

My view: In the spirit of humanity, let's adopt Healthy Utah

By David Sundwall

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I have read with interest the flurry of articles related to the recent decision of the U.S. Supreme Court to uphold the legality of the premium subsidies for individuals to purchase health insurance on the federal “exchange,” using Utah’s online health insurance marketplace. This ruling allowed more than 86,000 Utah citizens to keep the health insurance coverage they obtained through the Affordable Care Act (ACA) legislation.



There have been many opinions expressed in the national media and in our local press as to whether this particular decision by the Court was good or bad, right or wrong, and whether it will influence our legislature to finally move forward and approve Gov. Gary Herbert’s Healthy Utah proposal for a relatively modest expansion of Medicaid in Utah. I could understand the reluctance of our lawmakers to adopt the Governor’s proposal while there was a possibility that the legality of important provisions of the ACA might be overturned, but now it is confirmed as the law of the land. The excuse of uncertainty is no longer valid.

I was pleased to read in this paper last week that a group of legislators, the “Gang of 6” (Gov. Gary Herbert, Lt. Gov. Spencer Cox, Senate President Wayne Niederhauser, House Speaker Greg Hughes, House Majority Leader Jim Dunnigan and Sen. Brian Shiozawa), who are working on health reform, have developed an alternative proposal that will cover all under 138 percent of the federal poverty level, and if this could be approved it may be even better than Healthy Utah. So much the better — regardless of the specifics, it is time to move forward.

I support Medicaid expansion in our state from the perspectives of a practicing physician who sees patients in one of our state-supported “safety net” clinics, the “Health Clinics of Utah” in Salt Lake City, which provide primary and preventive care, and mental health services (there are also state-supported clinics in Ogden and Provo). Many of our patients are covered by Medicaid, but many have no insurance and pay a sliding scale fee based on their income. It is this category of low-income patients who would likely benefit most from the proposed expansion of health insurance coverage for the poor in our state.

Having served as a doctor to many folks on Medicaid over the years, I would like to help dispel some of the negative stereotypes I hear repeatedly about them. You have probably heard generalizations about people who are on Medicaid — they are irresponsible, do not keep appointments, are heavy utilizers of health care services, are quick to go to costly hospital emergency rooms for care and that they don't take care of themselves. Of course all of these negative characteristics apply to some Medicaid beneficiaries, and these patients pose a challenge to those of us trying to care for them. But in truth, those currently who are covered by Medicaid are a remarkably diverse group of people and from my experience most are not indifferent to their own health, or to the cost of the health care services they receive. Many of them want to get well and get off Medicaid. In fact, Medicaid often serves as the foundation of a bridge that enables people who find themselves poor and dependent on public support to regain their independence and get back into the workforce, or if they are working in a low-paying job, to gain a higher level of employment that enables them to afford private health insurance. So, being on Medicaid is often a temporary situation for non-disabled adults, the average duration of coverage being nine months for any given period, not a life-long dependency.

I have always been proud that Utah is a place with a strong cultural tradition of caring for the poor and needy among us — in our families, our neighborhoods, through our churches and by multiple voluntary organizations. While many believe “government programs” should be a last resort, as I do, we must acknowledge that they are an important component of our collective conscience, of our humane response to caring for those in need and they simply can't be left out of the equation.

Some have proposed that we rely only on charitable efforts to care for the poor, but while helpful, charity care is simply not enough. So in the spirit of humanity for all, and recognizing that each of us or our loved ones could at some time find ourselves in need of the support Medicaid can provide, I strongly encourage the Legislature to move forward to approve and implement Medicaid expansion soon. So legislators, please — no more studies or protracted deliberations. Let's act now.

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