



Healthcare

Collaborate with public and private healthcare providers to ensure affordable access to all Utahns, including full Medicaid expansion

Health insurance started as a benefit employers could offer to be attractive to a competitive workforce nearly 80 years ago. It's since evolved into a complex burden on employers, the government and families. Ninety percent of Utah's employees work for small businesses, defined as less than 500 employees, and many of them find it cost-prohibitive or just prefer not to offer such plans for their employees. Hardworking members of our communities are going without health coverage.

For decades, the government has been trying to adjust for gaps in the limitations of private coverage by targeting specific populations based on age, income, etc. This is why Medicaid expansion is so important to our state. Private industry has left far too many gaps costing taxpayers excess money and peoples' lives. As a mediator, I know the best solutions involve the contribution of all stakeholders. At this time, negotiating the best practices of multiple systems will provide the best opportunities for equitable, accessible and affordable healthcare for all Utahns.

Identify and eliminate healthcare discrepancies based on geographic areas

Our friends and neighbors in Utah House District 39 experience significant health disparities and adverse health outcomes in comparison to other areas of the state. Areas of our district are identified as needing the greatest amount of improvement in healthcare access and support. The health outcomes in our district include some of the highest percentages of diabetes, infant mortality and suicide in the state.* This is unacceptable and must be changed.

We need a strong, persistent and persuasive community advocate to stand on behalf of patients in our community. I have been advocating for the most important issues in our community for over 15 years. I will not quit. We must collaborate with, not give up control to insurance companies, pharmaceutical manufacturers or special interests.

*<https://health.utah.gov/disparities/data/ohd/HealthDisparitiesbyUtahStateLegislativeDistrict2019.pdf>



Protect patient-provider relationship and treatment

As with all healthcare opportunities, medical cannabis needs to be the exclusive privilege of the patient and healthcare provider. Having cared for aging family members with chronically painful or terminal conditions myself, I am empathetic to the pain and suffering endured by so many in our community. Utahns support removing State interference in the health decisions made between doctors and their patients.

Expand mental health and addiction services

There probably isn't a Utah family who hasn't been affected by an experience with mental health or addiction. It's often experienced without any resources and often leads to less than ideal results. Ranking at or near the bottom in many mental health measures, Utah has an enormous task ahead of us to achieve mental well-being.*

The combination of high depression rates and low access to care, keeps our population at high risk, particularly our youth. We must welcome every opportunity to enhance our healthcare system, including the appropriate adoption of funding sources such as full Medicaid expansion.

Recent conversations and public awareness are a good start. Utilizing technology to connect and report is essential. Recruiting, educating and employing well-qualified professionals to provide effective and timely treatment is critical.

*<https://www.sltrib.com/news/2019/08/14/some-utah-communities/>

Improve transparency while controlling costs for providers and patients alike

Identifying and adapting best practices will facilitate transparency and control costs for all parties. Reducing paper barriers and regulation, where appropriate, will support the provider and patient well in a competitive market.

Increase access to affordable healthcare

The greatest wave of concern came from the number of people who were not insured when the COVID -19 virus hit our shores. The non- and uninsured are stressed under normal conditions regarding their inability to get even preventative care, waiting for severity in their illness or injury to go to an



emergency room. This pandemic was an assault on those who have limited and no healthcare resources.

It is inhumane and from a financial perspective, disastrous, to not have equitable, accessible and affordable healthcare. By not investing in the health of the people in our community, we have to "overpay" in times of crisis, costing far more in the end. This short-sightedness is fiscally irresponsible and must be reversed.

Coordinate resource management between State and local agencies during emergencies

Facilitating appropriate resource management between agencies and keeping people in the roles they perform best is essential to efficiency in times of crisis. The same is true for respecting the role elected officials play within their line of government. The state is best utilized as a coordinator between resources and communities as local officials and leaders will often know what they need best.

Stock proper supplies, educate the public and plan for a rainy day

The people who had the least amount of impact during the COVID-19 pandemic were the people who were prepared for other forms of disaster. The government needs to apply personal disaster preparedness practices for large scale disaster and pandemic response.