In the reddest state in the Union, Utahns flocked to Obamacare, with 84,601 signing up for health care under the Affordable Care Act. Utah residents also procrastinated—more than half of those who bought health insurance through the ACA did so in the month leading up to the March 31 enrollment deadline.

The high number of Utahns who bought plans—and the high quality of the care they purchased—are indicators that the vast political turmoil and glitchy federal web site weren’t enough to convince people that they should continue to go uninsured, says Jason Stevenson, education & communications director for Utah Health Policy Project.

But the numbers still “surprised those of us who worked on this, especially from our initial estimates,” he says. “And I think it also surprised a lot of people who thought that this would fail, not just in Utah but across the country.”

Stevenson says a number of Utahns who signed up were initially opposed to the ACA. But once skeptics realized they could get comparable coverage to what they had at more affordable prices, many decided to switch.

And young Utahns who signed up for health care plans through the ACA also opted for more upscale coverage than their counterparts across the country, figures from the U.S. Department of Health and Human Services show.

In the 18-34 age category, 35 percent of those who signed up purchased silver plans, accounting for the highest percentage in the nation. Utah tied for third place in this age category for those who purchased gold plans. Gold plans have higher premiums, but typically have lower deductibles and co-payments than silver plans.

Stevenson says the plans were cheaper in the Beehive State than elsewhere around the country. “In Utah, people’s money went further,” he says, noting that when it came to purchasing silver instead of the cheaper bronze plans, other states are “nowhere close to us.”

The lower costs here, he says, are attributable to Utah having low smoking and binge drinking rates, as well as having one of the lowest obesity rates in the nation.
It helps, too, that an array of insurers offered plans in Utah compatible with the Affordable Care Act. In some other states, like Georgia, Stevenson says, far fewer insurers stepped to the plate to offer plans.

“All of those things help affect health care patterns,” Stevenson says. He says silver plans in Georgia cost up to $250, while similar plans in Utah were around $160. In Boise, the cheapest silver plan was $209.

Even though open enrollment for 2015 doesn’t start until November, Stevenson says people who experience a “qualifying life event” can still sign up. These events include getting married, adopting or giving birth to a child, or losing a job. Getting sick, Stevenson says, does not qualify.

Stevenson expects that when enrollment opens, many Utahns who held onto their private plans will move over to plans under the ACA. He estimates this number could be up to 100,000 people.

But any joy from health-care-expansion advocates over Utahns’ embrace of the ACA was stunted by the political gridlock over expanding Medicaid.

An estimated 57,000 people who qualify for Medicaid have so far been left out of the health-insurance puzzle because Utah leaders have insisted on developing their own safety net for the state’s neediest.

At a May 22 news conference, Gov. Gary Herbert expressed hope that legislators would take action on his proposed Healthy Utah Plan by the summer’s end. But even if state legislators vote in favor of the proposal, all of the provisions of the customized Utah plan need to be approved by the Obama administration, leaving resolution for these uninsured Utahns at least months, and perhaps even a year, away.

“It’s not a matter of being fair, it’s a matter of doing what’s prudent and fiscally responsible,” Herbert says. “I’m optimistic that we will, in fact, have a solution to deal with this issue that is very emotional.”

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