

Report: Utahns lacking insurance aren't necessarily lacking jobs

By [Wendy Leonard](#), Deseret News

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SALT LAKE CITY — Utahns lacking insurance aren't necessarily lacking jobs, according to a new [report by FamiliesUSA](#).

The analysis of U.S. Census data attempts to defy traditional stereotypes that point to the uninsured as people who are unwilling to work, but also bolsters previous reports that expansion of Medicaid would benefit the state financially.

Sixty-six percent of the approximately 140,000 uninsured Utahns have held down a job in the last year, according to the report. An additional 18 percent are students, nonworking spouses or are people with disabilities, and the remaining 16 percent are unemployed.

The report "looks more closely at who stands to gain coverage if the state elects to close the coverage gap, and the role those people play in the state's economy," said Rachel Klein, director of organizational strategy and enrollment at FamiliesUSA. "Most of the people to be helped are working."

"These are people trying their best, doing what they can with the situations they are in, working without access to employer-sponsored insurance. A lot of people think if you've got a job, you've got insurance, and that is simply not the case."

RyLee Curtis, Medicaid policy analyst with the Utah Health Policy Project



The workers identified in the report, she said, are in "occupations that residents rely on," including food service, sales, administrative support, construction, production, transportation, personal care and

management.

"These are working Utahns who hold jobs that are a critical part of the state's economy," Klein said. "Access to health insurance means a healthier, more productive work force, and that's good for businesses, too."

Utah lawmakers have yet to make a decision on Medicaid expansion, already missing out on the first year of available federal reimbursement.

Gov. Gary Herbert has presented a [Healthy Utah plan](#) that would provide grant money (obtained from a federal waiver to the original expansion program) to Utah's poor, to subsidize their insurance costs. Herbert has said the plan would not only provide an opportunity for individual responsibility and support private insurance markets, but also would allow the state some flexibility in executing the federal program.

"His proposal strengthens the employer-sponsored insurance market," said RyLee Curtis, Medicaid policy analyst with the Utah Health Policy Project. She said the governor's plan is "a step in the right direction."

However, the Utah Legislature has yet to sign off on Herbert's proposal, which may result in a special session later this year. Curtis said if a resolution is reached, enrollment could optimistically begin by early 2015.

FamiliesUSA's report, released Wednesday, alleviates a misconception about who falls into the coverage gap in Utah, Curtis said.

"These are people trying their best, doing what they can with the situations they are in, working without access to employer-sponsored insurance," she said. "A lot of people think if you've got a job, you've got insurance, and that is simply not the case."

Damian Trujillo, 36, works as a case manager at a drug and alcohol treatment center in Salt Lake City. He's attending Salt Lake Community College, trying to earn a degree, but he has been uninsured his entire adult life and various illnesses and conditions have set him back.

"I've always used the excuse that I can't afford to see a doctor," Trujillo said, adding that his emergency medical bills have been sent to debt collectors in the past. He said having access to insurance would not only help him physically, but also would relieve stress, "because I'm not sure what is going to happen to me, whether I get in an accident or get sick."

He doesn't make enough to buy his own insurance and, without children, doesn't qualify for Medicaid in Utah.

Trujillo's story, Klein said, "exemplifies what is at stake for many Utahns."

To qualify for Medicaid, Utahns must meet strict standards, including being pregnant, having a disability or living in poverty — at or below 47 percent of the federal level, or \$9,301 for a family of three.

Others, also poor, can qualify for coverage through other programs, but most adults without children are not eligible for state help with health insurance, no matter how poor, said Klein.

"It's implicit, if you've got a healthy work force, they're more productive and reliable," Curtis said.

To read the report, visit www.famiiliesusa.org/library.

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