

LINDA LINGLE  
GOVERNOR



LILLIAN B. KOLLER, ESQ.  
DIRECTOR

HENRY OLIVA  
DEPUTY DIRECTOR

STATE OF HAWAII  
DEPARTMENT OF HUMAN SERVICES  
Med-QUEST Division  
Health Care Services Branch  
Contract Monitoring & Compliance Section  
P. O. Box 700190  
Kapolei, Hawaii 96709-0190

September 23, 2008

MEMORANDUM

ACS M08-10

TO: Dental Providers and Federally Qualified Health Centers

FROM: Kenneth S. Fink, MD, MGA, MPH, Med-QUEST Division Administrator *KSF*

SUBJECT: FEE SCHEDULE – NEIGHBOR ISLAND

**Information:**

This memorandum is to inform you of the implementation of the Neighbor Island dental fee schedule adjustment. To improve access to dental care for Medicaid recipients residing on the Neighbor Islands, the 2006 Legislature enacted legislation to adjust the dental fee schedule for dental services provided on Neighbor Islands.

Effective July 1, 2008, dental providers who deliver dental care on the islands of Kauai, Molokai, Lanai, Maui or Hawaii to Medicaid recipients can receive a fee adjustment for those services. For the Neighbor Island dental fee schedule, please refer to the Med-QUEST website <http://www.med-quest.us/>.

To receive the payment adjustment, claims must include a modifier as described below. Claims for prior services, but not with a service date preceding July 1, 2008, must be re-filed with the proper coding in order to receive the enhanced reimbursement.

**Claim Filing Instructions:**

When filing a claim for services provided on islands of Kauai, Molokai, Lanai, Maui or Hawaii, please place code: MODTN in field #35, "Remarks" on the ADA 2006 claim form. That modifier will automatically default the claim to the Neighbor Island fee schedule.

**Post Payment Review:**

The Neighbor Island claims will automatically be subject to a post payment review to ensure appropriate fees were paid and to detect fraudulent use of the modifier.

If there are any questions regarding this initiative, please call Ms. Lydia Hemmings of the Clinical Standards Office at 692-8121.