

105TH CONGRESS
2^D SESSION

H. CON. RES. 272

Expressing the sense of the House on health care quality.

IN THE HOUSE OF REPRESENTATIVES

MAY 6, 1998

Mr. ARMEY submitted the following concurrent resolution; which was referred to the Committee on Commerce

CONCURRENT RESOLUTION

Expressing the sense of the House on health care quality.

1 *Resolved by the House of Representatives (the Senate*
2 *concurring),*

3 **SECTION 1. SENSE OF THE HOUSE ON HEALTH CARE QUAL-**
4 **ITY.**

5 (a) FINDINGS.—The House makes the following find-
6 ings:

7 (1) Rapid changes in the health care market-
8 place have compromised confidence in the our Na-
9 tion's health system.

10 (2) American consumers want more conven-
11 ience, fewer hassles, more choices, and better service
12 from their health insurance plans.

1 (3) All Americans deserve quality-driven health
2 care supported by sound science and evidence-based
3 medicine.

4 (4) The Federal Government, through the Na-
5 tional Institutes of Health, supports research that
6 improves the quality of medical care that Americans
7 receive.

8 (5) The House is likely to consider proposals to
9 increase funding for the National Institutes of
10 Health substantially in 1999.

11 (6) As the largest purchaser of health care serv-
12 ices, the Federal Government has a responsibility to
13 utilize its purchasing power to demand high quality
14 health plans and providers for its health programs
15 and to protect its beneficiaries from inferior medical
16 care.

17 (7) The Federal Government must adopt the
18 posture of private sector purchasers and insist on
19 high quality care for the 67,000,000 medicare and
20 medicaid beneficiaries and the 9,000,000 Federal
21 employees, retirees, and their dependents.

22 (8) The private sector has proven to be more
23 capable of keeping pace with the rapid changes in
24 health care delivery and medical practice that affect

1 quality of care considerations than the Federal Gov-
2 ernment.

3 (9) As Congress considers health care legisla-
4 tion, it must first commit to “do no harm” to health
5 care quality, consumers, and the evolving market
6 place. Rushing to legislate or regulate based on an-
7 ecdotal information and micro-managing health
8 plans on politically popular issues will not solve the
9 problems of consumer confidence and the quality of
10 our health care system.

11 (10) When health insurance premiums rise,
12 Americans lose health coverage. Studies indicate
13 that a 1 percent increase in private health insurance
14 premiums will be associated with an increase in the
15 number of persons without insurance of about
16 400,000 persons.

17 (11) Health care costs have begun to rise sig-
18 nificantly in the past year. The Congressional Budg-
19 et Office (referred to as “CBO”) projects that the
20 growth in health premiums will be 5.5 percent in
21 1998 up from 3.8 percent in 1997. CBO continues
22 to project that premiums will grow about 1 percent-
23 age point faster than the Gross Domestic Product in
24 the longer run. CBO also warns that new Federal

1 mandates on health insurance could exacerbate this
2 increase in premiums.

3 (12) The President's Advisory Commission on
4 Consumer Protection and Quality in the Health
5 Care Industry developed the Consumer Bill of
6 Rights and Responsibilities. This includes informa-
7 tion disclosure, confidentiality of health information,
8 and choice of providers.

9 (13) The President's Commission further deter-
10 mined that private sector organizations have the ca-
11 pacity to act in a timely manner needed to keep pace
12 with the swiftly evolving health system.

13 (b) SENSE OF THE HOUSE.—It is the sense of the
14 House that Congress should not pass any health care leg-
15 islation that will—

16 (1) make health insurance unaffordable for
17 working families and increase the number of unin-
18 sured Americans;

19 (2) divert limited health care resources away
20 from serving patients to paying lawyers and hiring
21 new bureaucrats; or

22 (3) impose political considerations on clinical
23 decisions, instead of allowing such decisions to be

- 1 made on the basis of sound science and the best in-
- 2 terests of patients.

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