



State of Utah

GARY R. HERBERT  
*Governor*

SPENCER J. COX  
*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*

May 21, 2019

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 Utah 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), the following is a summary of recent changes:

## State Plan Amendments

### Eligibility Groups/Parents and Caretaker Relatives

The Department has submitted a state plan amendment (SPA) to implement the new Medicaid Expansion program, which went into effect April 1, 2019.

This SPA lists and marks the mandatory groups and individuals covered under the new expansion. It also reduces the Parent/Caretaker Relative (PCR) income limit from 55% back to the pre-July 2017 limit.

The Department estimates total annual expenditures to increase by about \$430,000,000 through State Fiscal Year 2021, with an increase in federal funding.

This amendment will affect future appropriations with the expansion of Medicaid services, but there is no cost shift to more expensive services for Medicaid members and their families.



## **Presumptive Eligibility**

The Department has submitted a state plan amendment (SPA) to implement the new Medicaid Expansion program, which went into effect April 1, 2019.

This SPA lists and marks the group of individuals eligible to receive Medicaid services during a presumptive eligibility period following a determination by a qualified hospital.

The Department estimates total annual expenditures for the entire Medicaid expansion to increase by about \$430,000,000 through State Fiscal Year 2021, with an increase in federal funding.

This amendment will affect future appropriations with the expansion of Medicaid services, but there is no cost shift to more expensive services for Medicaid members and their families.

## **WAIVERS**

On March 29, 2019, the Department received approval of an amendment to Utah's 1115 Primary Care Network Waiver to expand Medicaid to approximately 70,000-90,000 Utah parent/caretaker relatives and adults without dependent children. Newly eligible individuals can begin applying for coverage on Monday, April 1.

Under the newly approved plan, Utah residents who earn up to 100% of the federal poverty level, about \$12,492 for an individual or \$25,752 for a family of four, will be eligible to receive full Medicaid benefits. The federal government will cover approximately 70% of the cost of the new program; the State of Utah will cover the remaining 30%.

To be eligible for the new program, individuals must be a Utah resident between the ages of 19 and 64, be a U.S. citizen or legal resident, and meet income requirements. For information on how to apply for Medicaid, go to <https://medicaid.utah.gov/apply-medicaid>.

The approved waiver amendment also includes a pilot to provide coverage for social detox (withdrawal management) in Salt Lake County. Salt Lake County will provide the state share of funding for this pilot.

For more information on Utah's Medicaid expansion, click on:  
[https://medicaid.utah.gov/Documents/pdfs/UTAH%20MEDICAID%20EXPANSION %20Tool kit.pdf](https://medicaid.utah.gov/Documents/pdfs/UTAH%20MEDICAID%20EXPANSION%20Tool%20kit.pdf).

## **Managed Care Rates**

The Department did not submit any managed rates to CMS for approval during this report period. In addition, the Department did not receive approval of any managed care rates from CMS during this report period.

Sincerely,

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