

SENATE JOINT RESOLUTION 52

By Green

A RESOLUTION to urge the President of the United States and the Congress to repeal Obamacare and all taxes contained within it and to block grant Medicaid to the States.

WHEREAS, the enactment of Obamacare on a party-line vote in 2010 imposed nearly twenty tax increases on individuals, families, and employers across America in the middle of a recession; and

WHEREAS, despite President Obama's promise to not raise any tax on middle class families, Obamacare included tax increases hitting households of all income levels; and

WHEREAS, despite the promise that if Americans liked their health plan, they could keep it, millions of Americans have seen their health insurance plans cancelled because of Obamacare's onerous regulations and mandates; and

WHEREAS, Obamacare has resulted in massive premium increases, putting a pinch on household budgets amid the slowest economic recovery since World War II; and

WHEREAS, Obamacare has reduced competition in the health care industry to the detriment of consumers, leaving entire states with only one health insurance provider; and

WHEREAS, Obamacare is collapsing due to its own poor design, having been propped up by unlawful activities, such as the Obama administration payments to insurers that were not authorized by Congress; and

WHEREAS, total Medicaid spending in the United States in 2015 was more than \$532 billion; and

WHEREAS, the share of federal Medicaid funding provided to the states is determined by a state-by-state matching percentage, and the actual amount of federal funding sent to the states is determined by how much the states spend in order to get those matching dollars; and

WHEREAS, states are encouraged to expand Medicaid programs and spend more to get additional funding; and

WHEREAS, current Medicaid funding arrangements fail to reward states based on performance, but give states additional funding based on outright government appropriations; and

WHEREAS, Medicaid growth is fueled by an interest in gaining additional federal funding, which also makes reductions in state Medicaid spending more difficult due to the additional loss of federal funding; and

WHEREAS, adding new enrollees to the Medicaid program without greater state flexibility may crowd out other state funding priorities like building schools, hiring teachers, fixing roads, supporting law enforcement, and relieving struggling businesses and families of high tax burdens; and

WHEREAS, experiences from states that have already expanded Medicaid demonstrate that projected participation rates for the Medicaid expansion population are often dramatically underestimated; and

WHEREAS, the Congressional Budget Office estimates that federal funding for Medicaid represents one-fourth of the federal budget deficit and is a growing portion of the federal budget deficit; and

WHEREAS, the federal debt is currently more than \$20 trillion and rising every year; now, therefore,

BE IT RESOLVED BY THE SENATE OF THE ONE HUNDRED TENTH GENERAL ASSEMBLY OF THE STATE OF TENNESSEE, THE HOUSE OF REPRESENTATIVES CONCURRING, that this body believes that Tennessee is best suited to make decisions on Medicaid policy for the residents of this State, including prioritizing state Medicaid spending to reflect the unique needs of Tennessee and setting eligibility standards that reflect state priorities.

BE IT FURTHER RESOLVED, that this body requests President Donald J. Trump to propose and support, and the United States Congress to support and vote for, full and permanent repeal of Obamacare and all tax increases imposed by it.

BE IT FURTHER RESOLVED, that this body believes that a federal block grant or per capita allotment for Medicaid funding could give states greater flexibility to manage the state Medicaid budget and tailor the program to meet state objectives.

BE IT FURTHER RESOLVED, that this body believes that with the flexibility of a federal block grant for Medicaid, the state may find value in pursuing the following reforms: mandatory premiums for Medicaid enrollees, mandated work requirements, a redefinition of income to incorporate other forms of government welfare assistance, health savings accounts and direct primary care as optional benefits, and the imposition of lock-out periods for failure to meet appropriate program criteria.

BE IT FURTHER RESOLVED, that copies of this resolution be transmitted to the President of the United States, the United States Congress, and the appropriate leadership of the United States Department of Health and Human Services.