



The Employer Alliance for Affordable  
Health Care

# 2001 Legislative Report Card



**Employer Alliance**

PO Box 1412  
Albany NY 12201-1412

Dear Employer Alliance Member:

It's hard to believe that the *Employer Alliance for Affordable Health Care* is four years old! This coalition started in 1998, when I joined with nearly a dozen employers who shared a concern about rising health care costs. One of the things we learned is that our lawmakers were in some cases exacerbating these increases by mandating the coverage of certain benefits – denying employers the flexibility to provide employees with a benefit package that meets the needs of all parties. Opposing benefit mandates became the rallying point for the *Employer Alliance*.

It's a concern that resonates with employers throughout New York State. As we commence a new year, the *Alliance* is made up of 1,200

businesses, making us the largest single-issue business coalition in the state. In our continuing efforts to improve the *Alliance's* visibility, in 2001 we established a strong Board of Directors, hired a public relations firm and engaged our members in several successful grassroots activities. Thanks to you, we are a potent force in Albany and an organization whose viewpoints are sought by the Legislature and the media.

Despite these achievements, our goals still have not been realized. Today, New York remains among the top states in health insurance premiums, the number of uninsured citizens and the number of mandated benefits. Despite a predicted softening of the economy in the wake of the September 11 terrorist attacks, our lawmakers continue to deliberate nearly 100 bills mandating new health insurance benefits at the expense of employers,

without a process to evaluate these proposals for medical efficacy and cost.

**How committed to health care affordability are your lawmakers?**

Enclosed is the **Second Annual *Employer Alliance Report Card***. It is designed to make you more familiar with the impact your lawmakers are having on your insurance premiums. In producing the report card, we examined the voting and introduction record of each state lawmaker. In certain cases, grades account for other factors that may demonstrate the lawmaker's commitment to affordable health care.

While we know *Alliance* members will benefit from this report card, we also hope this effort will

encourage Legislators to reflect on these issues and heed the *Employer Alliance's* concern when it comes to any measure that might further increase the costs of health care in New York State. New York's employers deserve no less!

Sincerely,



Scott Miller  
Chairperson

# REVIEW OF LEGISLATION

## Assembly Bills

### 1. Sole Proprietor Reform (A.7413-B-Morelle)

**Employer Alliance Position: YES**

#### Background on Proposal:

This proposal reforms the sole proprietor market by providing individual proprietors access to more affordable small group rates.

#### The Employer Alliance Supports

##### this Legislation Because:

As the result of a variety of factors, many sole proprietors have been unable to access any product other than the expensive “direct pay” market. Rather than pay the high premiums in that market (could be as high as \$1,200/month) many sole proprietors are opting to drop health coverage altogether, adding to the ranks of the state’s uninsured.

### 2. Infertility Mandate (A.2003-Silver)

**Employer Alliance Position: NO**

#### Background on Proposal:

This legislation calls for expanding infertility coverage in New York to include risky and expensive Assisted Reproductive Technologies (ARTs). Under this proposal, an individual would have up to six chances to utilize ARTs procedures regardless of age, marital status or income.

#### The Employer Alliance Opposes

##### this Legislation Because:

- ◆ New York State already mandates infertility coverage as the result of a 1990 law that requires coverage of conditions that could cause infertility (i.e. endometriosis, blocked fallopian tubes) but did not extend that coverage to the expensive and

- ◆ scientifically suspect ARTs. The *Alliance* believes the current mandate offers a compassionate yet affordable benefit. Actuaries estimate this proposal can result in a 3%-5% premium increase. (Note: none of the actuary estimates include the costs associated with multiple births and low birth weight infants – potentially the largest cost center in such a proposal).
- ◆ The New York State Task Force on Life and the Law reviewed this issue in 1998 and concluded: *“the question is whether New York should mandate coverage for assisted reproduction when policies routinely exclude coverage for a broad range of basic health care service and when so many New Yorkers have no health insurance coverage at all... Accordingly, we do not recommend legislation requiring insurance companies provide coverage for assisted reproduction.”*

### 3. Contraceptive Mandate (A.2002-John)

**Employer Alliance Position: NO**

#### Background on Proposal:

This legislation requires that all pharmaceutical riders include coverage for *all* FDA approved contraceptives.

#### The Employer Alliance Opposes

##### this Legislation Because:

- ◆ In the face of rising pharmaceutical costs, employers are now seeking greater cost shifting of this benefit with employees. Rather than be forced to cover all FDA approved contraceptives (actuaries estimate that this benefit will cost more than \$21 per employee annually), some employers may consider dropping their drug rider altogether – leaving their employees less well off.
- ◆ Contraceptives are widely available through private insurance and a variety of public programs. In fact, *not including* Medicaid, New York spends more than \$20 million annually to ensure that the least

*Contraceptive Mandate (cont.)*

fortunate New Yorkers have access to contraception.

- ◆ Contraceptives are already covered under most pharmacy riders. According to surveys, at least one type of contraceptive coverage is provided to 93% of individuals with HMO coverage. Clearly, the limited number of employers who have chosen not to provide this coverage have done so for reasons of conscience or cost.

#### **4. Women's Omnibus Legislation (A.2006-Glick)**

**Employer Alliance Position: NO**

**Background on Proposal:**

A massive mandate that among other things seeks to:

1. Expand New York's existing expansive mammography mandate
2. Include coverage for all FDA approved contraceptives
3. Require coverage for bone density screenings

**The Employer Alliance Opposes this Legislation Because:**

- ◆ Actuarial estimates for this legislation range between 3% and 5%. However, there is no scientific evidence that this expenditure will save lives or improve the overall health of the state.
- ◆ New York's current comprehensive mammography mandate (passed in 1988) already allows physicians the discretion to order screenings at any desired frequency after the age of 40. This mandate would encourage unnecessary testing at considerable expense to the health care system.
- ◆ The *Alliance* opposes contraceptive coverage for the same reasons outlined in A.2002.
- ◆ Bone density screenings are expensive and, by themselves, do not mitigate osteoporotic events. In review of similar legislation proposed in that state in 1998, the Pennsylvania Health Care Cost Containment Council concluded that they were "unable to find *needed proof*...that coverage of bone density testing would provide corresponding savings, either in terms of saved health care dollars

or improved quality of life." That state estimated the costs for this service could reach \$275 million annually. New York, with a 50% larger population, would have considerably higher costs.

#### **5. Wig Mandate (A.8818-Cymbrowitz)**

**Employer Alliance Position: NO**

**Background on Proposal:**

This mandate would require every policy to include coverage of "cranial prostheses" (wigs) for permanent or temporary hair loss that is the result of a disease or treatments for a condition, if a physician determines such purchase is necessary to promote the patient's "psychological well-being."

**The Employer Alliance Opposes this Legislation Because:**

- ◆ Unlike other prostheses (such as legs and arms) designed to enhance physical functioning, wigs are merely cosmetic enhancements.

- ◆ Mandating coverage because a physician believes a service or item will enhance the "psychological well-being" of the patient is an unprecedented standard that logically could be extended to include the coverage of such items as vacations!
- ◆ Wigs can be expensive. While the legislation caps the number of wigs to be purchased, it does not set a dollar limit on such an item. Sponsors have indicated that such items could cost several thousand dollars – in some cases more than the yearly premium.

# REVIEW OF LEGISLATION

## Senate Bills

### 1. Sole Proprietor Reform (S.3795-Seward)

**Employer Alliance Position: YES**

**Background on Proposal:**

This proposal reforms the sole proprietor market by providing individual proprietors access to more affordable small group rates.

**The Employer Alliance Supports this Legislation Because:**

As the result of a variety of factors, many sole proprietors have been unable to access any product other than the expensive “direct pay” market. Rather than pay the high premiums in that market (could be as high as \$1,200/month) many sole proprietors are opting to drop health coverage altogether, adding to the ranks of the state’s uninsured.

### 2. Infertility Mandate (S.5627-LaValle)

**Employer Alliance Position: NO**

**Background on Proposal:**

This legislation calls for expanding infertility coverage in New York to include risky and expensive Assisted Reproductive Technologies (ARTs). The Senate proposal is similar to the Assembly’s; however, it provides for a narrow “conscience clause” that includes a special insurance “pool” to ensure those employees in entities utilizing the clause have access to contraceptive services. It also places age limitations (21 to 44) on patients accessing these services and requires a study to be carried out by the Department of Insurance to determine “the utilization trends and experience, and the rate and premium impact to health insurance consumers.”

**The Employer Alliance Opposes this Legislation Because:**

- ◆ New York State already mandates infertility coverage as the result of a 1990 law that requires coverage of conditions that could cause infertility (i.e. endometriosis, blocked fallopian tubes) but did not extend that coverage to the expensive and scientifically suspect ARTs. The *Alliance* believes the current mandate offers a compassionate yet affordable benefit.
- ◆ Actuaries estimate this proposal can result in a 3%-5% premium increase. (Note: none of the actuary estimates include the costs associated with multiple births and low birth weight infants – potentially the largest cost center in such a proposal).
- ◆ The New York State Task Force on Life and the Law reviewed this issue in 1998 and concluded: *“the question is whether New York should mandate coverage for assisted reproduction when policies routinely exclude coverage for a broad range of basic health care service and when so many New Yorkers have no health insurance coverage at all...”*

*Accordingly, we do not recommend legislation requiring insurance companies provide coverage for assisted reproduction.”*

### 3. Women’s Omnibus Legislation (S.3-Bruno)

**Employer Alliance Position: NO**

**Background on Proposal:**

A massive mandate, similar to the Assembly’s proposal, that seeks to:

1. Expand the existing expansive mammography mandate
2. Include coverage for contraceptives (with conscience clause)
3. Require coverage for bone density screenings
4. Require actuary study of the mandate by 2005.

**The Employer Alliance Opposes this Legislation Because:**

- ◆ Actuarial estimates for this legislation range between 3% and 5%. However, there is no scientific evidence that this expenditure will save

lives or improve the overall health of the state.

- ◆ New York's current comprehensive mammography mandate (passed in 1988) already allows physicians the discretion to order screenings at any desired frequency after the age of 40. This mandate would encourage unnecessary testing at considerable expense to the health care system.
- ◆ The *Alliance* opposes contraceptive coverage for the same reasons outlined in Assembly bill A.2002.
- ◆ Bone density screenings are expensive and, by themselves, do not mitigate osteoporotic events. In review of similar legislation proposed in that state in 1998, the Pennsylvania Health Care Cost Containment Council concluded that they were "unable to find *needed proof*...that coverage of bone density testing would provide corresponding savings, either in terms of saved health care dollars or improved quality of life." That state estimated the costs for this service could reach \$275 million annually. New York, with a 50% larger population, would have considerably higher costs.



# Assembly Voting Record



	LEGISLATOR	OUR POSITION	Acampora (R)	Thiele (R)	Eddington (D)	Englebright (D)	Levy (D)	Wertz (R)	Barraga (R)	Boyle (R)	Flanagan (R)	Conte (D)	Sweeney (D)	Labriola (R)	Sidikman (D)	Herbst (R)	Ferrara (R)	Dinopoli (D)	O'Connell (R)	Hill-Hooper (D)	Murray (R)	Weisenberg (D)	Barra (R)	Alfano (R)	Pheffer (D)	Weprin (D)	McLaughlin (D)	Carrozza (D)	Mayersohn (D)	Cohen, M. (D)	Scarborough (D)	Markey (D)	Rhodd-Cummings (D)	Cook (D)	Clark (D)	Lafayette (D)	Aubry (D)	Gianaris (D)	Nolan (D)	Seminerio (D)	Seddio (D)	Gordon (D)				
DISTRICT			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40				
GRADE			C-	C	C	C	C	B+	A-	C	B+	C	C+	C	C	C	C	D-	C	C	C	C+	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C			
SOLE PROPRIETOR REFORM (A.7413-B)	<b>Y</b>	EXC	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	EXC	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	EXC	Y	Y	Y	Y	Y	Y	Y				
INFERTILITY MANDATE (A.2003)	<b>N</b>	EXC	Y	Y	Y	Y	N	N	N	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	EXC	Y	Y	Y	Y			
CONTRACEPTIVE MANDATE (A.2002)	<b>N</b>	Y	Y	Y	Y	Y	N	N	N	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y		
WOMEN'S OMNIBUS (A.2006)	<b>N</b>	Y	Y	Y	Y	Y	N	N	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y		
WIG MANDATE (A.8818)	<b>N</b>	Y	EXC	Y	Y	Y	Y	Y	Y	Y	EXC	Y	Y	EXC	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	EXC	Y	Y	Y	Y	EXC	Y	Y	Y			
MANDATE BILLS SPONSORED		A.3373 A.4845	A.3166				A.2954								A.1465			A.5554 A.5556 A.5583 A.5638				A.4443	A.4697		A.5840		A.2004														A.3941 A.4136					
BILL DESCRIPTION		● 1. Coverage of autologous blood transfusion 2. Scalp hair prostheses (wigs)	● Coverage of Lyme disease				● Coverage for infertility treatment						● Covers hospitalization and anesthesia for dental work		● 1. Coverage for experimental drugs 2. Coverage for baby formula 3. Coverage for ostomies 4. Coverage of medical services for natural mother in birth of adopted child						● Coverage for gamete banking		● Coverage for autologous blood transfusions		● Expands Pap smear to all FDA approved screenings		● Expands current mammogram mandate													● 1. Coverage of respite care 2. Expands current mammogram screening mandate						
COMMENTS									● As chair of the Small Business Committee, Sweeney has introduced several bills designed to enhance coverage options for small employers.						● The Assembly's leader in support of mandates						● Co-sponsor of Schimminger mandate relief bill																						● Co-sponsor of Schimminger mandate relief bill			







	LEGISLATOR	OUR POSITION	Luster (D)	Finch (R)	Winner (R)	Oaks (R)	Kolb (R)	Bacalles (R)	John (D)	Morelle (D)	Ganitt (D)	Robach (D)	Koon (D)	Errigo (R)	Nesbitt (R)	DelMonte (D)	Seaman (R)	Schimminger (D)	Eve (D)	Hayes (R)	Tokasz (D)	Hoyt (D)	Higgins (D)	Smith (D)	Burling (R)	Wirth (R)	Young (R)	Parment (D)
DISTRICT			125	126	127	128	129	130	131	132	133	134	135	136	137	138	139	140	141	142	143	144	145	146	147	148	149	150
GRADE	Y	C-	B	B-	B-	B-	B-	B-	C-	B	C	C	C	B+	B-	C	B-	A	C	B-	C	B	C	C	B-	B-	B-	B-
SOLE PROPRIETOR REFORM (A.7413-B)	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
INFERTILITY MANDATE (A.2003)	N	Y	N	N	N	N	N	N	Y	Y	Y	Y	Y	N	N	Y	N	N	Y	N	Y	N	Y	Y	N	N	N	N
CONTRACEPTIVE MANDATE (A.2002)	N	Y	EXC	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y	EXC	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
WOMEN'S OMNIBUS (A.2006)	N	Y	EXC	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	EXC	EXC	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
WIG MANDATE (A.8818)		Y	Y	Y	Y	Y	EXC	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
MANDATE BILLS SPONSORED		A.1056 A.4506						A.60 A.2002	A.873				A.6322					A.713			A.223			A.1477				
BILL DESCRIPTION		<ul style="list-style-type: none"> <li>1. Requires all policies to provide coverage of medical nutrition therapy</li> <li>2. Mental health parity</li> </ul>					<ul style="list-style-type: none"> <li>1. Expands coverage of alcohol/substance abuse services</li> <li>2. Coverage of contraceptives</li> </ul>		<ul style="list-style-type: none"> <li>Coverage for cleft palate</li> </ul>				<ul style="list-style-type: none"> <li>Coverage for wigs for children</li> </ul>					<ul style="list-style-type: none"> <li>Sponsor mandate relief legislation we support</li> </ul>			<ul style="list-style-type: none"> <li>Expands coverage for massage therapy</li> </ul>			<ul style="list-style-type: none"> <li>Requires coverage of transportation costs for second opinions</li> </ul>				
COMMENTS									<ul style="list-style-type: none"> <li>Co-sponsor several important small business insurance initiatives including A.7413</li> </ul>													<ul style="list-style-type: none"> <li>Has been public with his concern about mandates</li> </ul>						



# Senate Voting Record



	LEGISLATOR	OUR POSITION	Lavalle (R)	Lack (R)	Trunzo (R)	Johnson (R)	Marcellino (R)	Hannon (R)	Balboni (R)	Fuschillo (R)	Skelos (R)	Smith, M. (D)	Padavan (R)	Smith, A. (D)	Hevesi (D)	Onorato (D)	Maltese (R)	Stavisky (D)	Santiago (D)	Montgomery (D)	Sampson (D)	Markowitz (D)	Kruger (D)	Lachman (D)	Gentile (D)	Marchi (R)	Connor (D)	Goodman (R)	Duane (D)	Mendez (D)	Pateron (D)	Schneiderman (D)	Gonzalez (D)	Espada (D)	Hassel-Thompson (D)	Veella (R)	Spano (R)	Oppenheimer (D)	Leibell (R)	Morahan (R)	Larkin (R)	Bonacic (R)	Saland (R)	Breslin (D)																																																				
DISTRICT			1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42																																																				
GRADE			D-	C	B-	B-	C	B	C	C	C	C	C	C	C	B	C	C	C	C	C	C	D	C-	C	C	C	C	D	C	C	C	D+	C	INC	C	C	C	C	C	C	C	C	C																																																				
SOLE PROPRIETOR REFORM (S.3795)	<b>Y</b>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y																																																			
INFERTILITY MANDATE (.S.5627)	<b>N</b>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	N	Y	N	Y	N	Y	N	N	EXC	Y	Y	Y	Y	N	Y	N	Y	N	N	Y	EXC	N	Y	Y	N	Y	Y	Y	Y	Y	Y	N																																																			
WOMEN'S OMNIBUS (S.3)	<b>N</b>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y	Y	N	N	N	Y	Y	Y	Y	Y	Y	N	Y	N	EXC	N	N	Y	Y	N	Y	Y	N	Y	Y	Y	Y	Y	N																																																				
MANDATE BILLS SPONSORED		S.1265 S.2531 S.2942 S.2944 S.3638	S.2016			S.112							S.1831 S.3278 S.3450							S.2153			S.242 S.333 S.347	S.1411		S.5381		S.675 S.702 S.739 S.863	S.1744			S.1742 S.2472				S.1786 S.2073	S.3628	S.4813			S.1658	S.4533		S.1122																																																				
BILL DESCRIPTION		<ul style="list-style-type: none"> <li>1. Mandates infertility treatment and procedures</li> <li>2. Mandates autologous bone marrow transplants</li> <li>3. Mandates coverage of infant formulas</li> <li>4. Mandates coverage of experimental drugs</li> <li>5. Expanded prostate screening</li> </ul>					<ul style="list-style-type: none"> <li>1. Mandates coverage of acupuncture services</li> <li>2. Reimbursement for services provided by LPNs</li> <li>3. Direct reimbursement for physical therapists</li> </ul>					<ul style="list-style-type: none"> <li>Mandates coverage of acupuncture services</li> </ul>					<ul style="list-style-type: none"> <li>1. Coverage of Tay Sachs testing</li> <li>2. Coverage for women's reproductive health services, including abortions, contraception and hormonal therapy</li> <li>3. Coverage of contraceptives</li> </ul>					<ul style="list-style-type: none"> <li>Coverage of fertility treatments</li> </ul>					<ul style="list-style-type: none"> <li>Parity for in-patient diagnosis and treatment of nervous and emotional disorders</li> </ul>					<ul style="list-style-type: none"> <li>1. Coverage for pre-hospital emergency medical services</li> <li>2. Coverage of transportation for second opinions</li> </ul>					<ul style="list-style-type: none"> <li>Covers hospitalization and anesthesia for dental work</li> </ul>					<ul style="list-style-type: none"> <li>Mandates coverage for prosthetics</li> </ul>																																																						
COMMENTS		<ul style="list-style-type: none"> <li>Leading proponent of health care mandates in the Senate</li> </ul>					<ul style="list-style-type: none"> <li>Co-sponsor of mandate reform legislation</li> </ul>					<ul style="list-style-type: none"> <li>Articulate chair of the Health Committee who understands the link between mandates and increasing premiums</li> </ul>					<ul style="list-style-type: none"> <li>Supports more costly infertility mandate</li> </ul>					<ul style="list-style-type: none"> <li>Co-sponsor of mandate reform legislation</li> </ul>					<ul style="list-style-type: none"> <li>Supports more costly infertility and Women's Omnibus mandates</li> </ul>					<ul style="list-style-type: none"> <li>Supports more costly infertility benefit</li> </ul>					<ul style="list-style-type: none"> <li>Supports more costly infertility mandate</li> </ul>					<ul style="list-style-type: none"> <li>The leading mandate proponent in the Senate minority</li> </ul>					<ul style="list-style-type: none"> <li>A lead proponent of broad infertility coverage mandates</li> </ul>					<ul style="list-style-type: none"> <li>Supports more costly infertility mandate</li> </ul>					<ul style="list-style-type: none"> <li>Supports more costly infertility and Women's Omnibus mandates</li> </ul>					<ul style="list-style-type: none"> <li>Supports more costly infertility and Women's Omnibus mandates</li> </ul>					<ul style="list-style-type: none"> <li>Supports more costly infertility and Women's Omnibus mandates</li> </ul>					<ul style="list-style-type: none"> <li>Co-sponsor of mandate reform legislation</li> </ul>					<ul style="list-style-type: none"> <li>Supports more costly infertility and Women's Omnibus mandates</li> </ul>					<ul style="list-style-type: none"> <li>Co-sponsors mandate reform legislation. Introduced a variety of measures designed to enhance access to insurance for small and medium size businesses</li> </ul>					<ul style="list-style-type: none"> <li>As member of Women's Omnibus mandate conference committee, supported a more balanced bill</li> </ul>					<ul style="list-style-type: none"> <li>Sponsor of mandate reform legislation</li> </ul>				

LEGISLATOR	OUR POSITION	Bruno (R)	Farely (R)	Stafford (R)	Wright (R)	Meier (R)	Hoffman (R)	DeFrancisco (R)	Seward (R)	Libous (R)	Kuhl (R)	Nozzolio (R)	Dollinger (D)	Alesi (R)	McGee (R)	Brown (D)	Stachowski (D)	Volker (R)	Rath (R)	Maziarz (R)
		43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61
DISTRICT		B	B-	C	A-	A-	C	C	A	C	A-	C	A-	C+	B+	C	C	B	B	C
SOLE PROPRIETOR REFORM (S.3795)		Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
INFERTILITY MANDATE (S.5627)	<b>Y</b>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
WOMEN'S OMNIBUS (S.3)	<b>N</b>	Y	Y	Y	N	N	Y	Y	N	Y	N	Y	N	Y	N	Y	N	Y	Y	Y
MANDATE BILLS SPONSORED	<b>N</b>	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N	Y	Y	Y	Y	Y	Y	Y
BILL DESCRIPTION			S.1606				S.1461		S.1531 S.4463	S.1780 S.4209			S.944	S.1132	S.2512		S.1252			S.4588
GRADE			● Coverage of prostate cryosurgery and mandate analysis legislation				● Eliminates coinsurance on mammography		● 1. Coverage of acupuncture 2. Mental health parity	● 1. Mandates medical nutrition therapy coverage 2. Mandate Relief Legislation			● Coverage for cleft palate		● Coverage of massage therapy			● Coverage for Temporomandibular Joint Disorder		
COMMENTS			● Co-sponsor of mandate reform legislation		● Strong supporter of mandate relief			● Sponsor of mandate reform legislation			● Co-sponsor of a mandate reform legislation				● Coverage of alcohol and substance abuse services			● Supports more costly infertility mandate		
		● Urged fertility mandate be narrowed to soften premium impact									● Co-sponsor of mandate reform legislation. Has encouraged legislation providing greater access to insurance by small business				● Co-sponsor of mandate reform legislation			● Thoughtful legislator sympathetic to the high cost of health care. Co-sponsor of mandate reform legislation		