### UTAH MEDICAID FACTS

**Who is covered in Utah’s Medicaid Program?**

#### ELIGIBILITY GROUPS

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<td><strong>Parents and Other Caretaker Relatives</strong></td>
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#### Important News

**March 2016** - Utah Governor Gary Herbert authorizes a bill that offers a limited version of Medicaid expansion. The legislation “targets those in extreme poverty,” offering Medicaid coverage for 12 months to people who are homeless, mentally ill, in need of treatment for substance use, or recently released from incarceration.

**February 2017** - After the 12-month program, the Utah Department of Health implemented a new limited Medicaid expansion for 3,000-5,000 low-income Utah parents. This was done by increasing the income eligibility level from 45 percent of the federal poverty level (FPL) to 60 percent of the FPL. Low-income populations, including people who are homeless, those in need of substance use and mental health services, and individuals involved in the criminal justice system remain in a coverage gap.

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#### Do Medicaid health plans provide coverage?*

- **YES**
- **NO**

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#### How has Utah’s Medicaid program engaged in Managed Care?

**SECTION 1115 WAIVERS**

The Utah **primary care network** was created to expand Medicaid eligibility to specific able-bodied adults, including the medically needy, parents/caretakers or non-childless adults up to 95% of the federal poverty level (FPL), high-risk pregnant women otherwise ineligible for Medicaid, and working adults and their children up to 200% of the FPL. It also increases services for CHIP-eligible children. The limited expansion for adults 19-64 years of age included a package of preventive and primary care services, including dental services for adults with disabilities. An amendment was submitted on 08/16/17 to implement a 25,000 person-enrollment limit for the **Adults without Dependent Children** group, a 60-month lifetime limit on the number of months that an enrollee can be eligible to receive PCN or Medicaid in the **Adults without Dependent Children** group, and work requirements for all beneficiaries receiving PCN (with the possibility of including Adults without Dependent Children in the future). This amendment also requested to increase copays for non-emergent use of the Emergency Department, remove presumptive eligibility, and allow the State to change eligibility criteria for groups through state administrative rule rather than waiver amendments. As of March 2018, the amendment was still pending.

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**APPROVAL:** 2/8/2012  
**EFFECTIVE:** 7/1/2002  
**EXPIRATION:** 6/30/2022

**Status:** Extension request pending approval
How is Utah meeting the needs of Medicaid enrollees?

Women's Health
The Medicaid cancer program provides full Medicaid benefits to uninsured individuals under age 65 who have been screened for breast or cervical cancer and were found to require treatment for either breast or cervical cancer, including pre-cancerous conditions and early-stage cancer.11

**Health Choice Utah** provides routine health screening for adult women, including:12
- Yearly mammogram
- Pap smears
- Colonoscopies
- Chlamydia
- Bone density

**Healthy U** covers prenatal care for pregnant women and offers the **U Baby Care program**, which includes the following services:13
- Information about being pregnant and giving birth
- Prenatal classes and services
- Smoking cessation
- Nutrition
- Home services

For non-pregnant women, **Healthy U** covers cervical screening (pap tests), gynecological exams, and mammograms.

**Molina Healthcare of Utah** offers incentives for pregnant members for healthy behaviors, including:14
- Up to $60 in incentives for receiving prenatal care
- $40 in incentives for postpartum care
- $80 in incentives baby's well-child visit and completion of immunizations

Other services offered for women under **Molina** include care managers for high-risk pregnancies, cervical screening (pap tests), and mammograms.15

**SelectHealth** covers preventive care services for pregnant women, including tests to detect gestational anemia and diabetes.16

Family Planning10
Covered services for family planning include condoms, contraceptives, implants, creams, Depo-Provera, diaphragms, foams, intrauterine devices (IUD), morning-after pills, patches, pills, rings, and sterilization.

Mental Health & Substance Use Disorder
Behavioral health services covered under Utah's Medicaid program include:17
- Case management services
- Evaluations
- Individual and group therapy
- Inpatient mental health services
- Medication management
- Personal services
- Psycho-educational services
- Psychosocial rehabilitation services
- Psychological testing
- Respite care
- Transportation to mental health appointments
- Covered drug therapies: methadone, naltrexone, naltrexone, acamprosate, and disulfiram18

Oral Health19
Oral health coverage is available for Utah Medicaid enrollees who are pregnant, disabled, or blind, or who qualify for Child Health Evaluation and Care (CHEC). The covered benefits include:
- Examinations
- Cleanings every six months
- Fluoride treatment
- Dental sealants on permanent molars
- X-rays every six months
- Silver fillings
- Root canals on most teeth
- Silver crowns
- Removal of pulp for infected baby teeth
- Pulling teeth
- Dentures
- Space maintainers
- Some orthodontic care
- Emergency exams
- Some specialty care in surgical centers
Timeline

Federal

1965
President Johnson signs Social Security Amendments of 1965, creating Medicaid as public health program for the poor.

Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services are a requirement for children enrolled in Medicaid.

Supplemental Security Income (SSI) program becomes Medicaid eligibility category for the elderly and persons with disabilities.

1966
Utah adopts the Medicaid program.\(^{20}\)

1967

Home and Community-Based Services (HCBS) waivers created for Long-Term Care (LTC) and Disproportional Share Hospital (DSH) payments.

1972
Children and pregnant women become mandatory Medicaid eligibility groups.

1981
Children up to age 6 and pregnant women up to 133 percent of the federal poverty level (FPL) become eligible; EPSDT benefit expanded.

Mandatory eligibility extended to children ages 6 to 18 years in families up to 100 percent FPL; eligibility phased in from 1990 through 2002.

1984
Balanced Budget Act of 1997 allows Medicaid to be delivered through managed care organizations; State Children’s Health Insurance Program (CHIP) created; states now have option to provide coverage for uninsured children in low-income families above FPL.

Olmstead decision allows expanded HCBS coverage for persons with disabilities.

1989

1990

1997

1999

2001

Utah creates the Healthy Outcomes Medical Excellence (HOME) program, a small program that provides acute, primary, personal care services, and behavioral health services to individuals with developmental disabilities using a medical home model of care.\(^{21}\)

Utah transforms the HOME program into a risk-based, capitated managed care organization (MCO) program.\(^{21}\)

In response to a statute that required the state Medicaid agency to incorporate risk-based MCOs, state-defined Medicaid Accountable Care Organizations are created, that have been described as expanded MCOs. Many prefer to refer to this as value-based payment reform and not an ACO program.\(^{22}\)

The State begins requiring pregnant women and children to enroll in one of two state prepaid ambulatory health plans for dental care.\(^{23}\)

Apnea monitors are carved out for all MCOs.\(^{23}\)

Affordable Care Act (ACA) expands Medicaid eligibility to adults with incomes up to 138 percent FPL.

2010


ACA implementation begins.

32 states and the District of Columbia (DC) have expanded Medicaid since passage of the ACA.

2011

2012

2013

2014

2016

For a complete list of sources, please contact the Institute for Medicaid Innovation at info@MedicaidInnovation.org

www.MedicaidInnovation.org

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