

Senate, House may be squaring off over Medicaid expansion

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SALT LAKE CITY — Senate Republicans held a rare evening caucus Wednesday to continue discussing a federally-funded Medicaid expansion plan expected to be similar to what Gov. Gary Herbert will unveil later this week.

The governor is already at odds with House GOP leaders, who don't want to accept any of the more than \$500 million available to expand Medicaid coverage under the Affordable Care Act, better known as Obamacare.



Now Sen. Brian Shiozawa, R-Cottonwood Heights, has come up with [SB251](#), a bill using money from Washington to cover some 54,000 Utahns who fall below the federal poverty level but don't qualify for subsidies under Obamacare or Medicaid.

Senate Republicans talked about his plan during their closed-door caucus Tuesday, but set aside more time Wednesday to privately consider it alongside the House proposal as well as the option of taking no action on the expansion.

After more than 1 ½ hours, they had taken no position.

House Republicans have heard the state-funded plan being pushed by House Speaker Becky Lockhart, R-Provo, who is considered a potential challenger to Herbert in 2016, but have yet to take a position.

"I think this is a common sense decision," Shiozawa told reporters earlier about his bill seeking to use some of the almost \$900 million in federal taxes related to President Barack Obama's health care law that Utahns pay annually.

Shiozawa dismissed arguments made by Lockhart that the federal funding is not sustainable and \$35 million in state tax dollars should be used to offer limited assistance to at least a portion of the Utahns in the coverage gap.

The senator said the funding available to Utah could change when the president leaves office, but until then, the program will be defended against cuts because it is a "signature part" of Obama's administration.

His bill calls for a waiver from the federal government to ensure the state's eventual share of the bill for the coverage does not exceed 10 percent of the cost, rather than the 30 percent of the cost available under a partial expansion.

"Likely we'll continue at least through the foreseeable future paying out these enormous amounts of tax dollars to the federal government, so let's take some of them back for the citizens of Utah and care for our own people," he said.

Lockhart said that while she did not know the details of Shiozawa's bill, "it would be irresponsible for the state of Utah to continue to perpetuate reliance on federal money and a continuation and a reinforcement of a socialized medical system."

The speaker had said in her opening address to the 2014 Legislature that the governor was an "inaction figure" for taking the option of "doing nothing" about Medicaid expansion off the table, calling it a trap for the state.

Herbert said earlier this week he planned to announce his proposal for Medicaid expansion by the end of the week. He has made it clear he wants to use federal money to take care of those Utahns who will be without coverage.

Asked if SB251 is the same as what the governor will announce, Shiozawa said Herbert "is going to come up with his own proposal. My hope is that it's very similar, but that's his decision."

The governor has said he has talked with Shiozawa about his bill, noting that as a doctor, the senator "understands the costs of medicine." Herbert has also labeled the House plan "illogical" because it covers fewer people with more state money.

Matt Slonaker, executive director of the Utah Health Policy Partnership, a patient advocacy group, praised the Senate bill.

"Sen. Shiozawa, an emergency room physician, gets it," Slonaker said. "His bill closes the gap and does not leave tens of thousands of Utahns stranded without coverage. Frankly, it puts Utah's state and federal taxpayer dollars to wise use in our state."

Rep. Jim Dunnigan, R-Taylorsville, the sponsor of the House plan contained in [HB141](#) and [HB401](#), said it's a solution but "there's three players, (the House, Senate and governor) four if you count the federal government" making the decision.

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