June 27, 2016

Judy Mohr Peterson, PhD
Med-QUEST Division Administrator
Hawaii Medicaid Director
601 Kamokila Blvd., Suite 518
Kapolei, HI 96707

Dear Dr. Peterson,

I am pleased to inform you that your request to renew the Hawaii Section 1915(c) Home and Community-Based Services Waiver for People with Intellectual and Developmental Disabilities has been approved. The renewal has been assigned Control Number 0013.R07.00 and is approved with an effective date of July 01, 2016.

This five-year renewal continues to provide adult day health (ADH), discovery and career planning (DCP), individual employment supports, personal assistance/habilitation (PAB), residential habilitation (ResHab), respite, skilled nursing, assistive technology, chore, environmental accessibility adaptations, non-medical transportation, personal emergency response systems (PERS), specialized medical equipment and supplies, training and consultation, vehicular modifications, and waiver emergency services.

The following estimates of unduplicated participants and average per capita costs are approved:

<table>
<thead>
<tr>
<th>Year</th>
<th>Unduplicated Participants (Factor C)</th>
<th>Community Costs (Factor D+D’)</th>
<th>Institutional Costs (Factor G+G’)</th>
<th>Total Waiver Costs (Factor C x Factor D)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1</td>
<td>2735</td>
<td>$43,713.59</td>
<td>$123,823.48</td>
<td>$104,104,957.95</td>
</tr>
<tr>
<td>Year 2</td>
<td>2767</td>
<td>$43,829.92</td>
<td>$126,547.59</td>
<td>$105,300,979.67</td>
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<tr>
<td>Year 3</td>
<td>2799</td>
<td>$43,965.25</td>
<td>$129,331.64</td>
<td>$106,542,031.68</td>
</tr>
<tr>
<td>Year 4</td>
<td>2831</td>
<td>$44,106.96</td>
<td>$132,176.94</td>
<td>$107,793,750.51</td>
</tr>
<tr>
<td>Year 5</td>
<td>2863</td>
<td>$44,227.35</td>
<td>$135,084.82</td>
<td>$108,977,002.96</td>
</tr>
</tbody>
</table>

If the State wishes to modify the waiver program, an amendment request must be submitted to CMS via the HCBS web-based application portal. The waiver may be renewed at the conclusion of the five-year approval period providing the State shows documentation of satisfactory performance and oversight.
We appreciate the cooperation of your staff during the review process. If you have any questions about this waiver renewal, please contact Adrienne Hall at (415) 744-3674 or Adrienne.Hall@cms.hhs.gov.

Sincerely,

/s/

Henrietta Sam-Louie
Associate Regional Administrator
Division of Medicaid & Children’s Health Operations

cc: Madi Silverman, Med-QUEST Division, DHS
Aileen Manuel, Med-QUEST Division, DHS
Mary Brogan, Developmental Disabilities Division, DOH
Debra Tsutsui, Developmental Disabilities Division, DOH