Utah’s Medicaid expansion plan moving forward with little comment from public

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When Scott Williams, board chairman of the Fourth Street Clinic, last week called upon the state Department of Health to prioritize individuals with substance abuse problems, he added his name to the list of fewer than 40 people who have offered thoughts on the state’s Medicaid expansion plan.

Medicaid expansion has been the subject of debate, protests and fighting for years, but the voices appear to have quieted since a scaled-back expansion was passed by the Legislature this year.

Utah’s expansion would provide Medicaid to about 9,000 to 11,000 of the poorest Utahns.

The plan targets childless adults who are chronically homeless, involved in the justice system, or in need of substance-abuse or mental-health treatment.

It also expands coverage to low-income parents with dependent children previously not covered by Medicaid.

Officials originally estimated that about 16,000 people would be covered through the expansion, but that estimate has been tapered. Many of the people in these specific groups likely will have higher medical costs, officials say, meaning the money put into the expansion is not anticipated to stretch as far as initially estimated.

The health department began accepting public comment last month on the proposal, which it must soon finalize and submit to the federal Centers for Medicare and Medicaid Services for approval.

Only 13 people, including Williams, testified at the three public hearings, held in Salt Lake City and Logan. The department had received 23 written comments on the draft as of Wednesday.

There is about a week until the public comment period closes.

Bill Tibbitts, associate director of Crossroads Urban Center, thinks the reason for the lack of public input is, in part, that people don’t believe their comments on the draft will elicit any change.

"I really think there wasn’t anybody who saw a way to make the rules better, so why go [to a hearing] and say, 'Gosh, we wish the Legislature had done more?'" Tibbitts said.
Additionally, Tibbitts said, the group of people who will be affected by these changes are "very skeptical of authority figures being interested in their opinions."

"This is not the same as when you raise property taxes," Tibbitts said.

In terms of expectations for public hearing participation, spokeswoman Kolbi Young said the department has "learned not to have any."

Public participation at other hearings has run the gamut from filled to capacity to zero participation, she added.

The three public hearings on this expansion were held in the middle of the workday, timing that Young said is typical for the department.

"That's one reason we offer online submissions," Young said, adding that people also could call into the meetings if they could not leave work.

RyLee Curtis, senior health policy analyst for advocacy group Utah Health Policy Project, said this reduced number could have affected the number of people willing to take a day off work to come to a public hearing.

"They might be disenfranchised from the hearings," Curtis said.

The department plans to submit the waiver to the federal government July 1, in the hopes of beginning enrollment Jan. 1, 2017.

Public comments will be accepted through June 8. The proposal can be found at http://health.utah.gov/MedicaidExpansion. Comments can be submitted online or by email at medicaidadultexpansion@utah.gov.

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