

88. Section 17-1736-2, Hawaii Administrative Rules, is repealed as follows:

["§17-1736-2 Definitions. For the purpose of this chapter:

"Department" means the state department of human services.

"Freedom of choice" means the right to elect a qualified participating provider of health care services.

"Pre-paid health benefits" means health benefits available through a current health plan.

"Provider" means an individual or entity which furnishes items or services for which payment is claimed through the State medical assistance program."] [Eff 08/01/94; R] (Auth: HRS §346-14; 42 C.F.R. §431.10) (Imp: HRS §346-14)

89. Section 17-1736-12, Hawaii Administrative Rules, is repealed as follows:

["§17-1736-12 Definitions. For the purpose of this subchapter:

"Abuse" means to put to a wrong or improper use the health care services available under the Hawaii medical assistance program. It includes, but is not limited to, providing or receiving health care services where no medical need exists, providing or receiving health care services where the recipient is not legally entitled to medicaid, providing or receiving service in excess of that medically needed by the recipient, presenting a claim for services not provided, or presenting a claim for services in excess of those actually provided or needed. Abuse may exist where the provider or recipient acts negligently, or recklessly.

"Fraud" means the knowing and willful making or causing a making by any person in the medical assistance program of any false statement or representation of the material fact in any application for benefits or payment for furnishing services or

supplies, or for the purpose of obtaining greater compensation than the person is legally entitled to, or for obtaining authorization for furnishing services or supplies. If any of the conditions above exist, then there is fraud whether or not any payment is actually received from the Hawaii medical assistance program. For purposes of this chapter, fraud may exist whether or not judgment has been made by a court of this State having jurisdiction over criminal matters.

"DHHS" means the United States Department of Health and Human Services.

"Medical assistance program" includes, but is not limited to, medicaid and all medical services provided to clients.

"Pharmacy provider" means every place, shop, or store where drugs are dispensed or sold at retail; or where physicians' prescriptions or drug preparations are compounded. It is an entity fully licensed and registered under all county, state, and federal laws. It is under the supervision of a registered pharmacist.

"Physician providers" means persons licensed by the State to practice medicine or osteopathy and approved as a provider of Hawaii's medical assistance program.

"Provider" means an individual or entity which furnishes health care goods or services such as those authorized for payment under the Hawaii medical assistance program. It covers all persons or entities validly licensed or permitted to provide health care services. Providers shall be certified by the Hawaii medical assistance program.

"QMB" or "Qualified Medicare Beneficiaries" means eligible recipients entitled to medicare Part A, with incomes not exceeding one hundred per cent of the official federal poverty line, and resources not exceeding twice the SSI resource limit, for which medicaid shall pay medicare cost-sharing expenses.

"QMB only provider" means a provider of QMB services that is not certified to participate in the medicaid program.

"Suspension" means exclusion of a provider from participation in the Hawaii medical assistance program by withdrawing the provider's certification for a specified period of time. At the conclusion of the times specified in the suspension, the suspension expires and certified provider status resumes without further action.

"Termination" means exclusion of a provider from participation in the Hawaii medical assistance program by withdrawing the provider's approval. Termination is not for a specified period of time and absent provider application for approval, remains permanent.

"Title XX" means Title XX of the Social Security Act (42 U.S.C. §1397)."] [Eff 08/01/94;
R] (Auth: HRS §346-14) (Imp: 42
C.F.R. §431.10; Pub. L. No. 100-360 §301)

90. Section 17-1736-32, Hawaii Administrative Rules, is repealed as follows:

["§17-1736-32 Definitions. As used in this subchapter:

"Abuse" means to put to a wrong or improper use the health care services available under the Hawaii medical assistance program. It includes, but is not limited to, providing or receiving health care services where no medical need exists, providing or receiving health care services where the recipient is not legally entitled to medicaid, providing or receiving services in excess of that medically needed by the recipient, presenting a claim for services not provided, or presenting a claim for services in excess of those actually provided or needed. Abuse may exist where the provider or recipient acts negligently or recklessly.

"Determination" means the amount of reimbursement due to a provider under the medicaid program as summarized on the notice of program reimbursement (NPR) or notice of PPS rate.

"DHHS" means the United States Department of Health and Human Services.

"Fraud" means the knowing and willful making, or causing to make, by any person in the medical assistance program of any false statement or representation of material fact in any application for benefits or payment for furnishing services or supplies, or for the purpose of obtaining greater compensation than the person is legally entitled to, or for obtaining authorization for furnishing services or supplies. If any of the conditions stated above exist, when there is fraud whether or not any payment is actually received from the Hawaii medical assistance program. For purposes of this subchapter, fraud may exist whether or not a judgment has been made by a court of this State having jurisdiction over criminal matters.

"Medical assistance program" includes, but is not limited to, medicaid and all medical services provided to clients under the general assistance category.

"PPS rate" means the prospective payment system annual rate assigned each medicaid institutional provider.

"Provider" means an individual or entity which furnishes health care goods or services such as those authorized for payment under the Hawaii medical assistance program. It covers all persons or entities validly licensed or permitted to provide health care services. Providers shall be certified by the Hawaii medical assistance program.

"Suspension" means exclusion of a provider from participation in the Hawaii medical assistance program by withdrawing the provider's certification for a specified period of time. At the conclusion of the time specified in the suspension, the suspension expires and certified provider status resumes without further action.

"Termination" means an exclusion of a provider from participation in the Hawaii medical assistance program by withdrawing the provider's certification. Termination is not for a specified period of time and absent provider application for certification, remains permanent."] [Eff 08/01/94; R] (Auth:

HRS §346-14; 42 C.F.R. §431.10) (Imp: HRS §346-14; 42
C.F.R. §431.10)