

Health community pushes Healthy Utah Plan

Link: <http://www.thespectrum.com/story/news/local/2014/08/22/health-community-pushes-healthy-utah-plan/14426961/>

David DeMille, STG 10:26 p.m. MDT August 21, 2014

ST. GEORGE – Utah’s top health official said Thursday he is optimistic about the prospects of gaining federal approval for a state-tailored private expansion of Medicaid, but some strides still need to be made.



David Patton, director of the Utah Department of Health, met privately with elected officials and other community leaders during a visit to Washington County, part of a campaign to gather support for Gov. Gary Herbert’s Healthy Utah Plan, proposed as a compromised alternative to a full Medicaid expansion under the Obama Administration’s Affordable Care Act.

As in many Republican-led states, lawmakers have been hesitant to vote for any Medicaid expansion plan, concerned about the potential strings attached and uncertain that the federal government would be able to continue footing its end of the bill.

But some health care officials say this has meant more unnecessary emergency room visits and financial hardships for the state’s poorest and sickest individuals. Some estimate more than 60 percent of bankruptcies in the U.S. are caused by health problems.

“That’s what keeps people from getting the health care they need,” said Nancy Neff, CEO of Family Healthcare, a nonprofit provider based in St. George. “So then they get sicker, and then they go to the hospital and they’re in the hospital longer, and that costs you and me more and everyone who is insured more and the hospitals more.”

Neff said about half of the patients she sees at Family Healthcare fall into the gap of those who are going uncovered because of the lack of an expansion. When those people need surgery or other specialty care, they have to find another provider and can’t foot the expenses, she said.

Approximately 110,000 low-income Utahns were directly affected when Utah legislators declined to approve the expansion last year, and a lack of funding is threatening to lead to cuts for other services such as substance abuse prevention and treatment programs.

The Healthy Utah Plan would help low-income people enter the private insurance market by offering premium assistance for those making up to 138 percent of the federal poverty level — currently \$23,850 per year for a family of four — but would require co-pays for those earning above the poverty line and also come with work requirements for those who are able.

That last part has been a sticking point in negotiations with the federal government, which must approve whatever plan Utah proposes, but Patton said he thinks the two sides are close to an agreement.

“We know where they are on issues, we know where they’re saying yes and we know where they’re saying no,” he said. “We have tried to give them options for the areas where they’re saying no, and we’ve been very successful.”

If federal officials sign off on the program, Herbert has indicated he would like to call a special session of the Legislature sometime later this year and implement the program early in 2015.

There has also been talk of holding off until during the 2015 legislative session, which starts in January, so lawmakers might consider other expansion proposals that might develop.

“Those are just the political realities,” Patton said, noting that with an election upcoming in November, many lawmakers could be less likely to vote for something attached to Obama’s signature legislation.

Utah is one of 24 states that has yet to approve an expansion, part of the “Obamacare” act that went into effect in January.

Herbert stepped in with his alternative plan after it appeared state lawmakers would not agree on an expansion, potentially leaving the state out of the \$258 million available for such an expansion.

Budget officials estimate Utah is paying some \$700 million into the Affordable Care Act, but the state will not receive any return on that payment unless Herbert’s plan or some other form of Medicaid expansion is approved.

Officials estimate the plan would help 4,600 people in Washington County to get private insurance, including 2,250 who currently live below the poverty line.

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