Despite public, Senate support, Utah House blocks hearing of Healthy Utah Plan

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Written by Paul D. Dail

On Wednesday, Feb. 25, the Utah Senate voted 17-11-1 to pass SB164 S01, an amended version of Governor Gary Herbert’s Health Utah Plan. The Senate has sent the bill to the House of Representatives; however, in a press conference on Wednesday afternoon, Republican House Speaker Greg Hughes said the bill has no support in the House. RyLee Curtis, the senior policy analyst at the Utah Health Policy Project, has said that Hughes plans to let the bill die in the House Rules Committee, but citing three public opinion polls, Curtis said the bill should be moved to a committee hearing involving public comment. Opinions from southern Utah House representatives have varied.

As an alternative to the expansion of Medicaid as suggested by President Obama’s Affordable Care Act, the purpose of the Healthy Utah Plan is to help Utahns caught in the “coverage gap” between making too much money to receive Medicaid assistance but not enough to qualify for subsidies to purchase health insurance through Utah’s new insurance marketplace.

According to Utah Heath Policy Project, a nonpartisan, nonprofit organization advancing sustainable health care solutions for underserved Utahns through better access, education, and public policy, approximately 53,000 Utahns fall into this coverage gap.

“We know that 66 percent of these folks are already working one or more jobs,” Curtis told The Independent. “These are low income workers who aren’t offered employer sponsored health insurance … The last two years, [Utah] had the option to expand Medicaid as is under the Affordable Care Act. The last two legislative sessions, we’ve tried to do that, but it failed miserably.

“The Healthy Utah Plan is a culmination of two years of study, of ‘what can we do to make this work for Utah?’” Curtis continued. “Medicaid expansion was kind of dead on arrival, and Healthy Utah was created to be palatable for the Utah legislature and still get those folks coverage.”

Prior to the Senate approving SB164, the bill was amended to limit the plan to a two-year pilot program and allow the legislature to fund the $25 million state cost over the two years.
Supporters of the bill—including Utah Health Policy Project—have stated that the program will trigger enhanced federal funding, returning as much as $966 million in Utah taxpayer dollars back to the state over the timeline of the pilot program. Opponents have questioned these costs as well as the feasibility of simply terminating the program at the end of the two years.

Southern Utah District 62 Representative Jon Stanard is one of these opponents. “The unknowns of the financial problems it will bring to the state are overwhelming,” Stanard told The Independent on Thursday. “My statements were that we should not ‘do nothing,’ and we should strive to help who we can with a budget we can sustain. That is the direction the house is moving in currently. Furthermore, our current Medicaid program is underfunded. If we are not careful a massive expansion such as Healthy Utah could seriously jeopardize the funding of currently disabled Medicaid patients.”

Stanard told The Independent that a House alternative to SB164 should be announced soon.

While not specifically in response to Stanard’s comments, the Utah Health Policy Project quoted Curtis in a press release as addressing similar statements made by the opposition to Healthy Utah.

“House leaders have repeatedly said that ‘doing nothing is not an option,’” Curtis stated in the release. “The House has now been delivered a bill that has the strong support of business leaders, health care organizations, and majority of Utah voters.”

Curtis added, “We’ve had three public opinion polls spanning across the state of Utah that show that there is public support for this ... To just let [SB 164] not be heard is not serving the public.”

The surveys to which Curtis is referring span from April to September of 2014, all showing a majority of respondents favoring some form of expansion of services to address the coverage gap. In April, a survey by the BYU Center for the Study of Elections and Democracy found that out of 880 registered voters, 43 percent favored the Healthy Utah Plan and 33 percent favored Medicaid expansion, totaling 76 percent. A poll by Dan Jones & Associates in September produced a similar total, however these results showed 54 percent favoring the Healthy Utah Plan and 23 percent favoring Medicaid expansion.

While House Speaker Hughes may have called the bill “political pageantry” in the Wednesday press conference and stated that the plan has no support, Curtis disagreed.

“The Senate obviously likes the plan,” Curtis said. “The governor likes the plan, and we know that the public likes the plan. We know the House Democrats want to hear it. They issued a press release [on Wednesday], and we know that we have people in the GOP that would support this ... Republicans who are doctors who want to see this in the House ... This is a matter of serving the public in a way that represents them well.”
Southern Utah District 71 Representative Brad Last would agree. At least with the idea that the bill should be moved out of the House Rules Committee and to a committee hearing which would involve public comment.

“I signed a statement to suggest as much,” Last told The Independent, “but I’m not sure that would make a significant difference in the overall outcome of the Healthy Utah plan.”

Somewhat echoing Stanard’s comments, Last said there were several other proposals on the table.

“The House has put forth two or three other plans and right now we are looking at a variety of options,” Last said. “The leadership of the House of Representatives is trying to get a feel for where the entire House would like to come down [on the issue]. Trust me, there are a lot of varied opinions. That’s the challenge … In defense of the Speaker, I think he is trying to outline and defend, if you will, the position of the House of Representatives.”

Last said the suggestions range from doing nothing at all to plans that are more modest than full Medicaid expansion. He said the latter category addresses the most needy and most frail but also attempts to contain the cost somewhat.

As to the District 75 representative, in October of 2014, Don Ipson told The Independent that one of his concerns regarding Healthy Utah was whether the plan would support a “work requirement” which would automatically enroll subsidy recipients with the Department of Workforce Services, or whether the plan would end up with an option for recipients to “opt-out” of this requirement.

“If [Herbert] gets the employment piece of the plan, it makes it more palatable,” Ipson said, “but I think it’s a wait and see situation.”

When The Independent spoke with Ipson on Friday, he said it was still one of his concerns and that he had not signed the statement to which Representative Last referred.

“They haven’t granted [the work requirement],” Ipson said, “so it’s part of what we’re negotiating.”

Curtis confirmed that the Healthy Utah Plan does have a “work benefit” but not a “requirement.” Those being covered by Healthy Utah will not lose their benefits if they do not participate.

Explaining the work benefit, Curtis said, “There’s an automatic referral for folks who are not medically frail and don’t already have a job … They would be automatically referred to the Department of Workforce Services for job training, help with resume building, interview skills, and job applications.”
Curtis went on to restate the studies showing that 66 percent of the people are already working at least one job.

“So it’s not a matter of these people not working,” Curtis said, “and then the Department of Health is saying [an additional] 10 percent are medically frail, so they are near disabled.”

Given these figures, when The Independent asked Ipson if just under 25 percent was still too high of a number of those who could be working but currently aren’t, he said he wasn’t sure.

“We’ll see,” Ipson said. “You’re asking me a question in the middle of negotiation, and I don’t think it pays me to talk to it at this point.”

District 74 Representative Lowry Snow has been unavailable for comment.

On Friday, House Majority Leader Jim Dunnigan told the press he had a plan in the works but was playing the cards close to his chest. So far, no specific legislation has been put forth by the House as an alternative to SB 164. Utah Health Policy Project sent out a press release stating they were organizing the “Rally to Support Healthy Utah” at the Utah State Capitol Rotunda on Thursday, March 5, from noon to 2 p.m.

“If [SB164] goes to a committee hearing, the public would have an opportunity to be heard,” Curtis said. “Let the bill be heard.”

RESOURCES:

Cover the Gap: Polls & Surveys Summaries