LOTS OF LAWS AND A PLETHORA OF POLICY

But I Still Have To Take Care of My Own Body

UHA

UTAH HOSPITAL ASSOCIATION

www.UtahHospitals.org

OVERVIEW

- The Affordable Care Act intends to revolutionize the financing and delivery of healthcare
- The ACA is so expansive and comprehensive that it increasingly dominates healthcare
- The **combination** of the ACA, Medicaid and Medicare is **revolutionizing** healthcare financing

- Consequences of people lacking health insurance/coverage:
  - Our system for providing charitable and uncompensated care gives much valuable care.
  - However, those without medical insurance receive proper medical and behavioral care irregularly.
  - Chronic conditions are ignored or poorly managed
  - Uncompensated care passed on as a “tax” in higher premiums and provider charges
  - Emergency Department Becomes a Primary Care Provider

- The Issues in Expanding Medicaid
  - Policy and Fiscal Issues
  - Politics
- Governor's Herbert's Healthy Utah Initiative

WHAT'S NEXT??

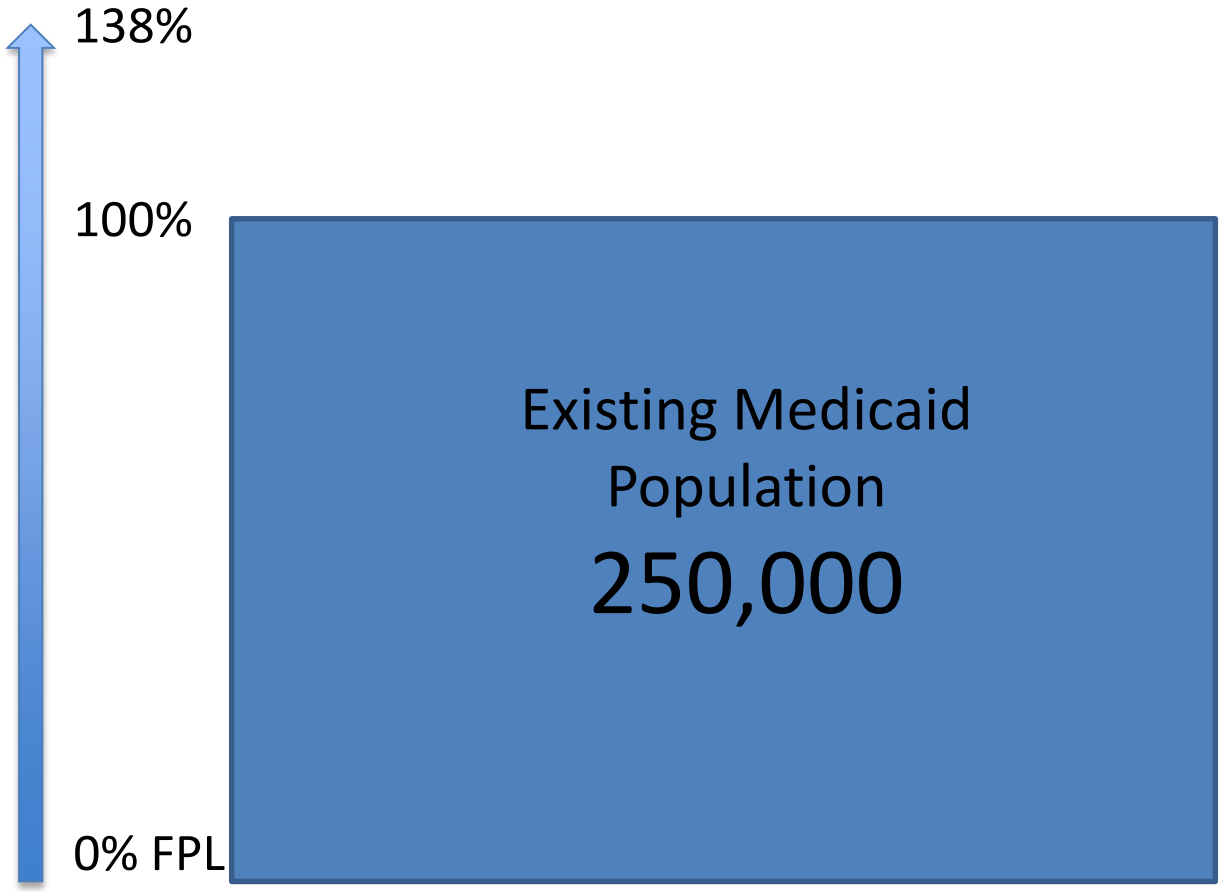
MEDICAID in Utah

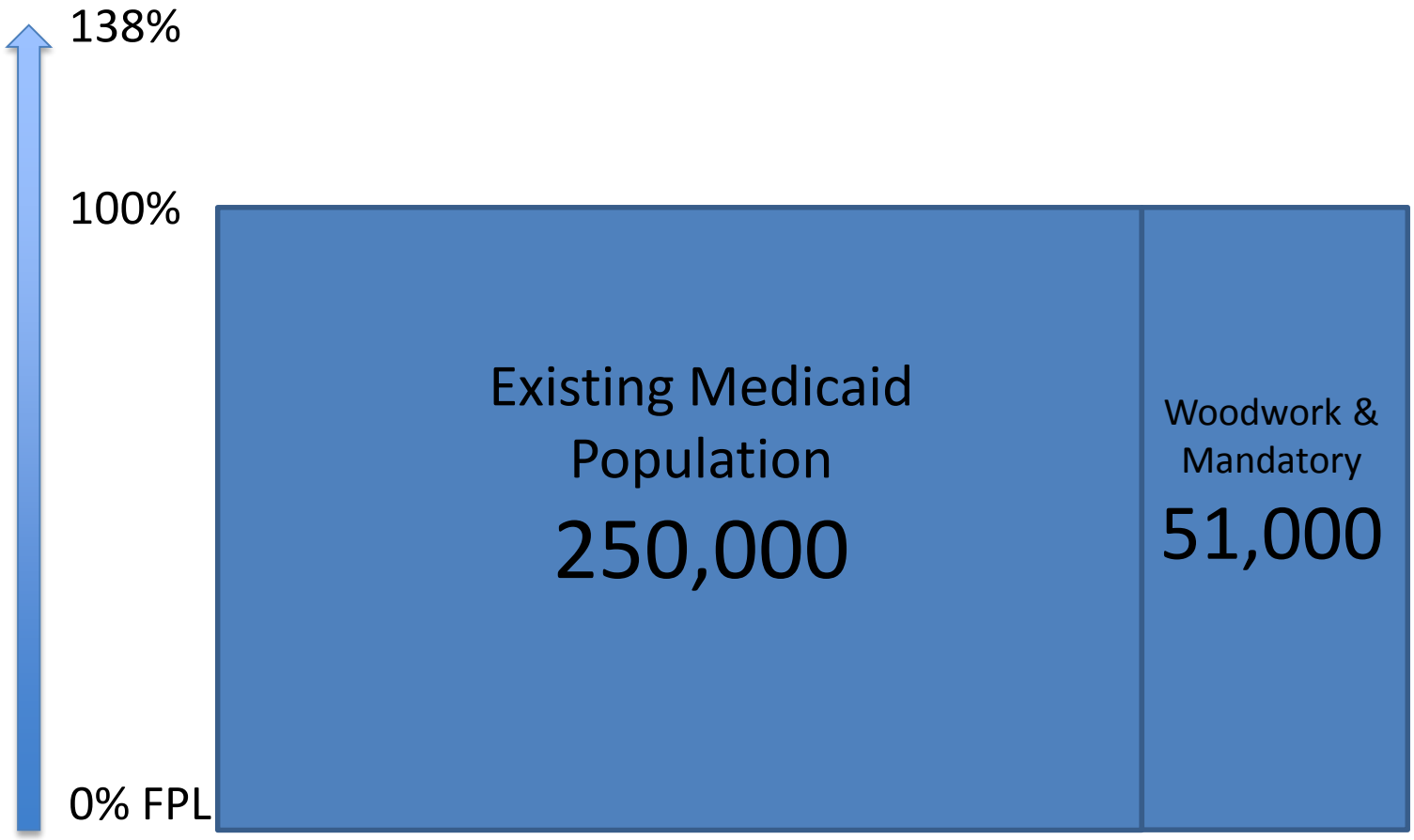
What is the Donut Hole

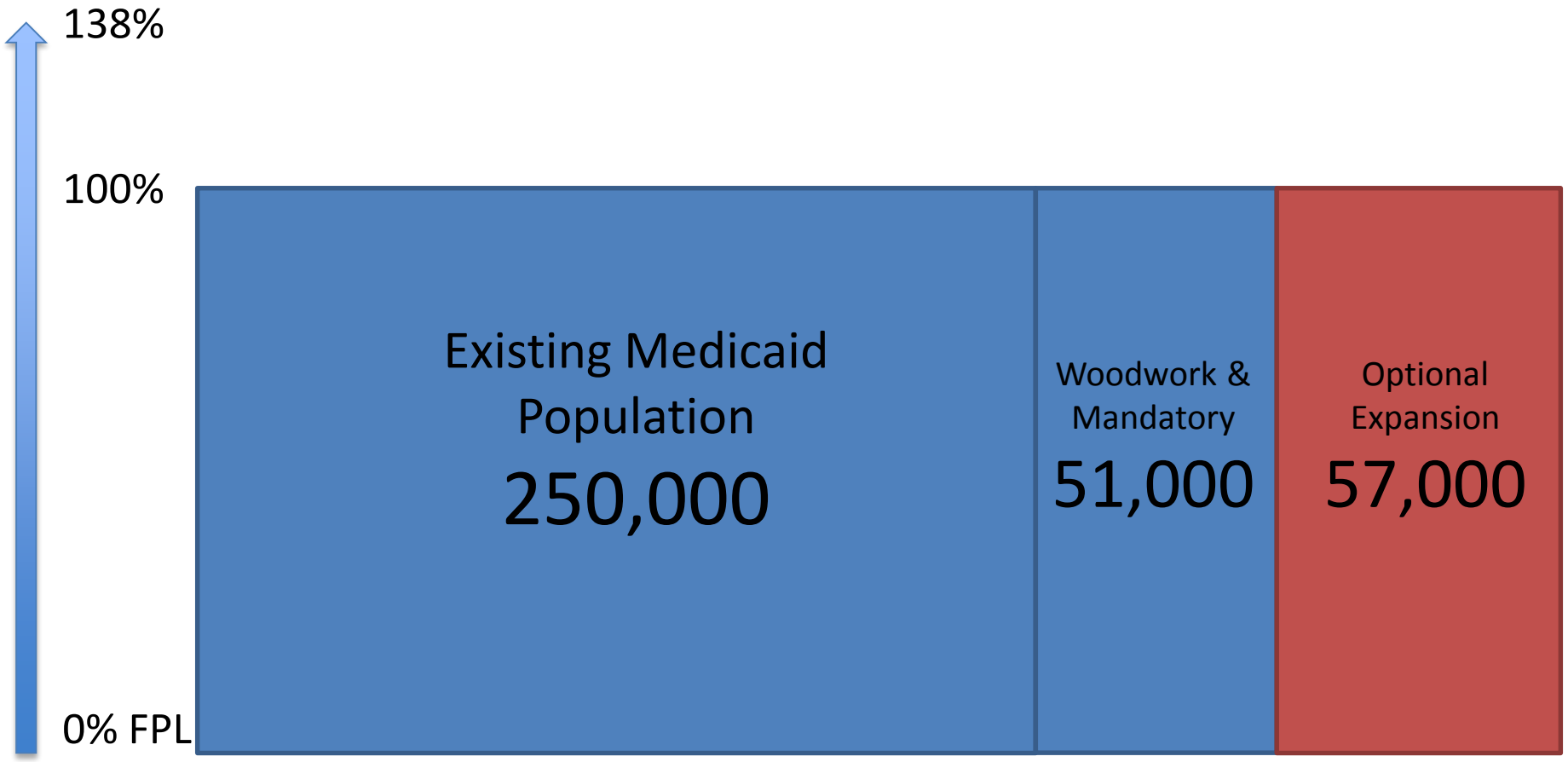
- ACA contemplates automatic expansion of Medicaid below 100%
- SCOTUS de-linked expansion of traditional Medicaid under 100% of FPL from continuing federal funding of traditional Medicaid
- However, HHS will not grant 100% - 90% funding of Medicaid expansion below 100% FPL (FMAP only – 70%) **unless a state expands Medicaid up to 138% FPL**

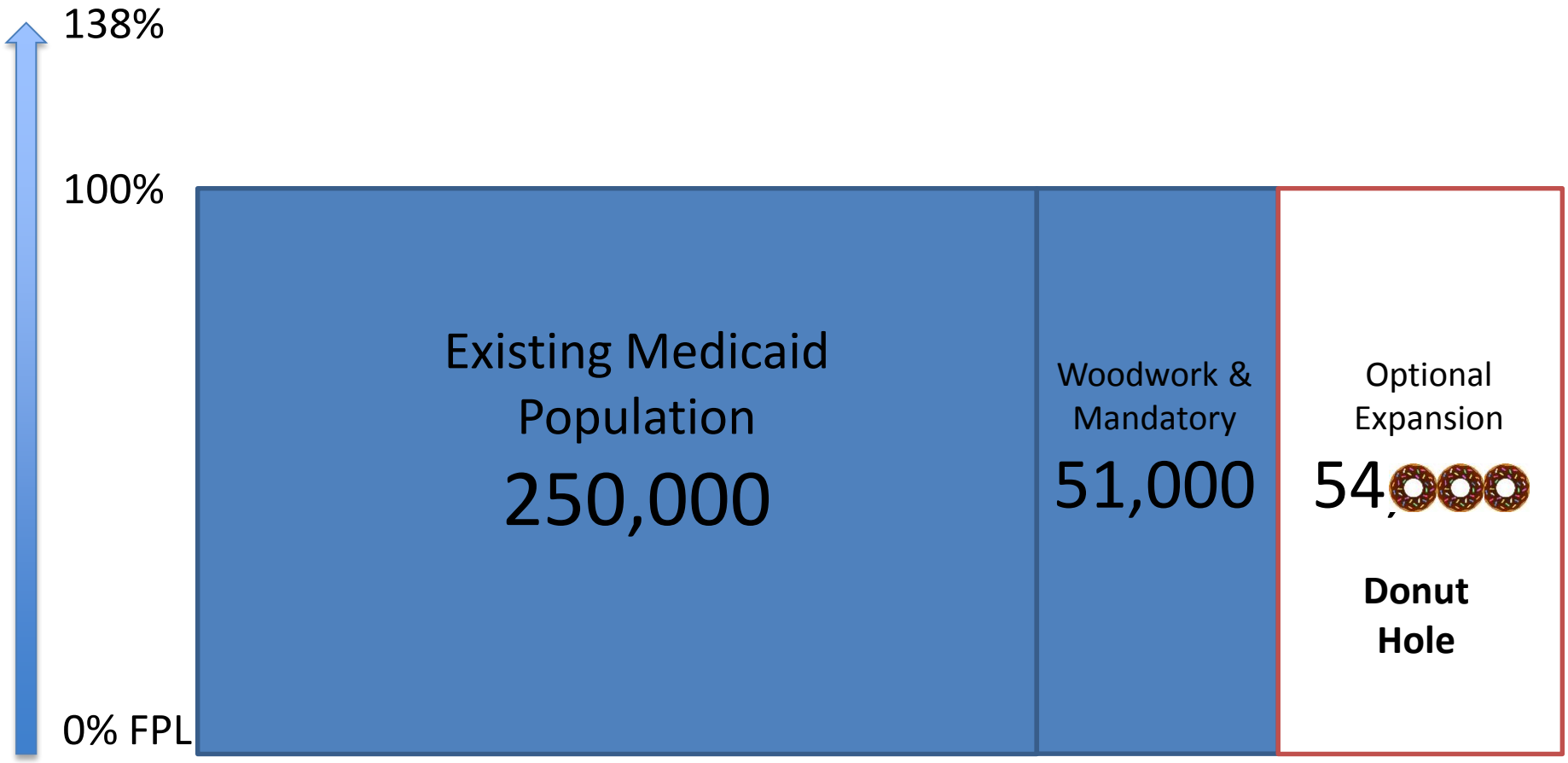
Donut Hole Population
0 – 100% FPL

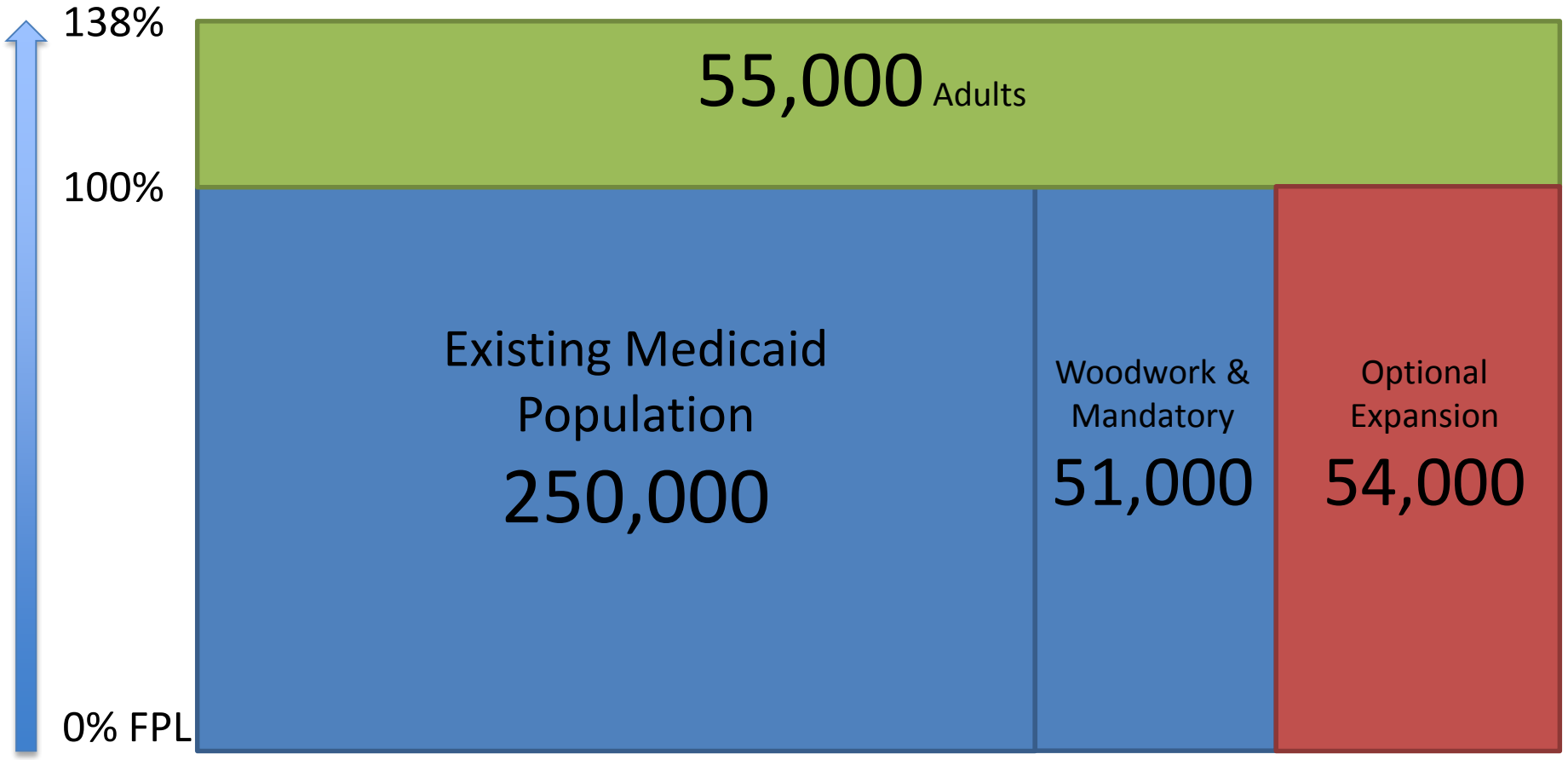
- Federal Poverty Level (FPL)
  - Single individual at 100% FPL is **$11,670**
  - Family of four is **$23,850** for a family of four
- **Healthy adults currently not eligible for Medicaid in Utah**
- **Also not eligible for subsidized health insurance through the exchanges.**


138%
100%
0% FPL
Existing Medicaid Population
250,000


138%
100%
0% FPL
Existing Medicaid Population
250,000
Woodwork & Mandatory
51,000


138%
100%
0% FPL
Existing Medicaid Population
250,000
Woodwork & Mandatory
51,000
Optional Expansion
57,000


138%
100%
0% FPL
Existing Medicaid Population
250,000
Woodwork & Mandatory
51,000
Optional Expansion
54,000
Donut Hole



* There are some eligibility categories in the Existing and Woodwork/Mandatory categories that extend into the 138% FPL range. The chart has been simplified to better explain the new optional expansion categories.

101 – 138% FPL Population

- 57,000 eligible childless adults in this income range.

Medicaid Expansion Costs in 2020

State cost for Optional Expansion to 100% FPL

With Existing State-Federal Sharing (71%/29%).

$46 million

54,000 Adults

State cost to expand 0-138% FPL using Premium Assistance Model.

$41 million

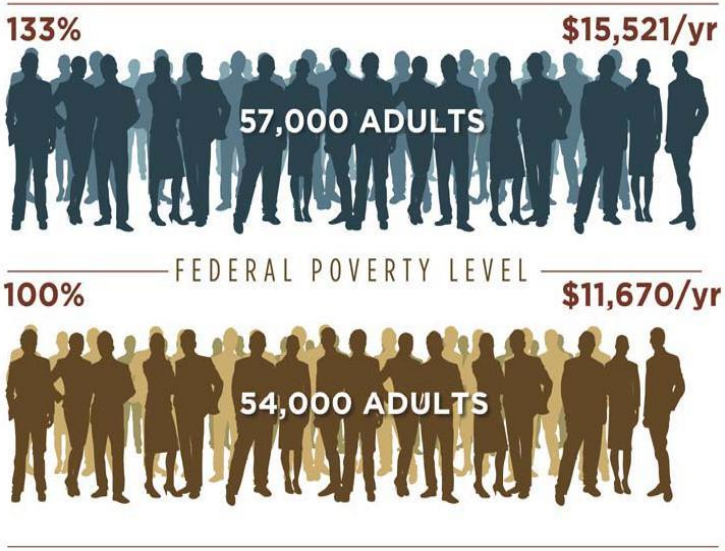
111,000 Adults

HEALTHY | UTAH PLAN

ING UTAH'S UNINSURED WITH SUSTAINABLE AND COST-EFFECTIVE COVERAGE

HEALTHY UTAH PLAN

OVERVIEW



Who is covered?

Approximately 111,000 Utahns will receive coverage. ***These individuals are adults between the ages of 19-64 who earn income less than $15,521 per year.***

Utah taxpayers shouldn't have to pay 4 times to help those in need

1. By subsidizing emergency room care
2. By paying Obamacare taxes to the federal government
3. By paying state taxes to provide less coverage to fewer people
4. Through charitable contributions

Benefits

ADULTS WITH INSURANCE OPTIONS

Adults with access to insurance through their employer or through their parents' plans will enroll in those plans. Medicaid will provide premium assistance, cost sharing, and wrap-around coverage.

ADULTS EARNING LESS THAN $15,521

These adults will receive premium assistance to purchase private insurance through Utah's insurance exchange, Avenue H. There will be some cost sharing. Coverage will meet minimum requirements.

MEDICALLY FRAIL ADULTS

Adults deemed 'medically frail' will have the choice to enroll in Healthy Utah Plan or to receive traditional benefits through the current delivery system, including Accountable Care Organizations.

Keeps families on the same plan

The plan will help families obtain coverage through a single plan. Families whose children currently receive Medicaid would be given the option to include their children on the same plan the parents select. Medicaid would continue to provide cost sharing and wrap-around coverage for these children to ensure they continue to receive the same level of coverage they do today.

Cost sharing for individuals with higher income

- Participants pay 2% of their income toward premiums
- Participants pay on average 6% of the cost of services received through deductibles, copays and coinsurance

$15,521
yearly income

$420
in annual medical costs & premiums

If the federal government changes the current match rates, the program will end and individuals would lose coverage.