



STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES

Med-QUEST Division
Health Care Services Branch
P.O. Box 700190
Kapolei, Hawaii 96709-0190

September 30, 2016

MEMORANDUM

MEMO NO.
QI-1616

TO: QUEST Integration (QI) Health Plans

FROM: ^{Uef}
Judy Mohr Peterson, PhD
Med-QUEST Division Administrator

SUBJECT: QUEST INTEGRATION (QI) TRANSITION OF CARE (TOC) FILES

General Transition of Care Requirements

As described in Section 41.700 of QUEST Integration RFP-MQD-2014-005, all members transferring to a new health plan on January 1, 2017, who were receiving medically necessary covered services (see below for prenatal services) the day before enrollment into their new health plan, shall continue to receive these services from their new health plan without any form of prior approval and without regard to whether such services are being provided by contract or non-contract providers. Health plans shall ensure that during transition of care, their new members:

- Receive all medically necessary emergency services;
- Receive all prior authorized Long-Term Services and Supports (LTSS), including both Home and Community Based Services (HCBS) and institutional services;
- Adhere to a member's prescribed prior authorization for medically necessary services, including prescription drugs, or other courses of treatment; and
- Provide for the cost of care associated with a member transitioning to or from an institutional facility in accordance with the requirements prescribed in QI RFP Section 50.210.

The health plan shall provide continuation of services for individuals with Special Health Care Needs (SHCN) and LTSS for at least ninety (90) days or until the member has received a Health and Functional Assessment (HFA) by their service coordinator. The health plan shall provide continuation of other services for all other members for at least forty-five (45) days or until the member's medical needs have been assessed or reassessed by their PCP under the new plan. The health plan shall reimburse PCP services that the member may access during the forty-five (45) days prior to transition to their new PCP, as necessary, even if the former PCP is not in the network of the new health plan.

In the event the member entering the new health plan is in her second or third trimester of pregnancy and is receiving medically necessary covered prenatal services the day before enrollment, the health plan shall be responsible for providing continued access to the prenatal care provider (whether contract or non-contract) through the postpartum period.

The purpose of this memorandum is to provide guidelines and procedures to ensure that the transition of QI members from one health plan to another health plan as a result of open enrollment does not result in decreased quality of care for our beneficiaries.

The Med-QUEST Division (MQD), Health Care Services Branch (HCSB) will be the Transition of Care (TOC) data intermediary, between the QI plans generating and receiving the TOC information. The initial enrollment choices are effective January 1, 2017.

Transition of Care Files

MQD will provide five different categories of files to the QI health plans:

- Member Demographics (Attachment 1)
- Paid Medical Claims (Attachment 2)
- Paid Pharmacy Claims (Attachment 3)
- Medical Referrals (Attachment 4)
- Prior Authorizations (Attachment 5)

These files will be exchanged between the MQD and the health plans on the Secure File Transfer Protocol (SFTP) under each plans' respective other/HP Reports folder.

Transition of Care File Timeline

Date	Process
October 31, 2016	QI open enrollment ends.
Week of November 7, 2016	Files describing members coming and leaving are sent to QI health plans using MQD proprietary format.
November 25, 2016	QI health plans return to HCSB files containing TOC I data (Attachment 1 – 5).
Week of December 5, 2016	HCSB to deliver TOC I data to receiving QI health plans.
January 4, 2017	QI health plans return to HCSB files containing TOC II data (Attachment 5 and open hospitalizations as of 12/31/2015).
Week of January 11, 2017	HCSB to deliver TOC II data to receiving QI health plans.

If you have questions or concerns, please contact Jon Fujii at (808) 692-8093 or email jfujii@medicaid.dhs.state.hi.us.

Attachments