



February 21, 2008

Committee: Ways and Means
SB 2219: RELATING TO PUBLIC ASSISTANCE

Honorable Chairperson Baker and Members of the Senate Ways and Means Committee:

My name is Jackie Berry, Executive Director for Healthy Mothers Healthy Babies of Hawaii (HMHB). HMHB is committed to promoting and improving reproductive, pregnancy and family wellness through research, training, advocacy and community awareness.

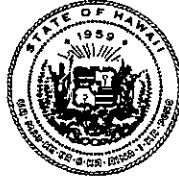
HMHB is testifying today in support of SB 2219 that requires not less than 6 months post-partum and interconception care for women of childbearing age who are participants in the Hawaii QUEST health insurance program.

Affordability of care is a major concern for women, and improved access to preconception and interconception care is needed. Many women in Hawaii go without health insurance simply because they can not afford it, and Medicaid is a primary mechanism for extending health coverage to women of Hawaii with low incomes and who do not have health insurance. Medicaid has been demonstrated to be effective in improving access to health care for women with low incomes.

Having access to extended health insurance for women on QUEST would provide additional post-partum resources and family planning services during a critical time when an unintended pregnancy may occur.

Thank you for the opportunity to testify.

LINDA LINGLE
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February 22, 2008

MEMORANDUM

TO: Honorable Rosalyn H. Baker, Chair
Senate Committee on Ways and Means

FROM: Lillian B. Koller, Director

SUBJECT: **S.B. 2219 S.D. 1 – RELATING TO PUBLIC ASSISTANCE**

Hearing: Friday, February 22, 2008 11:00 a.m.
House Conference Room 211, State Capitol

PURPOSE: The purpose of this bill is to extend post-partum and interconception care from eight weeks to six months for all women of childbearing age who participate in Hawaii's QUEST program.

DEPARTMENT'S POSITION: The Department of Human Services appreciates the intent of this bill, provided that its passage does not adversely impact nor replace the priorities in the Executive Supplemental Budget.

This bill will require the Department to cover an array of services. Under Title XIX, services are limited to health care coverage as defined in the Medicaid State Plan or the QUEST 1115 Waiver. This bill will allow each female participant of childbearing age under the QUEST program not less than six months of post-partum and interconception care. The term "interconception care" means the full scope of preventive and primary care services for women between pregnancies.

Currently, Federal regulation allows for pregnancy-related and postpartum services for a 60-day period after the pregnancy ends and any remaining days in the month in which the 60th day falls. In order to receive Federal reimbursement, the Department would have to submit an amendment to the Hawaii Medicaid State Plan and to the QUEST 1115 Waiver to allow for an additional four (4) months of post partum coverage as a benefit, which must be approved by the Federal Centers for Medicare and Medicaid Services (CMS).

If approval is not received from CMS prior to the required implementation date of July 1, 2008 for the additional four (4) months of postpartum coverage, all associated costs will need to be covered by State general funds only. If approval is received from CMS, the State match to receive the Federal funding will be required.

Hawaii's QUEST program serves approximately 3,300 pregnant women a year. Projected costs to allow for the additional four (4) months of postpartum coverage through Hawaii QUEST is based on the current capitation rate for pregnant women per member per month (PMPM) as follows:

There are 3,300 pregnant women with income up to 185% of the FPL x \$331.09 PMPM x 4 additional months = \$4,370,388. The total amount of \$4,370,388 in State general funds will be needed as Federal regulations only permit the coverage of a 60-day period after the pregnancy ends and any remaining days in the month in which the 60th day falls . The number of women who would continue to be eligible after giving birth is unknown at this time. Many of these women who give birth will most likely qualify for TANF benefits, as they will now be categorically eligible with the consideration of the child and provided their income does not exceed 185% of the 2006 FPL. Other women who give birth may qualify for QUEST or they may qualify for other programs such as QUEST-ACE or QUEST-Net which offer limited benefits.

In as much as these options will require additional State appropriations, DHS respectfully requests that such funding not adversely impact nor replace the priorities in the Executive Supplemental Budget.

Thank you for this opportunity to testify.