-profit employers of 1,000 or more to spend at least 6% of total payroll on health care expenses for employees; requires for-profit employers to spend at least 8% of total payroll on health care expenses for employees. Requires that the difference between what is actually spent on employee health care and the specified percentage of total payroll be paid into the Fair Share Health Care Fund, which will be used to finance publicly funded health care programs. Requires employers of 1,000 or more to report the number of employees, total payroll expenses and health care expenditures to the Secretary of State. The Secretary of State shall report annually to the legislature and the Governor the names of employers and relevant employee health care information for such employers. Effective upon passage.  <a href="http://www.rilin.state.ri.us/Billtext/BillText06/HouseText06/H6984.pdf">http://www.rilin.state.ri.us/Billtext/BillText06/HouseText06/H6984.pdf</a>  <b>Status:</b> Introduced and referred to Committee on Finance January 31, 2006.</p>									
<p><b>REPORTING</b></p> <p><b>RISK: HIGH</b></p>	<p><b>RHODE ISLAND H.B. 7025 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Steven Constantino (D)  <b>Summary:</b> Requires the Department of Human Services to prepare, on an annual basis, a public health access beneficiary employer report, in order to identify the employer(s) of proposed beneficiaries of health care benefits through Rlte-Care, Rlte Share and/or Medicaid. Effective upon passage.  <a href="http://www.rilin.state.ri.us/BillText/BillText06/HouseText06/H7025.pdf">http://www.rilin.state.ri.us/BillText/BillText06/HouseText06/H7025.pdf</a>  <b>Status:</b> Introduced and referred to Committee on Finance February 1, 2006.</p>									
<p><b>REPORTING</b></p> <p><b>RISK: UNCERTAIN</b></p>	<p><b>RHODE ISLAND S.B. 811 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Charles Levesque (D)  <b>Summary:</b> Requires the Department of Human Services to prepare an annual report containing employment information concerning people who apply for benefits through Rlte Care, Rlte Share, and/or Medicaid.  <a href="http://www.rilin.state.ri.us/Billtext/BillText05/SenateText05/S0811.pdf">http://www.rilin.state.ri.us/Billtext/BillText05/SenateText05/S0811.pdf</a>  <b>Status:</b> Introduced and referred to Senate Committee on Health and Human Services February 17, 2005. Continued by Committee April 27.</p>									
<p><b>REPORTING</b></p> <p><b>RISK: MODERATE</b></p>	<p><b>RHODE ISLAND S.B. 2053 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator John Tassoni (D)  <b>Summary:</b> Requires the Department of Human Services to compile and distribute publicly, through a web-posting and delivery to the General Assembly, a report of all companies that employ 25 or more beneficiaries or individuals with dependents who are beneficiaries of public medical assistance. Effective upon passage.  <a href="http://www.rilin.state.ri.us/BillText/BillText06/SenateText06/S2053.htm">http://www.rilin.state.ri.us/BillText/BillText06/SenateText06/S2053.htm</a>  <b>Status:</b> Introduced and referred to Committee on Finance January 12, 2006.</p>									
<p><b>HC MANDATE</b></p> <p><b>RISK: HIGH</b></p>	<p><b>RHODE ISLAND S.B. 2201 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Juan Pichardo (D)  <b>Summary:</b> Establishes a Fair Share Health Care Fund. Requires employers of 1,000 or more to report the number of employees and the amount spent on employee health care, and the percentage of total payroll spent of health care costs for employees in Rhode Island. Requires such employers to spend 8% of total payroll on employee health care. Provides a penalty of the difference between what was spent and 8% of total payroll or \$250,000, whichever is greater, to be paid into the Fair Share Health Care Fund during 2007. Provides a penalty of the difference between amount spent and the average percentage of total payroll in the state spent on employee health care or \$250,000, whichever is greater, beginning in 2008. Requires the Department of Labor to report annually to the legislature and the Governor the names of such employers, the amount they spent on employee health care that year, and the number of employees eligible for and receiving health care benefits. Effective upon passage.  <a href="http://www.rilin.state.ri.us/Billtext/BillText06/SenateText06/S2201.pdf">http://www.rilin.state.ri.us/Billtext/BillText06/SenateText06/S2201.pdf</a>  <b>Status:</b> Introduced and referred to Committee on Health and Human Services January 26, 2006.</p>									
<p><b>South Carolina</b></p>	<p><b>Mark Sanford (11/7/06)</b></p>	<p>R</p>	<p>20</p>	<p>26</p>	<p></p>	<p>49</p>	<p>74</p>	<p></p>	<p>1</p>	<p>1/10/06 - 6/1/06</p>

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<p><b>COMMISSION</b></p> <p><b>RISK: MODERATE</b></p>	<p><b>SOUTH CAROLINA S.J.R. 243 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Lawrence Grooms (R)  <b>Summary:</b> Creates the South Carolina Commission on Health Care Access to consider a program that will provide a statewide employer coverage option to cover all of the employees in a group plan, and subsidize the premium for individuals and families whose income falls at or below one hundred fifty percent of the federal poverty level. The Commission's objectives would also include developing appropriate legislation that will allow existing and new nonprofit community-based health care programs to raise funds through prepayment fees.  <a href="http://www.scstatehouse.net/sess116_2005-2006/bills/243.htm">http://www.scstatehouse.net/sess116_2005-2006/bills/243.htm</a>  <b>Status:</b> Introduced and referred to Senate Committee on Medical Affairs January 12, 2005. Failed to meet chamber reporting deadline May 1. Carries over to 2006.</p>
<p><b>South Dakota</b></p>	<p><b>Mike Rounds (11/7/06)</b>      R    10    25      19    51      1/10/06 - 3/20/06</p>
<p><b>Tennessee</b></p>	<p><b>Phil Bredezen (11/7/06)</b>      D    16    17      53    46      1/10/06 - 5/31/06</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: UNCERTAIN</b></p>	<p><b>TENNESSEE H.B. 127 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Mike Turner (D)  <b>Summary:</b> Requires employers with 50 or more employees to provide health insurance coverage to full or part time employees that is the same as the health insurance coverage it provides to management level employees or, if none, that meets the minimum requirements for a basic health care plan available to small employers.  <a href="http://www.legislature.state.tn.us/bills/currentga/BILL/HB0127.pdf">http://www.legislature.state.tn.us/bills/currentga/BILL/HB0127.pdf</a>  <b>Status:</b> Introduced in the House February 1, 2005. Referred to Consumer and Employee Affairs Committee February 2. Legislature adjourned May 28. Carries over to 2006 session.  <b>Companion Bill:</b> S.B. 383</p>
<p><b>PAYROLL DEDUCTION</b></p> <p><b>RISK: UNCERTAIN</b></p>	<p><b>TENNESSEE H.B. 2516 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative John DeBerry (D)  <b>Summary:</b> Requires any employer offering employer sponsored health insurance to employees to provide a payroll deduction for the employee portion of such premiums on the request of any participating employee. Effective July 1, 2006.  <a href="http://www.legislature.state.tn.us/bills/currentga/BILL/HB2516.pdf">http://www.legislature.state.tn.us/bills/currentga/BILL/HB2516.pdf</a>  <b>Status:</b> Prefiled January 20, 2006.</p>
<p><b>REPORTING</b></p> <p><b>RISK: UNCERTAIN</b></p>	<p><b>TENNESSEE S.B. 72 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator John Ford (D)  <b>Summary:</b> Requires TennCare applicants to identify their employers or the employers of any person financially responsible for the person receiving TennCare and requires the department of finance and administration to annually report to the general assembly and to the public those employers with 25 or more employees who applied for TennCare in the last year. ~<a href="http://www.legislature.state.tn.us/bills/currentga/BILL/SB0072.pdf">http://www.legislature.state.tn.us/bills/currentga/BILL/SB0072.pdf</a>  <b>Status:</b> Introduced in Senate January 31, 2005. Referred to Senate Committee on Health and Human Resources February 2.</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>TENNESSEE S.B. 383 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Tommy Kilby (D)  <b>Summary:</b> Requires employers with 50 or more employees to provide health insurance coverage to full or part time employees that is the same as the health insurance coverage it provides to management level employees or, if none, that meets the minimum requirements for a basic health care plan available to small employers.  <a href="http://www.legislature.state.tn.us/bills/currentga/BILL/SB0383.pdf">http://www.legislature.state.tn.us/bills/currentga/BILL/SB0383.pdf</a>  <b>Status:</b> Introduced in the Senate February 1, 2005. Referred to Commerce, Labor and Agriculture Committee February 7. Assigned to General</p>

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<b>Companion Bill: H.B. 127</b>											
<b>Texas</b>	<b>Rick Perry (11/7/06)</b>	R	12	19			62	86		2	No regular 2006 session
<b>Utah</b>	<b>Jon Huntsman, Jr. (11/4/08)</b>	R	8	21			19	56			1/16/06 - 3/1/06
<b>Vermont</b>	<b>Jim Douglas (11/7/06)</b>	R	21	9			83	60	7		1/4/06 - 6/9/06
<b>REPORTING</b>	<b>VERMONT H.B. 125 - EMPLOYER FINANCED HEALTH CARE</b>										
<b>RISK: LOW</b>	<p><b>Sponsor:</b> Representative Robert Kiss (P)</p> <p><b>Summary:</b> Requires the Secretary of Human Services to report on all employers who employ individuals who are beneficiaries of state health or medical programs. Effective upon becoming a law.</p> <p><a href="http://www.leg.state.vt.us/docs/legdoc.cfm?URL=/docs/2006/bills/intro/H-125.HTM">http://www.leg.state.vt.us/docs/legdoc.cfm?URL=/docs/2006/bills/intro/H-125.HTM</a></p> <p><b>Status:</b> Introduced and referred to House Human Services Committee January 28, 2005. Legislature adjourned June 4. Carries over to 2006.</p>										
<b>HC MANDATE</b>	<b>VERMONT H.B. 216 - EMPLOYER FINANCED HEALTH CARE</b>										
<b>RISK: MODERATE</b>	<p><b>Sponsor:</b> Representative Michael Fisher (D)</p> <p><b>Summary:</b> Establishes the Vermont Health Care Plan as a universally accessible, comprehensive, publicly administered health benefit plan offering care and treatment to all Vermont residents. Requires all employers, including all agencies or instrumentalities of the state, must pay a tax on total gross annual payroll in excess of \$20,000.00. Provides that the rates of tax will be fixed to raise the same aggregate amount that would have been spent by employers on health care premiums and other health care expenditures in the first year the tax established by this section takes effect.</p> <p><a href="http://www.leg.state.vt.us/docs/legdoc.cfm?URL=/docs/2006/bills/intro/H-216.HTM">http://www.leg.state.vt.us/docs/legdoc.cfm?URL=/docs/2006/bills/intro/H-216.HTM</a></p> <p><b>Status:</b> Introduced and referred to House Health Care Committee February 10, 2005. Legislature adjourned June 4. Carries over to 2006.</p>										
<b>REPORTING</b>	<b>VERMONT H.B. 467 - EMPLOYER FINANCED HEALTH CARE</b>										
<b>RISK: LOW</b>	<p><b>Sponsor:</b> Representative Johannah Leddy Donovan (D)</p> <p><b>Summary:</b> Authorizes the office of Vermont Health Access to conduct a study to determine which employers employ individuals or their dependents who receive coverage through the Vermont Health Access Plan (VHAP). The study shall include whether the employer offers health insurance coverage, the premium and other cost-sharing of such insurance to the employee, the cost of the insurance to the employer, and any practices of the employer which encourage employees to apply for VHAP.</p> <p><a href="http://www.leg.state.vt.us/docs/legdoc.cfm?URL=/docs/2006/bills/intro/H-467.HTM">http://www.leg.state.vt.us/docs/legdoc.cfm?URL=/docs/2006/bills/intro/H-467.HTM</a></p> <p><b>Status:</b> Introduced and referred to Health Care Committee March 8, 2005. Legislature adjourned June 4. Carries over to 2006.</p>										
<b>HC MANDATE</b>	<b>VERMONT H.B. 485 - EMPLOYER FINANCED HEALTH CARE</b>										
<b>RISK: LOW</b>	<p><b>Sponsor:</b> Representative Michael J. Obuchowski (D)</p> <p><b>Summary:</b> Establishes the Vermont Health Care Plan as a universally accessible, comprehensive, publicly administered health benefit plan offering care and treatment to all Vermont residents. Provides financing through all federal receipts for health care purposes, including all Medicaid receipts. Creates a universal hospital access fund special committee to determine the appropriate funding mechanisms for the Vermont health care plan and will consider at a minimum the following funding sources: an income tax, a payroll tax, premiums or cost-sharing measures, a value-added tax, or another consumption tax. Requires the Secretary of Human Services to apply for a federal Medicare waiver no later than July 1, 2005 to allow the state to include Medicare funds for hospital services in the health access trust fund and to modify the payment standards or amounts in order to include Medicare funds in the global hospital budget.</p> <p><a href="http://www.leg.state.vt.us/docs/legdoc.cfm?URL=/docs/2006/bills/intro/H-485.HTM">http://www.leg.state.vt.us/docs/legdoc.cfm?URL=/docs/2006/bills/intro/H-485.HTM</a></p> <p><b>Status:</b> Introduced and referred to House Health Care Committee March 8, 2005. Legislature adjourned June 4. Carries over to 2006.</p>										



<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>VERMONT S.B. 147 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Ed Flanagan (D)  <b>Summary:</b> Establishes the Vermont Health Care Plan as a universally accessible, comprehensive, publicly administered health benefit plan offering care and treatment to all Vermont residents. Provides that an employer health insurance tax is imposed upon every person who is required to withhold income taxes from payments of income with respect to services. Provides the rate of tax of 2.5% will be applied to the total amount of wages subject to withholding in the taxable year. Provides the tax will be paid in the same manner as income withholding and will be subject to administrative and enforcement provisions of this chapter. Provides that revenues from this tax will be deposited into the Vermont Health Access Trust Fund. Provides regulations for pharmacy benefit managers.  <a href="http://www.leg.state.vt.us/docs/legdoc.cfm?URL=/docs/2006/bills/intro/S-147.HTM">http://www.leg.state.vt.us/docs/legdoc.cfm?URL=/docs/2006/bills/intro/S-147.HTM</a>  <b>Status:</b> Introduced and referred to Senate Health and Welfare Committee March 17, 2005. Legislature adjourned June 4. Carries over to 2006.</p>									
<p>Virginia</p>	<p>Tim Kaine (Lame duck, 11/3/09)</p>	<p>D</p>	<p>16</p>	<p>24</p>	<p></p>	<p>39</p>	<p>58</p>	<p>3</p>	<p></p>	<p>1/11/06 - 3/11/06</p>
<p><b>COMMISSION</b></p> <p><b>RISK: MODERATE</b></p>	<p><b>VIRGINIA H.J. 37 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Delegate Harry Purkey (R)  <b>Summary:</b> Directs the Joint Legislative Audit and Review Commission to study the Commonwealth's uninsured population. The study is to address the number of uninsured Virginians, the reasons they do not have health insurance, the duration of periods of being without insurance, their eligibility for health insurance coverage or government health care programs, the health services they utilize, and the effect that the provision of these health services has on private health insurance premiums and government spending. Effective July 1, 2006.  <b>Bill text:</b> <a href="http://leg1.state.va.us/cgi-bin/legp504.exe?061+ful+HJ37">http://leg1.state.va.us/cgi-bin/legp504.exe?061+ful+HJ37</a>  <b>Status:</b> Prefiled January 4, 2006. Introduced and referred to the Committee on Rules January 11.</p>									
<p>Washington</p>	<p>Christine Gregoire (11/4/08)</p>	<p>D</p>	<p>26</p>	<p>23</p>	<p></p>	<p>55</p>	<p>43</p>	<p></p>	<p></p>	<p>1/9/06 - 3/15/06</p>
<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>WASHINGTON H.B. 1702 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Eileen Cody (D)  <b>Summary:</b> Declares an intent to: (1) Expand access to health care by increasing the number of large employers who provide health benefits to their employees and imposing a fee on large employers who do not offer such benefits. (2) Maintain existing protections in law for persons eligible for medical assistance programs, the state children's health insurance program, and the basic health plan.  <a href="http://www.leg.wa.gov/pub/billinfo/2005-06/Htm/Bills/House%20Bills/1702.htm">http://www.leg.wa.gov/pub/billinfo/2005-06/Htm/Bills/House%20Bills/1702.htm</a>  <b>Status:</b> Introduced and referred to House Health Care Committee February 2, 2005. Hearing held February 17. Passed by committee February 24.  <b>Companion Bill:</b> 2005 S.B. 5637</p>									
<p><b>HC MANDATE</b></p> <p><b>RISK: HIGH</b></p>	<p><b>WASHINGTON H.B. 2517 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Eileen Cody (D)  <b>Summary:</b> Provides that on July 1, 2007, and each following July 1st, every employer in the state shall report the following information to the Director of Labor and Industries: the employer's health care services expenditures in the preceding calendar year and the employer's payroll in the preceding calendar year. Requires that an employer shall either: (a) spend at least nine percent of the employer's payroll on health care services expenditures; or (b) pay to the Director an amount equal to the difference between the employer's health care services expenditures and an amount equal to nine percent of the employer's payroll. Defines employer as having 5,000 or more employees. Effective July 1, 2007.  <a href="http://www.leg.wa.gov/pub/billinfo/2005-06/Pdf/Bills/House%20Bills/2517.pdf">http://www.leg.wa.gov/pub/billinfo/2005-06/Pdf/Bills/House%20Bills/2517.pdf</a>  <b>Status:</b> Introduced, first read and referred to House Committee on Commerce and Labor January 10, 2006. Hearing held January 19. Executive session in committee January 26. The Committee voted 5-4 to recommend the bill on January 27. Passed to Rules Committee January 30.</p>									

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	<b>Companion Bill:</b> 2006 S.B. 6356
<b>REPORTING</b>  <b>RISK: HIGH</b>	<p><b>WASHINGTON H.B. 3079 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Representative Steve Conway (D)</p> <p><b>Summary:</b> Requires the Health Care Authority, in coordination with the Department of Social and Health Services, to prepare an annual report on the employment status of Medicaid and basic health plan enrollees. Provides that the report include the following information: the number of employees with multiple employers; the size of the employer; the number of employees by employer; and the number of employees who chose the basic health plan instead of insurance coverage offered by their employer. Effective November 15, 2006  <a href="http://www.leg.wa.gov/pub/billinfo/2005-06/Pdf/Bills/House%20Bills/3079.pdf">http://www.leg.wa.gov/pub/billinfo/2005-06/Pdf/Bills/House%20Bills/3079.pdf</a></p> <p><b>Status:</b> Introduced, first read and referred to House Health Care Committee January 19, 2006. <u>Hearing held January 31. Executive session in committee and recommended to pass February 2. Re-referred to Appropriations Committee February 3. Hearing held, substituted and recommended to pass February 4. Passed to Rules Committee February 7.</u></p>
<b>HC MANDATE</b>  <b>RISK: MODERATE</b>	<p><b>WASHINGTON S.B. 5637 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Karen Keiser (D)</p> <p><b>Summary:</b> Current version (February 28) requires expanded access to health care by increasing the number of large employers who provide health benefits to their employees and imposing a fee on large employers who do not offer such benefits. Fee revenues will be used to fund basic health plan coverage for as many employees of employers paying the fee as the fee revenues can support. However, consistent with this act, large employers can reduce or eliminate their fee through expenditures on health services for their employees.  <u>Substitute version:</u> <a href="http://www.leg.wa.gov/pub/billinfo/2005-06/Htm/Bills/Senate%20Bills/5637-S.htm">http://www.leg.wa.gov/pub/billinfo/2005-06/Htm/Bills/Senate%20Bills/5637-S.htm</a></p> <p>committee February 28. Rereferred to Ways and Means Committee March 2. Failed to meet committee reporting deadline March 7. Failed to meet crossover deadline March 16. Carries over to 2006. Reintroduced January 9, 2006. The bill failed to meet the February 7, 2006 committee reporting deadline.</p> <p><b>Companion Bill:</b> 2005 H.B. 1702</p>
<b>HC MANDATE</b>  <b>RISK: HIGH</b>	<p><b>WASHINGTON S.B. 6356 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Jeanne Kohl-Welles (D)</p> <p><b>Summary:</b> Current version (February 3) provides that on July 1, 2007, and each following July 1st, every employer in the state shall report the following information to the Director of Labor and Industries: the employer's health care services expenditures in the preceding calendar year and the employer's payroll in the preceding calendar year. Requires that an employer shall either: (a) spend at least nine percent of the employer's payroll on health care services expenditures; or (b) pay to the Director an amount equal to the difference between the employer's health care services expenditures and an amount equal to nine percent of the employer's payroll. Defines employer as having 5,000 or more employees. Effective July 1, 2007.  <u>Current version:</u> <a href="http://www.leg.wa.gov/pub/billinfo/2005-06/Pdf/Bills/Senate%20Bills/6356-S.pdf">http://www.leg.wa.gov/pub/billinfo/2005-06/Pdf/Bills/Senate%20Bills/6356-S.pdf</a></p> <p><b>Status:</b> Introduced, first read and referred to Senate Labor, Commerce, Research &amp; Development Committee January 11, 2006. Public hearing held January 19. <u>Executive session held February 1. Substituted, recommended to pass and referred to Rules Committee February 3.</u></p> <p><b>Companion Bill:</b> 2006 H.B. 2517</p>
<b>REPORTING</b>  <b>RISK: HIGH</b>	<p><b>WASHINGTON S.B. 6759 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator Karen Keiser (D)</p> <p><b>Summary:</b> Requires the Department of Social and Health Services to prepare an annual report on the employment status of Medicaid and basic health plan enrollees. Provides that the report include the number of employees who are recipients of medical assistance. Effective November 15, 2006.  <a href="http://www.leg.wa.gov/pub/billinfo/2005-06/Pdf/Bills/Senate%20Bills/6759.pdf">http://www.leg.wa.gov/pub/billinfo/2005-06/Pdf/Bills/Senate%20Bills/6759.pdf</a></p> <p><b>Status:</b> Introduced, first read and referred to Senate Health &amp; Long-Term Care Committee January 20, 2006. Hearing held January 30. Executive session held, substituted and recommended to pass February 1. Re-referred to Ways &amp; Means Committee February 2.</p>

		West Virginia	Joe Manchin III (11/4/08)	D	21	13		68	32			1/11/06 - 3/12/06
HC MANDATE	<b>WEST VIRGINIA H.B. 4024 - EMPLOYER FINANCED HEALTH CARE</b>											
RISK: HIGH	<p><b>Sponsor:</b> Delegate Bonnie Brown (D)</p> <p><b>Summary:</b> Requires employers with more than 10,000 employees in the state who spend less than 6% (non-profits) or 8% (for-profits) of their state payroll for employee health care, to pay to the Commissioner of Labor for deposit into the Medical Services Trust Fund, an amount equal to the difference between what the employer spends for health insurance costs and an amount equal to six or eight percent, respectively, of the total wages paid for health care costs. Imposes reporting requirements on covered employers and on the Commissioner. Provides civil penalties on employers who delay or fail to report the required information and/or fail to pay the assessment. Effective on the ninetieth day after enactment.</p> <p><a href="http://www.legis.state.wv.us/Bill_Text_HTML/2006_SESSIONS/RS/BILLS/hb4024%20intr.htm">http://www.legis.state.wv.us/Bill_Text_HTML/2006_SESSIONS/RS/BILLS/hb4024%20intr.htm</a></p> <p><b>Status:</b> Introduced and referred to House Health and Human Resources Committee January 16, 2006. Hearing held January 25.</p> <p><b>Companion Bill:</b> 2006 S.B. 147</p>											
HC MANDATE	<b>WEST VIRGINIA S.B. 147 - EMPLOYER FINANCED HEALTH CARE</b>											
RISK: HIGH	<p><b>Sponsor:</b> Senator Jon Blair Hunter (D)</p> <p><b>Summary:</b> Requires employers with more than 10,000 employees in the state who spend less than 6% (non-profits) or 8% (for-profits) of their state payroll for employee health care, to pay to the Commissioner of Labor for deposit into the Medical Services Trust Fund, an amount equal to the difference between what the employer spends for health insurance costs and an amount equal to six or eight percent, respectively, of the total wages paid for health care costs. Imposes reporting requirements on covered employers and on the Commissioner. Provides civil penalties on employers who delay or fail to report the required information and/or fail to pay the assessment. Effective on the ninetieth day after enactment.</p> <p><a href="http://www.legis.state.wv.us/Bill_Text_HTML/2006_SESSIONS/RS/BILLS/sb147%20intr.htm">http://www.legis.state.wv.us/Bill_Text_HTML/2006_SESSIONS/RS/BILLS/sb147%20intr.htm</a></p> <p><b>Status:</b> Introduced and referred to Senate Labor Committee January 13, 2006.</p> <p><b>Companion Bill:</b> 2006 H.B. 4024</p>											
		Wisconsin	James Doyle (11/7/06)	D	14	19		39	60			1/17/060 - 5/4/06
HC MANDATE	<b>WISCONSIN A.B. 508 - EMPLOYER FINANCED HEALTH CARE</b>											
RISK: LOW	<p><b>Sponsor:</b> Representative Terese Berceau (D)</p> <p><b>Summary:</b> Imposes a tax on every retailer engaged in business in this state who has gross receipts from the sale of tangible personal property or taxable services exceeding \$20,000,000 in the taxable year from any location in this state and who pays health care costs for the retailer's employees in an amount that represents less than 10 percent of the retailer's payroll, if the annual compensation that the retailer pays to each of the retailer's entry-level employees who hold a full-time job is less than \$22,000 or if, as averaged for the taxable year, more than 25 percent of the retailer's employees are not holding full-time jobs. The revenue generated by the tax is deposited into the Medical Assistance trust fund.</p> <p><a href="http://www.legis.state.wi.us/2005/data/AB-508.pdf">http://www.legis.state.wi.us/2005/data/AB-508.pdf</a></p> <p><b>Status:</b> Introduced and referred to the Joint Committee on Finance June 25, 2005.</p>											
HC MANDATE	<b>WISCONSIN A.B. 860 - EMPLOYER FINANCED HEALTH CARE</b>											
RISK: LOW	<p><b>Sponsor:</b> Representative Terese Berceau (D)</p> <p><b>Summary:</b> Imposes an assessment on employers with 10,000 or more employees that do not provide subsidized health care coverage for their employees. Establishes that the value of the assessment will be determined by the Department of Health and Family Services, using a methodology that is based upon several factors, including increases in uncompensated care costs and enrollment in state-funded health assistance programs that can be attributed to the lack of employer coverage.</p> <p>Full text: <a href="http://www.legis.state.wi.us/2005/data/AB-860.pdf">http://www.legis.state.wi.us/2005/data/AB-860.pdf</a></p> <p><b>Status:</b> Introduced and referred to Committee on Labor December 8, 2005. Hearing held January 18, 2006.</p>											

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<p><b>HC MANDATE</b></p> <p><b>RISK: LOW</b></p>	<p><b>WISCONSIN S.B. 440 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Senator David Hansen (D)  <b>Summary:</b> Requires an employer employing 10,000 or more full-time or part-time employees in this state that does not provide family health care coverage under a group health insurance plan for which the large employer pays at least 80 percent of the cost, excluding deductibles and copayments, (employer-subsidized health care coverage) to all of its full-time and part-time employees to pay to the Department of Health and Family Services (DHFS) an assessment that is equal to the cost incurred by society as a result of the employer not providing that coverage and requires DHFS to deposit any assessments collected under the bill in the Medical Assistance trust fund.  <a href="http://www.legis.state.wi.us/2005/data/SB-440.pdf">http://www.legis.state.wi.us/2005/data/SB-440.pdf</a>  <b>Status:</b> Introduced referred to Committee on Agriculture and Insurance November 16, 2005.</p>									
<p><b>Wyoming</b></p>	<p><b>Dave Freudenthal</b> (11/7/06)</p>	<p>D</p>	<p>7</p>	<p>23</p>			<p>14</p>	<p>46</p>		<p>2/13/06 - 3/10/06</p>
<p><b>MEDICAID</b></p> <p><b>RISK: MODERATE</b></p>	<p><b>WYOMING H.B. 35 - EMPLOYER FINANCED HEALTH CARE</b>  <b>Sponsor:</b> Joint Labor, Health and Social Services Interim Committee  <b>Summary:</b> Provides that parents or guardians of children enrolled in the state children's health insurance program (SCHIP) or the state medical assistance program may be eligible for participation in the programs, pending approval of a waiver by the United States Department of Health and Human Services. Provides eligibility requirements, including that one of the parents or guardians is working at a full or part-time job, and also that the employer of the participating parent or guardian agrees to pay at least one-half of the monthly premiums of the health insurance plan. Includes participation fees for parents or guardians based on level of income. Effective July 1, 2006.  <a href="http://legisweb.state.wy.us/2006/Introduced/HB0035.pdf">http://legisweb.state.wy.us/2006/Introduced/HB0035.pdf</a>  <b>Status:</b> Filed December 20, 2005. Session begins 2/13/06.</p>									