

Medical Care Advisory Committee (MCAC)

November 7, 2022

MINUTES

Present: Holly Stevens, Chair, Lisa Adams, Kathy Bates, Kelley Capuchino, Lisa DiMartino, Joan Fitzgerald, Ellen Keith, Ellen McCahon, Paula Minnehan, Isadora Rodriguez-Legendre, Karen Rosenberg, Rhonda Siegel, Lisabritt Solsky Stevens, Elinor Wozniakowski

Alternates: Emily Johnson, Déodonné Bhattarai

Excused: Tamme Dustin

DHHS: Henry Lipman, Alyssa Cohen, Olivia May, Melissa Hardy, Sarah Finne, Dawn Tierney, Daryll Tenney, Hannah MaynardYung, Carolyn Richards, Kerri Schroeder, Katja Fox, Leslie Melby, Jordan McCormick, Sandy Feroz, Janine Corbett, Shirley Iacopino, Susan Drown, Wendi Aultman, Sarah Wildermann, Peg Clifford, Lise Ferrand, Deb Sorli

Guests: Deb Fournier, Susan Paschell, Nicole St. Hillaire, Trina Loughery, Brooke Holton, Audrey Nuamah, Rich Segal, Audrey Gerkin, Iyad Alkhouri, Vanessa Blais, Krystal Chase, Donne McKean, Josh Krintzman, Amy Pidhurney, Vicki Jessup, Heidi Kroll

Minutes – October 3, 2022

Motion to accept: M/S/A

Membership Committee

Paula Minnehan, Member

Motion:

1. Accept the resignation of individual member Isadora Rodriguez-Legendre effective December 11, 2022.
2. Affirm the appointment of Vanessa Blais as a new individual member with Ms. Rodriguez-Legendre as her alternate.

A vote on the motion will be held December 12, 2022.

M/S/A

Renewal of 1915(i) Fast Forward State Plan Amendment – Children’s Behavioral System of Care

Daryll Tenney and Hannah MaynardYung, Bureau for Children’s Behavioral Health

The framework for the children’s behavioral health system is designed to ensure that children aged 0-21 receive an array of services across a continuum of care to meet their needs including wraparound and other services. The goal is to expand the 1915(i) waiver to an expanded population and build support for preventive work in Tier 3 of the system of care framework and subsequently refer to and amplify Tiers 1 and 2 for children.

Phase I: Care management entities (CMEs) contract amendments have been approved to expand their work with children 0-5. EC-ECC (early childhood-enhanced care coordination) is a modified version of the NH Wraparound model. Eligibility is based on the child’s diagnosis and/or primary caregiver’s risk factors. CMEs will provide EC-ECC services including treatment, home visiting, family-centered early supports and services, family peer supports, and customizable services. CMEs will help increase workforce capacity.

Phase II Full Implementation: Amend the waiver to include children 0-4; expand services to include EC-ECC services; update the projected number of children served from 100 to 750; and update changes for Wraparound and Youth Peer Support.

The proposed fee schedule will align with services (family peer support, youth peer support, wraparound services, and respite care).

Contact: Daryll.Tenney@dhhs.nh.gov; Hannah.V.MaynardYung@dhhs.nh.gov.
Inquiries and referrals: fastforward@dhhs.nh.gov.

SUD-SMI Demonstration Waiver Post-Award Forum

Alyssa Cohen, Deputy Medicaid Director

Waiver timeline:

July 2018: CMS approved NH's SUD-TRA waiver to allow the state to draw down federal funding for residential SUD services to increase access to those services for adults and individuals under age 21.

June 2022: CMS approved the SMI-SED amendment; the draft interim evaluation submitted to CMS.

Sept 30, 2022: Request submitted to CMS to extend the SUD-TRA waiver by 5 years and included the new Community Reentry component.

Dec 1, 2022: DHHS to submit Amendment 3 to provide a denture benefit for nursing facility residents.

In Year 4, NH implemented the Rapid Response Access Point, the 988 behavioral health crisis hotline, and critical time intervention (CTI). Since 2018 accomplishments include increased bed capacity, improved access to care, decline in ED use, enhanced stabilization and continuity of care post IMD discharge, and lower expenditures than the cap set by CMS.

The SMI-SED amendment aligns with the SUD-TRA waiver ending June 30, 2023. The amendment waives the IMD exclusion rule for beneficiaries 21-64 with SMI who need IMD residential treatment as part of NH's approach to address emergency department (ED) boarding and support the continuum of mental health care.

The legislation establishing an adult dental benefit includes a denture benefit for DD, ABD, and CFI waiver groups, and nursing facility residents. An 1115 waiver is required to provide the denture benefit for nursing facility residents, and CMS has advised that amending the existing 1115 waiver is the quickest path to CMS review and approval to meet the April 1, 2023 adult dental implementation date. The SUD-SMI waiver will be amended by Dec 1, 2022, and the 1915(c) waivers will be amended to provide denture coverage to the waiver populations noted above.

Next steps: SUD-SMI extension approval; waiver amendment to add the denture benefit for NF residents; data collection and analysis of the prescription drug monitoring program. Information is posted [online](#).

MCAC Comments/Questions:

1. Karen Rosenberg, DRC, asked if the extension request requires a waiver amendment.
Response: An amendment to the SUD-SMI waiver will be submitted. If approved, it will be wrapped into the extension.
2. Lisabritt Solsky Stevens, Easter Seals: Must SUD and SMI be co-occurring if one or the other diagnosis is not a primary diagnosis?
Response: Eligibility is based on the primary diagnosis. Holly Stevens added that it depends on the type of facility providing services.

Adult Dental Benefit; 1915 Waiver for Dental Benefit

Sarah Finne, DMD, Medicaid Dental Director

Dawn Tierney, Medicaid Policy Administrator

Legislation (Ch. 285, 319, Laws of 2022) requires DHHS to implement an adult dental benefit by 4/2/23. Services include diagnostic, preventive, limited periodontal, restorative, and oral surgery services for all Medicaid beneficiaries age 21 and older. The denture benefit portion of the benefit is limited to individuals in the DD, ABD, CFI waivers and nursing facility residents.

Dental services will be provided through a single managed care Dental Organization as a Pre-Paid Ambulatory Health Plan (PAHP). Delta Dental was awarded the contract with DentaQuest as subcontractor to administer the benefit.

CMS requires the state to submit a 1915(b) waiver to allow the state to mandate beneficiaries into a single PAHP. NH elected a 2-year renewal cycle. The denture benefit portion will be requested through the 1915(c) DD, ABD, CFI waivers. CMS has 90 days to approve.

State Plan Amendments (SPAs) will be submitted and posted online with the Public Notice. Public comments will be solicited.

Q&A: 1. Will Certified Public Health Dental Hygienists be reimbursed?

Response: This will be addressed with details to follow.

2. Making a denture is not the end of the care needed.

Response: The denture benefit includes routine post-delivery care and other associated procedures. The provider network must be able to treat all members regardless of health status.

Denture Benefit: 1915(c) Amendments for Waiver Populations

Melissa Hardy, Director, Long Term Supports and Services

The 1915(c) waivers will be amended to provide coverage for dentures for individuals served on the DD, ABD, and CFI waivers.

The public comment period is 11/9/22 – 12/9/22. A public comment session will be held on Nov 30, 2022. The draft amendments are posted online.

The denture benefit is limited to the provision of dentures, routine post-delivery care, and other associated procedures to include complete dentures, partial dentures, adjustments, repairs, denture rebase, and denture relines procedures.

Medicaid Care Management (MCM) Model Evaluation

Olivia May, Director of Medicaid Enterprise Development

The Department has procured Mathematica for the evaluation of NH's Medicaid Care Management and related health and human services model. A key component of this work is interviews with key stakeholders. These include provider groups, MCOs, community based organizations, and beneficiaries. MCAC members are invited to participate in a stakeholder interview and interested members should email Olivia May at Olivia.L.May@dhhs.nh.gov. For information or questions about the MCM Model Evaluation, contact Olivia. The MCAC will be updated as the work continues.

Medicaid Expansion Renewal: Member Comments

Medicaid Expansion in NH is up for renewal. The Granite Advantage Commission recommended renewal. Holly Stevens asked if MCAC wants to take a formal position. Members expressed support for renewal on behalf of the organizations and constituencies they represent – Beneficiaries (Lisa DiMartino), Disability Rights Center, NAMI, Easter Seals, NH Community Behavioral Health Association, NH Hospital Association.

Disability Determinations

Kerri Schroeder, Bureau of Family Assistance

As of Sept 30, 2022: 31 children pending of which 9 were on Medicaid. 247 adults pending of which 80% were on Medicaid. 20 adults ready for write-up or final sign-off; 35 consultative exams scheduled; 2 HC-CSD cases over 90 days due to incomplete/insufficient release of PHI, or lack of timely response by providers.

As of Oct 28, 2022: 22 children pending of which 8 were on Medicaid. 226 adults pending of which 80% were on Medicaid. 30 adults ready for write-up or final sign-off; 25 consultative exams scheduled;

1 HC-CSD case over 90 days due to lack of timely response by providers.

MCO Contract

Henry Lipman, Medicaid Director

Amendment #9 will incorporate items approved during the 2022 legislative session retroactive to the date of enactment. The PHE end date will affect enrollment. More will be reported next month.

American Rescue Plan HCBS Spending Plan

Henry Lipman, Medicaid Director

DHHS is working with CMS on what more NH can do to support those at risk of being institutionalized. \$74 million has been paid out with another \$115 million to distribute with approval. More will be reported next month.

1915(j) Personal Care Waiver

Alyssa Cohen, Deputy Medicaid Director

DHHS is working with CMS to get the 1915j State Plan amendment submitted and approved prior to the end of the PHE so that program under the 1135 disaster waiver that allows legally responsible adults to provide personal care services to family members can continue under the (j) once the PHE ends.

Public Health Emergency: Medicaid Continuous Enrollment

Deb Fournier, UNH Health Law & Policy; Alyssa Cohen, Deputy Medicaid Director

October Medicaid enrollment was slightly higher than September at 244,611 individuals. Of 174,722 Medicaid households, 65,155 or 37% are in protected status. Granite Advantage is the largest category at 44,079; children – 33,539; elderly/disabled – 6,466. Outreach continues to help reduce the number of overdue beneficiaries.

If the PHE expires in January: states must be notified by Nov 12, 2022; unwind notifications will begin in November; cases will be closed beginning Feb 1, 2023; and the higher federal match for those in protected status will end March 31, 2023.

Key stakeholder messages remain the same: Ensure that those eligible are able to continue coverage; continue to support member redeterminations; and amplify DHHS messaging. If the PHE ends in January, Nov 16 –yellow letters (will be sent to 9400 individuals in the COVID testing and treatment group encouraging them to apply for Medicaid; Nov 16-23 – letters informing 65,155 in protected status of the PHE end date, and that if they receive a yellow letter, they must complete a redetermination to keep their coverage or lose coverage if they don't respond.

CCIIO Pilot Account Transfer Procedural Denial (APTD):

Prior to the PHE, individuals who became ineligible due to income were referred to the Marketplace for potential coverage. There was no transfer of files.

In order to transfer files, NH is working with CMS/CCIIO to test file transfers. NH has passed joint system testing; Nov 4 – perform production connectivity test to the new production APTD end point; Week of Nov 14 – full production test of APTD to be performed jointly with CMS/CCIIO.

MCAC will be updated as the Department prepares for the end of the PHE. Letters will be shared at the Nov 10th stakeholder group meeting. A webinar will be held once the PHE end date is known.

Adjourn: M/S/A