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State/Territory Name: Utah

State Plan Amendment (SPA) UT: 23-0004

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 & HUMAN SERVICES

Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
233 North Michigan Ave., Suite 600
Chicago, Illinois 60601



Financial Management Group

June 20, 2023

Jennifer Strohecker
State Medicaid Director
Division of Integrated Healthcare
Utah Department of Health & Human Services
P O Box 144102
Salt Lake City UT 84114-4102

RE: Utah TN: 23-0004

Dear Director Jennifer Strohecker,

We have reviewed the proposed Utah State Plan Amendment (SPA) to Attachment 4.19-B, UT-23-0004, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on March 24, 2023. The purpose of this SPA is to provide language to facilitate reimbursement for pharmacist cognitive services such as MTM services and contraceptive prescribing.

Based upon the information provided by the State, we have approved the amendment with an effective date of January 1, 2023. We are enclosing the approved CMS-179 and a copy of the new state plan page.

If you have any additional questions or need further assistance, please contact Monica Neiman at: Monica.Neiman@cms.hhs.gov

Sincerely,

[Redacted Signature]

Todd McMillion
Director
Division of Reimbursement Review

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 3 — 0 0 0 4

2. STATE

UTAH

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT

XIX XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

January 1, 2023

5. FEDERAL STATUTE/REGULATION CITATION

~~42 CFR 440.120~~, 1905(a)(6)(d)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2023 \$ 2,569
b. FFY 2024 \$ 10,276

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Page 20 of ATTACHMENT 4.19-B

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Page 20 of Attachment 4.19-B: NEW page

9. SUBJECT OF AMENDMENT

~~Self-Administered Contraceptive Reimbursement~~ The purpose of this SPA is to provide language to facilitate reimbursement for pharmacist cognitive services such as MTM services and contraceptive prescribing.

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:

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME
Tracy S. Gruber

13. TITLE
Executive Director, Utah Dept of Health and Human Services

14. DATE SUBMITTED
March 24, 2023

15. RETURN TO

Craig Devashrayee
Utah Department of Health and Human Services
Division of Integrated Healthcare
cdevashrayee@utah.gov

FOR CMS USE ONLY

16. DATE RECEIVED
March 24, 2023

17. DATE APPROVED
June 20, 2023

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
January 1, 2023

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL
Todd McMillion

21. TITLE OF APPROVING OFFICIAL
Director, Division of Reimbursement Review

22. REMARKS

Pen and ink approved by the state and processed by CMS on the following fields:
Box 5: 1905(a)(6)(d): For Other Licensed Practitioner (OLP) Benefits
Box 8: Page 20 of Attachment 4.19-B: NEW page
Box 9: The purpose of this SPA is to provide language to facilitate reimbursement for pharmacist cognitive services such as MTM services and contraceptive prescribing.

LICENSED PHARMACIST SERVICES

Effective January 1, 2023, pharmacist services are to be reimbursed a one-time payment of \$20 per member per year for family planning consultation and prescribing services and in accordance with approved services. Except as otherwise noted in the plan, state-developed rates are the same for both governmental and private providers of pharmacy services.

T.N. # 23-0004

Approval Date June 20, 2023

Supersedes T.N. # New

Effective Date 1-1-23