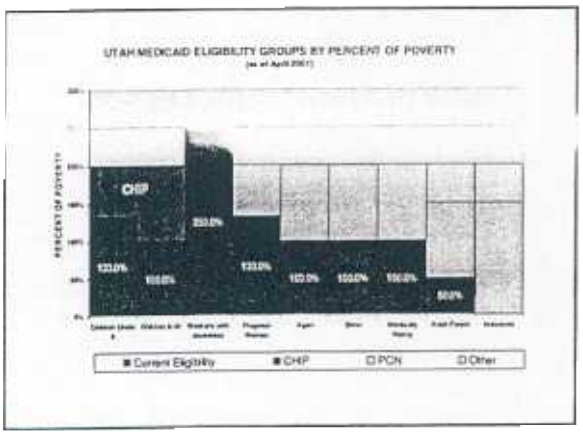
Utah Primary Care & Covered At Work
San Francisco/July 2003

Rod Betit
Executive Director
Utah Department of Health

Utah vs. U.S.- All Sources

- Utah Per Capita
- Hospital $1016
- M.D. $ 763
- LTC $ 140
- Drugs $ 394
- Total $2731
- Medicaid $5178

- U.S. Per Capita
- Hospital $1405
- M.D. $ 1095
- LTC $ 325
- Drugs $ 451
- Total $3759



Utah's Uninsured - WHO ARE THEY?

- 2001 uninsured rates –children 6.8%, adults 9.6%
- 145,000 are adults, 50,000 are children.
- 86,000 adults are below 200% of poverty. Of these:
  - 2/3rds are parents
  - 3/4 are employed
  - Generally work for small companies.
  - Unknown health status.
  - Cannot afford full benefit coverage.
  - Cannot buy "medical-lite" product in Utah.
  - Use ER for primary/urgent care.

Goals

- Continue the State's progress in reducing the number of uninsured.
- Find a solution to UMAP problem.
- Stay within available state funding.
- Spread existing funding more equitably.
- Offer product not available in market.
- Obtain additional federal support through 1115 Waiver.

THE UTAH PLAN

- Cover up to 25,000 adults i 150% FPL
- Limit coverage to primary & preventive care
- Require cost sharing at reasonable levels - $1000 annual maximum.
- Restrict to uninsured without employer offering.
- Limit coverage to mandatory TANF parents.

THE UTAH PLAN

- Broker specialty physician & hospital coverage through community donated care alliances.
- Offer PCN benefit through a non-proprietary fee-for-service network.
- 2nd phase offer subsidy to uninsured with employer offering.
- Secure "credible coverage" status from insurers.
- Follow health status of both populations

WAIVERS NEEDED FROM SECRETARY

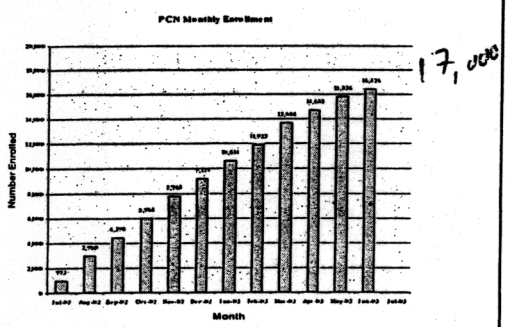
- Limited benefits for new Waiver group [no precedent].
- Reduce benefits to some mandatory Medicaid clients [no precedent].
- Allow transfer of state program under Medicaid [no precedent].
- Coverage of singles & couples w/o children.
- All providers paid the same [FQHC].
- Allow purchase of coverage through employers [HB 122].

MEDICAL SERVICES COVERED

- Primary/preventive care by physicians and mid-levels enrolled in network.
- Adult immunizations.
- Urgent care & ER visits when appropriate.
- Lab, x-ray, medical equipment, medical supplies, oxygen, ambulance.
- Basic dental, hearing tests, visions screening but not glasses.
- Prescription drugs [Limit of 4 per month].

OTHER "INVISIBLE" FEATURES

- UHA donated hospital care = $10 Million.
- Specialty care covered in inpatient setting.
- Donated outpatient specialty care
- Potential for employer to offer catastrophic supplement, dental, vision to package.
- Health Education services – UDOH & LHD.
- Referral to Rx Assistance Programs.



PMPM Cost Calculation	MONTH OF SERVICE							
	Jul 2002	Aug 2002	Sep 2002	Oct 2002	Nov 2002	Dec 2002	Jan 2003	Jul - Jan Total
Enrollee Count	1,610	3,809	5,933	7,895	10,011	12,446	14,357	56,061
Claims Cost	$105.05	$91.00	$79.91	$86.83	$78.56	$69.43	$75.67	$78.69
Admin Cost								$3.71
							PMPM	$82.41

early on adverse selection

WHO HAS ENROLLED IN PCN THUS FAR?

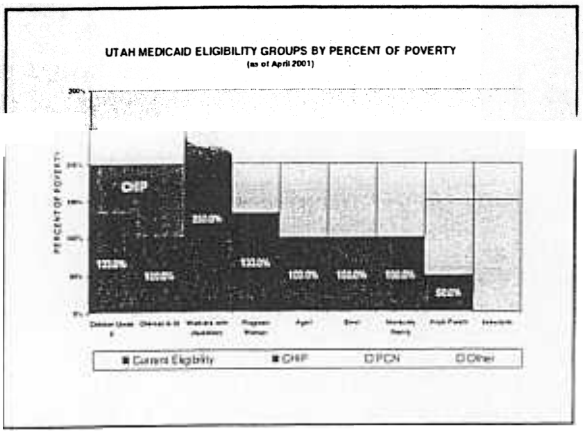
Total Enrolled	16,426	
▫Former UMAP	1,284	8%
▫Below UMAP Income	7,067	43%
▫>UMAP BUT < 100% FPL	3,430	21%
▫Above 100% FPL	4,645	28%
Adults without children	8,603	52%
Adults with children	7,823	48%
Employed	7,495	46%

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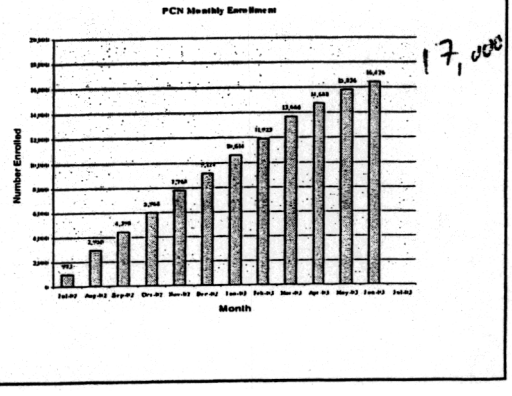
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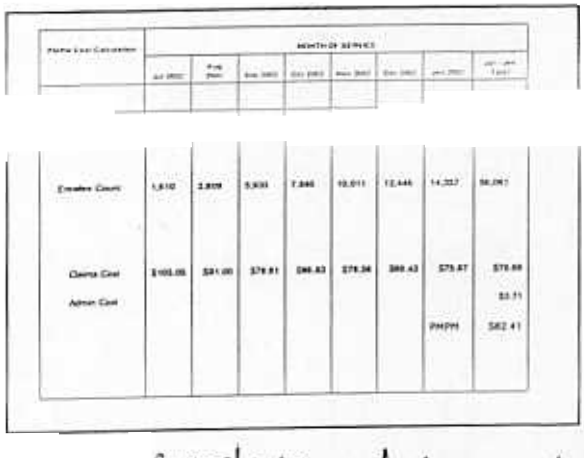
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