

OPED: The ongoing Medicaid expansion debate

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Over the last couple of weeks, the Utah Legislature has been considering another possible plan to expand health insurance coverage to include adults whose income is below the poverty line.

Lack of access to basic health care and preventive medications is a problem that is common in our community. Losing a job, or having a partial medical disability, or a divorce can quickly result in a loss of income and a loss of health insurance. In my personal experience, I have known individuals for whom a loss of insurance has resulted in seizures and hospitalization when they ran out of their medication, hospitalization in a diabetic coma after running out of insulin, death from breast cancer after not getting chemotherapy, death from colon cancer from not getting their screening colonoscopy, multiple examples of medical bankruptcies, and many,

many other negative medical outcomes.

The situation is this. For almost three years now, we as a state have been paying increased taxes (around \$450 million per year) for the intended purpose of getting coverage to adults whose income is below the poverty line. That money is leaving our state and right now we are not getting any of it back. The money and the coverage is available to come back to our communities if we can find some way for the state to pay 10 percent of the costs (about \$50 million per year), but so far our legislature has not been able to agree on a plan.

There are several ways in which the state could pay its portion of the cost. Part of the solution clearly would involve an increased tax assessment on hospitals. Utah hospitals currently have \$50 million dollars every year in bad debt that is estimated to be covered if this plan goes through, so if the state were to tax hospitals for \$25 million, the hospitals still would come out with an additional \$25 million (for the same amount of patient care), which they could keep as profits or pass those savings on to their customers in the form of lower costs.

If we are able to find a plan that gets legislative support, the \$450 million that returns to the state is expected to generate an additional \$15 million in state income and sales tax that could be put towards the state's portion of the cost without taking any money from education or other important state programs.

Additionally, if we can get this coverage, the state will see other savings to its budget. Every parent who gets treatment for their mental health issue before they have a mental breakdown to the point that their children are taken to the foster care system, is money that the state doesn't have to pay for case workers and foster parents. Every person who isn't forced onto permanent disability (our current system) as a prerequisite for getting coverage through Medicaid, is a disability payment taken off the state budget. Every paroled prisoner who gets mental health or substance abuse treatment, and therefore avoids going back to prison for re-offending, is money that the state doesn't have to pay to incarcerate that person again. In all of these cases it is obvious that the person's life is better as well.

For 3 and 1/2 years now we have failed to find a solution and so have forfeited our share of our federal tax money and have left 60,000 Utahns without access to medical coverage that might have made a good improvement to their lives and our community. It is time to move forward.

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