Healthy Utah Plan in the works for those in the uninsured gap

Written by Devan Chavez
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ST. GEORGE — Gov. Gary Herbert and the Utah Department of Health are working collaboratively to finalize a three-year pilot program called the Healthy Utah Plan, designed to eliminate a coverage gap created by the Affordable Care Act and the state’s Medicaid limitations, as well as assist Utahns who earn a low-income wage.

After the Affordable Care Act passed in 2010, states were originally required to expand their Medicaid programs; however, in 2012, the Supreme Court ruled states could not be forced to expand their Medicaid coverage. This created a coverage gap — or “doughnut hole” as it has come to be called within the industry — for those whose income is too high to qualify for Medicaid but too low to qualify for insurance and subsidies under the Affordable Care Act.

In many cases, those in the coverage gap are currently uninsured because they can’t afford private insurance.

In many cases, those in the coverage gap are currently uninsured because they can’t afford private insurance. The number of Utahns in the coverage gap, according to the Henry J. Kaiser Family Foundation, is 57,850. The Healthy Utah Plan would take those currently in the coverage gap and move them into a private insurance plan – not a government plan or Medicaid, Jason Stevenson, education and communications director for the Utah Health Policy Project, said.

Medicaid does not pay the full amount for many procedures, Dr. David Patton, executive director of the Utah Department of Health, said at a recent media forum at Family Healthcare in St. George. This would be one problem the Healthy Utah Plan could help remedy.

“Under this plan, providers are paid commercial rates,” Patton said. “So access will not be an issue; every doctor will be willing to take these individuals.”

Healthy Utah Plan anticipates the federal government will cover 100 percent of the funding for the first three years.
While 70 percent of Medicaid cost is covered by federal funding and 30 percent by the state, the Healthy Utah Plan anticipates the federal government will cover 100 percent of the funding for the first three years and 90 percent thereafter, leaving the state to cover 10 percent of the cost annually after the first three years.

The plan would dramatically increase the number of Utah residents who would have access to health coverage, Patton said. An estimated 92,000 Utahns would be covered by the Healthy Utah Plan in 2015, 4,600 of which would be Washington County adults. The 92,000 Utahns covered in the plan would include those currently caught in the coverage gap, along with others who fall between 100 percent and 133 percent of the federally identified poverty level — meaning they earn less than $15,521 per year.

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During a media conference call on Tuesday, Gov. Herbert said Utahns who are able-bodied but currently unemployed would benefit from the Healthy Utah Plan because it would assist them in finding work by enrolling them in training and educational programs - meaning: this plan would benefit those who are employed as well as those who are seeking work. Being currently employed, seeking employment or participating in these training and educational programs are expected to be possible requirements of enrolling in the Healthy Utah Plan.

“We want to make sure people understand ... that you do not have to have a job to qualify for Healthy Utah,” Herbert said, “but we’re going to funnel people into an effort to get employed.”

The Healthy Utah Plan is for those who are trying their best to support themselves or their families, Patton said, not for people who are lazy or don’t bother to make an attempt at finding work. Enrolling Healthy Utah Plan members in training programs and helping them get employed helps ensure that.

The Healthy Utah plan will also reach people who are medically frail — who are not able to hold a job and get their employer to pay for their coverage, Patton said. The plan will also benefit those who do work but are not able to receive coverage from their employer.

“A lot of these people are already working, sometimes two or three jobs,” he said. “These are the people we are talking about.”

This would eliminate current costs to governments and the nonprofit sector that result from uninsured people who can’t afford to pay visiting emergency rooms for assistance

Because of the high number of Utahns currently without insurance, Patton said, it is important for the public and legislators to take a serious look at the Healthy Utah Plan so those who need medical assistance or specialty care can begin getting it at a proper venue. This would eliminate current costs to governments and the nonprofit sector that result from uninsured people who can’t afford to pay visiting emergency rooms for assistance with ailments like the common cold, or going to nonprofit health providers that, subsidized by the federal government, are able to care for them.

“The community in health care tends to all agree that this is a good idea ...,” Patton said. “So it’s the ones who are not as familiar who are trying to struggle with, What are you trying to do; who are the people you are trying to cover; and ... do we need to help that group of people?”
The state’s plan will be funded through federal funding sources availed under the Affordable Care Act, Patton said.

**Family Healthcare in St. George**

Nancy Neff, CEO of Family Healthcare, a St. George-based nonprofit health provider, said offices like Family Healthcare engage in a lot of preventive health care; but while providers like Family Healthcare can be of assistance to some individuals, they are not able to give specialty care, such as surgery or long hospital stays. Those requiring these forms of specialty care may then go into serious debt or go without treatment.

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“Anything that’s not your primary care doctor’s job, we cannot serve ...,” Neff said. “So that’s where the huge expenses come in for people (who are uninsured) and that’s what bankrupts people. And that’s what keeps people from getting health care; the health care that they need.”

Up to 56 percent of Family Healthcare’s patients are totally uninsured and pay up to $25 for a visit to the center, Neff said. All of Family Healthcare’s staff members are fully employed and are not volunteers, meaning patients get to see the same provider each time they visit the center.

**Implementing the Healthy Utah Plan**

After heading to Washington, D.C., this month to speak with the White House and Secretary of Health and Human Services Sylvia Burwell to lay out his final plan, it is Herbert’s hope to then pass the pilot plan through a special session of the state Legislature in 2014 so it can be effective for 2015, Stevenson said. If a special session cannot be held, the governor’s plan may be pushed into the 2015 general session.

The meetings in Washington, D.C., have been going well, Herbert said during Tuesday’s media conference call. His staff, along with those at the Department of Health and Human Services, are working together to come to an agreement on the Healthy Utah Plan.

“I am very optimistic after (the meeting on Sept. 9) that we can resolve any differences that may still exist,” Herbert said, “and I feel like we made great progress to this point and look forward to having final resolution within the next couple weeks.”

**Immediate help for those having trouble getting insured**

Those who may have questions regarding the Healthy Utah Plan or are curious about other health care options can contact Take Care Utah by visiting their website or calling 211.

Those with questions can also visit centers like Family Healthcare, where certified application counselors can assist them in applying for Medicaid and other plans. Patton said if the plan goes into effect, there will be assistants in the community, on the phone or in offices who would be able to help people get the care they need.
I don’t make enough to qualify for any of the low rates provided by Obamacare, I am a student with a part-time job, so I can’t afford any regular rate insurance. I am too old to qualify for Medicaid because the state chose not to expand the program (and I don’t have kids, so I can’t qualify that way either). I am also too old to be on my parents insurance plan. So I am stuck in that hole, and hoping I don’t have to pay the penalty tax for not having health insurance. Also hoping no medical problems come my way right now. It is kind of funny to me that you have to make so much to qualify for Obamacare, otherwise they expect the state to take care of you; which Utah does not.

Dana September 15, 2014 at 5:41 am · Reply

Ryan, you nailed it for thousands of us not only in Utah but also throughout the nation.