

Premium Reimbursement Programs

06/2024

What options are there for Medicaid Recipients?

- Adult Expansion Medicaid with Employer Sponsored Insurance (AEM with ESI)
 - Utah's Premium Partnership (UPP)
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AEM with ESI Requirements

- Must be eligible for the Adult Expansion Medicaid Program
- Meet citizenship requirements
- Meet Utah residency requirements
- Be between the age of 19 and 64
- Be at or below 133% federal poverty limit
- No asset test
- Meet minimum essential coverage (if children under age 19 are in the home)
- Must enroll if found to be a qualified health plan (QHP) (or remain enrolled in their current QHP)
 - Deductible less than \$4000
 - Covers physician visits, inpatient and outpatient hospital care, prescription drug coverage, laboratory services, preventative and wellness services, pregnancy and childbirth.
 - Employer pays 50% of premiums
 - Does not cover abortion or matches the Hyde Amendment
 - Plan pays at least 70% of an in network inpatient stay
 - Lifetime maximum is \$1,000,000 or more
- Can reimburse the employee or the employee and spouse premium (must be on AEM)

UPP Requirements

- Not eligible for Medicaid
- Meet citizenship requirements
- Meet Utah residency requirements
- Be between the age of 0 to 64
- Does not have or have access to Medicare or Veterans medical benefits
- Plan must be considered a qualified health plan
 - Deductible less than \$4000
 - Covers physician visits, inpatient and outpatient hospital care, prescription drug coverage, laboratory services, preventative and wellness services, pregnancy and childbirth.
 - Employer pays 50% of premiums
 - Does not cover abortion or matches the Hyde Amendment
 - Plan pays at least 70% of an in network inpatient stay
 - Lifetime maximum is \$1,000,000 or more
 - Is COBRA or not already enrolled
 - The employee only premium must be more than 5% of the countable income for the policyholder to be eligible
- Reimburse up to \$300 for each adult and \$180 for each child

Hyde Amendment- Covers abortion services in the case where life of the mother would be endangered if the fetus were carried to term or in the case of incest or rape.

AEM with ESI - Exemptions

- Verified American Indian or Alaska Natives.
- Individuals who are already enrolled in any other type of health insurance that is not their employer-sponsored health plan.

- Optional to enroll:
- Verified American Indian or Alaska Natives
- The spouse who is eligible for Adult Expansion but only has access to enroll as a dependent in their spouse's Qualified Health Plan (QHP).

AEM with ESI - Disenrollment

- Individuals who fail to meet the ESI enrollment requirements may lose eligibility for Adult Expansion Medicaid and will no longer receive an ESI reimbursement.
- The ineligibility period is up to 12 months and begins the month following the closure of Adult Expansion.
- Reasons an individual will lose Adult Expansion Medicaid coverage:
- The ESI premium reimbursement if voluntarily terminated their qualified employer-sponsored health plan.
- Refuse to enroll in their qualified employer-sponsored health plan or failed to verify their enrollment.

Exemptions & Disenrollment

AEM with ESI Process

1. Member is approved for Adult Expansion Medicaid
 2. Member has access to or is enrolled in health insurance through their employer
 3. DWS caseworker sends form 116M to confirm if available insurance is a QHP
 4. DWS caseworker sends notice to enroll in available health insurance if there is a QHP available and not already enrolled
 5. Once enrollment and plan are confirmed reimbursement will begin
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UPP Process

1. Member is not eligible for Medicaid
 2. Member has access to health insurance through their employer
 3. DWS caseworker verifies eligibility and sends form 116 to confirm if available insurance is a QHP
 4. DWS caseworker sends notice to enroll in available health insurance
 5. Once enrollment is confirmed reimbursement will begin
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Payments

- Reimbursements begin the month the member is found eligible or the month the member enrolls in the eligible insurance plan.
- Reimbursements are sent by check for the upcoming month as soon as the member is confirmed eligible.

AEM with ESI

- Email: ESI@Utah.Gov
- Phone: 801-538-6509
- Fax: 801-536-0467

UPP

- UPP@Utah.Gov
- Phone: 801-538-6509
- Fax: 801-536-0940

Contact Information

Resources

- [Adult Expansion Resources](#)
- [UPP Resources](#)
- [UPP Brochure](#)
- [Form 116M](#)
- [Medicaid Policy Section 348-3
Adult Expansion](#)
- [UPP Policy Section 1000](#)

Questions ?
Thank you!