

DMHF SPA Matrix 3-21-24

SPA Summary	Public Notice Date	Proposed Effective Date	Target Date or Date Submitted to CMS	CMS Approval Date	CMS Approved Effective Date	MCAC Present Date
<p>UT-24-0007 Suspension of Medicaid Pharmacy Copayments; This amendment waives pharmacy copayments due to a cybersecurity threat to the pharmacy vendor whose prescriptions are paid directly by Medicaid. It specifies that for prescriptions dispensed during the 2024 Change Healthcare Network Interruption, member pharmacy cost sharing requirements are waived through full system restoration.</p>	3-17-24	3-18-24	3-20-24			3-21-24



Medicaid Premiums and Cost Sharing

State Name:

OMB Control Number: 0938-1148

Transmittal Number: UT - 24 - 0007

Cost Sharing Amounts - Categorically Needy Individuals G2a

1916
1916A
42 CFR 447.52 through 54

The state charges cost sharing to all categorically needy (Mandatory Coverage and Options for Coverage) individuals.

Services or Items with the Same Cost Sharing Amount for All Incomes

Add	Service or Item	Amount	Dollars or Percentage	Unit	Explanation	Remove
Add	Non-Emergency Services Received in Emergency Departments.	8.00	\$	Encounter	\$8 for each non-emergency use of the emergency department.	Remove
Add	Inpatient Hospital Stay	75.00	\$	Entire Stay	Effective July 1, 2017, \$75 for each inpatient hospital stay (episode of care).	Remove
Add	Physician or Podiatrist Services	4.00	\$	Encounter	\$4 for each outpatient services visit (physician visit, podiatry visit, physical therapy, etc.).	Remove
Add	Outpatient Hospital Services	4.00	\$	Encounter	\$4 for each outpatient hospital service visit, (maximum of one per person, per hospital, per date of service).	Remove
Add	Pharmacy Services	4.00	\$	Prescription	\$4 for each prescription. For prescriptions dispensed during the 2024 Change Healthcare Network Interruption, member pharmacy cost sharing requirements are waived through full system restoration.	Remove
Add	Chiropractic Services	1.00	\$	Encounter	\$1 for each chiropractic visit (maximum of one per date of service).	Remove
Add	Vision Services	3.00	\$	Encounter	\$3 for each pair of eyeglasses.	Remove

Services or Items with Cost Sharing Amounts that Vary by Income

Service or Item:

Indicate the income ranges by which the cost sharing amount for this service or item varies.

Add	Incomes Greater than	Incomes Less than or Equal to	Amount	Dollars or Percentage	Unit	Explanation	Remove
Add							Remove



Medicaid Premiums and Cost Sharing

Cost Sharing for Non-preferred Drugs Charged to Otherwise Exempt Individuals

If the state charges cost sharing for non-preferred drugs (entered above), answer the following question:

The state charges cost sharing for non-preferred drugs to otherwise exempt individuals.

No

Cost Sharing for Non-emergency Services Provided in the Hospital Emergency Department Charged to Otherwise Exempt Individuals

If the state charges cost sharing for non-emergency services provided in the hospital emergency department (entered above), answer the following question:

The state charges cost sharing for non-emergency services provided in the hospital emergency department to otherwise exempt individuals.

Yes

The cost sharing charges for non-emergency services provided in the hospital emergency department imposed on otherwise exempt individuals are the same as the charges imposed on non-exempt individuals.

Yes

PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

V.20181119