

APPENDIX B – ELIGIBILITY AND ENROLLMENT RESPONSIBILITIES SUMMARY

This appendix summarizes Eligibility and Enrollment responsibilities for the Medicaid Reentry Program and identifies which entity—carceral facility, MQD, or QI Health Plan—is responsible for completing each activity. This table also provides suggested timeframes for completing each activity.

Operational Requirements for Pre-Release Eligibility and Enrollment Process				
Eligibility and Enrollment Processes	Suggested Time Frame	Responsible Entity		
		Carceral Facility ¹	MQD	QI Health Plan
Expected Member Release Dates and MQD Actions <i>(Guidance Section III.B)</i>				
Share incarceration status and expected release date to MQD via agreed upon data sharing processes	Upon intake and upon subsequent updates	X		
Share urgent changes in expected or completed release dates to MQD	As soon as feasible	X		
Share inpatient hospitalization status (24+ hours)	As occurs	X		
Suspend Medicaid coverage	Upon intake and otherwise prior to 90 days of expected release		X	
Activate Limited Reentry Program coverage	Within 90 days of expected release		X	
Share confirmation of release from incarceration to MQD	Upon release	X		
Activate Full Medicaid coverage	Upon confirmation of release		X	
Activate Medicaid Prisoner (inpatient care) coverage	As notified		X	

¹ Carceral facility, or their designated entity.

Operational Requirements for Pre-Release Eligibility and Enrollment Process				
Eligibility and Enrollment Processes	Suggested Time Frame	Responsible Entity		
		Carceral Facility ¹	MQD	QI Health Plan
Medicaid Application Supports (Guidance Section III.C.1)				
Assess Medicaid coverage through MQD Navigator Portal or DHS Medicaid Online (DMO) eligibility verification system	Upon intake and in advance of the 90-day pre-release period	X		
Provide support for Medicaid application completion (Hawaii or out-of-state Medicaid)	Upon intake, in advance of the 90-day pre-release period, and otherwise as needed	X		
Provide QI Health Plan selection support	Upon application submission, and otherwise as needed	X		
Identify and complete any needed Changes of Circumstances	Upon intake, and otherwise within 15 days of the change	X		
Medicaid Eligibility Maintenance (Guidance Section III.C.2)				
Identify and complete any needed Changes of Circumstances	Upon intake, and otherwise within 15 days of the change	X		
Update mailing address or Authorized Representatives via Change of Circumstances Form, as appropriate	Upon or shortly following intake, otherwise as requested, and immediately prior to release	X		
Support renewals and documentation/information requests from MQD	As needed	X		

Operational Requirements for Pre-Release Eligibility and Enrollment Process				
Eligibility and Enrollment Processes	Suggested Time Frame	Responsible Entity		
		Carceral Facility¹	MQD	QI Health Plan
Verify Medicaid coverage, support required renewals, and address any other eligibility issues	120-90 days pre-release	X		
Other Eligibility and Enrollment Processes <i>(as needed based on enrollment actions)</i>				
Process Changes of Circumstances forms	Upon notification		X	
Process Medicaid application for eligibility determination	Upon submission		X	
Send member notices (e.g., suspension, enrollment, renewals, and requests)	As needed based on event		X	
Update MMIS and the 834 file with Medicaid coverage status	Upon enrollment change		X	
Enroll member in QI Health Plan	Upon processing for coverage activation		X	X
Send member outreach, health plan enrollment, and renewal materials	Upon notification of health plan enrollment, and otherwise as needed			X