

The Wisconsin Health Care Partnership Plan

A LABOR-MANAGEMENT PARTNERSHIP SOLUTION TO OUR HEALTH CARE CRISIS

Structure: The Wisconsin Health Care Partnership Plan will cover all private- and public-sector employees and their dependents in the state. Self-employed workers, farmers and early retirees could purchase the same insurance at cost through a separate community-rated pool.

Coverage: The Plan will provide all medically necessary care, including mental health treatment and prescription drugs, with no exclusions for pre-existing conditions. There will be no maximum coverage limits, and individuals will have their choice of providers.

Financing: Costs will be split between employers and employees in a fair manner that keeps administrative costs to a minimum. Employers in both the private and public sectors will pay a flat fee per employee per month. Employees will be responsible for deductibles and co-pays.

Oversight: A Labor-Management Commission will:

- Develop the details of the Plan, within parameters set by legislation;
- Solicit bids to administer the Plan;
- Set fair reimbursement rates for hospitals and medical providers, with incentives to adopt generally accepted best practice and quality measures;
- Adjust employer-paid monthly assessments and employee co-pays and deductibles as needed; and
- Make changes in Plan benefits and financing as needed.

In the 2005-06 Session, the Wisconsin Health Care Partnership Plan was introduced as Senate Bill 698, co-sponsored by State Senator Russ Decker (D) and State Representative Terry Musser (R).

