#### HAWAII ADMINISTRATIVE RULES

## TITLE 17

## DEPARTMENT OF HUMAN SERVICES

### SUBTITLE 12

### MED-QUEST DIVISION

### CHAPTER 1719.1

STATE FUNDED AGED, BLIND, AND DISABLED PROGRAM

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#### SUBCHAPTER 1

#### GENERAL PROVISIONS

§17-1719.1-1 <u>Purpose</u>. This chapter establishes the State Funded Aged, Blind, and Disabled Program for certain lawfully present non-pregnant adult noncitizens who are aged, blind, or disabled and ineligible under chapter 17-1719 solely due to citizenship or non-citizen status. [Eff 02/27/15 ] (Auth: HRS §346-14) (Imp: HRS §346-14)

§17-1719.1-2 <u>General requirements.</u> (a) The confidentiality, administrative appeal, fraud, medical assistance recovery, application processing, eligibility review, and adverse action provisions described in subtitle 12 shall apply to an individual who applies or is determined eligible under this chapter. For purposes of this chapter, references to the terms "Medicaid" or "federal medical assistance" in the provisions listed above shall be replaced with "state medical assistance under chapter 17-1719.1", when applicable.

(b) Processing of applications shall be:

- (1) In accordance with chapter 17-1711.1; however, subsections 17-1711.1-32(b)-(e) shall not apply; and
- (2) Subject to section 17-1719.1-13. [Eff 02/27/15 ] (Auth: HRS §346-14, 346-44) (Imp: HRS §§346-14, 346-44)

§§17-1719.1-3 to 17-1719.1-7 (Reserved).

### SUBCHAPTER 2

#### ELIGIBILITY REQUIREMENTS

§17-1719.1-8 <u>Purpose</u>. This subchapter describes the basic, categorical, and financial eligibility

requirements for participation under this chapter. [Eff 02/27/15 ] (Auth: HRS §346-14) (Imp: HRS §346-14)

§17-1719.1-9 <u>Basic requirements</u>. To be eligible under this chapter, an individual shall:

- (1) Meet the basic eligibility requirements described in chapter 17-1714.1, with the exception of citizenship or non-citizen status;
- (2) Be a lawfully present non-citizen;
- (3) Not be a beneficiary of Executive Actions including but not limited to, Deferred Action for Childhood Arrivals (DACA), or Deferred Action for Parental Accountability (DAPA); and
- (4) Be ineligible for Medicaid, with the exception of emergency medical assistance. [Eff 02/27/15 ] (Auth: 8 U.S.C. §1622; HRS §346-14) (Imp: HRS §346-14)

§17-1719.1-10 <u>Categorical requirements for an</u> aged, blind, or disabled individual. To be eligible under this chapter, an aged, blind, or disabled individual shall meet the categorical requirements for being aged, blind, or disabled, respectively, as described in chapter 17-1719. [Eff 02/27/15 ] (Auth: HRS §§346-14, 346-29) (Imp: HRS §§346-14, 346-29)

§17-1719.1-11 <u>Income requirements.</u> (a) The applicable standards of assistance for participation under this chapter are set forth under chapter 17-1719.

(b) An individual who meets the requirements of more than one standard of assistance shall have eligibility determined based on the standard of assistance that would be most beneficial to the individual.

(c) Countable income, as set forth in chapter 17-1724.1, after allowable disregards and exemptions, shall be compared to the standards of assistance set forth under chapter 17-1719.

(d) An individual applying for medical assistance under this chapter shall not be required to apply for or receive SSI.

(e) If an individual's income exceeds the applicable standards of assistance set forth under chapter 17-1719, the provisions relating to an individual with excess income described in chapter 1730.1 shall apply.

(f) An individual who is requesting or receiving coverage of long-term care services shall be subject to chapter 17-1724.1, subchapter 8. [Eff 02/27/15 ] (Auth: HRS §§346-14, 346-53) (Imp: HRS §346-53)

§17-1719.1-12 Asset requirements. (a) The personal reserve standards are the maximum amount of countable assets, as set forth in chapter 17-1719, that may be held by the household while establishing or maintaining eligibility for medical assistance under this chapter and are equal to the resource limits employed by the SSI program.

(b) An individual or household whose equity in non-exempt assets as determined in chapter 17-1725.1 exceeds the personal reserve standard for medical assistance for a household of applicable size shall be ineligible for medical assistance under this chapter.

(c) An individual who is requesting or receiving coverage of long-term care services shall be subject to the requirements of chapter 17-1725.1, subchapter 7. [Eff 02/27/15 ] (Auth: HRS §346-14) (Imp: HRS §346-14)

§17-1719.1-13 Application periods. (a) The department shall begin receiving applications for state medical assistance under this chapter starting on the effective date of this chapter, and may stop accepting applications pursuant to subsection (d).

(b) After the initial application period under subsection (a) is closed, the department shall accept applications under this chapter only during an announced open application period.

(c) Prior to the start of an open application period, the department shall issue a public notice at least once statewide announcing the start of an open application period.

(d) The department may close the initial application period, or any subsequent open application period, by issuing a public notice once statewide at least thirty days prior to the date the application period will be closed. Applications received by the department after the open application period has ended shall be denied.

(e) The restriction on submission of an application under subsection (b) shall not apply to an individual who loses eligibility under the Children Group as a result of reaching age nineteen years or under the Pregnant Women Group as a result of reaching the end of the post-partum period, and who is eligible under this chapter.

(f) Upon adoption of this chapter, an individual receiving state medical assistance as an aged, blind or disabled individual shall be deemed eligible under this chapter. [Eff 02/27/15 ] (Auth: HRS §346-14) (Imp: HRS §346-14)

§17-1719.1-14 <u>Eligibility review requirements.</u> (a) An eligible individual shall receive an eligibility review every twelve months.

(b) Eligibility shall be redetermined in accordance with chapter 17-1712.1 and chapter 17-1714.1, subchapter 5. [Eff 02/27/15 ] (Auth: HRS §346-14) (Imp: HRS §346-14)

§§17-1719.1-15 to 17-1719.1-19 (Reserved).

### SUBCHAPTER 3 FREEDOM OF CHOICE, ENROLLMENT, BENEFITS AND DISENROLLMENT

§17-1719.1-20 <u>Purpose</u>. This subchapter addresses freedom of choice, enrollment, benefits and disenrollment for an individual who is eligible under this chapter. [Eff 02/27/15 ] (Auth: HRS §§346-14, 346-29) (Imp: HRS §346-29) §17-1719.1-21 Freedom of choice. (a) An individual eligible under this chapter, with the exception of an individual identified in section 17-1735.1-2(a), shall be provided a choice of a health plan and a provider as described in chapter 17-1720.1. (b) An individual eligible under this chapter identified in section 17-1735.1-2(a) shall choose a department approved provider as described in section 17-1736-3. [Eff 02/27/15 ] (Auth: HRS §346-14) (Imp: HRS §346-14)

§17-1719.1-22 <u>Enrollment into a participating</u> <u>health plan.</u> (a) An individual eligible under this chapter, with the exception of an individual identified in section 17-1735.1-2(a), shall be enrolled in a health plan as described in chapter 17-1720.1, subchapter 2.

(b) An individual eligible under this chapter identified in section 17-1735.1-2(a) shall not be enrolled into a plan, and services shall be provided on a fee-for-service basis. [Eff 02/27/15 ] (Auth: HRS §§346-14, 346-29) (Imp: HRS §346-29)

§17-1719.1-23 <u>Benefits.</u> (a) An individual eligible under this chapter shall be provided a standard benefits package by a participating health plan and other services when appropriate as described in chapter 17-1720.

(b) An aged, blind or disabled individual identified in section 17-1735.1-2(a) shall be provided coverage under the fee-for-service provisions described in chapter 17-1737. [Eff 02/27/15 ] (Auth: HRS §§346-14, 346-29) (Imp: HRS §346-29)

§17-1719.1-24 Disenrollment from a health plan. An enrollee shall be disenrolled from a health plan under the provisions described in chapter 17-1720.1. [Eff 02/27/15 ] (Auth: HRS §346-14) (Imp: HRS §346-14)

§§17-1719.1-25 to 17-1719.1-29 (Reserved).