

Utah's Double Medicaid Threat

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Written by: Questions?

At Voices for Utah Children, we are closely following what happens to Medicaid. The majority of Utah's Medicaid enrollees are kids. CHIP- the Children's Health Insurance Program- could not exist without Medicaid. Medicaid is the cornerstone for children's health. All kids need health insurance to be healthy and thrive,

But now Utah's Medicaid program is under not just one but two threats. There are changes to Medicaid being proposed in Congress at the federal-level, and changes proposed by Governor Herbert and the Department of Health at the state-level.

Trying to understand these different changes and what they mean for Utahns? Here is a quick overview of the federal and state threats:

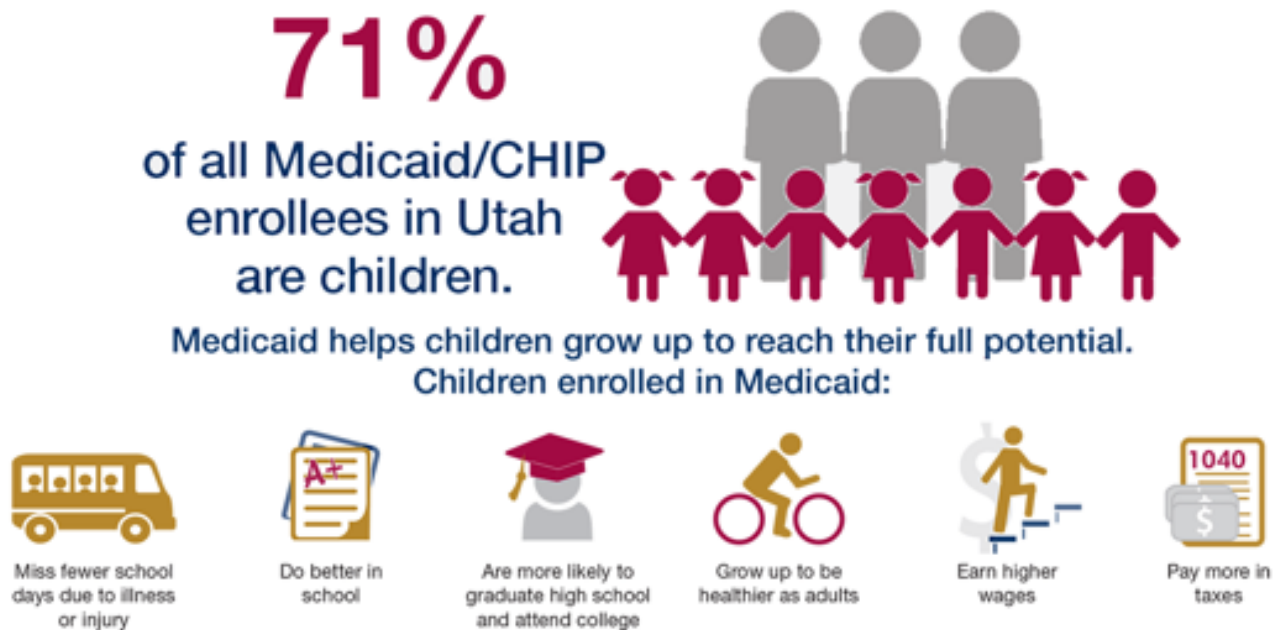
#1 Federal Cuts to Medicaid and Dismantling the Medicaid Program as We Know It

There are [significant threats](#) to Medicaid in the Republicans' ever-changing ACA repeal efforts. The G.O.P. health care bill proposes massive cuts to Medicaid and a radical restructuring of the Medicaid program. Specifically, Congress has proposed two different state options; both would lead to major changes and cuts to the Medicaid program. 1) States can opt to cap funding through a per enrollee or per capita amount. This cap option would allow for the program to grow if new people enroll, but would limit the federal dollars available for states to meet demand and program growth. 2) Or states can opt for the block grant option, which is essentially a 'lump sum' amount. Under this option, even fewer federal dollars flow into the state's Medicaid program, but the state has greater 'flexibility' to cut people or benefits from the program. Under the current Senate bill, certain children with special health care needs are exempt from the per capita cap option and all children are exempt from the block grant. Yet as [many others have pointed out](#), these are not sufficient 'fixes' to the problem, since we know that children need healthy parents to thrive. Moreover, the bill still limits available state resources overall, which means vulnerable populations including children, seniors and people with disabilities, will be forced to compete for limited state dollars.

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But unfortunately, those are not the only threats to Medicaid...

#2 State Changes to the Medicaid Program through a Waiver Request to the Federal Government: People Will Lose their Health Coverage

While Congress is considering Medicaid cuts, Utah's state Department of Health is also proposing some unprecedented administrative changes to the Medicaid program. The Department wants to move forward with these changes regardless of what happens at the federal level.

The Utah Department of Health is planning to submit a request, or waiver, to the federal government to make the changes. States are not required to change their program- most aren't. But a few states like Utah are seeking to increase restrictions and requirements in their Medicaid program. Why are states doing this now? Previous administrations did not allow for these changes. But the new Trump administration has indicated that they are open to increased Medicaid restrictions.

Utah is proposing several changes that will cause enrollees to lose care and more people to lose coverage. [Learn more about the full scope of the changes and how to](#)

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[take action](#). Some changes include:

1) Health insurance time limits: The Department is proposing to limit the length of time a parent or individual can receive coverage through the Primary Care Network (PCN), or the time an adult without children can receive Medicaid. Even if the parent is working and on PCN, they will lose coverage after 5 years. This will be particularly harmful for those with chronic conditions or mental health needs who require some medication, but do not qualify for disability Medicaid.

2) Work requirements for Primary Care Network (PCN) enrollees: Work requirements mean more red tape and administrative requirements for enrollees. Added administrative requirements increase the likelihood that someone will miss a deadline or forget paperwork, and then lose their coverage entirely. What's more, [we already know](#) that work requirements are not an effective way to improve coverage.

3) Penalties for non-emergency use of the ER: If an individual or parent goes to the ER for a non-emergency purpose, he or she will be charged a \$25 penalty. The goal of this increased penalty is to decrease state costs. Unfortunately, many advocates believe this will simply deter vulnerable populations from accessing the care they need. What's more, the Department is increasing penalties without any additional support for enrollees to receive care management or patient navigation support.

The Department of Health is currently accepting comments and public feedback about these proposed changes. [Share your comments online by July 20th.](#)

[Or attend an upcoming public hearing on July 10th.](#)

PROPOSED MEDICAID CHANGES

Our Governor and Department of Health are proposing sweeping changes to Utah's Medicaid program. What will these changes mean for Utahns?

People Will Lose Health Insurance Coverage

The proposal puts limits on the length of time enrollees can receive care, creates more red tape and increases costs for enrollees. Enrollment time limits and additional costs and requirements will cause many parents and individuals to lose their coverage, health care and treatment.



Individuals & Parents Will be Caught in a Poverty Cycle

When people lose their health coverage because of new Medicaid time limits, they may lose the critical medication or benefits that enabled them to work in the first place. New work requirements do little to make individuals and parents more self-sufficient since most low-wage jobs often do not offer health insurance. Medicaid time limits, caps and added requirements can keep people in a cycle of poverty.



Utahns Will be Less Healthy

Causing people to lose coverage will leave many without the health care that they need to stay healthy. Time limits mean people with chronic conditions will likely lose care. Increased requirements and penalties for the use of ER care may mean some people miss out on their critical care. Ultimately, Utahns will have worse health outcomes.



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