Press Release
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Utah Department of Health to Hold Informal Public Comment Discussions on Medicaid Extension in St. George, Utah on April 21

St. George—The Utah Department of Health (DOH) is holding six public hearings for Utah communities and citizens to express their concerns with an 1115 Health Care waiver they are required to submit to the federal government by July 1st, 2016 as stated in HB437. One of the informal public discussions is schedule to take place on April 21st in St. George, Utah. All interested citizens, stakeholders, organizations, etc. are encouraged to attend the public comment event and provide feedback on how the DOH is designing the 1115 waiver.

What: Informal Public Discussion on HB437
When: Thursday, April 21st, 2016
Time: 4:30pm-5:30pm
Where: Dixie Regional Medical Center
1424 E. Foremaster Dr., St. George 84790
Link: http://health.utah.gov/MedicaidExpansion/hearings.html

HB437 is a bill that was passed during the 2016 legislative session in lieu of a full Medicaid expansion. Full Medicaid expansion would have provided access to medical coverage for over 131,000 Utahns (64,500 of which live below 100% FPL and can’t access Medicaid or subsidies on healthcare.gov) in 2018 for $35.9 million state taxpayer dollars. Instead, Utah lawmakers passed this bill, which will provide 16,300 Utahns access to medical coverage in 2018 for $31.2 million state taxpayer dollars.

This program prioritizes four groups to get coverage:

- An estimated 3,800 parents with children will gain Medicaid coverage, as the DOH is authorized to raise the federal poverty level (FPL) criteria from about 40% FPL to 60% FPL. This means a family of three can earn up to $11,088 a year and qualify for Medicaid, where previously they couldn’t earn more than $8,064 a year. Remember that premium subsidies on the Utah insurance marketplace start at 100% FPL ($20,160 for a family of three).
- Another 12,500 adults without children (i.e. childless adults) will gain 12-month continuous Medicaid coverage if they meet a series of eligibility requirements:
  - At the time of enrollment the individual’s annual income is 5% of the FPL or less than $594;
  - The individual meets the prioritized eligibility criteria established by HB437 and defined by DOH:
    - Chronically homeless individual;
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- If funding is available, an individual involved in the justice system through probation, parole, or court ordered treatment; and
- If funding is available, an individual in need of substance abuse treatment or mental health treatment.

According to the U.S. Census Bureau 2014 American Community Survey (link), an estimated 25,294 people or 17.6% of Washington County’s population are living without access to affordable health coverage.

RyLee Curtis, Senior Health Policy Analyst for the Utah Health Policy Project says, “After four years of debating whether to expand Medicaid to low-income Utahns, we are excited about the prospect of 16,300 Utahns gaining coverage. However, this bill creates a number of fiscal cliffs for Utahns to consider as they work their way out of poverty. They could lose their coverage if their income goes above $600 a year for single adults, or goes above $11,100 for a family of three.”

She goes on to say that, “This bill also targets what legislators deemed ‘the neediest among us,’ but this also means they are the most costly—likely having multiple co-morbidities and pent-up health needs. A full Medicaid expansion would spread the healthcare costs of covering this population among a more diverse risk pool, keeping the per-person costs much lower.”

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