

# Factsheet: Idaho Health Care Plan

## Dual Waiver Proposal from Idaho



Winter/Spring 2018

The Idaho Health Care Plan could result in as many as 35,000 working Idaho adults that are currently in the health coverage gap gaining access to affordable health insurance, while reducing the cost of coverage for Idahoans enrolled on the state exchange.<sup>1</sup> Idahoans fall into the health coverage gap when they don't qualify for traditional Medicaid, but make too little to qualify for a tax credit on the state exchange. Based on recent census figures and updated data from the Idaho Department of Health & Welfare, it is estimated that the current number of Idahoans in the coverage gap ranges between 51,000 and 62,000. While not a complete solution to the coverage gap, the proposal has the potential to significantly decrease the number of uninsured in Idaho, reduce the costs of uncompensated care and lower premiums in the health insurance marketplace.

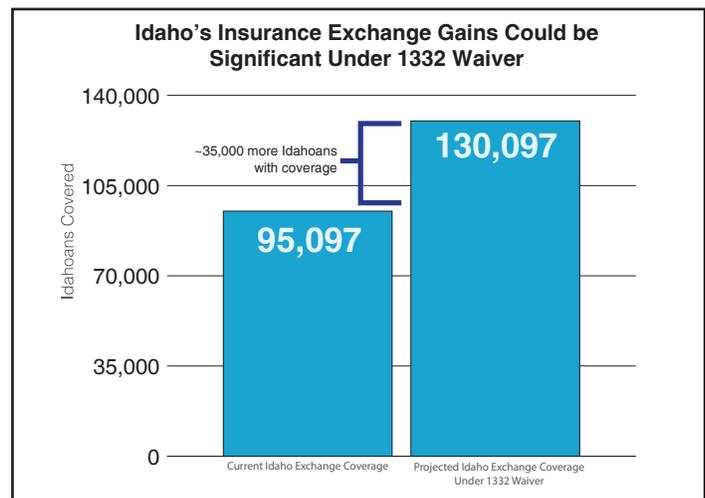
**The Idaho Health Care Plan's Goals**

The Idaho Health Care Plan includes two federal waiver applications – the 1332 Waiver and the 1115 Waiver – that will work in tandem to achieve two stated goals:

- 1) Provide access to affordable health insurance coverage to low-income Idaho adults;
- 2) Bring down overall health care premium costs on Idaho's individual health care market.

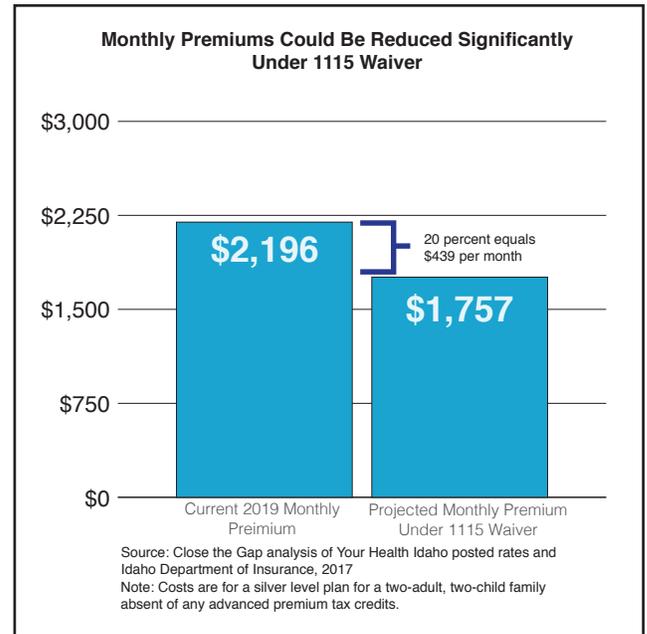
### About the Waiver Applications

The **1332 Waiver** would allow low-income Idahoans who file annual tax returns and are currently in the coverage gap to qualify for an advanced premium tax credit (APTC) on Idaho's health insurance exchange. The estimated 35,000 Idaho adults who would become eligible for the expanded APTC would pay a monthly insurance premium ranging between \$0 and \$50, depending on family income level.



<sup>1</sup>The Idaho Health Care Plan was developed by the Idaho Department of Health & Welfare, the Idaho Department of Insurance, and the Your Health Idaho health insurance exchange in consultation with the Health Care Advisory Panel.

The **1115 Waiver** would allow Idahoans with specific high-cost and medically complex health conditions to qualify for Medicaid. Moving adults with these identified conditions from private insurance to a Medicaid managed care program is expected to reduce overall premium costs on the exchange by an average of 20 percent. It is estimated that between 3,500 and 5,000 people would qualify under this concept, and the state share of the cost would be about \$22 million annually.

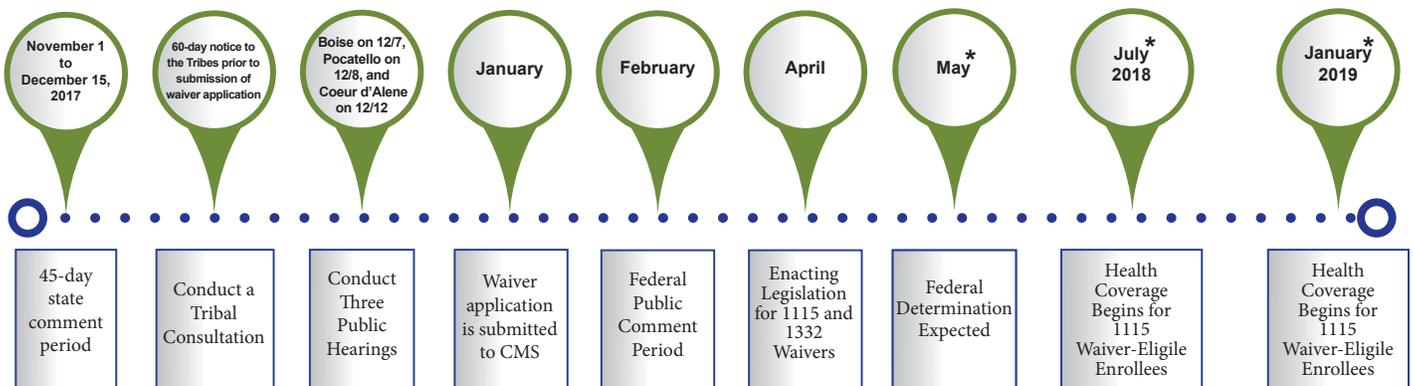


## What's next?

Idahoans across the state provided input on the Idaho Health Care Plan during a state comment period that ran between November 1-December 15, 2017. Public hearings were held on the plan in Boise, Pocatello and Coeur d'Alene.

Those comments will be submitted with Idaho's waiver application to the Center for Medicaid and Medicaid Services (CMS) during the first part of 2018. Pending legislative approval of

both waiver concepts, and federal approval of the waiver applications, the Idaho Department of Health and Welfare estimates that newly eligible Idahoans under the 1115 waiver could begin to enroll in coverage as early as July 2018 and newly eligible Idahoans under the 1332 waiver could gain coverage by January 2019. If approved, Idaho would be the first state to use a 1332 and 1115 waiver to control health care costs and provide broader health coverage for its residents.



## 1115/1332 WAIVER

\*Note: These dates were provided by the Idaho Department of Health and Welfare. Federal approval and implementation will be dependent on a variety of factors.