# Network Adequacy and Access Assurances (NAAAR) Report for Utah: Prepaid Mental Health & Substance Use Disorder

Submission name	Plan type	Reporting period start date	Reporting period end date	Last edited	Edited by	Status
Prepaid Mental Health & Substance Use Disorder	PIHP	01/01/2024	12/31/2024	10/27/2025	Phearomany Yoshida	Submitted

# Section I. State and program information

# A. State information and reporting scenario

Who should CMS contact with questions regarding information reported in the NAAAR? Follow-on communications related to this report will be made to the primary contact.

Use this section to report your contact information, date of report submission, and reporting scenario.

Number	Indicator	Response
IA.1	Contact name	Bridget Convey
	First and last name of the contact person.	
IA.2	Contact email address	bconvey@utah.gov
	Enter email address. Department or program-wide email addresses are permitted.	
IA.3	State or territory	Utah
	Auto-populates from your account profile.	
IA.4	Date of report submission	10/27/2025
	CMS receives this date upon submission of this report.	
IA.5	Reporting scenario	Scenario 2: Annual report
	Enter the scenario under which the state is submitting this form to CMS. Under 42 C.F.R. § 438.207(c) - (d), the state must submit an assurance of compliance after reviewing documentation submitted by a plan under the following three scenarios:Scenario 1: At the time the plan enters into a contract with the state;Scenario 2: On an annual basis;Scenario 3: Any time there has been a significant change (as defined by the state) in the plan's operations that would affect its adequacy of capacity and services, including (1) changes in the plan's services, benefits, geographic service area, composition of or payments to its provider network, or (2) enrollment of a new population in the plan.States should complete one (1) form with information for applicable managed care plans and programs. For example, if the state submits this form under	

state submits this form under scenario 1 above, the state should submit this form only for the managed care plan (and the applicable managed care program) that entered into a new contract with the state. The state should not report on any other plans or programs under this scenario. As another

example, if the state submits this form under scenario 2, the state should submit this form for all managed care plans and managed care programs.

# **B.** Add plans

Enter the name of each plan that participates in the program for which the state is reporting data. If the state is submitting this form because it's entering into a contract with a plan or because there's a significant change in a plan's operations, include only the name of the applicable plan.

Plan names should match the plan names used in your Managed Care Plan Annual Report (MCPAR) for this program for the same reporting period.

Indicator	Response
Plan name	Bear River Mental Health
	Central Utah Counseling Center
	Davis Behavioral Health
	Four Corners Community Behavioral Health
	Healthy U Behavioral
	Northeastern Counseling Center
	Optum Tooele County
	Salt Lake County Division of Behavioral Health Services/Optum
	Southwest Behavioral Health Center
	Wasatch
	Weber Human Services

# C. Provider type coverage

If your standards apply to more specific provider types, select the most closely aligned provider type category and utilize the subcategory fields available in Section II. Program-level access and network adequacy standards under "Provider type covered by standard".

Number	Indicator	Response
N/A	Select all core provider types covered in the program	Mental health
	covered in the program	Substance Use Disorder (SUD)

# D. Analysis methods

States should use this section of the tab to report on the analyses that are used to assess plan compliance with the state's 42 C.F.R. § 438.68 and 42 C.F.R. § 438.206 standards.

Number	Indicator	Response
N/A	Is this analysis method used to assess plan compliance?  Select "Yes" if the method is utilized to assess plan compliance with the state's standards, as required at 42 C.F.R. § 438.68.	Geomapping  Utilized  Frequency: Annually  Plan(s): Bear River Mental Health, Central Utah Counseling Center, Davis Behavioral Health, Four Corners Community Behavioral Health, Healthy U Behavioral, Northeastern Counseling Center, Optum Tooele County, Salt Lake County Division of Behavioral Health Services/Optum,
		Southwest Behavioral Health Center, Wasatch , Weber Human Services  Plan Provider Directory Review
		Not utilized
		Secret Shopper: Network Participation Not utilized
		Secret Shopper: Appointment Availability Not utilized
		Electronic Visit Verification Data  Analysis  Not utilized
		<b>Review of Grievances Related to Access</b> Not utilized
		Encounter Data Analysis
		Not utilized
		Frequency:
		Plan(s):

# Section II. Program-level access and network adequacy standards

II. Program-level access and network adequacy standards

Report each network adequacy standard included in managed care program contract for this program as required under 42 CFR  $\S$  438.68; select "Add standard" to report each unique standard. 42  $\S$  CFR 438.206 standards will be addressed in section III. Plan compliance.

#### Standard total count: 3

#	Provider	Standard type	Standard description	Analysis methods	Pop.	Region
1	Mental health	Maximum distance to travel	90% of members must have access to Network Providers within 10 miles or 15 minutes	Geomapping	Adult and Pediatric	Urban
2	Mental health	Maximum time or distance	80% of members must have access to Network Providers within 35 miles or 45 minutes	Geomapping	Adult and Pediatric	Rural
3	Mental health	Maximum time or distance	75% of members must have access to Network Providers within 60 miles or 70 minutes	Geomapping	Adult and Pediatric	Frontier

# Section III. Plan compliance

# III. Plan compliance

Use this section to report on plan compliance with the state's standards, as required at 42 C.F.R. § 438.68. This section is also used to report on plan compliance with 42 C.F.R. § 438.206 standards.

#### **Bear River Mental Health**

## A. Assurance of plan compliance for 438.68

Indicato	r	Response
	ance of plan nce for 438.68	No, the plan does not comply on all standards based on all analyses or exceptions granted
state assi complies standard C.F.R. 438 previousl based on state con	licate whether the ures that the plan with the state's s, as required at § 42 3.68 (i.e., the standards y entered by the state) each analysis the ducted for the plan e reporting period.	

# Select "Enter/Edit" to provide details on standards that were either non-compliant or for which an exception was granted

Non-compliant standards for 438.68

Total: 2 of 3

#### 2 Maximum time or distance

80% of members must have access to Network Providers within 35 miles or 45 minutes

#### Provider type(s)

Mental health

Analysis method(s)	Region	Population
Geomapping	Rural	Adult and Pediatric

## Plan deficiencies for Bear River Mental Health: 42 C.F.R. § 438.68

#### **Description**

The standard is 80%. Bear River achieves 50% for rural, which is 30% below the standard.

#### Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Report results annually: Not answered, optional

#### What the plan will do to achieve compliance

BRMH does not agree with the findings listed regarding the Rural Members not having access. BRMH has a clinic located in Brigham City and Tremonton City, both located in Box Elder County, which is our rural area. All outpatient services are preformed out of those two clinics. Further, the majority of the county is within 35 miles/45 minutes of a BHU unit. The only "facility" that members are not within the requirement is the Utah State Hospital. Therefore, the plan feels that they are in compliance. The State does not have a response from the health plan on how they plan to achieve compliance standard at this time.

#### **Monitoring progress**

The State EQRO will reassess to determine if the health plans have improved. The EQRO will also submit and review the health plan response excels to the plans to determine what efforts the plans are making to come in alignment with the standards.

#### Reassessment date

12/01/2025

#### 3 Maximum time or distance

75% of members must have access to Network Providers within 60 miles or 70 minutes

#### Provider type(s)

Mental health

Analysis method(s) Region Population

Geomapping Frontier Adult and Pediatric

#### Plan deficiencies for Bear River Mental Health: 42 C.F.R. § 438.68

#### Description

The standard is 75 for frontier. Bear river achieves 50%, which is 25% below the standard.

#### Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Report results annually: Percent of enrollees that can access this provider type within the standard:

Annual (optional): 50

Date of analysis of annual snapshot (optional): 06/01/2024

#### What the plan will do to achieve compliance

BRMH does not agree with the findings listed regarding the Frontier Members not having access. BRMH has a clinic located in Rich County, which is our Frontier area. All outpatient services are preformed out of that clinic. Further, the majority of the county is within 60 miles/70 minutes of a BHU unit. The only "facility" that members are not within the requirement is the Utah State Hospital. Therefore the plan feels they are in compliance. The State does not have a response from the health plan on how they plan to achieve compliance standard at this time.

#### **Monitoring progress**

The State EQRO will reassess to determine if the health plans have improved. The EQRO will also submit and review the health plan response excels to the plans to determine what efforts the plans are making to come in alignment with the standards.

#### Reassessment date

12/01/2025

#### **Exceptions standards for 438.68**

Total: 0 of 3

# B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206	Yes, the plan complies on all standards based on all analyses
III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.	

# **Central Utah Counseling Center**

Indicator	Response
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# A. Assurance of plan compliance for 438.68

III.A.1 Indicate whether the state assures that the plan complies with the state's standards, as required at § 42 C.F.R. 438.68 (i.e., the standards previously entered by the state) based on each analysis the state conducted for the plan during the reporting period.

No, the plan does not comply on all standards based on all analyses or exceptions granted

# Select "Enter/Edit" to provide details on standards that were either non-compliant or for which an exception was granted

Non-compliant standards for 438.68

Total: 1 of 3

#### 2 Maximum time or distance

80% of members must have access to Network Providers within 35 miles or 45 minutes

#### Provider type(s)

Mental health

Analysis method(s) Region Population

Geomapping Rural Adult and Pediatric

#### Plan deficiencies for Central Utah Counseling Center: 42 C.F.R. § 438.68

#### Description

The standard is 80% for rural. Central achieved 57.1%, which is 22.9% below the standard.

#### Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Report results annually: Percent of enrollees that can access this provider type within the standard:

Annual (optional): 57

Date of analysis of annual snapshot (optional): 06/01/2024

#### What the plan will do to achieve compliance

The State does not have a response from the health plan on how they plan to achieve compliance standard at this time.

#### **Monitoring progress**

The State EQRO will reassess to determine if the health plans have improved. The EQRO will also submit and review the health plan response excels to the plans to determine what efforts the plans are making to come in alignment with the standards

#### Reassessment date

12/01/2025

## **Exceptions standards for 438.68**

#### Total: 0 of 3

## B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206	Yes, the plan complies on all standards based on all analyses
III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.	

## **Davis Behavioral Health**

Indicator	Response
A. Assurance of plan compliance for 438.68	No, the plan does not comply on all standards based on all analyses or exceptions granted
III.A.1 Indicate whether the state assures that the plan complies with the state's standards, as required at § 42 C.F.R. 438.68 (i.e., the standards previously entered by the state) based on each analysis the state conducted for the plan during the reporting period.	

# Select "Enter/Edit" to provide details on standards that were either non-compliant or for which an exception was granted

#### Non-compliant standards for 438.68

Total: 1 of 3

#### 1 Maximum distance to travel

90% of members must have access to Network Providers within 10 miles or 15 minutes

#### Provider type(s)

Mental health

Analysis method(s) Region Population

Geomapping Urban Adult and Pediatric

#### Plan deficiencies for Davis Behavioral Health: 42 C.F.R. § 438.68

#### Description

The standard is 90% for urban. Davis achieved 28.6%, which is 61.4% below the standard.

#### Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Report results annually: Percent of enrollees that can access this provider type within the standard:

Annual (optional): 29

Date of analysis of annual snapshot (optional): 06/01/2024

#### What the plan will do to achieve compliance

The State does not have a response from the health plan on how they plan to achieve compliance standard at this time.

#### Monitoring progress

The State EQRO will reassess to determine if the health plans have improved. The EQRO will also submit and review the health plan response excels to the plans to determine what efforts the plans are making to come in alignment with the standards.

#### Reassessment date

12/01/2025

## B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206	Yes, the plan complies on all standards based on all analyses
III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.	

# **Four Corners Community Behavioral Health**

# A. Assurance of plan compliance for 438.68

Indicator	Response
A. Assurance of plan compliance for 438.68	No, the plan does not comply on all standards based on all analyses or exceptions granted
III.A.1 Indicate whether the state assures that the plan complies with the state's standards, as required at § 42 C.F.R. 438.68 (i.e., the standards previously entered by the state) based on each analysis the state conducted for the plan during the reporting period.	

# Select "Enter/Edit" to provide details on standards that were either non-compliant or for which an exception was granted

Non-compliant standards for 438.68

Total: 1 of 3

#### 2 Maximum time or distance

80% of members must have access to Network Providers within 35 miles or 45 minutes

Provider type(s)

NΛ	en	ital	h	ea	lth

Analysis mothod(s)	Pagion	Donulation
Analysis method(s)	Region	Population

Geomapping Rural Adult and Pediatric

# Plan deficiencies for Four Corners Community Behavioral Health: 42 C.F.R. § 438.68

#### Description

The standard is 80%. Four Corners achieved 71.4%, which is 8.6% below the standard.

#### Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Report results annually: Percent of enrollees that can access this provider type within the standard:

Annual (optional): 71

Date of analysis of annual snapshot (optional): 06/01/2024

#### What the plan will do to achieve compliance

The State does not have a response from the health plan on how they plan to achieve compliance standard at this time.

#### **Monitoring progress**

The State EQRO will reassess to determine if the health plans have improved. The EQRO will also submit and review the health plan response excels to the plans to determine what efforts the plans are making to come in alignment with the standards.

#### Reassessment date

12/01/2025

#### **Exceptions standards for 438.68**

#### Total: 0 of 3

Indicator	Response
B. Assurance of plan compliance for 438.206	Yes, the plan complies on all standards based on all analyses
III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.	

# **Healthy U Behavioral**

# A. Assurance of plan compliance for 438.68

Indicator	Response
A. Assurance of p compliance for 4	
III.A.1 Indicate who state assures that complies with the standards, as requiver. C.F.R. 438.68 (i.e., previously entered based on each and state conducted for during the reportions.	he plan tate's red at § 42 ne standards by the state) ysis the the plan

# B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206	Yes, the plan complies on all standards based on all analyses
III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the planduring the reporting period.	5

# **Northeastern Counseling Center**

Indicator	Response
indicator	kespons

# A. Assurance of plan compliance for 438.68

III.A.1 Indicate whether the state assures that the plan complies with the state's standards, as required at § 42 C.F.R. 438.68 (i.e., the standards previously entered by the state) based on each analysis the state conducted for the plan during the reporting period.

No, the plan does not comply on all standards based on all analyses or exceptions granted

# Select "Enter/Edit" to provide details on standards that were either non-compliant or for which an exception was granted

Non-compliant standards for 438.68

Total: 1 of 3

#### 3 Maximum time or distance

75% of members must have access to Network Providers within 60 miles or 70 minutes

#### Provider type(s)

Mental health

Analysis method(s) Region Population

Geomapping Frontier Adult and Pediatric

#### Plan deficiencies for Northeastern Counseling Center: 42 C.F.R. § 438.68

#### Description

The standard is 75%. Northeastern is achieving 42.9%, which is 32.1% below the standard.

#### Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Report results annually: Percent of enrollees that can access this provider type within the standard:

Annual (optional): 43

Date of analysis of annual snapshot (optional): 06/01/2024

#### What the plan will do to achieve compliance

The State does not have a response from the health plan on how they plan to achieve compliance standard at this time.

#### **Monitoring progress**

The State EQRO will reassess to determine if the health plans have improved. The EQRO will also submit and review the health plan response excels to the plans to determine what efforts the plans are making to come in alignment with the standards.

#### Reassessment date

12/01/2025

# **Exceptions standards for 438.68**

#### Total: 0 of 3

## B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206	Yes, the plan complies on all standards based on all analyses
III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.	

# **Optum Tooele County**

Indicator	Response
A. Assurance of plan compliance for 438.68	Yes, the plan complies on all standards based on all analyses
III.A.1 Indicate whether the state assures that the plan complies with the state's standards, as required at § 42 C.F.R. 438.68 (i.e., the standards previously entered by the state) based on each analysis the state conducted for the plan during the reporting period.	

# B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206	Yes, the plan complies on all standards based on all analyses
III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.	

# Salt Lake County Division of Behavioral Health Services/Optum

# A. Assurance of plan compliance for 438.68

Indicator	Response
A. Assurance of plan compliance for 438.68	No, the plan does not comply on all standards based on all analyses or exceptions granted
III.A.1 Indicate whether the state assures that the plan complies with the state's standards, as required at § 42 C.F.R. 438.68 (i.e., the standards previously entered by the state) based on each analysis the state conducted for the plan during the reporting period.	

# Select "Enter/Edit" to provide details on standards that were either non-compliant or for which an exception was granted

Non-compliant standards for 438.68

Total: 1 of 3

#### 1 Maximum distance to travel

90% of members must have access to Network Providers within 10 miles or 15 minutes

#### Provider type(s)

Mental health

Analysis method(s)RegionPopulationGeomappingUrbanAdult and Pediatric

# Plan deficiencies for Salt Lake County Division of Behavioral Health Services/Optum: 42 C.F.R. § 438.68

#### Description

The standard is 90%. Salt Lake achieved 85.7%, which is 4.3% below the standard.

#### Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Report results annually: Percent of enrollees that can access this provider type within the standard:

Annual (optional): 86

Date of analysis of annual snapshot (optional): 06/01/2024

#### What the plan will do to achieve compliance

The State does not have a response from the health plan on how they plan to achieve compliance standard at this time.

#### **Monitoring progress**

The State EQRO will reassess to determine if the health plans have improved. The EQRO will also submit and review the health plan response excels to the plans to determine what efforts the plans are making to come in alignment with the standards.

#### Reassessment date

12/01/2025

#### **Exceptions standards for 438.68**

Total: 0 of 3

Indicator	Response
B. Assurance of plan compliance for 438.206	Yes, the plan complies on all standards based on all analyses
III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.	

# **Southwest Behavioral Health Center**

# A. Assurance of plan compliance for 438.68

Indicator	Response
A. Assurance of plan compliance for 438.68	Yes, the plan complies on all standards based on all analyses
III.A.1 Indicate whether the state assures that the plan complies with the state's standards, as required at § 42 C.F.R. 438.68 (i.e., the standards previously entered by the state) based on each analysis the state conducted for the plan during the reporting period.	

# B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206	Yes, the plan complies on all standards based on all analyses
III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.	

# Wasatch

Response

# A. Assurance of plan compliance for 438.68

III.A.1 Indicate whether the state assures that the plan complies with the state's standards, as required at § 42 C.F.R. 438.68 (i.e., the standards previously entered by the state) based on each analysis the state conducted for the plan during the reporting period.

No, the plan does not comply on all standards based on all analyses or exceptions granted

# Select "Enter/Edit" to provide details on standards that were either non-compliant or for which an exception was granted

Non-compliant standards for 438.68

Total: 1 of 3

#### 1 Maximum distance to travel

90% of members must have access to Network Providers within 10 miles or 15 minutes

#### Provider type(s)

Mental health

Analysis method(s) Region Population

Geomapping Urban Adult and Pediatric

#### Plan deficiencies for Wasatch: 42 C.F.R. § 438.68

#### Description

The standard is 90% for urban. Wasatch achieved 28.6%, which is 61.4% below the standard.

#### Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Report results annually: Percent of enrollees that can access this provider type within the standard:

Annual (optional): 29

Date of analysis of annual snapshot (optional): 06/01/2024

#### What the plan will do to achieve compliance

The State does not have a response from the health plan on how they plan to achieve compliance standard at this time.

#### **Monitoring progress**

The State EQRO will reassess to determine if the health plans have improved. The EQRO will also submit and review the health plan response excels to the plans to determine what efforts the plans are making to come in alignment with the standards.

#### Reassessment date

12/01/2025

## **Exceptions standards for 438.68**

#### Total: 0 of 3

## B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206	Yes, the plan complies on all standards based on all analyses
III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.	

## **Weber Human Services**

Indicator	Response
A. Assurance of plan compliance for 438.68	Yes, the plan complies on all standards based on all analyses
III.A.1 Indicate whether the state assures that the plan complies with the state's standards, as required at § 42 C.F.R. 438.68 (i.e., the standards previously entered by the state) based on each analysis the state conducted for the plan during the reporting period.	

Indicator	Response
B. Assurance of plan compliance for 438.206	Yes, the plan complies on all standards based on all analyses
III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.	