



UTAH DEPARTMENT OF HEALTH AND HUMAN SERVICES

UPDATE ON H.B. 365 STATE AGENCY REALIGNMENT

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

Key Decisions

- With the support of the governor and legislative leadership, named **executive leaders for the Utah Department of Health and Human Services**. These individuals will retain their current leadership roles in the two departments until July 1, 2022, while shaping the elements of the H.B. 365 Transition Plan due to the Governor and legislature by December 1, 2021. Those who have accepted DHHS executive leadership positions are:
 - **Tracy Gruber** - Executive Director (previously appointed by the Governor)
 - **Dr. Michelle Hofmann**- Executive Medical Director/State Health Officer
 - **Nathan Winters** - Deputy Director - Operations
 - Amanda Slater - Assistant Deputy Director - Operations
 - **Nathan Checketts** - Deputy Director - Health Care Administration
 - Tonya Hales - Assistant Deputy Director - Health Care Administration
 - **David Litvack** - Deputy Director - Community Health & Well Being Section
 - **Heather Borski** - Deputy Director - Community Health & Well Being
- **Finalized the structure of the DHHS FY23 budget** in coordination with the Governor's Office of Planning and Budget and the Office of Legislative Fiscal Analyst.
- Workgroups have gathered the **components of the written transition plan** due to the Governor and Legislature by December 1, 2021. These include personnel, infrastructure, statutory changes, grants, rules, technology, and financial components we need to plan for to ensure a successful transition by July 1, 2022. Writing is underway to compile the multiple pieces into one document for legislative review in advance of the 2022 General Session.
- **Joint recruitment** underway for vacant leadership positions: State Medicaid Director and Director of Privacy and Security.
- **Process in place to appoint division, office, and operations directors by the end of December 2021** so these leaders can shape decisions, teams, and the transition.

Progress

- The performance measures workgroup and the University of Utah are creating **metrics for the new department**. The October 26 meeting of the Steering Committee will be focused on finalizing proposed performance measures.



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- Enlisted input from staff in our **brand surveys on the employee culture, visual identity and voice**. Additional outreach will occur in the coming weeks.

Engagement

- **Activities include:** hosted 17 public and staff-only virtual Q&As with more than 6,575 total participants; had over 106 topic-specific meetings with key stakeholder groups; 34 key stakeholder personal discussions and submissions for “top three priorities for the DHHS” report; sent 30 stakeholder mailing list updates and 17 all-staff emails; had 2,302 staff participate in focus groups and surveys for culture and brand development; held integrated health webinar with statewide partners; and responded to 365 questions on the HHS Plan feedback form and in virtual Q&As.
- **DHS and UDOH Executive Leadership Teams concluded 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.
 - Provided opportunities for leadership to improve, measure, better serve and understand Utahns statewide.
 - Meetings included regional staff, schools, hospitals, local health and behavioral health leadership, courts, law enforcement, local elected officials, and lawmakers.
 - **Most common concerns** are about service access, especially in behavioral health, as well as concerns regarding establishing an effective DHHS organizational structure that supports rural and frontier communities.
- **Presentations and open discussions are happening** at organized advocacy, community and advisory groups on an ongoing basis.
 - **Most frequent staff concerns** are related to compensation parity and leadership decisions
 - **Most frequent constituent concern** is ensuring efficiencies to meet community needs through functions such as contracting and integration of health 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