

State of Hawaii
Department of Human Services
MED-QUEST DIVISION

MEDICAID STATE PLAN

SPA MEMO NO.: 22-14

DATE: 02/03/23

ORIGINATOR: POLICY AND PROGRAM DEVELOPMENT OFFICE

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 22-0014 "Monkey Pox Vaccine Administration".

This amendment clarifies that all vaccine administration services are paid at a rate of \$4.00 unless otherwise specified, regardless of billing code. This SPA also sets the state's Monkey Pox vaccine administration rate equal to the Medicare geographic rate for COVID-19 vaccine administration, updating the effective date to 10/15/22 and the fee schedule links for Evaluation & Management Services (E&M) and vaccine administration.

FILING INSTRUCTIONS:

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

Remove old:

Supplement 2 to Attachment 4.19-B pg. 3

File new:

Supplement 2 to Attachment 4.19-B pg. 3

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

Table of Contents

State/Territory Name: HI

State Plan Amendment (SPA) #: 22-0014

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
233 North Michigan Ave., Suite 600
Chicago, Illinois 60601



Financial Management Group/ Division of Reimbursement Review

January 24, 2023

Judy Mohr Peterson, PhD
Med-QUEST Division Administrator
Office of the Director
PO Box 339
Honolulu, HI 96809-0339

RE: TN: #22-0014

Dear Dr. Mohr Peterson:

We have reviewed the proposed Hawaii State Plan Amendment (SPA), TN: #22-0014 which was submitted to the Centers for Medicare & Medicaid Services (CMS) on November 7, 2022. This SPA clarifies that all vaccine administration services are paid at a rate of \$4.00 unless otherwise specified, regardless of billing code. This SPA also sets the state's Monkey Pox vaccine administration rate equal to the Medicare geographic rate for COVID-19 vaccine administration, updating the effective date to 10/15/22 and the fee schedule links for Evaluation & Management Services (E&M) and vaccine administration.

Based upon the information provided by the state, we have approved the amendment with an effective date of October 15, 2022. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Matthew Klein at 214-767-4625 or matthew.klein@cms.hhs.gov

Sincerely,

Todd McMillion

Todd McMillion
Division of Reimbursement Review Director

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER
2 2 — 0 0 1 4

2. STATE
HI

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
10/15/2022

5. FEDERAL STATUTE/REGULATION CITATION
42 CFR § 457.410

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
a. FFY 2022 \$ 2,000
b. FFY 2023 \$ 2,000

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT
Supplement 2 to Attachment 4.19-B pg. 3

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)
Supplement 2 Attachment 4.19-B pg. 3-4

9. SUBJECT OF AMENDMENT
Monkey Pox- Hawaii is pursuing increase in payment for vaccination rate.

10. GOVERNOR'S REVIEW (Check One)

- GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL



12. TYPED NAME
Judy Mohr Peterson, PhD

13. TITLE
Med-QUEST Division Administrator

14. DATE SUBMITTED
11/07/22

15. RETURN TO
State of Hawaii
Department of Human Services
Office of the Director
P.O. Box 339
Honolulu, Hawaii 96809-0339

FOR CMS USE ONLY

16. DATE RECEIVED
11/07/2022

17. DATE APPROVED
January 24, 2023

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
10/15/2022

19. SIGNATURE OF APPROVING OFFICIAL


20. TYPED NAME OF APPROVING OFFICIAL
Todd McMillion

21. TITLE OF APPROVING OFFICIAL
Director, Division of Reimbursement and Review

22. REMARKS

Critical Care Transport Age 24 months or younger	
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
Coordination of Complex Services for Chronic Care	
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
Management of Transitional Care Services	
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>

TN No. 22-0014
 Supersedes 17-0002 Approval Date: January 24, 2023 Effective Date: 10/15/2022