

# Utah awaits governor's decision on Medicaid expansion

By [Wendy Leonard](#), Deseret News

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SALT LAKE CITY — The state of Utah remains one of the [final few](#) to make a move on Medicaid expansion, with lawmakers and others invited to participate on task forces throughout the summer, whittling a possible expansion down to its core function: to cover the uninsured.

Approximately 300,000 adults in Utah are uninsured, either by choice, their employers don't offer it or they can't afford it.



Of those, 60,000 fall below 100 percent of the federal poverty level — earning less than \$11,500 annually for a single person and less than \$22,550 for a family of four — and don't qualify for premium subsidies through the individual health insurance marketplace, [www.healthcare.gov](http://www.healthcare.gov), which is managed by the federal government.

How many of them get coverage and who pays for it are at the heart of the debate over Medicaid expansion.

Under the Affordable Care Act, the federal government has said it will fully fund expansion in states that opt in, decreasing federal funding to 90 percent after the first three years.

The final say is Utah Gov. Gary Herbert's, who has said that "doing nothing" is off the table. But some lawmakers have already come out strongly against receiving federal assistance.

"President Obama's scheme to swell the Medicaid rolls in exchange for a partial and temporary federal subsidy isn't just a trick. It's a trap." House Speaker Becky Lockhart, R-Provo, said in her [opening remarks](#) to the House earlier this month. "It's an out-in-the-open bait-and-switch guaranteed to leave us worse off, and sooner than we think."

Lockhart, on Thursday, said a new, as yet undisclosed option would be presented to the Legislature early this week adding to the three possibilities Utah's Health Reform Task Force [detailed during the legislative interim session](#).

Task force members said then that lawmakers would lean one of three ways during the current legislative session: mandatory expansion to insure individuals without any other option for health care are covered; offering premium subsidies to those who earn up to 100 percent of the federal poverty level and tax credits to those above; and, full expansion of premium subsidies to individuals, up to 138 percent of the federal poverty level, to make sure everyone has access to care.

"The options from the task force were a good start, but discussions have continued from there," Rep. Dean Sanpei, R-Provo, said. He didn't elaborate on where lawmakers stand.

Any talk on what the Legislature might do has occurred mostly behind closed doors. The bipartisan body didn't reach an agreement last year and, so far, halfway into this year's session, a bill on Medicaid expansion has yet to be drafted.

"It's been a long process, but we're happy the conversation is still happening," said RyLee Curtis, Medicaid policy analyst with the [Utah Health Policy Project](#), an advocacy group for the uninsured in Utah.

"A lot of these people are working Utahns, maybe working part-time to make ends meet and they are uninsured through no fault of their own," Curtis said.

Many of Utah's uninsured population don't make little enough to qualify for Medicaid, which Curtis said is largely seen as a program for children and people with disabilities.

"There's a lot of parents who fall into this coverage gap," she said, adding that parents who lack insurance may have trouble caring for their families if they become sick or saddled with debt from mounting medical bills.

"Nobody wants to leave these people out, it's just how far we go," Curtis said.

How many of the nearly 10 percent of the population the state can afford to help, either with or without federal funding, is what lies in the balance.

"This is Utah's most vulnerable population," Curtis said. "They just need help. They're working and they need that helping hand to get them a little further."

The [Utah Hospital Association](#), a health care industry advocate and policy group, has come out in support of a limited expansion of Medicaid. The group has pushed for a plan that would provide coverage for people who live below 100 percent of the federal poverty level, many of whom already qualify for Medicaid.

Utahns earning above 138 percent of the poverty level can qualify for federal subsidies and obtain insurance through the federal health insurance marketplace

"It's just very difficult to get them coverage otherwise," the association's president and former lieutenant governor of Utah, Greg Bell, said following a November [announcement](#) of the organization's position on expansion. "They just can't afford it."

He said the state has a duty to "take care of it's own," which includes the disadvantaged population.

Despite the countless hours of examination conducted by state agencies, the task force and the governor's Medicaid work group, as well as national organizations that have detailed anticipated costs and savings for expansion and no expansion in Utah, the state has yet to reach an accord.

"We've got to get people to understand this ought to be based on common sense and adhere to concern for the taxpayer as opposed to ideology — because we don't like Obamacare, therefore we won't take a federal dollar," Herbert said during a February meeting with the Deseret News Editorial Board.

Herbert has yet to detail his plan and has said resolution on the matter may extend beyond its current 45-day assembly, into a special session of the Legislature.

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