Instructions

Section 12006(a) of the 21st Century Cures Act (Cures Act) mandates that states implement electronic visit verification (EVV) for all Medicaid Home Health Care Services (HHCS) by January 1, 2023, or otherwise be subject to incremental federal medical assistance percentage (FMAP) reductions.

The Cures Act includes a provision that allows states to delay implementation of EVV for up to one year if they have encountered unavoidable delays but can demonstrate they have made a good faith effort (GFE) to comply with the Cures Act. Please be advised that the Cures Act provision on GFE exemptions does not provide CMS with authority to delay the FMAP reductions for more than one year.

Please note the following information before completing this form:

- Requests for GFE exemptions should be submitted by November 30, 2022 for HHCS.
- Only the State Medicaid Agency Director or his/her designee can submit this form.
- This document is designed to be used electronically. It consists of the following sections. Section 2 and 3 must be completed in its entirety
 to be considered for GFE.
 - Section 1: Acronyms and Resources
 - Section 2: GFE Request Form
 - Section 3: State Medicaid Director Signature
- To correctly fill out the document electronically, please follow the following tips:
 - For each response, click or tap on the box.
 - The open response questions have no character limits. Type as much or as little as you believe adequately answers each
 question. To enter text, click on the box, delete the placeholder text, and begin typing your response.
 - o For "yes/no" and date-specific answers, click on the drop-down arrow to the right of the answer box and select the appropriate answer. Be sure the click outside the box after completing the question to ensure that the answer does not change.
 - Save the document often to avoid losing work!

If you have any questions, please email **EVV@cms.hhs.gov** or contact your CMS Regional Office.



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Section 1. Acronyms and Resources

List of commonly used acronyms in this file

APD Advance Planning Document
CFC Community First Choice
EVV Electronic Visit Verification

GFE Good Faith Effort

HCBS Home and Community-Based Service(s)

HHCS Home Health Care Service(s)

IAPD Implementation Advance Planning Document

PAPD Planning Advance Planning Document

SMA State Medicaid Agency SSA Social Security Act

CMS EVV resources website link:

Click here to view detailed discussions of EVV models and section 12006 21st Century Cures Act requirements. https://www.medicaid.gov/medicaid/hcbs/guidance/electronic-visit-verification/index.html



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Section 2. Good Faith Exemption (GFE) Request Form

A. Basic State data

Date of Submission: 10/25/2022

State: New Hampshire

State Medicaid Agency (SMA) Requesting GFE: NH Department of Health and Human Services

SMA Contact Information

Name: Henry D Lipman

Title: NH Medicaid Director

Email: Henry.D.Lipman@dhhs.nh.gov

Phone: 603-271-9422

Indicate the Social Security Act (SSA) Authority and service type SMA requests GFE consideration:

Authority	HHCS
Section 1905(a)(24) state plan personal care benefit	No
Section 1905(a)(7) Home Health Care	Yes
Section 1915(c) HCBS waivers	Yes
Section 1915(i) HCBS state plan option	No
Section 1915(j) self-directed PAS	No
Section 1915(k) CFC state plan option	No
Section 1115 demonstration projects	No



B. GFE Request Detail

- 1. Has the state chosen an EVV model? Yes
 - a. If yes to above, please indicate the model chosen. Open Vendor
 - b. If the model option chosen is "other", describe the model in detail here: Click or tap here to enter text.
 - c. If no to above response, please indicate when the state anticipates selecting a model. Date will be in month/year format. Click or tap to enter a date.
- 2. Has the state submitted an APD? Yes If yes, please complete 2.a through 2.c.
 - a. Type of APD submitted: IAPD
 - b. Date of APD submission: 9/14/2021
 - c. Most recent APD approval date from CMS (if available): 12/1/2021
 - d. If no to above response, explain why the state has not submitted an APD. Click or tap here to enter text.
- 3. When is the state's expected implementation date for HHCS? 12/2023



- 4. In the table on the following page, please describe the state's progress towards EVV implementation to date. If you do not see a relevant answer, please choose "other" and write the specific implementation status in the "detailed description of the implementation stage" column. Please add additional rows or attach additional documentation as needed. There are no character limits in each cell. This section includes seven parts.
 - **Implementation Stage:** States can choose from a CMS-defined list of EVV implementation stages. However, CMS does not expect that all states will define implementation stages in the same way. Therefore, if the state has a different implementation stage, please go to the "other" cell and describe in detail what the implementation stage is.
 - **Detailed Description of the Implementation Stage:** Describe the state's current implementation process for this stage if it is in progress. If the state has completed this specific implementation stage, describe the activities that have been completed. States are free to attach any additional documents and reference these files in the description for further information.
 - Not Applicable: Check the box if the stage listed is not applicable to the state.
 - **Is this stage delayed?** Mark "Yes" or "No" depending on if the specific implementation stage is delayed. If "Yes", fill out step 6 in the pages below.
 - Date Completed: If implementation stage was completed, select the date in which the stage was complete.
 - If in process, anticipated date of completion: If the stage is in progress, mark the expected date of implementation.
 - Additional Information: There is an extra field included below the table to include more specific details and information about the state's unique implementation process.



Implementation Stage	Detailed Description of the Implementation Stage	Check if not applicable (N/A)	Is this stage delayed? If yes, complete step 6.	Date Completed	If in the process, anticipated date of completion
Planning -	A RFP was issued for a consultant		No	3/12/2019	
Environmental	to assist the state with defining				
scanning	EVV Requirements				
Planning –	Stakeholder engagement was		No	9/30/2020	
Stakeholder	performed in conjunction with the				
meetings	Environmental scanning stage. New Hampshire contracted with a consultant to assist with stakeholder engagement. The consultant contract included an extensive planning and environmental scanning process. Specifically, the Contractor conducted stakeholder engagement and a seven (7) step Market Survey Process to inform and gather high-level needs and requirements that were used to identify specific, measurable and testable, traceable, complete, and consistent requirements utilized as the foundation for a Request for Proposal (RFP) to procure the Electronic Visit Verification (EVV) technology and services. State staff and external stakeholders were solicited for input and feedback through public forums,				
	surveys, and other means as proposed by the Contractor. A New Hampshire EVV website page was published on the				



Services Implementation Stage	Detailed Description of the Implementation Stage	Check if not applicable (N/A)	Is this stage delayed? If yes, complete step 6.	Date Completed	If in the process, anticipated date of completion
	Department of Health and Human Services website on 11/1/2019 and is updated as information requires a change. All meetings were posted on the web site page and noticed through email and social media.				·
Planning – EVV model selection	NH selected an Open Vendor Model		No	3/31/2020	
Modification of the existing contract to include EVV	NH modified the MMIS Quality Assurance vendor's contract to include EVV.		No	7/1/2022	
Preparing for RFP issuance	Our EVV System RFP was approved by CMS		No	12/12/2021	
RFP issued and awaiting vendor bids	RFP was released.		No	12/12/2021	
RFP closed and in the process of vendor selection	Addressed questions from vendors' proposals due.		No	3/6/2022	
Vendor selected and developing work plans	The Vendor's contract was approved by the NH Governor and Executive Council on 9/21/2022. Currently working with the MMIS team to determine when resources will be available so that EVV implementation can begin. Once that has been determined, then the work plans will be updated and approved.		Yes		12/31/2022



Implementation Stage	Detailed Description of the Implementation Stage	Check if not applicable (N/A)	Is this stage delayed? If yes, complete step 6.	Date Completed	If in the process, anticipated date of completion
Implementing work plans	Development, Testing, and Implementation of the EVV and EVV Aggregator		Yes		12/31/2023
Piloting the EVV system	NH plans to perform a soft implementation. Rather than implementing with a targeted subpopulation of providers (pilot), NH plans to do a soft implementation with all providers beginning in the summer of 2023. This phase will last approximately three to six months after go-live, during which time providers will have flexibilities to support a transition to the new process. These flexibilities will be defined during implementation and could include, for example, allowing a higher number of manual entries per provider.		Yes		12/31/2023
Updating existing EVV system in the state	The State of NH does not currently have an EVV system.	\boxtimes			



Implementation Stage	Detailed Description of the Implementation Stage	Check if not applicable (N/A)	Is this stage delayed? If yes, complete step 6.	Date Completed	If in the process, anticipated date of completion
Other implementation stages not described above (Please detail the state's current implementation stage in the next column.)	New Hampshire Governor & Executive Council approved the EVV Vendor's contract on 9/21/22.		Yes	9/21/2022	Completion
Other implementation stages not described above (Please detail the state's current implementation stage in the next column.)					
Other implementation stages not described above (Please detail the state's current implementation stage in the next column.)					
Other implementation stages not described above (Please detail the state's current implementation stage in the next column.)					

5. In the table on the following page, choose the type of unavoidable delays the state has encountered related to EVV implementation. For each choice, describe in detail what the delays are, why those delays have occurred, and what the state's plans are for addressing the delays. The list provided in the table includes examples of potential delays and will not encompass each unique circumstance of each state. If you do not see a relevant answer, please choose "other" and write the specific delay situation in the "detailed description of the delay" column. Please add additional rows or attach additional documentation as needed. There are no character limits in each cell.



This section includes four parts:

- a. **Detailed Description of the Delay:** Detail the state's circumstances for the delay. Describe and what specific events have occurred to cause this delay.
- b. Why Delays Occurred: Detail why the state believes the cause of the delay happened.
- c. State's Mitigation Plan: Detail the state's plan for addressing the delay going forward.
- d. Estimated Date of Completion: Enter the estimated date that the state believes the task can and will be completed.



Type of Unavoidable Delay	Detailed Description of the Delay	Why Delays Occurred	State's Mitigation Plan	Estimated Date of Completion
Procurement issues	The procurement action to obtain an EVV Vendor was delayed by six months.	Department contracting staff workload challenges. Contract staff were diverted to work on contracting actions related to the Public Health Emergency and end of the State Fiscal Year, which delayed our EVV RFP and approval of the contract.	EVV was designated as a priority project for the Department and Contract staff were advised to make it a priority.	9/21/2022
Budget and/or legislation appropriation issues / Funding issues	To secure funding through the NH biennial budget process, funds for the EVV project were not approved until the State Fiscal Year 2022/2023 capital budget.	To secure funding through the NH biennial budget process, this project was not identified in time to meet the September 1, 2016 submission deadline for the SFY 2018-2019 capital budget so the EVV project was submitted as part of the State Fiscal Year 2020-2021 capital budget but was not funded. EVV project was submitted again as part of the State Fiscal Year 2022-2023 capital budget and was approved.	NH undertook a two-step process; engage a consultant to assist with defining the business and technical requirements for the state's EVV system and once complete to contract for the actual EVV system. A different source of funding was identified to fund the consultant during the Planning Stage. Once capital budget funding was approved for the EVV system, the contracting process for the EVV vendor was initiated.	7/1/2021
Stakeholder engagement issues				
System interoperability issue or IT issue				



Type of Unavoidable Delay	Detailed Description of the Delay	Why Delays Occurred	State's Mitigation Plan	Estimated Date of Completion
Other issues not discussed above (Please detail your delay in the next column)	MMIS State resources are not available to begin EVV Implementation on 10/1/2022	MMIS staffing resources are designated for higher priority projects and will not be available until June 2023. The Department has three projects that take precedence over EVV; implementation of a Medicaid dental benefit by 4/1/2023 that is legislatively mandated in NH, completing the Federal reporting application upgrade for waiver tracking and claiming, and the MMIS technical stack upgrade that will be implemented in February 2023 and cannot be delayed due to its need to ensure continued MMIS system operations.	Exploring utilization of other contracted resources to supplement the MMIS resources needed.	6/1/2023
Other issues not discussed above (Please detail your delay in the next column)				
Other issues not discussed above (Please detail your delay in the next column)				
Other issues not discussed above (Please detail your delay in the next column)				



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Section 3. Medicaid Director Signature

This document is only accepted if the State Medicaid Director signs this form. States can print this file, sign, date the signature, and submit the signature page separately in a PDF file format or add a digital signature. To add a digital signature, right click on the signature line below and choose "sign" option and follow the prompts.

I, Henry D. Lipman, attest that the information provided in this form is accurate and reflective of the current activities regarding EVV of my state.

State Medicaid Director Name: Henry D. Lipman

State Medicaid Director Title: NH State Medicaid Director

October 25, 2022

NH State Medicaid Director

PRA DISCLOSURE STATEMENT: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148 (CMS-10398 #54). The time required to complete the information collection is estimated to average 8 hours, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

