

DMHF Rules Matrix 12-17-15

Rule; (What It Does); Comments.	File	Effective
<p>R414-1-7 Aliens; The purpose of this change is to remove provisions from the rule text that no longer apply to the Medicaid Member Card.</p>	<p>10-15-15</p>	<p>12-8-15</p>
<p>R414-3A-6 Services; The purpose of this change is to remove provisions from the rule text that no longer apply to the Medicaid Member Card.</p>	<p>10-15-15</p>	<p>12-8-15</p>
<p>R414-512 Use of Extrapolation in Provider Audits; This new rule complies with rulemaking requirements set forth in S.B. 61, passed during the 2015 General Session of the Legislature. It sets forth the conditions under which the Department or one of its contractors may use extrapolation in provider audits.</p>	<p>11-5-15</p>	<p>1-7-16</p>
<p>R410-14 Administrative Hearing Procedures (Repeal and Reenact); This new rule restructures administrative hearing procedures to implement informal hearings as the standard grievance process for the Division of Medicaid and Health Financing. Accordingly, the rule includes new definitions and updates others for clarification, includes additional provisions for hearing notification, includes provisions to clarify reinstatement and continuation of services, clarifies provisions for adjudicative procedures and hearing availability, includes a provision for recording other administrative proceedings, and includes provisions for telephonic hearings, travel costs, and witness testimony. The new rule also eliminates rules of discovery set forth in the repealed rule and clarifies and removes other formal hearing provisions. It also removes provisions for intervention, prehearing meetings, and written notice contained in the repealed rule.</p>	<p>12-8-15</p>	<p>2-8-16</p>
<p>R414-1A Medicaid Policy for Experimental, Investigational or Unproven Medical Practices; The purpose of this change is to consolidate the scope of Medicaid policy for experimental, investigational or unproven medical practices to the Medicaid provider manual.</p>	<p>12-9-15</p>	<p>2-8-16</p>

UDOH ELECTRONIC RULEMAKING

I. General Information

A. Rule Number:	R414-1-7
B. Title of Rule or Section	Aliens
C. Originating Division/Office:	Division of Medicaid and Health Financing
D. Contact person:	John Strong
E. Telephone:	(801) 538-6587

II. Notice of Proposed Rule or Change

3. Type of notice:				
Proposed rules	<input type="checkbox"/> New <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> Repeal <input type="checkbox"/> Repeal and reenact			
Other rule types	Change in proposed rule (changes original proposed rule file no.: _____)			
4. Purpose of the rule or reason for the change: The purpose of this change is to remove provisions from the rule text that no longer apply to the Medicaid Member Card.				
5. This rule or change is a response to comments by the Administrative Rules Review Committee.	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px;">Yes</td> <td style="width: 20px;">X</td> <td style="width: 20px;">No</td> </tr> </table>	Yes	X	No
Yes	X	No		
6. Summary of the rule or change: This amendment removes provisions from the rule text that no longer apply to the Medicaid Member Card.				
7. AGGREGATE anticipated cost or savings to:				
State budget:	There is no impact to the state budget because this amendment only updates the rule text to be consistent with Medicaid policy.			
Local government:	There is no impact to local governments because this amendment only updates the rule text to be consistent with Medicaid policy.			
Small businesses (fewer than 50 employees)	There is no impact to small businesses because this amendment only updates the rule text to be consistent with Medicaid policy.			
Businesses, individuals, local governments, and persons that are not small businesses:	There is no impact to Medicaid providers and to Medicaid recipients because this amendment only updates the rule text to be consistent with Medicaid policy.			
8. Compliance costs for affected persons ("person" means any SINGLE individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an agency): There is no impact to a single Medicaid provider or to a Medicaid recipient because this amendment only updates the rule text to be consistent with Medicaid policy.				
9. Comments by department head on the fiscal impact the rule may have on businesses: There is no impact on business because this amendment updates the rule to be consistent with existing Medicaid policy. – Joseph K. Miner, M.D., Executive Director				
10. This rule or change is authorized or mandated by state law, and implements or interprets the following state and federal laws.				
State code or constitution citations (required):	Sections 26-1-5 and 26-18-3			
Federal citations (optional):				
11. This rule or change adds or updates an incorporated reference (submit a copy to DAR):	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px;">Yes</td> <td style="width: 20px;">X</td> <td style="width: 20px;">No</td> </tr> </table>	Yes	X	No
Yes	X	No		
12. The public may submit written or oral comments to the agency identified in I. General Information:				
Comments will be accepted until 5:00 p.m. on	12/01/2015			
(mm/dd/yyyy):				
A public hearing (optional) will be held on (mm/dd/yyyy):	at (time):			

at (place):			
13. This rule or change may become effective on (mm/dd/yyyy):	12/08/2015		
14. Indexing information - keywords (maximum of four, in lower case): Medicaid			
Division approvals for publication (insert comment with date):	Michael Hales	10-13-15	
Legal approvals for publication:	Stephanie M. Saperstein, AAG	10/14/15	
Executive Director approval for publication:	Joseph K. Miner, MD	Date:	10-15-15

7/28/09 revision

UDOH ELECTRONIC RULEMAKING

I. General Information

A. Rule Number:	R414-3A-6
B. Title of Rule or Section	Services
C. Originating Division/Office:	Division of Medicaid and Health Financing
D. Contact person:	John Strong
E. Telephone:	(801) 538-6587

II. Notice of Proposed Rule or Change

3. Type of notice:			
Proposed rules	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Repeal
	<input type="checkbox"/> Repeal and reenact		
Other rule types	<input type="checkbox"/> Change in proposed rule	(changes original proposed rule file no.:	<input type="text"/>)
4. Purpose of the rule or reason for the change: The purpose of this change is to remove provisions from the rule text that no longer apply to the Medicaid Member Card.			
5. This rule or change is a response to comments by the Administrative Rules Review Committee.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/>
6. Summary of the rule or change: This amendment removes provisions from the rule text that no longer apply to the Medicaid Member Card.			
7. AGGREGATE anticipated cost or savings to:			
State budget:	There is no impact to the state budget because this amendment only updates the rule text to be consistent with Medicaid policy.		
Local government:	There is no impact to local governments because this amendment only updates the rule text to be consistent with Medicaid policy.		
Small businesses (fewer than 50 employees)	There is no impact to small businesses because this amendment only updates the rule text to be consistent with Medicaid policy.		
Businesses, individuals, local governments, and persons that are not small businesses:	There is no impact to Medicaid providers and to Medicaid recipients because this amendment only updates the rule text to be consistent with Medicaid policy.		
8. Compliance costs for affected persons ("person" means any SINGLE individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an agency): There is no impact to a single Medicaid provider or to a Medicaid recipient because this amendment only updates the rule text to be consistent with Medicaid policy.			
9. Comments by department head on the fiscal impact the rule may have on businesses: There is no impact on business because this amendment updates the rule to be consistent with existing Medicaid policy. – Joseph K. Miner, M.D., Executive Director			
10. This rule or change is authorized or mandated by state law, and implements or interprets the following state and federal laws.			
State code or constitution citations (required):	Sections 26-1-5; 26-18-2.3; and 26-18-3		
Federal citations (optional):	<input type="text"/>		
11. This rule or change adds or updates an incorporated reference (submit a copy to DAR):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/>
12. The public may submit written or oral comments to the agency identified in I. General Information:			
Comments will be accepted until 5:00 p.m. on	<input type="text" value="12/01/2015"/>		
(mm/dd/yyyy):	<input type="text"/>		
A public hearing (optional) will be held on (mm/dd/yyyy):	<input type="text"/>	at (time):	<input type="text"/>

at (place):			
13. This rule or change may become effective on (mm/dd/yyyy):	12/08/2015		
14. Indexing information - keywords (maximum of four, in lower case): Medicaid			
Division approvals for publication (insert comment with date):	Michael Hales	10-13-15	
Legal approvals for publication:	Stephanie M. Saperstein, AAG	10/14/15	
Executive Director approval for publication:	Joseph K. Miner, MD	Date:	10-15-15

7/28/09 revision

UDOH ELECTRONIC RULEMAKING

I. General Information

A. Rule Number:	R414-512
B. Title of Rule or Section	Use of Extrapolation in Provider Audits
C. Originating Division/Office:	Division of Medicaid and Health Financing
D. Contact person:	Aaron Eliason
E. Telephone:	(801) 538-6176

II. Notice of Proposed Rule or Change

3. Type of notice:	
Proposed rules	<input checked="" type="checkbox"/> New <input type="checkbox"/> Amendment <input type="checkbox"/> Repeal <input type="checkbox"/> Repeal and reenact
Other rule types	Change in proposed rule (changes original proposed rule file no.: _____)
4. Purpose of the rule or reason for the change: The purpose of this rule is to comply with rulemaking requirements set forth in Senate Bill (S.B.) 61, passed during the 2015 General Session of the Legislature.	
5. This rule or change is a response to comments by the Administrative Rules Review Committee.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
6. Summary of the rule or change: This new rule complies with rulemaking requirements set forth in S.B. 61, passed during the 2015 General Session of the Legislature. It sets forth the conditions under which the Department or one of its contractors may use extrapolation in provider audits.	
7. AGGREGATE anticipated cost or savings to:	
State budget:	There is no impact to the state budget because this rule only sets forth conditions of extrapolation in provider audits. It neither affects current payment rates to Medicaid providers nor services to Medicaid recipients.
Local government:	There is no impact to local governments because this rule only sets forth conditions of extrapolation in provider audits. It neither affects current payment rates to Medicaid providers nor services to Medicaid recipients.
Small businesses (fewer than 50 employees)	There is no impact to small businesses because this rule only sets forth conditions of extrapolation in provider audits. It neither affects current payment rates to Medicaid providers nor services to Medicaid recipients.
Businesses, individuals, local governments, and persons that are not small businesses:	There is no impact because this rule only sets forth conditions of extrapolation in provider audits. It neither affects current payment rates to Medicaid providers nor services to Medicaid recipients.
8. Compliance costs for affected persons ("person" means any SINGLE individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an agency): There is no impact because this rule only sets forth conditions of extrapolation in provider audits. It neither affects current payment rates to a single Medicaid provider nor services to a Medicaid recipient.	
9. Comments by department head on the fiscal impact the rule may have on businesses: There is no fiscal impact on business because it does not change payment rates to Medicaid providers or the kind or amount of services that Medicaid pays for eligible Medicaid participants. – Joseph K. Miner, M.D., Executive Director	
10. This rule or change is authorized or mandated by state law, and implements or interprets the following state and federal laws.	
State code or constitution citations (required):	Sections 26-1-5 and 26-18-3
Federal citations (optional):	
11. This rule or change adds or updates an incorporated reference (submit a copy to DAR):	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
12. The public may submit written or oral comments to the agency identified in I. General Information:	

Comments will be accepted until 5:00 p.m. on 12/31/2015 (mm/dd/yyyy):		
A public hearing (optional) will be held on (mm/dd/yyyy):		at (time):
at (place):		
13. This rule or change may become effective on (mm/dd/yyyy):	01/07/2016	
14. Indexing information - keywords (maximum of four, in lower case): Medicaid		
Division approvals for publication (insert comment with date):	Michael Hales	10-27-15
Legal approvals for publication:	Stephanie Saperstein	11/5/15
Executive Director approval for publication:	Joseph K. Miner, MD	Date: 11-5-15

7/28/09 revision

UDOH ELECTRONIC RULEMAKING

I. General Information

A. Rule Number:	R410-14
B. Title of Rule or Section	Administrative Hearing Procedures
C. Originating Division/Office:	Division of Medicaid and Health Financing
D. Contact person:	Emma Chacon
E. Telephone:	(801) 538-6577

II. Notice of Proposed Rule or Change

3. Type of notice:			
Proposed rules	<input type="checkbox"/>	New	<input type="checkbox"/>
	<input checked="" type="checkbox"/>	Repeal and reenact	
	<input type="checkbox"/>	Amendment	
	<input type="checkbox"/>	Repeal	
Other rule types	<input type="checkbox"/>	Change in proposed rule	(changes original proposed rule file no.: <input type="text"/>)
4. Purpose of the rule or reason for the change: The purpose of this rule is to update and clarify administrative hearing procedures for the Medicaid program.			
5. This rule or change is a response to comments by the Administrative Rules Review Committee.	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>
		No	<input type="checkbox"/>
6. Summary of the rule or change: This new rule restructures administrative hearing procedures to implement informal hearings as the standard grievance process for the Division of Medicaid and Health Financing. Accordingly, the rule includes new definitions and updates others for clarification, includes additional provisions for hearing notification, includes provisions to clarify reinstatement and continuation of services, clarifies provisions for adjudicative procedures and hearing availability, includes a provision for recording other administrative proceedings, and includes provisions for telephonic hearings, travel costs, and witness testimony. The new rule also eliminates rules of discovery set forth in the repealed rule and clarifies and removes other formal hearing provisions. It also removes provisions for intervention, prehearing meetings, and written notice contained in the repealed rule.			
7. AGGREGATE anticipated cost or savings to:			
State budget:	There is no impact to the state budget because there are no administrative costs associated with the updates and clarifications set forth in the new rule.		
Local government:	There is no impact to local governments because there are no administrative costs associated with the updates and clarifications set forth in the new rule.		
Small businesses (fewer than 50 employees)	There is no impact to small businesses because there are no administrative costs associated with the updates and clarifications set forth in the new rule.		
Businesses, individuals, local governments, and persons that are not small businesses:	There is no impact to Medicaid providers and to Medicaid recipients because there are no administrative costs associated with the updates and clarifications set forth in the new rule.		
8. Compliance costs for affected persons ("person" means any SINGLE individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an agency): There are no compliance costs to a single Medicaid provider or to a Medicaid recipient because there are no administrative costs associated with the updates and clarifications set forth in the new rule.			
9. Comments by department head on the fiscal impact the rule may have on businesses: There would be no fiscal impact to business because it does not impose additional requirements on providers who request an administrative hearing or affect funding of services provided through the Medicaid program. – Dr. Joseph K. Miner, M.D., Executive Director			
10. This rule or change is authorized or mandated by state law, and implements or interprets the following state and federal laws.			
State code or constitution citations (required):	Sections 26-1-5 and 26-1-24		
Federal citations (optional):			
11. This rule or change adds or updates an incorporated reference (submit a copy to DAR):	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>
		No	<input type="checkbox"/>

12. The public may submit written or oral comments to the agency identified in I. General Information:	
Comments will be accepted until 5:00 p.m. on (mm/dd/yyyy):	02/01/2016
A public hearing (optional) will be held on (mm/dd/yyyy):	
at (place):	
	at (time):

13. This rule or change may become effective on (mm/dd/yyyy):	02/08/2016
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14. Indexing information - keywords (maximum of four, in lower case):
 Medicaid

Division approvals for publication (insert comment with date):	Michael Hales	11-25-15
Legal approvals for publication:	Stephanie M. Saperstein, AAG	12/7/15
Executive Director approval for publication:	Joseph K. Miner, MD	Date: 12-8-15

DOH ELECTRONIC RULEMAKING

I. General Information

A. Rule Number:	R414-1A
B. Title of Rule or Section	Medicaid Policy for Experimental, Investigational or Unproven Medical Practices
C. Originating Division/Office:	Division of Medicaid and Health and Financing
D. Contact person:	Nina Baker
E. Telephone:	(801) 538-9127

II. Notice of Proposed Rule or Change

3. Type of notice:			
Proposed rules	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Repeal
	<input type="checkbox"/> Repeal and reenact		
Other rule types	<input type="checkbox"/> Change in proposed rule	(changes original proposed rule file no.:	<input type="text"/>)
4. Purpose of the rule or reason for the change: The purpose of this change is to consolidate the scope of Medicaid policy for experimental, investigational or unproven medical practices to the Medicaid provider manual.			
5. This rule or change is a response to comments by the Administrative Rules Review Committee.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X	<input type="checkbox"/> No
6. Summary of the rule or change: This amendment removes all provisions in the rule text and defers to the scope of policy for experimental, investigational or unproven medical practices found in Section I: General Information Utah Medicaid Provider Manual and in the Medicaid State Plan.			
7. AGGREGATE anticipated cost or savings to:			
State budget:	There is no impact to the state budget because services provided to Medicaid recipients remain unaffected by this change.		
Local government:	There is no impact to local governments because services provided to Medicaid recipients remain unaffected by this change.		
Small businesses (fewer than 50 employees)	There is no impact to small businesses because services provided to Medicaid recipients remain unaffected by this change.		
Businesses, individuals, local governments, and persons that are not small businesses:	There is no impact to Medicaid providers and to Medicaid recipients because services provided to Medicaid recipients remain unaffected by this change.		
8. Compliance costs for affected persons ("person" means any SINGLE individual, partnership, corporation, association, governmental entity, or public or private organization of any character other than an agency): There are no compliance costs to a single Medicaid provider or to a Medicaid recipient because services provided remain unaffected by this change.			
9. Comments by department head on the fiscal impact the rule may have on businesses: There is no fiscal impact to business because the rule does not change any requirements for Medicaid providers nor does it change any payment or funding to those providers. – Dr. Joseph K. Miner, M.D., Executive Director			
10. This rule or change is authorized or mandated by state law, and implements or interprets the following state and federal laws.			
State code or constitution citations (required):	Section 26-1-5 and Subsection 26-18-3(2)		
Federal citations (optional):	42 CFR 405.201		
11. This rule or change adds or updates an incorporated reference (submit a copy to DAR):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X	<input type="checkbox"/> No
Reference title and date of issue or edition:	<input type="text"/>		

12. The public may submit written or oral comments to the agency identified in I. General Information:

Comments will be accepted until 5:00 p.m. on
(mm/dd/yyyy):

02/01/2016

A public hearing (optional) will be held on (mm/dd/yyyy):

at (time):

at (place):

13. This rule or change may become effective on
(mm/dd/yyyy):

02/08/2016

14. Indexing information - keywords (maximum of four, in lower case):

Medicaid

Division approvals for publication (insert
comment with date):

Michael Hales

12/04/2015

Legal approvals for publication:

Stephanie M. Saperstein, AAG

12/8/15

Executive Director approval for publication:

Joseph Miner, MD

Date:

12/8/15