

**UTAH DEPARTMENT OF HEALTH - Division of Medicaid and Health Financing**  
**BUILDING BLOCK - PERFORMANCE MEASURES List**  
 2014 GS - FY14 Suppl / FY15 Request

**A. Items That Require a Performance Measure**

| Appr                               | Bill | Program                              | Description                         | State Incr | State Decr | Performance Measure  | October 2014 Report  |
|------------------------------------|------|--------------------------------------|-------------------------------------|------------|------------|--|--|
| <b>FY14 Supplemental increases</b> |      |                                      |                                     |            |            |  |  |
| LHL                                | SB8  | Medicaid Eligibility                 | Change Medicaid Eligibility Card 1X | 23,000     |            | This appropriation enabled DMHF to expedite its plan to replace monthly eligibility cards with a single semi-permanent card by 7/1/2014. The division will report after July 2014 implementation on the implementation of the new eligibility cards. | DMHF worked with DWS, DTS, and others to replace the monthly eligibility card with a semi-permanent eligibility card. The new card does not identify the member's Medicaid eligibility. This improves security of member information should a card be lost or stolen. Also, providers now access a web portal to verify eligibility rather than locating the eligibility on a member's card. Both the card and portal were in place on July 1, 2014. A member portal is still being developed, which will allow members to access their eligibility information as well. The \$23,000 has been used to build the provider portal and specifically to purchase and print the new cards. |
| LHB                                | SB8  | Medicaid Inpatient Hospital Services | LFA Base Hosp Provider As           | 1,500,000  |            | Will any assessment rate increases cover the non-federal share portion of any related hospital reimbursement rate increase?  | This is an authorization to use the increased assessments resulting from higher expenditures. Funds are not from an assessment rate increase. Therefore, it does not cover the non-federal share of any related reimbursement rate increase. This authorization allows assessment funds to be used to match federal funds rather than having the unintended consequences of having to use unrestricted general funds to pay for a portion of the match.  |
| LHC                                | SB8  | Medicaid Nursing Home Services       | LFA Base Nurse Care Facilit         | 1,476,000  |            | Will any assessment rate increases cover the non-federal share portion of any related nursing care facility reimbursement rate increase?   | Same as SB8 LHB Status   |
| Total                              |      |                                      |                                     | 23,000     | 0          |  |  |

**FY15 Appropriation Increases**

|     |     |           |                           |        |  |   |  |
|-----|-----|-----------|---------------------------|--------|--|---|--|
| LGD | HB2 | MHF Admin | Medicaid Telehealth Admin | 35,000 |  | DMHF will establish a contract with the Utah Education and Telehealth Network (UETN) for staff support and develop a written plan to expand telehealth to Medicaid clients. | The contract has been established with UETN and the support staff has been identified. The written plan is being formulated. |
|-----|-----|-----------|---------------------------|--------|--|---|--|

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| LGD  | HB2  | MHF Admin                            | Medicaid Telehealth Services 1X   | 1,000,000  |            | Develop a written plan with UETN and submit progress reports on what equipment has been purchased and installed, including names of specific locations that have added telehealth capacity.   | DMHF is currently finalizing the equipment purchasing processes with UETN, including the specific locations to have added telehealth capabilities. Also, DMHF will begin to track the number of rural enrollees that have received a medical service via telehealth.   |
| LHB  | SB8  | Medicaid Inpatient Hospital Services | LFA Base Hosp Provider As         | 1,500,000  |            | Will any assessment rate increases cover the non-federal share portion of any related hospital reimbursement rate increase?   | Same as SB8 LHB Status   |
| LHC  | SB8  | Medicaid Nursing Home Services       | LFA Base Nurse Care Facil         | 1,476,000  |            | Will any assessment rate increases cover the non-federal share portion of any related nursing care facility reimbursement rate increase?  | Same as SB8 LHB Status   |
| LHC  | HB2  | Medicaid Mandatory                   | Nursing Home Rates - Hospice      | 2,000,000  |            | This appropriation is to increase Nursing Home and facility-based hospice rates for SFY 2015. The measure is the increase in new rates for service dates July 1, 2014 and after.  | Funding was built into the FY2015 Nursing Home and Hospice rates that were effective July 1, 2014.   |
| LHD  | HB2  | Medicaid Mandatory                   | Provider Tax - from GF            | 2,032,900  |            | This appropriation is to offset the impact of ACA taxes on Medicaid health plans. The measure is the funding being included in capitation rates for periods July 1, 2014 and after.   | The health plan contracts have been recently executed with the funding for the ACA tax included in the capitated rates. Applicable capitation payments will be reprocessed by the end of November in order to make the rates retroactive to July 1, 2014. (Funding for the ACA tax impact is for FY2015 only). |
| LHL  | HB2  | MMIS                                 | MMIS continuous funding           | 3,500,000  |            | Status and use of these funds will be addressed in the quarterly MMIS reports to LFA from Sept. 30, 2014 to June 30, 2015. Performance will be measured in terms of progress to overall system programming completion.  | DMHF submitted the latest MMIS quarterly report to the LFA on September 30, 2014.  |
| LJB  | HB3  | Medicaid Optional                    | HB88 Autism Program Amendments GF | 1,835,000  |            | A report is required to be presented to the Health and Human Services Interim Committee before November 30th each year. It will include the following performance measures: number of children served; program costs; results and effectiveness of the program. | The required report and elements will be submitted to the Health and Human Services Interim Committee by November 30, 2014.  |
| LJE  | HB2  | Medicaid Optional                    | Dental Services GF                | 360,400    |            | This appropriation is to increase fee-for-service and capitated dental rates for SFY 2015. The measure is the increase in the new fee schedule and capitation rates in place for service dates July 1, 2014 and after.  | DMHF has submitted fee-for-service and capitated dental rates to CMS and is awaiting their final clearance. It is expected that these rates will be approved and payments will be reprocessed by the end of November, which will make the rates retroactive to July 1, 2014.                                   |

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| LJE   | HB3  | Medicaid Optional | Dental Provider Rates GF   | 460,000    |            | This appropriation is to increase fee-for-service and capitated dental rates for SFY 2015. The measure is the increase in the new fee schedule and capitation rates in place for service dates July 1, 2014 and after.                                   | DMHF has submitted fee-for-service and capitated dental rates to CMS and is awaiting their final clearance. It is expected that these rates will be approved and payments will be reprocessed by the end of November, which will make the rates retroactive to July 1, 2014. |
| LJF   | HB2  | Medicaid Optional | Mislabeled as "Dental Services - Nurse Care RF". This is for the ICF/ID Assessment increase. (See Performance measure note). | 411,000    |            | Original is Mislabeled by LFA. This is the ICF/ID assessment increase from 4.0% to 5.1%. This assessment allows the provider rate to increase. The measure is the increase in the ICF/ID fee schedule in place for service dates July 1, 2014 and after. | The provider rate was modified for July 1, 2014 and provider assessments have increased accordingly.   |
| Total |      |                   |  | 14,610,300 | 0          |  |  |

B. Items That Do Not Require A Performance Measure

| Appr  | Bill | Program            | Description                 | State Incr | State Decr   | Notes |
|---|------|--------------------|-----------------------------|------------|--------------|-------|
| <b><u>FY14 Supplemental Increases/Decreases</u></b> |      |                    |                             |            |              |       |
| LGB   | SB8  | MHF Admin.         | Windfall from Fed. Reconc   | 0          | (715,000)    |       |
| LGC   | SB8  | MHF Admin.         | Use 3 % Max from Nurse R    | 24,000     | (24,000)     |       |
| LGC   | SB8  | MHF Admin.         | Transfer 4 FTE from FHP H   | 93,700     | (93,700)     |       |
| LHB   | SB8  | Medicaid Mandatory | LFA Base Hosp Provider As   | 1,500,000  | 0            |       |
| LHC   | SB8  | Medicaid Mandatory | LFA Base Nurse Care Facilit | 1,476,000  | 0            |       |
| LHD   | SB3  | Medicaid Mandatory | Caseload Reduction - Cons   | 0          | (23,536,800) |       |
| LHD   | SB3  | Medicaid Mandatory | Medicaid RF - sweep balan   | 41,400     | (41,400)     |       |
| LJA   | SB8  | Medicaid Optional  | Shift Drugs to Medicare Pa  | 0          | (44,500)     |       |
| LJB   | SB3  | Medicaid Optional  | Autism - Lower Caseload     | 0          | (2,000,000)  |       |
| LJH   | SB3  | Medicaid Optional  | Caseload Reduction - Cons   | 0          | (24,963,200) |       |
| LJH   | SB3  | Medicaid Optional  | Non-Emergency Medical tr    | 0          | (30,000)     |       |
| LPA   | SB3  | CHIP               | CHIP Caseload Reductions    | 0          | (4,000,000)  |       |
| Total   |      |                    |                             | 3,135,100  | (55,448,600) |       |

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|   |      |                     |                                      |                  |                   | <b>From Russell Frandsen: "Include the FY 15 reductions as one item and report on how things went." DMHF comments for each reduction are as follows:</b> |                     |
| <u>FY15 Appropriation Increases/Decreases</u> |      |                     |                                      |                  |                   |  |                     |
| LGC   | SB8  | Managed Health Care | Nursing Care Facilities Acct         | 24,000           | -24,000           | Funding nets to zero. No impact. (Replaces GF with Restricted Funds)   |                     |
| LGD   | SB8  | MHF Admin           | Transfer 4 FTE from LFH to           | 93,700           | -93,700           | Funding moved from DOH-FHP. Overall funding nets to zero.  |                     |
| LHB   | SB8  | Medicaid Mandatory  | LFA Hospital Provider Asse           | 1,500,000        |                   | No impact on programs.   |                     |
| LHC   | SB8  | Medicaid Mandatory  | Portability Transfer to DHS          | 0                | (1,466,000)       | Ongoing Funding moved to DHS. No impact on programs.   |                     |
| LHC   | SB8  | Medicaid Mandatory  | LFA Nursing Care Facilities          | 1,476,000        |                   |  |                     |
| LHC   | HB2  | Medicaid Mandatory  | Nursing Fac. Restr. Fund tc          | 0                | (110,600)         | Transfer only. (Nets with the next item).  |                     |
| LJL   | HB2  | Medicaid Optional   | Nursing Home Rates - Hosj            | 110,600          |                   | Transfer only. (Nets with the previous item).  |                     |
| LJA   | SB8  | Medicaid Optional   | LFA IP Mental Hlth Transfr           | 3,713,700        |                   |  |                     |
| LJA   | SB8  | Medicaid Optional   | LFA Shift Drugs to Medicar           | 0                | (88,000)          | Ongoing savings. No impact to programs.  |                     |
| LJH   | HB2  | Medicaid Optional   | Non Emergency Transport Savings      |                  | (75,000)          | Ongoing savings. No impact to programs.  |                     |
| LPA   | SB8  | CHIP                | LFA Base Budget Adjustme             | 500,000          |                   |  |                     |
| LPA   | HB2  | CHIP                | CHIP Caseload adjustment - Consensus |                  | (500,000)         | Ongoing caseload savings. No expected impact to programs.  |                     |
| Total   |      |                     |                                      | <u>7,418,000</u> | <u>-2,357,300</u> |  |                     |