



STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES

Med-QUEST Division
P. O. Box 700190
Kapolei, Hawai'i 96709-0190

MEETING NOTICE

Med-QUEST Healthcare Advisory Committee (MHAC)

Wednesday, November 17, 2021
6:00 P.M.

Zoom Virtual Meeting Information on Page 2

Fully vaccinated individuals unable to participate virtually may attend the meeting in-person at:
Kakuhihewa Building, 601 Kamokila Blvd, Kapolei Hawaii 96707

AGENDA

- I. Welcome/Call to Order
- II. Introductions
- III. Review of meeting participation guidelines and process
- IV. Med-QUEST Program Activities Updates – Presentations on the latest Med-QUEST activities. Topics include:
 - a. Med-QUEST Annual Plan Change and Federal Marketplace Open Enrollment
 - b. Extension of the Public Health Emergency
 - c. Med-QUEST Program Budget Requests for Fiscal Year 2023
 - d. Medicaid Innovation Collaborative
 - e. Public Comment
- V. State Plan Amendment Presentations and Discussions
 - a. State Plan Amendment Status Reports - Presentation on the status of State Plan Amendments previously reviewed by the MHAC.
 - b. SPA 21-016 Non Emergency Transportation – This amendment updates the Non Emergency Transportation sections of the state plan to align with changes to 42 CFR § 438.
 - c. Public Comment
- VI. Adjourn

The State Plan Amendment - SPA 21-016 is attached.

Written comments can be submitted by email to MHACcomments@dhs.hawaii.gov using MHAC 11/17/21 in the Subject line, or mailed to Med-QUEST Division, Attn: MHAC, P.O. Box 700190, Kapolei, HI, 96709.

Note: If you need auxiliary aid/service or other accommodation due to disability or limited English proficiency, please contact: the Med-QUEST Division at (808) 692-8151 (voice); or 711 (TTY) or by email at MHACcomments@dhs.hawaii.gov by 12:00 pm on Monday, November 15, 2021.

Join Zoom Meeting

<https://medquest-hawaii-gov.zoom.us/j/85784701973?pwd=NFZHa3pla1BQcXFjR0FwajcyT3U0dz09>

Meeting ID: 857 8470 1973

Passcode: 820587

One tap mobile

+13462487799,,85784701973#,,,,*820587# US (Houston)

+16699006833,,85784701973#,,,,*820587# US (San Jose)

Dial by your location

+1 346 248 7799 US (Houston)

+1 669 900 6833 US (San Jose)

+1 253 215 8782 US (Tacoma)

+1 312 626 6799 US (Chicago)

+1 929 436 2866 US (New York)

+1 301 715 8592 US (Washington DC)

888 788 0099 US Toll-free

833 548 0276 US Toll-free

833 548 0282 US Toll-free

877 853 5247 US Toll-free

Meeting ID: 857 8470 1973

Passcode: 820587

Find your local number: <https://medquest-hawaii-gov.zoom.us/j/kdcjyb10g4>

State: HAWAII

Described below are the methods used to assure necessary transportation of beneficiaries to and from providers of service.

- (1) Bus and public transportation when a beneficiary resides in areas served by the bus and public transportation system.
- (2) Taxi wheelchair van, and commercial carrier transportation is provided for beneficiaries residing in areas not served by the bus or public transportation system, or when travel by bus would be either hazardous or cause extreme hardship to a beneficiary who is ill or has a physical or intellectual/developmental disability.
- (3) Ambulance service is provided in emergencies or when a recipient, due to the nature of his physical impairment, is unable to travel by taxi.
- (4) Air transportation is provided when required specialized medical services are not available on the island of beneficiary's residence. Attendant's service is also made available when recommended by the attending physician or required by the airline.
- (5) Out-of state transportation is provided when required specialized medical services are not available in the State. Attendant's service is also made available when recommended by the attending physician or required by the airline.

TN No. 21-0016
 Supersedes TN No. 87-12 Approval Date: _____ Effective Date 12/27/2021

Pursuant to the Consolidation Appropriations Act, 2021, Section 209, section 1902(a) (87), the State of Hawaii attests that effective December 27, 2021, any provider (including a transportation network company) or individual driver of non-emergency transportation to medically necessary services receiving payment under such plan (but excluding any public transit authority), meets the following requirements:

- (A) Each provider and individual driver is not excluded from participation in any federal health care program (as defined in section 1128B(f) of the Act) and is not listed on the exclusion list of the Inspector General of the Department of Health and Human Services;
- (B) Each such individual driver has a valid driver's license;
- (C) Each such provider has in place a process to address any violation of a state drug law; and
- (D) Each such provider has in place a process to disclose to the state Medicaid program the driving history, including any traffic violations, of each such individual driver employed by such provider, including any traffic violations.

TN No. 21-0016
Supersedes _____ Approval Date: _____ Effective Date 12/27/2021
TN No. NEW

State: HAWAII

Described below are the methods used to assure necessary transportation of beneficiaries [~~recipients~~] to and from providers of service.

- (1) Bus and Public transportation when a beneficiary resides in areas served by the bus and public transportation system.
- (2) Taxi, wheelchair van, and commercial carrier transportation is provided for beneficiaries[~~recipients~~] residing in areas not served by the bus or public transportation system, or when travel by bus would be either hazardous or cause extreme hardship to a beneficiary[~~recipient~~] who is ill or has a physical or [~~mental impairment.~~] intellectual/developmental disability.
- (3) Ambulance service is provided in emergencies or when a recipient, due to the nature of his physical impairment, is unable to travel by taxi.
- (4) Air transportation is provided when required specialized medical services are not available on the island of beneficiary's[~~recipient's~~] residence. Attendant's service is also made available when recommended by the attending physician or required by the airline.
- (5) Out-of state transportation is provided when required specialized medical services are not available in the State. Attendant's service is also made available when recommended by the attending physician or required by the airline.

TN No. 21-0016
~~[87-12]~~

Supersedes _____ Approval Date: _____ Effective Date 12/27/2021
~~[07/01/87]~~

TN No. 87-12
~~[NEW]~~

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