

Universal Health Care Act, 1991

(H.R. 1300)

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Overview

Type of Reform: Creating a New Program

Description:

Creates a national, single-payer health insurance program, under which every U.S. citizen would be eligible for enrollment, that provides protection against the costs of health care and health-related services, including benefits for facility and home-based LTSS.

Sponsoring Organization and Key Author(s):

- Introduced by Rep David Obey (D-WI) on November 25, 1991.
- Two Democratic co-sponsors.

Impact and Action:

House Committee Referrals:
Subcommittee on Health and the Environment, Subcommittee on Commerce, Consumer Protection and Competitiveness, Ways and Means, and Energy and Commerce.

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Program Details

Participation Criteria:

All U.S. citizens.

Conditions for Receiving Benefits Scope of Services:

Nursing Facility: Available when medically necessary.

HCBS: Requires support with two or more ADLs.

Scope of Services

Not specified but mentions both nursing care and HCBS.

Amount of Services

Not specified.

Participant Financial Responsibility

Not specified.

Elimination Period

Not applicable.

Provider Requirements

Not specified.

Provider Payment Levels

Not specified.

Inflation Adjustments

Not specified.

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Financing & Implementation

Revenue Source(s)

Not specified.

Total Program Costs

Brookings/ICF LTC Financing Model estimated \$72.5 billion in additional public spending, with a reduction in out-of-pocket spending of \$28.8 billion (in 1992 dollars).

Program Administration

- Department of Health and Human Services establishes and oversees program and allocates funding to states (based on a formula taking into account the percent of the population ages 75+ and payments made to states under the Social Security Act).
- States administer the program in line with and subject to federal approval.
- Prohibits private insurance that duplicates coverage provided.

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