

32. Chapter 1719 of Title 17, Hawaii Administrative Rules, entitled "AGED, BLIND, AND DISABLED GROUP", is an addition of a new chapter to read as follows:

"HAWAII ADMINISTRATIVE RULES

TITLE 17

DEPARTMENT OF HUMAN SERVICES

SUBTITLE 12

MED-QUEST DIVISION

CHAPTER 1719

AGED, BLIND, AND DISABLED GROUP

Subchapter 1 General Provisions

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§§17-1719-3 to 17-1719-7 (Reserved)

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Subchapter 3 Freedom of Choice, Enrollment,
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Historical Note: This chapter is based substantially upon repealed chapter 17-1721. [Eff 08/01/94; am 11/13/95; am 01/29/96; am 11/25/96; am 10/26/01; am 12/26/05; am 01/31/09; am 10/19/09; am 06/25/12; R]

SUBCHAPTER 1

GENERAL PROVISIONS

§17-1719-1 Purpose. This chapter streamlines and simplifies medical assistance for an aged, blind, or disabled individual under the provisions of Title XIX of the Social Security Act. [Eff]
(Auth: HRS §346-14; 42 C.F.R. §§435.121, 435.230, 435.330) (Imp: HRS §346-14; 42 C.F.R. §§435.121, 435.230, 435.330)

§17-1719-2 General requirements. The confidentiality, administrative appeal, fraud, medical assistance recovery, application processing, eligibility review, and adverse action provisions described in subtitle 12 shall pertain to an aged, blind, or disabled individual who applies or is eligible under this chapter. [Eff]
(Auth: HRS §346-14, 346-44; 42 C.F.R. §§431.200, 431.206, 431.221, 431.230, 431.300, 435.121, 435.230, 435.330, 435.907, 435.916, 455.1) (Imp: HRS §§346-14, 346-44; 42 C.F.R. §§431.200, 431.206, 431.221, 431.230, 431.300, 435.121, 435.230, 435.330, 435.907, 435.916, 455.1)

§§17-1719-3 to 17-1719-7 (Reserved).

SUBCHAPTER 2

ELIGIBILITY REQUIREMENTS

§17-1719-8 Purpose. This subchapter describes the basic, categorical, and financial eligibility requirements for participation in the aged, blind, or disabled group. [Eff] (Auth: HRS §346-14; 42 C.F.R. §§435.110, 435.121, 435.201, 435.230, 435.330) (Imp: HRS §346-14; 42 C.F.R. §§435.110, 435.121, 435.201, 435.230, 435.330)

§17-1719-9 Basic requirements. An aged, blind, or disabled individual shall meet the basic eligibility requirements, which include but are not limited to, citizenship, qualified non-citizen status, state residency, verification of identity, not residing in a public institution and the provision of a social security number, as described in chapter 17-1714.1. [Eff] (Auth: HRS §346-14; 42 C.F.R. §§435.121, 435.230, 435.330, 435.400, 435.910) (Imp: HRS §346-14; 42 C.F.R. §§435.121, 435.230, 435.330, 435.400, 435.910)

§17-1719-10 Categorical requirements. (a) An aged, blind, or disabled individual shall meet one or more of the following categorical requirements:

- (1) Aged individual at least sixty-five years of age in the month of eligibility. Proof of age includes, but is not limited to:
 - (A) Birth verification, legal documents, or church records; or
 - (B) Eligibility for or receipt of SSI or RSDI benefits on the basis of being aged.
- (2) Blind individual with a central visual acuity of 20/200 or worse in the better eye with correcting lens, or the widest field of vision subtends an angle no greater than twenty degrees (tunnel vision). Proof of blindness includes, but is not limited to:
 - (A) Eligibility for or receipt of SSI or RSDI benefits based on blindness.
 - (B) Certification of blindness by the department's vocational rehabilitation services for the blind division,

- Ho'opono, if the requirement of subparagraph (A) is not met; and
- (C) Recertification of blindness is only required by Ho'opono if the blind individual's condition is not permanent and there is a possibility of significant improvement.
- (3) Disabled individual unable to engage in substantial gainful activity because of a medically determinable physical or mental impairment which is expected to result in death or which has lasted or is expected to last for a continuous period of not less than twelve months. Proof of disability provided includes, but is not limited to:
- (A) Eligibility for or receipt of SSI or RSDI benefits based on disability.
 - (B) Certification of disability by the department's aid to the disabled review committee (ADRC) if the requirement of subparagraph (A) is not met; and
 - (C) Recertification of disability is only required by ADRC if the individual's condition is not permanent and there is a possibility of significant improvement.
 - (D) SSI recipients whose eligibility was based on drug addiction and/or alcoholism (DAA) shall continue to be considered SSI recipients as provided in section 1634(e) of the Social Security Act if their SSI benefits were:
 - (i) Suspended solely due to non-compliance or if compliance is met after a suspension of non-compliance; or
 - (ii) Terminated after receiving the limit of thirty-six months of SSI benefits for drug addiction or alcoholism and continue to meet all other SSI eligibility requirements.
- (b) An aged, blind or disabled individual shall meet one of the following requirements:
- (1) Eligible for or in receipt of SSI or SSP benefits, or both;

- (2) Financially ineligible for SSI benefits, but whose income is insufficient to meet their medical expenses;
- (3) Who are allowed to qualify under a higher assistance standard under the provisions of 42 C.F.R. §435.230(c)(2)(vi); or
- (4) Resides in the community and meets the requirements of 42 C.F.R. §435.217 whereas the individual:
 - (A) Would be eligible for medical assistance if institutionalized;
 - (B) Whose income does not exceed the income standards of this subsection;
 - (C) Requires home and community based services in order to remain in the community; or
 - (D) May be covered under the terms of a home and community based waiver.

(c) An individual who was eligible for medical assistance and continues to meet the eligibility requirements that were in effect in December 1973, of the applicable state financial assistance as an essential spouse of an aged, blind, or disabled individual and is determined essential to the aged, blind, or disabled individual's well-being and continues to reside with and whose needs are included in computing the payment for the aged, blind, or disabled individual. [Eff] (Auth: HRS §§346-14, 346-29; 42 C.F.R. §§435.121, 435.131, 435.230, 435.330, 435.520, 435.522, 435.530, 435.531, 435.540, 435.541, 435.608, 45 C.F.R. §§233.39, 233.70, 233.80), 42 U.S.C. §1396(a) to (m)) (Imp: HRS §346-29; 42 C.F.R. §§435.121, 435.131, 435.230, 435.330, 435.520, 435.522, 435.530, 435.531, 435.540, 435.541, 435.608, 45 C.F.R. §§233.39, 233.70, 233.80), 42 U.S.C. §1396(a) to (m))

§17-1719-11 Income requirements. (a) The income standards for participation in the aged, blind and disabled group are the standard of assistance as designated under section 17-1719-10(b).

(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 referred to chapter 17-1724.1, after allowable disregards and exemptions, shall be compared to the standards of assistance which are established for the different coverage groups under the State Plan.

(d) The standards of assistance for an individual:

(1) Who is aged or disabled shall be equal to one hundred percent of the FPL for a household of applicable size.

(2) Who is residing in licensed domiciliary care facilities, both residential care facilities and community care foster family homes, shall be equivalent to the SSI and SSP rates of payment of the SSI program for:

(A) Type I domiciliary care facility with not more than five residents; or

(B) Type II domiciliary care facility with six or more residents.

(3) Who is blind shall be the SSI standard for a household of applicable size.

(4) Whose income exceeds the appropriate standards listed in paragraphs (1), (2), or (3), with medical expenses that exceeds the medically needy income standard, shall be as described in chapter 17-1730.1 for a household of applicable size.

(e) Who is requesting or receiving coverage of long-term care services shall be described in subchapter 8 of chapter 17-1724.1. [Eff]

(Auth: HRS §§346-14, 346-53; 42 C.F.R. §§431.10, 435.121, 435.210, 435.217, 435.230, 435.330, 435.601, 435.602, 435.811, 435.814, 435.831, 42 U.S.C. §1396a(m)) (Imp: HRS §346-53; 42 C.F.R. §§435.121, 435.210, 435.217, 435.230, 435.330, 435.601, 435.602, 435.811, 435.814, 435.831, 42 U.S.C. §1396a(m))

§17-1719-12 Asset requirements. (a) The personal reserve standards for an aged, blind, or disabled individual are the maximum amount of countable assets that may be held by the household while establishing or maintaining eligibility for medical assistance and are equal to the resource limits employed by the SSI program.

(b) For each household member in households greater than two, \$250 shall be added to the SSI personal reserve standard for a household of two and the resultant amount is the personal reserve standard for a household of applicable size.

(c) 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.

(d) An individual who is requesting or receiving coverage of long-term care services must meet the requirements of subchapter 7 of chapter 17-1725.1.

[Eff] (Auth: HRS §346-14; 42 C.F.R. §§435.3, 435.121, 435.230, 435.330, 435.840, 435.843, 435.845) (Imp: 42 C.F.R. §§435.3, 435.121, 435.230, 435.330, 435.840, 435.843, 435.845)

§17-1719-13 Eligibility review requirements. (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 subchapter 5 of chapter 17-1714.1. [Eff] (Auth: HRS §346-14; 42 C.F.R. §§435.116, 435.916, 435.940) (Imp: HRS §346-14; 42 C.F.R. §§435.116, 435.916, 435.940)

§§17-1719-14 to 17-1719-18 (Reserved).

SUBCHAPTER 3

FREEDOM OF CHOICE, ENROLLMENT, BENEFITS AND DISENROLLMENT

§17-1719-19 Purpose. This subchapter addresses and refers to the provisions of freedom of choice, enrollment, benefits and disenrollment for an aged, blind, or disabled individual who is eligible in accordance with this chapter. [Eff] (Auth: HRS §§346-14, 346-29; 42 C.F.R. §§435,121, 435.230, 435.330, 435.520, 435.522, 435.530, 435.531, 435.540, 435.541, 435.608; 45 C.F.R. §§233.39, 233.70, 233.80, 42 U.S.C. §1396(a) to (m)) (Imp: HRS §346-29;

42 C.F.R. §§435.121, 435.230, 435.330, 435.520, 435.522, 435.530, 435.531, 435.540, 435.541, 435.608; 45 C.F.R. §§233.39, 233.70, 233.80, 42 U.S.C. §1396(a) to (m))

§17-1719-20 Freedom of choice. (a) An aged, blind or disabled individual eligible in accordance with 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 aged, blind or disabled individual identified in section 17-1735.1-2(a) shall choose a department approved provider as described in section 17-1736-3. [Eff] (Auth: HRS §346-14; 42 C.F.R. §§430.25, 431.51, 435.131, 435.330, 435.520, 435.522, 435.530, 435.531, 435.540, 435.541, 438.52) (Imp: HRS §346-14; 42 C.F.R. §§430.25, 431.51, 435.131, 435.330, 435.520, 435.522, 435.530, 435.531, 435.540, 435.541, 438.52)

§17-1719-21 Enrollment into a participating health plan. (a) An aged, blind or disabled individual eligible in accordance with 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.

(b) An aged, blind or disabled individual 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] (Auth: HRS §§346-14, 346-29; 42 C.F.R. §§430.25, 431.51, 435.131, 435.330, 435.520, 435.522, 435.530, 435.531, 435.540, 435.541, 42 U.S.C. §1396(a) to (m)) (Imp: HRS §346-29; 42 C.F.R. §§430.25, 431.51, 435.131, 435.330, 435.520, 435.522, 435.530, 435.531, 435.540, 435.541, 42 U.S.C. §1396(a) to (m))

§17-1719-22 Benefits. (a) An aged, blind or disabled individual who is enrolled in a health plan shall be provided a standard benefits package by a

participating health plan and other services when appropriate as described in chapter 17-1720.1.

(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 as described in chapter 17-1737. [Eff]

(Auth: HRS §§346-14, 346-29; 42 C.F.R. §§435,131, 435.330, 435.520, 435.522, 435.530, 435.531, 435.540, 435.541, 435.608; 45 C.F.R. §§233.39, 233.70, 233.80; 42 U.S.C. §1396(a) to (m)) (Imp: HRS §346-29; 42 C.F.R. §§435,131, 435.330, 435.520, 435.522, 435.530, 435.531, 435.540, 435.541, 435.608; 45 C.F.R. §§233.39, 233.70, 233.80; 42 U.S.C. §1396(a) to (m))

§17-1719-23 Disenrollment from a health plan. An enrollee shall be disenrolled from a health plan under the provisions as described in chapter 17-1720.1. [Eff] (Auth: HRS §346-14; 42 C.F.R. §§430.25, 431.40, 438.56) (Imp: HRS §346-14; 42 C.F.R. §§430.25, 431.40, 438.56)

§§17-1719-24 to 17-1719-28 (Reserved)."