

**Senator Wayne A. Harper** proposes the following substitute bill:

**MODIFICATIONS TO MEDICAID COVERAGE**

2023 GENERAL SESSION

STATE OF UTAH

**Chief Sponsor: Wayne A. Harper**

House Sponsor: Cheryl K. Acton

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**LONG TITLE**

**General Description:**

This bill addresses Medicaid for pregnant and postpartum women.

**Highlighted Provisions:**

This bill:

- ▶ defines terms; and
- ▶ requires the state Medicaid program to request one or more Medicaid waivers or state plan amendments from the Centers for Medicare and Medicaid Services to:
  - expand eligibility for certain limited family planning services; and
  - extend the duration of postpartum coverage for certain women.

**Money Appropriated in this Bill:**

None

**Other Special Clauses:**

None

**Utah Code Sections Affected:**

AMENDS:

**26-18-417**, as last amended by Laws of Utah 2019, Chapter 393

ENACTS:

**26B-3-201**, Utah Code Annotated 1953



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

Section 1. Section **26-18-417** is amended to read:

**26-18-417. Limited family planning services for low-income individuals.**

(1) As used in this section:

(a) (i) "Family planning services" means family planning services that are provided under the state Medicaid program, including:

(A) sexual health education and family planning counseling; and

(B) other medical diagnosis, treatment, or preventative care routinely provided as part of a family planning service visit.

(ii) "Family planning services" do not include an abortion, as that term is defined in Section **76-7-301**.

(b) "Low-income individual" means an individual who:

(i) has an income level that is equal to or below ~~[95%]~~ 185% of the federal poverty level; and

(ii) does not qualify for full coverage under the Medicaid program.

(2) Before ~~[July 1, 2018]~~ January 1, 2024, the division shall apply for a Medicaid waiver or a state plan amendment with CMS to:

(a) offer a program that provides family planning services to low-income individuals; and

(b) receive a federal match rate of 90% of state expenditures for family planning services provided under the waiver or state plan amendment.

Section 2. Section **26B-3-201** is enacted to read:

**26B-3-201. Medicaid coverage for certain postpartum women.**

(1) As used in this section:

(a) "Extended postpartum period" means the period after a woman's pregnancy ends:

(i) beginning the day after the initial postpartum period; and

(ii) ending on the last day of the month that is 12 months after the day on which the woman's pregnancy ends.

(b) "Initial postpartum period" means the period:

(i) beginning on the day on which a woman's pregnancy ends; and

57 (ii) ending on the last day of the month that is 60 days after the day on which the  
58 woman's pregnancy ends.

59 (c) "Miscarriage" means the spontaneous or accidental loss of a fetus, regardless of  
60 gestational age or the duration of the pregnancy.

61 (2) Before July 1, 2023, the division shall request a waiver or state plan amendment to,  
62 in accordance with 42 U.S.C. Sec. 1396a(e)(16), provide continuous Medicaid coverage during  
63 the woman's extended postpartum period if:

64 (a) the woman is eligible for Medicaid during the woman's pregnancy; and

65 (b) the woman's pregnancy ended by way of:

66 (i) birth;

67 (ii) miscarriage;

68 (iii) stillbirth; or

69 (iv) an abortion that is permitted under Section [76-7a-201](#).

70 (3) If the request described in Subsection (2) is denied or is not approved by January 1,  
71 2024, the division shall request a waiver or state plan amendment to, in accordance with 42  
72 U.S.C. Sec. 1396a(e)(16), provide continuous Medicaid coverage during the woman's extended  
73 postpartum period if the woman is eligible for Medicaid during the woman's pregnancy.