

Med-QUEST Healthcare Advisory Committee

Feb 15, 2023



Med-QUEST, DHS

Med-QUEST Healthcare Advisory Committee Agenda

I. Welcome/Call to Order

II. Introductions/Roll Call

III. Review of meeting participation guidelines and process

IV. **Med-QUEST Updates** - Presentations on current Med-QUEST program activities

- a. Restart of Renewals & Member communications
- b. Other updates
- c. Public Comment

V. **State Plan Amendment Presentations and Discussions**

- a. **State Plan Amendment: Updates** - Status of State Plan Amendments previously reviewed by the MHAC.
- b. **State Plan Amendments: New** - State Plan Amendments currently being submitted for CMS approval.
 - i. SPA 23-0001 Yearly Optional State Supplementary Payment
 - ii. SPA 23-0004 Former Foster Care Medicaid Out of State
 - iii. SPA 23-0002 Waive of Signatures for counseling during Public Health Emergency (PHE)
 - iv. SPA 23-0005 Naloxone Over The Counter Drug Coverage
- c. **State Plan Amendments: Coming Soon (NA)**

Next Meeting: Wednesday, April 19, 2023

Adjourn

IV. MQD UPDATES

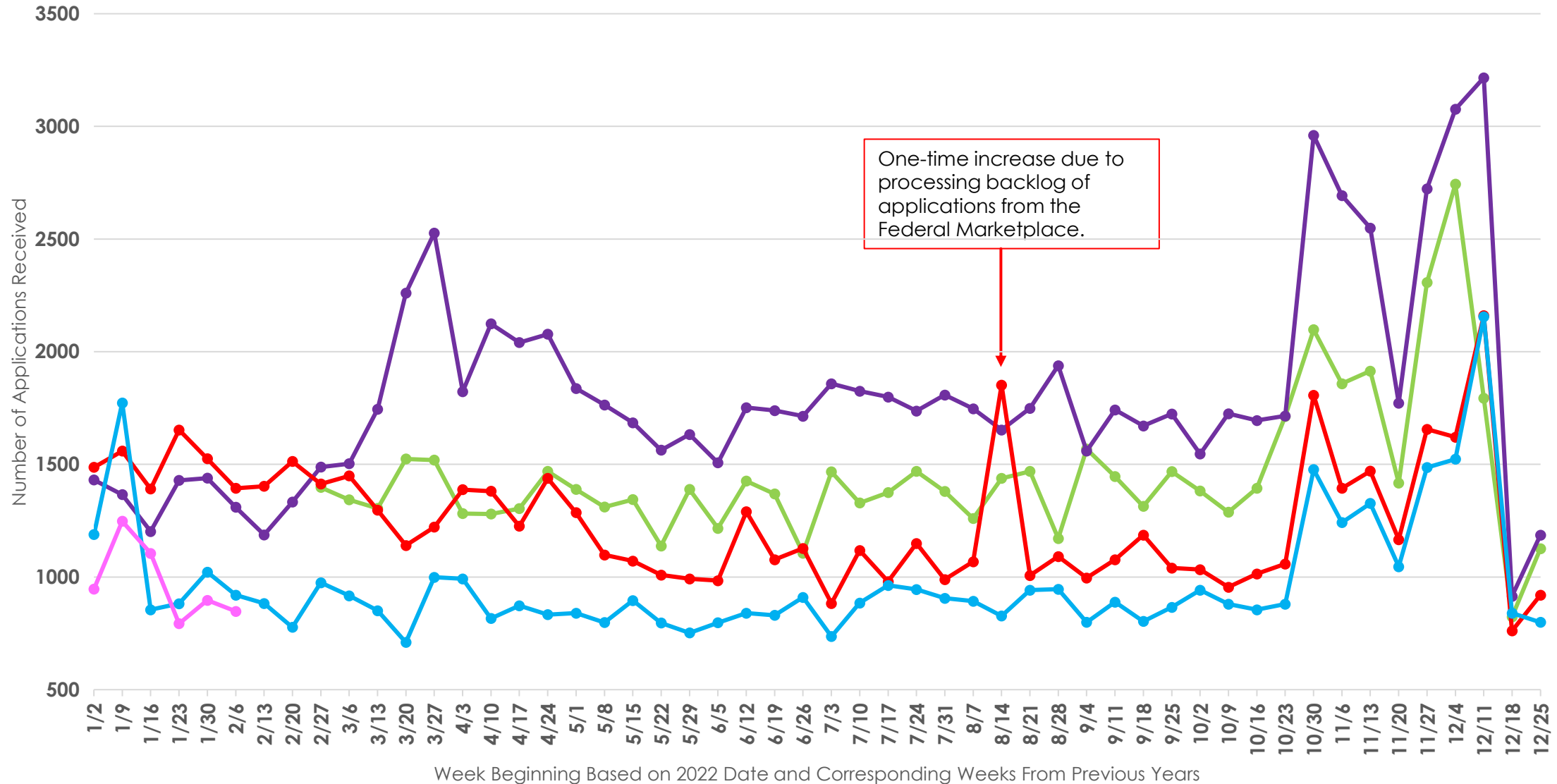


IV. MQD Update: Restart Renewal Processes

- Update on the numbers
- Update on Restarting Renewals
- Communications update



Hawai'i Medicaid Applications Received Per week: March 2020 to February 11, 2023 MQD has Received 203,556 Applications

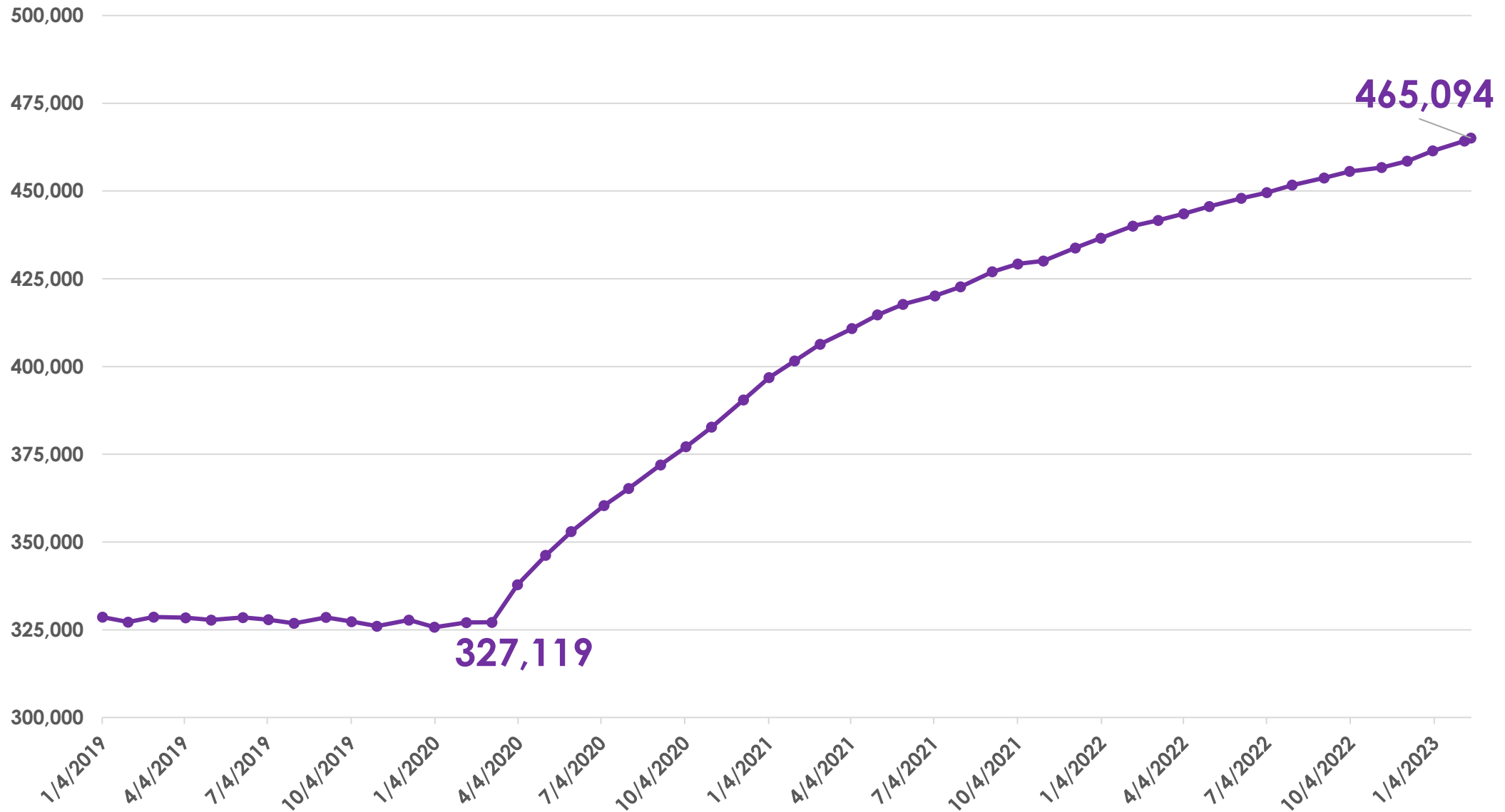


— 2019 — 2020 — 2021 — 2022 — 2023

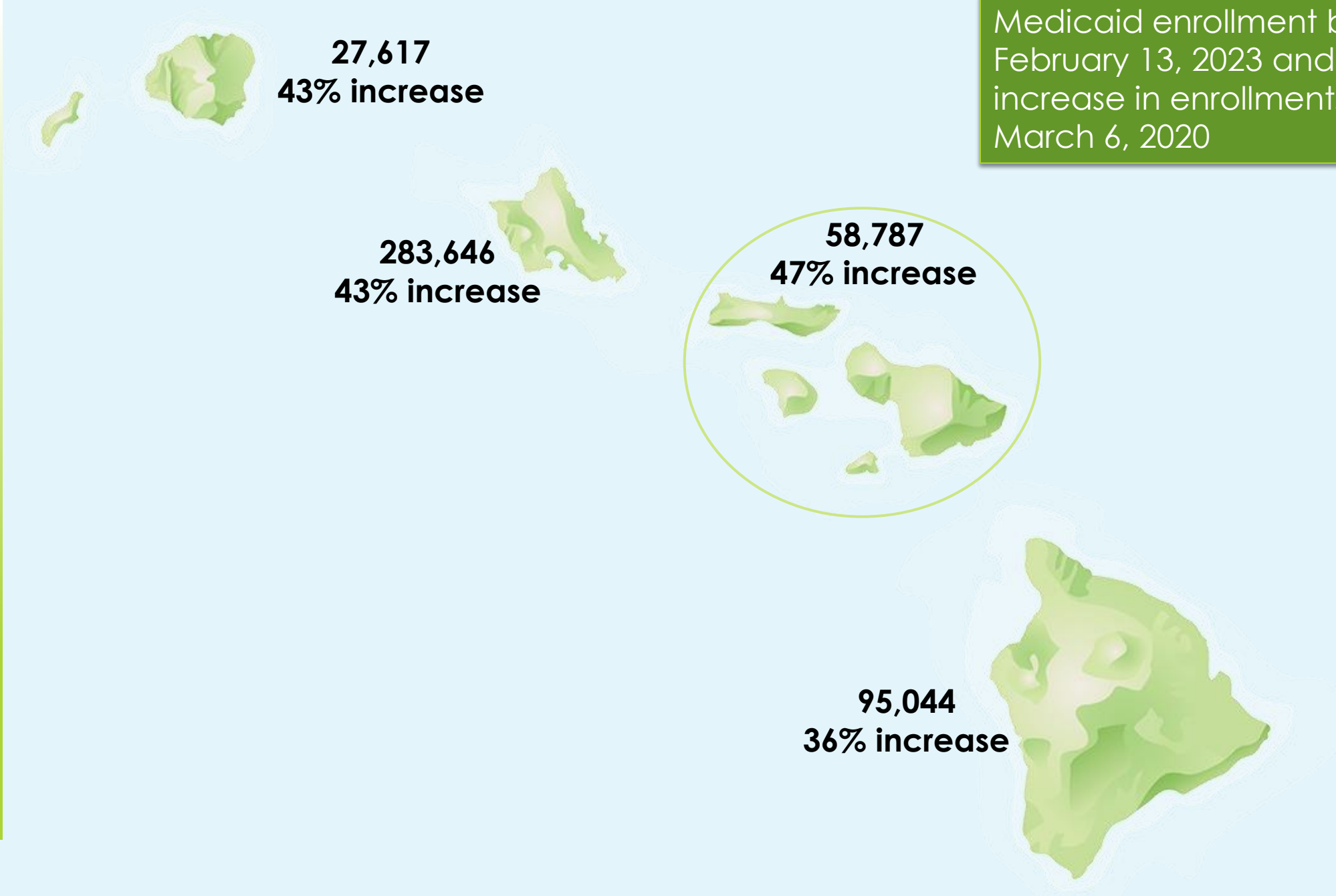
Application increase in Nov-Dec (and in Jan 2022-2023) reflects additional application activity due to the Federal Marketplace open enrollment period.

Hawai'i Medicaid Monthly Enrollment: January 2019 to February 13, 2023

137,975 New Enrollments since 3/6/2020 (42% Increase)



Medicaid enrollment by County on February 13, 2023 and percent increase in enrollments since March 6, 2020



Public Health Emergency Declaration

HHS.gov

ASPR Administration for Strategic Preparedness & Response

ABOUT ASPR ▾ RESPONSE OPERATIONS HEALTH CARE READINESS MEDICAL COUNTERMEASURES AND BIODEFENSE PA

ASPR Homepage > PHE Declarations

RENEWAL OF DETERMINATION THAT A PUBLIC HEALTH EMERGENCY EXISTS

As a result of the continued consequences of the (COVID-19) pandemic, on this date, I, Xavier Becerra, Secretary of the Department of Health and Human Services, officials as necessary, I, Xavier Becerra, Secretary of the Department of Health and Human Services, pursuant to the authority vested in me as Secretary of the Department of Health and Human Services by the Public Health Service Act, do hereby renew the determination that a public health emergency exists and has existed since January 31, 2020, as previously renewed on April 21, 2020, April 15, 2021, October 15, 2021, January 14, 2022, April 15, 2022, and January 7, 2023, and that I am confident that a public health emergency exists and has existed since January 31, 2020, nationwide.

October 13, 2022

/s/

Date

Xavier Becerra

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On October 13, 2022, HHS Secretary Becerra renewed the declaration that a **Public Health Emergency(PHE)** continues to exist related to COVID 19. This PHE declaration will be in effect until **mid-January 2023**.

The continuous coverage requirement will go to the end of **the month** that the PHE declaration goes to the end of **the quarter** in

covered us we will receive at least **60 days notice** prior to the confirmed end of the PHE. This means that if the PHE is going to end in January, we would have received notification mid-November. We **did not receive notification**, therefore it is most likely that the continuous coverage requirement will be extended again in January, 2023 with an end date of mid-April, 2023

If we receive 60 days notice in mid-February:
MQD will begin the 12-month unwinding process on May 1, 2023.

Consolidated Appropriations Act of 2023 passed by Congress and signed by President Biden December 29 2022, restarts Medicaid eligibility renewals

Continuous coverage requirements only allowed disenrollments for individuals who moved out of state, voluntarily requested to stop their Medicaid enrollment or passed away. These requirements have been tied to the ending of the COVID-19 Public Health Emergency (PHE).

Medicaid eligibility renewals, which have been halted since March 2020, **will begin again April 1, 2023 under this Act, regardless of PHE status.**

Redeterminations will be divided over the full year to avoid bulges in eligibility case loads each year and for workload purposes. Generally, the oldest cases will be redetermined first.



United States

2 minute read · January 31, 2023 5:04 AM HST · Last Updated a day ago

U.S. to end COVID-19 emergency declarations on May 11

Reuters



Med-QUEST Division



QUEST Hawai'i



— Stay —
WELL
— Stay —
COVERED



Med-QUEST Division

Frequently Asked Questions

1. What is the public health emergency and how did it affect members?

At the beginning of the COVID-19 pandemic, the federal government declared a public health emergency (PHE). During the PHE, Medicaid agencies like QUEST Integration (Hawai'i's Medicaid program) did not disenroll members, even if someone's eligibility changed. In December 2022, Congress passed legislation which decoupled the Medicaid continuous coverage requirement from the COVID-19 PHE and instead directed that the continuous coverage requirement would end on March 31, 2023, regardless of the PHE dates.

2. What can members expect when the renewal process begins in April 2023?

The notification process will start in April, 2023 and be spread out over 12 months. Because of the sheer number of current members—over 465,000+ to date—not all Members will receive notification at the same time. Member renewals have been divided evenly across the 12-month period.



Frequently Asked Questions

3. What can members do to prepare for renewal?

In preparation for this renewal period, Med-QUEST asks members to do the following:

- **Be sure to update your contact information by logging into your account on Medical.mybenefits.hawaii.gov or by calling the Health Plan number on the back of your insurance card.**
- **If you no longer need Medicaid coverage, please contact: 1-800-316-8005 to let us know.**
- **Starting In April, be on the lookout for a pink envelope with a pink letter that will provide instructions on eligibility renewals. This pink letter may require a response in order to maintain health coverage. Be sure to read the letter and follow all instructions, if applicable.**
- **If you need coverage but no longer qualify for Med-QUEST, please check with your employer to see if you are eligible for health insurance coverage.**
- **If you are not eligible for health insurance through your employer, please visit the Health Insurance Marketplace at www.HealthCare.Gov or by calling 1-800-318-2596 to make sure you stay well and stay covered!**



March Letter to all Med-QUEST Member Households



[CASE-FNAME] [CASE-MI] [CASE-LNAME]
[CASE-STR-1]
[CASE-STR-2]
[CASE-CITY] [CASE-ST] [CASE-ZIP]

Important Information About Your Med-QUEST Coverage

Aloha [INSERT CASE FIRST NAME],

Beginning in April 2023 and continuing until March 2024, the State of Hawai'i's Department of Human Services (DHS) Med-QUEST Division, will begin to review all Medicaid cases. This letter is to inform you that you and other Medicaid members in your household are covered through [MONTH], [YEAR]. You will receive a pink letter in the mail in [MONTH-1], [YEAR] when your renewal will begin.

If you no longer need QUEST (Medicaid) coverage, call us at 1-800-316-8005, (TTY/TDD 711).

You can take the following steps to prepare for your renewal:



Update your contact information, if you have changes – Always be sure Med-QUEST has your current mailing address, phone number, email, or other contact information. **The easiest way to report any changes to your contact information is by calling the number on the back of your Health Plan membership card.** You can also log in to medquest.hawaii.gov for ways to reach Med-QUEST directly.



Open and respond to all mail from Med-QUEST – Med-QUEST will mail you a pink letter with details about your Medicaid coverage. This letter will let you know if Med-QUEST was able to renew your Medicaid eligibility or may let you know that Med-QUEST needs additional information from you to renew your Medicaid eligibility.



Complete your renewal form – If Med-QUEST needs more information, you will receive a renewal form in [MONTH-1], [YEAR].

Enclosed you will find the QUEST Member Handbook.

Mahalo and stay well and stay covered!



Med-QUEST Division

4. When and how will members receive renewal notification?

One month prior to their month of renewal, members will be mailed a pink envelope with a pink letter that will contain eligibility instructions. Starting in April, we will begin reviewing cases with a May renewal date. If those members with May renewal dates are no longer eligible, their coverage may end as early as June 1, 2023.

5. Can my household renew at the same time, or will we receive separate renewal letters?

With very few exceptions, MQD will renew an entire household at the same time.

6. Can I continue with the same health plan when I renew?

In most cases, yes, unless you have moved, and your current health plan is not available in your new location.



Frequently Asked Questions

7. *If it is determined that a member is no longer eligible for Medicaid, what happens?*

A member who is no longer eligible, will receive:

- **Notice of when your enrollment will end,**
- **Information on how to appeal that decision if you believe the disenrollment was in error, and**
- **Information about other health care coverage options available from www.Healthcare.gov**

8. *If a member is no longer eligible for Medicaid, where can he/she find health care coverage?*

- **If you need coverage but no longer qualify for Med-QUEST, visit the Health Insurance Marketplace at www.HealthCare.Gov or by calling 1-800-318-2596.**
- **If you need additional assistance navigating the Health Insurance Marketplace, MQD's Health Care Outreach Branch as well as its community partner organizations (listed at www.medicaid.hawaii.gov/gethelp) can assist with this transition. Some of the Med-QUEST Health Plans may also assist their exiting members with the transition from Medicaid to the Marketplace.**
- **Veterans may also find more health care resources at www.beconnectedaz.org.**



9. What is being done to reach members?

We have already started a mass media campaign, including ads in movie theaters. Television and radio public service announcements will follow. We will utilize earned media opportunities and inclusion in community partner and legislative constituent communications. In addition, we intend to reach out to each QUEST member with a plain white letter in March to inform them of the process and let them know which month their case will be up for renewal.

10. How will you reach those who may not have access to the internet or those in rural areas?

Our STAY WELL STAY COVERED communications campaign includes messaging via printed and out-of-house channels, such as newspapers and banners. The renewal notification will be mailed, so members without internet access will still be able to receive the information.



11. When do you expect to complete the Medicaid eligibility verification process?

We will initiate the last batch of eligibility renewals in March, 2024 for cases up for renewal in April, 2024. For some individual cases, verification may take up to 60 days to complete, so the final verifications for all members should be completed by the end of May, 2024.



DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop 00-00-00
Baltimore, Maryland 21244-1850



Center for Consumer Information and Insurance Oversight

RELEASED: January 27, 2023

Temporary Special Enrollment Period (SEP) for Consumers Losing Medicaid or the Children's Health Insurance Program (CHIP) Coverage Due to Unwinding of the Medicaid Continuous Enrollment Condition– Frequently Asked Questions (FAQ)



Med-QUEST Division

PUBLIC COMMENT



IV. MQD Updates: Advancing Medicare and Medicaid Integration

- MQD is improving care delivery for Hawai'i's dually eligible population by building on the current dual-eligible special needs plan (D-SNP) program.
- Hawai'i's current D-SNPs offer some coordination for members with their Medicare and Medicaid benefits.



Dually eligible individuals are eligible for Medicare and Medicaid at the same time.

They receive their health care services from both programs, so the delivery of their care can sometimes be difficult to navigate.



MQD Updates: Advancing Medicare and Medicaid Integration

- In the next two years, MQD will strengthen and improve the current D-SNPs.
- We will also start a new kind of Duals plan: fully-integrated dual eligible special needs plans (FIDE-SNP). This plan will provide even more care integration for their dual-eligible members.
 - Some of these changes include better coordination of care for people with intellectual and/or developmental disabilities (I/DD) and serious mental illness (SMI).
 - The new policies will be in effect by January 2024.



MQD Updates: Other

■ Dental Launched 1/1/2023

- January 1, 2023, Med-QUEST started covering adult dental benefits like cleanings, x-rays, and fillings. Based on a member's need, dental services like root canals, crowns and/or dentures may also be covered.
- QUEST members may call Community Case Management Corporation (CCMC), starting January 2023 at 1-808-792-1070 or toll-free at 1-888-792-1070 to help members find a dentist and to explain the covered dental benefits.

■ Legislative Session started

■ Social Determinant Transformation Plan project progress

■ Other – Questions on a topic covered in the past would like an update on?



PUBLIC COMMENT



V. STATE PLAN AMENDMENT (SPA) PRESENTATIONS AND DISCUSSIONS: UPDATES 02/15/23



v. State Plan Updates

- **SPA 22-0005 Consolidated Appropriations Act SPA** (title changed to “**Routine Costs for Clinical Trials**”) Alternative Benefit Plan (ABP) **Approved: 12/29/23 Effective Date: 01/01/22**
- **SPA 22-0014 Monkey Pox Vaccine Administration** **Approved: 01/24/23 Effective Date: 10/15/22**
- **SPA 22-0007 COVID-19 Vaccine (1 year post PHE)** **Approved 02/03/23 Effective Date: 03/11/21**
- **SPA 22-0009 Pregnant Woman Proxy Payment Methodology** **Currently in “Request for Additional Information” (RAI) process. Hawaii is meeting with CMS 02/17/23 to discuss additional questions.**
- **SPA 22-0013 Community Palliative Care** **SPA in RAI Process.**
- **SPA 22-0015 Licensed Midwife-** **MQD has decided to include changes in a new SPA related to Other Licensed Providers, APRN and payment methodology amendment requests.**



State Plan Updates

- **SPA 22-0016 Pregnant Women (include unborn in household) RU** Submitted SPA to CMS 01/25/23. Hawaii reviewing additional questions received.



V. STATE PLAN AMENDMENT PRESENTATIONS AND DISCUSSIONS: NEW



SPA 23-0001 Yearly Optional State Supplementary Payment

Background:

Yearly housekeeping amendment required to align with the Cost-of-Living Adjustment (COLA) for Social Security and Supplemental Security Income (SSI) benefits.

SPA language:

- Effective January 1, 2023, Supplemental Security income (SSI) beneficiaries received an 8.7% Cost of Living Adjustment increase from the Social Security Administration. This amendment is required to increase the monthly income standards for Domiciliary Care Type I from \$1,492.90 to \$1,565.90 and for Domiciliary Care Type II from \$1,600.90 to \$1,673.90.

SPA attachments and Public Notice posted at <https://medquest.hawaii.gov/en/about/state-plan-1115.html> on 02/10/2023

Submission to CMS before 03/31/23

Proposed Effective Date 01/01/23



SPA 23-0004 Former Foster Care Medicaid Out of State

Background:

The Centers for Medicare & Medicaid Services (CMS) alerted states of changes to the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (the “SUPPORT Act”), enacted on October 24, 2018. Section 1002(a), requires states to cover Former Foster Care Children (FFCC) group individuals who aged out of foster care from another state than where they currently live. It also eliminates the requirement that an individual not be eligible for another mandatory eligibility group (other than the Adult Group) to be eligible for the FFCC group.

2. Individuals Covered-For individuals who turn 18 on or after January 1, 2023:

- a. They were enrolled in Medicaid under a state’s Medicaid state plan or 1115 at any time during the foster care period in which they turned 18 or higher at which a state’s or Tribe’s foster care assistance ends.
- b. They were placed by a state or Tribe in another state and were enrolled in Medicaid under the other state’s Medicaid state plan or 1115 demonstration project when they turned 18 or a higher age at which a state’s or Tribes foster care assistance ends.
- c. They were placed by a state or Tribe in another state and were enrolled in Medicaid under the other state’s Medicaid state plan or 1115 demonstration project at any time during the foster care period in which they turned 18 or a higher age at which a states or Tribe’s foster care assistance ends.

SPA language: Hawaii is selecting that we provide coverage for all who meet 2a. and c. in Section C

SPA attachments and Public Notice posted at <https://medquest.hawaii.gov/en/about/state-plan-1115.html> on 02/10/2023

Submission to CMS before 03/31/23

Proposed Effective Date 01/01/23



SPA 23-0002 Waive of Signatures for counseling during Public Health Emergency (PHE)

Background:

The Division of Pharmacy under Centers for Medicare & Medicaid Services has reached out to Hawaii with approaches to the waiving of signatures for counseling as required under §456.705 Prospective drug review (c) and 1927 (g)(2)(A)(ii) during the Public Health Emergency (PHE).

SPA language:

The proposed amendment to Section 7-General Provisions, 7.5 Medicaid Disaster Relief for the COVID-19 National Emergency the Medicaid State Plan adds allows Hawaii to waive Public Notice and send tribal at the same time of this SPA submission. Hawaii has also added new verbiage to Section D-Benefits (pg. 24) under the Drug Benefit section “6” and is “requesting to waive any signature requirements for the dispensing of drugs during the PHE.”

*The approved pages can be found at our MQD website <https://medquest.hawaii.gov/en/about/state-plan-1115.html> in the **State Plan Amendment Memos** section.*

Submitted to CMS 01/23/23

Approved 02/03/23

Effective Date 03/01/2020



SPA 23-0005 Naloxone Over The Counter Drug Coverage

Background:

Hawaii met with CMS Pharmacy to discuss SPA 23-0002 related to waiving of counseling signature documentation required under prospective drug review. CMS Pharmacy Team recommended to submit a new SPA by updating Supplement to Attachment 3.1-A and 3.1-B pg. 3.2.b with broader language to allow for coverage of Over the Counter (OTC) Naloxone and/or OTC birth controls as there is a expected policy change to allow this coverage in March 31 of 2023.

SPA language:

Supplement to Attachment 3.1-A and 3.1-B pg. 3.2.b

(d) Non-legend drugs (~~see specific drug categories below~~) on the state Provider Manual or website.

SPA attachments and Public Notice posted at <https://medquest.hawaii.gov/en/about/state-plan-1115.html> on 02/10/23.

Submission to CMS before 03/31/23

Proposed Effective Date 01/01/23



PUBLIC COMMENT



VII. NEXT MEETING: WEDNESDAY, APRIL 19, 2023

VIII. ADJOURN





Mahalo!