

Med-QUEST Healthcare Advisory Committee

June 18, 2025



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 - Presentation on current Med-QUEST program activities
 - a. Stay Well Stay Covered - Return to normal eligibility renewals process
 - b. Federal Administration Change
 - c. Hawaii Legislature
 - d. Public Comment
 - e. MHAC Comment
- V. Presentation and Discussion: Dental Program Updates
 - a. Public Comment
 - b. MHAC Comment
- VI. Presentation and Discussion: QUEST Integration Section 1115 Demonstration: Post-Award and Annual Public Forum
 - a. Changes to Authorities and Status Updates
 - b. Public Comment
 - c. MHAC Comment
- VII. Presentation and Discussion: Health Plan Advertisements
 - a. Public Comment
 - b. MHAC Comment
- VIII. State Plan Amendment Presentations and Discussions
 - a. State Plan Amendment: Updates State Plan Amendments submitted & reviewed by MHAC
 - b. State Plan Amendments: New - State Plan Amendments currently being submitted for CMS approval
 - i. SPA 25-0008 Medical Supplies and Home Pharmacy Alignment
 - ii. SPA 25-0009 Dental Services
 - c. State Plan Amendments: Coming Soon – Presentation on upcoming State Plan Amendments
 - d. Public Comment
 - e. MHAC Comments
- IX. Next Meeting: Wednesday, August 20, 2025
- X. Adjourn



IV. MED-QUEST UPDATES

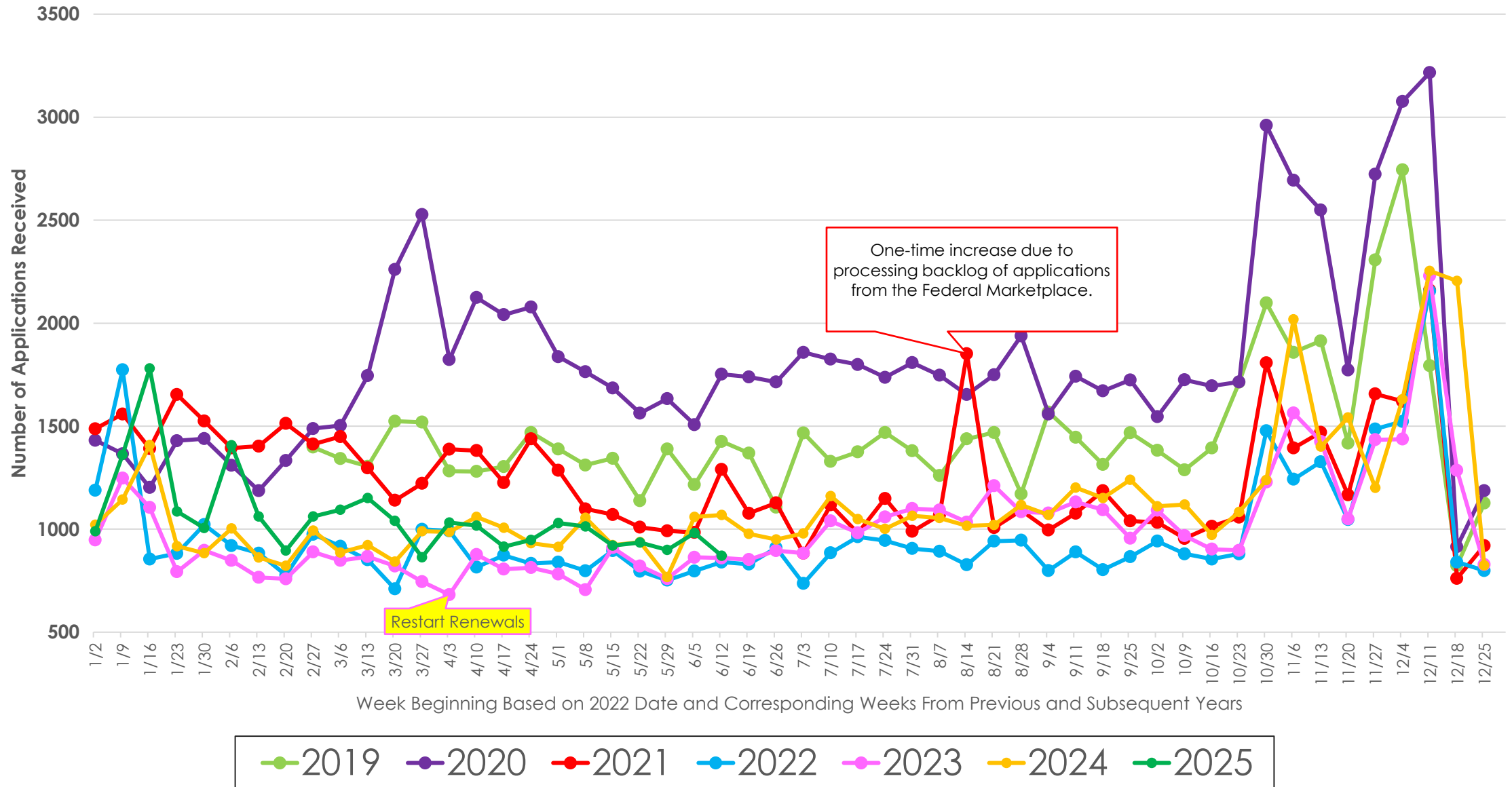


a. Stay Well Stay Covered - Return to normal eligibility renewals process

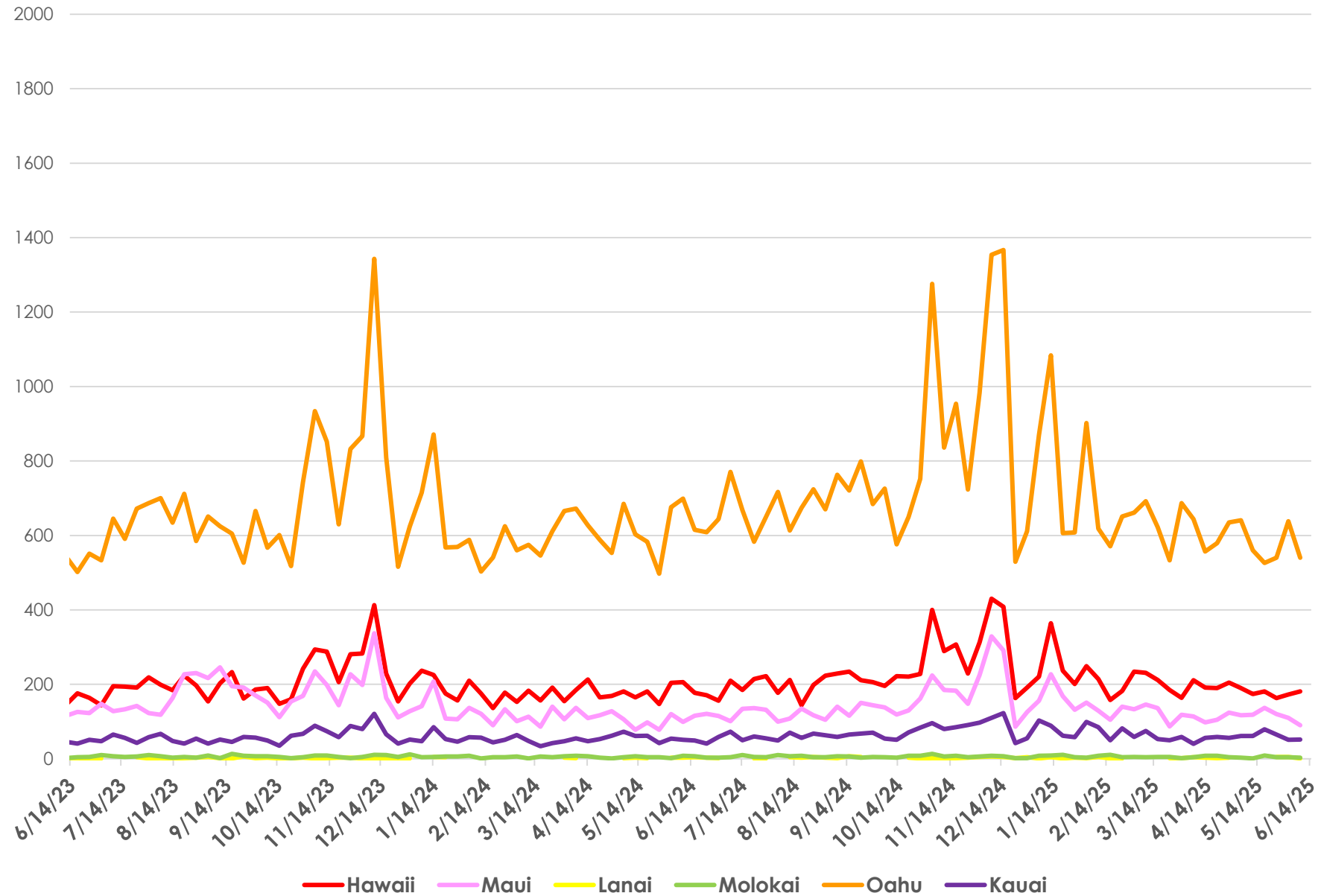


Hawai'i Medicaid Applications Received:

March 2020 to March 2023 MQD Received 209,251 Applications
As of April 2023 - June 14, 2025 MQD has received 124,143 Applications



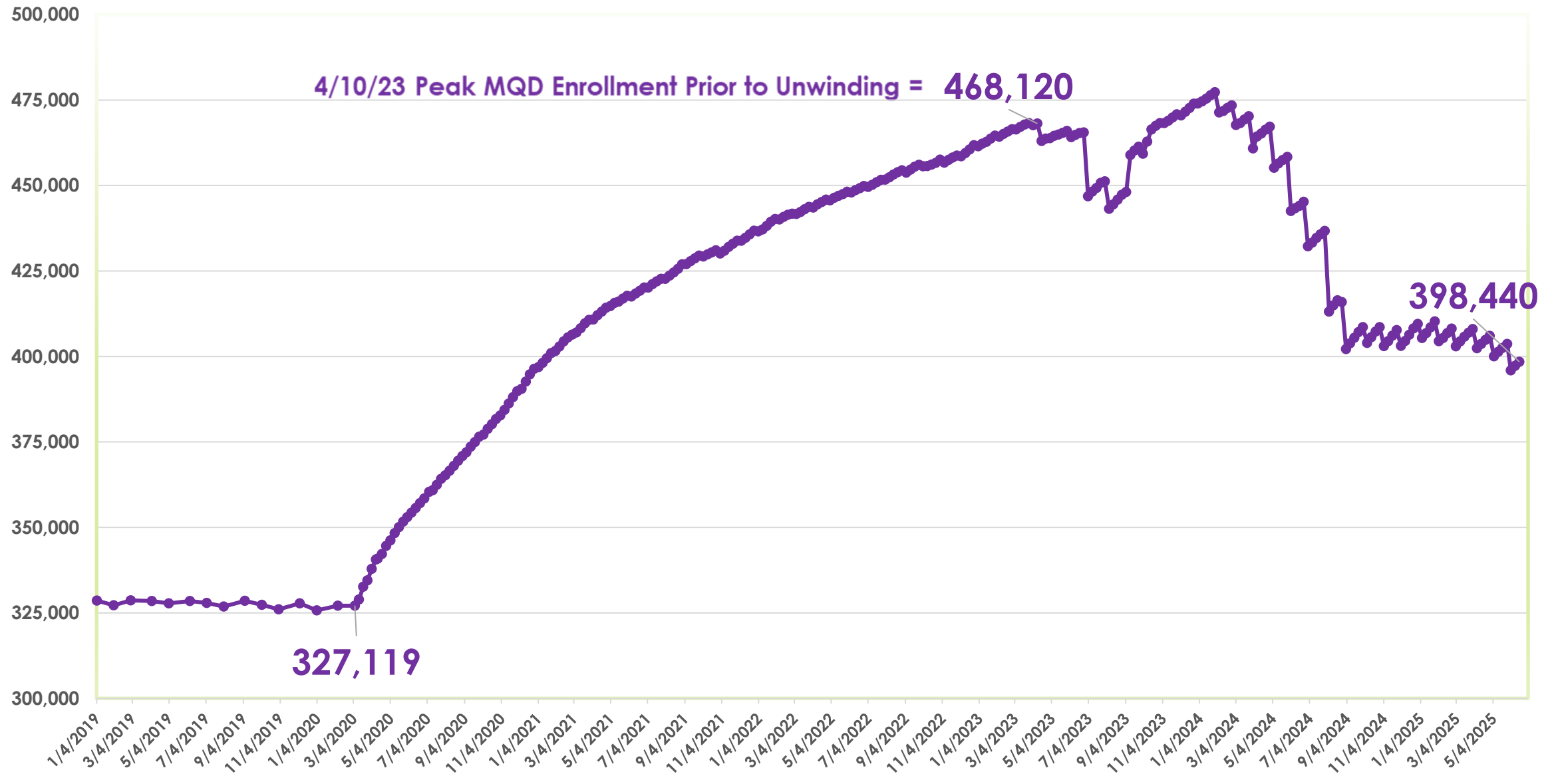
Applications by Island for past 2 years, 6/14/23- 6/14/25



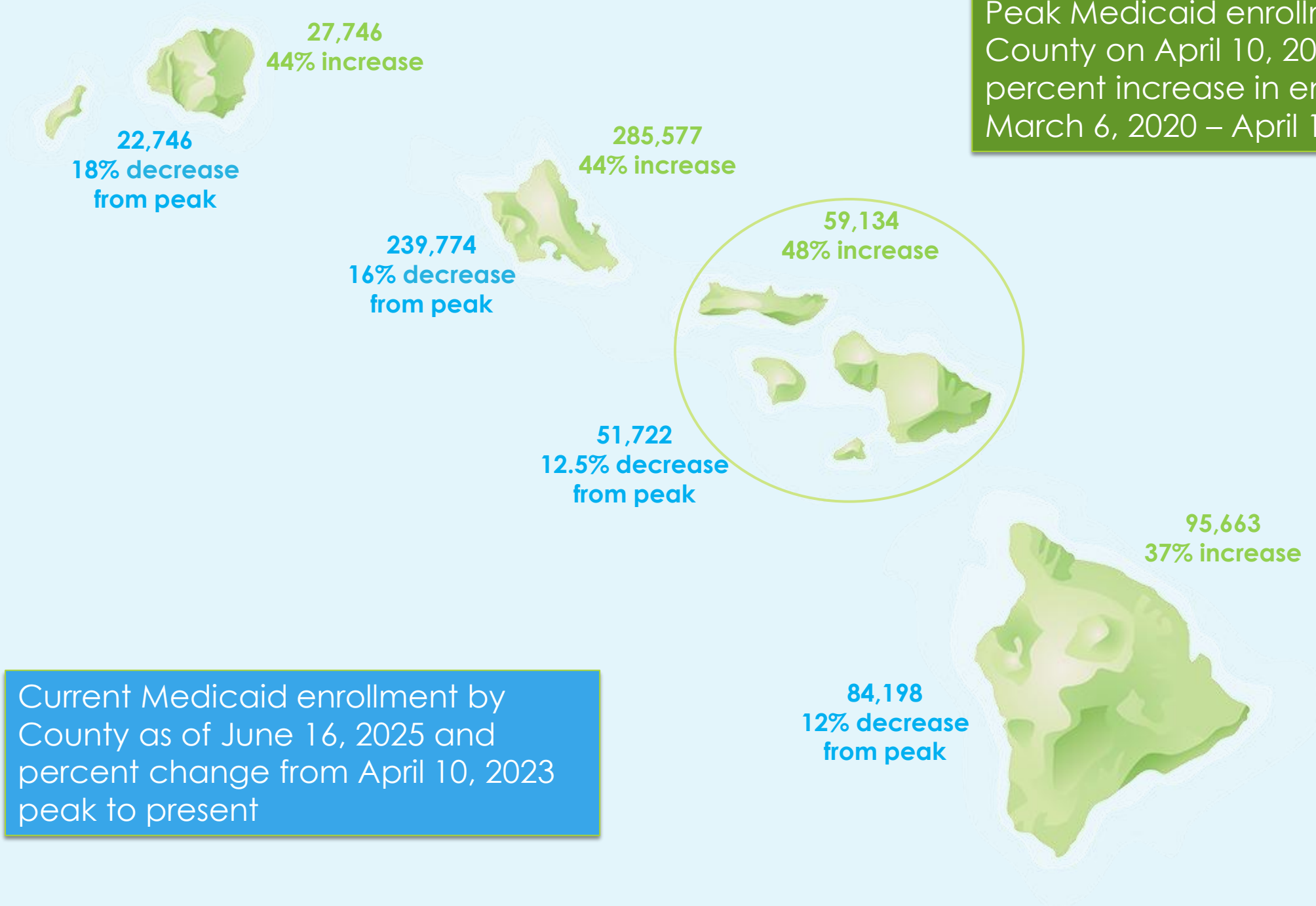
Hawai'i Medicaid Monthly Enrollment: January 2019 to June 16, 2025

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

69,680 fewer enrollments from 4/10/23 to 6/16/25 (14.9% decrease from peak enrollment prior to unwinding)



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



b. Federal Updates

c. Legislative Updates



d. PUBLIC COMMENT



e. MHAC COMMENT



V. PRESENTATION AND DISCUSSION: DENTAL PROGRAM UPDATES



2025 DENTAL PROGRAM UPDATES: GUIDING PRINCIPLES PRESENTED AT MHAC LAST YEAR

- 1) SHIFTING EMPHASIS TO THE PREVENTION OF DISEASE**
 - FOR CHILDREN AND ADULTS**
- 2) MORE CARE FOR INDIVIDUALS WITH SPECIAL MEDICAL/DEVELOPMENTAL NEEDS**
 - CHILDREN AND ADULTS**
- 3) MEANINGFUL USE OF PUBLIC MONEY:**
 - REDUCING FRAUD, MISUSE, WASTE**



**AT MHAC MEETING LAST YEAR, WE ANNOUNCED THAT THE DENTAL PROGRAM
WOULD DEVELOP:**

1) NEW PREVENTION BENEFITS:

D1355 DENTAL CARIES PREVENTION AGENT

2) NEW SPECIAL MEDICAL NEEDS BENEFITS:

D9920 BEHAVIOR MANAGEMENT FOR SPECIAL NEEDS INDIVIDUALS

BOTH BENEFITS WERE INTRODUCED IN MAY 2025

SEE CHAPTER 14 FOR FULL DETAILS.



PREVENTION: D1355 DENTAL CARIES PREVENTION AGENT

PATIENTS WHO REFUSE FLUORIDE ARE AT HIGHER RISK OF DEVELOPING CAVITIES.
THIS BENEFIT WAS CREATED TO GIVE DENTISTS ALTERNATIVE OPTIONS
FOR PATIENTS WHO REFUSE FLUORIDE VARNISH.

PATIENTS AND DENTISTS MAY CHOOSE TO SUBSTITUTE TOPICAL FLUORIDE WITH:

- 30% SDF OR
- 10% POVIDONE IODINE

AVAILABLE 2X A YEAR, SAME AS FLUORIDE
NOW AVAILABLE FOR CHILDREN. SOON AVAILABLE FOR ADULTS.

SEE CHAPTER 14.9.2



D9920 BEHAVIOR MANAGEMENT FOR SPECIAL NEEDS INDIVIDUALS

THIS BENEFIT WAS CREATED TO ENCOURAGE MORE DENTISTS TO SERVE INDIVIDUALS WITH EXCEPTIONAL PHYSICAL AND BEHAVIORAL CHALLENGES THAT REQUIRE SPECIAL MODIFICATIONS TO NORMAL DENTAL CARE.

BENEFIT MUST BE LINKED TO MEDICAL NECESSITY: INCLUDING A DIAGNOSIS OF A DEVELOPMENTAL OR INTELLECTUAL DISABILITY, AS DEFINED IN HAWAII ADMINISTRATIVE RULES 11-88.1.5.

THIS INCLUDES BUT IS NOT LIMITED TO:

- CEREBRAL PALSY
- EPILEPSY
- AUTISM SPECTRUM DISORDER
- CHROMOSOMAL DISORDERS

AVAILABLE 4X A YEAR
NOW AVAILABLE FOR CHILDREN.
SOON AVAILABLE ALSO FOR ADULTS.

SEE CHAPTER 14.9.10

(IMAGES FROM GOOGLE)



Future developments will continue to focus on:

- 1) PREVENTION OF DISEASE FOR ALL AGES**
- 2) CARE FOR INDIVIDUALS WITH SPECIAL MEDICAL/DEVELOPMENTAL NEEDS**
- 3) REDUCING FRAUD, MISUSE, WASTE**

**FEEDBACK, TEAMWORK, COLLABORATION?
CONTACT THE DENTAL PROGRAM:**

MEDICAIDDENTAL@DHS.HAWAII.GOV



CONTACT THE DENTAL PROGRAM:

MEDICAIDDENTAL@DHS.HAWAII.GOV



a. PUBLIC COMMENT



b. MHAC COMMENT



VI. SECTION 1115 DEMONSTRATION: POST-AWARD AND ANNUAL PUBLIC FORUM



a. SECTION 1115 DEMONSTRATION: AUTHORITIES AND STATUS UPDATES



Med-QUEST (MQD) 1115 Demonstration Renewal: Overview

Background

- On January 8, 2025, the Centers for Medicare and Medicaid Services (CMS) approved a five-year extension to Hawai'i's QUEST Integration (QI) Section 1115 Demonstration.
- The demonstration allows MQD to continue most of its previous authorities and includes many new initiatives to support healthy families and communities.

Today's Focus

- Summarize the newly approved Section 1115 demonstration changes and reflect on the most recent demonstration's performance and impact across key topic areas:
 - Managed Care
 - Behavioral Health
 - Home and Community-Based Services
 - Health Related Social Needs
 - Designated State Health Programs
 - Justice-Involved Populations
 - Coverage and Eligibility



Managed Care – Continuing Authority without Change



QUEST Integration Mandatory Managed Care

This authority allows Hawai‘i to operate Medicaid through managed care health plans (QI Health Plans) rather than fee-for-service.

Authority

What Continues

- All authority continues as previously approved.

What’s New

- No new or expanded authority.

Status Updates

- MQD enhanced and revised reporting requirements for QI Health Plans.
- Launched in 2024, MQD will continue 360° Health Plan Reviews to assess health plan performance across quality, operations, and compliance.
- MQD continues to facilitate workgroups with QI Health Plans, including on topics like:
 - Clinical, quality, operations, providers, and social determinants of health.



Behavioral Health – Continuing and New Authority



Behavioral Health

This authority allows Hawai‘i to provide specialized behavioral health services and provides new authority for the State to implement contingency management services.

Authority

What Continues

- Provide specialized behavioral health services through Community Care Services (CCS).

CCS provides intensive behavioral health services for adults with serious mental illness and is administered through ‘Ohana Health Plan.

What’s New

- Provide contingency management (CM) services for certain beneficiaries with a stimulant use disorder and/or opioid use disorder.


CM is an evidence-based treatment that provides a series of motivational incentives for meeting treatment goals.

Status Updates

- In 2024, MQD completed the 360° Health Plan Review of CCS, which assessed quality and performance across various functional areas.
- MQD released a request for information (RFI) on the use of a third-party administrator for CM in April 2025 and began stakeholder conversations to inform implementation.



Home and Community-Based Services (HCBS) – *Expanded and New Authority*

<div data-bbox="229 414 407 556"></div> <div data-bbox="96 675 560 772"><p>Home and Community-Based Services</p></div> <div data-bbox="96 843 537 1053"><p>This authority allows Hawai'i to provide HCBS to eligible individuals and provides new authority to expand HCBS access.</p></div>	<div data-bbox="1110 282 1324 328"><p>Authority</p></div> <div data-bbox="682 368 1003 411"><p>What Continues</p></div> <div data-bbox="631 454 1047 793"><ul style="list-style-type: none">▪ Provide a spectrum of HCBS to eligible individuals who meet institutional level of care requirements or are at risk of institutionalization.</div> <div data-bbox="1454 368 1696 411"><p>What's New</p></div> <div data-bbox="1192 454 1865 1046"><ul style="list-style-type: none">▪ Allow certain HCBS to be delivered via telehealth.▪ Allow payment to family caregivers or legally responsible individuals (LRIs) for rendering personal assistance services.▪ Provide non-medical transportation services to and from HCBS.▪ Provide personal care services to those who are living in assisted living facilities (ALFs) and at risk of institutionalization.</div>	<div data-bbox="2020 282 2354 328"><p>Status Updates</p></div> <div data-bbox="1951 446 2374 686"><ul style="list-style-type: none">▪ MQD submitted an updated HCBS quality improvement strategy to CMS in April 2025.</div>
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Health Related Social Needs (HRSN) Initiatives – *Expanded and New Authority*



Health Related Social Needs

This authority allows Hawai'i to expand housing supports and implement new HRSN initiatives including housing, nutrition, transportation, and infrastructure.

What Continues

- Provide housing supports through the new Community Integration Services Plus (CIS+) program, building upon the previous CIS and Community Transition Services programs. Current services include:
 - Pre-tenancy supports
 - Tenancy sustaining services
 - Legal assistance
 - Moving costs
 - Utility set up
 - One-time security deposit
 - Home accessibility modifications and repairs

Authority

What's New

Housing	Rental assistance & utility payments up to 6 months, medical respite services*, housing application costs, and engagement services. These services with the continued housing supports create the new CIS+ program.
Nutrition	Nutrition instruction, home delivered meals, medically tailored meals, and nutrition prescriptions.
Non-Medical Transportation	Transportation to and from HRSN services.
Infrastructure	Funding to support infrastructure and capacity-building investments needed for the implementation of HRSN services.

**Includes Recuperative Care, Short-Term Post-Hospitalization Housing, and Pre-Procedure Housing*

Status Updates

- MQD submitted the HRSN Maintenance of Effort plan to CMS in April 2025.
- MQD is beginning its implementation planning efforts across all HRSN service types as well as planning for infrastructure funding.



Designated State Health Programs (DSHP) – *New Authority*



Designated State Health Programs

This authority allows Hawai'i to receive Medicaid matching funds for non-Medicaid state health programs that align with Medicaid goals.

Authority

- Allow claiming of federal Medicaid matching funds for DSHP expenditures (state programs that are population- or public-health focused, align with the objectives of Medicaid, and serve low-income individuals).
- Funds must be used to support HRSN initiatives, including housing, nutrition supports, and infrastructure building.
- CMS authorized up to \$128M in DSHP expenditure authority over the next 5 year renewal time period.

Status Updates

- MQD has submitted and received approval for a list of DSHP programs, which operate under the Department of Health (DOH).
- MQD is currently working on the DSHP Claiming Protocol, which requires data sharing across State agencies to enable fund claiming and tracking activities.



Justice-Involved Populations – *New Authority*



Reentry Demonstration

This authority allows Hawai'i to cover a set of pre-release services for certain justice-involved individuals leaving incarceration.

Authority

- Provide limited coverage for a targeted set of services to certain justice-involved individuals for up to 90 days before the individual's expected release date.*
- Services include: case management, substance use disorder treatment, clinician visits, a 30-day supply of prescriptions, and other services to support transitions back to the community.

Status Updates

MQD aims to begin implementation of pre-release services this year in State prisons.

Current Efforts Include:

- Developing a facility readiness assessment
- Collaborating with correctional facilities and community providers
- Implementing approved infrastructure funding

Key Challenges:

- Coordinating services for individuals in contracted Arizona carceral facilities
- Potential access challenges on smaller islands
- Uncertain or changing jail release dates
- Coordinating service delivery between prison staff and community providers

* Includes mandatory coverage for justice-involved youth as required by the Consolidated Appropriations Act of 2023.



Coverage and Eligibility – *New Authority*



Coverage and Eligibility

This authority allows Hawai‘i to cover new populations and provide continuous eligibility for select groups.

Authority

- Provide Medicaid coverage up to age 26 for out-of-state former foster care youth and individuals who aged out of adoption assistance and kinship guardianship assistance agreements with other states.
- Provide continuous Medicaid eligibility for children, as described in the table below:

Status Updates

- Continuous eligibility authority was effective starting November 14, 2024, and implemented January 1, 2025.
- In April 2025, MQD released a policy and program directive detailing continuous eligibility.

Population	Duration of Continuous Eligibility Period
Children up to age 6	Continuous eligibility for children until the end of the month of their 6th birthday.
Children aged 6-18	24-month periods from age 6 until the end of the month that the member turns 19.



Resources and References

- [Hawaii QUEST Integration 2025 Extension Approval Letter from the Centers for Medicare & Medicaid Services](#)
- [Hawaii QUEST Integration Section 1115\(a\) Demonstration 11-W-00001/9 Waiver Authorities and Special Terms and Conditions](#)
- [Medicaid Community Integration Services](#)



b. PUBLIC COMMENT



c. MHAC COMMENT



VII. PRESENTATION AND DISCUSSION: HEALTH PLAN ADVERTISEMENTS





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HM25-046





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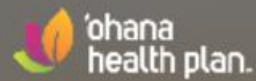
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Team Copy: Ann Design: [redacted] Marketing: Veronica	Project details File name: CSG17579452_H25_QUESTIONS.qxd Project: QUESTIONS Trim marks: include trim marks but keep it outside of the bleed area (set the offset to .25") Safety area: .25" Orientation: Portrait/ tall	Specifications Color(s): 4/0 Bleed: 1/8" Bottom: 1/8" Left: 1/8" Right: 1/8" Top: 1/8" Fold: 3.5 x
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Stage:



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a. PUBLIC COMMENT



b. MHAC COMMENT



VIII. STATE PLAN AMENDMENT (SPA) PRESENTATIONS AND DISCUSSIONS



**a. STATE PLAN AMENDMENT: UPDATES -
PRESENTATION ON THE STATUS OF STATE PLAN
AMENDMENTS PREVIOUSLY REVIEWED BY THE
MHAC**



State Plan Updates

- SPA 25-0006 Nursing Facility edits age 21 and over alignment- Submitted to CMS on 06/06/25
- SPA 25-0004 Mandatory Coverage for Eligible Juveniles who are Inmates of a Public Institution Post Adjudication of Charges Withdrawn on 05/12/25
- SPA 24-0002 Diabetes Prevention Program-Official response to RAI on 06/03/25
- SPA 24-0008 Third Party Liability Assurances- Official response to RAI on 06/13/25
- SPA 23-0007 Medicaid Application-In RAI



State Plan Updates

- SPA 25-0007 Medical Care Advisory Committees (MCAC) Requirements –ON HOLD



**b. STATE PLAN AMENDMENT PRESENTATIONS AND
DISCUSSIONS: NEW - PRESENTATION OF STATE
PLAN AMENDMENTS CURRENTLY BEING SUBMITTED
FOR CMS APPROVAL**



SPA 25-0008 Medical Supplies and Home Pharmacy Alignment

Background:

The current state plan has conflicting language for Medical Supplies and Home Pharmacy Services in two different areas. Language in Attachment 4.19-B pg.4 has been deleted, and authority for medical supplies and home pharmacy are in the section below.

Attachment 4.19-B pg. 2.1

Effective January 1, 2024, the following services are paid at no less than 60% of the current Medicare Fee Schedule in effect for the prior calendar year or as required by federal law not to exceed 100% of Medicare:

- Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) (comprehensive periodic examination, case management, skilled nursing and personal care services.)
- Home pharmacy services;
- Medical supplies;
- Home Health Agency Services



SPA 25-0008 Medical Supplies and Home Pharmacy Alignment cont.

The following sections below will be removed to ensure consistency in the state plan.

Attachment 4.19-B pg. 4

~~(([k]) [Payment for medical supplies shall be the lowest of billed charges, the rate established by the department, or the Medicare fee schedule for providers who participate in Medicare.]~~

~~(([l]) [Payments for home pharmacy services shall be the lower of~~

- ~~▪ billed charges, the rate established by the department of~~
- ~~▪ the Medicare fee schedule for providers who participate in~~
- ~~▪ Medicare]~~

Submission to CMS- prior to June 30, 2025

Proposed Effective Date July 1, 2025



SPA 25-0009 Dental Services

Background:

The Dental Services section in Supplement to Attachment 3.1-A and 3.1-B pg. 3 has been amended to rephrase the current language under Dental Services to enhance its suitability for professional healthcare context.

In addition, following benefits were added to the list of current dental services covered effective April 1, 2025:

1. Dental benefit for dental providers who see individuals with I/DD and challenging behaviors.
2. Coverage of non-fluoride agents

Submission to CMS- prior to June 30, 2025

Proposed Effective Date April 1, 2025

SPA Attachments have been posted at <https://medquest.hawaii.gov/en/about/state-plan-1115.html> for your review and reference.



C. STATE PLAN AMENDMENT: Coming Soon

- SPA 25-0009 Medical Assisted Treatment (MAT)



d. PUBLIC COMMENT



e. MHAC COMMENT



IX. Next Meeting: Wednesday, August 20, 2025

X. ADJOURN



A photograph of a lush field of taro plants. The plants feature large, vibrant green, heart-shaped leaves with prominent veins. The leaves are densely packed, creating a thick canopy. In the center of the image, the word "Mahalo!" is written in a large, white, sans-serif font. The background shows more of the same plants, with some dark stems visible. The overall scene is bright and natural.

Mahalo!