

**STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES
MED-QUEST DIVISION**

PUBLIC NOTICE

Pursuant to 42 C.F.R. §447.205, the Department of Human Services (DHS), Med-QUEST Division (MQD) hereby notifies the public that the MQD intends to submit a State Plan Amendment to the Centers for Medicare and Medicaid Services (CMS).

The proposed amendment to Attachment 4.19-D of the Hawaii State Medicaid plan is required to be in compliance with 42 CFR §438.6(c)(2) as amended in the final rule, “Medicaid and Children’s Health Insurance Program (CHIP) Programs; Medicaid Managed Care, CHIP Delivered in Managed Care, and Revisions Related to Third Party Liability”; Final Rule, 81 Fed. Reg. 27498 (May 6, 2016). The pass-through payments as currently structured do not meet the conditions of the final rule. Hawaii will be allowed a transition period for implementation of this amendment.

Under Provisions of federal law, the state is required to issue public notice of proposed changes in statewide methods and standards for setting Medicaid payment rates.

SPA 21-0006 is expected to have minimal effect on the annual aggregate expenditures. The proposed change will be submitted for review to the federal government as a Medicaid State Plan Amendment (SPA).

For a copy of the proposed changes please contact:

By email: emaucio@dhs.hawaii.gov (Please identify in the subject line: State Plan Amendment 21-0006)

By mail:

Department of Human Services
Med-QUEST Division
Attention: Policy and Program Development Office
P.O Box 700190
Kapolei, Hawaii 96709

A printed copy of the proposed changes and special accommodations (i.e., interpreter, large print or taped materials) can be arranged if requested by contacting the Policy and Program Development Office at (808) 692-8058 no later than seven (7) working days before the comment period ends.

Comments should be received **within 30 days** from the time this notice is posted. Individuals may submit written comments using the following methods:

By email: emaucio@dhs.hawaii.gov (Please identify in the subject line: State Plan Amendment 21-0006)

By mail:

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DEPARTMENT OF HUMAN SERVICES, MED-QUEST DIVISION
JUDY MOHR PETERSON, PhD
MED-QUEST DIVISION ADMINISTRATOR