

Editorial: Of course Utah should tax health care providers

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Of course Utah should tax hospitals, clinics and other health care providers for part of the revenue stream that will be necessary to pay for its version of Medicaid expansion into the future. This, [we are told](#), is the idea that state officials have finally hit upon, three years after it should have been an obvious part of the answer to the question that critics of the Affordable Care Act couldn't or wouldn't get around: How do we pay for this thing?



The ACA, aka Obamacare, was always going to pay at least 90 percent of the cost of expanding the program that provided some medical care for the poorest of the poor, and to cover a large gap of people who are too rich for traditional Medicaid and too poor for subsidized health insurance.

And taxes on the health care and health insurance sectors have been part and parcel of the ACA right along. That's why the Congressional Budget Office has always scored Obamacare as a net deficit reducer over time. But Utah lawmakers, rejecting first the ACA and then Utah Gov. Gary Herbert's Healthy Utah alternative, were frozen with worry over how to pay for the program.

In order to drag the matter out for three years, the blockade in the Utah House had to willfully ignore two facts:

1) Delaying Medicaid expansion, or some alternative, would leave tens of thousands of Utah residents without access to health care. The result would be — has been — unnecessary suffering and preventable deaths. It does appear that one of those deaths, the loss of activist [Carol Frisby](#) to an untreated case of colon cancer, made an impression on lawmakers that the statistical argument never did.

2) Accepting Medicaid expansion, or some alternative, could not be anything but a net financial benefit, both to government and to the state's overall economy.

It would relieve government of substantial costs for treating prison inmates, the mentally ill and those with substance abuse problems. It would be a huge boost to the state's large and growing health care sector — one part of the economy that can't be off-shored — slashing the amount of unpaid care given, creating jobs and multiplying through the economy in the same way that federal money spent on, say, Hill Air Force Base benefits all of Utah.

The Utah Hospital Association has long accepted the idea that it should help pay for health care access expansion. Doctors and the pharmacy industry, [we are told](#), were less accommodating. But the greatly increased number of paying customers they will receive will far offset any new taxes or fees they might be assessed.

The Legislature should make this deal, speed through the numerous loose ends, expand access to health care, and start avoiding those avoidable deaths.