

Disability group discusses Idaho Health Care Plan

BOISE - The Idaho Developmental Disability Network put on a conference Thursday to put focus on how the Idaho Health Care Plan and the Medicaid program provide vital services to individuals with disabilities.

Around 20 lawmakers attended the conference, held during the lunch hour across the street from the Capitol.

Brian Whitlock, CEO of the Idaho Hospital Association, led the talk, which came a day after a House panel narrowly voted to advance the Idaho Health Care Plan to the House floor.

The plan involves applying for two federal waivers from the regulations of the Affordable Care Act. One aims to allow 2,500 to 3,500 individuals with high-cost conditions such as hemophilia and bone marrow disorders to enroll in Medicaid. The other would extend ACA subsidies to individuals in the Medicaid gap to allow them to purchase private health insurance at low cost.

Whitlock said while the benefits of the policy would be broad, they could provide particular benefit to the disabled community.

"For us, this is also a disability issue," Whitlock said.

Whitlock said the program's design will achieve two main benefits: stabilizing the individual insurance market and providing affordable coverage to those who find themselves priced out of the health insurance market.

"All working Idahoans should have access to health care coverage," he said.

Those who would gain the ability to use subsidies, the same available to green card holders but unavailable to Idaho citizens, are generally working families with incomes between 100 percent of the federal poverty line (\$24,600 in annual income for a family of four, \$17 per person per day) and 26 percent of the federal poverty line (\$6,400 in annual income for a family of four, \$4 per person per day). Currently, non-disabled adults at 26 percent of the poverty line and below are eligible for Medicaid.

The policy is estimated to give about 35,000 low-income Idahoans access to insurance coverage for between \$25 and \$40 per month.

Whitlock emphasized that putting high-cost patients on Medicaid, which generally has lower reimbursement rates than private insurance, would mean that hospitals and other providers would take a hit to the pocketbook. Nonetheless, they support it.

"We think it's the right thing to do for the sickest of the sick," Whitlock said.

Whitlock said shifting those patients would drastically reduce costs. The 2.5 percent of patients in Idaho's individual market with the highest treatment bills are responsible for 40 percent of total health care spending.

IMPulse

Intermountain Media Pulse

A TRUETONE INCORPORATED COMPANY

**news
CLIP**

11623 Lake Shore
Nampa, ID 83686
(208) 880-9814

FOR YOUR INFORMATION

Post Register

Idaho Falls, Idaho

Thursday, February 8, 2018

Bryan Clark

Page 2 of 2

Remove a small number of high-cost individuals from the pool, and the average cost will fall dramatically. The Idaho Health Care Plan is estimated to reduce individual market rates by 20 percent.

Whitlock said hospitals would see some benefit as the uninsured rate declines. It will mean fewer cases in which poor patients put off care until a crisis, at which point they go to the emergency room and rack up bills they can't pay, which are in turn picked up by state and county taxpayers.

"If they can utilize preventive care, they won't come to the emergency rooms unless they really need to," Whitlock said.

With big changes to national health care programs such as Medicaid being bandied about Washington, Whitlock also emphasized the need to preserve the Medicaid program, which mostly serves the disabled and low-income children. Doing so, he said, is consistent with conservative Republican values.

Whitlock told the story of his nephew, John, who two decades ago lost control of his vehicle on a rainy night and was involved in a serious accident. It took two hours for the accomplished artist and musician to be extricated from the car and five months to wake from his coma.

When he did wake, he had suffered a brain injury and required rehabilitative services funded through Medicaid. Eventually, he was able to begin painting again and has sold some of his paintings for tidy sums. He is again a productive member of society.

"To be a productive member of society again and to live with quality of life. ... That's the goal of people who are on Medicaid, especially people receiving home- and community-based services," he said.

Rep. Tom Loertscher, R-Bone, asked what could be done to address the concerns of slightly higher income individuals who find their individual health plans too expensive to afford. Jim Baugh, executive director of Disability Rights Idaho, said if premiums can be driven down 20 percent, that would go a long way toward addressing those concerns.

Sen. Steven Thayn, R-Emmett, said more needs to be done to build access to primary care throughout the state, which won't happen just because more people are insured.

###

Copyright 2018 Post Register