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FOR YOUR INFORMATION

Post Register

Idaho Falls, Idaho

Tuesday Oct. 31, 2017

by Dr. Kenneth Krell

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GUEST OPINION: Idaho health care proposal, Part 3 — The downside

The proposed Idaho Health Care Plan is a creative solution to problems on our state exchange, but there are some downsides to this “Idaho Solution,” writes Dr. Kenneth Krell.

Editor’s note: This is the third in a series of five guest op-eds by Dr. Kenneth Krell. Each will examine aspects of the upcoming Idaho Health Care Plan proposal, built in cooperation with Richard Armstrong, former director of the Dept. of Health and Welfare, current DHW leadership and the Idaho Dept. of Insurance.

On Tuesday, Krell wrote about the proposal to use two waivers to help stabilize Idaho’s health insurance exchange. Read the first and second installments at PostRegister.com.

Two glaring problems with the plan stand out. The first is that out of pocket costs for those already struggling below 100 percent FPL will occur, whereas full Medicaid expansion would leave no costs to the recipients. Lori Wolff of the Idaho Dept. of Insurance estimates out of pocket costs to these families, after subsidies, could be anywhere from \$0 to about \$40 per month, depending on the age of the participant and the type of plan selected on the exchange. But that doesn’t count co-pays and deductibles, though Wolff says those are quite low when cost share reductions are in place to help cover those costs. But they are additional costs to already struggling families and will likely result in some eligible patients not signing up for the program.

And now Trump is refusing to reimburse the insurance companies for the co-pay and deductible subsidies, which potentially could increase costs for individual policies. But the premium subsidies are protected in the permanent appropriation, and the insurance companies still must lower the copays and deductibles to the consumer. For 2018 the companies already raised prices to account for the increased costs to them of the withheld subsidies, so the actual impact on costs to the insured, at least in the short run, should be minimal.

But the greatest downside to the plan is that not all of the “gap” population will be eligible to sign up. In order to be eligible for the exchanges one must file a federal income tax return, which isn’t required unless one has earned income above \$10,350/year (for a single taxpayer under 65), although many with less income file in order to get their paid taxes refunded.

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The state Dept. of Health and Welfare has very accurate records of those state citizens under 100 percent FPL who file federal tax returns, since all assistance programs are coordinated through that office. Their records indicate 37,000 Idahoans have taxable incomes they report below 100 percent FPL, and thus would be eligible for exchange subsidies.

On Thursday, we'll take a closer look at those who would be left without health care coverage under the proposed Idaho Health Care Plan.

Krell is an intensivist at Eastern Idaho Regional Medical Center in Idaho Falls. He has degrees in both journalism and medicine. He can be reached at kkrell1@gmail.com.

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