

State of Hawaii
Department of Human Services
MED-QUEST DIVISION

MEDICAID STATE PLAN

SPA MEMO NO.: 25-02

DATE: 04/01/25

ORIGINATOR: POLICY AND PROGRAM DEVELOPMENT OFFICE

TO: Custodian of Med-QUEST Division Medicaid State Plan

FROM: Judy Mohr Peterson, PhD 
Med-QUEST Division Administrator

SUBJECT: APPROVAL OF AMENDMENT UNDER THE MEDICAID STATE PLAN

EXPLANATION:

The State of Hawaii received approval from the Centers for Medicare & Medicaid Services (CMS) for State Plan Amendment (SPA) Number 25-0002 "Pharmacy Intern and Pharmacy Tech Specialist" approved on March 14, 2025, effective January 1, 2025.

On June 28, 2024, HB2553 was signed into Hawaii law (Act 104). Under the new law, licensed pharmacists are authorized to administer vaccines to persons three years of age or older. Pharmacy interns and pharmacy technicians under the direct supervision of a licensed pharmacist are also allowed to administer vaccinations to persons three years of age or older, if certain requirements are met, effective January 1, 2025.

During the emergency period beginning March 11, 2021, Hawaii temporarily allowed pharmacy interns and pharmacy technicians to administer vaccines under the provisions of 1135(g)(1)(B) of the Social Security Act. The approval of this SPA allows pharmacy interns and pharmacy technicians to continue to provide those services going forward.

FILING INSTRUCTIONS:

Review and file the new Medicaid State Plan page in your Medicaid State Plan Manual as follows:

Supplement to Attachment 3.1-A and 3.1-B pg. 2-Addendum

File new Supplement to Attachment 3.1-A and 3.1-B pg. 2-Addendum.

The Med-QUEST Division amendment described above has been incorporated into the electronic version of the Medicaid State Plan located at the Department of Human Services website link for public transparency below:

<http://humanservices.hawaii.gov/reports/hawaii-medicaid-state-plan/>

Attachments

C: Attorney General's Office
Audit, Quality Control & Research Office/Quality Control Staff
Clinical Standards Office
Department of Health/Child & Adolescent Mental Health Division
Department of Health/State Planning Council Developmental Disabilities
Department of Health/Developmental Disabilities Division
Department of Human Services /Adult Protective and Community Services Branch
Department of Human Services/Policy and Program Development Office
Eligibility System Project (KOLEA)
Finance Office
Hawaii Document Center/HI State Library
Hawaii Legislative Reference Bureau Library
Health Care Services Branch
Legal Aid Society of Hawaii

Table of Contents

State/Territory Name: HI

State Plan Amendment (SPA) #: 25-0002

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

March 14, 2025

Dr. Judy Mohr Peterson
State of Hawaii Department of Human Services
Office of the Director
PO Box 339
Honolulu, HI 96809-0339

Re: Hawaii State Plan Amendment (SPA) – 25-0002

Dear Dr. Mohr Peterson:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 25-0002. This amendment proposes to add services provided by pharmacy interns and pharmacy technicians to the State Plan.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations. This letter informs you that Hawaii Medicaid SPA TN 25-0002 was approved on March 14, 2025, effective January 1, 2025.

Enclosed are copies of Form CMS-179 and approved SPA pages to be incorporated into the Hawaii State Plan.

If you have any questions, please contact Brian Zolynas at (206) 615-2742 or via email at Brian.Zolynas@cms.hhs.gov.

Sincerely,

 Digitally signed by James
G. Scott -S
Date: 2025.03.14
11:49:16 -05'00'

James G. Scott, Director
Division of Program Operations

Enclosures

cc: Jodeen Enesa
Edie Mayeshiro

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 5 — 0 0 0 2

2. STATE

HI3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL
SECURITY ACT

XIX



XXI

TO: CENTER DIRECTOR

CENTERS FOR MEDICAID & CHIP SERVICES

DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

01/01/25

5. FEDERAL STATUTE/REGULATION CITATION

Title XIX of the Social Security Act

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2025 \$ 0b. FFY 2026 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Supplement to Attachment 3.1-A and 3.1-B pg. 2-Addendum

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable)

9. SUBJECT OF AMENDMENT

Addition of Pharmacy Technician and Pharmacy Intern services.

10. GOVERNOR'S REVIEW (Check One)



GOVERNOR'S OFFICE REPORTED NO COMMENT



COMMENTS OF GOVERNOR'S OFFICE ENCLOSED



NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL



OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME

Judy Mohr Peterson, PhD

13. TITLE

Med-QUEST Division Administrator

14. DATE SUBMITTED

12/27/24

15. RETURN TO

State of Hawaii

Department of Human Services

Office of the Director

P.O. Box 339

Honolulu, Hawaii 96809-0339

FOR CMS USE ONLY

16. DATE RECEIVED

December 27, 2024

17. DATE APPROVED

March 14, 2025

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

January 1, 2025

19. SIGNATURE OF APPROVING OFFICIAL

Digitally signed by
James G. Scott -S
Date: 2025.03.14
11:49:45 -05'00'

20. TYPED NAME OF APPROVING OFFICIAL

James G. Scott

21. TITLE OF APPROVING OFFICIAL

Director, Division of Program Operations

Medicaid & CHIP Operations Group

22. REMARKS

6d. Services of Other Providers (continued)

- i. Services provided by Pharmacy Interns and Pharmacy Tech Specialists under the supervision of a Licensed Pharmacist. The licensed pharmacist assumes the professional liability for services furnished by pharmacy interns and technicians.

TN No.	<u>25-0002</u>	Approval Date:	<u>March 14, 2025</u>	Effective Date:	<u>01/01/2025</u>
Supersedes					
TN No.	<u>NEW</u>				