

SUBSTANCE USE AND HEALTH CARE AMENDMENTS

2020 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Brad M. Daw

Senate Sponsor: Allen M. Christensen

LONG TITLE

General Description:

This bill modifies and enacts provisions relating to substance use treatment and health care provided in a correctional facility.

Highlighted Provisions:

This bill:

- defines terms;
- directs the Department of Health to apply for a waiver under the state Medicaid plan to offer a program to provide Medicaid coverage to certain inmates for up to 30 days before release from a correctional facility;
- requires a county to provide matching funds to the state for Medicaid coverage, and costs relating to the Medicaid coverage, that is provided to certain inmates for up to 30 days before release from a correctional facility; and
- makes technical changes.

Money Appropriated in this Bill:

None

Other Special Clauses:

None

Utah Code Sections Affected:

ENACTS:

26-18-420, Utah Code Annotated 1953

Be it enacted by the Legislature of the state of Utah:

Section 1. Section **26-18-420** is enacted to read:

26-18-420. Medicaid waiver for coverage of qualified inmates leaving prison or jail.

(1) As used in this section:

(a) "Correctional facility" means:

(i) a county jail;

(ii) the Department of Corrections, created in Section [64-13-2](#); or

(iii) a prison, penitentiary, or other institution operated by or under contract with the Department of Corrections for the confinement of an offender, as defined in Section [64-13-1](#).

(b) "Qualified inmate" means an individual who:

(i) is incarcerated in a correctional facility; and

(ii) has:

(A) a chronic physical or behavioral health condition;

(B) a mental illness, as defined in Section [62A-15-602](#); or

(C) an opioid use disorder.

(2) Before July 1, 2020, the division shall apply for a Medicaid waiver or a state plan amendment with CMS to offer a program to provide Medicaid coverage to a qualified inmate for up to 30 days immediately before the day on which the qualified inmate is released from a correctional facility.

(3) If the waiver or state plan amendment described in Subsection (2) is approved, the department shall report to the Health and Human Services Interim Committee each year before November 30 while the waiver or state plan amendment is in effect regarding:

(a) the number of qualified inmates served under the program;

(b) the cost of the program; and

(c) the effectiveness of the program, including:

(i) any reduction in the number of emergency room visits or hospitalizations by

56 inmates after release from a correctional facility;

57 (ii) any reduction in the number of inmates undergoing inpatient treatment after release
58 from a correctional facility;

59 (iii) any reduction in overdose rates and deaths of inmates after release from a
60 correctional facility; and

61 (iv) any other costs or benefits as a result of the program.

62 (4) If the waiver or state plan amendment described in Subsection (2) is approved, a
63 county that is responsible for the cost of a qualified inmate's medical care shall provide the
64 required matching funds to the state for:

65 (a) any costs to enroll the qualified inmate for the Medicaid coverage described in
66 Subsection (2);

67 (b) any administrative fees for the Medicaid coverage described in Subsection (2); and

68 (c) the Medicaid coverage that is provided to the qualified inmate under Subsection
69 (2).