



# UTAH DEPARTMENT OF HEALTH AND HUMAN SERVICES

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## UPDATE ON H.B. 365 STATE AGENCY REALIGNMENT

### Consolidation of Department of Health and Department of Human Services by July 1, 2022

#### Key Decisions

- **Finalized the organizational structure** of the Utah Department of Health and Human Services to compile elements of the H.B. 365 Transition Plan for the Governor and legislature by December 1, 2021 (See charts below):
  - Reviewed more than 100 comments from staff, lawmakers, providers, partners, and the public for its benefit to the overall flow of operations and how it would contribute to the customer experience, efficiency and effectiveness.
  - Considered areas where centralization models could maintain specialization, increase efficiencies and free up programs from administrative burden.
  - Addressed span of control for efficient communications, operations and management. Where specific programs will be is still being determined with the help of the workgroups.
- As key leadership positions have become vacant at one of the two departments, appointments have been made jointly in a shared position that will continue through the transition period and into the new DHHS. Those **key positions hired together** due to vacancy thus far include:
  - Internal Audit Director - Dan Clayton
  - Process Improvement Director - Dean Weedon
  - Government Affairs Director - Marc Watterson
  - Interviews are scheduled this month for a new State Medicaid Director
- Based upon the response from CMS, **Medicaid eligibility components** that will move from the Department of Health to the Department of Workforce Services were **reduced to** only Quality Control (MEQC) and eligibility adjudications.
- The Steering Committee added **new workgroups and subgroups** to divide the work and gather the components of the transition plan report. (Listed on [hhsplan.utah.gov](https://hhsplan.utah.gov).)
- Agreed on **plan for joint budgeting for SFY 2023**. Working with GOPB, the Governor's Office, and legislative leadership to discuss budget line items proposal for seamless delivery of services.

#### Progress

- Workgroups have **gathered more than 70% of H.B. 365 transition plan components**, including personnel, infrastructure, grants, contracts, MOUs, statute and rules, and



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technology systems that need changes for the merger. Centralization models are being proposed to guide where administrative functions could be streamlined to add time for serving people.

- **Concluded work with Kem C. Gardner Policy Institute**, formalized problem statement, vision, charter and guiding principles; identifying baseline and ongoing outcomes metrics.
- Developing **outcome and performance metrics** both for the transition and the new department. The goal is to have those metrics finalized by December 1, 2021. U of U Division of Public Health has been enlisted.

## Engagement

- **Activities include:** hosted 18 public and staff-only virtual Q&As with more than 4,000 total participants; had over 65 topic-specific meetings with key stakeholder groups; 34 key stakeholder personal discussions and submissions for “top three priorities for the DHHS” report; sent seven stakeholder mailing list updates and eight all-staff emails; had 1,593 staff participate in focus groups and surveys for culture and brand development; and responded to 335 questions on the HHS Plan feedback form and in virtual Q&As.
- **The DHS and UDOH Executive Leadership Teams will conclude its 18 stops across Utah’s 29 counties** to host open discussions on community-specific issues and challenges that intersect with health and human services in early October.
  - The goal of the tour is to provide opportunities for leadership to improve, measure, better serve and understand Utahns statewide.
  - Meetings include regional staff, schools, hospitals, local health officers, courts, law enforcement, elected officials, and lawmakers.
  - **Most common concerns** are about service access, especially in behavioral health.
- **Presentations and open discussions are happening** at organized advocacy, community and advisory groups on an ongoing basis.
  - **Most frequent staff concerns** are related to job stability or changing roles within the new organizational structure.
  - **Most frequent constituent concern** is changes to how they access services.
  - Providers and partners are seeking to learn more about **details not yet known**, including financing, contracting and processes, and have questions about the integration of physical and behavioral health in the DHHS. We are keeping them informed as we know and asking for input.
- **Stay Involved:** [HHSplan.utah.gov](https://HHSplan.utah.gov)

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## **Problem Statement:**

The current health and human services model and accompanying policies have led to a fragmented system of services creating unnecessary barriers and challenges to accessing care for those most in need. These systemic challenges contribute to inequities in health outcomes and determinants of health. A consolidated department will reduce these challenges and improve outcomes for all Utahns, particularly those within communities where disparities are greatest.

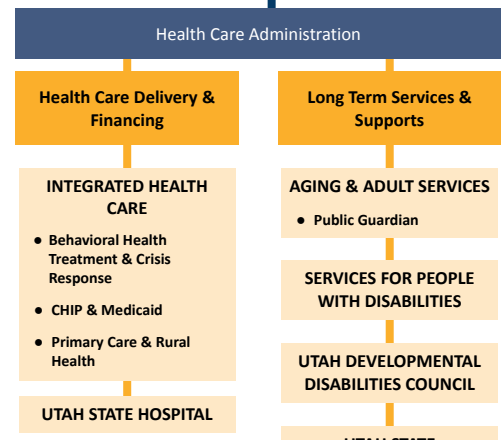
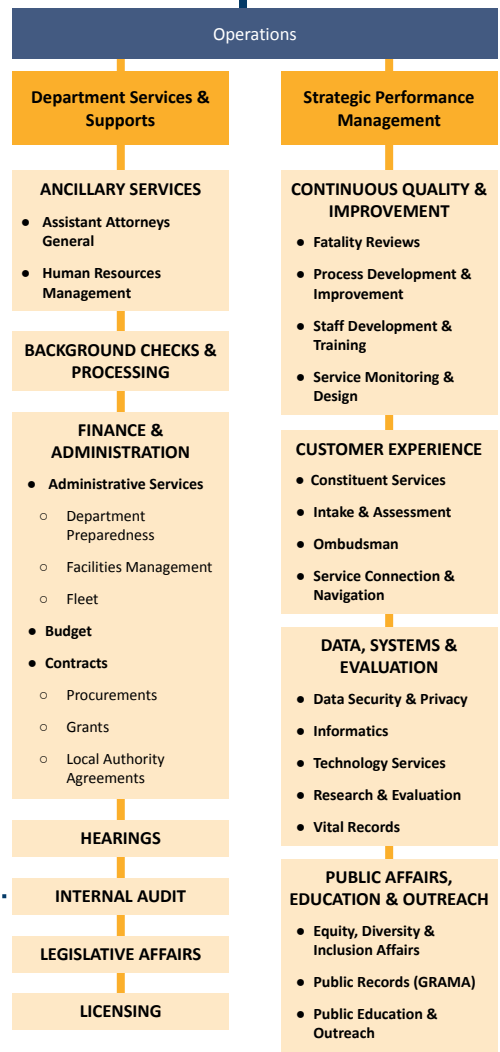
## **Vision:**

The Department of Health and Human Services will advocate for, support, and serve all individuals and communities in Utah. We will ensure all Utahns have fair and equitable opportunities to live safe and healthy lives. We will achieve this through effective policy and a seamless system of services and programs.

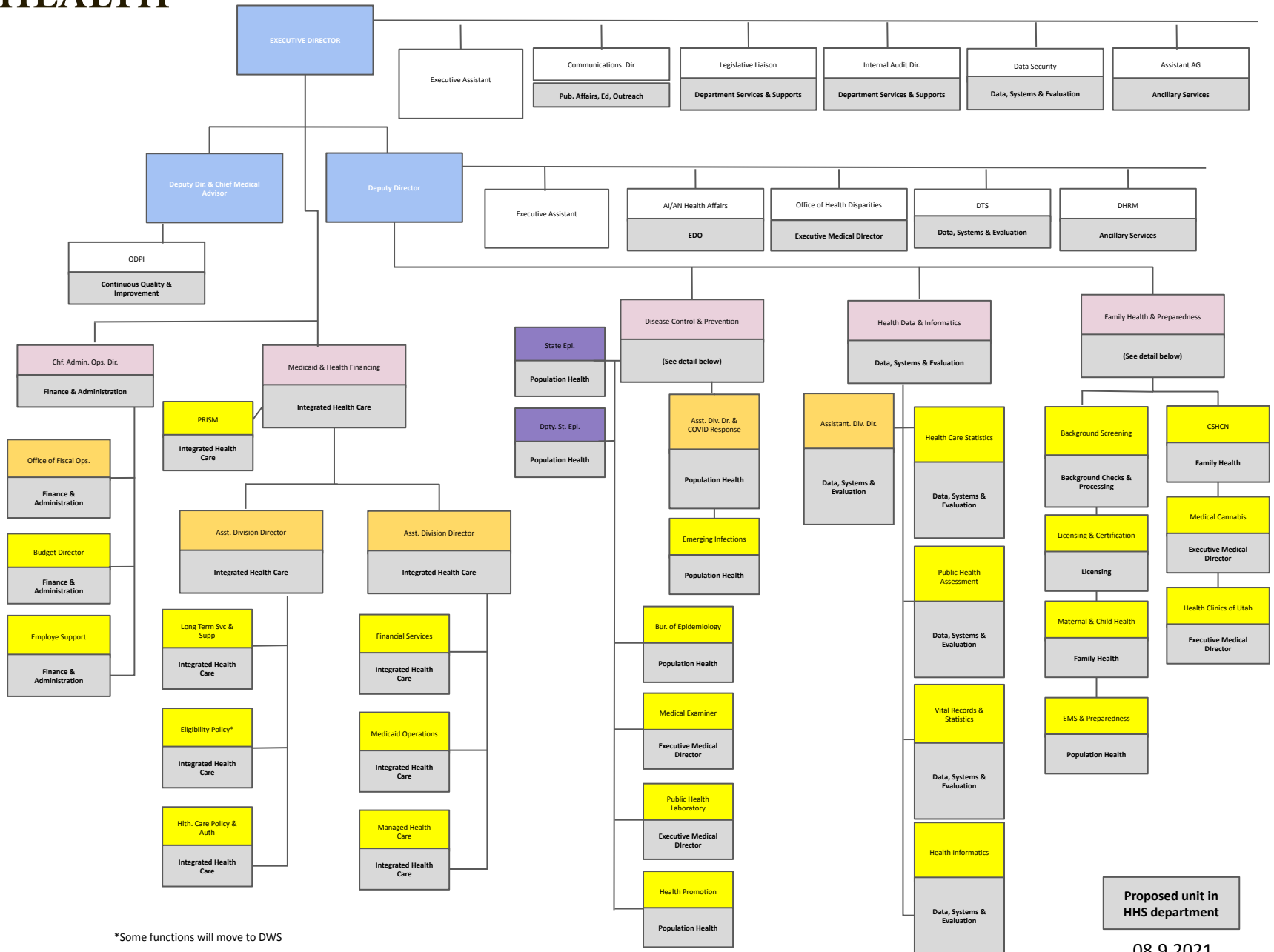
Executive Director

Executive Medical Director

HEALTH CLINICS OF UTAH    HEALTH EQUITY    MEDICAL CANNABIS    MEDICAL EXAMINER    STATE LABORATORY

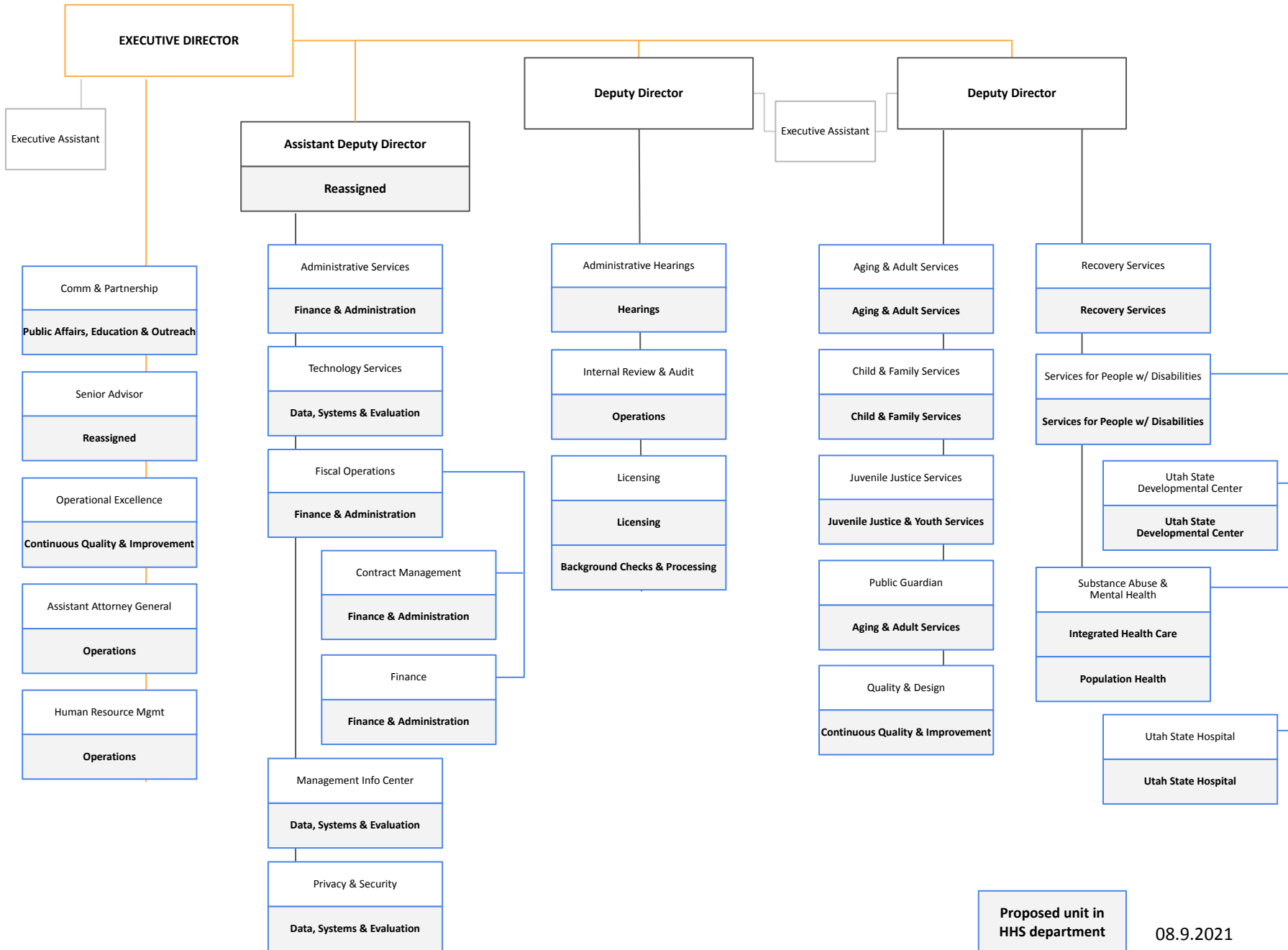


DRAFT - Subject to change



\*Some functions will move to DWS

Proposed unit in  
HHS department



Proposed unit in  
HHS department

08.9.2021