Bill # (Sponsor):	HB401 (Rep. J. Dunnigan) Speaker Lockhart's Access Plan	SB251 (Sen. B. Shiozawa) Utah's Private Option Solution	Gov. Gary R. Herbert Healthy Utah Plan
Overview:	Provides capped health savings account (HSA) stipend to subsidize private insurance; enrolls some recipients in existing PCN or UPP programs	Covers Utahns earning up to 100% poverty using mix of traditional Medicaid & private insurance; seeks federal/state match of 90%/10%	Three year plan that closes the coverage gap by subsidizing private insurance to all Utahns who earn under \$15,500 a year (133% FPL)
Covered Lives (2020):	Unknown / Capped enrollment	54,000	111,000
Closes Coverage Gap: Full insurance:	No PCN: No / UPP: Perhaps	Yes Yes	Yes Yes
State cost (2015): State cost (2020):	\$30 - \$35 million N/A (pilot program only)	\$0 \$18.7 million	0 N/A (3-year pilot program)
Federal funds (2015):	\$0 (HSA option) \$41.8 million (PCN/UPP model)	More than \$50 million	\$258 million
Benefit description:	HSA: \$500 (approx.) premium subsidy for some recipients PCN: premium subsidy for basic primary & preventive care (no hospitalization or specialty care); 4 prescription drugs/mo. UPP: \$150/monthly subsidy for employer-based insurance	Uses Medicaid dollars to subsidize health care coverage through: -Employer-sponsored insurance -Private insurance -Medicaid ACOs Promotes personal responsibility, cost sharing, & wellness programs	Subsidizes insurance premiums for: -Employer-sponsored Insurance -Private insurance Medically frail would receive coverage through: -Traditional Medicaid -Medicaid ACOs -Medicaid fee-for-service -Option to enroll in private insurance
Limitations:	HSA: Likely stipend will cover 25% of average premium cost; PCN: Not insurance; no behavioral health component; counselors connected 34% of requests for specialty care (FY2011); UPP: Underutilized; covers 176 lives after 6 years of operation	-More expensive to state than 0-138% Full Expansion model; -Does not return as many federal tax dollars as Full Expansion model; -All indications from the federal government is that a partial expansion would not be approved for enhanced 90%/10% match rate	-Limited cost sharing for individuals earning between 100-133% FPL -Work requirements for some individuals -Wrap around benefits for children moving from Medicaid to parent's private insurance