

Medicaid Information Bulletin (MIB)

Medicaid information: 1-800-662-9651

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medicaid.utah.gov

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25-14 Find A Provider Directory

On July 1, 2025, the Utah Medicaid Find A Provider online directory will be updated to comply with the Federal 21st Century Cures Act. The purpose of the directory is to help Medicaid members find a provider and improve access to care. They will be able to search providers by name, type, specialty, and location.

Beginning July 1, 2025, the Find A Provider directory must include, at a minimum, the following required information for each provider:

- Name(s) of provider
- Specialty of provider
- Address(es) where the provider offers services
- Telephone number(s) of provider
- Provider’s cultural and linguistic abilities (languages, including American Sign Language, offered by the provider or by a skilled medical interpreter who provides interpretation services at the provider’s office)
- If provider is accepting new Medicaid patients

- If provider is accepting new CHIP patients
- ADA accommodations the provider's office or facility offers for individuals with physical disabilities
- Provider's website
- Telehealth services offered

In April 2025, the Utah Medicaid PRISM portal will include the required information. Providers will be encouraged to update their provider information at <https://prism.health.utah.gov/>.

If providers have questions about their provider information, they can contact Provider Enrollment at 1-800-662-9651, option 3, then option 4.

25-15 Dental Program for Adults

Effective April 1, 2025, adult members aged 21 years and over who are currently excluded from receiving dental benefits will be eligible for dental benefits through the new Dental Program for Adults.

Adult members eligible for dental services will be required to receive services through the University of Utah School of Dentistry (UUSOD), or its [associated statewide provider network](#).

Children who are receiving Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) benefits, as well as pregnant women enrolled in a Managed Care Entity (MCE) dental plan (Premier Access or MCNA), will continue to receive dental services through their assigned dental plan.

Members enrolled in the Emergency Services Program for Non-Citizens (EOP) are not eligible for dental benefits, except for emergency dental services.

The [Medicaid website](#) and the [PRISM Coverage and Reimbursement Code Lookup Tool](#) will be updated to reflect these changes.

25-16 Telehealth Services Policy Updates

Medicaid policy for telehealth will be updated on May 1, 2025. This update will include information regarding what services may be delivered via audio-visual or audio-only telehealth. The policy changes will be found in:

- [Section I: General Information Provider Manual](#), Chapter 8-4.2
- [Utah Administrative Code R414-42](#), Telehealth.
- [All Providers General Attachments](#) document on the Medicaid website.

25-17 Non-Emergency Medical Transportation (NEMT) Updates

Unaccompanied Minors

Effective April 1, 2025, the Utah Medicaid transportation broker, Modivcare, will require members under 16 years old to be accompanied by a parent, legal guardian, or other authorized adult by the legal guardian for non-emergency medical transportation (NEMT) rides. Members exempt from the attendant requirements are pregnant minors, minors seeking treatment for tobacco and nicotine cessation, minors seeking treatment for sexually transmitted diseases, emancipated minors, lawfully married minors, homeless and 15 years old or older, and minor parents. Minors aged 16 or 17 may travel unaccompanied with written consent from the parent or legal guardian. Authorization for minors 16 and 17 to travel alone can be obtained by completing the authorization form and filing it with Modivcare before scheduling rides.

Similarly, approval for adults the legal guardian designates as an attendant can be obtained through Modivcare via an authorization form. Authorized attendants must be adults 18 years or older. For more information, refer to the [Medical Transportation Services Provider Manual](#) found on the Medicaid website.

75 Miles

Effective April 1, 2025, members utilizing NEMT provided by Modivcare will have to provide a medical necessity form signed by their provider for rides above 75 miles one-way. Per Medicaid policy, members utilizing NEMT must seek care from the closest Medicaid provider that can render services needed.

Modivcare will allow a 4-week transition period for members who need to transition to closer providers, or to file a medical necessity form with Modivcare.

25-18 Skin Substitute Service Codes

Effective March 1, 2025, skin substitute service codes Q4186, Q4187, Q4101, Q4159, Q4160, Q4196, Q4197, Q4194, Q4282, Q4133, Q4132, and Q4151 may be performed in a physician's office or a wound care clinic. These codes will be reimbursed separately from the application procedure.

25-19 Durable Medical Equipment Policy Updates

The September 2024 MIB, Article 24-78 *Durable Medical Equipment Policy Update*, announced that many Medicaid-covered Durable Medical Equipment (DME) HCPCS codes were updated and many changed from a continuous to a capped rental. This update included the following HCPCS codes.

- **E0424**- *Stationary compressed gaseous oxygen system, rental; includes container, contents, regulator, flowmeter, humidifier, nebulizer, cannula or mask, and tubing*
- **E0431**- *Portable gaseous oxygen system, rental; includes portable container, regulator, flowmeter, humidifier, cannula or mask, and tubing*
- **E0434**- *Portable liquid oxygen system, rental; includes portable container, supply mask, and tubing reservoir, humidifier, flowmeter, refill adaptor, contents gauge, cannula or mask, and tubing*
- **E0439**- *Stationary liquid oxygen system, rental; includes container, contents, regulator, flowmeter, humidifier, nebulizer, cannula or mask, and tubing*

These HCPCS codes have been changed back to continuous rental items and the effective date has been back-dated to April 1, 2023, to correspond with PRISM go-live. The policy notes for the [Coverage and Reimbursement Lookup](#) will also be updated to reflect this policy change.

25-20 Targeted Case Management for Serious Mental Illness

The Targeted Case Management for Serious Mental Illness provider manual has been updated to meet formatting guidelines found in other Utah Medicaid provider manuals. The revisions in this manual are in formatting only and no changes to policy have been made. The list of approved providers has been condensed and includes reference to practicing within the Mental Health Practice Act guidelines.

Providers are encouraged to review the [Targeted Case Management for Serious Mental Illness Provider Manual](#) available on the [Medicaid website](#).

25-21 DUR Board Updates

In February 2025, the Drug Utilization Review (DUR) Board met to review Chimeric antigen receptor (CAR) T-cell therapies. In March, the DUR Board will review various proposed prior authorization forms.

DUR Board meeting minutes are posted on the Utah Medicaid website at <https://medicaid.utah.gov/pharmacy/drug-utilization-review-board/>. DUR Board Meeting recordings can be found on the [YouTube Channel @dmhf_webdohdhhs2](#).

25-22 P&T Committee Updates

In February 2025, the Pharmacy and Therapeutics (P&T) Committee met to discuss Epidermal growth factor receptor (EGFR) inhibitors.

P&T Committee meeting recordings can be found on the [YouTube Channel @dmhf_webdohdhhs2](#).