Table of Contents

State Territory Name: UTAH

State Plan Amendment (SPA) #: 24-0009

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

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



Financial Management Group

July 18, 2024

Jennifer Strohecker, Medicaid Director Department of Health and Human Services 288 North 1460 West Salt Lake City, Utah 84116

RE: Utah State Plan Amendment (SPA) Transmittal Number 24-0009

Dear Director Strohecker:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid SPA submitted under transmittal number (TN) 24-0009. This SPA establishes an emergency interim payment methodology for certain providers affected by the Change Healthcare cybersecurity incident.

We conducted our review of your submittal according to the statutory requirements in Title I of the Social Security Act and considering the flexibilities described in the March 15, 2024 Change Healthcare Cybersecurity incident - CMS Response and State Flexibilities CMCS informational Bulletin (CIB). We hereby inform you that Medicaid State plan amendment 24-0009 is approved effective February 21, 2024. We are enclosing the CMS-179 and the amended plan pages.

If you have any questions, please contact Debi Benson at Deborah.Benson@cms.hhs.gov.

Sincerely,
Rory Howe

Director

Enclosure

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. FEDERAL STATUTE/REGULATION CITATION 42 CFR 447.50 through 447.57 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Introduction Page 2 Attachment 4.19-A page 1.5 Attachment 4.19-D page 1.5	1. TRANSMITTAL NUMBER 2 4 — 0 0 0 9 UTAH 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XXI 4. PROPOSED EFFECTIVE DATE February 21, 2024 6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2024 \$ 0 b. FFY 2025 \$ 0 8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Not applicable
9. SUBJECT OF AMENDMENT Interim Payments to Providers	
10. GOVERNOR'S REVIEW (Check One) GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	OTHER, AS SPECIFIED:
12. TYPED NAME Nate Checketts 13. TITLE Deputy Director, Utah Dept of Health & Human Services 14. DATE SUBMITTED	15. RETURN TO Craig Devashrayee Utah Department of Health & Human Services Division of Integrated Healthcare cdevashrayee@utah.gov
April 24, 2024 FOR CMS USE ONLY	
	17. DATE APPROVED July 18, 2024
PLAN APPROVED - ONE COPY ATTACHED	
	19. SIGNATURE OF APPROVING OFFICIAL
February 21, 2024 20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL
	Director, FMG
22. REMARKS State approved pen and ink change	

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: <u>UTAH</u>

Effective retroactively to February 21, 2024, and effective for affected services provided through June 30, 2024, providers are eligible to receive payments for services in amounts representative of up to thirty days (30) of claims payments for services that are not otherwise paid as a result of the Change Healthcare cybersecurity incident. The average 30-day payment is based on the total claims for services paid to the individual provider, inclusive of all Medicaid base payments for services made under the Medicaid state plan, between August 1, 2023, and October 31, 2023, divided by three (3). The payment(s) will be made for services provided through June 30, 2024, as requested by providers for any benefit category covered by Utah under the Medicaid State Plan pursuant to sections 1905(a), 1915(i), and 1915(k) and for which the provider demonstrates to Utah that it was affected by the incident as detailed above. This is not an advance payment or prepayment prior to services furnished by providers. These interim payments will be recorded in the claims processing system using unique account coding elements and notes to separately identify them from regular claims. Once the state is able to process claims for impacted providers, the state will identify and reverse all interim payments using the unique coding elements and reimburse providers the appropriate amount based on billed claims. The reversal will be completed within 30 days following the last day of the quarter in which the state is able to again process payments for claims following the resolution of the Change Healthcare cybersecurity incident. The state will follow all applicable program integrity requirements relating to interim payments to providers and the associated reversal process. The state will ensure providers receiving payments under this interim methodology for services will continue to furnish services to Medicaid beneficiaries during the interim payment period and access to services is not limited.

Accountable care organizations (ACOs) will be reimbursed, outside the normal capitations, through June 30, 2024, for payments to pharmacies for services carved out of managed care which were covered using their funds as a result of the Change Healthcare cybersecurity incident. These will be reimbursed at the actual cost the ACOs incurred for these products.

Effective retroactively to February 21, 2024, and effective for affected pharmacy services provided until the resolution of the Change Healthcare cybersecurity incident, the state will not be enforcing the requirement that prescribers be known to the Medicaid system.

T.N. # ______ Approval Date_July 18, 2024

Supersedes T.N. # New Effective Date 2-21-24

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: <u>UTAH</u>

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T.N. # ______ Approval Date <u>July 18, 2</u>024

Supersedes T.N. # New Effective Date 2-21-24

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State: <u>UTAH</u>

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