

State of Hawaii  
Department of Human Services  
MED-QUEST DIVISION

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**MEDICAID STATE PLAN**

**SPA MEMO NO.:** 23-10

**DATE:** 12/22/2023

**ORIGINATOR:** POLICY AND PROGRAM DEVELOPMENT OFFICE

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**TO:** Custodian of Med-QUEST Division Medicaid State Plan

**FROM:** Judy Mohr Peterson, PhD *JMP*  
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 23-0010 “One Year Continuous Eligibility” on December 14, 2023.

Section 5112 of the Consolidated Appropriations Act, 2023 (CAA) amends Section 1902(e)(12) and 2107 (e)(1) of the Social Security Act to mandate states to provide 12 months of continuous eligibility for children under age 19 in Medicaid and CHIP. Effective January 1, 2024, Hawaii is choosing to amend the Medicaid State Plan to provide this coverage effective July 1, 2023.

**FILING INSTRUCTIONS:**

Review and file the amended Medicaid State Plan pages in your Medicaid State Plan Manual as follows:

Attachment 2.2-A pg. 23c and Reviewable Unit “Continuous Eligibility for Children”

Remove OLD Attachment 2.2-A pg. 23c and replace with amended “Continuous Eligibility for Children” Reviewable Unit pg. 1 of 2 to 2 of 2.

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 (DHS) 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

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# HI - Submission Package - HI2023MS0004O - (HI-23-0010) - Eligibility

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DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Medicaid and CHIP Operations Group  
601 E. 12 St., Room 355  
Kansas City, MO 64106



## Center for Medicaid & CHIP Services

December 14, 2023

Judy Mohr Peterson  
Director  
Med-QUEST Division (MQD)  
Office of the Director, Department of Human Services  
PO Box 339  
Honolulu, HI 96809-0339

Re: Approval of State Plan Amendment HI-23-0010

Dear Dr. Mohr Peterson,

On September 28, 2023, the Centers for Medicare and Medicaid Services (CMS) received Hawaii State Plan Amendment (SPA) HI-23-0010 in which Hawaii proposed to implement twelve months continuous eligibility for children.

We approve Hawaii State Plan Amendment (SPA) HI-23-0010 with an effective date(s) of July 01, 2023.

If you have any questions regarding this amendment, please contact Brian Zolynas at [brian.zolynas@cms.hhs.gov](mailto:brian.zolynas@cms.hhs.gov).

Sincerely,

Ruth A. Hughes

Acting Director, Division of Program  
Operations

Center for Medicaid & CHIP Services

# HI - Submission Package - HI2023MS00040 - (HI-23-0010) - Eligibility

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## Medicaid State Plan Eligibility

### Eligibility and Enrollment Processes

#### Continuous Eligibility for Children

MEDICAID | Medicaid State Plan | Eligibility | HI2023MS00040 | HI-23-0010

[Spell Check Instructions](#) | [Request System Help](#)

CMS-10434 OMB 0938-1188

Not Started

In Progress

Complete

### Package Header

<b>Package ID</b>	HI2023MS00040	<b>SPA ID</b>	HI-23-0010
<b>Submission Type</b>	Official	<b>Initial Submission Date</b>	9/28/2023
<b>Approval Date</b>	12/14/2023	<b>Effective Date</b>	<a href="#">7/1/2023</a>
<b>Superseded SPA ID</b>	NEW		
	User-Entered		

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[VIEW ALL RESPONSES](#)

The state provides continuous eligibility for children in accordance with the following provisions:

### A. Mandatory Continuous Eligibility for Hospitalized Children

[Collapse](#)

The state provides Medicaid to a child eligible for and enrolled under the Infants and Children under Age 19 (42 CFR 435.118) eligibility group until the end of an inpatient stay for which inpatient services are covered, if the child:

1. Was receiving inpatient services covered by Medicaid on the date the child becomes ineligible under the eligibility group based on the child's age; and
2. Would remain eligible but for attaining such age.

### B. Options for Continuous Eligibility for Children

[Collapse](#)

The state provides continuous eligibility to children.

- Yes
- No

1. Continuous eligibility is provided to all children of the following age:

- a. Under age 19
- b. Under other age

2. The continuous eligibility period begins on the effective date of the child's most recent determination or redetermination of eligibility, and ends the last day of the earlier of the following periods:

- a. The month that the child's age exceeds the age limit to which this provision applies
- b. The end of the continuous eligibility period, which is:
  - i. 12 months
  - ii. Another period of continuous eligibility, not to exceed 12 months

3. Continuous eligibility is provided to children eligible under all mandatory and optional eligibility groups (excluding Medically Needy) who would otherwise lose eligibility because of any change in circumstances, unless:

- a. The child dies;
- b. The child or the child's representative voluntarily requests a termination of the child's eligibility;
- c. The child ceases to be a resident of the state;
- d. The Medicaid agency determines that eligibility was determined incorrectly at the most recent determination or redetermination of eligibility because of agency error or fraud, abuse, or perjury attributed to the child or the child's representative; or
- e. The child attains the maximum age specified in B.

### C. Additional Information (optional)

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PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.