

**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 (SPA) to the Centers for Medicare and Medicaid Services (CMS).

CMS has encouraged states to evaluate their state plan for sufficient coverage of monkey pox testing, treatment and vaccine administration. Hawaii has reviewed its coverage of monkey pox testing, treatment and vaccine administration and proposes to pursue a higher vaccine administration rate through SPA 22-0014. The state plan attachment, Supplement 2 to Attachment 4.19-B pg. 3 has been amended to include payment methodology for monkey pox vaccine administration.

For technical purposes, Hawaii is also removing Supplement 2 to Attachment 4.19-B pg. 4 as it should have been removed previously with prior amendment approval and we are clarifying the existing vaccine administration rate amount of \$4.00 to Supplement 2 to Attachment 4.19-B pg. 3.

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 22-0014 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 SPA.

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: [PPDO@dhs.hawaii.gov](mailto:PPDO@dhs.hawaii.gov) (Please identify in the subject line: State Plan Amendment 22-0014)

By Mail:

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

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

<b>Critical Care Transport Age 24 months or younger</b>	
Supervision by a control physician of interfacility transport care; first 30 minutes	99485
Supervision by a control physician of interfacility transport care; each additional 30 minutes	99486
<b>Coordination of Complex Services for Chronic Care</b>	
Complex chronic care coordination services, first hour of clinical staff time, directed by the physician or other qualified health care professional with no face-to-face visit, per calendar month	99487
Complex chronic care coordination services, first hour of clinical staff time, directed by the physician or other qualified health care professional with one face-to-face visit, per calendar month	99488
Complex chronic care coordination services, each additional 30 minutes of clinical staff time, directed by the physician or other qualified health care professional per calendar month	99489
<b>Management of Transitional Care Services</b>	
Transitional care management services with the patient or caregiver within two (2) business days of discharge. Medical decision making of at least moderate complexity during face-to-face visit within 14 calendar days of discharge	99495
Transitional care management services with the patient or caregiver within two (2) business days of discharge. Medical decision making of at least moderate complexity during face-to-face visit within 7 calendar days of discharge	99496

The state will make payment under this SPA for the following codes which have been added to the fee schedule since July 1, 2009 (specify code and date added).

**Physician Services - Vaccine Administration**

The state reimburses vaccine administration services furnished by primary care physicians meeting the requirements of 42 C.F.R. 447.400 at the state regional maximum administration fee set by the Vaccines for Children (VFC) program.

All vaccine administration services, unless otherwise specified, regardless of billing code, the rate is \$4.00.

**Documentation of Vaccine Administration Rates in Effect on or after 10/15/22**

The state will pay the Monkey Pox vaccine administration rate using the Medicare geographic rate for COVID-19 vaccine administration.

**Effective Date of Payment**

Evaluation & Management Services (E&M)

This reimbursement methodology applies to services delivered on and after October 15, 2022. All rates are published at <https://medquest.hawaii.gov/en/plans-providers/fee-for-service/fee-schedules.html>

Vaccine Administration

This reimbursement methodology applies to services delivered on and after October 15, 2022. All rates are published at <https://medquest.hawaii.gov/en/plans-providers/fee-for-service/fee-schedules.html>

<b>TN No.</b>	<u>22-0014</u>	<b>Supersedes</b>	<u>17-0002</u>	<b>Approval Date:</b>	_____	<b>Effective Date:</b>	<u>10/15/2022</u>
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