



## PCN Enrollees

# SPEAK UP

**Utah's Primary Care Network restricts health care access—forcing families to juggle urgent health care needs**

### ***“PCN is a Band-Aid Solution”***

Ten years ago, Julie and her husband owned their own successful business and had private health insurance. But it all turned upside-down when Julie's husband became ill. Now, Julie is the primary provider for her family; she works part-time at the local middle school helping children with special needs. She is not offered health benefits through the school, though her husband receives disability Medicare. Their two children are covered through CHIP and Medicaid. This leaves Julie out in the cold. All she can qualify for is the state's Primary Care Network (PCN), which only covers basic preventive care.

PCN is *“not much comfort”* remarks Julie. *“It's really a band-aid, not a fix.”* Julie is concerned about what will happen if she becomes seriously ill and needs to be hospitalized or see a specialist—services the PCN doesn't cover. *“What can PCN do for me then? And more importantly, what could I do for my family as the sole provider?”* she asks. Julie hopes health reforms will mean coverage is more user friendly, less discriminatory and available to everyone in need, not just those who meet limited qualifications.



However minimal the coverage through PCN is, Julie worries that full time employment would put her over the income limit for *any* coverage. She feels pressured to keep working part-time just so she can keep the lousy health coverage she has through the PCN.

### ***Policy Solution: Pass National Health Reform This Year***

Julie characterizes her coverage through Utah's Primary Care Network (PCN) as *“a band-aid, not a fix.”* The PCN helps individuals earning less than 100% of the federal poverty line (FPL) and parents earning less than 150% of the FPL access primary and wellness care. However, it does not provide adequate coverage for its enrollees. One indicator that Utah has successfully implemented health system reforms will be when the PCN is replaced with affordable coverage that Utahns can count on in catastrophic situations.

The most cost-effective, if not the *only* way to cover low-income otherwise uninsured adults is through Medicaid. Unfortunately, only 23% of adults under 100% of poverty have an offer of employer sponsored insurance (only 48% under 200% of poverty do). For this adult population a modest expansion of Medicaid eligibility to 133% of the poverty level is the most appropriate coverage solution. Medicaid delivers decent care for low-income and vulnerable populations at the right price for taxpayers.

Families like Julie's are playing Russian-roulette with their health and their finances when they do not have access to reasonable coverage. Congress and the state should enact health reforms this year that will finally bring peace of mind to Utah families like Julie's.