By: Capelo H.C.R. No. 101

HOUSE CONCURRENT RESOLUTION

WHEREAS, Advances in the effectiveness of prescriptive medication have substantially improved the quality of health care in the United States; a key component of preventive health care, prescription drugs help patients live healthier, longer, and more productive lives without the need for costly long-term acute care; and

WHEREAS, Since the passage of the Social Security Act of 1965, which originally authorized Medicare, the increased use of new and improved prescription drugs has changed the delivery of health care in the United States; nonetheless, of the more than 40 million people enrolled in Medicare, one-third have no prescription drug coverage, and the limited coverage available to the remaining two-thirds of Medicare beneficiaries is often inadequate to meet their needs; and

WHEREAS, Comprehensive reform of the Medicare program is necessary to provide affordable care for the elderly and disabled who suffer from chronic disease and comorbidity; the private sector has established a model for successful reforms by negotiating discounts on prescription drugs and by coordinating care with disease management, drug utilization review, and patient education programs, all of which aid in ameliorating medical problems; and

WHEREAS, Despite the growing needs of the Medicare population, the United States Congress has thus far failed to remedy the inadequacies of the Medicare program; effective reform

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would adopt the successful strategies of the private sector and use the marketplace to foster competition among private plans, maintaining the financial viability of the program and offering greater choice of quality coverage to seniors and the disabled; and WHEREAS, Instead, the lack of a prescription drug benefit in particular has forced states to supplement Medicare by providing medicine to vulnerable Medicare beneficiaries through state Medicaid programs; this "dually eligible" population, those who qualify for federal Medicare and state Medicaid, accounts for 42

percent of Medicaid drug expenditures nationwide; and

WHEREAS, The situation is critical in Texas, where the Congressional Budget Office reported the enactment of a Medicare drug benefit would mean a savings of nearly \$2 billion in Medicaid funds between 2005 and 2012; alarmingly, the costs to state Medicaid programs are expected to increase as the non-elderly disabled and the elderly over age 85 who are most likely to be dually eligible are the fastest growing populations within Medicare; and

WHEREAS, With state Medicaid programs already facing serious budgetary constraints that threaten to restrict patients' access to needed medical care and prescription drugs, it is more important than ever that the congress enact a Medicare prescription drug benefit as quickly as possible; now, therefore, be it

RESOLVED, That the 78th Legislature of the State of Texas hereby respectfully request that the Congress of the United States enact financially sustainable, voluntary, universal, and privately administered outpatient prescription drug coverage as part of the

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federal Medicare program; and, be it further

RESOLVED, That the Texas secretary of state forward official copies of this resolution to the president of the United States, to the speaker of the house of representatives and the president of the senate of the United States Congress, and to all the members of the Texas delegation to the congress with the request that this resolution be officially entered in the Congressional Record as a memorial to the Congress of the United States of America.