Talking Points for Medicaid Expansion

A publication by the Utah Health Policy Project

UHPP Sustainable health care solutions for underserved Utahns

Private Option Talking Points:

- -Utah's Private Option returns Utah tax money to our state and to let us decide how best to spend it
- -The Private Option gives Utah the authority to decide how to run our health-care system for our Medicaid population
- -The Private Options enables Utah to cut the federal strings and regulations that come with traditional Medicaid
- -The Private Option transforms our current Medicaid system to support private insurance and providers, promote personal responsibility, and rewards healthy and responsible choices
- -Utah is better prepared than most other states to operate the Private Option. Over 70% of our Medicaid recipients are already covered by private insurance companies through Accountable Care Organizations
- -The Private Option lets individuals choose their own private insurance and encourages cost-sharing when possible, giving those covered a bigger stake in their health
- -The Private Option is private insurance that gives Utah doctors and hospitals higher reimbursement rates for the care they provide
- -The Private Option can discourage inappropriate use of emergency rooms by not covering the cost of that care
- -The Private Option can include a circuit breaker to stop the program if the federal government fails to live up to its obligations
- -Right now uninsured Utahns are driving up our state's health-care costs by seeking care at hospital emergency rooms

>>Useful Numbers:

- -60,000 Utahns in the coverage Gap are left with no affordable coverage options right now
- -Every month, \$4 million in Utah taxpayer dollars go to other states to fund their Medicaid expansion programs
- -Starting in 2015, 6,000 low-income Utahns who don't receive health insurance through their jobs could generate \$17 million in annual fines for their employers
- -Right now the federal government contributes 70% of Utah's Medicaid funding—Utah pays 30%. Under the expansion, the federal government would pay 90% of the expansion cost.
- -13.2% of Utahns lacked health insurance in 2012 according to the Utah Dept. of Health—but the US. Census Bureau estimates that 16.6% of Utahns were uninsured in 2011 (see chart)

County	Uninsured %
Utah	16.6%
Beaver County, UT	20.8%
Box Elder County, UT	14.3%
Cache County, UT	15.8%
Carbon County, UT	14.4%
Daggett County, UT	18.7%
Davis County, UT	12.0%
Duchesne County, UT	19.3%
Emery County, UT	15.4%
Garfield County, UT	18.1%
Grand County, UT	23.6%
Iron County, UT	22.3%
Juab County, UT	16.1%
Kane County, UT	16.8%
Millard County, UT	21.8%
Morgan County, UT	12.0%
Piute County, UT	22.9%
Rich County, UT	18.1%
Salt Lake County, UT	17.2%
San Juan County, UT	23.4%
Sanpete County, UT	20.6%
Sevier County, UT	18.4%
Summit County, UT	14.8%
Tooele County, UT	14.2%
Uintah County, UT	20.7%
Utah County, UT	16.0%
Wasatch County, UT	20.8%
Washington County, UT	21.2%
Wayne County, UT	24.2%
Weber County, UT	17.0%