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State/Territory Name: Utah

State Plan Amendment (SPA) #: 25-0004

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Companion Letter
- 3) Form CMS-179
- 4) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

January 9, 2026

Julie Ewing
Director
Division of Integrated Healthcare
Utah Department of Health and Human Services
P.O. Box 143101
Salt Lake City, UT 84114-3101

Re: Utah State Plan Amendment (SPA) - 25-0004

Dear Director Ewing:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 25-0004. This amendment proposes to mandatory coverage in accordance with Section 1902(a)(84)(D) of the Social Security Act (the Act) for eligible juveniles who are incarcerated in a public institution post-adjudication of charges.

We conducted our review of your submittal according to statutory requirements in Section 1902(a)(84)(D) of the Act. This letter informs you that Utah Medicaid SPA TN 25-0004 was approved on January 9, 2026, with an effective date of January 1, 2025, and will sunset on December 31, 2026.

Enclosed are copies of Form CMS-179, a companion letter, and approved SPA pages to be incorporated into the Utah State Plan.

If you have any questions, please contact Tyler Deines at (202) 260-6048 or via email at Tyler.Deines@cms.hhs.gov.

Sincerely,



Wendy E. Hill Petras, Acting Director
Division of Program Operations

Enclosures

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P.O. Box 143101
Salt Lake City, UT 84114-3101

Re: Utah State Plan Amendment (SPA) - 25-0004

Dear Director Ewing:

The Centers for Medicare & Medicaid Services (CMS) is sending this companion letter to UT-25-0004, approved on January 9, 2026. This State Plan Amendment (SPA) amends the Medicaid State Plan to provide for mandatory coverage in accordance with section 1902(a)(84)(D) of the Social Security Act (the Act) for eligible juveniles who are incarcerated in a public institution post-adjudication of charges. As noted in the approval letter and State Plan, this SPA is effective January 1, 2025, and will sunset on December 31, 2026. The state must complete the actions identified in this letter by the sunset date. Once these actions are completed, the state should submit a SPA to remove the sunset date from the State Plan.

Effective January 1, 2025, section 1902(a)(84)(D) of the Act requires states to have an internal operational plan and, in accordance with such plan, provide for the following for eligible juveniles as defined in section 1902(nn) of the Act (individuals who are under 21 years of age and determined eligible for any Medicaid eligibility group, or individuals determined eligible for the mandatory eligibility group for former foster care children under 42 C.F.R. § 435.150 who are at least age 18 but under age 26) who are within 30 days of their scheduled date of release from a public institution following adjudication:

- In the 30 days prior to release (or not later than one week, or as soon as practicable, after release from the public institution), and in coordination with the public institution, the state must provide any screenings and diagnostic services which meet reasonable standards of medical and dental practice, as determined by the state, or as otherwise indicated as medically necessary, in accordance with the Early and Periodic Screening, Diagnostic, and Treatment requirements, including a behavioral health screening or diagnostic service.

- In the 30 days prior to release and for at least 30 days following release, the state must provide targeted case management services, including referrals to appropriate care and services available in the geographic region of the home or residence of the eligible juvenile, where feasible, under the Medicaid State Plan (or waiver of such plan).

We appreciate the state's efforts to implement this mandatory coverage and recognize the progress that has been made, as well as the complexities associated with full implementation. However, during the review of UT-25-0004, CMS identified actions that must be completed to fully implement mandatory coverage in accordance with section 1902(a)(84)(D) of the Act. CMS is issuing this companion letter to document these actions and establish a timeframe for their completion.

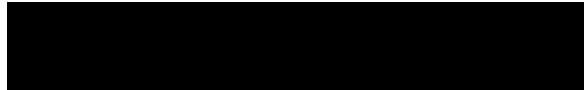
The state must complete the following actions by December 31, 2026, to fully implement section 1902(a)(84)(D) of the Act. Once these actions are completed, the state should submit a SPA to remove the sunset date from the state plan.

1. **Ongoing State Medicaid operations and capacity development for implementation:** Continue with state internal activities, including updates to the internal operational plan, additional policy development to meet the requirements in 1902(a)(84)(D) and related supports such as readiness and monitoring tools, increasing staff, internal process updates and training, and claims and enrollment system updates.
2. **Engagement activities to increase carceral facility willingness and readiness to participate in programs statewide:** Continue meeting with carceral facilities to discuss if it is feasible to provide services and next steps on enrolling, billing, and providing services, as well as technical changes needed to identify release dates, track, and implement. Determine and document facilities that will furnish required services without enrolling in or billing Medicaid in the internal operational plan. Work with carceral facilities to submit a “final” readiness assessment showing policy and process compliance for required areas.
3. **Educate, train, and enroll providers in Medicaid:** Conduct activities to ensure new providers are educated on Medicaid general policy and requirements and receive provider enrollment training. Complete the screening and enrollment tasks associated with enrolling providers who can perform the services as required by 1902(a)(84)(D).
4. **Conduct claims and billing provider training and support:** Train and provide technical support and prepare for inquiries from new providers who will submit claims to Medicaid and/or contract with community-based screening and diagnostic and TCM providers,
5. **Conduct focused training and activities for former foster adults up to age 26:** Conduct additional training and activities for readiness to prepare adult carceral facilities to implement required services in order to serve former foster care individuals who reside in the adult carceral settings.
6. **Operational activities to ensure and facilitate connections to post-release care providers:** Build related operational policies and procedures and conduct training and system updates to ensure connections to post-release care are monitored and made.

7. **Prepare to Launch oversight and monitoring.** Implement processes to ensure that all required measures and metrics are reported on in a timely and accurate manner.

As always, CMS is available to provide technical assistance on any of these actions. If you have any questions, please contact Tyler Deines at (202) 260-6048 or via email at Tyler.Deines@cms.hhs.gov.

Sincerely,



Wendy E. Hill Petras, Acting Director
Division of Program Operations

Enclosures

**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 441.18(a)(8)(i) and 441.18(a)(9).
Section 1902(a)(84)(D) of the Social Security Act

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
Pages 1-2 of Attachment 3.1-M (NEW)
Pages 1 through 3 of Attachment 3.1-M
Pages 1 through 7 of Attachments 3.1-A and 3.1-B

1. TRANSMITTAL NUMBER <u>2 5 - 0 0 0 4</u>	2. STATE <u>UTAH</u>
3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	

4. PROPOSED EFFECTIVE DATE
January 1, 2025

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
a. FFY 2025 \$ 67,975
b. FFY 2026 \$ 203,926

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

9. SUBJECT OF AMENDMENT

Coverage for Juveniles who Reside in Correctional Facilities. This amendment allows individuals under 21 years of age and within 30 days of their release from a correctional facility to receive Medicaid benefits. It also allows these individuals to become eligible for former foster care coverage and TCM services. Provides coverage for eligible juveniles who are inmates of a public institution post adjudication of charges.

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 & Human Services

14. DATE SUBMITTED
March 31, 2025

15. RETURN TO

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

FOR CMS USE ONLY

16. DATE RECEIVED
March 31, 2025

17. DATE APPROVED
January 9, 2026

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
January 1, 2025

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL
Wendy E. Hill Petras

21. TITLE OF APPROVING OFFICIAL

Acting Director, Division of Program Operations

22. REMARKS

Blocks 5, 7, and 9: State approved pen and ink changes on 01/06/2026.

**Mandatory Coverage for
Eligible Juveniles who are
Inmates of a Public Institution
Post Adjudication of Charges**

State/Territory: UTAH

General assurances. State must indicate compliance with all four items below with a check.

- In accordance with section 1902(a)(84)(D) of the Social Security Act, the state has an internal operational plan and, in accordance with such plan, provides for the following for eligible juveniles as defined in 1902(nn) (individuals who are under 21 years of age and determined eligible for any Medicaid eligibility group, or individuals determined eligible for the mandatory eligibility group for former foster care children age 18 up to age 26, immediately before becoming an inmate of a public institution or while an inmate of a public institution) who are within 30 days of their scheduled date of release from a public institution following adjudication:
 - In the 30 days prior to release (or not later than one week, or as soon as practicable, after release from the public institution), and in coordination with the public institution, any screenings and diagnostic services which meet reasonable standards of medical and dental practice, as determined by the state, or as otherwise indicated as medically necessary, in accordance with the Early and Periodic Screening, Diagnostic, and Treatment requirements, including a behavioral health screening or diagnostic service.
 - In the 30 days prior to release and for at least 30 days following release, targeted case management services, including referrals to appropriate care and services available in the geographic region of the home or residence of the eligible juvenile, where feasible, under the Medicaid state plan (or waiver of such plan).
- The state acknowledges that a correctional institution is considered a public institution and may include prisons, jails, detention facilities, or other penal settings (e.g., boot camps or wilderness camps).

PRA Disclosure Statement - This use of this form is mandatory and the information is being collected to assist the Centers for Medicare & Medicaid Services in implementing Section 5121 of the Consolidated Appropriations Act, 2023. Under the Privacy Act of 1974, any personally identifying information obtained will be kept private to the extent of the law. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB control number for this project is 0938-1148 (CMS-10398 #85). Public burden for all of the collection of information requirements under this control number is estimated to take about 50 hours per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CMS, 7500 Security Boulevard, Attn: Paperwork Reduction Act Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

TN: 25-0004

Approval Date: 1-9-26

Supersedes: New

Effective Date: 1-1-25

Additional information provided (optional):

No

Yes [provide below]

The authority to provide for mandatory coverage for eligible juveniles who are inmates of a public institution post adjudication of charges will cease on December 31, 2026.

The state may determine that it is not feasible to provide the required services during the pre-release period in certain carceral facilities (e.g., identified local jails, youth correctional facilities, and state prisons) and/or certain circumstances (e.g. unexpected release or short-term stays). The state will maintain clear documentation in its internal operational plan regarding each facility and/or circumstances where the state determines that it is not feasible to provide for the required services during the pre-release period. This information is available to CMS upon request. Services will be provided post-release, including the mandatory 30-days of targeted case management, screening, and diagnostic services.

The state will maintain clear documentation in its internal operational plan indicating which carceral facility/facilities are furnishing required services during the pre-release period but not enrolling in or billing Medicaid. This information is available to CMS upon request.

PRA Disclosure Statement - This use of this form is mandatory and the information is being collected to assist the Centers for Medicare & Medicaid Services in implementing Section 5121 of the Consolidated Appropriations Act, 2023. Under the Privacy Act of 1974, any personally identifying information obtained will be kept private to the extent of the law. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number. The OMB control number for this project is 0938-1148 (CMS-10398 #85). Public burden for all of the collection of information requirements under this control number is estimated to take about 50 hours per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CMS, 7500 Security Boulevard, Attn: Paperwork Reduction Act Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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