

THE UTAH HEALTH POLICY PROJECT  
**HEALTH MATTERS**

*on the Hill...*



**Utah Health Matters E-Newsletter: 2008 Legislative Session Edition**  
**February 24, 2008**

Greetings Health Advocates:

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**1. Timing of final budget bill and interim study topics decisions: where & how can we have impact**

If there was a time to take action on behalf of low-income health priorities, that time is now. Executive Appropriations (leadership) has until Wednesday (Feb. 27) to finalize all budget decisions. **What this means is that advocates really have until tomorrow (Monday) to influence funding decisions.** Please take a few minutes to call committee members now. Focus on those in bold below.

Pre	First	Last	Dist	Home	Cell	Email
Rep	Ron	Bigelow	Dist. 32			ronbigelow@utah.gov
Rep	David	Clark	Dist. 74	435-634-5123		dclark@utah.gov
Spkr	Greg	Curtis	Dist. 49	801-538-1930		gcurtis@utah.gov
Rep	Brad	King		435-613-5246		brad.king@ceu.edu
Rep	David	Litvack	Dist. 26	801-359-5211	801-792-7172	dlitvack@utah.gov

<b>Rep</b>	<b>Rebecca</b>	<b>Lockhart</b>	<b>Dist. 64</b>	<b>801-377-7428</b>	<b>801-369-6784</b>	<b>blockhart@utah.gov</b>
Rep	Carol Spackman	Moss	Dist. 37		801-647-8764	csmoss@utah.gov
Rep	Phil	Riesen			801-560-3055	philriesen@comcast.net
<b>Rep</b>	<b>Gordon</b>	<b>Snow</b>	<b>Dist. 54</b>	<b>435-722-4403</b>		<b>gsnow@utah.gov</b>
<b>Sen</b>	<b>Curtis</b>	<b>Bramble</b>	<b>Dist. 16</b>	<b>801-373-1040 x30</b>		<b>cbramble@utahsenate.org</b>
Sen	Gene	Davis	Dist. 3	801-263-7108		gdavis@utahsenate.org
Sen	Mike	Dmitrich	Dist. 27	435-472-4732	801-550-6128	mdmitrich@utahsenate.org
<b>Sen</b>	<b>Dan</b>	<b>Eastman</b>	<b>Dist. 23</b>			<b>Deastman@utahsenate.org</b>
Sen	Brent	Goodfellow	Dist. 12	801-957-3313	801-556-4871	bgoodfellow@utahsenate.org
<b>Sen</b>	<b>Lyle</b>	<b>Hillyard</b>	<b>Dist. 25</b>	<b>435-752-2610</b>		<b>lhillyard@utahsenate.org</b>
Sen	Patricia	Jones		801-322-5722		patjones@utah.gov
<b>Sen</b>	<b>Sheldon</b>	<b>Killpack</b>				<b>skillpack@utahsenate.org</b>
<b>Sen</b>	<b>Peter</b>	<b>Knudson</b>	<b>Dist. 17</b>	<b>435-723-6366</b>		<b>pknudson@utahsenate.org</b>
<b>Pres.</b>	<b>John</b>	<b>Valentine</b>	<b>Dist. 14</b>	<b>801-373-6345</b>		<b>Jvalentine@utahsenate.org</b>

Those marked in bold are generally responsive to calls. If not bolded, the legislator is either supportive or not all that responsive to calls.

In these hectic final days of the Session, what is the best way to reach them? You can call them at home, even on a Sunday night. If they pick up the phone, just ask if this is a good time to talk. If you get a machine (likely), leave a succinct message (example: *please make sure there is enough \$ to prioritize Medicaid dental services. Tell a story if you can about the need or point out that low-income people do not have enough money to pay for dental care on their own: once treatable dental problems will progress to serious medical problems, and this will be more expensive to the taxpayer in the long run*). When you call on Monday and a cell phone # is not available, you can call the main House or Senate phone numbers:

**House: (801) 538-1029**  
**Toll Free: (800) 908-4261**

**Senate: (801) 538-1035**  
**Toll Free: (800) 613-0677**

Here, too, you will probably need to leave a message. Include your succinct message and ask him or her to call you back (leave your number). If you live in the legislator's district, indicate this is your message. Since members of leadership make decisions that impact all Utahns, you can call committee members even if you don't live in that district.

## **2. Multicultural Health Bills: Minigrants must be funded in Tobacco Tax Bill**

On Monday morning, representatives on the House Revenue & Tax Standing Committee will be making a critical decision: whether to pass HB355, a bill that increases the cigarette tax by 50¢ (from 69.5¢ to 1.19 ½ ¢) per pack. The \$22.6 million in proceeds are allocated to the following health- and cancer-related programs:

- Cancer screening (\$2.3 million)
- Gold Medal Schools (\$800,000)
- Cancer prevention and control (\$2 million)
- Cancer research (\$5 million)
- Family Support Centers (\$1.25 million)
- Brain Injury Waiver (\$800,000)
- Additional medical student slots at the U (\$10 mil.)
- **HB131 Community-Based Sufficiency Mini-grants (\$401,500).**

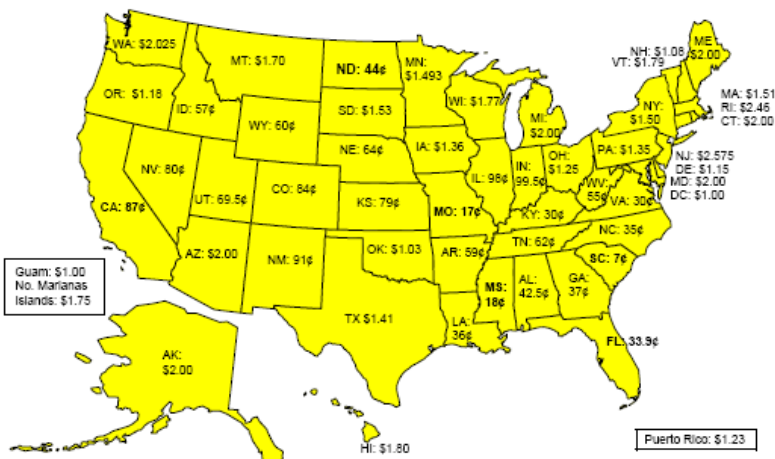
Please take a moment to call Revenue & Tax Committee members listed below and urge them to vote YES. You can call them @ home (just ask if they have just a minute to talk) or on the cell if listed. Or, you can send an email.

First	Last	Dist	Home	Cell	Email
Roger	Barrus	Dist. 18	801-292-2266		rogerbarrus@utah.gov
Tim	Cosgrove		801-685-0673	801-647-7048	Tim.Cosgrove@intermountainmail.org
John	Dougall	Dist.27	801-492-1365	801-362-7155	repjohndougall@gmail.com
Craig	Frank		801-785-6652		cfrank@utah.gov
Wayne	Harper	Dist. 43	801-566-5466		wharper@utah.gov
Gregory	Hughes	Dist. 51	801-572-5305		gregghughes@utah.gov
Christine	Johnson		801-661-3489	801-661-3489	chris@electjohnson.com
Bradley	Last	Dist. 71	435-635-7334		blast@utah.gov
Roz	McGee		801-583-6039		rozmcgee@xmission.com
Carol Spackman	Moss	Dist. 37	801-272-6507	801-647-8764	csmos@utah.gov
Merlynn	Newbold	Dist. 50	801-254-0142		merlynnnewbold@utah.gov
Gordon	Snow	Dist. 54	435-722-4162		gsnow@utah.gov
Aaron	Tilton		801-491-2051	801-361-5881	atilton@utah.gov
Carl	Wimmer		801-302-1057	801-608-4763	carl@carlwimmer.com

Please share any feedback by emailing Judi: [judi@healthpolicyproject.org](mailto:judi@healthpolicyproject.org) . Click here for our [new fact sheet on HB355](#).

Raising the price of tobacco products is a proven way to reduce tobacco use and thwart initiation, particularly among our youth. The \$21.7 million in proceeds will be used to fund essential health and infrastructure priorities related to reducing the long-term cost of tobacco use to the taxpayer.

The proposed increase would keep Utah below the national average for tobacco taxes.



Since there are few downsides to HB355, the bill should at the very least be debated on the House floor. If the legislator has trouble with the bill, he or she should vote YES so that the bill can be fully debated.

**Will constituents be disappointed if policymakers support this, a tax increase?**

No. A recent American Heart Association poll found that nearly 85% of Utahns support an increase in the tobacco tax—as long as the funds are used to fund smoking cessation, education, and related health issues.

**How does Utah compare to other states on the tax?**

Forty-three states (not Utah) and the District of Columbia have increased cigarette taxes since January 1, 2002, increasing the average state cigarette tax from 43.4 cents to \$1.21 a pack—Utah tobacco tax is currently only 69.5¢ per pack.

**How will we fund these programs when tobacco use (and the tax) decreases?**

The need for the cancer-related programs funded by HB355 will automatically decrease as smoking is reduced. This means that the tobacco tax is a logical funding revenue source. Programs that are *not* related to cancer prevention are only getting one-time funding from the revenues generated by HB355.

**How does cigarette smoking impose a hidden tax?**

In Utah annual health expenditures directly related to tobacco use are estimated at \$345 million. Of this amount, Medicaid consumes \$104 million (in state funds) per year. The hidden tax is a huge drain on vital state revenues. It should be replaced with a more productive tax which gets at the root of the problems that create the much more substantial hidden tax.

Please also urge your family and neighbors to call. Believe it or not, these phone calls *really help*. More often than not, legislators make decisions on issues like these

without ever hearing from a single constituent. **Don't let that happen.** A few minutes on the phone can make a huge difference.

THANKS FOR YOUR HELP. Please share any feedback by sending email to [judi@healthpolicyproject.org](mailto:judi@healthpolicyproject.org) or calling (801) 870-3887.

**Interpreter Standards Bill (HB428 by Rep. Chavez-Houck) to be heard on Monday at 4:00 pm in Room W125.**

**DESCRIPTION:** An initiative of the Utah Multicultural Health Network, this bill requires the Departments of Health, Human Services, Workforce Services, Rehabilitation, and Commerce to review the use of health care interpreting services, to ascertain and assure compliance related to interpreting as required by Title VI of the Civil Rights Act and to explore the development of quality standards for healthcare interpretation, as well as report findings and recommendations to the Legislature.

**PROVISIONS:**

- This bill establishes an advisory committee composed of staff from the Department of Health, Department of Human Services, Department of Workforce Services, and the Department of Commerce, Department of Rehabilitation, and stakeholders in the public and private sector.
- Requires the committee to convene initially by April 1, 2008, to provide a provisional set of recommendations by November 1, 2008 and to submit a final report to the Interim Health and Human Services Committee of the Utah State Legislature no later than November 15, 2009 with specific recommendations.

Departmental scope has been markedly reduced with the substitute bill; a revised fiscal note, pending adoption of the substitute bill will be drafted.

**BACKGROUND:**

A number of states have implemented similar advisory groups to provide guidelines and determine oversight of interpretation services in order to show responsible stewardship of taxpayer funds and good-faith compliance with Title VI of the Civil Rights Act of 1964. The multi-departmental approach gives state agencies an opportunity to define oversight issues that might fall within the purview of some departments but not others (i.e. eligibility for Medicaid, CHIP or WIC versus vetting of interpretation contracts versus possible licensing of interpreters by the Department of Commerce). The goal is to assure that eligible clients are receiving quality interpretation services and that health care providers are informed as to their ability to qualify for federal program reimbursements.

Given the rapidly changing demographics and rapid growth of Utah's foreign-born population, the need for stronger health care interpreting standards cannot be overstated. Come to show support for the bill on Monday.

### **3. Medicaid Dental & Vision: Executive Appropriations Controls the Keys**

Medicaid Dental & Vision services are at the mercy of the Executive Appropriation Committee. The Committee has canceled its last two meetings (It's now scheduled to meet on Tuesday at 4pm in room C450). However, by rule, the Committee must make all decisions about what gets funded and what doesn't, by next Wednesday. So now is the time to contact Committee Members and remind them how important these services are:

Dental Services needs \$2.8 million. Preferably this would be in ongoing money, ensuring that dental care will be available to Medicaid enrollees for years to come. However, one-time funding from the state's general fund or the Medicaid Restricted account could be used to provide this important service for the upcoming fiscal year.

Vision does not need any new money, but it does need the committee to give the Department of Health permission to use money in the department's existing budget to provide eyewear.

Executive Appropriation Members are listed below. Their contact information can be found by going to [our call list](#). Or click on [contact list above](#).

### **4. Vote on HB364, Promotion of Health Insurance this Monday**

HB 364 is on track for a House floor vote this Monday. If everything goes as planned, this important piece of legislation will be on the House reading calendar this Monday.

HB364 (Rep. Holdaway) will help more eligible individuals and families enroll in the Utah Premium Partnership (UPP), Medicaid and CHIP. The bill makes three important changes in how Utahns find out about and enroll in these programs:

- HB364 will allow individuals who qualify for the UPP subsidy to enroll in their employer sponsored health program outside of open enrollment periods.
- HB364 will provide the Department of Health a \$100,000 marketing budget to promote the UPP program. A recent study found that 88% of Utahns do not know what the UPP program is. As the state attempts to enroll more of Utah's uninsured on private health plans, UPP is going to be the mechanism that will allow Utah's low income families to be able to afford these private plans.
- Lastly, HB364 will enable the state to more effectively work with Utah schools to identify UPP, Medicaid and CHIP-eligible families and help them enroll in these programs.

Please let your Representative know that you strongly support HB364!

### **5. Health System Reform and Insurance Reform Bills**

As we reported last week, Rep. Clark's Health Reform Bill, HB133, passed second reading in the Senate. Since the bill has a fiscal note (a price tag), the third and final reading of the bill will not happen until after all appropriations have been made. It's clear that HB133 will be fully funded and passed out of the Senate without any

difficulty. This is exciting news considering that many items will go unfunded this year due to a decrease in revenues.

## **Health Plan Exemptions from Selected Requirements, HB491**

UHPP is opposed to HB491, which allows insurers to provide insurance products that are exempt from ***all but one*** of Utah's patient protection laws. The current version of the bill limits these products to the most vulnerable Utahns, those eligible for the Utah Comprehensive Health Insurance Pool (HIP). These are people who have expensive and significant health care needs and therefore have been denied coverage in the private market. They have the most to lose from any weakening of the basic patient protections that are now in place. For more information see our [fact sheet](#).

### **6. [UHPP Health Bill Tracker](#)**

[UHPP's Health Bill Tracker](#) consolidates information on important health bills being considered this session. Clicker [here](#) to see the tracker.

### **7. The Week Ahead**

UMPP meets from 1:00-1:45 this Wednesday in Room 210 (South East side of the Capitol Rotunda).

### **8. [2008 Legislative Calendar for Health Advocates](#)**

Keep track of events happening on the Capitol session. The Calendar for Health Advocates has dates, time, and information

### **9. [UHPP Health Action Center—All the Tool You Need to Stay Informed this Session](#)**

The [UHPP Health Advocate Toolkit](#) provides tools and information to keep you informed this session.

#### **[Call Your Legislator Cheat Sheet:](#)**

Click [here](#) to download a fun to use 'cheat sheet' of important phone numbers to use during the legislative session, including the toll free numbers.

#### **[Getting to the Utah State Capitol](#)**

If you are downtown, the Bus is a great option to get up to the Hill. Route 500 will take you right to the East Building's front door! The Capitol is in the Downtown Free Zone (!) and buses run every 15 minutes. [You can find a schedule \(with pickup locations\) here.](#)

Driving from outside of Salt Lake: simply take I-15 (either north or south) to the 600 South exit and head east on 600 South. Turn left on State Street and head up the hill to



the State Capitol. See map and follow route highlighted in purple. Be sure to allow plenty of time to drive from the freeway through the city. Because Salt Lake City is experiencing unprecedented construction activity, you may experience traffic delays in your travels.



### **Where to park?**

Parking at the Capitol should be somewhat improved this session. There are two parking lots available to the public. The largest is on the NE Corner of the Capitol Complex. The second lot is right next to East Building (Now also know as the Senate Building). In addition, the 450 construction workers that have been at the Capitol the past few sessions are largely gone. Thus there should much more street parking available to the public this year. If you must drive, your best bet is to carpool and arrive early.

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