



Utah's Uninsured

SPEAK UP

Senate District: 4 (Sen. P. Jones)
House District: 40 (Rep. L. Hemingway)

“Surviving is my first priority. I just can’t think about how to pay for my care right now.”

Uninsured Cancer Patient Is Now Uninsurable

After several years of being uninsured, Sean Hennefer decided to do the right thing and purchase health insurance. This decision was both a blessing and a curse.

He met with a broker who told him that since he was young and healthy, he should easily qualify. Instead, Sean was denied coverage because a year earlier he went to the doctor for a swollen lymph node. Originally the doctor thought the swelling was caused by strep throat. But after being denied insurance Sean asked his doctor to take a closer look. The diagnosis was cancer: a rare form of follicular lymphoma.

After his diagnosis, Sean racked up over \$25,000 in medical bills—and that was before he even started treatment! This was much more than he could ever afford to pay on his income. Half joking, Sean says, *“When this is over, I’ll either be dead or bankrupt. Surviving right now is my priority and I just can’t think about how to pay for my care right now.”*



Post script: Fortunately, Sean has responded well to treatment; however, Sean is now completely uninsurable. But he still needs health care. To stay cancer-free, he would have to pay approximately \$21,000 out of pocket for PET scans alone. Any further testing or treatment would only add to these costs.

Policy Solution: Lay Groundwork for Comprehensive Health System Reform

388,000 (and counting) Utahns are uninsured. This raises costs for the entire health care system—uninsured Utahns don’t contribute to the insurance pool, and when they do receive care, the cost is shifted to those of us with insurance.

But comprehensive health system reform can address these issues. The three Task Force bills lay the groundwork for broad reform; however, to achieve all of the intended goals of health system reform every Utahn must be in the system. This can be realized through a requirement for all to participate backed up by premium subsidies and other affordability provisions. In addition, instead of using rate bands Utah should community rate, where insurance companies cannot deny coverage or increase premiums due to health conditions or case characteristics (gender, age, etc). Community rating would realign incentives so insurance companies focus on keeping people healthy rather than avoiding risk.

In the end, a community rated system combined with a requirement to participate will ensure greater efficiencies, reduced costs, increased quality and expanded access *to affordable coverage in a more stable private market.*