

FIRST REGULAR SESSION

# HOUSE BILL NO. 423

## 96TH GENERAL ASSEMBLY

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INTRODUCED BY REPRESENTATIVES BURLISON (Sponsor), JONES (89), SCHOELLER, TILLEY, DIEHL, MOLENDORP, HOUGHTON, SILVEY, ASBURY, KOENIG, SMITH (150), ALLEN, LEACH, WYATT, FREDERICK, RUZICKA, HAMPTON, LICHTENEGGER, DAVIS, CURTMAN, WHITE, RIDDLE, KELLEY (126), REIBOLDT, LANT, ZERR, LONG, WELLS, CRAWFORD, DUGGER, ENTLICHER, LAIR, STREAM, THOMSON, FISHER, SCHAD, FITZWATER, MCGHEE, GATSCHENBERGER, HAEFNER, CAUTHORN, WIELAND, RICHARDSON, KLIPPENSTEIN, BERRY, BRATTIN, NETH, WALLINGFORD, BARNES, McNARY, ELMER AND FLANIGAN (Co-sponsors).

1030L.011

D. ADAM CRUMBLISS, Chief Clerk

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### AN ACT

To amend chapter 191, RSMo, by adding thereto one new section relating to the health care compact.

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*Be it enacted by the General Assembly of the state of Missouri, as follows:*

Section A. Chapter 191, RSMo, is amended by adding thereto one new section, to be known as section 191.025, to read as follows:

**191.025. The Health Care Compact is enacted into law and entered into by the state as a party, and is of full force and effect between the state and any other states joining therein in accordance with the terms of the Compact, which such Compact is as follows:**

**Section 1. Definitions. For purposes of this Compact:**

"Member state" shall refer to a state that is signatory to this Compact and has adopted it under the laws of that state.

"Effective date" shall refer to the date upon which this Compact shall become effective for purposes of the operation of state and federal law in a Member State, which shall be the latter of:

(a) the date upon which this Compact shall be adopted under the laws of the Member State;

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

9 (b) the date upon which this Compact receives the consent of Congress pursuant  
10 to Article I, Section 10, of the Constitution, such consent itself requiring this Compact to  
11 have been adopted by at least two Member States.

12 "Health care" shall refer to all health care goods and services that fall under the  
13 definition of "health care" in Title 45, Part 160, Section 103 of the Code of Federal  
14 Regulations, except those provisions by the Department of Defense and Veterans  
15 Administration.

16 "Commission" shall refer to the Interstate Advisory Health Care Commission.

Section 2. Pledge. All Member States pledge themselves to take joint and separate  
2 action to secure the consent of Congress to this Compact in order to return the authority  
3 to regulate health care to the Member States, consistent with the goals and principles  
4 articulated herein. All Member States further pledge themselves to improve health care  
5 policy within their respective jurisdictions and according to the judgment and discretion  
6 of each Member State.

Section 3. Legislative Power. The legislatures of the Member States have the  
2 primary responsibility to regulate health care in their respective states.

Section 4. State Control. By consenting to this Compact, Congress agrees that each  
2 Member State shall have the authority to enact state laws that supersede any federal  
3 regulations within the state in the area of health care. Federal law will remain in effect  
4 unless a Member State expressly invokes its authority under this Compact.

Section 5. Funding. Each Member State shall have the right to federal funds,  
2 appropriated by Congress pursuant to the formula described in Attachment A, to support  
3 the exercise of Member State authority under this Compact.

Section 6. Interstate Advisory Health Care Commission. The Member States  
2 hereby create the Interstate Advisory Health Care Commission.

3 (a) The Commission may study the issues of health care regulation of particular  
4 concern to the Member States. After careful consideration, the Commission may make  
5 nonbinding recommendations to the Member States. The legislatures of the Member States  
6 may then consider these recommendations in determining the appropriate health care  
7 policy in their respective states.

8 (b) The Commission shall collect information and data to assist the Member States  
9 in their regulation of health care, including, but not limited to, assessing the performance  
10 of various state health care programs and compiling information on the cost of health care.  
11 The Commission shall then make this information available to the legislatures of the  
12 Member States.

13 (c) The Commission shall consist of members appointed by each Member State  
14 through a process to be determined by the laws of each Member State. No state may  
15 appoint more than two members to the Commission, and at any time a Member State may  
16 withdraw its members from the Commission. Each member of the Commission shall be  
17 entitled to one vote. The Commission shall not act unless a majority of the members are  
18 present, and no action shall be binding unless approved by a majority of the total number  
19 of members.

20 (d) The Commission may elect from among its membership a Chairman. The  
21 Commission may adopt and publish bylaws and policies which are not inconsistent with  
22 this Compact. The Commission will meet at least once a year, and may meet more  
23 frequently, as its bylaws direct.

24 (e) The Commission shall be funded by the Member States as the Member States  
25 may agree. The Commission shall have all the responsibilities and duties set forth herein,  
26 and such additional responsibilities and duties as may be conferred upon it by subsequent  
27 action of the respective legislatures of the Member States in accordance with the terms of  
28 this Compact.

Section 7. Congressional Consent. This Compact shall be effective upon its  
2 adoption by the Member States and consent of Congress. This Compact shall not be  
3 effective unless Congress, in consenting to this Compact, does not alter the fundamental  
4 purposes of this Compact:

5 (a) To secure the right of the Member States to regulate health care in their  
6 respective states and to supersede any conflicting federal law within their states; and

7 (b) To secure federal funding for Member States that choose to invoke their  
8 authority under this Compact, pursuant to the formula described in Attachment A.

Section 8. Amendments. This Compact may be amended by agreement among the  
2 Member States and adoption of such agreement into the laws of the Member States. By  
3 consenting to this Compact, Congress also consents to any amendments that directly or  
4 indirectly impact the regulation of health care in the Member States. For all other  
5 amendments, further consent of Congress is expressly required. Variations in Attachment  
6 A between Member States will not prevent this Compact from becoming an effective and  
7 operational agreement between the states.

Section 9. Withdrawal; Dissolution. Any Member State may withdraw from this  
2 Compact by adopting a law to that effect. This Compact shall be dissolved upon the  
3 withdrawal of all but one of the Member States.