

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S2-26-12
Baltimore, Maryland 21244-1850



Center for Medicaid and CHIP Services

JUL 19 2012

Mr. Michael T. Hales, Director
Division of Health Care Financing
Utah Department of Health
P.O. Box 143101
Salt Lake City, UT 84114-3101

Re: Utah 12-003

Dear Mr. Hales:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State plan submitted under transmittal number (TN) 12-003. Effective for services on or after April 1, 2012, this amendment revises the payment provision for non-routine ancillary services. In addition, effective for services on or after July 1, 2012, this amendment continues the Quality Improvement (QI) Incentive programs for State Fiscal Year 2013 for Nursing Facilities (NFs) and Intermediate Care Facilities for the Mentally Retarded (ICF/MRs).

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30) and 1903(a) of the Social Security Act (the Act) and the regulations at 42 CFR 447 Subpart C. We are pleased to inform you that Medicaid State plan amendment TN 12-003 is approved effective April 1, 2012 specific to the non-routine ancillary service provision and July 1, 2012 for the QI program provisions. We are enclosing the CMS-179 and the amended plan pages.

If you have any questions, please call Christine Storey at (303) 844-7044.

Sincerely,

Cindy Mann
Director, CMCS

cc: Craig Devashrayee, UT DOH