

Op-ed: Healthy Utah's detractors perpetuate unsupported myths

By Dustin Phelps

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In late February, Rep. Dan McCay, R-Riverton, wrote an op-ed detailing his reasons for opposing Healthy Utah. Unfortunately, his case (the same case relied on to oppose and delay Healthy Utah) is based on unsubstantiated and blatantly false information.

I list below some of the more misleading statements made in McCay's op-ed and why they are false.

But first I just want to point out one reason Healthy Utah should be a no brainer: Healthy Utah [returns tax dollars to Utah](#) which are already being funneled out of our state by (1) ACA taxes and (2) Obama's 5 percent tax increase for Utah's top earners. Whether we like Obamacare or not, we shouldn't allow money to be channeled out of our economy and into other states.

1. "...redoubling our involvement in [Medicaid] would be a mistake."

This argument might actually hold some political water...except that Healthy Utah doesn't cover people through Medicaid coverage. Healthy Utah has nothing to do with PCN, ACOs, MCOs, or "fee for service" Medicaid.

[What Healthy Utah does](#) is take dollars which would have been funneled into a Medicaid expansion and use them to subsidize private insurance plans for suffering Utahns. So, calling Healthy Utah a "redoubling" of involvement in Medicaid is clearly misleading.

2. "Healthy Utah would create a new 'welfare cliff.'"

This statement is simply untrue. Once low-income workers are no longer eligible for Healthy Utah, they become eligible for premium subsidies under ACA.

3. "Most people are dismayed to learn that under Healthy Utah, nearly nine out of 10 new enrollees will be childless single adults with no disabilities..."

McCay doesn't say how he came up with these numbers, but the publicly available data suggests a different story. For example, [a recent Georgetown study](#) reports that, in fact, 36 percent — not 10 percent — of newly eligible adults under Healthy Utah would be uninsured parents.

Presumably, many of the other "childless single adults with no disabilities" are part of Utah's large student population — not exactly the picture of lazy welfare leeches McCay implies will benefit from Healthy Utah. This would explain why these individuals don't already qualify for insurance subsidies under the ACA (i.e. they're in school and can't work the necessary hours to qualify). So, if McCay would like, he can make the case that college students are undeserving of government assistance, but it's deceiving to imply that Healthy Utah will be used to benefit a population of welfare queens.

4. "Utah's costs would rise from the 'crowd out' effect because low-wage workers will be pushed off private coverage and onto Medicaid rolls."

Again, Healthy Utah subsidizes private insurance plans. No one will be pushed onto Medicaid rolls. Even more importantly, how many workers could possibly be receiving voluntary insurance benefits from their employer while also making wages beneath the poverty line or working part-time? Unless, of course, they happen to be working for one of the numerous companies subject to the employer mandate. McCay's employer insurance version of the "crowd out" effect just doesn't add up.

5. "We know that total costs for other states' Obamacare-based Medicaid expansions have far exceeded projections... [and] the promised federal share of funding is far from reliable."

It doesn't follow logically to contend that because early expanding states faced unanticipated cost increases, Utah will as well. Why? Because the circumstances are very different. Early expanders didn't know what they were getting into, but today there is no reason for states to not have a fairly clear idea of [what the costs will be](#) for either Medicaid expansion or a plan similar to Healthy Utah.

Furthermore, the assertion that the federal share of funding is not reliable does not stand to reason. Historically speaking, the one thing the federal government does a good job at is making good on its funding commitments. These arguments are nothing more than baseless fear-mongering. Healthy Utah should have been a no-brainer, but groundless and deceptive arguments hobbled the ability of legislators to clearly understand the issue.

Fortunately, the debate isn't over. The Utah Legislature set a July 31 deadline for a committee to deal with Healthy Utah. Let's hope that legislators get in the facts before again rejecting an economic boon (not to mention humanitarian blessing) to Utah.