



**STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES**

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

June 6, 2014

MEMORANDUM

MEMO NO.
FFS M14-08A

TO: Hospice Providers

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

SUBJECT: CHANGES TO QUEST BENEFITS

This memorandum is being issued as an update to FFS M14-08 to hospice providers. Under the Affordable Care Act (ACA) of 2010, the Department of Human Services, Med-QUEST Division (MQD) expanded Medicaid eligibility to childless adults ages 19 to 64 years of age. This expansion of eligibility allows individuals in the new Adult group population to obtain Medicaid with an income of up to 133% of Federal Poverty Level (FPL) plus the 5% disregard as applicable without an asset limit. This new population is called the Adult group. As an early adopter, MQD implemented expansion of Medicaid eligibility to the Adult group on October 1, 2013, through its section 1115 demonstration waiver.

As of January 1, 2014, the Adult group became eligible under the State Plan. This group is unique by being required to receive an Alternate Benefit Package (ABP); however, individuals must have the option to receive all state plan services while remaining in the same eligibility group, i.e. without receiving an eligibility redetermination. In response, Medicaid selected the State Plan alignment option for its ABP. MQD has reviewed all of the State plan and ABP benefits comparing them to those currently offered in the QUEST program. Most of the benefits are already covered in QUEST with a few exceptions.

This memorandum provides information on changes to QUEST benefits. Effective January 1, 2014, any Medicaid enrollee who is determined eligible under the Adult group will have access to the following benefits, if medically necessary, in the QUEST program:

- Nursing facility services without limitation [i.e., skilled nursing (SNF), intermediate care (ICF), sub-acute, and acute waitlisted (both SNF and ICF)]*;
- Hospice services without limitation;
- Lactation counseling (up to six months)**; and
- Breast pump rental (up to six months)**.

*Medicaid enrollees must meet nursing facility level of care through the DHS 1147 to receive nursing facility services.

**These services shall be covered for all women effective April 1, 2014, and may be extended on a case-by-case basis for infants born prematurely.

Providers can identify individuals in the Adult group through the DHS Medicaid On-Line (DMO). On the Eligibility and Enrollment tab (second tab from the left) the eligibility group is described in the Eligibility section under Eligibility Description.

QUEST health plans may have prior authorization requirements related to these benefits. Providers are responsible for obtaining prior authorization from QUEST health plans based upon their provider agreement(s).

Providers shall not submit Aid to Disability Review Committee (ADRC) packets to MQD for individuals in the Adult group that require nursing facility or hospice services. Only individuals in the Adult group who are interested in receiving home and community based services (either in their own home or in a residential setting) should be referred through the ADRC process. MQD is modifying several forms in the ADRC process to address these changes. Forms will be accessible on the Med-QUEST Division website (www.med-quest.us) under the Forms section on April 1, 2014.

As a reminder, only individuals who are eligible in the aged, blind, or disabled group and enrolled in QExA will have access to home and community based services (HCBS) including at-risk HCBS, which are considered waiver and not State Plan services.

Please contact the Provider Hotline at 692-8099 should you have any questions.

c: QUEST health plans