



Utah Medicaid Cost Management NAVIGATOR 2009-10

A Utah Health Policy Project Issue Brief

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	FY2010	FY 2011
Mandatory Expenses		
Utilization & Caseload Growth	\$17,000,000	\$40,000,000
Mandatory Provider Inflation		\$7,736,400
Total, Mandatory		\$47,736,400
Restorations of FY2009 Cuts to Services, Eligibility and Providers		
Dental Services for Age/Blind/Disabled		\$2,000,000
Vision Services for Adults		\$187,084
Occupational Therapy		\$6,661
Physical Therapy		\$97,322
Speech and Hearing		\$134,644
Non-Physician provider reimbursement to FY2009 levels		\$9,502,079
Physician rates to FY09 levels		\$429,700
Restore Hospital Reimbursement		\$11,000,000
Total Restorations		\$23,357,490
Cost Avoidance Expansions		
Family Planning Waiver		\$4,300,000
Preventive Dental Services for Parents		\$2,800,000
Remove 5 year waiting period of legal permanent resident children		\$391,600
Total Cost Avoidance		\$7,491,600
Medicaid Enhancements		
Total		78,585,490
Medicaid Efficiencies		
Remove PDL drug exemptions		\$200,000
Fraud Prevention (net)		\$500,000
Revenue Enhancements (in priority order; full amount available shown)		
1. Tobacco Tax (\$2 per pack)		\$60,000,000
2. Restoration of Sales Tax on Food		\$185,000,000
3. Hospital assessment		\$11,000,000
4. Rainy Day Fund		\$414,000,000

Medicaid has seen 20% enrollment growth over the last 2 years. However, the program has received no new ongoing funding to cover this increase. \$40 million will pay for the 40,000+ additional enrollees since December of 2007.

These services and provider rates have been cut since the 2008 Special Session, yet all are critical in preserving the long term health of Medicaid recipients.

This will yield cost savings of **\$4.3 million** in FY2012 and future years.

This will yield cost savings of **\$1.5 million** in FY2012.

The Department of Health estimates that it can save \$1 million in fraud prevention, but only if computer systems are updated.