



State of Utah

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*Governor*

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*Lieutenant Governor*

## Utah Department of Health

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### Division of Medicaid and Health Financing

NATE CHECKETTS  
*Deputy Director, Utah Department of Health*  
*Director, Division of Medicaid and Health Financing*

June 30, 2017

Members of the Social Services Appropriations Subcommittee  
State Capitol  
Salt Lake City, Utah 84114

Dear Subcommittee Member:

The Centers for Medicare and Medicaid Services (CMS) requires the Department of Health to update its State Plan and existing waivers for Medicaid when the State makes changes to the program. In accordance with these changes and reporting requirements of Subsection 26-18-3(3)(a), the following is a summary of recent changes:

## STATE PLAN AMENDMENTS

### Medicaid Cost Sharing

The Department transmitted a State Plan Amendment to implement cost-sharing policy in accordance with the federal regulation changes effective July 1, 2017. This amendment updates cost sharing for vision services, pharmacy services, chiropractic services, physician or podiatrist services, inpatient hospital stays, outpatient hospital services, and non-emergency services in emergency departments.

This amendment also updates Medicaid policy for members who are subject to cost-sharing requirements, updates the list of members who are exempt from cost-sharing requirements, and updates the list of services that do not require copayments.

This amendment increases copays for some services while reducing copays for other services. It is anticipated that the net effect will be a reduction in state expenditures. On average, it is estimated that Medicaid members and their families that utilize services will see an increase in out-of-pocket expenses.



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### **Utah Educational Savings Plan**

The Department transmitted a State Plan Amendment to comply with the requirements of H.B. 172 passed during the 2017 General Session of the Utah Legislature.

This amendment implements a disregard from resources when funds are held in a Utah Educational Savings Plan and when the Department makes eligibility determinations for certain Medicaid programs. It also specifies eligible groups and individuals.

The Department estimates an aggregate cost of \$2,200 for this amendment. The impact of this change was addressed through legislative appropriation. Medicaid members and their families who qualify for certain programs may see a modest increase in out-of-pocket savings.

### **Pediatric Dental Supplemental Payments**

The Department transmitted a State Plan Amendment to represent the correct amount of state funds used to calculate supplemental payments because the previous number incorrectly listed the total funds amount.

This technical change neither creates additional costs nor affects annual appropriations, and there is no cost shift to more expensive services for Medicaid members and their families.

### **Limitations on Physician Services**

The Department transmitted a State Plan amendment to update and clarify limitations in physician service coverage. This amendment clarifies provisions for licensing, service, procedures, and utilization criteria.

The Department anticipates this update to be budget neutral. This amendment does not affect annual appropriations and there is no cost shift to more expensive services for Medicaid members and their families.

## **WAIVERS**

### **Community Supports Waiver**

The Department submitted an amendment to this waiver to update rate tables to reflect an increase in service rates as a result of legislative appropriations for the new fiscal year. In addition it included some changes to the estimated unduplicated enrollment to better reflect current enrollment trends.



### **Acquired Brain Injury Waiver**

The Department submitted an amendment to this waiver to update rate tables to reflect an increase in service rates as a result of legislative appropriations. In addition it included some changes to the estimated unduplicated enrollment to better reflect current enrollment trends.

### **Physical Disabilities Waiver**

The Department submitted an amendment to this waiver to update rate tables to reflect an increase in service rates as a result of legislative appropriations for the new fiscal year.

### **Aging Waiver**

This amendment updates the estimated unduplicated enrollment count to better reflect enrollment for the current year as well as estimated enrollment in future years.

### **New Choices Waiver**

This amendment included a provision to allow licensed Personal Care agencies to provide respite services within the waiver. In addition, the amendment included changes to the cost estimates and unduplicated enrollment for future years to better reflect current trends.

Please let me know if you have any questions.

Sincerely,



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Deputy Director, Department of Health  
Director, Medicaid and Health Financing