Coverage Facts for Utah

Advance premium tax credits and cost-sharing reductions provide needed assistance to tens of thousands of Utah residents.

- As of the end of the 2017 open enrollment period, 197,187 individuals selected a Marketplace plan.
  - 63,366 had incomes up to 150% FPL
  - 79,739 had incomes over 150% FPL and up to 250% FPL
  - 29,502 were in rural locations based on zip code, as defined by HRSA
  - 49,180 selected bronze plans, which have higher deductibles
- 168,686 people had premiums reduced by the advance premium tax credit (APTC).
- 119,251 people qualified for cost-sharing reductions.
- The average per person monthly premium for all consumers before any APTC was $319.
- For those receiving APTCs, the average monthly premium was $89.²

Medicaid helps low-income residents of Utah access the health care they need.

- As of February 2017, Utah has enrolled 308,982 individuals in Medicaid and CHIP, a net increase of 5% since October 2013.³
- 84% of Medicaid enrollees in Utah are in working families.

There were 57,900 more individuals in Utah with health insurance coverage in 2015 than in 2013.

From 2013 to 2015, the uninsured rate in Utah fell from 12% to 10%.
Medicaid provides the state of Utah with needed budgetary support.

- For every $1 spent on Medicaid by the state, the federal government matches $2.32.\(^4\) To offset the loss of federal funding proposed in the AHCA, the state will need to generate additional revenue to compensate for the increased state funding needed to keep Medicaid spending constant or face tough decisions about whether to save costs by cutting Medicaid eligibility, covered services and/or provider payments or draw funding away from other state priorities such as education or transportation.

Residents of Utah need access to meaningful and affordable coverage that covers their health care needs.

- 391,000 non-elderly adults in Utah have declinable pre-existing conditions under pre-ACA practices - 23% of the population.\(^5\)

- From 2000 to 2015, there was nearly a 400% increase in deaths in Utah from the misuse and abuse of prescription drugs. 23 individuals die from prescription drug overdoses every month.\(^6\)

- In Utah, from 2010 to 2014, approximately 204,000 adults aged 18 or older with any mental illness received mental health treatment/counseling within the year prior to being surveyed. The remaining 54.7% of Utah residents aged 18 or older with any mental illness did not receive mental health treatment/counseling in that time span.\(^7\)

Utah’s high-risk pool before the ACA left residents of Utah behind.

- Utah’s high-risk pool membership made up 2.5% of non-group health insurance market participants in 2011.\(^8\) By the end of 2011, there were 3,946 pool participants.

- Premiums in Utah’s high-risk pool were capped at 200% of standard market rates. The state high-risk pool provided a low-income premium subsidy. The deductible of the high-risk pool plan with the most members was $5,000.

- Utah’s high-risk pool excluded coverage of pre-existing conditions for medically eligible enrollees for six months. It also had a lifetime benefit maximum of $1.5 million, as well as an annual benefit maximum of $400,000.

- In 2011, the state high-risk pool had a net loss of more than $15 million.\(^9\)

SOURCES

1. Kaiser Family Foundation. Numbers may not add up due to rounding and exclusion of people with private coverage of an unknown source. http://kff.org/other/state-indicator/total-population/?currentTimeframe=0&sortModel=%7B%22sortModel%22:%22Location%22%22sort%22:%22%22%2asc%22%7D