



# INTENT LANGUAGE AND NONLAPSING BALANCES FOLLOW-UP (HEALTH)

SOCIAL SERVICES APPROPRIATIONS SUBCOMMITTEE  
STAFF: RUSSELL FRANSEN

ISSUE BRIEF

## **SUMMARY**

The objective of this issue brief is to determine if the Department of Health complied with the 39 intent language statements adopted by the Legislature during the 2015 General Session and 15 intent language statements from the 2014 General Session that had impacts through June 30, 2015. This issue brief provides a follow up to each of the pieces of intent language passed. The Analyst has no concerns of non-compliance. Additionally, the purpose of this issue brief is to inform the Social Services Appropriations Subcommittee of \$16,003,200 in nonlapsing balances at the end of FY 2015 for the Department of Health. This brief is for informational purposes only and requires no Legislative action.

## **DISCUSSION AND ANALYSIS**

### ***Intent Language Overview***

The Analyst has no concerns of non-compliance with any intent language issued last year. The following is a list of 39 legislative intent statements from the 2015 General Session with the Department of Health's response or comments by the Analyst. Intent language may be adopted by the Legislature to explain or place conditions on the use of funds. Intent language is binding for one year and may not contradict or change statutory language. Follow up to intent language related to ARRA (federal stimulus) funding can be found in the Issue Brief entitled "*ARRA Funds Approval.*" The Subcommittee may want to direct the agency to take further action on the information presented in the reports requested by the Legislature.

### ***Overview of Intent Language From the 2015 General Session***

There are 39 intent language statements reviewed below. These 39 statements can be grouped into the following three categories:

1. Providing nonlapsing authority of more than \$8.4 million in FY 2016 from FY 2015 funds (18 intent language statements). Three intent language statements provided unlimited nonlapsing authority. The table below details the \$7.7 million retained under nonlapsing authority provided. The Department of Health has \$6.3 million in nonlapsing funds from the intent language statements with specific maximums.
2. Providing specific direction (six intent language statements)
3. Requiring a report (fifteen intent language statements)
  - a. Ten of these reports are for performance measures

Agency-initiated requests for nonlapsing authority for General Fund resulted in 1.7% of General Fund appropriated in FY 2015 being retained as nonlapsing funds for those divisions with initiatives for nonlapsing authority. The second table below has a summary of this information. Some of the nonlapsing requests listed above were to retain funds other than General Fund or were not initiated by the Department of Health.

Nonlapsing Authority Via Intent Language		
Purpose	Authorized Total	Actual Nonlapsing
Medicaid Management Information System Replacement	\$3,500,000	\$3,500,000
Medicaid Telehealth Equipment	\$1,000,000	\$1,000,000
Medicaid Sanctions	all	\$982,900
Federally Mandated Projects (Medicaid)	\$475,000	\$475,000
Executive Director - Four Projects	\$375,000	\$375,000
Childcare and Health Care - Fines	all	\$256,800
Health Facility Licensure	\$245,000	\$245,000
Emergency Medical Services - Fees	\$250,000	\$244,800
Facility Plan Review Activities	\$210,000	\$201,700
Laboratory Equipment (Epidemiology)	\$175,000	\$175,000
Emergency Medical Services - Fines	all	\$144,800
Traumatic Brain Injury Funding	\$625,000	\$52,400
Laboratory Equipment and Medical Examiner	\$525,000	\$26,900
Bleeding Disorders Program	\$50,000	\$15,300
Newborn Screening	\$250,000	\$0
Computer Equipment (Executive)	\$225,000	\$0
Drug Prevention Programs	\$500,000	\$0
<b>Total</b>	<b>\$ 8,405,000</b>	<b>\$ 7,695,600</b>

Summary of Agency-initiated Requests			
Line Item	FY 2015 Appropriated General Fund	Nonlapsed General Fund	%
Medicaid and Health Financing	\$ 5,884,100	\$ 1,475,000	25%
Family Health and Preparedness	\$ 19,884,000	\$ 15,300	0%
Disease Control and Prevention	\$ 12,627,700	\$ 201,900	2%
Executive Director's Operations	\$ 6,145,700	\$ 375,000	6%
Medicaid Mandatory Services	\$ 288,513,100	\$ 3,500,000	1%
<b>Total</b>	<b>\$ 333,054,600</b>	<b>\$ 5,567,200</b>	<b>1.7%</b>

**Nonlapsing Authority Via Intent Language From the 2015 General Session**

**1. Nonlapsing Authority for Computer Equipment in the Executive Director's Office (H.B. 3, Item 75):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that appropriations provided for the Department of Health's Executive Director's Office in Item 20 of Chapter 13, Laws of Utah 2014 shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to \$225,000 for computer equipment, information technology hosting and storage costs, software development, and employee training. (The agency nonlapsed \$0).*

**Agency Response: "No funds were lapsed."**

**2. Nonlapsing Authority for Four Projects in the Executive Director's Office (H.B. 3, Item 75):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that appropriations provided for the Department of Health's Executive Director's Office in Item 20 of Chapter 13,*

*Laws of Utah 2014 shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to \$375,000 for: (1) federal indirect reimbursement of \$150,000 due to an over-collection of Department of Technology Services encryption costs during FY 2015. The federal reimbursement will be reflected in lower indirect rates for Fiscal Year 2016; (2) Rewrite of the Utah Medical Examiners Database and the Electronic Death Entry Network which do not support mobile device and broad Internet interfaces; (3) Replacement of personal computers, software development, and information technology equipment in Executive Directors Office; and (4) Temporary Information Technology Manager to support server consolidation efforts and implementation of the Change Management initiative. (The agency nonlapsed \$375,000).*

**Agency Response:** “The division anticipates the non lapsing funds will be expensed as follows;

**\$150,000 - In Jan 2015 DTS posted over-charge cost rebate of \$304,900 in Appropriation unit LAF. This will also create a reduction of Federal Reimbursement Indirect Collections in FY16 of about \$152,400. Federal cost reimbursement lags actual cost by one year. The non lapsing funds are needed to offset the FY16 revenue reduction.**

**\$80,000 LAF to hire a temporary IT manager to support the DOH server consolidation project and implementation of a software Change Management Setup initiative. This process is to ensure all new Software and changes in existing software systems are compliant with security requirements. Long term savings are anticipated from server consolidation as well as more security.**

**\$60,000 LAF to replace and update IT servers and equipment in the DOH server consolidation project. Also software upgrades to meet IT security requirement. LAF Unit 1231 provided DTS services to all DOH programs.**

**\$35,000 LAA & LAF to replace and upgrade IT equipment in Program Operations and further development and expansion of Share-Point management system though out the department. LAF provides financial services to all DOH Programs**

**\$50,000 Center for Health Data to rewrite the database in the Office of Medical Examiners which provides vital epidemiology information on disease and cause of death. Rewrite of Electronic Death Entry Network which does not support mobile devices and broad internet interfaces. Also replacement of personal computers and IT equipment.”**

### **3. Nonlapsing Authority for Health Facility Licensure and Certification Activities (H.B. 3, Item 76):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$245,000 of Item 21 of Chapter 13, Laws of Utah 2014 for the Department of Health's Family Health and Preparedness line item not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to health facility licensure and certification activities. (The agency nonlapsed \$245,000).*

**Agency Response:** “This non lapsing authority allows for more [continuous] funding from an uneven funding source. The intent of the Division and Bureau is to use these funds for positions that are sorely needed to comply with federal licensure and certification survey mandates which affect health facilities.”

### **4. Nonlapsing Authority for Testing Supplies and Processes for Emergency Medical Services (H.B. 3, Item 76):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$250,000 of Item 21 of Chapter 13, Laws of Utah 2014 for the Department of Health's Emergency Medical Services shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is*

*limited to testing, certifications, background screenings, replacement testing equipment and testing supplies. (The agency nonlapsed \$244,800).*

**Agency Response:** “Nonlapsing authority allows for an improved continuous funding from an irregular funding source. The Bureau intends to use these balances as prescribed in the Emergency Medical Services program to further the efforts of Emergency Medical Services. The funds are used for EMS certification, background screenings, and on-going training in a four-year certification cycle for all EMS certified personnel.”

**5. Nonlapsing Authority for Criminal Fine and Forfeiture Money for Emergency Medical Services (H.B. 3, Item 76):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that criminal fines and forfeiture money collected for the Department of Health's Emergency Medical Services in Item 21 of Chapter 13, Laws of Utah 2014 shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to purposes outlined in Section 26-8a-207(2). (The agency nonlapsed \$144,800).*

**Agency Response:** “Nonlapsing authority allows for funding in accordance with Section 26-8a-207(2). The Bureau intends to use these balances as prescribed in the Section. The funds are used for staff support, administration of the grants funds, other administrative costs defined in the chapter, trauma system development, and allocations in per-capita and competitive grants for the provision of emergency medical services.”

**6. Nonlapsing Authority for Civil Penalty Money from Childcare and Health Care Provider Violations (H.B. 3, Item 76):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that civil money penalties collected for the Department of Health's Child Care Licensing and Health Care Licensing in Item 21 of Chapter 13, Laws of Utah 2014 from childcare and health care provider violations shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to trainings for providers and staff, as well as upgrades to the Child Care Licensing database. (The agency nonlapsed \$256,800).*

**Agency Response:** “Health care civil money penalty funds from nursing facilities are restricted by federal law for use with projects that directly affect patients of nursing facilities. Other licensure civil money penalty funds may be used for training and other projects that benefit health facility providers. All other civil money penalty funds are to be used for training staff, updates and/or enhancements to the Child Care Licensing database.”

**7. Nonlapsing Authority for Bureau of Health Facility Licensure, Certification and Resident Assessment for Plan Reviews (H.B. 3, Item 76):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$210,000 of Item 21 of Chapter 13, Laws of Utah 2014 from fees collected for the purpose of plan reviews by the Department of Health's Bureau of Health Facility Licensure, Certification and Resident Assessment shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to plan review activities. (The agency nonlapsed \$201,700).*

**Agency Response:** “This non lapsing authority allows for more continuous funding from an uneven funding source. The nonlapsing funds for Health Facility Licensing/Certification will be used for evaluating health care facility new construction and remodel projects in order to ensure compliance with appropriate building and fire codes in accordance with [state] health facility construction rules. The funds will be used for salaries for architects and inspection staff to complete construction inspections.”

**8. Nonlapsing Authority for People with Bleeding Disorders (H.B. 3, Item 76):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$50,000 of Item 21 of Chapter 13, Laws of Utah 2014, funds appropriated for the Department of Health's Assistance for People with Bleeding Disorders Program shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to services to eligible clients. (The agency nonlapsed \$15,300).*

**Agency Response: "Funds will be incorporated in the distribution of funds for eligible bleeding disorder clients."**

**9. Nonlapsing Authority for Equipment and Services for the Bureau of Epidemiology (H.B. 3, Item 77):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$175,000 of Item 22 of Chapter 13, Laws of Utah 2014 for the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to maintenance or replacement of computer equipment, software, or other purchases or services that improve or expand the services provided by the Bureau of Epidemiology. (The agency nonlapsed \$175,000).*

**Agency Response: "\$175,000 was nonlapsed and will be used to develop and replace software to improve disease tracking and surveillance reporting."**

**10. Nonlapsing Authority for Equipment for Newborn Screening (H.B. 3, Item 77):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$250,000 of Item 21 of Chapter 13, Laws of Utah 2014 fees collected for the Newborn Screening Program shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to maintenance, upgrading, replacement, or purchase of laboratory or computer equipment and software. (The agency nonlapsed \$0).*

**Agency Response: "No funds were lapsed."**

**11. Nonlapsing Authority for Laboratory Equipment and Building Improvements (H.B. 3, Item 77):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$525,000 of Item 22 of Chapter 13, Laws of Utah 2014 for the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to laboratory equipment, computer equipment, software, and building improvements. (The agency nonlapsed \$26,900).*

**Agency Response: "\$26,900 was nonlapsed and will be used to replace obsolete laboratory instruments and for recalibrations of testing equipment."**

**12. Nonlapsing Authority for Drug Prevention Programs (H.B. 3, Item 77):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$500,000 of Item 22 of Chapter 13, Laws of Utah 2014, for the Department of Health's Disease Control and Prevention line item for alcohol, tobacco, and other drug prevention reduction, cessation, and control programs shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to alcohol, tobacco, and other drug prevention, reduction, cessation, and control programs or for emergent disease control and prevention needs. (The agency nonlapsed \$0).*

**Agency Response: "No funds were nonlapsed."**

**13. Nonlapsing Authority for Computer Equipment and to Comply With Federally-mandated Projects in Health Care Financing (H.B. 3, Item 78):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$475,000 provided for the Department of Health's Medicaid and Health Financing line item in Item 24 of Chapter 13, Laws of Utah 2014 shall not lapse at the close of Fiscal Year 2015. The use of nonlapsing funds is limited to compliance with federally mandated projects and the purchase of computer equipment and software. (The agency nonlapsed \$475,000).*

**Agency Response: "These funds support the implementation costs of several federally mandated projects in FY 2016 and computer/software purchases. \$425,000 will be used as match on the ICD10 – project to update diagnosis codes, 5010 – HIPAA compliance project, HIT – Health Information Technology to convert provider medical records to an electronic health record, and TMSIS – project to create federal reporting. The nonlapsing general funds will be used for federal match to cover expenses such as personnel, current expense and data processing current expense of the various projects. \$50,000 will be expended to replace computer equipment and software."**

**14. Nonlapsing Authority for Telehealth Equipment in Health Care Financing (H.B. 3, Item 78):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$1,000,000 provided for the Department of Health's Medicaid and Health Financing line item in Item 70 of Chapter 282, Laws of Utah 2014 shall not lapse at the close of Fiscal Year 2015. The use of nonlapsing funds is limited to the purchase of telehealth equipment. (The agency nonlapsed \$1,000,000).*

**Agency Response: "These non-lapsing funds will be used to provide technical assistance and equipment through the Utah Telehealth Network to entities with approved requests."**

**15. Nonlapsing Authority for Medicaid Management Information System Replacement (H.B. 3, Item 81):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$3,500,000 provided for the Department of Health's Medicaid Management Information System Replacement in Item 72 of Chapter 282, Laws of Utah 2014 shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to the redesign and replacement of the Medicaid Management Information System. (The agency nonlapsed \$3,500,000).*

**Agency Response: "These non-lapsing funds will be used to address a portion of the PRISM system project costs in FY 2016."**

**16. Nonlapsing Authority for Medicaid Sanctions (H.B. 3, Item 79):**

*Under Section 63J-1-603 of the Utah Code, funds collected as a result of sanctions imposed under Section 1919 of Title XIX of the Federal Social Security Act and authorized in Section 26-18-3 of the Utah Code shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is limited to the purposes outlined in Section 1919. (The agency nonlapsed \$982,900).*

**Agency Response: "The Denver Regional Office component of the Western Division of Survey & Certification (WDCS), as delegated by both CMS Central Office Leadership and the WDCS Associate Regional Administrator, must approve the Utah Department of Health, Bureau of Health Facility Licensing to utilize federal Civil Money Penalties (CMPs) for specific projects. No projects or plans are in place to use this funding at this time."**

**17. Nonlapsing Authority for Program to Serve Children With Complex Medical Conditions (S.B. 3, Item 124)**

*Under Section 63J-1-603 of the Utah Code the Legislature intends that up to \$3,216,000 of the appropriations provided for the Medicaid Optional Services line item not lapse at the close of Fiscal Year 2016. The use of any nonlapsing funds is limited to a pilot program for assistance*

*for children with disabilities and complex medical conditions to be used in similar amounts over three years with the goal of serving a similar number of clients over three years.*

**Agency Response: "These non-lapsing funds will be used to fund the pilot program for assistance for children with disabilities and complex medical conditions in FY 2017 and FY 2018."**

**18. Nonlapsing Authority to Automate and Improve Adoption Records Access (S.B. 77, Lines 546 to 550)**

*The Legislature intends that appropriations provided under this section be used by the office for the purposes described in Subsection 78B-6-144.5(2). Under Section 63J-1-603, the Legislature intends that appropriations provided under this section not lapse at the close of fiscal year 2016. The use of any nonlapsing funds is limited to the purposes described in Subsection 78B-6-144.5(2).*

**Agency Response: "These non-lapsing funds will be used to fund development and maintenance of the Adoption Registry Database and for public education and social media outreach."**

**19. Conditional Funding for Traumatic Brain Injury Fund (S.B. 3, Items 15, 16, and 197):**

*Under Section 63J-1-181 603 of the Utah Code the Legislature intends that up to \$550,000 funds of Item 24 of Chapter 13, Laws of Utah 2014, not otherwise designated as nonlapsing to the Department of Health - Medicaid and Health Financing line item shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is for services to people with traumatic brain injury. (The agency nonlapsed \$52,400).*

*The Legislature intends that the \$550,000 in Beginning Nonlapsing provided to the Traumatic Brain Injury Fund is dependent upon up to \$550,000 funds not otherwise designated as nonlapsing to the Department of Health - Medicaid and Health Financing line item being retained as nonlapsing in FY 2015.*

*Under Section 63J-1-603 of the Utah Code the Legislature intends that up to \$75,000 funds of Item 22 of Chapter 13, Laws of Utah 2014, not otherwise designated as nonlapsing to the Department of Health - Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2015. The use of any nonlapsing funds is for services to people with traumatic brain injury. (The agency nonlapsed \$0).*

*The Legislature intends that the \$75,000 in Beginning Nonlapsing provided to the Traumatic Brain Injury Fund is dependent upon up to \$75,000 funds not otherwise designated as nonlapsing to the Department of Health - Disease Control and Prevention line item being retained as nonlapsing in FY 2015.*

**Agency Response: "The nonlapsed funds of \$52,400 will be used to provide professional intake assessments, and physical, speech, or occupational therapy services to people with traumatic brain injuries. The goal is to facilitate them returning to school or work or improving their personal functionality."**

**20. Conditional TANF Funding for Nurse Family Partnership (S.B. 3, Item 113):**

*The \$1,000,000 in federal funds appropriated for the Nurse Family Partnership in the Department of Health in the Family Health and Preparedness line item is dependent upon the availability of and qualification for the Nurse Family Partnership for Temporary Assistance for Needy Families federal funds.*

**Agency Response: "Home visitation has budgeted to deliver home visitation services with clients across the state including local health departments. These programs will and have provided life skill development to improve economic stability, child health by developing healthy relationships"**

**and support systems. These programs focus on pregnant, high risk first time mothers from the third trimester until the child's second birthday."**

**21. Attorney for the Department of Health (S.B. 2, Item 72):**

*The Legislature intends that the Inspector General of Medicaid Services pay the Attorney General's Office the full state cost of the one attorney FTE that it is using at the Department of Health.*

**Agency Response: "Costs for one Attorney General staff will be charged to the Office of Inspector General."**

**22. Direction to Allow 5% for Administration in Managed Care Dental Plans (S.B. 2, Item 75):**

*The Legislature intends that 5% of all funds provided in the Medicaid program for managed care dental plans be used for contracted plan administration and that any funds provided for the Affordable Care Act premium tax not be included in that 5% administrative funds amount.*

**Agency Response: "The funding has been included in the capitation rates, effective July 1, 2015."**

**23. Two Percent Increase for Medicaid Accountable Care Organizations (S.B. 3, Item 121):**

*The Legislature intends that the Medicaid Accountable Care Organizations receive a scheduled two percent increase effective January 1, 2016 consistent with the intent of S.B. 180, 2011 General Session.*

**Agency Response: "A 2% rate increase will be included in the proposed January 1, 2016 ACO rates."**

**24. Direction to Raise Medicaid Anesthesia Rates (S.B. 2, Item 75):**

*The Legislature intends that, if funds are available, Medicaid fee-for-service payments for anesthesia services be increased from the current amount of \$18.27 to \$23.73 for Fiscal Year 2016.*

**Agency Response: "Reimbursement rates were increased effective July 1, 2015."**

**25. Report on Salaries of Direct Care Workers (S.B. 2, Item 75):**

*The Legislature intends that with the funding appropriated for the building block titled, "Intermediate Care Facilities - Intellectually Disabled," the Department of Health shall: 1) Direct funds to increase the salaries of direct care workers; 2) Increase only those rates which include a direct care service component, including respite; 3) Monitor providers to ensure that all funds appropriated are applied to direct care worker wages and that none of the funding goes to administrative functions or provider profits; In conjunction with Intermediate Care Facilities - Intellectually Disabled providers, report to the Office of the Legislature Fiscal Analyst no later than September 1, 2015 regarding: 1) the implementation and status of increasing salaries for direct care workers, 2) a detailed explanation with supporting documentation of how Intermediate Care Facilities - Intellectually Disabled providers are reimbursed, including all accounting codes used and the previous and current rates for each accounting code, and 3) a conceptual explanation of how Intermediate Care Facilities - Intellectually Disabled providers realize profit within the closed market of providing Intermediate Care Facilities - Intellectually Disabled services.*

**The report is available at <http://le.utah.gov/interim/2015/pdf/00003927.pdf>.**

**26. Report on Highest Cost Individuals (S.B. 2, Item 68):**

*The Legislature intends the Departments of Workforce Services, Health, Human Services, and the Utah State Office of Rehabilitation provide a report regarding each agency's highest*

*cost individuals and possible efficiencies through coordination, early intervention, and prevention. The Legislature further intends these agencies provide a report to the Office of the Legislative Fiscal Analyst by September 1, 2015. The report shall include the following regarding high cost individuals: 1) a summary, by program, of individuals receiving services in excess of \$100,000 total fund annually in any given agency, what percentage of total costs is spent on these individuals, and what the agency is doing to manage these costs in an efficient manner, 2) an assessment of these high cost individuals receiving services from multiple agencies, 3) a description of agency coordination regarding high cost individuals accompanied by a list of areas where agencies specifically coordinate on these high cost individuals, 4) recommendations regarding how best to serve these high cost individuals in least restrictive settings where appropriate and consistent with choice, and 5) recommendation on how agency efforts might better be coordinated across programs.*

**The report is available at <http://le.utah.gov/interim/2015/pdf/00003929.pdf>. A brief on the topic by legislative staff is available at <http://le.utah.gov/interim/2015/pdf/00004101.pdf>.**

### **27. Report on Statewide Distribution of Services by Program (H.B. 3, Item 75):**

*The Legislature intends the departments of Health, Human Services, and Workforce Services and the Utah State Office of Rehabilitation provide to the Office of the Legislative Fiscal Analyst by June 1, 2015 a report outlining how funds are distributed within the state when passed through to local government entities or allocated to various regions and how often these distributions are reviewed and altered to reflect the relevant factors associated with the programs. (1) Is the program considered a statewide program (this would include something that serves all rural areas)? a. Is the implementation of the program really statewide? If not, is there a compelling reason why? (2) Who gets the money (by county)? (3) What is the methodology for distributing the money? a. How does the distribution compare to actual need as expressed by population? i. [If distributions are not reflecting current need (as represented by population), please explain why not?] b. If not done by population, what is the reason? (4) Does statute say anything about distribution and equity for the program?*

**The reports are available at <http://le.utah.gov/interim/2015/pdf/00002648.pdf> and <http://le.utah.gov/interim/2015/pdf/00002829.pdf>. A brief on the topic by legislative staff is available at <http://le.utah.gov/interim/2015/pdf/00002858.pdf>.**

### **28. Report on Options for State Laboratory to Serve More Government Entities (S.B. 7, Item 12):**

*The Legislature intends that the Department of Health research and report government entities paying for services that could be provided by the State Laboratory and give this information to the Office of the Legislative Fiscal Analyst by September 1, 2015. The report shall include: (1) the name of the government entity, (2) amount paid for the service, (3) what the cost would be if the service was provided by the State Laboratory, and (4) any potential barriers to the State Laboratory for bidding on those services. The Department of Health shall also detail its assumptions for its costs on all laboratory services that government entities are purchasing in the private sector.*

**The report is available at <http://le.utah.gov/interim/2015/pdf/00003919.pdf>. A brief on the topic by legislative staff is available at <http://le.utah.gov/interim/2015/pdf/00004135.pdf>.**

### **29. Quarterly Status Reports on Replacement of Medicaid Management Information System (S.B. 7, Item 17):**

*The Legislature intends that the Department of Health report quarterly to the Office of the Legislative Fiscal Analyst on the status of replacing the Medicaid Management Information*

*System replacement beginning September 30, 2015. The reports should include, where applicable, the responses to any requests for proposals. At least one report during FY 2016 should include the first estimate of net ongoing impacts to the State from the new system.*

**Agency Response: “Medicaid will report on a quarterly basis to the Legislative Fiscal Analyst. The quarterly MMIS status reports can be found at the following site: [\*\*30. Performance Measures for New Funding \(S.B. 2, Item 68 and H.B. 3, Item 75\):\*\*](https://medicaid.utah.gov/Legislative-Reports.”</a></b></p>
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*The Legislature intends that the Department of Health prepare proposed performance measures for all new state funding or TANF federal funds for building blocks and give this information to the Office of the Legislative Fiscal Analyst by June 30, 2015. At a minimum the proposed measures should include those presented to the Subcommittee during the requests for funding. If the same measures are not included, a detailed explanation as to why should be included. The Department of Health shall provide its first report on its performance measures to the Office of the Legislative Fiscal Analyst by October 31, 2015. The Office of the Legislative Fiscal Analyst shall give this information to the legislative staff of the Health and Human Services Interim Committee.*

**Here are the links to the required reports:**

**(1) June 30, 2015 - <http://le.utah.gov/interim/2015/pdf/00002856.pdf>**

**(2) October 31, 2015 - <http://le.utah.gov/interim/2015/pdf/00005397.pdf>**

**31. Performance Measures for Executive Director's Operations Line Item (S.B. 7, Item 10):**

*The Legislature intends that the Department of Health report on the following performance measures for the Executive Director's Operations line item: (1) conduct risk assessments for each information system in operation (Target = 123 information systems), (2) 95% of births occurring in a hospital are entered accurately by hospital staff into the electronic birth registration system (Target = 10 calendar days or less), and (3) percentage of all deaths registered using the electronic death registration system (Target = 75% or more) by January 1, 2016 to the Social Services Appropriations Subcommittee.*

**The report is available at <http://le.utah.gov/interim/2016/pdf/00000140.pdf>.**

**32. Performance Measures for Family Health and Preparedness Line Item (S.B. 7, Item 11):**

*The Legislature intends that the Department of Health report on the following performance measures for the Family Health and Preparedness line item: (1) The percent of children who demonstrated improvement in social-emotional skills, including social relationships (Goal = 70% or more), (2) The percent of children who demonstrated improvement in their rate of growth in acquisition and use of knowledge and skills, including early language/communication and early literacy (Goal = 75% or more), (3) The percent of children who demonstrated improvement in their rate of growth in the use of appropriate behaviors to meet their needs (Goal = 75% or more) by January 1, 2016 to the Social Services Appropriations Subcommittee.*

**The report is available at <http://le.utah.gov/interim/2016/pdf/00000140.pdf>.**

**33. Performance Measures for Disease Control and Prevention Line Item (S.B. 7, Item 12):**

*The Legislature intends that the Department of Health report on the following performance measures for the Disease Control and Prevention line item: (1) Gonorrhea cases per 100,000 population (Target = 18.9 people or less), (2) Percentage of Adults Who Are Current Smokers*

(Target = 9%), and (3) Percentage of Toxicology Cases Completed within 14 day Goal (Target = 100%) by January 1, 2016 to the Social Services Appropriations Subcommittee.

**The report is available at <http://le.utah.gov/interim/2016/pdf/00000140.pdf>.**

#### **34. Performance Measures for Local Health Departments Line Item (S.B. 7, Item 13):**

*The Legislature intends that the Department of Health report on the following performance measures for the Local Health Departments line item: (1) Number of local health departments that maintain a board of health that annually adopts a budget, appoints a local health officer (LHO), conducts an annual performance review for the LHO, and reports to county commissioners on health issues (Target = 12 or 100%), (2) Number of local health departments that provide communicable disease epidemiology and control services including disease reporting, response to outbreaks, and measures to control tuberculosis (Target = 12 or 100%), and (3) Number of local health departments that maintain a program of environmental sanitation which provides oversight of restaurants food safety, swimming pools, and the indoor clean air act (Target = 12 or 100%) by January 1, 2016 to the Social Services Appropriations Subcommittee, (4) Achieve and maintain an effective coverage target rate of 90% for universally recommended vaccinations among young children (35 months of age), (5) Reduce the number of cases of pertussis among children under 1 year of age, and among adolescents aged 11 to 18 years, and (6) Local health departments will increase the number of health and safety related school buildings and premises inspections by 10% (from 80% to 90%).*

**The report is available at <http://le.utah.gov/interim/2016/pdf/00000140.pdf>.**

#### **35. Performance Measures for Medicaid and Health Financing Line Item (S.B. 7, Item 14):**

*The Legislature intends that the Department of Health report on the following performance measures for the Medicaid and Health Financing line item: (1) average decision time on pharmacy prior authorizations (Target = 24 hours or less), (2) percent of clean claims adjudicated within 30 days of submission (Target = 98%), and (3) total count of Medicaid and CHIP clients educated on proper benefit use and plan selection (Target = 90,000 or more) by January 1, 2016 to the Social Services Appropriations Subcommittee.*

**The report is available at <http://le.utah.gov/interim/2016/pdf/00000140.pdf>.**

#### **36. Performance Measure for Medicaid Sanctions Line Item (S.B. 7, Item 15):**

*The Legislature intends that the Department of Health report on how expenditures from the Medicaid Sanctions line item met federal requirements which constrain its use by January 1, 2016 to the Social Services Appropriations Subcommittee.*

**The report is available at <http://le.utah.gov/interim/2016/pdf/00000140.pdf>.**

#### **37. Performance Measures for Children's Health Insurance Program Line Item (S.B. 7, Item 16):**

*The Legislature intends that the Department of Health report on the following performance measures for the Children's Health Insurance Program line item: (1) percentage of children (less than 15 months old) that received at least six or more well-child visits (Target = 52% or more), (2) percentage of members (12 - 21 years of age) who had at least one comprehensive well-care visit (Target = 39% or more), and (3) percentage of children 5-11 years of age with persistent asthma who were appropriately prescribed medication (Target = 94% or more) by January 1, 2016 to the Social Services Appropriations Subcommittee.*

**The report is available at <http://le.utah.gov/interim/2016/pdf/00000140.pdf>.**

#### **38. Performance Measures for Medicaid Mandatory Services Line Item (S.B. 7, Item 17):**

The Legislature intends that the Department of Health report on the following performance measures for the Medicaid Mandatory Services line item: (1) percent of adults age 45-64 with ambulatory or preventive care visits (Target = 88% or more), (2) percent of deliveries that had a post partum visit between 21 and 56 days after delivery (Target = 60% or more), and (3) percent of customers satisfied with their managed care plan (Target = 85% or more) by January 1, 2016 to the Social Services Appropriations Subcommittee.

The report is available at <http://le.utah.gov/interim/2016/pdf/00000140.pdf>.

**39. Performance Measures for Medicaid Optional Services Line Item (S.B. 7, Item 18):**

The Legislature intends that the Department of Health report on the following performance measures for the Medicaid Optional Services line item: (1) annual state general funds saved through preferred drug list (Target = \$8.5 million general fund or more), (2) count of new choices waiver clients coming out of nursing homes into community based care (Target = 390 or more), and (3) emergency dental program savings (Target = \$250,000 General Fund savings or more) by January 1, 2016 to the Social Services Appropriations Subcommittee.

The report is available at <http://le.utah.gov/interim/2016/pdf/00000140.pdf>.

**Nonlapsing Balances**

Under the Budgetary Procedures Act ([UCA 63J-1-602](#)), no revenue collection, appropriation from a fund or account, or appropriation to a program may be treated as nonlapsing unless:

1. It is expressly referenced in [UCA 63J-1-602](#)
2. It is designated in a condition of appropriation in the appropriations bill, or
3. Nonlapsing authority is granted under [UCA 63J-1-603](#).

[UCA 63J-1-602](#) also states that “each legislative appropriations subcommittee shall review the accounts and funds that have been granted nonlapsing authority under this section of Section [63J-1-603](#).”

The table below details the \$8,307,600 in nonlapsing balances at the end of FY 2015 for the Department of Health that came from UCA 63J-1-602.1.

The Office of the Legislative Fiscal Analyst presented a statewide report entitled, “FY 2015 Preliminary Lapsing and Nonlapsing Balances Report,” to the Executive Appropriations Committee in October of 2015. The report is available at <http://le.utah.gov/interim/2015/pdf/00004590.pdf>.

Division & Program	Nonlapsing Authority	Amount	Restrictions	Reason
<b>Family Health and Preparedness</b>				
Primary Care Grants	UCA 63J-1-602.1(12)	\$ 888,800		
<b>Workforce Financial Assistance</b>				
Workforce Loan Program	UCA 63J-1-602.1(11)	\$ 2,800	Statute provides for professional educational loan repayment and scholarship assistance to health care professionals who locate or continue to practice in medically underserved areas of Utah.	Funds are obligated but dispersed across state fiscal years. Contracts may range from 2 to 4 years in length for contractual service obligations for health care professionals providing primary health care services to Utah's medically underserved populations.
<b>Children's Health Insurance Program (CHIP)</b>				
CHIP	UCA 63J-1-602.1(10)	\$7,416,000	Use of all nonlapsing funds limited to caseload and utilization increases	State statute requires the CHIP program to serve all clients who qualify for services.

**Intent Language from the 2014 General Session**

The following 15 items of intent language were passed in the 2014 General Session. These items could not be fully reviewed until the close of FY 2015. Most of these items were partially reviewed in an Issue Brief from the 2015 General Session entitled “Intent Language and Nonlapsing Balances Follow-up (Health)” (<http://le.utah.gov/interim/2015/pdf/00000459.pdf>). These 15 statements can be grouped into the following three categories:

1. Providing nonlapsing authority of more than \$4.4 million in FY 2015 from FY 2014 funds (12 intent language statements). The table below details the \$3.0 million of specific nonlapsing authority provided as well as the three areas with unlimited nonlapsing authority. The Department of Health has \$1,783,300 in nonlapsing from these intent language statements with specific maximums.
2. Providing specific direction (two intent language statements)
3. Requiring a report (one intent language statement)

Agency-initiated requests for nonlapsing authority for General Fund represented about 3% of General Fund appropriated in FY 2014 for those divisions with initiatives for nonlapsing authority. The second table below has a summary of this information. Some of the nonlapsing requests listed above were to retain funds other than General Fund or were not initiated by the Department of Health.

<b>Nonlapsing Authority Via Intent Language</b>		
<b>Purpose</b>	<b>Authorized Total</b>	<b>Actual Nonlapsing</b>
Medicaid Sanctions	all	\$982,900
Federally Mandated Projects (Medicaid)	\$475,000	\$475,000
Health Facility Licensure	\$245,000	\$245,000
Childcare and Health Care - Fines	all	\$240,600
Emergency Medical Services - Fees	\$250,000	\$234,100
Computer Equipment (Executive)	\$225,000	\$225,000
Laboratory Equipment and Medical Examiner	\$475,000	\$225,000
Drug Prevention Programs	\$500,000	\$188,000
Primary Care Grants	\$400,000	\$100,000
Facility Plan Review Activities	\$210,000	\$50,000
Laboratory Equipment (Epidemiology)	\$175,000	\$32,200
Bleeding Disorders Program	\$50,000	\$9,000
Emergency Medical Services - Fines	all	\$0
<b>Total</b>	<b>\$3,005,000</b>	<b>\$3,006,800</b>

Summary of Agency-initiated Requests			
Line Item	FY 2014 Appropriated General Fund	Nonlapsed General Fund	%
Medicaid and Health Financing	\$ 4,146,300	\$ 475,000	11%
Family Health and Preparedness	\$ 17,252,800	\$ 354,000	2%
Disease Control and Prevention	\$ 12,190,500	\$ 257,200	2%
Executive Director's Operations	\$ 5,901,200	\$ 225,000	4%
Medicaid Mandatory Services	\$ 275,333,300	\$ -	0%
Medicaid Optional Services	\$ 84,132,300	\$ -	0%
Children's Health Insurance Program	\$ 2,875,000	\$ -	0%
Local Health Departments	\$ 2,137,500	\$ -	0%
<b>Total</b>	<b>\$ 403,968,900</b>	<b>\$ 1,311,200</b>	<b>0.3%</b>

**1. Nonlapsing Authority for Computer Equipment in the Executive Director’s Office (S.B. 8, Item 1):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that appropriations provided for the Department of Health's Executive Director's Office in Item 1 of Chapter 6, Laws of Utah 2013 shall not lapse at the close of Fiscal Year 2014. The use of any nonlapsing funds is limited to \$225,000 for computer equipment, information technology hosting and storage costs, software, and employee training. (The agency nonlapsed \$225,000).*

**Agency Response:** “The division did non [lapse] and expend the entire \$225,000 to replace [information technology] equipment in the Executive Director’s office and to implement the [Department of Technology Services]/[Department of Health] server consolidation project and to support implementation of the contract management and reporting system. The office of Health Data Informatics did start work on Utah Medicaid Examiners Database (UMED) and the Electronic Death Entry Network (EDEN). These are new critical systems being developed for Vital Records.”

**2. Nonlapsing Authority for Health Facility Licensure and Certification Activities (S.B. 8, Item 2):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$245,000 of Item 2 of Chapter 6, Laws of 52 Utah 2013 for the Department of Health's Family Health and Preparedness not lapse at the close of Fiscal Year 2014. The use of any nonlapsing funds is limited to one-time health facility licensure and certification activities. (The agency nonlapsed \$245,000).*

**Agency Response:** “This non lapsing authority allows for more [continuous] funding from an uneven funding source. The Division and Bureau used some of funds for positions that were [sorely] needed to comply with federal licensure and certification mandates.”

**3. Nonlapsing Authority for Testing Supplies and Processes for Emergency Medical Services (S.B. 8, Item 2):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$250,000 of Item 2 of Chapter 6, Laws of Utah 2013 for the Department of Health's Emergency Medical Services shall not lapse at the close of Fiscal Year 2014. The use of any nonlapsing funds is limited to testing, certifications, background screenings, replacement testing equipment and testing supplies. (The agency nonlapsed \$234,100).*

**Agency Response:** “This non lapsing authority allows for more [continuous] funding from an uneven funding source. Bureau used these balances as prescribed in the [Emergency Medical Services] program to further the efforts of Emergency Medical Services.” The funds were used for EMS certification, background screenings, and on-going training over a four year certification cycle for all EMS personnel.”

#### 4. Nonlapsing Authority for Civil Penalty Money from Childcare and Health Care Provider Violations (S.B. 8, Item 2):

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that civil money penalties collected for the Department of Health's Child Care Licensing and Health Care Licensing in Item 2 of Chapter 6, Laws of Utah 2013 from childcare and health care provider violations shall not lapse at the close of Fiscal Year 2014. The use of any nonlapsing funds is limited to trainings for providers and staff, as well as upgrades to the Child Care Licensing database. (The agency nonlapsed \$240,600).*

**Agency Response: "All civil money penalty funds were used for staff trainings, updates and/or enhancements to the Child Care Licensing database."**

#### 5. Nonlapsing Authority for Bureau of Health Facility Licensure, Certification and Resident Assessment for Plan Reviews (S.B. 8, Item 2):

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$210,000 of Item 2 of Chapter 6, Laws of Utah 2013 from fees collected for the purpose of plan reviews by the Department of Health's Bureau of Health Facility Licensure, Certification and Resident Assessment shall not lapse at the close of Fiscal Year 2014. The use of any nonlapsing funds is limited to plan review activities. (The agency nonlapsed \$50,000).*

**Agency Response: "This non lapsing authority allowed for more continuous funding from uneven funding. The nonlapsing funds for Health Facility Licensing/Certification were used for evaluating health care facility new construction and remodel projects to endure compliance with appropriate building and fire codes in accordance with [state] health facility construction rules. The funds were used for salaries for architects and inspection staff to complete on-going construction inspections this year."**

#### 6. Nonlapsing Authority for People with Bleeding Disorders (S.B. 8, Item 2):

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$50,000 of Item 2 of Chapter 6, Laws of Utah 2013, funds appropriated for the Department of Health's Assistance for People with Bleeding Disorders Program shall not lapse at the close of Fiscal Year 2014. The use of any nonlapsing funds is limited to services to eligible clients. (The agency nonlapsed \$9,000).*

**Agency Response: "Funds were incorporated in the distribution of funds for eligible bleeding disorder clients."**

#### 7. Nonlapsing Authority for Primary Care Grants Program (S.B. 8, Item 2):

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$400,000 of Item 2 of Chapter 6, Laws of Utah 2013 for the Department of Health's Primary Care Grants program shall not lapse at the close of Fiscal Year 2014. The use of any nonlapsing funds is limited to final Fiscal Year 2014 contract payments or additional distributions to eligible primary care providers. (The agency nonlapsed \$100,000).*

**Agency Response: "All funds were incorporated into the distribution of fund for eligible primary care providers."**

#### 8. Nonlapsing Authority for Equipment and Services for the Bureau of Epidemiology (S.B. 8, Item 3):

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$175,000 of Item 3 of Chapter 6, Laws of Utah 2013 for the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2014. The use of any nonlapsing funds is limited to maintenance or replacement of computer equipment, software, or other*

*purchases or services that improve or expand the services provided by the Bureau of Epidemiology. (The agency nonlapsed \$32,200).*

**Agency Response: "During fiscal year 2015, the Bureau of Epidemiology used nonlapsing funds of \$32,200 to maintain, replace, or develop computer software, to improve disease tracking, surveillance, and reporting."**

**9. Nonlapsing Authority for Laboratory Equipment (S.B. 8, Item 3):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$475,000 of Item 3 of Chapter 6, Laws of Utah 2013 for the Department of Health's Disease Control and Prevention line item shall not lapse at the close of Fiscal Year 2014. The use of any nonlapsing funds is limited to laboratory equipment, computer equipment, software, and building improvements. (The agency nonlapsed \$225,000).*

**Agency Response: "During fiscal year 2015, the Unified State Laboratory and the Office of the Medical Examiner used nonlapsing funds to cover the replacement of aging instrumentation, testing and autopsy equipment, and required upgrades to the laboratory's computer-based security and data communication infrastructure."**

**10. Nonlapsing Authority for Drug Prevention Programs (S.B. 8, Item 3):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends that up to \$500,000 of Item 3 of Chapter 6, Laws of Utah 2013, for the Department of Health's Disease Control and Prevention line item for alcohol, tobacco, and other drug prevention reduction, cessation, and control programs shall not lapse at the close of Fiscal Year 2014. The use of any nonlapsing funds is limited to alcohol, tobacco, and other drug prevention, reduction, cessation, and control programs or for emergent disease control and prevention needs. (The agency nonlapsed \$188,000).*

**Agency Response: "During fiscal year 2015, the Drug Prevention Program used nonlapsing funds of \$188,000 to support the continuation of tobacco use reduction, cessation, and control media campaigns conducted statewide and to ensure the continued availability of quit-line services to the public."**

**11. Nonlapsing Authority for Computer Equipment and to Comply With Federally-mandated Projects in Health Care Financing (S.B. 8, Item 4):**

*Under Section 63J-1-603 of the Utah Code, the Legislature intends up to \$475,000 provided for the Department of Health's Medicaid and Health Financing in Item 5 of Chapter 6, Laws of Utah 2013 shall not lapse at the close of Fiscal Year 2014. The use of nonlapsing funds is limited to compliance with federally mandated projects and the purchase of computer equipment and software. (The agency nonlapsed \$475,000).*

**Agency Response: "These funds support the implementation costs of several federally mandated projects in FY 2015 and computer/software purchases. \$425,000 was used as match on the ICD10 - project to update diagnosis codes, 5010 - HIPAA compliance project, HIT - Health Information Technology to convert provider medical records to an electronic health record, TMSIS - project to create federal reporting, and EFT/ERA - Electronic Funds Transfer and Electronic Remittance Advice processing project. The nonlapsing general funds were used for federal match to cover expenses such as personnel, current expense and data processing current expense of the various projects. \$50,000 was expended to replace computer equipment and software."**

**12. Nonlapsing Authority for Medicaid Sanctions (S.B. 8, Item 5):**

*Under Section 63J-1-603 of the Utah Code, funds collected as a result of sanctions imposed under Section 1919 of Title XIX of the Federal Social Security Act and authorized in Section 26-18-3 of the Utah Code shall not lapse at the close of Fiscal Year 2014. The use of any nonlapsing funds is limited to the purposes outlined in Section 1919. (The agency nonlapsed \$982,900).*

**Agency Response: “The Denver Regional Office component of the Western Division of Survey & Certification (WDSC), as delegated by both CMS Central Office Leadership and the WDSC Associate Regional Administrator, must approve the Utah Department of Health, Bureau of Health Facility Licensing to utilize federal Civil Money Penalties (CMPs) for specific projects. No projects or plans were in place to use this funding at this time.”**

**13. Conditional Savings for Replacing the Medicaid Management Information System (H.B. 2, Item 72):**

*The Legislature intends that the \$1,500,000 in Beginning Nonlapsing provided to the Department of Health is dependent upon up to \$1,500,000 of savings above \$3,030,000 from savings from higher federal match rate for certain Medicaid eligibility systems maintenance and operations in the Department of Workforce Services in FY 2014. The use of any nonlapsing funds is limited to replacing the Medicaid Management Information System in the Department of Health in FY 2015.*

**Agency Response: “The Department of Workforce Services’ savings in FY 2014 was sufficient to fund the \$1.5 million authorization to the Medicaid Management Information System replacement project. These non-lapsing funds were used to address a portion of the system project costs in FY 2015.”**

**14. Five Percent for Dental Plan Administration (H.B. 2, Item 73 and H.B. 3, Item 95):**

*The Legislature intends that up to five percent of the \$1,559,600 provided by this item for dental provider rates may be used for contracted plan administration.*

*The Legislature intends that up to 5% be allowed for contracted plan administration.*

**Agency Response: “The funding was incorporated into the dental provider rates and providers were notified that 5% is specifically addressing contracted plan administration costs.”**

**15. Quarterly Status Reports on Replacement of Medicaid Management Information System (H.B. 2, Item 72):**

*The Legislature intends that the Department of Health report quarterly to the Office of the Legislative Fiscal Analyst on the status of replacing the Medicaid Management Information System replacement beginning September 30, 2014. The reports should include, where applicable, the responses to any requests for proposals.*

**Agency Response: “Medicaid reported on a quarterly basis to the Legislative Fiscal Analyst. The quarterly MMIS status reports are found at the following site: <https://medicaid.utah.gov/Legislative-Reports>.”**