

**MEDICAID WAIVER AMENDMENTS**

2018 GENERAL SESSION

STATE OF UTAH

**Chief Sponsor: Daniel Hemmert**

House Sponsor: Daniel McCay

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**LONG TITLE**

**General Description:**

This bill authorizes certain changes and waivers for the Medicaid program.

**Highlighted Provisions:**

This bill:

- ▶ requires the Department of Health to implement certain changes to the Medicaid program;
- ▶ authorizes the Department of Health to apply for waivers or a state plan amendment if necessary to implement the changes in this bill;
- ▶ creates various reporting requirements; and
- ▶ creates repeal dates for the reporting requirements in this bill.

**Money Appropriated in this Bill:**

None

**Other Special Clauses:**

None

**Utah Code Sections Affected:**

AMENDS:

**63I-2-226**, as last amended by Laws of Utah 2017, Chapters 126, 155, 413, and 419

ENACTS:

**26-18-415**, Utah Code Annotated 1953

**26-18-416**, Utah Code Annotated 1953



*Be it enacted by the Legislature of the state of Utah:*

Section 1. Section **26-18-415** is enacted to read:

**26-18-415. Medicaid reform waivers -- Reporting requirements.**

(1) (a) The department shall, to the fullest extent allowed under federal law, implement a work and community engagement requirement for certain eligibility groups into the Medicaid program.

(b) The work and community engagement requirement described in Subsection (1)(a) does not apply to a person who is:

(i) a child;

(ii) pregnant; or

(iii) disabled.

(2) The department shall, to the fullest extent allowed under federal law, incorporate one or more direct primary care payment models into the Medicaid program.

(3) The department shall, to the fullest extent allowed under federal law, implement a two-month limit on retroactive eligibility for eligibility groups, as determined by the department, that may not need a longer period of retroactive eligibility.

(4) The department shall, to the fullest extent allowed under federal law, design and administer a medical savings account program for enrollees in the Medicaid program.

(5) The department:

(a) if the waiver described in Section [26-18-416](#) is not approved, may not implement the components described in Subsections (1) through (4) without federal matching funds at a rate that is greater than or equal to the federal medical assistance percentage, as defined in 42 U.S.C. Sec. 1396d(b); and

(b) shall design the components described in Subsections (1) through (4) to:

(i) reduce the cost of the Medicaid program to the state;

(ii) promote enrollee health and self-sufficiency; and

(iii) create incentives to utilize health care resources wisely.

(6) If necessary to implement the components described in Subsections (1) through (4), the department shall apply for a waiver or a state plan amendment with the Center for Medicare and Medicaid Services within the United States Department of Health and Human Services:

59 (a) before January 1, 2019, to implement the components described in Subsections (1)  
60 through (3); and

61 (b) before July 1, 2019, to implement the component described in Subsection (4).

62 (7) (a) Before January 1, 2019, the department shall report to the Social Services  
63 Appropriations Subcommittee and the Health and Human Services Interim Committee on  
64 options for creating a Medicaid waiver request that would authorize the state to limit Medicaid  
65 spending growth by limiting the services received by one or more Medicaid eligibility groups.

66 (b) The options developed by the department in Subsection (7)(a) shall:

67 (i) consider the clinical effectiveness and cost of services covered by the Medicaid  
68 program;

69 (ii) require input from an independent body consisting of medical professionals,  
70 consumers, and health insurers; and

71 (iii) be designed to reduce the costs of the Medicaid program to the state.

72 (8) Before January 1, 2019, the Department of Workforce Services shall report to the  
73 Social Services Appropriations Subcommittee and the Health and Human Services Interim  
74 Committee on:

75 (a) processes that the Department of Workforce Services uses for determining and  
76 verifying eligibility for the Medicaid program; and

77 (b) recommendations to improve the accuracy and reduce the cost of determining and  
78 verifying eligibility for the Medicaid program.

79 Section 2. Section **26-18-416** is enacted to read:

80 **26-18-416. Medicaid block grant waiver -- Reporting requirement.**

81 (1) Before July 1, 2018, the department shall apply for a Medicaid waiver with the  
82 Centers for Medicare and Medicaid Services within the United States Department of Health  
83 and Human Services to implement the proposal developed under Subsection (2).

84 (2) The department shall develop a proposal for the state to administer the Medicaid  
85 program, or a portion of the Medicaid program:

86 (a) with federal funds provided to the state according to a per capita block grant  
87 formula developed by the department; and

88 (b) in a manner that increases the state's control over one or more of the following:

89 (i) the types of services provided;

90 (ii) the manner in which services are delivered and paid for;

91 (iii) eligibility requirements; or

92 (iv) enrollee cost sharing.

93 (3) (a) Before June 1, 2018, and in accordance with the requirements in Subsection  
94 26-18-3(3), the department shall report to the Social Services Appropriations Subcommittee  
95 and the Health and Human Services Interim Committee on the proposal developed under  
96 Subsection (2).

97 (b) After submitting the waiver application under Subsection (1), the department shall  
98 report any modifications to the waiver application to the Social Services Appropriations  
99 Subcommittee and the Health and Human Services Interim Committee.

100 Section 3. Section **63I-2-226** is amended to read:

101 **63I-2-226. Repeal dates -- Title 26.**

102 (1) Section ~~26-8a-107~~ is repealed July 1, 2019.

103 (2) Subsections ~~26-10-12~~(2) and (4) are repealed July 1, 2017.

104 (3) Subsections ~~26-18-415~~(7) and (8) are repealed January 1, 2020.

105 (4) Subsection ~~26-18-416~~(3) is repealed January 1, 2025.

106 ~~[(3)]~~ (5) Title 26, Chapter 46, Utah Health Care Workforce Financial Assistance  
107 Program, is repealed July 1, 2027.

108 ~~[(4)]~~ (6) Title 26, Chapter 59, Telehealth Pilot Program, is repealed January 1, 2020.

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**Legislative Review Note**  
**Office of Legislative Research and General Counsel**