

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
OR: HEALTH CARE FINANCING ADMINISTRATION**

1. TRANSMITTAL NUMBER:
10-011-UT

2. STATE:
Utah

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

4. PROPOSED EFFECTIVE DATE
October 1, 2010

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 431.12

7. FEDERAL BUDGET IMPACT:

a. FFY 2011 \$0
b. FFY 2012 \$0

Bob

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Page 9 of Section 1.4 of the State Plan

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (*If Applicable*)

Page 9 of Section 1.4 of the State Plan

10. SUBJECT OF AMENDMENT:

Tribal Consultation Requirements

11. 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. SIGNATURE OF STATE AGENCY OFFICIAL:

David N. Sundwall 11/2/10

13. TYPED NAME:

David N. Sundwall, MD

14. TITLE:

Executive Director, Utah Department of Health

15. DATE SUBMITTED:

November 4, 2010

16.

17. DATE RECEIVED:

11/4/10

16. RETURN TO:

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

18. DATE APPROVED:

4/7/11

FOR REGIONAL USE ONLY

19. EFFECTIVE DATE OF APPROVED MATERIAL:

10/1/10

20. SIGNATURE OF REGIONAL OFFICIAL:

Richard C. Allen

21. TYPED NAME:

Richard C. Allen

22. TITLE:

ARA, DMCHO

PLAN APPROVED - ONE COPY ATTACHED

3. REMARKS

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
1600 Broadway, Suite 700
Denver, CO 80202-4967



Region VIII

April 7, 2011

W. David Patton, Ph.D.
Utah Department of Health
288 North 1460 West
PO Box 143102
Salt Lake City, UT 84114

RE: Utah #10-011

Dear Dr. Patton:

We have reviewed the proposed State Plan Amendment (SPA) submitted under transmittal number (TN) 10-011. The purpose of this SPA is to implement the Tribal Consultation Requirements from Section 1902(a)(73) of the Social Security Act.

Please be informed that this State Plan Amendment is approved effective October 1, 2010. We are enclosing the CMS-179 and the amended plan page(s).

If you have any questions concerning this amendment, please contact Cindy Smith at (303) 844-7041.

Sincerely,

Richard C. Allen
Associate Regional Administrator
Division for Medicaid and Children's Health

CC: Michael Hales, Medicaid Director, UT
Craig Devashrayee, UT

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

State: UTAH

SECTION 1 - SINGLE STATE AGENCY ORGANIZATION (Continued)

Citation	1.4 <u>State Medical Care Advisory Committee</u>
42 CFR 431.12(b) AT-78-90	There is an advisory committee to the Medicaid agency director on health and medical care services established in accordance with and meeting all the requirements of 42 CFR 431.12.
42 CFR 438.104	<input checked="" type="checkbox"/> The State enrolls recipients in MCO, PIHP, PAHP, and/or PCCM programs. The State assures that it complies with 42 CFR 438.104(c) to consult with the Medical Care Advisory Committee in the review of marketing materials. The State does not allow marketing as defined in 438.104(a).

Tribal Consultation Requirements

Section 1902(a)(73) of the Social Security Act (the Act) requires a State in which one or more Indian health programs or Urban Indian organizations furnish health care services to establish a process for the State Medicaid agency to seek advice on a regular, ongoing basis from designees of Indian health programs, whether operated by the Indian Health Service (IHS), Tribes or Tribal organizations under the Indian Self-Determination and Education Assistance Act (ISDEAA), or Urban Indian organizations under the Indian Health Care Improvement Act (IHCA). Section 2107(e)(1) of the Act was also amended to apply these requirements to the Children's Health Insurance Program (CHIP). Consultation is required concerning Medicaid and CHIP matters having a direct impact on Indian health programs and Urban Indian organizations.

The Utah Department of Health (UDOH) and Utah Medicaid utilize an established model to seek advice on a regular, ongoing basis from Utah Tribal governments, IHS and the Urban Indian Organization. The three key components of the model are the Utah Federally Recognized Tribal Consultation Policy, the Utah Indian Health Advisory Board (UIHAB), and the UDOH Indian Health Liaison/Health Policy Consultant.

UDOH Tribal Consultation Policy is the framework for how the State, Tribal governments, Urban Indian Organization, UDOH, and Medicaid communicate regarding all health issues. This policy is signed by all Utah Tribal leadership, the Governor, the UDOH Executive Director, and the Urban Indian Organization. The policy delineates the responsibilities of UDOH, UIHAB, and the UDOH Indian Health Liaison.

T.N. # 10-011

Approval Date 4/7/11

Supersedes T.N. # 03-016

Effective Date 10-1-10

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

State: _____ UTAH _____

SECTION 1 - SINGLE STATE AGENCY ORGANIZATION (Continued)

Tribal Consultation Requirements (Continued)

UIHAB is comprised of appointed health representatives from all seven Tribal governments, IHS and the Urban Indian Organization in Utah. In addition, UIHAB has representation from three Indian Health Services Area Offices providing services to American Indian/Alaska Natives (AI/AN) in Utah, Albuquerque, Navajo, and Phoenix. This Board meets monthly and is facilitated by the UDOH Indian Health Liaison. The meeting has several standing agenda items that include Medicaid, CHIP and SPA/Rulemaking. All State Plan Amendments and waivers are presented to the Board. The items or updates are presented to the Board as the initial step in the consultation process. If UIHAB or any individual Tribe feels the need for further consultation specific to the issue at hand, a formal request is made (as noted in Consultation policy) and a separate consultation meeting is scheduled specific to that issue. If there are no impacts noted from UIHAB representatives, no further discussion is required.

The UDOH Indian Health Liaison schedules and facilitates UIHAB meetings, tracks information and requests, ensures there are appropriate meeting minutes, and coordinates with the UIHAB Executive Committee to set the agenda. The Indian Health Liaison reports on a quarterly basis to the Utah Tribal Leaders on issues that include health care access, barriers to care or services, improvements, projects, data, policy initiatives and updates, and other UDOH business impacting tribal and Urban Indian communities.

If additional consultation is requested, the liaison works with UDOH and the Tribe(s) requesting consultation to plan and carry out a consultation meeting. The liaison documents any steps taken and sends out final documentation to UDOH and the Tribe(s).

T.N. # 10-011 Approval Date 4/7/11
Supersedes T.N. # New Effective Date 10-1-10

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
MEDICAL ASSISTANCE PROGRAM

State: _____ UTAH _____

SECTION 1 - SINGLE STATE AGENCY ORGANIZATION (Continued)

Tribal Consultation Requirements (Continued)

The Indian Health Liaison was contacted by Medicaid in April 2010 for guidance on the best process to inform Utah Tribal and Urban Indian organization representatives of this new consultation requirement for Medicaid and CHIP. The UIHAB Executive Committee was informed and approved the request for standing agenda items for Medicaid and the CHIP State Plan. The new standing agenda item was placed on the agenda for the July 2010 UIHAB meeting.

T.N. # _____ 10-011 _____

Approval Date 4/7/11

Supersedes T.N. # New

Effective Date 10-1-10