



**HB 67 Report on Implementation Report of Federal Health  
Reform Legislation to the Business and Labor Interim  
Committee, the Health Reform Taskforce and the Executive  
Appropriations Subcommittee**

The following report is prepared by the Utah Department of Health (UDOH) in compliance with HB 67. Included in this report are actions taken the Department since March as a result of the passage of Patient Protection and Affordable Care Act (PPACA).

**Public Health Grant Opportunities**

Title IV of the Patient Protection and Affordable Care Act focuses on preventing chronic disease and improving the public's health. The following grants were authorized by the PPACA and have been announced by the US Department of Health and Human Services. The list indicates which grant applications have been approved by the Governor's Office and EAC to be submitted or are pending those approvals.

- The Maternal, Infant, and Early Childhood Home Visiting Program provides funding nursing home visits to at risk families. These programs have proven to reduce infant and maternal mortality by improving prenatal, maternal and newborn health; child health and development; parenting skills; school readiness; juvenile delinquency; and economic self-sufficiency. (Approved by EAC – 8/17)
- The Epidemiology and Laboratory Capacity Grant Program is designed to strengthen the ability of state and local health departments to identify and monitor infectious diseases, enhance public health laboratory practice and improve information systems. (Pending EAC Approval)
- The Personal Responsibility Education Program provides grants to states for programs to educate adolescents on both abstinence and contraception for prevention of teenage pregnancy and sexually transmitted infections, including HIV/AIDS. (Pending EAC Approval)
- State Supplemental Funding for Healthy Communities, Tobacco Prevention and Control, Diabetes Prevention and Control, and Behavioral Risk Factor Surveillance System provides additional funding for additional Quit-Line services and an evaluation of current services offered by the Quit-Line. (Pending EAC Approval)
- Title V State Abstinence Education Grant Program provides funding for subgrantees to support community projects that provide abstinence education or motivation programs to youth ages 10-19 (Pending Approval)
- Strengthening Public Health Infrastructure for Improved Health Outcomes Project provides funding to improve the performance management capacity of Utah's public health system in the areas of health promotion and disease prevention, public health policy, and law, health information technology, communications infrastructure and workforce development. (Approved by EAC - August 17)

- Nationwide Program for National and State Background Checks for Direct Patient Access Employees of Long Term Care Facilities and Providers grant opportunity offers funding to identify efficient, effective and economical procedures for long term care facilities and providers to conduct background checks for all direct patient access employees. (Pending EAC Approval)

#### **Medicaid Provisions 2010 Implementation**

The following provisions of the PPACA require states to implement the following Medicaid state plan changes.

- Increase the Medicaid drug rebate percentage for brand name drugs to 23.1% (except the rebate for clotting factors and drugs approved exclusively for pediatric use increases to 17.1%); increase the Medicaid rebate for non-innovator, multiple source drugs to 13% of average manufacturer price. Additionally, the Department is looking for ways to extend the drug rebate to Medicaid managed care plans by incorporating prescription management into upcoming contracts.
- Begin concurrent Medicaid coverage of hospice care and of curative treatment for children with a terminal illness. Section 2302 of the PPAC now mandates that each state's Medicaid program cover both services. Previously, a child's family had to elect either hospice care or curative treatment. CMS soon will be supplying states with the language needed for inclusion in the State Plan. Once CMS provides this information, then the Department will need to submit the State Plan Amendment.
- Begin Medicaid coverage of freestanding birth centers as a mandatory Medicaid provider. Section 2301 of the PPAC mandates that state Medicaid programs cover services performed in freestanding birth centers. CMS soon will be supplying states with the language needed for inclusion in the State Plan. Once CMS provides this information, then the Department will need to submit the State Plan Amendment.
- Apply for the Money Follows the Person planning grant and demonstration grant. The grant money will provide additional federal funds for Utah Medicaid to provide for community-based care for Medicaid clients electing to leave a nursing facility and return to living in the community.