

Who is covered in Hawaii's Medicaid Program?

ELIGIBILITY GROUPS

FFS^{1, 2} MCOs^{3, 4}

Undocumented
Immigrants-
Federal
Emergency
Services



Children
(0-18 years)



Current and
Former Foster
Care Children



Parents and
Other Caretaker
Relatives



Pregnant Women



Aged, Blind,
Disabled Adults



Dual Eligibles



Qualified
Non-Citizens*



Newly Eligible
Adults



American Indians/
Alaskan Natives

*Qualified non-citizens are subject to a 5-year waiting period, with the exception of pregnant women and children up to 19 years of age.

Important News

2017 - Hawaii lawmakers considered HB 552 without success to preserve the individual mandate and essential health benefits requirements. It would allow dependents to remain on their parents' health plan until age 26 and would continue the ACA's ban on preexisting condition exclusions and gender-based premiums.⁶



How has Hawaii's Medicaid program engaged in Managed Care?

SECTION 1115 WAIVER⁷

The Hawaii QUEST Integration waiver was created to enable the state to operate QUEST; providing Medicaid coverage for medical, dental, and behavioral health services through competitive managed care delivery systems. An amendment was submitted on 09/18/2017 to provide supportive housing services for chronically homeless Medicaid beneficiaries who have a behavioral or physical illness. As of June 2018, this amendment was still pending approval.



EFFECTIVE:
8/1/1994

APPROVAL:
7/6/1993

EXPIRATION:
12/31/2018

Do Medicaid health plans provide coverage?⁵



YES



NO

- AlohaCare
- Hawaii Medical Service Association
- Kaiser Foundation Health Plan
- Ohana Health Plan
- UnitedHealthcare Community Plan of Hawaii

How is Hawaii meeting the needs of Medicaid enrollees?

Value-Based Healthcare Initiatives

Hawaii's Healthcare Innovation Plan focuses on primary care redesign, with the goal of having 80 percent of the population enrolled in medical homes by 2017. The plan aims to implement Health Homes for Medicaid recipients with an existing diagnosis of Severe and Persistent Mental Illness or Serious Mental Illness. In addition, Medicaid recipients with at least two of the following conditions will also be eligible: diabetes, heart disease, obesity, chronic obstructive pulmonary disease (COPD), and substance use.⁸







Hawaii created a Medical Home Implementation Project to expand the implementation of Medical Homes by:⁹

- Providing technical assistance to establish local Medical Home networks across the state
- Establishing policy leadership related to current issues involving children with special health care needs
- Building key family-centered resources to promote understanding of the Medical Home



Behavioral Health

Benefits are covered through managed care and include:¹²

-  Psychiatric or psychological evaluation
-  Acute inpatient hospital for behavioral health services
-  Ambulatory mental health services
-  Services from psychiatrists, psychologists, counselors, social workers, and RNs
-  Substance abuse treatment programs
-  Drug therapies include: methadone, naloxone, naltrexone, acamprosate, disulfiram¹³

Family Planning¹⁰

Family planning services include contraceptive and broader reproductive health services, including patient education and counseling, breast and pelvic examinations, breast and cervical cancer screening, sexually transmitted infection (STI) and human immunodeficiency virus (HIV) prevention education, counseling, testing, and referral, and pregnancy diagnosis and counseling.



Women's Health¹¹

Pregnant women who are at or below 185% of the FPL qualify for QUEST and Medicaid fee-for-service programs up until 60 days following childbirth. Services for pregnant women include:

- Prenatal care
- Labor and delivery costs
- Hospital charges
- Doctor/certified nurse-midwife charges
- Medical services for the newborn



Oral Health¹⁴

All dental services are provided through a fee-for-service arrangement. For adults 21 years of age or older, only emergency dental services are covered.





HI

Timeline

Federal

Hawaii

President Johnson signs Social Security Amendments of 1965, creating Medicaid as public health program for the poor.

1965

Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services are a requirement for children enrolled in Medicaid.

1967



Supplemental Security Income (SSI) program becomes Medicaid eligibility category for the elderly and persons with disabilities.

1972



Home and Community-Based Services (HCBS) waivers created for Long-Term Care (LTC) and Disproportional Share Hospital (DSH) payments.

1981

Children and pregnant women become mandatory Medicaid eligibility groups.

1984

Children up to age 6 and pregnant women up to 133 percent of the federal poverty level (FPL) become eligible; EPSDT benefit expanded.

1989

Mandatory eligibility extended to children ages 6 to 18 years in families up to 100 percent FPL; eligibility phased in from 1990 through 2002.

1990



Balanced Budget Act of 1997 allows Medicaid to be delivered through managed care organizations; State Children's Health Insurance Program (CHIP) created; states now have option to provide coverage for uninsured children in low-income families above FPL.

1997

Olmstead decision allows expanded HCBS coverage for persons with disabilities.

1999



Affordable Care Act (ACA) expands Medicaid eligibility to adults with incomes up to 138 percent FPL.

2010

National Federation of Independent Business v. Sebelius decision makes Medicaid expansion optional for states.

2012

ACA implementation begins.

2014

32 states and the District of Columbia (DC) have expanded Medicaid since passage of the ACA.

2017

1966

State of Hawaii adopts the Medicaid program.¹⁵



1974

Hawaii implements the Prepaid Health Care Act that mandates most employers make health insurance available to employees who work at least 20 hours a week.¹⁶

1994

Hawaii implements the managed care program QUEST (Quality care, Universal access, Efficient utilization, Stabilizing costs, and to Transform the way health care is provided to recipients). Provides coverage for acute, primary, and behavioral health care services for low-income children, families, pregnant women, and childless adults.¹⁷

Hawaii expands QUEST services to aged, blind, and disabled children and adults, and dual eligibles through QUEST Expanded Access (QExA).¹⁷

2009

Hawaii creates the QUEST Integration program.¹⁸

Hawaii begins transitioning all adults with SMI/SPMI into the Community Care Services (CCS) program for their behavioral health services; phasing out most benefits provided through a fee-for-service arrangement.¹⁷

2013

Hawaii expands state Medicaid program under the ACA to adults with incomes up to 138% of the Federal Poverty Line (FPL).¹⁶

2014

2016

Hawaii converts to a federally supported state-based marketplace and begins using HealthCare.gov.¹

