State of Hawaii Department of Human Services MED-QUEST DIVISION

MEDICAID STATE PLAN
SPA MEMO NO.: 24-12
DATE: 11/04/24

ORIGINATOR: POLICY AND PROGRAM DEVELOPMENT OFFICE

TO: Custodian of Med-QUEST Division Medicaid State Plan

FROM: Judy Mohr Peterson, PhD

Med-QUEST Division Administrator

SUBJECT: APPROVAL OF AMENDMENT UNDER THE MEDICAID STATE PLAN

EXPLANATION:

The State of Hawaii received approval from the Centers for Medicare & Medicaid Services (CMS) for State Plan Amendment (SPA) Number 24-0012 "Personal Needs Allowance Increase" on October 28, 2024, effective October 1, 2024.

On May 13, 2024, HB1974 was signed into Hawaii law (Act 18). The purpose of this Act is to increase the personal needs allowance (PNA) for individuals living in certain long-term care facilities from \$50 to \$75 and for couples living in certain long-term care facilities from \$100 to \$150 effective October 1, 2024.

This SPA approval updates the current PNA section on Supplement 12a to Attachment 2.6-A to align with the new Hawaii law. The increase in PNA will allow our recipients more income to purchase necessary items such as clothing, toiletries, meals and other applicable day-to-day living expenses.

FILING INSTRUCTIONS:

Review and file the new Medicaid State Plan page in your Medicaid State Plan Manual as follows:

Supplement 12a to Attachment 2.6-A pg. 4a

Remove OLD, Supplement 12a to Attachment 2.6-A pg. 4a Replace with NEW, Supplement 12a to Attachment 2.6-A pg. 4a

Please keep approved SPA 24-0012 package and supporting documentation for your records.

The Med-QUEST Division amendment described above has been incorporated into the electronic version of the Medicaid State Plan located at the Department of Human Services website link for public transparency below:

http://humanservices.hawaii.gov/reports/hawaii-medicaid-state-plan/

Attachments

C: Attorney General's Office
Audit, Quality Control & Research Office/Quality Control Staff
Clinical Standards Office
Department of Health/Child & Adolescent Mental Health Division
Department of Health/State Planning Council Developmental Disabilities
Department of Health/Developmental Disabilities Division
Department of Human Services /Adult Protective and Community Services Branch
Department of Human Services/Policy and Program Development Office
Eligibility System Project (KOLEA)
Finance Office
Hawaii Document Center/HI State Library
Hawaii Legislative Reference Bureau Library
Health Care Services Branch
Legal Aid Society of Hawaii

ATTACHMENT 2.6-A
Page 4a

State: HAWAII

Citation

Condition for Requirement

1924 of the Act 435.725 435.733 435.832

HRS Section 346-53

2. The following monthly amounts for personal needs are deducted from total monthly income in the application of an institutionalized individual's or couple's income to the cost of institutionalized care:

Personal Needs Allowance (PNA) of not less than \$75.00 for individuals and \$150.00 for Couples for all Institutionalized Persons.

a. Aged, blind, disabled:

Individuals $\frac{\$75.00}{\$150.00}$

For the following persons with greater need:

Supplement 12a to Attachment 2.6-A describes the greater need; describes the basis for formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.

b. AFDC related: Children <u>\$75.00</u> Adults \$75.00

For the following persons with greater need:

Supplement 12a to Attachment 2.6-A describes the greater need; describes the basis for formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.

c. Individuals under age 21 covered in the plan as specified in item B.7. of Attachment 2.2-A.

\$ N/A

TN No. 24-0012 Supersedes

TN No. 07-006

Approval Date: 10/28/2024