

To contact an HPR  
(Health Program  
Representative) call  
toll-free:  
1-866-608-9422

# Clientell

Utah Medical Benefit Information  
[www.health.utah.gov/umb](http://www.health.utah.gov/umb)

Summer 2015

## Dental Benefits

Pregnant women and Medicaid members who qualify for the CHEC (Child Health Evaluation and Care ) program, have dental benefits.

Pregnant women and Medicaid members who qualify for CHEC and live in the following counties must choose a dental plan and a primary care dentist:

- Davis
- Salt Lake
- Utah
- Weber

If a dental plan is not chosen, one will be assigned for you.

Pregnant women and Medicaid members who qualify for the CHEC program, and live in any county other than those listed above, can see any dentist who accepts Utah Medicaid.

Non-pregnant adults on Medicaid have limited emergency dental benefits. They do not choose a dental plan and may see any dental provider that accepts Utah Medicaid.

## Keep Information Updated

Whenever there is a change that may affect your eligibility you must let DWS (Department of Workforce Services) know. These changes include the birth of a baby, moving to a different address, a change in your income, etc. Call DWS at 1-866-435-7414.

Call an HPR if you want to change your health plan or have a question about your Medicaid benefits. An HPR can let you know if you are able to change your plan. They can also answer questions about your rights and responsibilities as well as help you understand your benefits. You can contact an HPR by calling 1-866-608-9422.

If you get other insurance or no longer have the insurance that is on your Medicaid Benefit Letter, you need to tell the ORS (Office of Recovery Services). You should call ORS at 801-536-8798 to let them know about changes with other insurance.

## Health Plans and the Fee for Service Network

A health plan must be chosen or one will be assigned to Medicaid members living in the following counties:

- Box Elder
- Cache
- Davis
- Iron
- Morgan
- Rich
- Salt Lake
- Summit
- Tooele
- Utah
- Wasatch
- Washington
- Weber

When a Medicaid member has a health plan, they must use providers who accept the plan.

Members living in these counties may change their health plans each year during open enrollment. Open enrollment is from mid-May to mid-June. New plans chosen during this time will begin on July 1.

## Other Counties

Medicaid members who live in any county not listed above may choose a health plan or Fee for Service Network.

If a health plan is chosen, the member must see providers who accept the plan.

If Fee for Service Network is chosen, the member may see any Utah Medicaid provider.

Members in these other counties may change their selection at any time.

## EOMB (Explanation of Medicaid Benefits)

To help stop fraud, you may get a letter from Medicaid. The name of the letter is an EOMB (Explanation of Medicaid Benefits). The letter will list some of the services Medicaid has paid for you. Please let Medicaid know if you did not have one or more of the services shown. Contact Medicaid by calling the phone number on the letter. If you prefer, you may send a letter to the address on the EOMB.

