Office of the Ombudsman

Pennsylvania Health Care Board

Advisory Committee

- Independent of the Agency
- Handle all complaints not resolved through the Agency resolution process
- Make recommendations to the Board

- Chairperson appointed by the Governor
- Board comprised of 15 members total 14 appointed by the Advisory Committee
- Chairperson salary will be set by Executive Board
- Board shall:
 - Governance and oversight of the Agency, Trust Fund, Quality of Care Panels and Ombudsman
 - Appoint members for the Quality of Care Panels
 - Set Plan policy
 - Oversee Plan administration
 - Adopt the benefits package for the Plan
 - Ensure sufficiency of Plan revenues
 - Work with Legislature to establish and maintain statutory authority

Shall be comprised of:

- President Pro Tempore of the Senate or designee
- Minority Leader of the Senate or designee
- Speaker of House of Representatives or designee
- Minority Leader of House or Representatives or designee
- Secretary of Health or designee
- Secretary of Aging or designee
- Secretary of Human Services or designee
- Insurance Commissioner or designee
- Secretary of Labor and Industry or designee

Responsibilities:

- Appoint 14 members of the Board
- Recommend to the Board candidates for the Quality of Care Panels
- Recommend candidates for Ombudsman

PA Health Care Agency

- Executive Director appointed by the Board
- Adopt the Health Care Plan standards and regulations
 - Adopt standards and regulations
 - Ensure compliance of member eligibility
 - Recommend covered services
 - Implement services reimbursement rates
 - Certify eligibility of licensed healthcare practitioners under the Plan
 - Ensure timely reimbursement to licensed healthcare practitioners
 - Establish process for revision of services and reimbursement rate
 - Ongoing review of technology and protocols
 - Make recommendations to the Board for revisions to Plan Policy
 - Ensure compliance of licensed healthcare practitioners with Plan Policy and standards
- Administer all operations of the Plan on day to day basis
 - Receive from licensed healthcare practitioners invoices for services
 - Reimburse licensed healthcare practitioners for services
 - Audit compliance of services to Plan standards
 - Establish a dispute resolution process
 - Maintain and staff Plan member services customer support

Quality of Care Panels

- Established under the authority of the Board
- A Board member will serve as Chair of the Panel
- Panels shall consist of:
 - o Health Professional Panel
 - Health Institution Panel
 - Health Supplier Panel
- Responsible for development of policy recommendations to the Board
- Staffed as required to provide documentation and evidenced based health care recommendations to the Board
- Work continually with the PA Health Care Agency to adopt and revise Plan standards and regulations

Pennsylvania Health Care Trust Fund

- Established within the State Treasury
- All money collected and received by the Plan shall be transmitted to the State Treasurer for deposit into the fund and used exclusively to finance the Plan
- The State Treasurer may invest the principal and interest earned by the fund
- The PA Health Care Agency budget shall comprise the cost of the agency, covered services, Quality of Care Panels, Office of the Ombudsman, PA Health Care Board and PA Health Care Trust Fund
- Responsible for managing tax receipts and disbursements
- Work with Dept. of Revenue to ensure collection of taxes provided under the Plan
- Develop appropriate financial reports of the status of the trust fund
- Project sufficiency of Plan revenues compared to expenditures
- Personal Income tax of 3% (no co-pays no deductibles no premiums)*
- Employer payment of 10% of payroll tax
- * A resident of PA that files a PA income tax return and any dependent of the resident is eligible to enroll in the Plan

Helpful Information and Links

Definitions of Universal Health Care:

"Universal health coverage (UHC) means that all people and communities can use the promotive, preventive, curative, rehabilitative and palliative health services they need, of sufficient quality to be effective, while also ensuring that the use of these services does not expose the user to financial hardship." – World Health Organization (WHO)

Definition of Single Payer Health Care:

"Single-payer national health insurance, also known as "Medicare for all," is a system in which a single public or quasi-public agency organizes health care financing, but the delivery of care remains largely in private hands." – Physicians for a National Health Program (PNHP)

"Universal Coverage Is Not "Single Payer" Healthcare"

By: Dan Munro

Forbes, December 8, 2013

https://www.forbes.com/sites/danmunro/2013/12/08/universal-coverage-is-not-single-payer-healthcare/#2e5662d036ee

"A Brief History: Universal Health Care Efforts in the US"

By: Physicians for a National Health Program (PNHP)

http://www.pnhp.org/facts/a-brief-history-universal-health-care-efforts-in-the-us

"Fix It: Healthcare at the Tipping Point" - A Film

https://www.youtube.com/watch?v=KS-olhBvEkc

The Legislation: HB1688 - http://www.legis.state.pa.us/cfdocs/billInfo/billInfo.cfm?sYear=2015&sInd=0&body=H&type=B&bn=1688