CENTERS FOR MEDICARE & MEDICAID SERVICES WAIVER LIST Amended June 11, 2012

NUMBER:

11-W-00001/9

TITLE:

QUEST Expanded Medicaid Section 1115 Demonstration

AWARDEE: Hawaii Department of Human Services

All requirements of the Medicaid program expressed in law, regulation, and policy statement, not expressly waived or identified as not applicable in accompanying expenditure authorities, shall apply to the demonstration project beginning February 1, 2008, through June 30, 2013. In addition, these waivers may only be implemented consistent with the approved Special Terms and Conditions (STCs).

Under the authority of section 1115(a)(1) of the Social Security Act (the Act), the following waivers of State plan requirements contained in section 1902 of the Act are granted subject to the STCs for the QUEST Expanded Medicaid Section 1115 Demonstration.

1.	Medically Needy	Section 1902(a)(10)(C);
	•	Section 1902(a)(17)

To enable the State to limit medically needy spend-down eligibility except those enrolled in QUEST Expanded Access (QExA) to those individuals whose gross incomes, before any spend-down calculation, are at or below 300 percent of the Federal poverty level. This is not comparable to spend-down eligibility for the aged, blind, and disabled eligibility groups, which have no gross income limit.

2. Amount, Duration, and Scope Section 1902(a)(10)(B)

To enable the State to offer demonstration benefits that may not be available to all categorically eligible or other individuals.

3. Financial Responsibility/Deeming Section 1902(a)(17)(D)

To allow the State to determine eligibility for QUEST and QUEST-Net Children using the income of household members whose income may be taken into account under the income rules of the related cash assistance program. The State shall determine eligibility for other eligibility components using standard Medicaid financial responsibility and deeming rules.

[4. Three-Month Retroactive Eligibility	Section 1902(a)(34)

To enable the State to limit retroactive eligibility to a five (5) day period prior to application, or up to three months for individuals requesting long-term care services.

5. Freedom of Choice

Section 1902(a)(23)

To enable Hawaii to restrict the freedom of choice of providers to groups that could not otherwise be mandated into managed care under section 1932.