

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**

**FOR: HEALTH CARE FINANCING ADMINISTRATION**

1. TRANSMITTAL NUMBER:  
13-003-UT

2. STATE:  
Utah

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)

4. PROPOSED EFFECTIVE DATE  
January 1, 2013

TO: REGIONAL ADMINISTRATOR  
HEALTHCARE FINANCING ADMINISTRATION  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

5. TYPE OF PLAN MATERIAL (Check One)

NEW STATE PLAN       AMENDMENT TO BE CONSIDERED AS NEW PLAN       AMENDMENT  
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:  
42 CFR 440.130

7. FEDERAL BUDGET IMPACT: *APL 1/24/13*  
a. FFY 2013 \$0  
b. FFY 2014 \$0

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:  
Pages 1, 2, 2a, 2b, 2c, 2d, 2e, 2f, 2g, and 2h of Attachment #13 within ATTACHMENTS 3.1-A and 3.1-B.  
Removes Pages 4, 4a, 8, and 8a of Attachment #13 within ATTACHMENTS 3.1-A and 3.1-B  
Removes Pages 7, 8, and 8a through 8g of Attachment #4b within ATTACHMENTS 3.1-A and 3.1-B  
Removes Page 9 and Page 29d of ATTACHMENT 4.19-B

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)  
Pages 1, 2 and 2a of Attachment #13 within ATTACHMENTS 3.1-A and 3.1-B  
Page 25 of ATTACHMENT 4.19-B

10. SUBJECT OF AMENDMENT: Rehabilitative Mental Health Services

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT       OTHER, AS SPECIFIED:  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME: W. David Patton, Ph.D.

14. TITLE: Executive Director, Utah Department of Health

15. DATE SUBMITTED: January 31, 2013

16.

16. RETURN TO:

Craig Devashrayee, Manager  
Technical Writing Unit  
Utah Department of Health  
PO Box 143102  
Salt Lake City, UT 84114-3102

17. DATE RECEIVED:

*1/31/13*

18. DATE APPROVED:

*3/21/13*

19. EFFECTIVE DATE OF APPROVED MATERIAL:

*1/1/13*

20. SIGNATURE OF REGIONAL OFFICIAL:

ARA, ONCA#