

CONTINUOUS ELIGIBILITY FOR MEDICAID

2012 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Dean Sanpei

Senate Sponsor: _____

LONG TITLE

General Description:

This bill amends the Medical Assistance Act to permit the state Medicaid program to amend the state plan to allow continuous eligibility for an individual for up to 12 months and to implement payment and delivery reform.

Highlighted Provisions:

This bill:

▶ authorizes the state Medicaid program to amend the state plan to:

• permit 12 month continuous eligibility for an individual if it would increase quality of care and if it is cost effective; and

• include in Medicaid managed care contracts incentives for seeking appropriate care in appropriate settings;

▶ authorizes the Medicaid program to select certain populations or geographic areas to include in the amendments to the state Medicaid plan; and

▶ authorizes the Medicaid program to apply for a waiver or demonstration project, if necessary to implement 12 month continuous enrollment or incentives for seeking appropriate care.

Money Appropriated in this Bill:

None

Other Special Clauses:

None



28 **Utah Code Sections Affected:**

29 ENACTS:

30 **26-18-16**, Utah Code Annotated 1953



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

33 Section 1. Section **26-18-16** is enacted to read:

34 **26-18-16. Medicaid -- Continuous eligibility -- Promoting payment and delivery**
35 **reform.**

36 (1) In accordance with Subsection (2), and within appropriations from the Legislature,
37 the department may amend the state Medicaid plan to:

38 (a) create continuous eligibility for up to 12 months for an individual who has qualified
39 for the state Medicaid program;

40 (b) provide incentives in managed care contracts for an individual to obtain appropriate
41 care in appropriate settings; and

42 (c) require the managed care system to accept the risk of managing the Medicaid
43 population assigned to the plan amendment in return for receiving the benefits of providing
44 quality and cost effective care.

45 (2) If the department amends the state Medicaid plan under Subsection (1)(a) or (b),
46 the department:

47 (a) shall ensure that the plan amendment:

48 (i) is cost effective for the state Medicaid program;

49 (ii) increases the quality and continuity of care for recipients; and

50 (iii) calculates and transfers administrative savings from continuous enrollment from
51 the Department of Workforce Services to the Department of Health; and

52 (b) may limit the plan amendment under Subsection (1)(a) or (b) to select geographic
53 areas or specific Medicaid populations.

54 (3) The department may seek approval for a state plan amendment, waiver, or a
55 demonstration project from the Secretary of Health and Human Services if necessary to
56 implement a plan amendment under Subsection (1)(a) or (b).

Legislative Review Note
as of 1-23-12 9:23 AM

Office of Legislative Research and General Counsel