

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

**PUBLIC NOTICE
RELEASE DATE: DECEMBER 22, 2021**

State Plan Amendment (SPA) #21-0017 is required to comply with third party liability (TPL) requirements authorized under both the Bipartisan Budget Act (BBA) of 2018 and the Medicaid Services Investment and Accountability Act (MSIAA) of 2019.

This is an Addendum to the Public Notice listed above published on December 10, 2021.

May it be known that the following change has been made to Attachment 4.22 (i)(2) pg. 3 of the original public notice:

Providers who have billed a third party prior to billing Medicaid must certify on the Medicaid claim that a third party has been billed, that claim has been fully adjudicated by the third party and that payment has not been received by Medicaid.

No other terms of conditions listed in the original public notice has changed.

State of Hawaii

REQUIREMENTS FOR THIRD PARTY LIABILITY- PAYMENT OF CLAIMS

(i) The Medicaid agency ensures compliance with the TPL requirements authorized under both the Bipartisan Budget Act (BBA) of 2018 (Pub. L. 115-123) and the Medicaid Services Investment and Accountability Act (MSIAA) of 2019 (Pub. L. 116-16 affecting the BBA of 2013).

Citation Requirements for Third Party liability Payment of Claims

42CFR433.139(b)(3)(ii)(C) (1) The State will pay and chase third parties when services covered under the plan are furnished to an individual on whose behalf child support enforcement is being carried out by the State Title IV-D Agency. For such claims, the State will only authorize payment under the following conditions: a. Up to 100 days have elapsed from the date of service. b. The provider billed the third-party. c. Documentation is attached verifying that a. and b. have been met.

The State will monitor the pay and chase system for such claims for improper billings made by providers and take appropriate corrective action. *

42CFR433.139(b)(3)(ii)(B) (2) Providers who have billed a third party prior to billing Medicaid must certify on the Medicaid claim that a third party has been billed, that claim has been fully adjudicated by the third party, and that payment has not been received by Medicaid.

Section 1902(a)(25)(E) (3) The State shall make payments without regard to third party liability for pediatric preventive services unless a determination related to cost-effectiveness and access to care that warrants cost avoidance for up to 90 days has been made.

Section 1902(a)(25)(E) (4) The State shall use standard coordination of benefits cost avoidance when processing claims for prenatal services, including labor and delivery and postpartum care claims.

Table with 4 columns: TN No., Supersedes, Approval Date, Effective Date. Row 1: 21-0017, (blank), (blank), 12/31/2021. Row 2: NEW, (blank), (blank), (blank).

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TN No.	<u>21-0017</u>	Approval	Effective Date:	<u>12/31/2021</u>
Supersedes		Date:		
TN No.	<u>NEW</u>			