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## Utah lawmakers push for alternatives to Medicaid expansion

By Wendy Leonard, Deseret News  
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The law, upheld by the U.S. Supreme Court, provides an option for states to expand Medicaid and receive federal funding to cover the costs of such expansion in the first few years of implementation. Federal reimbursement would wane over the course of 10 years, and some Utah lawmakers believe it may not come through at all (Associated Press)

SALT LAKE CITY — Utah lawmakers opposing Medicaid expansion hope to leverage the power of Utah's public lands or get physicians to donate care to alleviate future costs incurred by the uninsured population.

"We know that as a state, we must take care of sick people and poor people and educate children and provide roads and take care of public safety, no matter what happens fiscally in Washington," Rep. Ken Ivory, R-West Jordan, said Friday. "And we have the resources to do that."

Ivory stands behind a substitute bill making its way through the Utah Legislature that aims to prevent Gov. Gary Herbert from implementing Medicaid expansion in Utah.

**HB391**, however, proposes no alternatives by which to accomplish the task of making insurance available to more than 130,000 Utahns who are currently uninsured and would be eligible for the partially federally funded Medicaid program under the expansion rules highlighted in the [Patient Protection and Affordable Care Act](#).

Lawmakers in favor of the bill are hoping Utah will gain control of federal lands within state lines, thereby freeing up an additional source of revenue. Other solutions being discussed include reliance on Utah's culture of charity and volunteerism.

Dr. Ellie Brownstein, a University of Utah Health Care pediatrician, said she donates time to various causes and even provides free care on an occasional basis, "but I also have to make a living."

Brownstein said she only just recently paid off her medical school loans.

"You can't get people to donate everything that is necessary to care for all these people," she said, adding that when people don't have health insurance, they forgo preventive care and usually only see a doctor when a minor problem has turned major and is more expensive to treat.

"We end up paying for them anyway when they visit the emergency room and receive less effective treatment," Brownstein said. "Our care costs more than it does in any other nation, and the outcomes aren't nearly as good."

Brownstein and others are urging lawmakers to halt action on the bill and wait for the results of a Utah Department of Health-commissioned study to be released after the session and before any knee-jerk decisions are made.

The law, [upheld by the U.S. Supreme Court](#), provides an option for states to expand Medicaid and receive federal funding to cover the costs of such expansion in the first few years of implementation. Federal reimbursement would wane over the course of 10 years, and some Utah lawmakers believe it may not come through at all.

Accepting federal money for the expansion, Ivory said, would subject the state to "further federal bondage, with a false promise."

Rep. Jacob Anderegg, R-Orem, substituted the original HB391 in its entirety during a committee hearing Wednesday. He said it was his only hopeful attempt at "keeping ourselves from having to implement this whole thing," referring to the Affordable Care Act, also known as Obamacare.

Anderegg said the plan is not sustainable and federal money is never guaranteed, calling Medicaid

expansion "a step toward socialized medicine."

"This is something that we're not just taking lightly," he said. "We understand there are 131,000 estimated people out there that are without coverage."

Anderegg said he incurred "tens of thousands of dollars" of medical debt during a five-year stint without health insurance and said he told creditors, "I will pay what I can." He still owes \$232.

"People who think they cannot get coverage without this, that's just not true," Anderegg said. "But it takes integrity, and it takes people who are willing to work and make sure they can get things paid off."

Rep. Dana Layton, R-Orem, said it is not OK that so many are without access to health care, but "the government cannot pay for everything."

Layton said the bill is the Legislature's only chance to weigh in on Medicaid expansion, though the final decision lies with the governor, who has said he would wait until after the session when a committee of stakeholders can further discuss the matter.

Judi Hilman, director of the Utah Health Policy Project, said she hopes lawmakers' actions don't sway the governor's decision. The organization has hoped to be a part of the ongoing discussion that will result from release of the health department's report.

"This is not a decision we want to be guided by politics," Hilman said. "This is a decision that should be driven by data and careful analysis."

Regardless of the concerns of some, Anderegg, Ivory and Layton believe they are acting in the best interest of their constituents. They say many have expressed interest in nullifying the entire act of health care reform, which was the original intent of HB391 that was deemed unconstitutional and therefore not likely to pass.

Layton said the state cannot afford to expand Medicaid, and "while there may be a short-term gain for our citizens, in the end, it will be a recipe for disaster."

"I think that Utah, as an independent state, is very capable and much more capable than the federal government of this duty of taking health care to the poor," she said.

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