

PANKAJ BHANOT DEPUTY DIRECTOR

STATE OF HAWAII DEPARTMENT OF HUMAN SERVICES

P. O. Box 339 Honolulu, Hawaii 96809-0339

January 31, 2016

- TO: The Honorable Dee Morikawa, Chair House Committee on Human Services
- FROM: Rachael Wong, DrPH, Director
- SUBJECT: HB 1599 RELATING TO HEALTH.
 - HEARING: Tuesday, February 02, 2016, 9:00 a.m. Conference Room 329, State Capitol

DEPARTMENT'S POSITION: The Department of Human Services (DHS) appreciates the opportunity to testify on this bill and provides comments.

<u>PURPOSE</u>: The purpose of this bill is to require QUEST and Medicaid coverage for chiropractic care, limited to 24 visits per calendar year. The bill appropriates an unspecified amount of money.

The Med-QUEST Division currently covers chiropractic care for individuals under 21 years of age with no limits if determined that the visits are medically necessary under the federal Early and Periodic Screening, Diagnosis and Treatment (EPSDT) requirements.

In researching chiropractic coverage by other States, there are 26 States that cover chiropractic care for adults. However, the number of covered visits varies from 4 per year to 26 visits per year, with coverage limited to manual manipulation of the spine to treat subluxation of the spine demonstrated by an x-ray. Coverage is not provided for preventive or maintenance care. Not all states allow chiropractors to bill for the x-ray or the number of x-rays related to the chiropractic care is limited, and 17 of the 26 states require a co-pay for each visit. If Hawaii is required to cover chiropractic services for medical assistance recipients over 21 years of age with a maximum of 24 visits per year, the DHS estimates that for one half of FY 2017, it would require an appropriation of at \$7,200,000 in state and federal funds of which \$3,886,560 would be state funds. In calculating the estimated cost to provide chiropractic care for the adult Medicaid population (approximately 200,000) we looked at the estimated percentage of the population that would utilize the service. National indicators estimated anywhere from 7% to 15% of the population utilizes the services and an estimate of 10% of the Hawaii Medicaid population (20,000) was used to calculate utilization and cost based on current Medicaid rates (approximately \$30.00/visit). This estimate does not include the cost of associated x-rays and supplies. The Hawaii Medicaid program does not have co-payments.

The bill references QUEST and QUEST recipients. It should be noted that since January 2015, program name has been changed to QUEST Integration, and respectfully suggest that relevant references to the program be updated accordingly. Note that Hawaii Revised Statutes refers to "medicaid managed care plans."

Further, if this measure passes with appropriate funding, Med-QUEST is directed to apply for federal approval via a state plan amendment. However, the proposed effective date of the Act is January 2017. We respectfully suggest the effective date be associated with the timing of receiving federal approval of the state plan amendment since that is unknown, and may extend beyond the January 2017 date.

Thank you for the opportunity to testify on this measure.

Edward Thompson, III

From:	mailinglist@capitol.hawaii.gov
Sent:	Wednesday, January 27, 2016 1:45 PM
To:	HUStestimony
Cc:	mendezj@hawaii.edu
Subject:	*Submitted testimony for HB1599 on Feb 2, 2016 09:00AM*

<u>HB1599</u>

Submitted on: 1/27/2016 Testimony for HUS on Feb 2, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing	
Javier Mendez-Alvarez	Individual	Support	No	

Comments:

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<u>HB1599</u>

Submitted on: 2/1/2016 Testimony for HUS on Feb 2, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Dawn Middleton	Individual	Support	No

Comments:

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Edward Thompson, III

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<u>HB1599</u>

Submitted on: 2/2/2016 Testimony for HUS on Feb 2, 2016 09:00AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Kaelan	Individual	Support	No

Comments:

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