

## Utah's requested Medicaid changes could cause a \$39 million dollar budget shortfall

*A new report from Utah Health Policy Project illustrates the harmful ramifications of the state's proposed Medicaid caps*

FOR IMMEDIATE RELEASE:

June 27, 2019

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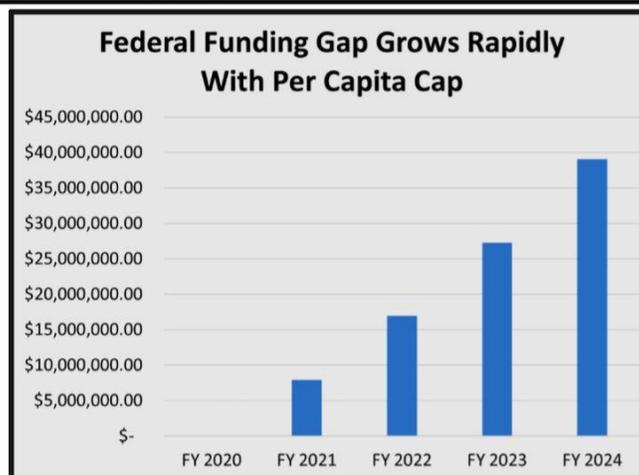
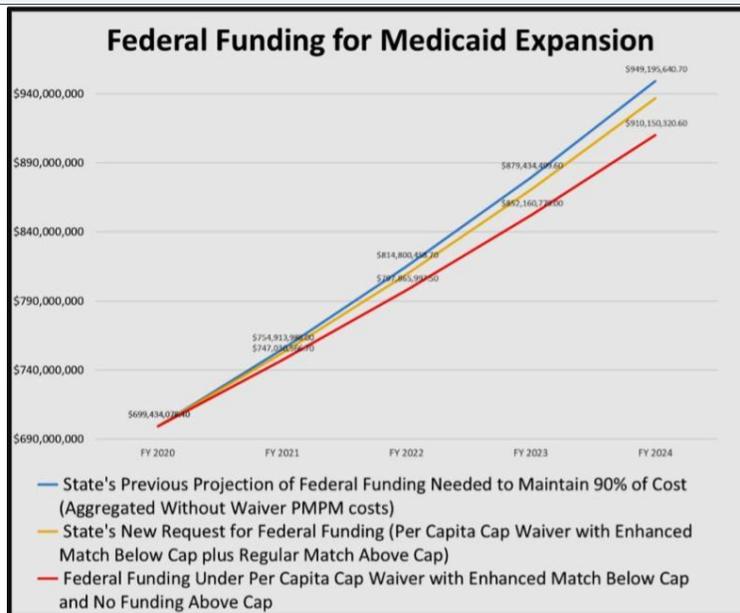
SALT LAKE— A new report from Utah Health Policy Project finds that under Utah's requested per capita cap, the state could face a \$39 million dollar budget shortfall by 2024.

The Utah Department of Health submitted its "Per Capita Cap" Medicaid waiver for consideration on May 31st, which is the next phase of the legislature's partial Medicaid expansion bill, SB96. As the state's public comment period winds down, this new report reiterates the devastating effects that adding an enrollment cap and per capita cap would have on the state and the state's most vulnerable residents.

Under a per capita cap, the state is asking the federal government for less funding to cover its rising health care needs, without addressing rising health care costs. This leads to dramatic budget shortfalls, which are passed along to Utahns through cuts to enrollment and cuts to health care services. The only flexibility the state receives in exchange for this limited budget is the permission to make cuts to Medicaid that are typically illegal.

Using the numbers in the waiver that Utah submitted, this UHPP report demonstrates how per capita caps create an increasing gap between the state's financial need and federal government's financial support.

**View the full report [HERE](#).**



"Per capita caps are not, and cannot, be the fiscal solution that Utah legislators are looking for. The solution was what voters chose last November when they supported full Medicaid expansion: better access to coverage," said Courtney Bullard, education and collaborations director, continuing, "Per capita caps create a growing gap between the money that Utah's Medicaid program needs, and the money that the federal government will give. It is the feature of the plan and will never operate within the interest of the state, and the state's health care consumers."

"Utah is pursuing myriad ways to tie its own hands, instead of expanding Medicaid in a straightforward, fiscally responsible way, or working to reduce health care costs. This will result in cutting vulnerable people off from the care they need to be healthy and productive Utahns. A per capita cap and an enrollment cap do not address Utah's rising health care expenses, but pretend the fiscal challenges will go away if you cut enough services and enrollees from the Medicaid program," said Stacy Stanford, policy analyst.

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