



State of Utah

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July 27, 2023

Chiquita Brooks-LaSure
Administrator
Centers for Medicare and Medicaid Services (CMS)
U.S. Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, D.C. 20201

Dear Administrator Brooks-LaSure:

I am pleased to submit an amendment to the State of Utah's Medicaid Reform 1115 Demonstration. Approval of this amendment will allow the state to provide dental services to Medicaid-eligible adults ages 21 and older who are not already eligible for dental services.

The State of Utah appreciates your consideration of this amendment request. We look forward to the continued guidance and support from CMS in administering Utah's Medicaid Reform 1115 Demonstration.

Respectfully,

[Jennifer Strohecker \(Jul 11, 2023 15:30 MDT\)](#)

Jennifer Strohecker
Medicaid Director
Division of Integrated Healthcare

Utah's Medicaid Reform 1115 Demonstration

Amendment Request

Dental Services for Medicaid-eligible Adults

Demonstration Project No. 11-W-00145/8
21-W-00054/8

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State of Utah

Section 1115 Demonstration Amendment

Dental Services for Medicaid-eligible Adults

Section I. Program Description and Objectives

During the 2023 General Session of the Utah State Legislature, Senate Bill 19 “Medicaid Dental Waiver Amendments” was passed and signed into law by Governor Cox. This legislation requires the Utah Department of Health and Human Services (DHHS), Division of Integrated Healthcare (DIH) to seek 1115 Demonstration approval from the Centers for Medicare and Medicaid Services (CMS) to provide dental services to Medicaid-eligible adults ages 21 and older who are not already eligible for dental services.

The state would like to eliminate the dental benefits specific to the blind/disabled, aged, and/or Targeted Adult Medicaid (TAM) groups and create a dental benefit that can be accessed by adults ages 21 and older as defined in Section II. Individuals ages 18, 19, or 20 will receive dental benefits under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) state plan benefit. With this amendment, TAM individuals will no longer need to be enrolled in a Substance Use Disorder (SUD) treatment program in order to receive dental benefits.

Goals and Objectives

Oral health is an important component of an individual’s overall health. Untreated caries (cavities) and periodontal (gum) disease can exacerbate certain diseases, such as diabetes and cardiovascular disease, and lead to chronic pain, infections, and loss of teeth.¹ Lack of routine dental care can also delay diagnosis of conditions, which can lead to potentially preventable complications, high-cost emergency department visits, and adverse outcomes.² The State believes this demonstration furthers the objectives of Title XIX of the Social Security Act of promoting improved health outcomes by addressing the dental needs of Medicaid eligible individuals.

¹ U.S. Department of Health and Human Services. *Oral Health in America: A Report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services, National Institute of Dental and Craniofacial Research, National Institutes of Health, 2000.

² Freed, M, Neuman, T, Jacobson, *Drilling Down on Dental Coverage and Costs for Medicare Beneficiaries*. March 2019. <https://www.kff.org/medicare/issue-brief/drilling-down-on-dental-coverage-and-costs-for-medicare-beneficiaries/>

The benefits of comprehensive oral care have been underscored in populations with high-severity and chronic substance use disorders. Comprehensive oral care has been shown to improve treatment outcomes in this population.³ Building upon this evidence, the proposed amendment will expand dental benefits to more Medicaid-eligible adults, including those enrolled in the TAM, without requiring enrollment in a SUD treatment program.

Operation and Proposed Timeline

The Demonstration will operate statewide. The state intends to implement the proposed benefit within 90 days of approval. The state requests to operate the Demonstration through the end of the current approval period, which is June 30, 2027.

Demonstration Hypotheses and Evaluation

With the help of an independent evaluator, the state will develop a plan for evaluating the hypothesis indicated below. These hypotheses will be analyzed for the overall demonstration population as well as key subpopulations (e.g., by sex, age, race and ethnicity, primary language, disability status, and geography). The state will identify validated performance measures that adequately assess the impact of the Demonstration on these populations. The state will submit the evaluation plan to CMS for approval.

The state will conduct ongoing monitoring of this demonstration and will provide information regarding monitoring activities in the required quarterly and annual monitoring reports.

The following hypotheses will be tested during the approval period:

Hypothesis	Anticipated Measure(s)	Data Sources	Evaluation Approach
Individuals in the demonstration will have increased utilization of preventative dental care.	-Utilization of preventative dental services.	Claims data	The independent evaluator will design quantitative and qualitative measures to include quasi-experimental comparisons. The evaluation will include subpopulation comparisons to measure disparities.

³ Hanson, G. R., McMillan, S., Mower, K., Bruett, C. T., Duarte, L., Koduri, S., Pinzon, L., Warthen, M., Smith, K., Meeks, H., & Trump, B. (2019). Comprehensive oral care improves treatment outcomes in male and female patients with high-severity and chronic substance use disorders. *Journal of the American Dental Association* (1939), 150(7), 591–601. <https://doi.org/10.1016/j.adaj.2019.02.016>

Individuals in the demonstration will have decreased utilization of emergency dental services.	-Utilization of emergency dental services.	Claims data	The independent evaluator will design quantitative and qualitative measures to include quasi-experimental comparisons. The evaluation will include subpopulation comparisons to measure disparities.
The demonstration will lead to improved oral health outcomes among Medicaid-eligible adults.	-Rates of dental caries and periodontal disease.	Claims data	The independent evaluator will design quantitative and qualitative measures to include quasi-experimental comparisons. The evaluation will include subpopulation comparisons to measure disparities.
Beneficiaries will report improved satisfaction and access to dental care under the demonstration.	-Beneficiary satisfaction score -Reported access to dental care	Beneficiary survey	The independent evaluator will design quantitative and qualitative measures to include quasi-experimental comparisons. The evaluation will include subpopulation comparisons to measure disparities.

Section II. Demonstration Eligibility

Individuals eligible under this demonstration must be Medicaid eligible individuals age 21 and older in the following eligibility groups:

- Aged, Blind, and Disabled
- Parent/Caretaker Relative Medicaid
- Targeted Adult Medicaid
- Former Foster Care Youth
- Adult Expansion Population
- Spenddown Program (Medically Needy)
- Breast and Cervical Cancer Program
- Nursing Home
- 1915(c) Waiver Programs
- Refugee Medical Assistance
- Presumptive Eligibility
- Transitional Medicaid Assistance

This demonstration does not include:

1. Individuals ages 18, 19, or 20 will receive dental benefits under the EPSDT benefit.

Projected Enrollment

The projected enrollment for individuals in this demonstration population is 243,247.

Section III. Demonstration Benefits and Cost Sharing Requirements

There are no changes to the dental benefits provided to eligible individuals under this amendment. Individuals will continue to receive state plan dental benefits. Cost sharing requirements will not differ from those provided under the state plan.

Section IV. Delivery System

The Department will deliver services through a fee for service payment model, with services provided by the University of Utah School of Dentistry (UUSOD), and their associated statewide provider network.

Section V. Implementation and Enrollment in Demonstration

Eligible individuals will be enrolled in the Demonstration as of the implementation date of this amendment. The state intends to implement the proposed benefit within 90 days of approval.

Section VI. Demonstration Financing and Budget Neutrality

Refer to Budget Neutrality- Attachment 1 for the state's historical and projected expenditures for the requested period of the Demonstration.

Below is the projected enrollment for eligible adults in this demonstration and expenditures for each remaining demonstration year.

	DY22 (SFY 24)	DY 23 (SFY 25)	DY 24 (SFY 26)	DY 25 (SFY 27)
Enrollment	187,955	208,766	213,537	223,279
Expenditures	\$72,603,302	\$80,642,218	\$82,484,960	\$86,248,288

Section VII. Proposed Waiver and Expenditure Authority

The State requests the following proposed waivers and expenditure authority to operate the Demonstration.

Waiver and Expenditure Authority	Reason and Use of Waiver
Section 1902(a)(10)(B)- Amount, Duration, and Scope of Services and Comparability	To enable the State to vary the amount, duration, and scope of services provided to individuals in the demonstration group.
Section 1902(a)(23)(A) Freedom of Choice	To enable the state to restrict freedom of choice of providers for individuals under this demonstration.

Expenditure Authority

The state requests expenditure authority to provide dental benefits to all Medicaid eligible adults, age 21 and older who are not pregnant. This includes:

- Aged, Blind, and Disabled
- Parent/Caretaker Relative Medicaid
- Targeted Adult Medicaid
- Former Foster Care Youth
- Adult Expansion Population
- Spenddown Program (Medically Needy)
- Breast and Cervical Cancer Program
- Nursing Home
- 1915(c) Waiver Programs
- Refugee Medical Assistance
- Presumptive Eligibility
- Transitional Medicaid Assistance

EPSDT eligible and pregnant individuals will continue to receive state plan dental benefits.

Section VIII. Compliance with Public Notice and Tribal Consultation

Public Notice Process

Public notice of the State's request for this demonstration amendment, and notice of public hearing was advertised in the newspaper of widest circulation and sent to an electronic mailing list. In addition, the abbreviated public notice was posted to the State's Medicaid website at <https://medicaid.utah.gov/1115-waiver>.

Two public hearings to take public comment on this request were held. The first public hearing was held on June 15, 2023, from 2:00 to 4:00 pm during the Medical Care Advisory Committee (MCAC) meeting. The second public hearing was held on June 26, 2023, from 4:00 to 5:00 pm. Both public hearings were held via video and teleconferencing.

Public Comment

The state accepted public comment during a 30-day public comment period, which was held June 7, 2023 through July 7, 2023. The state received comments from two agencies. This included comments provided during both public hearings, email and online portal comments, and mailed comments. The state reviewed and considered all public comments received. A summary of the comments and state responses are outlined below.

General comments

Two comments were received. One commenter emphasized the importance of oral health and that it is an indispensable element for an individual's overall health and wellbeing, and that lack of coverage is a major constraint to access good oral health. The other commenter strongly advocated for the state to help and support Utahns in improving oral health outcomes. The commenter also suggested the state pay particular attention to accessibility and capacity related to this benefit, especially in rural, frontier and tribal communities which tend to lack dental practices and often include long wait lists in health centers that offer dental services. In addition, the commenter also suggested non-English speaking members have services delivered in their language of preference.

Response: The state agrees with these comments and understands the importance of oral health, adequate accessibility and capacity, and delivering services through preferred languages.

Tribal Consultation

In accordance with the Utah Medicaid State Plan, and section 1902(a)(73) of the Social Security Act and the DHHS Intergovernmental Policy 01.19 Formal DHHS [Tribal Consultation and Urban Indian Organization Conferment Process Policy](#) , the state ensures that a meaningful consultation process occurs in a timely manner on program decisions or policy impacting Indian Tribes and the Urban Indian Organization (UIO) in the State of Utah. DIH has notified the DHHS Tribal Health Liaison of the waiver amendment. As a result of this notification, DIH began to engage in the tribal consultation process by attending the Utah Indian Health Advisory Board (UIHAB) meeting on June 9, 2023 to present this demonstration amendment. During this meeting, UIHAB made the motion to support this amendment.

Tribal Consultation & Conferment Policy Process

In the event that a grant, project, policy, waiver renewal or amendment is requested, the Office of AI/AN Health Affairs is contacted. If the request is within the 90 days of submission, the Office's AI/AN Health Liaison will provide an opportunity for presentation to the Utah Indian Health Advisory Board (UIHAB) Tribal and UIO representatives. The Liaison will request an executive summary of the materials to be included in the distribution of the meeting agenda and materials to the UIHAB representatives and Tribal leadership. The information is disseminated to the UIHAB representatives and leadership at least 10 days prior to the meeting for review. During the UIHAB meeting, presenters will address any questions or concerns raised by the representatives. If the UIHAB representatives provide resolutions to or are in agreement with the changes, they will make a motion to pass or support by a majority. If additional Consultation is required, the UIHAB will inform the presenters of that need at that time. If a Tribal or UIO representative would like to have the presentation provided to their leadership, they can also make a formal request at that time. The Office of AI/AN Health Affairs will coordinate with the presenter and the UIHAB representatives or the Tribe or UIO to schedule an additional Consultation or Conferment meeting on the issue(s) or concern(s) raised.

Section IX. Demonstration Administration

Name and Title: Jennifer Strohecker, Medicaid Director, Division of Integrated Healthcare

Telephone Number: (801) 538-6689

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Attachment 1

Compliance with Budget Neutrality Requirements

DEMONSTRATION WITHOUT WAIVER (WOW) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS

ELIGIBILITY GROUP	TREND RATE 1	DEMONSTRATION YEARS (DY)					DY21-25 TOTAL WOW
		DY 21 (SFY 23)	DY 22 (SFY 24)	DY 23 (SFY 25)	DY 24 (SFY 26)	DY 25 (SFY 27)	
Current Eligibles							
Pop Type: Medicaid							
Eligible Member Months	0.0%	318,076	318,076	318,076	318,076	318,076	
PMPM Cost	5.3%	\$ 1,293.75	\$ 1,362.32	\$ 1,434.52	\$ 1,510.55	\$ 1,590.61	
Total Expenditure		\$ 411,511,221	\$ 433,321,316	\$ 456,287,346	\$ 480,470,575	\$ 505,935,516	\$ 2,287,525,974
Demo Pop I - PCN Adults with Children							
Pop Type: Hypothetical							
Eligible Member Months	5.9%						
PMPM Cost	5.3%						
Total Expenditure							\$ -
Demo Pop III/V - UPP Adults with Children *							
Pop Type: Hypothetical							
Eligible Member Months	34.9%	36,498	49,222	66,380	89,520	120,727	
PMPM Cost	5.3%	\$ 388.58	\$ 388.58	\$ 388.58	\$ 388.58	\$ 388.58	
Total Expenditure		\$ 14,182,519	\$ 19,126,545	\$ 25,794,059	\$ 34,785,867	\$ 46,912,221	\$ 140,801,211
Demo Pop I - PCN Childless Adults							
Pop Type: Medicaid							
Eligible Member Months							
PMPM Cost							
Total Expenditure							\$ -
Demo Pop III/V - UPP Childless Adults *							
Pop Type: Medicaid							
Eligible Member Months	159	184	189	194	199	204	
PMPM Cost	68.45	\$ 388.58	\$ 388.58	\$ 388.58	\$ 388.58	\$ 388.58	
Total Expenditure		\$ 71,651	\$ 73,442	\$ 75,278	\$ 77,160	\$ 79,089	\$ 376,620
Employer Sponsored Insurance (ESI)							
Pop Type: Hypothetical							
Eligible Member Months	2.5%	145,638	149,279	153,011	156,836	160,757	
PMPM Cost	4.7%	\$ 264.70	\$ 277.14	\$ 290.17	\$ 303.81	\$ 318.08	
Total Expenditure		\$ 38,550,492	\$ 41,371,424	\$ 44,398,778	\$ 47,647,659	\$ 51,134,277	\$ 223,102,631
Expansion Parents <=100% FPL							
Pop Type: Expansion							
Eligible Member Months	2.5%	365,958	375,106	384,484	394,096	403,949	
PMPM Cost	5.3%	\$ 784.16	\$ 825.72	\$ 869.48	\$ 915.56	\$ 964.09	
Total Expenditure		\$ 286,967,645	\$ 309,731,354	\$ 334,300,793	\$ 360,819,204	\$ 389,441,187	\$ 1,681,260,182
Expansion Adults w/out Dependent Children <=100% FPL							
Pop Type: Expansion							
Eligible Member Months	2.5%	431,799	442,594	453,658	465,000	476,625	
PMPM Cost	5.3%	\$ 1,094.21	\$ 1,152.20	\$ 1,213.26	\$ 1,277.57	\$ 1,345.28	
Total Expenditure		\$ 472,476,451	\$ 509,955,646	\$ 550,407,877	\$ 594,068,982	\$ 641,193,504	\$ 2,768,102,461
Expansion Parents 101-133% FPL							
Pop Type: Expansion							
Eligible Member Months	5.25%	132,166	139,105	146,408	154,094	162,184	
PMPM Cost	5.3%	\$ 766.98	\$ 807.63	\$ 850.43	\$ 895.51	\$ 942.97	
Total Expenditure		\$ 101,368,614	\$ 112,345,061	\$ 124,510,065	\$ 137,992,326	\$ 152,934,480	\$ 629,150,545
Expansion Adults w/out Dependent Children 101-133% FPL							
Pop Type: Expansion							
Eligible Member Months	5.25%	418,244	440,201	463,312	487,636	513,237	
PMPM Cost	5.3%	\$ 1,075.02	\$ 1,132.00	\$ 1,191.99	\$ 1,255.17	\$ 1,321.69	
Total Expenditure		\$ 449,621,028	\$ 498,307,117	\$ 552,265,058	\$ 612,065,699	\$ 678,341,703	\$ 2,790,600,606
Former Foster							
Pop Type: Hypothetical							
Eligible Member Months	0.0%	10	10	10	10	10	
PMPM Cost	4.8%	\$ 1,252.63	\$ 1,312.76	\$ 1,375.77	\$ 1,441.81	\$ 1,511.01	
Total Expenditure		\$ 12,526	\$ 13,128	\$ 13,758	\$ 14,418	\$ 15,110	\$ 68,940
Housing Residential Support Services (HRSS)							
Pop Type: Expansion							
Eligible Member Months	2.5%	33,508	34,346	35,205	36,085	36,987	
PMPM Cost	5.3%	\$ 7,318.35	\$ 7,706.22	\$ 8,114.65	\$ 8,544.73	\$ 8,997.60	
Total Expenditure		\$ 245,225,284	\$ 264,677,780	\$ 285,673,345	\$ 308,334,383	\$ 332,793,008	\$ 1,436,703,800
Intense Stabilization Services (ISS)							
Pop Type: Hypothetical							
Eligible Member Months	0.0%	1,440	1,440	1,440	1,440	1,440	
PMPM Cost	5.3%	\$ 2,328.50	\$ 2,451.91	\$ 2,581.86	\$ 2,718.70	\$ 2,862.79	
Total Expenditure		\$ 3,353,038	\$ 3,530,749	\$ 3,717,879	\$ 3,914,927	\$ 4,122,418	\$ 18,639,012
In-Vitro Fertilization (IVF) Treatment							
Pop Type: Hypothetical							
Eligible Member Months	13.5%	162	184	209	237	269	
PMPM Cost	5.0%	\$ 20,588.98	\$ 21,620.64	\$ 22,703.99	\$ 23,841.63	\$ 25,036.27	
Total Expenditure		\$ 3,341,461	\$ 3,982,315	\$ 4,746,077	\$ 5,656,320	\$ 6,741,137	\$ 24,467,310

DEMONSTRATION WITHOUT WAIVER (WOW) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS

ELIGIBILITY GROUP	TREND RATE 1	DEMONSTRATION YEARS (DY)					DY21-25 TOTAL WOW
		DY 21 (SFY 23)	DY 22 (SFY 24)	DY 23 (SFY 25)	DY 24 (SFY 26)	DY 25 (SFY 27)	
Medicaid for Justice-Involved Populations							
Pop Type: Hypothetical							
Eligible Member Months	1.75%	39,756	40,451	41,159	41,880	42,613	
PMPM Cost	3.0%	\$ 551.67	\$ 568.22	\$ 585.26	\$ 602.82	\$ 620.91	
Total Expenditure		\$ 21,931,981	\$ 22,985,264	\$ 24,089,131	\$ 25,246,012	\$ 26,458,452	\$ 120,710,839
Mental Health Institutions for Mental Disease (IMD)							
Pop Type: Hypothetical							
Eligible Member Months	2.5%	11,043	11,319	11,602	11,892	12,190	
PMPM Cost	5.3%	\$ 14,339.69	\$ 15,099.69	\$ 15,899.97	\$ 16,742.67	\$ 17,630.03	
Total Expenditure		\$ 158,356,552	\$ 170,918,185	\$ 184,476,270	\$ 199,109,850	\$ 214,904,239	\$ 927,765,096
Serious Mental Illness (SMI)							
Pop Type: Hypothetical							
Eligible Member Months	2.5%	17,688	18,130	18,583	19,048	19,524	
PMPM Cost	5.3%	\$ 14,998.85	\$ 15,793.79	\$ 16,630.86	\$ 17,512.30	\$ 18,440.45	
Total Expenditure		\$ 265,296,529	\$ 286,341,176	\$ 309,055,190	\$ 333,570,993	\$ 360,031,512	\$ 1,554,295,400
Substance Use Disorder (SUD)							
Pop Type: Hypothetical							
Eligible Member Months	6.0%	49,527	52,940	56,587	60,486	64,654	
PMPM Cost	5.0%	\$ 4,239.75	\$ 4,451.74	\$ 4,674.33	\$ 4,908.05	\$ 5,153.45	
Total Expenditure		\$ 209,983,503	\$ 235,674,067	\$ 264,507,781	\$ 296,869,197	\$ 333,189,497	\$ 1,340,224,045
Targeted Adults							
Pop Type: Expansion		<i>Member months will increase when the criteria is expanded to include victims of domestic violence and individuals with court ordered treatment.</i>					
		<i>PMPM will increase due to adding the new managed care directed payments</i>					
Eligible Member Months	2.5%	180,918	185,441	190,077	194,828	199,699	
PMPM Cost	5.3%	\$ 1,495.83	\$ 1,575.11	\$ 1,658.59	\$ 1,746.50	\$ 1,839.06	
Total Expenditure		\$ 270,622,011	\$ 292,089,289	\$ 315,259,114	\$ 340,267,965	\$ 367,258,823	\$ 1,585,497,203
Withdrawal Management							
Pop Type: Hypothetical							
Eligible Member Months	0.0%	4,018	4,018	4,018	4,018	4,018	
PMPM Cost	5.0%	\$ 850.85	\$ 893.40	\$ 938.07	\$ 984.97	\$ 1,034.22	
Total Expenditure		\$ 3,418,520	\$ 3,589,446	\$ 3,768,918	\$ 3,957,364	\$ 4,155,233	\$ 18,889,482
Long-Term Support Services (LTSS)							
Pop Type: Hypothetical							
Eligible Member Months	0.0%		600	600	600	600	
PMPM Cost	5.0%		\$ 9,578.00	\$ 10,056.90	\$ 10,559.75	\$ 11,087.73	
Total Expenditure			\$ 5,746,800	\$ 6,034,100	\$ 6,335,800	\$ 6,652,600	\$ 24,769,300
Integrated Behavior Health Services							
Pop Type: Hypothetical		<i>Starts 1/1/24</i>					
Eligible Member Months	0.0%		1,500	3,000	3,000	3,000	
PMPM Cost	5.0%		\$ 66.67	\$ 70.00	\$ 73.50	\$ 77.18	
Total Expenditure			\$ 100,000	\$ 210,000	\$ 220,500	\$ 231,500	\$ 762,000
Demo Pop VI - UPP for Children							
Pop Type: Hypothetical		<i>Starts 1/1/24</i>					
Eligible Member Months	0.0%		1,775	3,523	3,523	3,523	
PMPM Cost	5.0%		\$ 180.00	\$ 180.00	\$ 180.00	\$ 180.00	
Total Expenditure			\$ 319,500	\$ 634,140	\$ 634,140	\$ 634,140	\$ 2,221,920
Dental Services for Medicaid-eligible Adults							
Pop Type: Hypothetical							
Eligible Member Months	0.0%		2,255,460	2,505,192	2,562,444	2,679,348	
PMPM Cost	0.0%		\$ 32.19	\$ 32.19	\$ 32.19	\$ 32.19	
Total Expenditure			\$ 72,603,302	\$ 80,642,218	\$ 82,484,960	\$ 86,248,288	\$ 321,978,768
SB133 12-Month Extended Postpartum							
Pop Type: Hypothetical							
Eligible Member Months	0.0%		140,004	138,540	136,980	134,796	
PMPM Cost	4.5%		\$ 1,072.13	\$ 1,120.45	\$ 1,170.87	\$ 1,223.46	
Total Expenditure			\$ 150,103,124	\$ 155,227,571	\$ 160,385,793	\$ 164,917,386	\$ 630,633,874
SB133 Family Planning Services							
Pop Type: Hypothetical							
Eligible Member Months	1.6%		60,648	61,656	62,640	63,636	
PMPM Cost	1.2%		\$ 21.60	\$ 21.86	\$ 22.13	\$ 22.40	
Total Expenditure			\$ 1,309,968	\$ 1,348,051	\$ 1,386,293	\$ 1,425,154	\$ 5,469,466
SB269 Chronic Conditions Support Amendment							
Pop Type: Hypothetical							
Eligible Member Months	0.0%		9,660	19,320	19,320	9,660	
PMPM Cost	0.0%		\$ 180.00	\$ 180.00	\$ 180.00	\$ 180.00	
Total Expenditure			\$ 1,738,800	\$ 3,477,600	\$ 3,477,600	\$ 1,738,800	\$ 10,432,800

DEMONSTRATION WITH WAIVER (WW ALL) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS

ELIGIBILITY GROUP	DY 21 (SFY 23)	DY 22 (SFY 24)	DY 23 (SFY 25)	DY 24 (SFY 26)	DY 25 (SFY 27)	TOTAL WW
Current Eligibles						
Pop Type:						
Eligible Member Months	318,076	318,076	318,076	318,076	318,076	
PMPM Cost	\$ 1,293.75	\$ 1,362.32	\$ 1,434.52	\$ 1,510.55	\$ 1,590.61	
Total Expenditure	\$ 411,511,221	\$ 433,321,316	\$ 456,287,346	\$ 480,470,575	\$ 505,935,516	\$ 2,287,525,974
Demo Pop I - PCN Adults w/Children						
Pop Type:						
Eligible Member Months	-	-	-	-	-	
PMPM Cost	-	-	-	-	-	
Total Expenditure	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Demo Pop III/V - UPP Adults with Children						
Pop Type:						
Eligible Member Months	\$ 36,498	\$ 49,222	\$ 66,380	\$ 89,520	\$ 120,727	
PMPM Cost	\$ 388.58	\$ 388.58	\$ 388.58	\$ 388.58	\$ 388.58	
Total Expenditure	\$ 14,182,519	\$ 19,126,545	\$ 25,794,059	\$ 34,785,867	\$ 46,912,221	\$ 140,801,211
Demo Pop I - PCN Childless Adults						
Pop Type:						
Eligible Member Months	-	-	-	-	-	
PMPM Cost	\$ -	\$ -	\$ -	\$ -	\$ -	
Total Expenditure	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Demo Pop III/V - UPP Childless Adults						
Pop Type:						
Eligible Member Months	\$ 184	\$ 189	\$ 194	\$ 199	\$ 204	
PMPM Cost	\$ 388.58	\$ 388.58	\$ 388.58	\$ 388.58	\$ 388.58	
Total Expenditure	\$ 71,651	\$ 73,442	\$ 75,278	\$ 77,160	\$ 79,089	\$ 376,620
Employer Sponsored Insurance (ESI)						
Pop Type:						
Eligible Member Months	145,638	149,279	153,011	156,836	160,757	
PMPM Cost	\$ 264.70	\$ 277.14	\$ 290.17	\$ 303.81	\$ 318.08	
Total Expenditure	\$ 38,550,492	\$ 41,371,424	\$ 44,398,778	\$ 47,647,659	\$ 51,134,277	\$ 223,102,631
Expansion Parents <=100% FPL						
Pop Type:						
Eligible Member Months	365,958	375,106	384,484	394,096	403,949	
PMPM Cost	\$ 784.16	\$ 825.72	\$ 869.48	\$ 915.56	\$ 964.09	
Total Expenditure	\$ 286,967,645	\$ 309,731,354	\$ 334,300,793	\$ 360,819,204	\$ 389,441,187	\$ 1,681,260,182
Expansion Adults w/out Dependent Children <=100% FPL						
Pop Type:						
Eligible Member Months	431,799	442,594	453,658	465,000	476,625	
PMPM Cost	\$ 1,094.21	\$ 1,152.20	\$ 1,213.26	\$ 1,277.57	\$ 1,345.28	
Total Expenditure	\$ 472,476,451	\$ 509,955,646	\$ 550,407,877	\$ 594,068,982	\$ 641,193,504	\$ 2,768,102,461
Expansion Parents 101-133% FPL						
Pop Type:						
Eligible Member Months	132,166	139,105	146,408	154,094	162,184	
PMPM Cost	\$ 766.98	\$ 807.63	\$ 850.43	\$ 895.51	\$ 942.97	
Total Expenditure	\$ 101,368,614	\$ 112,345,061	\$ 124,510,065	\$ 137,992,326	\$ 152,934,480	\$ 629,150,545
Expansion Adults w/out Dependent Children 101-133% FPL						
Pop Type:						
Eligible Member Months	418,244	440,201	463,312	487,636	513,237	
PMPM Cost	\$ 1,075.02	\$ 1,132.00	\$ 1,191.99	\$ 1,255.17	\$ 1,321.69	
Total Expenditure	\$ 449,621,028	\$ 498,307,117	\$ 552,265,058	\$ 612,065,699	\$ 678,341,703	\$ 2,790,600,606
Former Foster Care						
Pop Type:						
Eligible Member Months	10	10	10	10	10	
PMPM Cost	\$ 1,252.63	\$ 1,312.76	\$ 1,375.77	\$ 1,441.81	\$ 1,511.01	
Total Expenditure	\$ 12,526	\$ 13,128	\$ 13,758	\$ 14,418	\$ 15,110	\$ 68,940
Housing Residential Support Services (HRSS)						
Pop Type:						
Eligible Member Months	33,508	34,346	35,205	36,085	36,987	
PMPM Cost	\$ 7,318	\$ 7,706	\$ 8,115	\$ 8,545	\$ 8,998	
Total Expenditure	\$ 245,225,284	\$ 264,677,780	\$ 285,673,345	\$ 308,334,383	\$ 332,793,008	\$ 1,436,703,800
Intense Stabilization Services (ISS)						
Pop Type:						
Eligible Member Months	1,440	1,440	1,440	1,440	1,440	
PMPM Cost	\$ 2,328.50	\$ 2,451.91	\$ 2,581.86	\$ 2,718.70	\$ 2,862.79	
Total Expenditure	\$ 3,353,038	\$ 3,530,749	\$ 3,717,879	\$ 3,914,927	\$ 4,122,418	\$ 18,639,012
In-Vitro Fertilization (IVF) Treatment						
Pop Type:						
Eligible Member Months	162	184	209	237	269	
PMPM Cost	\$ 20,588.98	\$ 21,620.64	\$ 22,703.99	\$ 23,841.63	\$ 25,036.27	
Total Expenditure	\$ 3,341,461	\$ 3,982,315	\$ 4,746,077	\$ 5,656,320	\$ 6,741,137	\$ 24,467,310

DEMONSTRATION WITH WAIVER (WW ALL) BUDGET PROJECTION: COVERAGE COSTS FOR POPULATIONS

ELIGIBILITY GROUP	DY 21 (SFY 23)	DY 22 (SFY 24)	DY 23 (SFY 25)	DY 24 (SFY 26)	DY 25 (SFY 27)	TOTAL WW
Medicaid for Justice-Involved Populations						
Pop Type:						
Eligible Member Months	39,756	40,451	41,159	41,880	42,613	
PMPM Cost	\$ 551.67	\$ 568.22	\$ 585.26	\$ 602.82	\$ 620.91	
Total Expenditure	\$ 21,931,981	\$ 22,985,264	\$ 24,089,131	\$ 25,246,012	\$ 26,458,452	\$ 120,710,839
Mental Health Institutions for Mental Disease (IMD)						
Pop Type:						
Eligible Member Months	11,043	11,319	11,602	11,892	12,190	
PMPM Cost	\$ 14,339.69	\$ 15,099.69	\$ 15,899.97	\$ 16,742.67	\$ 17,630.03	
Total Expenditure	\$ 158,356,552	\$ 170,918,185	\$ 184,476,270	\$ 199,109,850	\$ 214,904,239	\$ 927,765,096
Serious Mental Illness (SMI)						
Pop Type:						
Eligible Member Months	17,688	18,130	18,583	19,048	19,524	
PMPM Cost	\$ 14,998.85	\$ 15,793.79	\$ 16,630.86	\$ 17,512.30	\$ 18,440.45	
Total Expenditure	\$ 265,296,529	\$ 286,341,176	\$ 309,055,190	\$ 333,570,993	\$ 360,031,512	\$ 1,554,295,400
Substance Use Disorder (SUD)						
Pop Type:						
Eligible Member Months	49,527	52,940	56,587	60,486	64,654	
PMPM Cost	\$ 4,239.75	\$ 4,451.74	\$ 4,674.33	\$ 4,908.05	\$ 5,153.45	
Total Expenditure	\$ 209,983,503	\$ 235,674,067	\$ 264,507,781	\$ 296,869,197	\$ 333,189,497	\$ 1,340,224,045
Targeted Adults						
Pop Type:						
Eligible Member Months	180,918	185,441	190,077	194,828	199,699	
PMPM Cost	1,496	1,575	1,659	1,747	1,839	
Total Expenditure	\$ 270,622,011	\$ 292,089,289	\$ 315,259,114	\$ 340,267,965	\$ 367,258,823	\$ 1,585,497,203
Withdrawal Management						
Pop Type:						
Eligible Member Months	4,018	4,018	4,018	4,018	4,018	
PMPM Cost	\$ 850.85	\$ 893.40	\$ 938.07	\$ 984.97	\$ 1,034.22	
Total Expenditure	\$ 3,418,520	\$ 3,589,446	\$ 3,768,918	\$ 3,957,364	\$ 4,155,233	\$ 18,889,482
Long-Term Support Services (LTSS)						
Pop Type:						
Eligible Member Months	-	600	600	600	600	
PMPM Cost	-	9,578	10,057	10,560	11,088	
Total Expenditure	-	5,746,800	6,034,100	6,335,800	6,652,600	\$ 24,769,300
Integrated Behavior Health Services						
Pop Type: Starts 1/1/24						
Eligible Member Months	-	1,500	3,000	3,000	3,000	
PMPM Cost	\$ -	\$ 66.67	\$ 70.00	\$ 73.50	\$ 77.18	
Total Expenditure	\$ -	\$ 100,000	\$ 210,000	\$ 220,500	\$ 231,500	\$ 762,000
Demo Pop VI - UPP for Children						
Pop Type: Starts 1/1/24						
Eligible Member Months	-	1,775	3,523	3,523	3,523	
PMPM Cost	\$ -	\$ 180.00	\$ 180.00	\$ 180.00	\$ 180.00	
Total Expenditure	\$ -	\$ 319,500	\$ 634,140	\$ 634,140	\$ 634,140	\$ 2,221,920
Dental Services for Medicaid-eligible Adults						
Pop Type:						
Eligible Member Months	-	2,255,460	2,505,192	2,562,444	2,679,348	
PMPM Cost	\$ -	\$ 32.19	\$ 32.19	\$ 32.19	\$ 32.19	
Total Expenditure	\$ -	\$ 72,603,302	\$ 80,642,218	\$ 82,484,960	\$ 86,248,288	\$ 321,978,768
SB133 12-Month Extended Postpartum						
Pop Type:						
Eligible Member Months	-	140,004	138,540	136,980	134,796	
PMPM Cost	\$ -	\$ 1,072.13	\$ 1,120.45	\$ 1,170.87	\$ 1,223.46	
Total Expenditure	\$ -	\$ 150,103,124	\$ 155,227,571	\$ 160,385,793	\$ 164,917,386	\$ 630,633,874
SB133 Family Planning Services						
Pop Type:						
Eligible Member Months	-	60,648	61,656	62,640	63,636	
PMPM Cost	\$ -	\$ 21.60	\$ 21.86	\$ 22.13	\$ 22.40	
Total Expenditure	\$ -	\$ 1,309,968	\$ 1,348,051	\$ 1,386,293	\$ 1,425,154	\$ 5,469,466
SB269 Chronic Conditions Support Amendment						
Pop Type:						
Eligible Member Months	-	9,660	19,320	19,320	9,660	
PMPM Cost	\$ -	\$ 180.00	\$ 180.00	\$ 180.00	\$ 180.00	
Total Expenditure	\$ -	\$ 1,738,800	\$ 3,477,600	\$ 3,477,600	\$ 1,738,800	\$ 10,432,800

Attachment 2

Public Notice Requirements

Support

PUBLIC NOTICE WEBSITE
DIVISION OF ARCHIVES AND RECORDS SERVICE

Public Hearing on Medicaid Reform 1115 Demonstration

General Information

Government Type:

State Agency

Entity:

Department of Health and Human Services

Public Body:

Medicaid Expansion Workgroup

Give Feedback

Notice Information

[Add Notice to Calendar](#)

Notice Title:

Public Hearing on Medicaid Reform 1115 Demonstration

Notice Subject(s):

Medicaid , Health Care

Notice Type(s):

Hearing

Event Start Date & Time:

June 15, 2023 02:00 PM

Event End Date & Time:

June 15, 2023 04:00 PM

Event Deadline Date & Time:

07/07/23 11:59 PM

Description/Agenda:

Dental Services for Medicaid-eligible Adults,
Family Planning Services,
and Chronic Conditions Support
Public Hearings

The Utah Department of Health and Human Services, Division of Integrated Healthcare will hold public hearings to discuss three amendments to Utah's Medicaid Reform 1115 Demonstration. The Department will also accept public comment regarding the amendments online, by email, or mail during the public comment period from June 7, 2023, through July 7, 2023.

The Dental Services for Medicaid-eligible Adults amendment seeks authority from the Centers for Medicare & Medicaid Services (CMS) to provide dental services to Medicaid-eligible adults ages 21 and older who are not already eligible for dental services.

The Family Planning Services amendment seeks authority from CMS to provide family planning services to a specific population that is otherwise ineligible for Medicaid.

The Chronic Conditions Support amendment seeks authority from CMS to provide additional Medicaid services to individuals in rural areas of the state with qualified chronic health conditions.

Public Hearings:

The Department will conduct two public hearings to discuss the demonstration amendments. The dates and times are listed below. Both public hearings will be held via video and teleconferencing.

Thursday, June 15, 2023, from 2:00 to 4:00 pm, during the Medical Care Advisory Committee (MCAC) meeting

Video Conference: Google Meet Meeting meet.google.com/ppd-afmv-vnw

Give Feedback

Or join by phone: (US) +1 401-552-4511 PIN: 955 386 753 #

Monday, June 26, 2023, from 4:00 pm to 5:00 pm.

Video Conference: Google Meet Meeting meet.google.com/vvm-yxkz-eah

Or join by phone: (US) +1 650-466-0974 PIN: 714 775 327 #

Individuals requiring an accommodation to fully participate in either meeting may contact Laura Belgique at lbelgique@utah.gov or 1 (801) 538-6241 by June 9, 2023, at 5:00 p.m.

Public Comment:

A copy of the public notice and proposed amendments are available online at:

<https://medicaid.utah.gov/1115-waiver/>

The public may comment on the proposed amendment requests during the public comment period from June 7, 2023, through July 7, 2023.

Comments may be submitted using the following methods:

Online: <https://medicaid.utah.gov/1115-waiver/>

Email: Medicaid1115waiver@utah.gov

Mail: Utah Department of Health and Human Services

Division of Integrated Healthcare

PO Box 143106

Salt Lake City, UT 84114-3106

Attn: Laura Belgique

Give Feedback

Notice of Special Accommodations (ADA):

In compliance with the Americans with Disabilities Act, individuals needing special accommodations (including auxiliary communicative aids and services) during this meeting should notify Jennifer Meyer-Smart at 1 (801)-538-6241.

Notice of Electronic or Telephone Participation:

Video Conference: Google Meet Meeting meet.google.com/ppd-afmv-vnw Or join by phone: (US) +1 401-552-4511 PIN: 955 386 753 #

Meeting Information

Meeting Location:

Video/Teleconferencing

Video/Teleconferencing, UT 84116

[Show in Apple Maps](#)

[Show in Google Maps](#)

Contact Name:

Laura Belgique

Contact Email:

lbelgique@utah.gov

Contact Phone:

(801)538-6241

Notice Posting Details

Notice Posted On:

June 02, 2023 10:20 AM

Notice Last Edited On:

June 02, 2023 10:42 AM

Deadline Date:

July 7, 2023 11:59 PM

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Support

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DIVISION OF ARCHIVES AND RECORDS SERVICE

Public Hearing on Medicaid Reform 1115 Demonstration

General Information

Government Type:

State Agency

Entity:

Department of Health and Human Services

Public Body:

Medicaid Expansion Workgroup

Give Feedback

Notice Information

[Add Notice to Calendar](#)

Notice Title:

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Notice Subject(s):

Medicaid , Health Care

Notice Type(s):

Hearing

Event Start Date & Time:

June 26, 2023 04:00 PM

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June 26, 2023 05:00 PM

Event Deadline Date & Time:

07/07/23 11:59 PM

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Family Planning Services,
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Monday, June 26, 2023, from 4:00 pm to 5:00 pm.

Video Conference: Google Meet Meeting meet.google.com/vvm-yxkz-eah

Or join by phone: (US) +1 650-466-0974 PIN: 714 775 327 #

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Email: Medicaid1115waiver@utah.gov

Mail: Utah Department of Health and Human Services

Division of Integrated Healthcare

PO Box 143106

Salt Lake City, UT 84114-3106

Attn: Laura Belgique

Give Feedback

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Meeting Information

Meeting Location:

Video/Teleconferencing

Video/Teleconferencing, UT 84116

[Show in Apple Maps](#)

[Show in Google Maps](#)

Contact Name:

Laura Belgique

Contact Email:

lbelgique@utah.gov

Contact Phone:

(801)538-6241

Notice Posting Details

Notice Posted On:

June 02, 2023 10:36 AM

Notice Last Edited On:

June 02, 2023 10:36 AM

Deadline Date:

July 7, 2023 11:59 PM

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cdevashrayee@utah.gov

ACCOUNT NUMBER

8405

ACCOUNT NAME

DIVISION OF MEDICAID AND HEALTH FINANCING

TELEPHONE

801-538-6641

ORDER #

SLT0023121

CUSTOMER REFERENCE NUMBER

CAPTION

Dental Services for Medicaid-eligible Adults, Family Planning Services, and Chronic Conditions Support Public Hearings The Utah Department of Health and Human Services, Division of Integrated Healthcare will hold public hearings to discuss three amendments to Utah's Medicaid Reform 1115 Demonstration.

TOTAL COST

\$224.60

**Dental Services for Medicaid-eligible Adults,
Family Planning Services,
and Chronic Conditions Support
Public Hearings**

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- Or join by phone: (US) +1 650-466-0974 PIN: 714 775 327 #

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Email: Medicaid1115waiver@utah.gov

Mail: Utah Department of Health and Human Services
Division of Integrated Healthcare
PO Box 143106
Salt Lake City, UT 84114-3106
Attn: Laura Belgique
SLT0023121

AFFIDAVIT OF PUBLICATION

AS THE SALT LAKE TRIBUNE, INC. LEGAL BOOKER, I CERTIFY THAT THE ATTACHED ADVERTISEMENT OF Dental Services for Medicaid-eligible Adults, Family Planning Services, and Chronic Conditions Support Public Hearings The Utah Department of Health and Human Services, Division of Integrated Healthcare will hold public hearings to discuss three amendments to Utah's Medicaid Reform 1115 Demonstration. FOR DIVISION OF MEDICAID AND HEALTH FINANCING WAS PUBLISHED BY THE SALT LAKE TRIBUNE, INC., WEEKLY NEWSPAPER PRINTED IN THE ENGLISH LANGUAGE WITH GENERAL CIRCULATION IN UTAH, AND PUBLISHED IN SALT LAKE CITY, SALT LAKE COUNTY IN THE STATE OF UTAH. NOTICE IS ALSO POSTED ON UTAHLEGALS.COM ON THE SAME DAY AS THE FIRST NEWSPAPER PUBLICATION DATE AND REMAINS ON UTAHLEGALS.COM INDEFINITELY. COMPLIES WITH UTAH DIGITAL SIGNATURE ACT UTAH CODE 46-2-101; 46-3-104.

PUBLISHED ON 06/04/2023

DATE 06/20/2023

STATE OF UTAH
COUNTY OF SALT LAKE

SUBSCRIBED AND SWORN TO BEFORE ME ON THIS 20th DAY OF JUNE IN THE YEAR 2023

BY Jordyn Gallegos

SIGNATURE


NOTARY PUBLIC SIGNATURE

Attachment 3

Medical Care Advisory Committee

Public Hearing

Meeting: Medical Care Advisory Committee
 Date: June 15, 2023
 Start Time: 2:00 p.m.
 End Time: 4:00 p.m.
 Location: <https://meet.google.com/ppd-afmv-vnw> (Google Chrome)
 By Phone: 1-401-552-4511 PIN: 955 386 753#

Agenda Items

- | | | |
|--|---------------------------------------|---------------|
| 1. Welcome | Jennifer Marchant | 2:00 / 5 min |
| <ul style="list-style-type: none"> • Approve Minutes for May 2023* • Requesting Nominations for 2 Appointments <ul style="list-style-type: none"> ○ Consumer Representative for Beneficiaries ○ Consumer Representative for Native American Communities | | |
| 2. Committee Discussion and Vote on FY2025 Budget Recommendations | Jennifer Marchant & Committee Members | 2:05 / 10 min |
| 3. Public Hearing for 1115 Demonstration Waiver Amendments | Laura Belgique | 2:15 / 15 min |
| <ul style="list-style-type: none"> • SB19: Dental Services for Medicaid-eligible Adults • SB133: Family Planning Services • SB269: Chronic Conditions Support | | |
| 4. Director's Report | Jennifer Strohecker | 2:30 / 20 min |
| <ul style="list-style-type: none"> • PRISM Update • Two New CMS Proposed Rules | | |
| 5. Unwinding Continuous Medicaid Eligibility Update** | Jeff Nelson | 2:50 / 15 min |
| 6. UTA Pass Utilization | Brian Roach | 3:05 / 15 min |
| 7. Committee Updates | Committee Members | 3:20 / 5 min |
| 8. Voting Results for Priority Budget Recommendations | Sharon Steigerwalt | |

* Action Item - MCAC Members must be present to vote (substitutes are not allowed to vote)

** Informational handout in the packet sent to committee members

***In accordance with the Open and Public Meetings Act Utah Code 52-4-207, the Chair of the MCAC committee has determined providing an anchor location for the MCAC meeting presents substantial risk to the health and safety of the attendees due to the COVID-19 pandemic. The MCAC meeting will be conducted remotely via electronic means only. The committee members and the public may attend via Google Meet or by calling in to the Google Meet session as listed on the meeting agenda. MCAC meetings will be held in an electronic format until further notice.

Next Meeting: July 20, 2023, from 2:00 p.m. – 4:00 p.m.

Please send meeting topics or other correspondence to Sharon Steigerwalt (ssteigerwalt@utah.gov)

Attachment 4

Tribal Consultation



Utah Indian Health Advisory Board (UIHAB) Meeting

06/09/2023

8:30 AM –11:00 AM

Utah Department of Health & Human Services

195 N 1950 W, Salt Lake City, UT 84116

Multi-State Agency Building (MASOB) Room 2082

(385) 227-2078

Google Meeting Format Web Link:

<https://meet.google.com/krh-kvdf-svj?hs=122&authuser=0>

Call In: 1-414-909-6377

PIN: 211 599 534#



Meeting called by:

UIHAB

Type of meeting:

Monthly UIHAB

Note taker:

Dorrie Reese

Please Review:

Medicaid Rules & SPA document(s), additional materials via presenters.

Agenda topic

8:30 AM

UIHAB Meeting

Welcome & Introductions

Ed Napia, Chairperson

8:40 AM

Committee Updates & Discussion

- ✦ **UT Medicaid Eligibility Policy**
- ✦ **Medicaid & CHIP State Plan Amendments (SPA) & Rules**
- ✦ **CHIP SPA**

Michelle Smith, Medicaid, Asst. Dir. BMEP
Craig Devashrayee, Medicaid, BMEP
Jennifer Wisner, Dental & CHIP Prg. Mgr

- ✦ **DWS Medicaid Eligibility Operations**
- ✦ **SNAP**
- ✦ **MCAC Committee**
- ✦ **CHIP Advisory Committee**

Jessica Ware, AI/AN Elig. Spec., DWS
Paul Birkbeck, Snap Program Specialist
Mike Jensen, UNHS
Courtney Muir, NWBSN

ICWA Liaison
Tribal Health Liaison

- ✦ **Data Reporting Updates**
- ✦ **Program /Contracts/Grant Updates**
- ✦ **UT DHHS OAIANHFS Program Updates**

Jamie Harvey, IHFS
Jeremy Taylor, IHFS
Alex Merrill, IHFS
Jeremy Taylor, IHFS

Opioids & Tobacco
Health Equity

Hilary Makris, IHFS
Kassie John, IHFS

09:45 AM

Medicaid 1115 Demonstration Amendments

Laura Belgique, 1115 Demo. Pgr. Manager

10:15 AM

Project Firstline Outreach (UDHHS)

James Morales, Epidemiologist UDHHS
Population Health

10:30 AM

AUCH Presentation

Melissa Zito, AUCH Tribal Liaison

10:50 AM

I/T/U updates

I/T/U

11:30 AM

Other Business

ADJOURN *Next Mtg. August 11, 2023*



Utah Indian Health Advisory Board Tribal Leadership Reporting Tool

DATE: _____

State Agency Updates & Discussions:

Medicaid State Plan Amendments (SPA) & Rules (see Matrices)

DWS Medicaid Eligibility

MCAC & CHIP Advisory Committees

Federal/State Policy Impacting I/T/U

ICWA Liaison

AI/AN Health Liaison

Data Updates

IHFS Program Updates

Opioid/Tobacco

Health Equity Grants

Agenda Item Updates

Medicaid: I/T/U Claims Submission Updates

Healthy Environments Active Living Program

I/T/U Updates: NWBSN, SJSP & SVBG

Section 105 (I) Leasing; IHS & BIA Facilities

UIHAB Meeting

June 9, 2023 (via phone)

8:30 a.m. – 11:00 a.m.

Participants: (via phone)

Hunter Timbimboo, *Northwestern Band of Shoshone Nation*

George Gover, *Northwestern band of Shoshone Nation*

Tyler Goddard, *Paiute Indian Tribe of Utah*

Ed Napa (Chair), *Skull Valley Band of Goshute*

Selwyn Whiteskunk, *Ute Mtn Ute*

Thomas Stephenson, *Ute Mtn Ute*

Mike Jensen, *Utah Navajo Health Systems*

Marquis Yazzie, *Navajo Area- IHS*

Hope Johnson, *PHX, IHS*

Tina Valencia, *PHX, IHS*

Guests:

Jessica Ware, *AI/AN Eligibility Specialist, DWS*

Paul Birkbeck, *SNAP Program Specialist, DWS*

Melissa Zito, *Tribal Liaison, AUCH*

Alan Pruhns, *AUCH*

Cyndi Gillaspie, *Technical Director, CMS*

DHHS Staff:

Michelle Smith, *Assistant Office Director, Office of Eligibility Policy, DHHS*

Craig Devashrayee, *Office of Eligibility Policy, DHHS*

Jennifer Wisner, *Office of Managed Healthcare, DHHS*

Laura Belgique, *Office of Eligibility Policy, DHHS*

Suzanne Puckett, *Health Policy & Authorization, DHHS*

Kirk Poulsen, *Health Policy & Authorization, DHHS*

Justin Morales, *Office of Population Health, DHHS*

Sarah Rigby, *Office of Population Health, DHHS*

Jamie Harvey, *ICWA Liaison, Office of AI/AN Health Affairs, DHHS*

Jeremy Taylor, *Tribal Health Liaison, Office of AI/AN Health Affairs, DHHS*

Hilary Makris, *Opioid & Tobacco Health Program Coordinator, Office of AI/AN Health Affairs, DHHS*

Alex Merrill, *EPI, Office of AI/AN Health Affairs, DHHS*

Kassie John, *Health Equity Program Coordinator, Office of AI/AN Health Affairs, DHHS*

Dorrie Reese, *Recorder/Minutes, DIH Administrative Assistant, DHHS*

Welcome and Introductions:

UIHAB Chairperson welcomed everyone starting the meeting at 8:30 a.m.

Approval of Minutes:

The Oct 11, 2019, Nov 15, 2019, Dec 13, 2019, Jan 10, 2020, Mar 13, 2020, Apr 10, 2020, May 8, 2020, Jun 12, 2020, Aug, 14, 2020, Sep 11, 2020, Oct 9, 2020, Nov 13, 2020, Dec 11, 2020, Jan 8, 2021, Feb 11, 2021, Feb 12, 2021, Mar 12, 2021, Apr 9, 2021, May 14, 2021, Jun 11, 2021, Aug 13, 2021, Sep 10, 2021, Oct 8, 2021, Nov 12, 2021, Dec 10, 2021, Jan 28, 2022, Mar 11, 2022, Apr 8, 2022, May 13, 2022, Jun 10, 2022, Aug 12, 2022, Sep 9, 2022, Oct 14, 2022, Nov 10, 2022, Dec 9, 2022, Jan 13, 2023, Feb 10, 2023, Mar 10, 2023, Apr 14, 2023, and May 12, 2023 UIHAB minutes will be approved at a later UIHAB meeting.

Medicaid Eligibility Policy:

Michelle Smith gave an update on PHE Unwinding- Ended: May 11, 2023

<https://jobs.utah.gov/mycase-app/ui/home>

<https://medicaid.utah.gov/unwinding/>

Medicaid & CHIP State Plan Amendments (SPA) & Rules:

Craig Devashrayee gave an update.

The documents which were presented are embedded in this document.



SPA MATRIX
6-9-23-1.pdf



UIHAB MATRIX
6-9-23.pdf

Dental SPA:

Jennifer Wiser gave an update.

The documents which were presented are embedded in this document.



SB19_ Adult Dental
Public Hearing Overvi



SB19 Adult Dental
Amendment FINALpd

DWS Medicaid Eligibility:

Jessica Ware gave an update on DWS Medicaid Eligibility Unwinding. Paul Birkbeck gave update on SNAP.

Ozzy Escarate:

Ozzy Escarate gave an update in the Office of AI/AN Health Affairs

Data Reporting:

Alex Merrill gave an update on data reporting.



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DHHS OAIANHFS Program Updates:

Kassie John gave an update on Health Equity.

kassiejohn@utah.gov



IHFS Health Equity
Updates _ UIHAB June

Hilary Makris gave an update on Opioids and Tobacco.

hmakris@utah.gov

Jamie Harvie:

Jamie Harvie gave an update on ICWA.

Medicaid 1115 Demonstration Amendments:

Laura Belgique discussed Medicaid 1115 Demonstration Amendment.

The documents which were presented are embedded in this document.



SB 133_ Family



SB 133 Family



SB269 Chronic



SB269_ Chronic

Planning Public Hearir Planning Services Am Conditions Support P Conditions Support A

Motion:

The Utah Indian Health Advisory Board made the motion to support these amendments.

Representatives: SKBG, UNHS, PITU, and Ute Mtn Ute Tribe.

Project Firstline Outreach:

Justin Morales gave an update.

The document which was presented is embedded in this document.



UIHAB Presentation
Project Firstline.pdf

AUCH Presentation:

Melissa Zito gave an update.

The documents which were presented are embedded in this document.



AUCH Affiliate
Handbook 2023-24.pdf



UIHAB Ex Summary
AUCH.pdf

I/T/U Updates:

Ed Napia: Skull Valley Band of Goshute

Tyler Goddard: Paiute Indian Tribe of Utah

Hunter Timbimboo: Northwestern Band of Shoshone Nation

Mike Jensen: Utah Navajo Health Systems

Thomas Stephenson: Ute Mountain Ute Tribe

Selwyn Whiteskunk: Ute Mountain Ute Tribe

Hope Johnson: PHX, IHS

Adjourn:

The meeting ended at 10:50. Tyler Goddard made that motion to adjourn the meeting. Hunter Timbimboo seconded that motion. The next meeting: August 11, 2023 @ 8:30 a.m. (Hybrid)