

Centene exiting Med-QUEST program

By Nina Wu

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National health insurer Centene is pulling out of Hawaii's Medicaid market, leaving 24,000 members in need of a new plan.

For nearly 20 years, Centene Corp., based in St. Louis, offered the 'Ohana Health Plan, which provided medical, behavioral health and long-term services for low-income individuals and families enrolled in Hawaii's Med-QUEST program.

But Centene said it is leaving Med-QUEST effective Dec. 31.

Centene said in a statement that after "extensive efforts and thoughtful deliberation," it decided not to bid on the Community Care Services contract for behavioral health plans or renew its Med-QUEST contract.

"After nearly two decades serving Hawaii's families and children, we have a deep understanding of the care and support our members need," a Centene spokesperson said in a statement. "Between rising medical costs, reimbursement rates that have not kept pace with the high acuity needs of the populations we serve, and federal funding changes, we are no longer able to continue operating these programs in a sustainable manner while maintaining the

level of service our members deserve."

Centene said it is focusing on ensuring a smooth and orderly transition for its members, providers, employees and community partners.

Med-QUEST Administrator Meredith Nichols at the state Department of Human Services said those 24,000 members will still have Medicaid coverage but will need to select a new health plan.

"DHS is grateful to the dedicated leaders and staff of 'Ohana for their years of service to Medicaid members," said Nichols in a statement. "There is a total of approximately 24,000 members all of whom will continue to be covered by Medicaid for as long as they remain eligible. These 'Ohana members have all received letters advising

them of the need to select a new health plan."

She added that if no new plan is selected, Med-QUEST will automatically assign a plan to those members in order to maintain seamless coverage.

'Ohana will continue to cover their members through Dec. 31, and the newly selected health plans will take effect Jan. 1, she said.

About 400,000 people — or about 1 in 3 Hawaii residents — are enrolled in Med-QUEST, Hawaii's Medicaid and Children's Health Insurance programs. Other insurers that participate in Med-QUEST include HMSA, AlohaCare, Kaiser Permanente and UnitedHealthcare.

Centene is also scaling back in other states, including Arkansas, where it has decided not to renew its participation in that state's Medicaid expansion program.

Med-QUEST eligibility also will be changed starting Jan. 1 due to the passage of H.R.1 by Congress. Under new requirements next year, adults ages 19 to 64 who are not blind, disabled or pregnant will need to show they are working or volunteering at least 80 hours per month, or enrolled at least half-time in an educational program to continue receiving Med-QUEST coverage.

Centene said it will still offer its Medicare Advantage Dual Eligible Special Needs Plan and standalone prescription drug plan.

In a Sept. 1 letter, Centene informed its members that it would be leaving the QUEST program after Dec. 31. ‘Ohana Health Plan members seeking more information may call customer service at [888-8464262](tel:888-8464262) from 7:45 a.m. to 4:30 p.m. Monday to Friday.

Members are able to choose a new health plan during the open enrollment period, which began at the start of October and lasts through Tuesday. An open enrollment packet should have been sent in mid-September. If members want to see their current doctors, they need to make sure they are covered under their new plans.

“We understand that changes like this can feel uncertain,” said ‘Ohana Health Plan in the letter. “We want to reassure your care will continue during this transition. We are here to support you every step of the way.”