Task force narrows Medicaid expansion options for recommendation to 3

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SALT LAKE CITY — A task force of lawmakers on Thursday adopted a series of best options for the state of Utah regarding potential Medicaid expansion.

Among those options, the Health System Reform Task Force recommends that whatever model the state moves forward with, it should include four principles that ensure that mental and behavioral health will be addressed in some way, even if it is just for a pilot study, according to Rep. Dean Sanpei, R-Provo.

"This is the right thing to do," he said, adding that people dealing with these issues in our communities are not being handled the way they need to be.

Severely and persistently mentally ill clients, Sanpei said, die approximately 25 years earlier than the rest of the population and often because of preventable medical conditions, according to the National Association of State Mental Health Program Directors. Research has also shown that behavioral health clients have higher rates of co-occurring conditions, such as diabetes, high blood pressure, obesity and asthma, and they are less likely to receive quality care.

The four principles Sanpei proposed and the task force adopted include reform of the delivery system, integrating medical health and behavioral health as much as possible; a methodology that would minimize the "crowd-out" effects and preserve the private insurance market in Utah; negotiations with the federal government to keep cost savings in the state; and a sunset of the proposed pilot program if it isn't working out.

In all, Sanpei suggests that Utah seek and negotiate as much flexibility to implement expansion in the state as the federal government will allow.

"We will not be the state of 'no,' we are the state of 'we have solutions, give us some flexibility,'" he said. If flexibility is not awarded, as it has been in other states, Sanpei said Utah will "work with what we have."

"I know we won't get any additional anything unless we ask," he said.

The task force also moved ahead with its future recommendation to the governor on Medicaid expansion, narrowing options from nine to three, including preliminary details of full, partial

and no expansion. It plans to study each idea further, prior to delivering a recommendation at the start of the upcoming legislative session.

Rep. Jim Dunnigan, R-Taylorsville, led the discussion on expansion options, saying "there is something for everyone here."

The first option is mandatory expansion, including enrolling all children who fall between 101 and 133 percent of the federal poverty level, removal of the asset test for families applying for coverage under the Children's Health Insurance Program, as well as for pregnant women and adults applying for Medicaid. They'd be eligible based on income alone and the option would newly insure approximately 51,000 Utahns.

The second option is akin to partial expansion, providing Medicaid benefits for Utahns up to 100 percent of the federal poverty level. People above that income level can apply for coverage through the federal health insurance marketplace. The option would cover an additional 54,000 Utahns who are currently uninsured.

A third option adopted by the group for further study is a hybrid of partial and full expansion, in which Utahns up to 100 percent of the federal poverty level would use the state Medicaid system and anyone above that would receive premium subsidies to purchase their own insurance.

Some options would require issuance of a federal waiver, or flexibility to the state to conduct enrollment and eligibility in a way unique to Utah.

Lincoln Nehring, senior health policy analyst for Voices for Utah Children, said the state should also consider the option of full expansion, that would elicit 100 percent reimbursement for the first three years.

"There are ways to do the full expansion and preserve the private market," he said. Expanding Medicaid would insure more of Utah's children.