



Health Matters E-Newsletter

March 6, 2009

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1. UHP [Health Bill Tracker](#)

There is less than 1 week left in 2009 Legislative Session! Check out the latest edition of our [Health Bill Tracker](#). Many critical health bills are still in play: with your help, we can pass them.

2. [Medicaid Funding Restorations Updates](#)

Tobacco Tax Increase Needs the Governor's (and your) support

If there is consensus on anything on the Hill this year it is this: the economy will get worse before it gets better. This means that Utah's budget, and health and education programs in particular, will continue to confront funding problems over the next year. To responsibly deal with these challenges, the state must explore revenue enhancements. An increase in the tobacco tax is a good enhancement for the state because it improves public health, and the revenues from this tax are dedicated to health programs.

Momentum for the tobacco tax, however, has stalled. While a majority of Utahns (and a substantial number of legislators) say they support raising the tax to the national average of \$1.69 per pack, legislative leadership is insisting that the only way this tax will move forward is if the Governor strongly stands in support of the increase. Please contact the Governor and your legislators and ask them pass a tobacco tax increase this session.

- The Governor's phone number is: 801-538-1000 or toll free: 800-705-2464
- Or send an email to the Governor through his website [here](#)
- To find out who your legislators are and their contact info, [click here](#) or call AARP Utah's tobacco tax toll-free hotline: 866-456-8834

Federal Economic Recovery Money Gives Utah the Option to Restore Cuts to Medicaid Services

The so called "Medicaid optional services" (physical therapy, occupational therapy, vision care, and audiology) were cut during the 2008 Special Session to balance the state budget. The Federal American Recovery and Reinvestment Act (ARRA), however, has eased much of the pressure on Utah's Medicaid budget and made it possible for the state to restore these much needed services. More information about the ARRA and Utah Medicaid can be found [here](#). The ARRA has reduced the state funding required to run Utah Medicaid by 25%. The state dollars that have been freed up can and should be reinvested Medicaid to restore cuts that have occurred

over the last. The payback for restoring these services is substantial. This modest investment in Medicaid now brings with it a \$4 dollar Federal match. *Nowhere else* can the state receive such an impressive impact in terms of improving health and stimulating the economy. This is real money for Utah's struggling economy that puts people to work and helps the state avoid long term costs that accompany diminished access to medically necessary services and timely access to care. Here are talking points for conversations with legislative leadership:

Critical Service	Consequences & Observations
Physical Therapy	<ul style="list-style-type: none"> - health conditions that call for physical therapy such as multiple sclerosis, strokes, cerebral palsy, and some cancers will get worse and more expensive to control. -some recipients will move to institutions where conditions will deteriorate, leading to increased health care costs for all.
Vision Care	<ul style="list-style-type: none"> -recipients will have difficulty remaining in or returning to the workforce -some recipients will be a danger on the road!
Occupational Therapy	<p>Without services such as occupational therapy, many recipients will have no choice but to return to expensive nursing homes. Utah has been out of compliance with the 1999 Supreme Court ruling, <i>Olmstead vs. C</i>, which stated that individuals with disabilities must have the services and supports they need to be able to live and work in the most integrated setting possible.</p>
Audiology/Hearing	<ul style="list-style-type: none"> -hearing-impaired recipients will have difficulty getting or holding a job -hearing aids are not affordable for those without coverage.

[Please call Executive Appropriation Members and ask them to restore cuts to these services.](#)

3. Get Ready for National Health System Reform!

In our final push for Medicaid restorations and important health reform bills (the sister Legal Immigrant Kids Coverage bills, SB225 and HB171 and Preferred Drug List SB87), we can all fight a little harder knowing that hope for a better U.S. health care system is just around the corner. Last week President Obama announced a fiscally responsible budget plan that includes significant down payments on quality, affordable health care for all. This is the signal we've all been waiting for that national health system reform will begin THIS YEAR (a must for ultimate success) and that its fate is now inextricably linked to economic recovery. President Obama outlined the following principles for his reform:

- **Affordability.** By taking control of the greed and waste, reform will assure hard working families and businesses a fair, affordable, and sustainable health system.
- **Peace of Mind.** Health care reform will eliminate fear, and provide the peace of mind that comes with knowing you have access to health care you can count on when you need it.
- **If You Like It --- You Can Keep It.** Under Obama's health care plan, you will have the choice to keep your

doctor, hospital, and even your health insurance plan if you like what you have. If not, you will have the choice of a public health insurance plan to guarantee that access to health care will always be there for you when you need it.

- **No More Insurance Company Rip-offs.** Reform will finally provide strong public oversight and ensure a tough and fair watchdog to stop abusive insurance company practices like denying hard working Americans coverage for pre-existing conditions or changing the terms of your coverage after you make a claim.
- **We Can't Afford to Wait.** Families and small businesses are working harder than ever, yet struggling more to pay health care costs and make ends meet. We just can't wait any longer for the economic relief that health care reform will provide.

Taking important lessons from history about how Congress needs to have a sense of ownership in the reforms, the details are wisely left for Congress to decide.

The public plan option (described in bullet 3 above) is sure to rile private market aficionados. At first glance this may look like a "Europeanization" of the U.S. health care system. However, we want to ask Utahns to consider how this option could actually strengthen the private market by modeling efficiencies and best practices. See further analysis in John Holahan's [recent article](#).



Some feared that the resignation of Tom Daschle from the Health and Human Services post would delay the reforms. This does not appear to be the case. [Kansas Governor Kathleen Sibelius](#) was named just last week to take his place. Her background as an insurance commissioner and compartment around contentious issues in her home state give us confidence that she could better orchestrate a bipartisan approach to reforms than Daschle.

The need for action this year is underscored by a [new report from Families USA](#) that finds that during 2007-2008, 1 in 3 Americans under the age of 65 was uninsured! In other words, 86.7 million Americans went without coverage for all or part of the last two years! This is a national epidemic with serious health and financial consequences. Uninsured people go without screenings and preventive care and delay or forgo other needed care. The result is increased health care costs for all of us.

If you really want this wave of reforms to succeed, there are several actions you can take now:

- Contact our Senators and your Congressman and tell them that you want comprehensive health care reform—and that you want them out in front of the process to uphold Utah values of fiscal responsibility, quality, and wellness. [Click here for their contact info](#)
- Write a letter to the editor (LTE) of your local newspaper explaining why health care reform is crucial in your area. [Click here for instructions on how and where to submit LTEs.](#)
- Help us advocate for health care for all Utahns by investing in our work. Click [here](#) to make a tax-deductible donation through PayPal.
- Join us to mark Cover the Uninsured Week. SAVE THE DATE: March 25th from 4:00 to 6:00 pm at 1 of 6 locations across Utah Connected by Satellite, plus a statewide Webcast!
Ogden: McKay-Dee Hospital
Farmington: Davis County Health Department
Salt Lake: Research Park
Murray (still confirming the location)
Provo (still confirming the location)
St. George: Dixie Regional Medical Center
****Webstream**** If you just can't join us at one of the sites, participate online! You'll be able to hear and see the presentation and submit questions.

To RSVP or for more information and directions, please contact Stacey Earle at stacey@healthpolicyproject.org or 801-433-2299. Once you RSVP, we'll send you the address and directions, or log-in instructions for the webcast.

- **Come up to the Utah Legislature today and Monday/Tuesday of next week to help fully restore Medicaid: Medicaid and CHIP need to be strong so can serve as a foundation for reforms. Call (801) 433-2299 to arrange rendezvous on the Hill.**

4. Health Reform Taskforce Bills Pass The Senate

The three Health System Reform Bills passed the Senate on Thursday. Two of the bills, [HB188 Health System Reform – Insurance Market](#) and [HB165 Health Reform – Administrative Simplification](#), were substituted and further amended on the Senate floor. Both of these bills will now have to go back to the House for concurrence before being sent to the Governor for his signature. The substitute bills and amendments mainly clarified specific sections of each bill and ensured that the policy implications of the sections would be thoroughly studied. To listen to the debates click on the below links and go to the Audio Recording of Debates:

- [HB188 Second Substitute](#)
- [HB 165 Third Substitute](#)

UHPP supports these two bills as the foundation for comprehensive reforms in the future. Prior to the introduction of HB188 we successfully amended the bill, removing some of the harmful provisions and adding provisions that strengthened the bill ([click here for a review](#)). Yet UHPP continued to voice our lingering concerns ([click here for our fact sheet](#)). These concerns are related to the mandate-lite/limited benefit packages and the risk adjuster created in the bill. Unfortunately we were unable to have these concerns addressed through amendments to the bill. This does not change our support of the bill and on the bright side, our concerns will be monitored and reported on by the Insurance Department. UHPP will pay close attention to all of the changes made, but in particular we will closely monitor the impact of those areas of concern.

The Legislature recognizes there is still much work to be done. HB188 continues the Health System Reform Task Force for an additional year to oversee the steps we've already taken and make recommendations on next steps. UHPP will be deeply involved in work of the Task Force and will be sure to keep you informed and engaged!

5. Multicultural Health Network Bills Advance

Success! HB 144, the Medical Language Interpreter Act, successfully passed both bodies of the Legislature Wednesday 3/4/09. Sponsored by Rep. Chavez-Houck, HB 144 will create a voluntary certification process for medical interpreters and make Utah's health care system easier to navigate for limited-English speakers. Once enacted, this legislation should complement the goals of health care reform by reducing costly medical mistakes and improving the timeliness of care received by those requiring the services of a qualified translator.

Help us keep up the momentum! HB 171, Legal Immigrant Children Health Care Amendments, sailed through the Business and Labor Committee with flying colors on Monday morning! Only one member of the Committee, Rep. James Dunnigan of Taylorsville, voted against the measure. This is significant given that many observers doubted that HB 171 would survive beyond the committee process. HB 171 and SB 225 take advantage of changes in federal law that allow states to enroll legal permanent resident children into CHIP and Medicaid without the current five year waiting period.

Now we need your help. **As HB 171 and its twin in the Senate, SB 225 (Sen. Robles), will soon be debated in the House and Senate, we need you to contact your Representative and Senator. [Click here to find out who your legislators are](#) and encourage them to VOTE YES. Both bills will likely come to a vote later TODAY.**

HB 171 (in the House) and SB 225 (in the Senate) take advantage of changes in federal law that allow states to enroll legal permanent resident children into CHIP and Medicaid without the current five year waiting period.

Talking points for HB171 and SB 225:

- An estimated 70% of the target population do not have health insurance. Thus if we want to cover all children in

the State of Utah--one of the Governor's stated priorities--this is a great place to start.

- When children can't afford preventative medical care, everyone pays. Children with minor illnesses left untreated frequently end up in emergency rooms and treatable childhood conditions often turn into chronic adult illnesses. Both outcomes unnecessarily increase health care costs and reduce the ability of people to live as fully productive members of society.

- Utah will receive a **4 to 1 federal match** for each dollar it spends enrolling LPR children in CHIP and Medicaid. At this time of economic hardship, with so many people losing their health care coverage, we can insure children and bring stimulus dollars into our sluggish economy.

For additional information, please see our fact sheets for [HB 171](#) (House version) or [SB 225](#) (Senate version), or contact Young at young@healthpolicyproject.org or (801) 433-2299.

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