

Med-QUEST Healthcare Advisory Committee

August 21, 2024



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. Stay Well Stay Covered - Restart of the eligibility renewals process
 - b. Annual Plan Change
 - c. Public Comment
- V. Presentation and Discussion: Annual Public Forum - Progress report and update on the QUEST Integration Section 1115 Demonstration Project
 - a. Public Comment
- VI. Health Plan Member Communications Presentation
 - a. UnitedHealthcare
 - b. Public Comment
- VII. State Plan Amendment Presentations and Discussions
 1. State Plan Amendment: Updates - Presentation on the status of State Plan Amendments previously reviewed by the MHAC
 2. State Plan Amendments: New - Presentation of State Plan Amendments currently being submitted for CMS approval
 - i. SPA 24-0012 Personal Needs Allowance Increase
 - ii. SPA 24-0013 Income Standard of Optional State Supplemental Program Increase
 3. State Plan Amendments: Coming Soon – Presentation on State Plan Amendments
 4. Public Comment
- VIII. Next Meeting: Wednesday, October 16, 2024
- IX. Adjourn



IV. MQD Updates

a. Stay Well Stay Covered

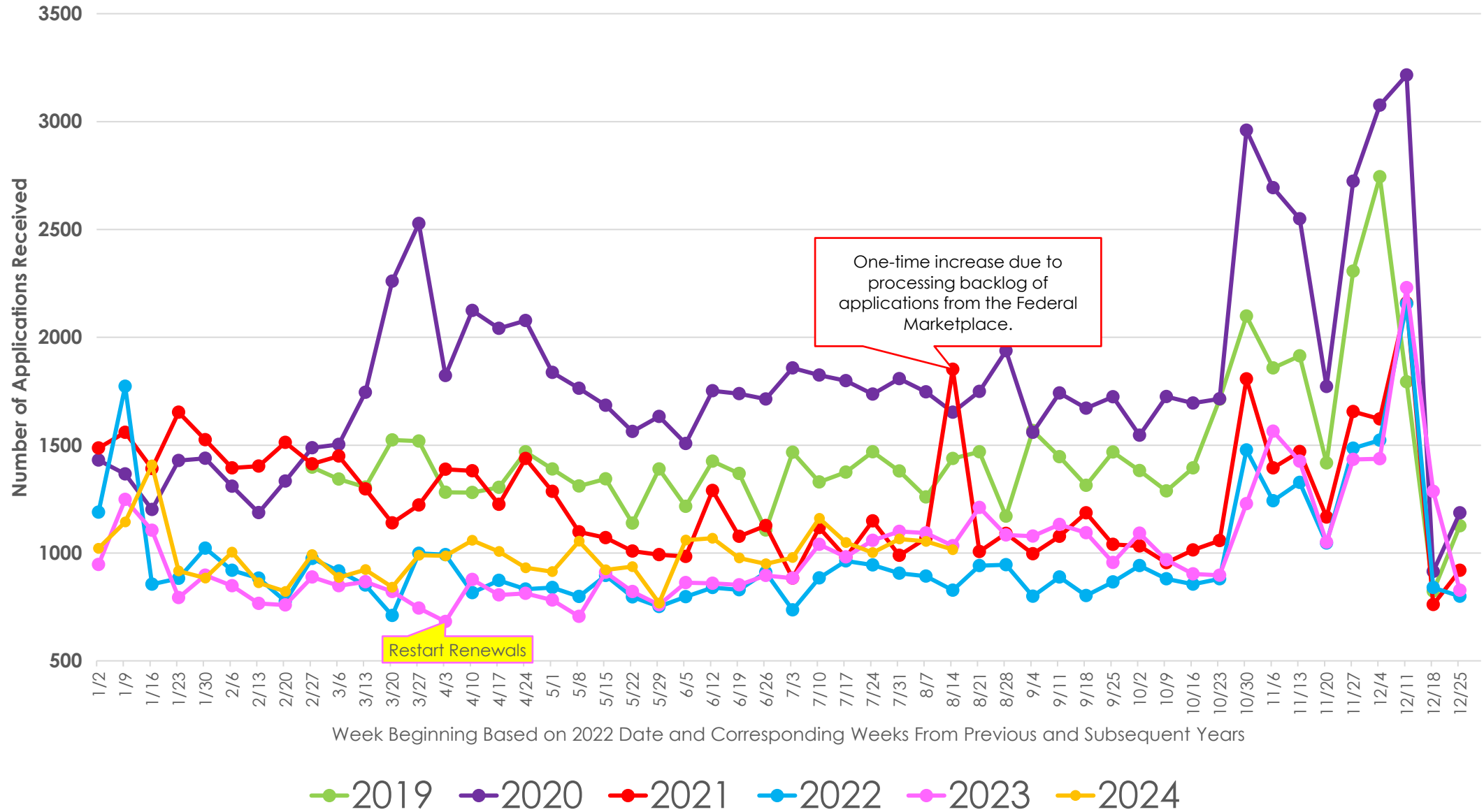
b. Annual Plan Change

c. Public Comment

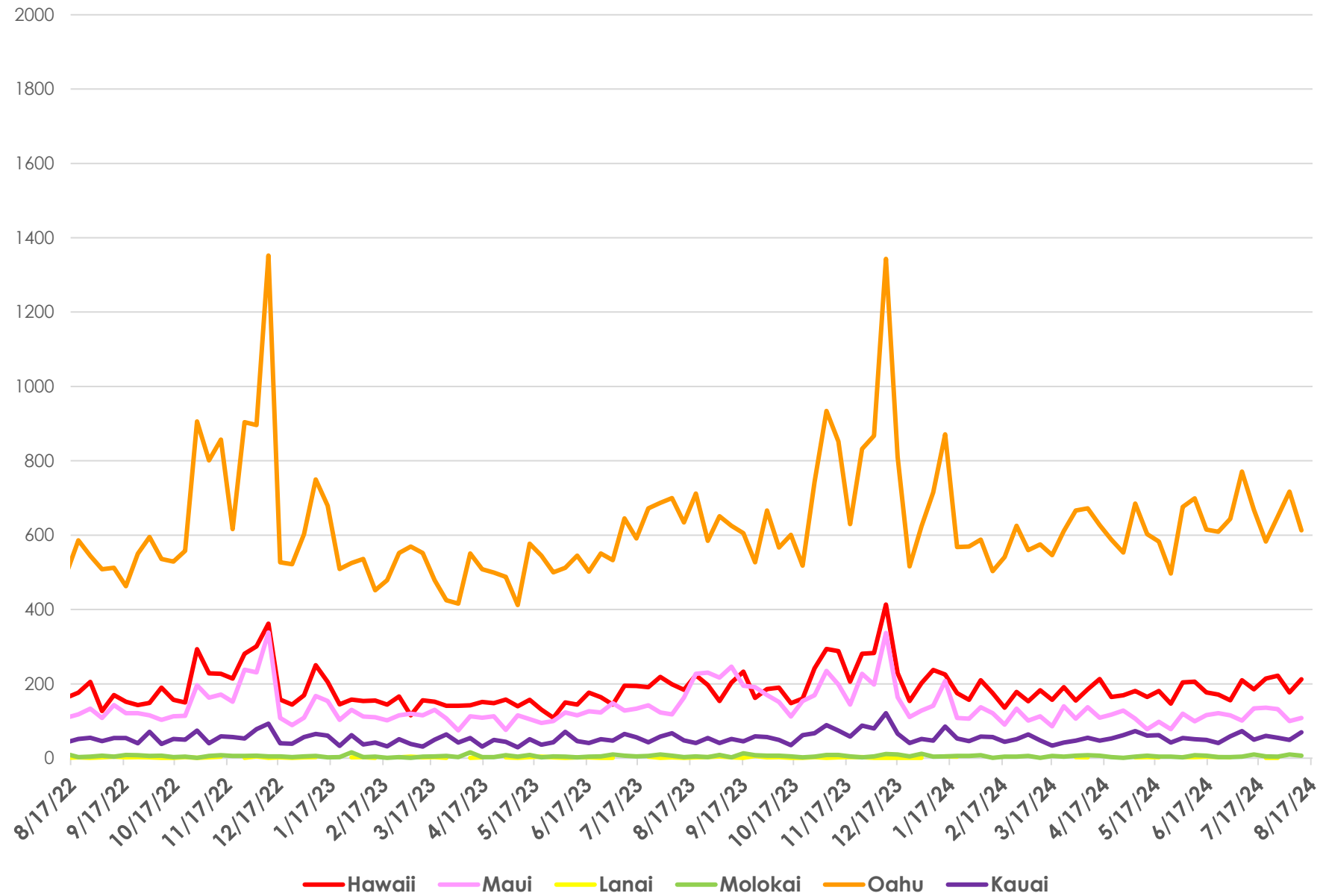


Hawai'i Medicaid Applications Received:

March 2020 to March 2023 MQD Received 209,251 Applications
As of April 2023 - August 17, 2024 MQD has received 73,379 Applications



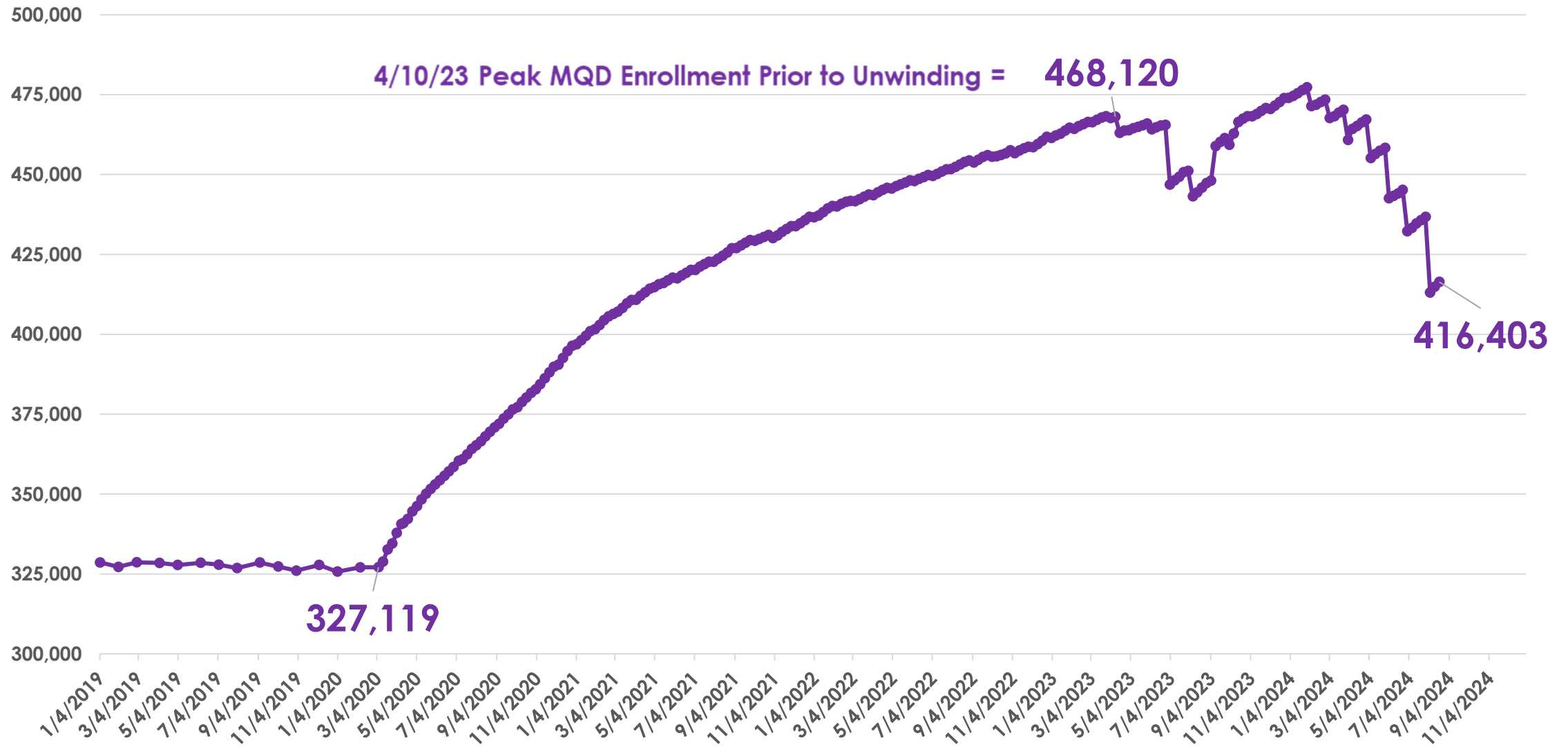
Applications by Island for past 2 years, 8/17/22- 8/17/24



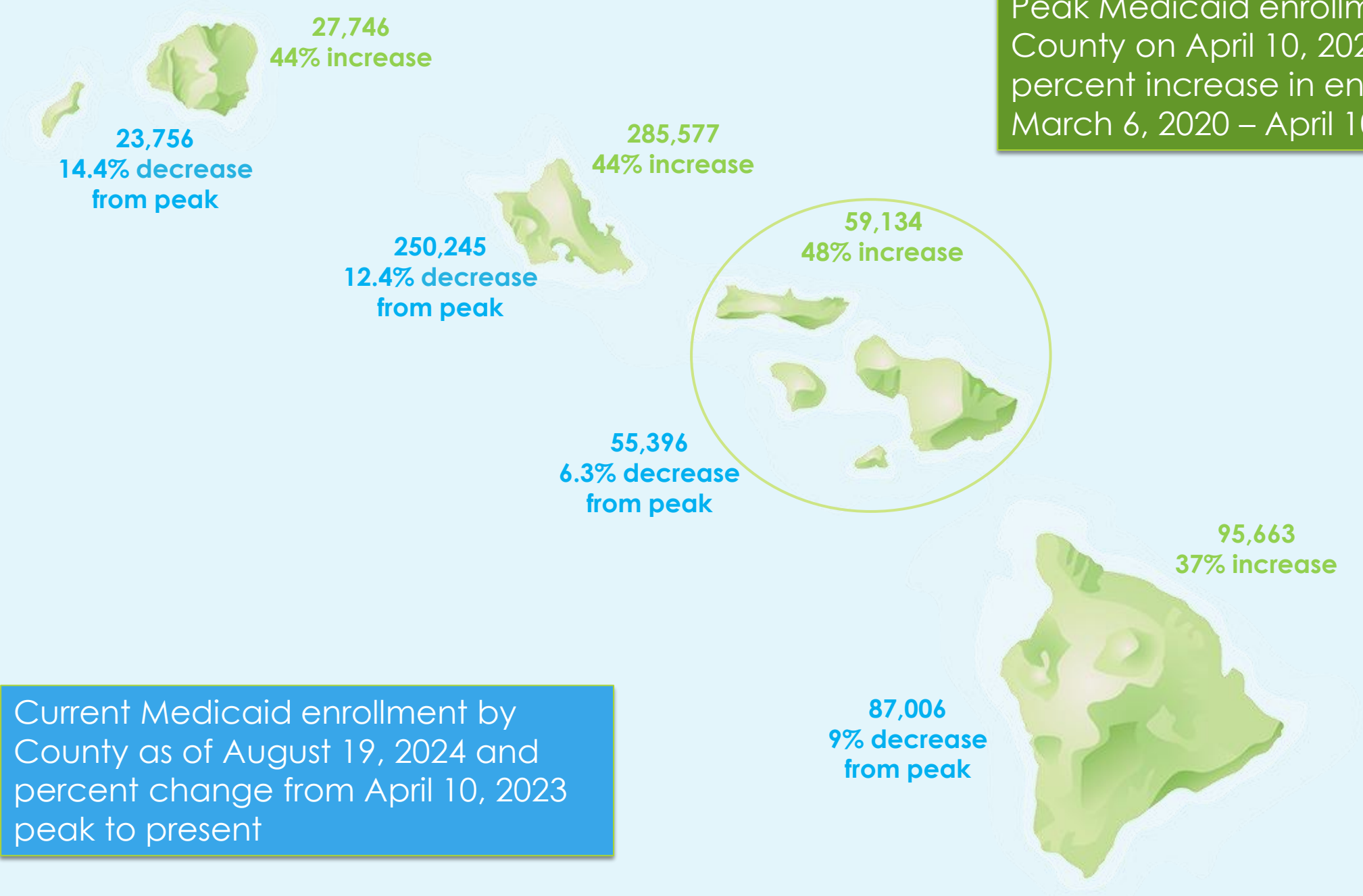
Hawai'i Medicaid Monthly Enrollment: January 2019 to August 19, 2024

141,001 New Enrollments from 3/6/2020 – 4/10/2023 (43% Increase)

51,717 fewer enrollments from 4/10/23 to 8/19/24 (11% decrease from prior Peak Enrollment)



Peak Medicaid enrollment by County on April 10, 2023 and percent increase in enrollments from March 6, 2020 – April 10, 2023



Current Medicaid enrollment by County as of August 19, 2024 and percent change from April 10, 2023 peak to present

MQD reached a milestone in June 2024 as it began eligibility renewal processing for the last group of members who had not yet been renewed since the COVID PHE ended in March 2023. Eligibility renewals for this last group, with a few exceptions, were completed at the end of July 2024.

Renewals will continue on an annual basis for each Med-QUEST member moving forward.

REVISED ELIGIBILITY RENEWAL SCHEDULE:

Renewal month listed in the letter you received in March 2023:		Your new Renewal month after the pause:
September 2023	→	December 2023
October 2023	→	January 2024
November 2023	→	February 2024
December 2023	→	March 2024
January 2024	→	April 2024
February 2024	→	May 2024
March 2024	→	June 2024

FOR MAUI COUNTY* ONLY:

Renewal month listed in the letter you received in March 2023:		Your new Renewal month after the pause:
September 2023	→	April 2024
October 2023	→	April 2024
November 2023	→	May 2024
December 2023	→	May 2024
January 2024	→	June 2024
February 2024	→	June 2024
March 2024	→	June 2024

***All those living in West Maui as of August 2023 will not go through renewal until June 2024**

These revised schedules apply to those Med-QUEST Members who have not gone through their eligibility renewal in 2023.

Please note that if our automated system is able to process your renewal without reaching out to you, you will receive a notice confirming your successful renewal. This may happen prior to the months listed above.



Old Version



State of Hawaii
Department of Human Services
Med-QUEST Division

Effective 4/1/23 – 7/31/24

All Med-QUEST members are allowed to change their health plan at any time after 12 months of membership in a particular QUEST Health Plan.

**After 7/31/24, Med-QUEST will return to an Annual Plan Change Period in October 2024 and every October after that.*

When you change Health Plans, you will be enrolled into the new Health Plan on the first day of the next month. Until then, you'll stay in the health plan you currently have.

You can request to change your Health Plan by calling Med-QUEST at **1-800-316-8005** (Dial 711 for TTY Relay Services) or visiting one of our Eligibility Offices.

Remember, choosing a health plan is important because you'll receive all your health care services from a single health plan. Your health plan can help you find doctors, hospitals, and pharmacies. When choosing a health plan, it's important to see if you can:

- Keep seeing the doctors you prefer.
- Go to the hospital, health care facility, or pharmacy you prefer.

If there's a specific provider you want to see, call the health plan, or visit their website to see if your provider is in their network:

AlohaCare	1-877-973-0712	Alohacare.org
HMSA	1-800-440-0640	Hmsa.com/QUEST
Kaiser Permanente (Only available on O'ahu and Maui)	1-800-651-2237	Kpquest.org
'Ohana Health Plan	1-888-846-4262	Ohanahealthplan.com
UnitedHealthcare Community Plan	1-888-980-8728	Uhcommunityplan.com/Hawaii-medicaid-plans



State of Hawaii
Department of Human Services
Med-QUEST Division

All Med-QUEST members are allowed to change their health plan at any time after 12 months of membership in a particular QUEST Health Plan.

When you change Health Plans, you will be enrolled into the new Health Plan two months after the request is made on the first day of the second month. For example, a change requested anytime in April will be effective on June 1st. Until then, you'll stay in the health plan you currently have.

You can request to change your Health Plan by calling Med-QUEST at **1-800-316-8005** (Dial 711 for TTY Relay Services) or visiting one of our Eligibility Offices.

Remember, choosing a health plan is important because you'll receive all your health care services from a single health plan. Your health plan can help you find doctors, hospitals, and pharmacies. When choosing a health plan, it's important to see if you can:

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New Version



PUBLIC COMMENT



V. CURRENT 1115 DEMONSTRATION WAIVER ANNUAL PUBLIC FORUM

Med-QUEST Division



VISION

The people of Hawai'i embrace health and wellness

MISSION

Empower Hawai'i's residents to improve and sustain wellbeing by developing, promoting and administering innovative and high-quality healthcare programs with aloha. 🌺

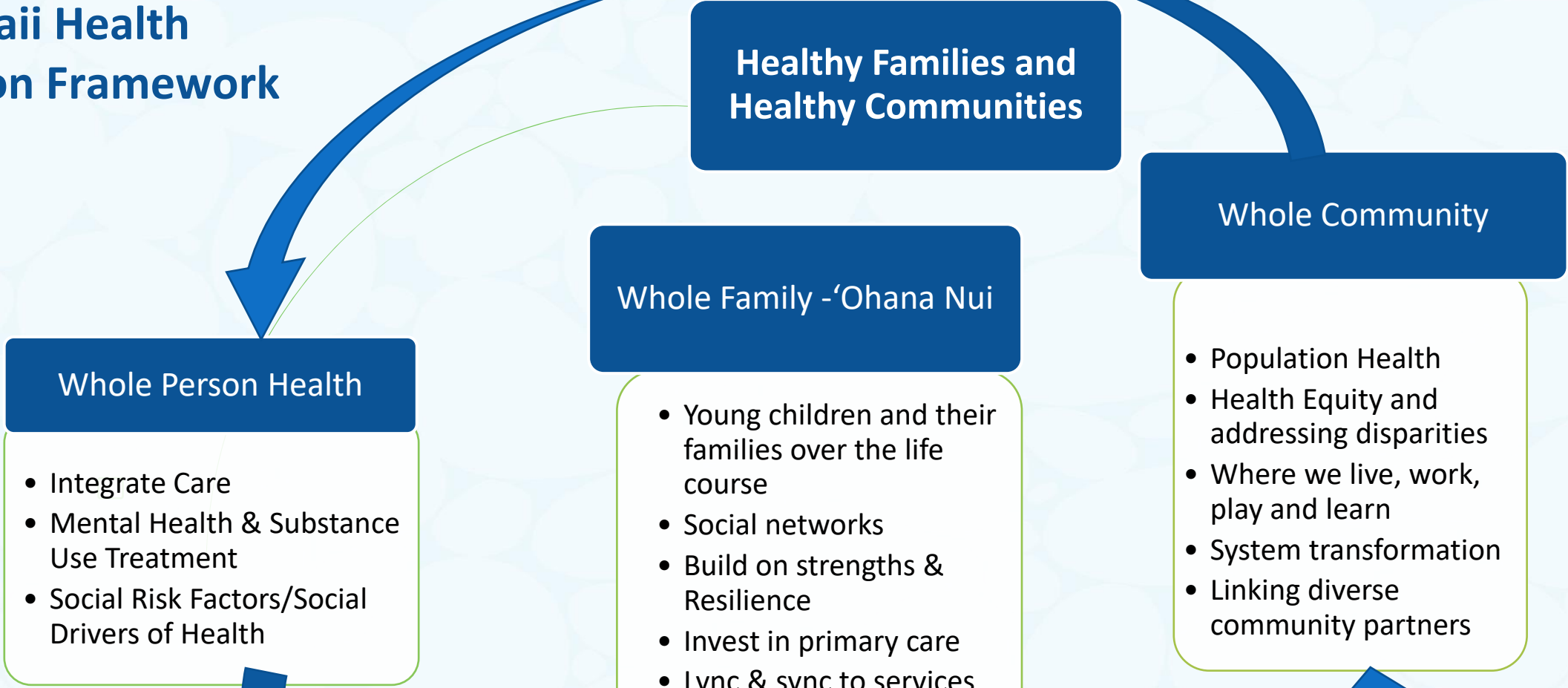
CORE VALUES

Hī'iola ~ Embracing wellness

- H Healthy Outcomes - We develop strategies and improvements necessary to promote overall wellbeing.
- I Integrity – We are accountable to the work we do, the resources we manage and the people we serve.
- ‘ ‘Ohana Nui – We focus on the whole family's needs, with priority on children ages 0 – 5 years old.
- I Innovation – We cultivate an atmosphere of continuous learning and improvement.
- O Optimism – We each make a difference for the people of Hawai'i.
- L Leadership – We are all leaders in the work we do.
- A Aloha – We extend warmth and caring to all.



Hawaii Health Innovation Framework



- Social Drivers of Health (Health-Related Social needs)
- Integration of behavioral health across the continuum
- Health Equity and addressing Health Disparities



HOPE Summary

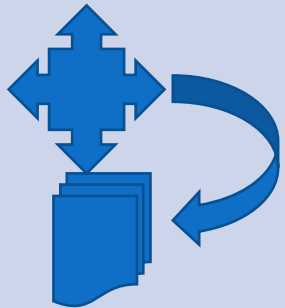
Goals



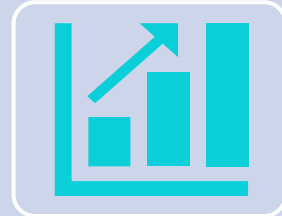
Healthy Families and Healthy Communities

Better Health, Better Care, and Sustainable Costs

Strategies



Invest in primary care, prevention, and health promotion



Improve outcomes for High-Need, High-Cost Individuals

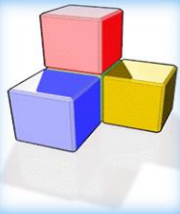


Payment Reform and Financial Alignment



Support community driven initiatives

Foundational Building Blocks



1. Use **data & analytics** to drive transformation & improve care
2. Increase **workforce capacity**
3. Accountability, **Performance measurement** and evaluation

Med-QUEST (MQD) 1115 Waiver Renewal: Summary

- The 1115 demonstration waiver has been in effect since 1994.
- On July 31st, 2019, the Centers for Medicare and Medicaid Services (CMS) approved MQD's 1115 demonstration waiver renewal.
- The waiver allows MQD to deliver QUEST Integration (QI) Medicaid and to provide certain specialty services to support healthy families and communities.
- This renewal authorizes the waiver for five years, from August 1, 2019 to July 31, 2024. ***(note that this timeframe has been extended)***
- MQD timely submitted 1115 demonstration waiver application for renewal on January 17, 2024.
- CMS extended current 1115 demonstration waiver to March 31, 2025.



Update on Waiver

QUEST (Hawaii Medicaid): Health Care Delivery System

- **QUEST Integration:** 99.9% of Medicaid beneficiaries have access to most health care services using managed care via health plans, including long term care services.

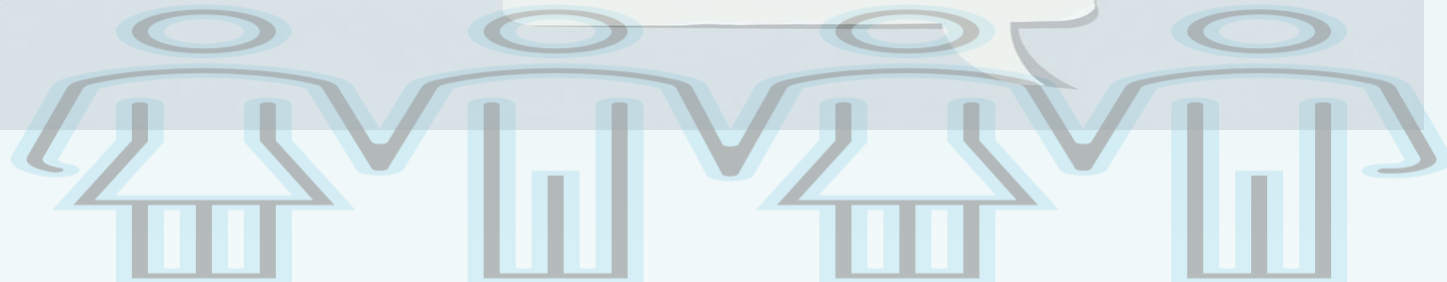


- Re-procured for QUEST Integration
 - AlohaCare, HMSA, Kaiser (Oahu/Maui), 'Ohana and United Healthcare
- **Community Cares Services:** Specialty Mental Health managed care plan for specialty mental health services for individuals with serious mental illnesses.
 - Contract Award – 'Ohana Health Plan 7/1/2021

Contract focus areas related to waiver: Social Determinants of Health/Social Risk Factors; Community Integration Services and Community Transition services; Integration of Behavioral Health; Investment in Primary care; Integration of health for people with complex health and social needs via new care models.

MQD Updates: 1115 Waiver Renewal

- MQD will maintain **existing programs** in the new Waiver and consider **new initiatives**.
 - MQD will **continue current programs and services** to support individuals with housing, behavioral health, and home- and community-based services needs.
 - **New Initiatives** adding services to address **health-related social needs** among select QUEST members.
- MQD **collected feedback on the new initiatives and program and policy details**: The “who, what, where, how and when” considerations.
- The State Public Comment on Waiver renewal was conducted in October 2023 and the Federal Public Comment was conducted in February 2024.



MQD Updates: 1115 Demonstration Waiver Renewal New Initiatives

- New Initiatives largely focus on health-related social needs for specific populations:
 - Medical respite (Recuperative care/short-term stay post-hospitalization)
 - Rent assistance/temporary housing
 - Pre-release services for justice-involved individuals (e.g., case management, medication-assisted treatment)
 - Nutritional supports (e.g. medically-tailored meals; nutrition education/counseling; fruit/veggie “prescription”)
 - + *Substance Use treatment: Contingency management*
 - + *Continuous coverage options for children*



1115 WAIVER UPDATE: KEY ACHIEVEMENTS AND CHALLENGES



Home- and Community-Based Services (HCBS) will continue under the Demonstration

- Hawai'i is one of a few states that has authorization for HCBS through its 1115 waiver.
 - Seeking CMS approval to extend PHE flexibilities in upcoming renewal.
- Other states typically have one or more “1915” waivers that authorize HCBS.
 - Dept of Health/ Developmental Disabilities Division operates the only 1915(c) waiver in Hawai'i.
- CMS has agreed to let Hawai'i continue to use the 1115 waiver.
 - MQD had to include more reporting requirements for HCBS
 - Added reporting requirements to recent QI contract effective 7/1/21



IV. MQD Updates: Advancing Medicare and Medicaid Integration

- MQD aims to improve care delivery for Hawai'i's dually eligible population through contract requirements with Hawai'i dual-eligible special needs plans (D-SNPs) to integrate care and services covered by Medicare and Medicaid .
- Key Achievement: January 1, 2024, marked the launch of Hawai'i's first fully integrated dual-eligible special needs plans (FIDE SNPs) in the state. Three were launched (AlohaCare, Kaiser, and Ohana).



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

2024 Hawai'i Integration Options for Duals

- Highly Integrated Dual Eligible Special Needs Plans (**HIDE SNPs**)
 - AlohaCare
 - HMSA
 - Ohana
 - United
- Fully Integrated Dual Eligible Special Needs Plans (**FIDE SNPs**)
 - AlohaCare
 - Kaiser
 - Ohana

MQD Website (D-SNP Information)

<https://medquest.hawaii.gov/en/members-applicants/Dual-Eligible-Special-Needs-Plan.html>



	HIDE SNP	FIDE SNP
Coordinates Medicaid services	✓	✓
Model of Care (plan for how to meet the needs of members) and benefits to deliver care coordination and management	✓	✓
Improved care coordination and management for CCS and/or I/DD members	✓	✓
Screening for housing stability, food insecurity, and transportation access	✓	✓
Strengthened requirements for access to interpretation services	✓	✓
Member advisory committees to gather direct input on D-SNP member experiences	✓	✓
Default enrollment	✓	✓
Delivers Medicare and Medicaid services through one plan		✓
Exclusively aligned enrollment to integrate care across one healthcare organization		✓
Unified appeals and grievances		✓
One care manager		✓
One member ID card		✓
One provider and pharmacy directory		✓
One list of covered drugs (formulary)		✓
One member call center		✓

MQD Updates: Advancing Medicare and Medicaid Integration

2024 Work with Hawai'i D-SNPs

■ D-SNP Default Enrollment (DDE) Reporting

- Default Enrollment = automatic enrollment of an individual from an approved category of Medicaid, who is becoming eligible for Medicare for the first time, into a D-SNP offered by the same organization as, or one affiliated with, such member's QUEST health plan
- Official release of revised DDE reporting package (April 2024)
- First DDE reports were submitted to MQD by Health Plans (July 2024)

■ 2025 Launch of another FIDE SNP, and an Applicable Integrated Plan (AIP)

- FIDE SNP by HMSA
- AIP HIDE SNP by UnitedHealthcare (will have Exclusively Aligned Enrollment and follow Hawaii's FIDE SNP requirements)



Beyond Clinic Walls: Supportive housing for beneficiaries who are chronically homeless

- CMS approved MQD's §1115 renewal 7/31/2019 to provide supportive housing services through the Community Integration Services (CIS) authority.
- Supports for people to transition from homelessness or institutions
- Supports for individuals that are:
 - Homeless or at-risk of homelessness, and
 - Meet a needs-based criteria:
 - A mental health or substance use disorder (SUD) need; or
 - A complex physical health need.
- Health plans and providers to provide services that help members obtain and maintain housing.
- Ongoing evaluation activities, housing service providers' valuable feedback led MQD to conduct a 2023 'Reset'.



Aloha United Way Homeless Program



Community Integration Services 'Reset'

- Program Implementation Update

- Progress achieved

- Decreased administrative burdens
 - Continuing partnership with Housing Continuum of Care networks (Partners in Care and Bridging the Gap) and other key stakeholders (e.g., Statewide Office on Homelessness and Housing Solutions)
 - Increased collaboration between plans and providers
 - Health plan and provider meeting cadence decreased to once a month due to resolution of challenges around implementation

- Housing Services Partnership Accelerator

- Unfunded federal technical assistance sponsored by the Department of Housing and Urban Development (HUD) and Department of Health and Human Services (HHS)
 - MQD continuing to develop partnerships with local state and federal agencies to explore solutions to housing challenges in Hawai'i

- Continued community engagement to support 1115 Waiver expansion under CIS (i.e, medical respite, rental assistance)



Managed Care: Reporting Updates

- Health plans regularly submit 36 comprehensive data reports spanning HCBS, Administration and Finance, Covered Benefits, and Provider Network and Utilization topic areas
- MQD and health plans have worked cooperatively over the past year to improve reporting data quality
 - 24 reports now have automated data validation tools
- Current Status
 - 29 out of 36 of reports are now meeting data quality requirements and reports are being used to monitor health plan performance
 - 82 Key Performance Indicators are used to monitor health plan performance on critical contractual and programmatic benchmarks
 - 6 additional reports will meet data quality requirements by 1/1/25
 - 5 reports are being revised by MQD to better align to health plan workflows and/or changing policies



Managed Care Oversight: 360° Health Plan Review

- Med-QUEST Division Mission Statement:
 - Empower Hawai'i's residents to improve and sustain wellbeing by developing, promoting and administering innovative and high-quality healthcare programs with aloha.
- Through the 1115 waiver, managed care health plans serve to support the delivery of Medicaid-covered services to members.
 - How do we know the members are appropriately served?
 - MQD has a duty to monitor health plan performance and their compliance with the managed care contract.
- The 360° Health Plan Review will be a key tool to help MQD understand individual and comparative health plan performance.



Managed Care Oversight: 360° Health Plan Review (cont.)

- The 360° is an ongoing performance accountability review of each Medicaid health plan.
- This 360° review will be conducted for both QI and CCS programs.
- The review will include:
 - Analysis of results from some of the routine reports already submitted by health plans to MQD;
 - Results of select audits or reviews;
 - Identification of issues related to a health plan's performance or a pattern across multiple health plans;
 - Information gathered from MQD subject matter experts regarding health plan strengths and opportunities to improve. The SME may also interpret data and frame focus points.
- The 360° review will support a structured discussion with each health plan regarding their performance.
 - Discussion will acknowledge health plan strengths and inform the health plan of MQD's expectations for specific improvements.



Managed Care Oversight: 360° Health Plan Review (cont.)

- § 438.66 (a) General requirement. The State agency must have in effect a monitoring system for all managed care programs.
- Some of the areas where the 360° Review may assist with health plan monitoring and oversight include the following:
 - (1) Administration and management.
 - (2) Appeal and grievance systems.
 - (3) Claims management.
 - (4) Enrollee materials and customer services.
 - (5) Finance, including medical loss ratio reporting.
 - (6) Information systems, including encounter data reporting.
 - (7) Marketing.
 - (8) Medical management, including utilization management and case management.
 - (9) Program integrity.
 - (10) Provider network management, including provider directory standards.
 - (11) Availability and accessibility of services, including network adequacy standards.
 - (12) Quality improvement.
 - (13) Areas related to the delivery of LTSS.
 - (14) All other provisions of the contract, as appropriate.



PUBLIC COMMENT



VI. HEALTH PLAN MEMBER COMMUNICATIONS PRESENTATION - UNITEDHEALTHCARE



Med-QUEST Healthcare Advisory Committee (MHAC)

UnitedHealthcare Community Plan: Hawai'i
Member Communications

August 21, 2024

United
Healthcare

UHC Team

Kalani Redmayne- CEO (25 years)

Dr. Bob Gluckman-CMO (UHC-6 months, Providence Health System- 31 yrs, Medical Education- 18 yrs, CMO Providence Health Plan- 13 yrs)

Bob Carlson- CFO/COO/DSNP Executive Director (16 years)

Kie Kawano- VP, Quality Management (10 years)

Robbyn Takeuchi- VP, Clinical Programs (10 years)

Al Isa- Compliance Officer (7 years)

Joey Caballes- Associate Director, Behavioral Health (9 years)

Orrin Kupau- Operations and Service Improvement Manager (10 years)

Jovie Galanto- Sr. Business Process Analyst/Regional Service Manager (10 years)

Eric Kawada- Director of Delivery Systems Evolution (8 years)



Agenda

- 1. Get to Know Us**
- 2. In Hawai'i for Hawai'i**
- 3. Communication Touchpoints**
- 4. Member Experience**





Get to Know Us

There for What Matters

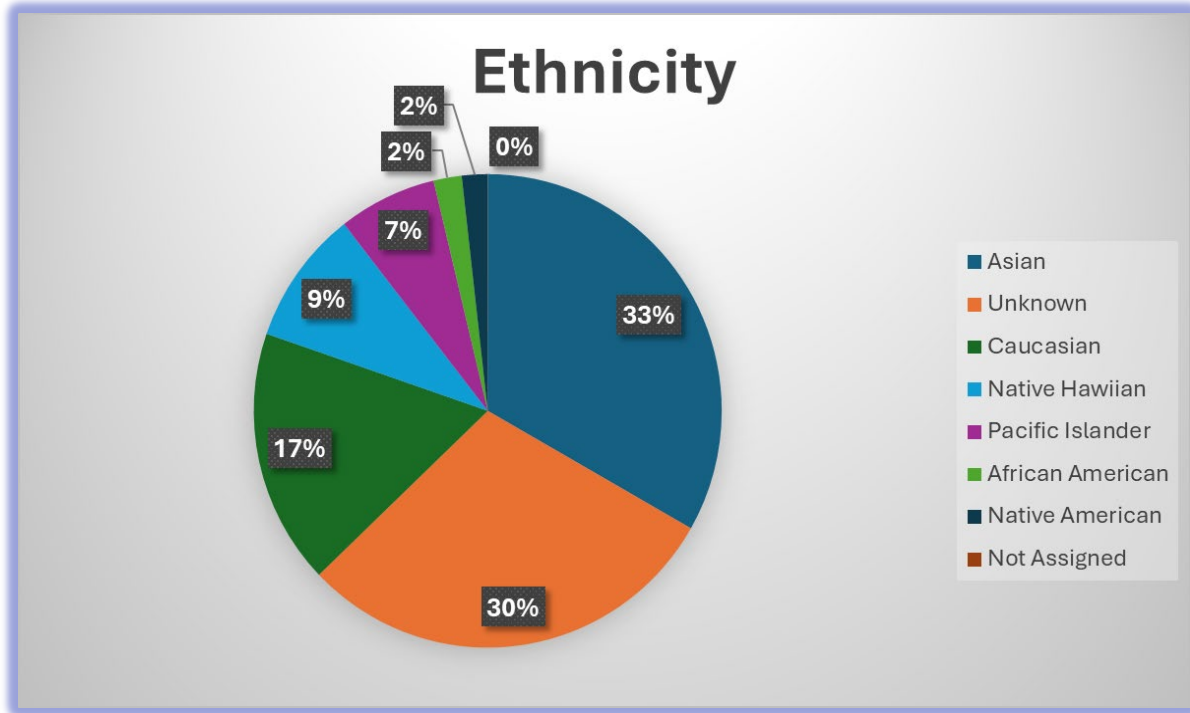
- July 1, 2005: Medicare Advantage Plan
- January 1, 2006: First Medicare Advantage Dual Special Needs (D-SNP) plan in Hawai'i
- February 1, 2009: ABD (QExA) Medicaid program for the aged, blind, and disabled (ABD) & long-term services & support (LTSS) population
- July 1, 2012: QUEST Medicaid program for low-income women, children, and adults
- January 1, 2015: Awarded combined contract to serve the ABD and non-ABD Medicaid members



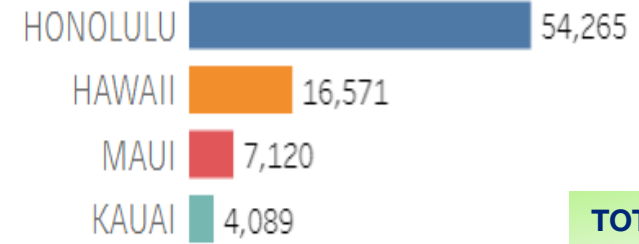


In Hawai'i for Hawai'i

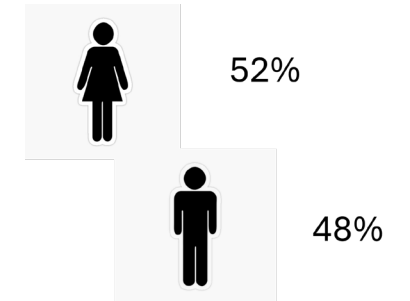
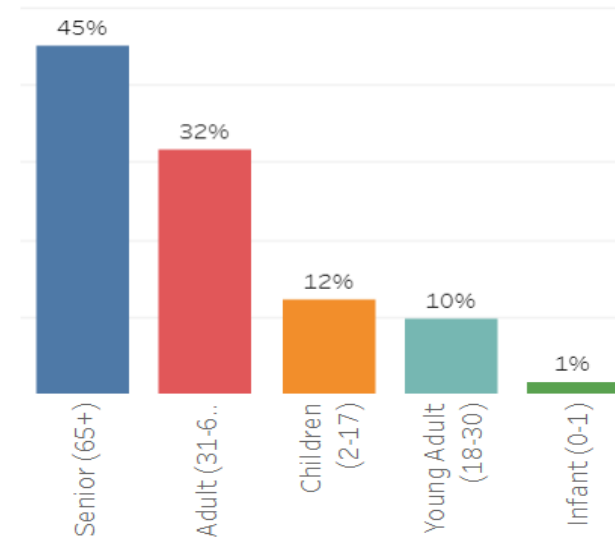
Membership



County



TOTAL: 82,045



Putting Our Members and Their Family First



Benefits

Hawai'i based customer service
Large provider network
Virtual & telehealth options
Prescriptions mailed to home
2025- Exclusively Aligned Product: HIDE



Services

Health Coordination
Behavioral Health support services



Programs

Housing Coordination
Hapai Mālama
Carebridge
Nursing Facility Diversion
Palliative Care
EPSDT
Disease Management: Asthma, Diabetes, & Obesity
Community Transitions for Justice Involved
Traditional Methods of Healing
Member Rewards- Closing Gaps in Care
Goodwill Industries



Our Voice

Justice, Equity, Diversity, and Inclusion (JEDI) Council

This local Council is an extension of the UHC National Council. The core purpose of the Council is to support local awareness and initiatives that cultivate UHC Culture and Values and ensure inclusive, equitable, and bias-free processes. The vision is to foster an inclusive and diverse environment where hiring, developing, and retaining the best talent to increase our culture competence and enabling us to intimately engage the diverse communities we serve and make health care better for everyone. The Council meets regularly and has three (3) work groups: Policy, Education and Training, and Native Hawaiian initiatives.

A tropical beach scene with palm trees and a thatched hut. The image shows a rocky shoreline in the foreground, a line of palm trees in the middle ground, and a thatched hut on the left. The sky is clear and blue.

Community Connection Center

Chinatown (Honolulu)
October 2024

Center Priorities:

- Meaningful community partnerships
- Member and community connection
- Resource, education and system navigation
- Health, recovery, resilience and self-sufficiency

NCQA Accreditation & Distinctions



NCQA HP Re-Accreditation:
Passed with 100% in 2021.
Renewal in 2024:

- Submission date: 1/9/24
- Onsite: 2/26/24



NCQA LTSS Distinction: Passed
with 100%, first achieved in 2021.
UHCCP HI is the only plan in HI
with this Distinction
Renewal in 2024:

- Submission date: 1/9/24
- Onsite: 2/26/24



NCQA MHC Distinction: Obtained
in 2019 and renewed in 2021.
UHCCP HI received NCQA Health
Equity Accreditation in 2023,
scoring 100%. UHCCP HI is the
only plan in HI with this
Accreditation.





Communication Touchpoints

Mail

- Member Handbook
- HealthTalk Newsletter
- Getting Started Guide
- New Member Welcome Letter
- Member ID Card

Connecting you to better health

QUEST Integration Member Handbook
Serving the Islands of: Hawai'i, Kaua'i, Lana'i, Maui, Moloka'i

CS1823M00116823_000

UnitedHealthcare® Community Plan Q4, 2024

HealthTalk
Your journey to better health

What's inside

It's time for your annual flu shot.
Our flu shot location finder makes it easier to find where to get one.
Learn more on page 2.

Covered care

Dr. Chat

Manage your health on the go
Skip the waiting room and chat with a primary care provider (PCP) on UHC Doctor Chat, at no cost to you.
PCPs are available 24 hours a day, 7 days a week and can answer questions big or small. Get the answers, treatment and follow-up care you need, when you need it.

Download the UnitedHealthcare Dr. Chat app today on the App Store® or Google Play™ or learn more at UHCDoctorChat.com.

QUEST Integration
Hawaii's Medicaid Program

Health Plan (80840) 911-87726-04

Member ID: 9999997001 Group Number: HIQI

Member: NEW M ENGLISH Payer ID: 87726

Optum Rx

Rx Bin: 610494
Rx Grp: ACUHI
Rx PCN: 4500

PCP Name: DOUGLAS GETWELL
PCP Phone: (717)851-6816

Effective Date: 06/16/2013

0501 Administered by UnitedHealthcare Insurance Co. TPL-Y

In an emergency go to nearest emergency room or call 911. Printed: 04/02/24

Your PCP will coordinate your health care, except in an emergency. Members have direct access to family planning and women's health services.
Member Services available Monday through Friday 7:45 - 4:30 HST.

For Members: uhccommunityplan.com/hi 888-980-8728 (TTY 711)
Behavioral Health, toll free: 888-980-8728
Transportation, toll free: 866-475-5748
24 Hour NurseLine, toll free: 888-980-8728

For Providers: UHC.provider.com 888-980-8728
Medical Claims: PO Box 31365, Salt Lake City, UT 84131-0365
Behavioral Health Claims: PO Box 30757, Salt Lake City, UT 84130-0757

Pharmacy Claims: OptumRX, PO Box 650334, Dallas, TX 75265-0334
Pharmacy Help Desk: 844-568-2147

Welcome to the Community!

Getting Started Guide
Medicaid QUEST Integration

Look inside for:

- Member Checklist
- Benefits
- Extras
- Convenient Care Options
- Getting Plan Materials

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Phone

Calls from QUEST members are answered by agents from our Member Services Call Center located on four of the eight islands. Our advocate service delivery embodies the Aloha Spirit by opening our call script with the greeting of “Aloha”.

Our agents are trained to proactively resolve a member’s concern on first contact. This involves, but not limited to, contacting providers on behalf of the member, bridging care gaps, scheduling appointments with doctor’s offices or our transportation vendor, connecting members to community-based organizations for services not covered by the health plan and ensuring each member is satisfied with our service.

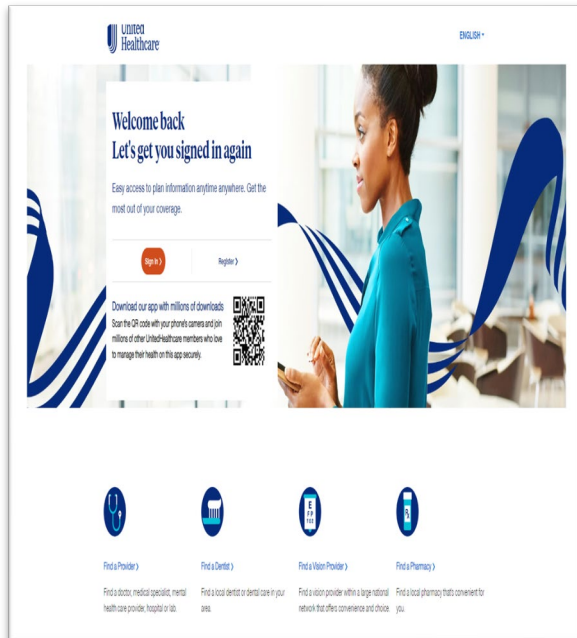


Digital Touchpoints

Hawai'i Community Plan Website:

[Hawai'i Medicaid | UnitedHealthcare Community Plan \(uhc.com\)](https://www.uhc.com)

MYUHC



Welcome back
Let's get you signed in again


Easy access to plan information anytime anywhere. Get the most out of your coverage.

Download our app with millions of downloads. Scan the QR code with your phone's camera and join millions of other UnitedHealthcare members who use to manage their health on the app securely.

Find a Provider | Find a Dentist | Find a Vision Provider | Find a Pharmacy

Find a doctor, medical specialist, mental health care provider, hospital or lab. Find a local dentist or dental care in your area. Find a vision provider within a large national network that offers convenience and choice. Find a local pharmacy that's convenient for you.

UHC Mobile App




UnitedHealthcare® mobile app

Get information on-the-go with the UnitedHealthcare mobile app. Download the UnitedHealthcare mobile app to your [Apple®](#) or [Android®](#) smartphone or tablet and see how easy it is to find nearby doctors, view the Member Handbook, find help and support in your community, or view your ID card.

[Learn More](#)

Dr. Chat




Virtual visits with Doctor Chat

It's not always easy to visit a doctor in person. Virtual visits (or telehealth) let you talk to a doctor 24/7 using your computer, tablet or smartphone. Telehealth is a good option to treat common conditions that have standard treatments. Here are some examples:

- Cold, flu, and fever
- Cough, aches, and sore throat
- Allergies, skin rash, and irritation
- Urinary tract/bladder infection
- Ear infections
- Sinus infections
- Migraine/headache
- And more

[Learn More](#)

Transportation



Transportation

Our Med-QUEST plan provides unlimited round trips to and from health care locations. That includes rides to:

- Doctor or therapy visits
- Health departments
- Vision clinics
- Urgent care centers
- Pharmacies

[Learn More](#)





Face to Face

Health Coordination

- Initial outreach and engagement with members to connect with additional health plan supports
- Assessment, care planning and clinical interventions and discussions to support members with accessing and coordinating needed services
- Health education, system advocacy and resource navigations
- Services are provided by licensed clinical staff, unlicensed health coordinators and community health workers
- 27 Health Coordinators are bilingual, with a total of 13 different languages

Behavioral Health Care Advocacy

- Outreach to members in need of behavioral health supports and resources in addition to or in the absence of health coordination.
- Assessment of member needs, education and advocacy to obtain needed supports
- Services are provided by licensed Behavioral Health professionals and Peer Support

Office Locations

- Oahu (Honolulu)
- Maui (Kahului)
- Big Island (Hilo)
- Community Connections Center (Honolulu)

UHC Community Investment

Scope:

UHC's Community Investment Program focuses on advancing health equity at the individual, organizational, community, and environmental level. With our support, communities can address social needs, strengthen health care access and support well-being at the ground level.

Outcomes:

Through our partnership, we empower communities to make a positive impact in the following areas...

- **Ease the strain on healthcare systems.**
- **Lower the cost of care.**
- **Help people thrive.**
- **Inform better programs.**





Member Experience

Member Advisory Group (MAG)

Member Testimonials from MAG Q2 2024 (6/26/24)

Member Feedback Forum: The MedQUEST office provides its members the option to switch to another health plan once each year without restrictions.

Q1. What are some of the reasons why you chose to be with UnitedHealthcare as your Medicaid Plan?

- *“Benefits and UHC’s customer service has been great.”*
- *“Customer service and benefits.”*
- *“I wasn’t expecting it but my (DSNP) Navigator went above and beyond to resolve my billing issues.”*
- *“My health coordinator is good. She is always helpful.”*

Q2. What might make you switch to another Medicaid plan?

- *“The only thing that would make me change to a different health plan is if you guys were to change your (value added) benefits.”*
- *“If the other plans have better benefits, or benefits reduced.”*





Mahalo!

Questions?

PUBLIC COMMENT



VII. STATE PLAN AMENDMENT PRESENTATIONS AND DISCUSSIONS: UPDATES



State Plan Updates

- SPA 24-0003 Non-Emergency Medical Transportation (NEMT) **Approved 07/11/24 Effective 05/01/24**
- SPA 24-0009- Vision Services: Health Service Initiative (HSI) Payment Methodology updated **Approved 07/31/24 Effective 07/01/23**
- SPA 24-0006 Enrollment Cap Removal—**Withdrawal 07/24/24**
- SPA 24-0008 2024 Third Party Liability (TPL) Requirements —**SPA in Request for Additional Information (RAI) phase. Hawaii will work on developing verbiage for supportive Legislation needed to meet updated TPL requirements.**
- SPA 24-0002 Diabetes Prevention Program-**SPA in RAI**
- SPA 23-0007 Medicaid Application (DHS 1100 “Application For Health Coverage & Help Paying Costs”) –**Under CMS review**
- SPA 24-0004-Hearing Services Health Service Initiative (HSI)-**SPA under review**
- SPA 24-0010 Advanced Practice Registered Nurse (APRN) Provider Services- **SPA under review**



VII. STATE PLAN AMENDMENT PRESENTATIONS AND DISCUSSIONS: NEW



SPA 24-0012 Personal Needs Allowance increase

Background:

Increases the monthly needs allowance for individuals living in certain long-term care facilities from \$50 to \$75. Clarifies that the needs allowance is not intended to replace or affect funds received from the federal Supplemental Security Income Program. Requires certain long-term care facility operators to pay for generic toiletries, linens, and meals and snacks. Clarifies the individuals who are eligible to receive the needs allowance.

SPA language:

Personal Needs Allowance (PNA) of not less than \$~~50~~75.00 for individuals and \$~~100~~ 150.00 for Couples for all Institutionalized Persons.

a. Aged, blind, disabled:

Individuals \$~~50.00~~ 75.00

Couples \$~~100.00~~ 150.00

For the following persons with greater need:

Supplement 12a to Attachment 2.6-A describes the greater need; describes the bases for formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.

Submission to CMS 09/23/24 Proposed Effective Date October 01, 2024



SPA 24-0013 Income Standard of Optional State Supplemental Program increase.

Background:

Increases the state supplemental payment ceilings for type I adult residential care homes, licensed developmental disabilities domiciliary homes, community case foster family homes, certified adult foster homes, and type II adult residential care homes. Effective 10/01/24.

SPA language:

- Domiciliary Care Level I

Individual (2024 SSI Benefit Rate) 943+ With new Hawaii law (784)=1727

Couple (2024 SSI Benefit Rate) 1415 + With new Hawaii law (784)=2199

- Domiciliary Level II

Individual (2024 SSI Benefit Rate) 943 +With new Hawaii law(892)=1835

Couple (2024 SSI Benefit Rate) 1415 +With new Hawaii law(892)=2307

Submission to CMS 09/23/24 Proposed Effective Date October 01, 2024



VII. STATE PLAN AMENDMENT: Coming Soon

- **SPA 24-0007 Vaccine Administration Rate Increase**



PUBLIC COMMENT



VIII. NEXT MEETING: WEDNESDAY, OCTOBER 16, 2024

IX. ADJOURN



A photograph of a lush field of taro plants. The plants feature large, heart-shaped, vibrant green leaves with prominent veins. The stems are thick and dark. The background shows more of the same plants, creating a dense, green canopy. The word "Mahalo!" is written in a large, white, sans-serif font across the middle of the image.

Mahalo!