1

STATE OF UTAH Chief Sponsor: Luz Escamilla
Chief Sponsor: Luz Escamilla
House Sponsor: Christine F. Watkins
ONG TITLE
eneral Description:
This bill requires the Department of Health and Human Service to apply for a Medicaid
aiver related to traditional healing services.
ighlighted Provisions:
This bill:
defines terms; and
 requires the department to apply for a Medicaid waiver to reimburse traditional
ealing services under certain circumstances.
Ioney Appropriated in this Bill:
None
ther Special Clauses:
None
tah Code Sections Affected:
NACTS:
26B-3-230 , Utah Code Annotated 1953
1

NATIVE AMERICAN HEALTH AMENDMENTS



27

(1) As used in this section:

S.B. 181 01-31-24 10:12 AM

28	(a) "Eligible facility" means any of the following that has obtained an acknowledgment
29	from a Native American tribe to designate an individual as a traditional healing provider in
30	accordance with the Native American tribe's traditional healing practices:
31	(i) an Indian Health Service facility;
32	(ii) a tribal health program designated under the Indian Self-Determination and
33	Education Assistance Act, Pub. L. No. 93-638;
34	(iii) a facility operated by an organization that provides or facilitates health care
35	services to Native American individuals in urban settings; or
36	(iv) a facility operated by a person that contracts with an organization described in
37	Subsection (1)(a)(iii).
38	(b) "Traditional healing provider" means an individual who is recognized by an eligible
39	facility to provide a traditional healing service.
40	(c) "Traditional healing services" means a system of culturally appropriate healing
41	methods for physical, mental, and emotional healing.
42	(2) On or before January 1, 2025, the department shall apply for a Medicaid waiver to
43	reimburse for traditional healing services provided by an eligible facility to an enrollee who is a
44	member of a Native American tribe.
45	(3) A service under this section may not be reimbursed if:
46	(a) the traditional healing provider is restricted from providing the service;
47	(b) the service is contraindicated by a medical provider due to the potential to cause
48	<u>harm; or</u>
49	(c) the service is not part of the patient's plan of care.
50	(4) The department may further define and limit services described in this section.
51	Section 2. Effective date.
52	This bill takes effect on May 1, 2024.