

Update on Healthy Utah Discussions with CMS

July 17, 2014

General Plan Structure

- Provide **premium assistance** to non-medically frail individuals from 0-133% of the federal poverty level (fpl) to help them purchase private insurance plans
- Cover the medically frail under the current Medicaid Accountable Care Organization (ACO) system
- Create a **private health insurance environment** for individuals and families above 100% fpl that reflects the health insurance market in Utah
- Utilize the Patient Protection and Affordable Care Act (ACA) tax revenues imposed on Utah taxpayers to fund Healthy Utah

Cost Sharing

- Charge **\$15/adult/month premiums** for members 101-133% fpl (approximately 2% of income)
- Use **marketplace co-pays for individuals above 100% fpl**
- Charge nominal co-pays for members 0-100% fpl
- Scale out-of-pocket expenses for individuals/families 0-50% fpl, between 51-100% fpl, and 101-133% fpl
- Limit grace period for non-payment of premiums to 30 days (similar to marketplace standards)
- If member terminated for failure to pay premiums, prohibit re-enrollment for 90 days

Personal Responsibility

- Provide **work incentives** to encourage job assessment, training, and efforts to find work
- Offer **health incentives** to encourage healthy behaviors
- Require **utilization incentives and/or penalties** to promote primary care and discourage inappropriate use of emergency rooms

Support Employer-Sponsored Insurance

- Enroll individuals who have qualified employer-sponsored insurance plans in those plans and allow them to retain existing plans
- Obtain the enhanced federal match rate when providing assistance to pay the premiums for employer-sponsored health insurance plans

Build on Utah's Strengths

- Allow **family unification** where children currently enrolled in Medicaid can join parents on private insurance plans
- Use Avenue H to handle plan selection and enrollment in private plans
- Use spending authority from existing Primary Care Network to fund greater quality improvement efforts and further address uncompensated care

- Consider using savings from Healthy Utah to fund greater quality improvement efforts and further address uncompensated care

Pilot

- Terminate waiver if federal funding ever falls below level established in ACA or the federal government fails to uphold their agreement
- Tie eligibility state plan amendment to 1115 waiver pilot period
- Establish **three year pilot** period for waiver
- Allow for a **“bridge plan”** to provide benefits as Healthy Utah is developed and implemented