Med-QUEST Healthcare Advisory Committee Agenda

I. Welcome/Call to Order
II. Review of meeting participation guidelines and process
III. Presentation: 1115 Demonstration Waiver Annual public forum
IV. Public Comment
V. Review of QUEST Integration Decision Booklet 2021
VI. Public Comment
MED-QUEST PROGRAM UPDATE
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
Hi‘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 Hawaii'

L Leadership – We are all leaders in the work we do.

A Aloha – We extend warmth and caring to all.
Enrollment has grown substantially from 2003 to 2021:

FY 04: 190,381  
FY 05: 200,534  
FY 06: 202,980  
FY 07: 205,397  
FY 08: 212,489  
FY 09: 235,203  
FY 10: 259,307  
FY 11: 272,218  
FY 12: 287,902  
FY 13: 292,423  
FY 14: 318,756  
FY 15: 328,373  
FY 16: 333,322  
FY 17: 360,622  
FY 18: 359,119  
FY 19: 346,820  
FY 20: 359,136  
Jan-21: 399,946

Enrollment has seen a 20% increase from March 2020 to Jan 2021, largely due to the COVID-19 public health emergency.
Increase in weekly applications received by County from the year before the pandemic (March 2019 – February 2020) compared to the period since March 2020

<table>
<thead>
<tr>
<th>County</th>
<th>Average Weekly Application Count Year Before Pandemic</th>
<th>Average Weekly Application Count Since March 2020</th>
<th>Average Percentage Increase in Applications</th>
</tr>
</thead>
<tbody>
<tr>
<td>Honolulu</td>
<td>884</td>
<td>1076</td>
<td>22%</td>
</tr>
<tr>
<td>Maui</td>
<td>198</td>
<td>282</td>
<td>42%</td>
</tr>
<tr>
<td>Hawai‘i</td>
<td>264</td>
<td>275</td>
<td>4%</td>
</tr>
<tr>
<td>Kaua‘i</td>
<td>89</td>
<td>120</td>
<td>34%</td>
</tr>
<tr>
<td>Statewide</td>
<td>1,435</td>
<td>1,752</td>
<td>22%</td>
</tr>
</tbody>
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Application increase in Nov-Dec reflects additional application activity due to the Federal Marketplace open enrollment period.
Hawai‘i Medicaid Monthly Enrollment: January 2019 to present

87,595 New Enrollments since 3/6/2020
26.6% Increase in enrollments in 60.5 weeks

Total Enrollment, Hawaii Medicaid (Jan 2019 - Present)
Current Medicaid enrollment by County and Percentage increase in enrollments since March 6, 2020

- 53,276 (33% increase)
- 251,299 (27% increase)
- 25,193 (31% increase)
- 84,846 (21% increase)
Since March 6, 2020:

Total Medicaid Applications Received: 105,755

Total New Medicaid Enrollments: 87,595

Percentage of Applications Eligible for Medicaid: 82.8%
1115 WAIVER UPDATE
Med-QUEST (MQD) received approval for its Section 1115 waiver renewal in 2019

- 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 waiver renewal request.
- The waiver allows MQD to operate a managed care program, provide certain specialty services, and expand eligibility for certain specific population groups.
- This renewal authorizes the waiver for another five years, from August 1, 2019 to July 31, 2024.
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.
- Other states typically have one or more 1915 waivers that authorize HCBS.
  - Dept of Health/Developmental Disabilities Division operates the only 1915 waiver in Hawai‘i.
- CMS agreed to let Hawai‘i continue to use the 1115 as the vehicle until at least 2024.
  - MQD must put into place more reporting requirements for HCBS.
  - Added reporting requirements to recent QI contract effective 7/1/21
Beyond Clinic Walls: Supportive housing for beneficiaries who are chronically homeless

- CMS approved MQD’s §1115 renewal 7/31/2019 to provide “Community Integration Services,” better known as supportive housing services.

- Supports for people to transition from homelessness or institutions like moving costs, utilities and rent deposits (payer of last resort)

- 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 will help obtain and maintain housing.

- MQD issued guidance recently and we are working with health plans for continued improvements.
Community Transition Services

MQD asked to expand the services available under CIS in the waiver renewal to better support individuals experiencing homelessness.

MQD has been given authorization to provide the following services:

- Transitional Case Management Services
- Housing Quality and Safety Improvement Services
- Legal Assistance
- Securing House Payments

MQD is currently working internally and with stakeholders and health plans on implementing these additional services.
Hawaii Behavioral Health Services Protocol approved 9/1/20 and effective through 7/31/24

- Attachment E in the 1115 Waiver
- Describes the general and specialized behavioral health benefits available to Medicaid members
- Describes what entity provides these services
• 1115 Demonstration Waiver Evaluation Design approved 10/14/20 and effective through 7/31/24
  ▫ Attachment A in the 1115 Waiver
  ▫ Objectives of the Evaluation Design
  ▫ Designed to focus on 5 priority areas:
    - Primary Care
    - Social Determinants of Health
    - Home and Community Based Services
    - Community Integration Services and Community Transition Services
    - Improved Data Qualify for Immunization-Related Performance Measures
  ▫ Utilizes a variety of research and statistical approaches to assess the impacts and outcomes of the Demonstration interventions and strategies.
During the COVID-19 Public Health Emergency (PHE) the State is allowed temporary or emergency specific amendments/changes to our existing 1115 Waiver
- The changes are time limited and tied specifically to individuals impacted by the emergency

- Temporarily adds retainer payments to address emergency related issues
- Retainer payments allow a provider to continue to bill for individuals who are enrolled in a program or who are receiving a HCBS service when circumstances prevent the individual from receiving the service

- Extends the Appendix K flexibilities previously approved to 6 months after the PHE ends
CMS Approvals affecting the 1115 Waiver during the COVID-19 Public Health Emergency

- PHE 1115 Demonstration Waiver Evaluation Design effective through 60 days after the PHE expires
  - Key objective:
    - Provide medical assistance (as required by the 1115 waiver) during the COVID-19 PHE even though certain requirements cannot be followed during the PHE
    - Make sure the providers are paid and not sanctioned for noncompliance
  - This evaluation will test how the waiver and the expenditure authorities affected the state’s response to the PHE and how the flexibilities affected coverage and expenditures
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-procurement for QUEST Integration:
  - Awards – March 2021; AlohaCare, HMSA, Kaiser (Oahu/Maui), ‘Ohana and United Healthcare
  - Contract Start: 7/1/2021

- **Community Cares Services**: Specialty Mental Health managed care plan for specialty mental health services for individuals with serious mental illnesses.
  - RFP Release: 11/06/2020; Contract Award – ‘Ohana Health Plan; Contract start: 7/1/2021

**RFP/Contract focus areas related to waiver**: Social determinants of health; 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.
Mahalo!