

Friday, September 24, 2021 @ 1:00 pm

AGENDA





01

WELCOME





WELCOME



Amendment Info



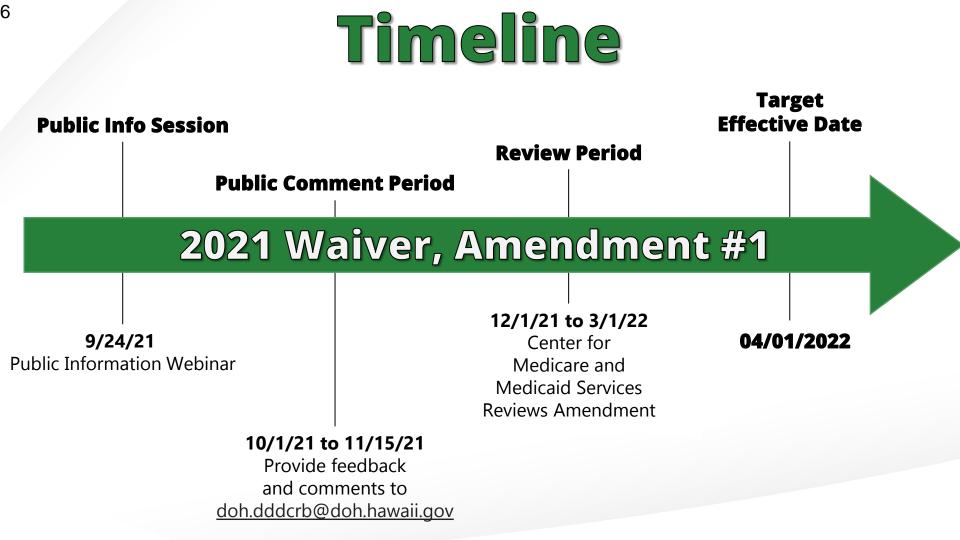
- Working with Department of Human Services, Med-QUEST Division
- To amend current Waiver Application
- To view Application for Amendment #1, please visit – <u>health.hawaii.gov/ddd</u>





TIMELINE OF AMENDMENT #1







VEHICLE MODIFICATION



Background Information

Current Waiver	Waiver Amendment #1
 Maximum total cost = \$36,000 Limited to one request every 7 years Sub-limit of \$6,000 for shipping costs 	 Remove sub-limit of \$6,000 for shipping costs Allows for an Exceptions Review to be requested if the lowest bid for medically necessary conversion (with shipping) exceeds \$36,000 Update the number of users & cost projections for waiver years 2 through 5

Why the Amendment for Vehicle Modification?



Increased costs in:

- o Shipping
- Conversion
 - Limited vehicle supply
 - New models are hybrid
 & electric

2021 1915(c) WAIVER



PAB IN HOSPITAL SETTINGS



Background PAB

Current Waiver	Waiver Amendment #1
The current waiver service definition does not allow for Personal Assistance/Habilitation (PAB) to be provided within the hospital setting	 CARES Act Section 3715_HCBS provision in acute care hospital PAB service definition revised to include supports provided to a participant while receiving acute-care hospital services

Why the Amendment for PAB?



- This change will help support participants while they receive acute-care services in the hospital to aid in their transition back to the community or maintain their functional abilities.
- PAB services may be available to:
 o foster communication,
 - o provide intensive personal care,
 - o promote behavioral stabilization
 - support successful transitions
 - o maintain their functional abilities



OTHER EDITS



Other Edits

Waiver Amendment #1

- Financial accountability subassurance includes an outdated performance measure
- #/% of waiver participants who received services that were authorized and payment for those services is supported by the appropriate documentation.
- Remove the duplicative measure
- Change has no impact on participant access to services





Q&A

Questions & Answers





Questions Answers

Additional Questions? Please email – <u>doh.dddcrb@doh.hawaii.gov</u>



Submit Public Comment in Writing



Public Comment Period: 10/1/21 to 11/15/21

Contact Method	Contact Information
By Mail	DDD-Community Resources Branch, 3627 Kilauea Avenue, Room 411, Honolulu, HI 96816
By e-Mail	<u>doh.dddcrb@doh.hawaii.gov</u>

Visit our Website

https://health.hawaii.gov/ddd