



The New
Hampshire
Department of
Health and Human
Services

State Health Care
Innovation Plan

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Table of Contents

Executive Summary	3
Introduction.....	6
Role in Overall Health Care Reform.....	6
New Hampshire Triple Aim Strategy	6
State Overview	7
Population Demographics	8
Baseline Summary Data.....	9
Alignment with Medicaid Care Management	13
Alignment with Public Health	14
Alignment with Medicare	14
Alignment with Accountable Care Organization Development in New Hampshire	14
Alignment with the Balancing Incentive Program.....	15
Alignment with the Health Home Model.....	16
Stakeholder Involvement	17
Consumer Education and Outreach.....	18
Model Overview	26
Current State of the LTSS System	26
Impetus for Change.....	27
Vision and Mission	27
Goals and Values	28
Strategy	28
The Prevention Focused and Person Centered and Driven LTSS Initiative	29
LTSS Eligibility Assessment	30
Equalization of Available LTSS Services.....	31
Life Plan Creation	31
Team Coordinator Selection	32
Health Home Selection	34
LTSS Budget Creation.....	35
LTSS Reimbursement Account Creation and Operation	38
Supporting Strategies	40
Public Health.....	41
Substance Misuse.....	43

Health Information Technology.....	44
Training Supports.....	45
Other Payment Methodologies.....	46
Legal, Regulatory, and Legislative Authority.....	47
Global Triple Aim Incentive Pool Initiative	48
Provider Investment Fund.....	50
Reinvestment Fund	51
Multi-Payor Strategies	52
Medicare	53
Veteran’s Affairs.....	53
Other Payors.....	54
Implementation Approach	54
Program Evaluation	57
Overall Measurement.....	57
Savings Estimates	58
Conclusion	61

Executive Summary

This State Health Care Innovation Plan is the product of New Hampshire's State Innovation Model (SIM) Design grant awarded to the State by the Centers for Medicare & Medicaid Services (CMS) in February 2013. New Hampshire's SIM effort is a key component of the State's overall health care reform strategy. This document outlines New Hampshire's proposed plan for transforming the current Long Term Services and Support (LTSS) Systems of Care in the State, and outlines strategies for and approaches to testing and implementing this model. While the initiative was led by the New Hampshire Department of Health and Human Services (DHHS), the model has been developed in conjunction with ongoing support from the Governor's office, an interdepartmental policy team, and a wide range of stakeholders; and has the potential to achieve sustainable delivery system transformation within the State's LTSS system and health care system as a whole.

This model focuses on supporting individuals who are either in need of or at-risk for needing LTSS. Not only are these individuals more likely to have multiple payors for components of their care, but they account for 64% of the State's \$1 billion Medicaid budget. In addition, this population has traditionally been underserved by New Hampshire's broader public health initiatives and addressing the disparity is a key component of the State's health care reform strategy. This design, while focusing on a specific segment of the population, will reach and have an impact on the State's broader population health. Specifically, 78% of New Hampshire's population receives their health care coverage from the payors that are envisioned to be engaged in this model. Also, in the future we will look for opportunities to apply the concepts embedded in the initiatives included in this plan to broader segments of New Hampshire's population.

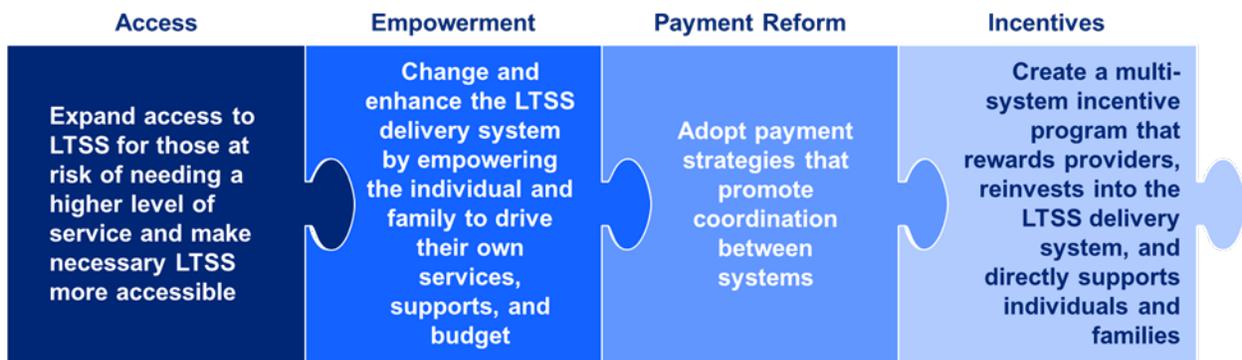
As an extension of the State's overall approach to health care reform, this plan is strongly aligned with several other initiatives underway within the State. For example, in 2011, the State determined that it would employ a Medicaid Care Management (MCM) model for administering the New Hampshire Medicaid program, which began in December 2013. There is significant synergy between the launch of the care management program and initiatives included in this plan, as this plan impacts and informs key program design elements of the care management program for individuals who receive LTSS.

In addition to its care management program, the State recently released a State Health Improvement Plan, which introduces priorities and objectives for public health activities throughout the State. As part of our design work, we have identified strategies for encouraging participation of individuals with LTSS to meet these public health goals. There is also significant alignment between this model and the State's

Balancing Incentive Program (BIP). The State’s SIM and BIP teams are working together on key aspects of the initiatives contained within this model.

The current LTSS system consists of a number of “siloes” sub-systems with limited consistency of payor care management, and the State’s current approach to LTSS has varied across the various populations and different waiver programs. The need for better coordination between the medical, behavioral, and LTSS delivery systems statewide has been recognized and addressed in this plan. The mission of this plan is to create a dynamic and enduring community-based system of long term supports, so all New Hampshire citizens may live and age with respect, dignity, choice, and control.

We took the following four-step approach in developing the initiatives that encompass the goals and mission identified by the State and its stakeholders:



This approach enabled the development of a model that focuses on the individual and/or family and the supports they need, and also provides a set of supports that occur on a system-wide level while increasing access to currently available services. The first element within this model is the Prevention Focused and Person Centered and Driven LTSS Initiative. This eight-step initiative is designed to accomplish the following goals:

1. Expand eligibility for LTSS for individuals at risk of needing a higher level of service
2. Make it easier to access LTSS once enrolled in the system
3. Enhance how services and supports are coordinated
4. Give individuals more control over the services they receive

The first four steps are geared toward improving care and service coordination for individuals receiving LTSS. The LTSS Eligibility Assessment, Life Plan Creation, Team Coordinator Selection, and Health Home Selection steps contain care and service coordination components on a variety of different levels and impact the broadest set of individuals serviced by the system. The latter set of steps, the LTSS Budget

Creation and LTSS Reimbursement Account Creation and Operation, promote the individuals' ability to access and direct needed long term services and supports.

In addition to the initiative described above, this model design contains a set of supporting strategies that are necessary to reach CMS's Triple Aim of better health, better care, and reduced costs. The supporting strategies outlined in this plan include alignment with public health goals and programs, substance use disorders (SUD) treatment, health information technology (HIT) advancement, and training programs. Within this same realm, we have also developed a set of necessary legal, regulatory, and legislative changes to support the implementation of these initiatives.

Along with the Prevention Focused and Person Centered and Driven LTSS Initiative, and the supporting strategies included within this design, we also plan to operate an incentive program that ties the various sub-systems together in support of our goals for the system. Each year spending will be projected for all medical, behavioral, and LTSS costs for individuals receiving LTSS. Based upon this amount, a savings target will be established. If savings are realized and paid out based upon the steps outlined in the incentive pool, savings would be distributed three ways: to the payors, to the providers, and to various reinvestment initiatives. Provider incentives will focus on rewarding providers based on the performance of the various delivery systems to improve outcomes for individuals receiving LTSS, as opposed to individual provider performance. Potential areas of reinvestment include a contingency pool to support an individual's access to uncovered services and supports above basic needs, system-wide training, additional direct worker training and retention support, family support enhancements, and HIT.

Within this plan we also include an implementation approach for each of the initiatives mentioned above. In the development of this approach, we decided to phase the testing and implementation of these changes into the delivery system. This phased approach will help us to meet our program evaluation goals for the model. We plan to evaluate this program on an ongoing basis. Our evaluation plan includes the evaluation of specific steps within the initiatives against baseline data. Using this phased approach, we plan to report out on recognized gaps in the model, progress against evaluation measures, and consumer satisfaction on an annual basis.

In sum, this plan is a key element of the State's overall approach to health care reform and introduces a new model design for transforming the current delivery system for LTSS in New Hampshire. It presents a set of innovative concepts that in conjunction with our government counterparts, stakeholders, providers, payors, and consumers, will reach the Triple Aim of better health, better care, and reduced costs for New Hampshire residents.

Introduction

The State Innovation Model (SIM) Design grant provided New Hampshire with the unique opportunity to develop a plan for transforming the current Long Term Services and Support (LTSS) Systems of Care by building on the strengths of the existing system and bringing together multiple individual initiatives already underway in the State. This State Health Care Innovation Plan is the result of this design and outlines New Hampshire's plan for testing and implementing this model.

New Hampshire strongly agrees with the Centers for Medicare & Medicaid Services (CMS) Innovation Center (CMMI) that a governor-sponsored, multi-payor innovation model that has broad stakeholder input and engagement has the potential to achieve sustainable delivery system transformation that will result in achieving the Triple AIM of better health, better care, and reduced costs for New Hampshire residents. This State Health Care Innovation Plan demonstrates how, through prevention, transition, and person centered and driven LTSS strategies, we can reach this Triple Aim and help New Hampshire reach its goal of reducing and/or eliminating waitlists for individuals in need of LTSS.

Role in Overall Health Care Reform

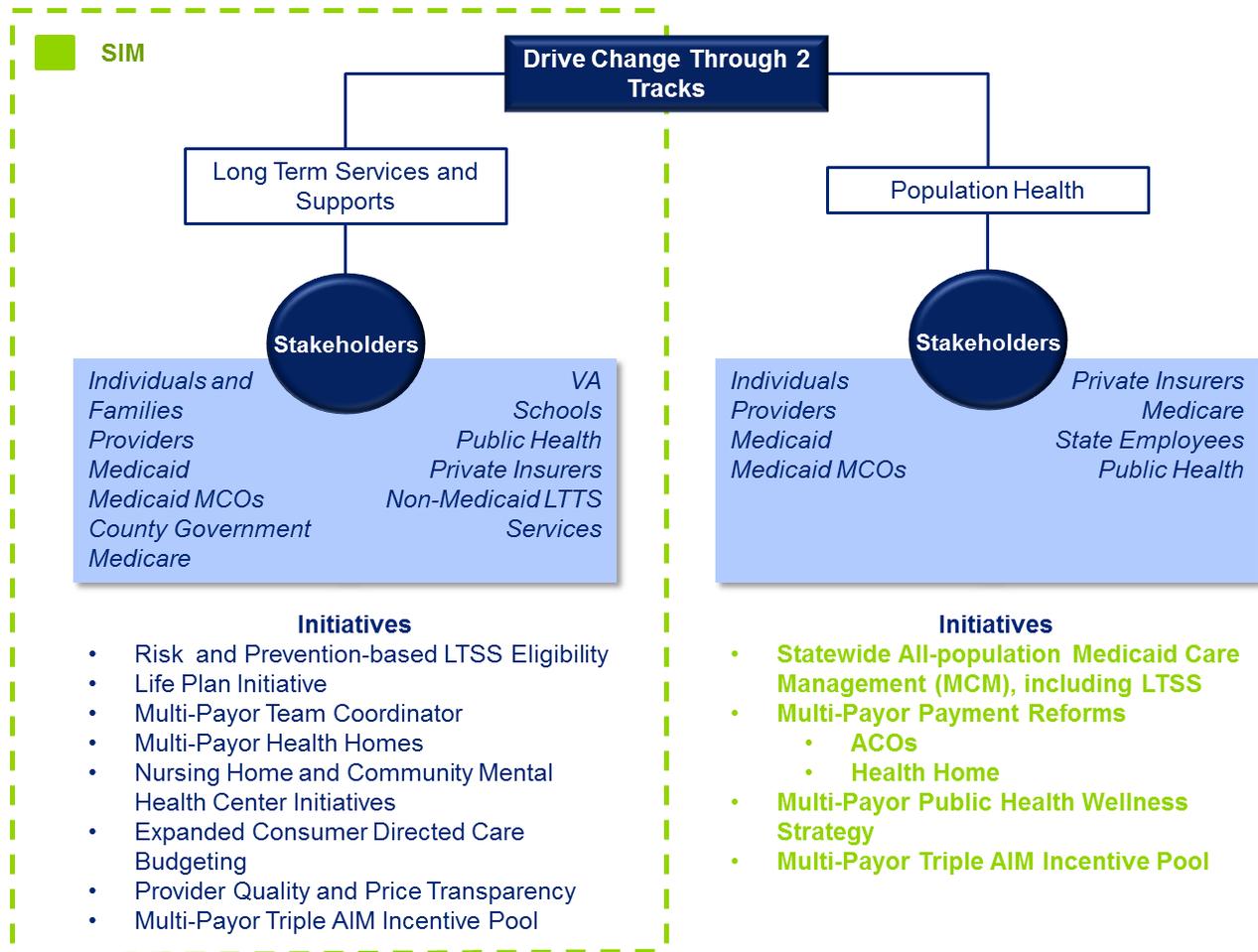
New Hampshire's application for a SIM Design grant, and its subsequent development of this State Health Care Innovation Plan, is a key component of the State's overall approach to health care reform. This initiative has been led by the New Hampshire Department of Health and Human Services (DHHS) in conjunction with ongoing support from the Governor's office, an interdepartmental policy team, and a wide range of stakeholders. While this model design focuses primarily on the LTSS population in New Hampshire, it is tightly aligned and integrated with numerous health care reform efforts currently underway in the State. We view the transformation of care for the LTSS population as a stepping stone to driving change on a statewide level, and see a significant role for this transformation within the State's broader approach to health care reform.

Throughout the development of this plan, we maintained coordination and alignment with other change-based efforts in the State, including the State's Health Improvement Plan. This relationship is demonstrated in the graphic below, which shows how SIM aligns with health care initiatives underway within the State's broader population.

New Hampshire Triple Aim Strategy

All of the programs and/or strategies listed on the right-hand side of the diagram, under Population Health, are health care initiatives currently underway or planned in the State. Those programs and/or

strategies are initiatives in which this SIM model has a direct relationship, and are affiliated with the Long Term Services and Supports initiatives listed on the left.



State Overview

As of July 2012, the State of New Hampshire had 1.3 million residents¹. While the population density in the State is 147 persons per square mile, the population density in the northern portion of the State is significantly less than in the southern portion, reflecting its rural nature. Specifically, the two southernmost counties in New Hampshire, Hillsborough and Rockingham, account for over 54% of the State's population². Hillsborough County is home to the two most densely populated cities of Manchester and Nashua.

¹ <http://www.census.gov/popfinder/>

² <http://quickfacts.census.gov/qfd/states/33000.html>

The table below shows a summary of New Hampshire’s 2012 population by health coverage source - Medicaid, Medicare, private insurance, and uninsured - reflecting estimates of the potential Medicaid expansion population and the Patient Protection and Affordable Care Act (ACA) Marketplace enrollment.

New Hampshire Population Summary Estimated Enrollment by Health Coverage Source		
	Estimated Enrollment	Percent of NH Population
Medicaid (including dual eligibles and CHIP)	176,272	13%
Medicare (excluding dual eligibles)	217,304	16%
Private Insurance		
Anthem/Matthew Thornton	507,673	38%
Harvard Pilgrim Health Care	148,646	11%
CIGNA	75,848	6%
MVP Health Insurance Company of NH	12,469	1%
All Other Private Insurers	10,565	1%
Estimated Medicaid Expansion Population	62,237	5%
Estimated Enrollment through ACA Marketplace ³	65,000	5%
Estimated Uninsured ⁴	44,704	3%
Total New Hampshire Population	1,320,718	100%

Population Demographics

New Hampshire’s model focuses on individuals who are either in need of or at risk for needing long term services and supports. Our decision to focus on this specific population is based on the following factors:

1. This population accounts for approximately 64% of the State’s \$1 billion overall Medicaid budget
2. This population, which primarily consists of individuals with severe and persistent mental illness, children with a serious emotional disturbance, and those eligible for one of New Hampshire’s four Home and Community Based Services (HCBS) waiver programs, are individuals with complex needs that interact with multiple systems of care with little effective coordination and planning between those systems

³ Note some enrollees obtaining coverage through the Marketplace may already be covered by private insurance (and therefore would be counted twice in this table)

⁴ Uninsured population may be understated due to individuals potentially being included in multiple coverage sources during the year

3. These individuals are also likely to have multiple payors for components of their care (Medicaid school-based services, substance misuse programs, public health programs, Medicare, Veterans Affairs, long term care insurers, and commercial insurers) who have not typically coordinated the provision or management of needed services
4. The State launched a comprehensive statewide Medicaid Care Management (MCM) program in December 2013 for the vast majority of the Medicaid population. HCBS waiver services will not be part of the care management program until the second year of its operation and the State is designing a model for the integration and coordination of these services in the second step of the care management program, building on the concepts and approaches in this plan

Baseline Summary Data

To further quantify the factors we used in deciding to focus on this population, we have included baseline summary data for the populations receiving Medicaid LTSS in the tables below. These tables display the expenditure distribution for the total LTSS population, based upon data from State Fiscal Year (SFY) 2012, in three different ways. Table 1 provides the total population expenditure distribution for SFY 2012. Table 2 expands on Table 1, and provides the total population expenditure distribution for SFY 2012 in the following 7 areas:

1. Medicaid Intermediate Care Facility (ICF)/Skilled Nursing Facility (SNF) services
2. Medicaid HCBS Waiver services
3. Medicaid Community Mental Health Center (CMHC) services
4. Medicaid Hospital Inpatient and Outpatient services
5. Medicaid to Schools services
6. Medicaid – Other services⁵
7. Medicare services (estimated)⁶

Table 3 breaks down Table 2 to the annual per member expenditure level, and also emphasizes the percent dual eligible included within each decile group. To develop these figures, we summarized the

⁵ The Medicaid – Other services category includes, but is not limited to, the following sets of services: prescription drugs, durable medical equipment, physician, home health, personal care, private duty nursing, DCYF – private non-medical institution for children, DCYF – intensive home and community service, DCYF – placement services, wheelchair van, dental, private duty nursing, adult medical day care, federally qualified and rural health clinics, targeted case management, early intervention, clinic services, and all other.

⁶ The Medicare expenditures for dual eligibles represent estimated Medicare costs for disabled and aged dual eligibles using the CMS 5% sample data for the state of New Hampshire and average Part D pharmacy expenditures. The Medicare PMPM expenditure estimates were assigned to each dual eligible based on their age for each month they were eligible for both Medicaid and Medicare. These estimates do not represent the Medicare cost for any particular waiver population, but rather represent an average Medicare dual eligible cost. We will update our Medicare estimates once we have access to the 100% New Hampshire sample data from CMS.

total annual expenditures for SFY 2012 for each individual and ranked them from least expensive to most expensive. We then assigned each individual one of ten decile groupings based on that ranking system. For example, the 90%-100% decile group is the most expensive 10% of the population. The 80%-90% decile is the next most expensive 10% of the population. Expenditures include the percent of Medicaid/Medicare dual eligibles within each decile group as well.

Table 1. Total Population Expenditure Distribution for SFY 2012

Table 1 New Hampshire Department of Health and Human Services State Health Care Innovation Model (SIM) Baseline Summaries Decile Summary Population: Total All Ages					
SFY 2012 Population Expenditure Distribution					
Decile	Number of Individuals	Member Months	Percent Dual Eligible	Total Annual Expenditures	Percentage of Total Annual Expenditures
90-100%	2,728	32,362	73%	\$302,773,693	33%
80-90%	2,729	32,253	89%	179,029,456	20%
70-80%	2,728	30,953	82%	140,240,523	15%
60-70%	2,729	29,432	75%	103,082,165	11%
50-60%	2,728	27,869	65%	72,944,713	8%
40-50%	2,729	25,574	48%	49,724,802	5%
30-40%	2,728	22,973	32%	29,920,829	3%
20-30%	2,729	20,108	26%	17,092,164	2%
10-20%	2,728	14,126	25%	8,567,419	1%
0-10%	2,743	8,209	10%	2,693,412	0%
Total	27,299	243,859	52%	\$906,069,176	100%

Table 2. Total Population Expenditure Distribution by Category for SFY 2012

Table 2 New Hampshire Department of Health and Human Services State Health Care Innovation Model (SIM) Baseline Summaries Decile Summary Population: Total All Ages										
SFY 2012 Population Expenditure Distribution										
		Annual Per Member Expenditures								
Decile	Percent Dual Eligible	Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid to Schools	Medicaid - Other	Medicare (estimated)	Third Party Amount	Total
90-100%	73%	\$16,350	\$59,727	\$3,578	\$2,675	\$1,528	\$10,870	\$15,118	\$1,141	\$110,987
80-90%	89%	32,586	7,595	1,405	1,235	746	2,927	18,869	239	65,603
70-80%	82%	14,041	12,649	2,018	1,432	1,337	3,148	16,410	373	51,408
60-70%	75%	5,217	9,932	2,624	1,320	1,611	2,890	13,792	387	37,773
50-60%	65%	3,079	4,153	4,082	1,324	1,243	2,739	9,830	288	26,739
40-50%	48%	1,606	1,694	4,240	1,155	884	3,011	5,344	287	18,221
30-40%	32%	823	618	3,935	822	378	2,199	2,000	194	10,968
20-30%	26%	299	214	2,807	430	146	1,285	984	98	6,263
10-20%	25%	96	79	1,467	171	69	668	533	57	3,141
0-10%	10%	5	12	545	42	12	199	139	28	982
Total	52%	\$7,407	\$9,661	\$2,669	\$1,060	\$795	\$2,992	\$8,298	\$309	\$33,191

Table 3. Annual per Member Expenditure Distribution for SFY 2012

Table 3 New Hampshire Department of Health and Human Services State Health Care Innovation Model (SIM) Baseline Summaries Decile Summary Population: Total All Ages												
SFY 2012 Population Expenditure Distribution												
				Annual Expenditures								
Decile	Number of Individuals	Member Months	Percent Dual Eligible	Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid to Schools	Medicaid - Other	Medicare (estimated)	Third Party Amount	Total
90-100%	2,728	32,362	73%	\$44,604,065	\$162,936,365	\$9,760,036	\$7,297,395	\$4,168,937	\$29,653,550	\$41,241,616	\$3,111,728	\$302,773,693
80-90%	2,729	32,253	89%	88,927,651	20,726,682	3,835,275	3,369,275	2,035,453	7,987,565	51,494,390	653,166	179,029,456
70-80%	2,728	30,953	82%	38,302,832	34,505,118	5,506,212	3,905,530	3,647,381	8,587,955	44,766,665	1,018,830	140,240,523
60-70%	2,729	29,432	75%	14,237,187	27,105,584	7,160,225	3,601,242	4,396,016	7,887,000	37,639,026	1,055,883	103,082,165
50-60%	2,728	27,869	65%	8,400,285	11,328,382	11,136,438	3,612,791	3,391,758	7,473,263	26,816,600	785,196	72,944,713
40-50%	2,729	25,574	48%	4,383,550	4,622,351	11,571,526	3,152,965	2,412,107	8,215,989	14,583,845	782,470	49,724,802
30-40%	2,728	22,973	32%	2,244,080	1,685,027	10,734,510	2,242,076	1,031,819	5,999,046	5,455,076	529,196	29,920,829
20-30%	2,729	20,108	26%	816,490	582,915	7,659,443	1,173,623	397,647	3,507,828	2,686,508	267,709	17,092,164
10-20%	2,728	14,126	25%	261,801	215,318	4,002,745	466,039	187,828	1,823,213	1,454,451	156,023	8,567,419
0-10%	2,743	8,209	10%	14,977	33,278	1,495,023	115,379	31,825	546,627	380,795	75,507	2,693,412
Total	27,299	243,859	52%	\$202,192,918	\$263,741,020	\$72,861,434	\$28,936,315	\$21,700,772	\$81,682,037	\$226,518,973	\$8,435,707	\$906,069,176

This baseline summary data highlights the populations in which this model focuses, and highlights the areas we plan to address and/or improve through the implementation of the initiatives set forth in this plan. Specifically, this data demonstrates the inherent need to better manage the care for the “highest utilizers” of the system, e.g. the 80%-100% decile groups.

Along with the opportunity to improve the management of and coordination of care within the highest decile groups, we also recognize the opportunity to focus on prevention within the LTSS population. Specifically, there is significant potential within this model to focus prevention and consumer-driven strategies on the “intermediate” layers of system utilizers, e.g. the 60%-80% decile groups. Using the initiatives set forth in this plan, we can intervene within this subset of the population to potentially prevent and/or delay upward movement into advanced, higher cost decile groups.

The above data analysis reveals several important characteristics of individuals who utilize LTSS, and the need to focus on them within the implementation of this model:

1. The majority of individuals utilizing LTSS are dual eligible, underlining the need to engage the Medicare program in New Hampshire’s SIM initiatives
2. The high amount of non-LTSS costs associated with high decile spending, highlighting the opportunity for better multi-systemic coordination

For a further breakdown of each of these categories, as well as a breakdown by age range and a description of our methodology, please refer to Appendix A. Please also note that we plan to engage municipalities and/or counties who currently record LTSS expenditures to better understand our true costs and subsequent potential savings as we test and implement this model.

Alignment with Medicaid Care Management

In SFY 2011, the State Legislature enacted a law requiring the Department of Health and Human Services (DHHS) to employ a care management model for administering the New Hampshire Medicaid program. DHHS is undergoing the transition from its past Fee-for-Service (FFS) model to a care management model, called Medicaid Care Management (MCM). DHHS has contracted with three Managed Care Organizations (MCOs), or health plans, to provide covered services to Medicaid recipients who enroll with the plan. These three health plans are (1) New Hampshire Healthy Families, (2) Meridian Health Plan of New Hampshire, and (3) Well Sense Health Plan. Each of these three health plans above have been engaged in the model design process and development of this person-centric State Health Care Innovation Plan.

Alignment with Public Health

Along with aligning to the State's transition to a care management model, the development of this plan has coordinated and maintained alignment with the development of the State's public health strategy. Specifically, the Department's Division of Public Health Services recently released a State Health Improvement Plan that introduces priorities and objectives for public health activities throughout the State⁷. The development of this State Health Improvement Plan has been incorporated into the development of this State Health Care Innovation Plan. Primarily, there are recognized barriers that individuals receiving LTSS face to benefit from the public health programs outlined in the State Health Improvement Plan. We are focused on reducing those barriers through the implementation of this model, and these connections will be presented further in the Supporting Strategies section of this plan.

Alignment with Medicare

As demonstrated by the baseline summary data above, the majority of individuals receiving LTSS in New Hampshire are dually eligible for both Medicaid and Medicare. In recognizing the significant overlap between Medicaid and Medicare recipients within this population, we believe it is essential to financially align the Medicaid and Medicare covered services for individuals who receive LTSS. To that end, a key element of our plan will be to pursue a CMS Dual Eligible Financial Alignment Demonstration Project.

Alignment with Accountable Care Organization Development in New Hampshire

In identifying the natural alignment with Medicare, we have also explored the relationship between this model and the Accountable Care Organizations (ACOs) operating in the State. With similar goals to the State Innovation Model, the ACO model establishes a population-based payment model designed to work in coordination with private payors by aligning provider incentives⁸. Dartmouth Hitchcock, a CMS Pioneer ACO Model participant⁹, has participated in the stakeholder engagement and consensus process throughout this model design. We have also engaged representatives from a similar Accountable Care Program (ACP) in the State, the New Hampshire Citizens Health Initiative¹⁰. This ACP is currently deploying a set of common measures, using the New Hampshire All Payor Claims Data, and developing a learning collaborative. We recognize the opportunity to align the initiatives within this model with those of this ACP, and to share potential lessons learned.

⁷ <http://www.dhhs.nh.gov/dphs/documents/nhship2013-2020.pdf>

⁸ <http://innovation.cms.gov/initiatives/Pioneer-ACO-Model/>

⁹ <https://data.cms.gov/dataset/Pioneer-ACO/izub-xmpg>

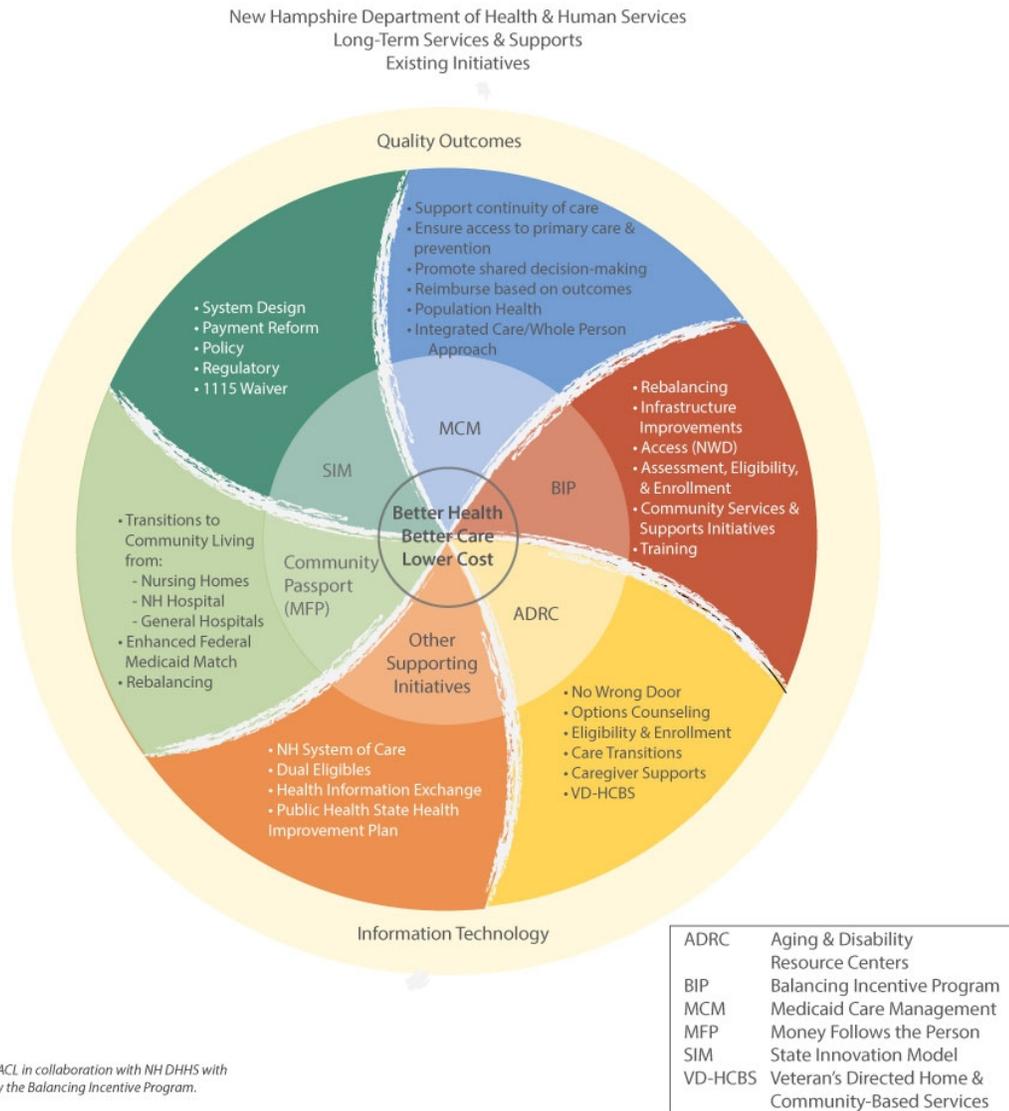
¹⁰ <http://www.citizenshealthinitiative.org/accountable-care-project>

Several of the current ACO/ACP programs, as described above, are enrolling individuals who receive LTSS. Therefore, we see ACOs as an important component of our strategy to improving care and service coordination for the LTSS population, and our design envisions their participation in the initiatives described in the resulting sections of this plan.

Alignment with the Balancing Incentive Program

In addition to the alignment with the State's care management model and statewide public health plan, the SIM initiatives are closely aligned with New Hampshire's Balancing Incentive Program (BIP). The State's SIM and BIP teams are working together on tasks such as expanding eligibility criteria and developing training programs and on-demand tools as part of this model. Each of these initiatives will be presented further in the Model Overview section of this plan. These planned BIP activities, along with current BIP efforts such as Health Home pilots and workforce training and development, will help inform the State's overall efforts to enhance community long term services and supports.

There is a significant amount of alignment not only between SIM and BIP, but also between the other DHHS programs that share the LTSS population as a focus. These programs include Aging and Disability Resource Centers (ADRC), Community Passport/Money Follows the Person (MFP), and Veterans Directed Home and Community-Based Services (VD-HCBS). The graphic on the next page, prepared in collaboration with the Department and the University of New Hampshire's Center on Aging and Community Living with funding provided by BIP, visualizes the overlap and intertwining efforts of each of these LTSS-focused programs. The graphic design intends to show how the lines between each program are permeable and allow for collaboration as well as information sharing.



Alignment with the Health Home Model

To build on our alignment with the State's care management program and with BIP, we plan to align this model with the Health Home¹¹ model. It is the State's intention to deploy a statewide Health Home model during Step 2 of its care management program, and efforts are already underway in the State to pilot this type of model. Specifically, The CareConnect Developmental Disabilities Health Home pilot is a team of health providers and long term care professionals that work together to provide for all the health care and a community based supports for up to 45 adults with developmental disabilities. This Health Home,

¹¹ <http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Long-Term-Services-and-Support/Integrating-Care/Health-Homes/Health-Homes.html>

located in the Nashua region and currently in year one of its pilot phase, has been established by Gateways Community Services¹² and Dartmouth-Hitchcock-Nashua¹³. Each CareConnect Health Home enrollee will have an individualized care plan that addresses medical needs and long term community based supports, taking into account social needs, family/home support circumstance, and developmental disability functional level. As part of the year one pilot, Gateways and Dartmouth-Hitchcock will design and test best practices specific to this target population, and specifically those enrolled in the CareConnect Health Home.

In addition to this pilot, the Greater Nashua Mental Health Center¹⁴ has enrolled over 800 individuals in their Health Home program. This program is a collaborative model with the local federally qualified health center (FQHC) and has received a \$4 million, four-year grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to monitor successful health outcomes.

The experiences and lessons learned from these pilots will inform DHHS' design and subsequent implementation of its planned statewide rollout of a Health Home model during Step 2 of its care management program.

Stakeholder Involvement

New Hampshire has a rich history of bringing together stakeholders on a voluntary basis to develop significant policy initiatives. We started our stakeholder engagement process even before we received grant funding. We have engaged a wide range of stakeholders who were committed to developing a consensus-driven State Health Care Innovation Plan that builds on and brings together public and private strategies and creates a transformational vision of the health care system. A complete list of the stakeholders engaged in this process is included in Appendix C.

The stakeholder advisory committee (SAC) for this model design includes over 50 representatives from across the spectrum of stakeholders, including consumers, providers, payors, and advocates. The SAC was involved in every phase of the project, providing input and approval throughout the model development. A central principle of the design approach was that each element that was developed by the State or by one of the eight stakeholder workgroups went in front of the SAC for validation and consensus. This iterative process of stakeholder workgroup design/development and SAC concurrence increased stakeholder participation, and also ensured that stakeholders were agreeing to each element of

¹² <http://www.gatewayscs.org/>

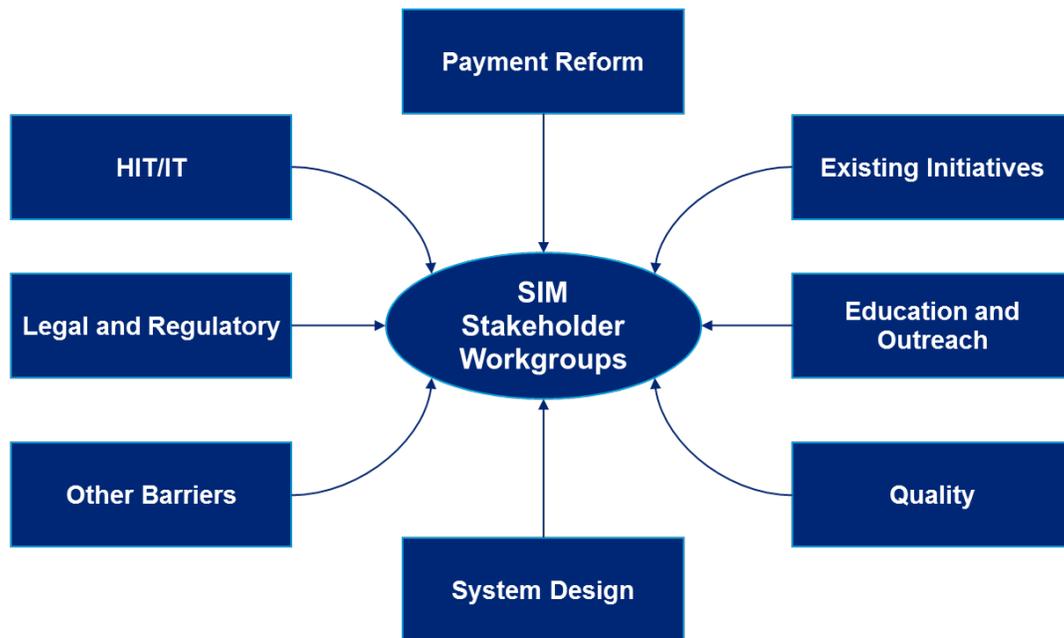
¹³ http://patients.dartmouth-hitchcock.org/our_locations/nashua/dh_nashua.html

¹⁴ <http://www.gnmhc.org/>

design before it moved forward. This collaborative effort recognized areas of agreement on many principles and system design elements throughout the process.

As mentioned above, the design of this model included the formation of eight distinct workgroups. It was during these workgroups that this design was conceptualized and completed. Each workgroup included stakeholders and agency representatives, and the goal of each workgroup was to define specific aspects of the model related to its respective topic area. These workgroups met on a regular (monthly and sometimes semi-monthly) basis beginning in May 2013 to develop and ultimately answer key sets of questions necessary for completing this model design. Each workgroup also conducted a thorough review of both the straw person model and this final State Health Care Innovation plan.

The graphic below portrays the topics covered by each of the eight stakeholder workgroups.



Consumer Education and Outreach

In addition to our ongoing stakeholder engagement and consensus progress, we have also conducted extensive consumer education and outreach as part of this model design. Specifically, we conducted 13 consumer focus groups that were held in different regions of the State and with different populations. Through this process, we were not only able to educate consumers about the development of this model, but we were also able to obtain feedback on specific elements of the design and potential impacts and/or consequences of implementing these initiatives. To prepare for these consumer focus groups, the Education and Outreach stakeholder workgroup collectively developed key questions that would benefit

from consumer input and potentially close gaps within this model. Consequently, the feedback received from consumers during each round of focus groups was reported back to the workgroup and addressed within iterations of the design.

Along with consumer focus groups, we also developed and conducted an online survey tool to solicit feedback from a broader base of consumers. The findings from both the focus groups and the online survey are summarized below.

The State contracted with Louis Karno & Company Communications¹⁵ to conduct 13 focus groups: 11 with consumers and/or family members of consumers of Medicaid LTSS, and 2 with agency staff members who work directly with consumers. The focus groups were invitation-only and were organized in conjunction with local human service agencies that recruited participants from their consumer and client networks. Focus groups averaged between 7-10 participants each, and we had 92 participants in total.

In addition to the consumer focus groups, we also conducted a 35-question online survey. The survey was developed using feedback from the focus groups, as well as feedback from the Education and Outreach stakeholder workgroup. Survey participants were recruited via email by the list of stakeholders who participated in this model design. We had a total of 892 survey participants and a total of 576 completed surveys.

Reaction to the Model

With the exception of members of two focus groups representing those who are served by the developmental disability system who said they were against transitioning to a care management program or a change to the current LTSS system, the state innovation model is appealing to people who participated in the focus groups, and it makes sense to them.

Both the developmental disability system and the MEAD (Medicaid for Employed Adults with Disabilities) program were identified as being successful by those who use it, and many focus group participants expressed the hope that the new system wouldn't dismantle what works well in the current model, but would bring the rest of it up to the level of these programs. Other than the developmental disability system, from the Medicaid consumer perspective there seems to be a great deal of fragmentation, system silos, and lack of guidance that people think the model, as proposed, could improve.

¹⁵ <http://www.lkarno.com/>

It was particularly heart wrenching to listen to parents of young adults of transition age who appear to be nearly on their own in fighting for their child's needs, and facing a situation in which few services are available to help their children. From this group's perspective, care coordinators and counselors come and go too often. Their children are often not perceived by the school system or legal system to have chronic care needs because they "look like everyone else" and often appear to be high functioning.

Eligibility

The eligibility process also surfaced as a problem for one consumer group in particular. Adult children with elderly parents find the Medicaid system a confusing maze. These consumers typically have no prior knowledge of the human service system or government programs. Several told us that they found out about the ServiceLink¹⁶ program purely by chance, and without the help they received from ServiceLink counselors they would have been effectively shut out of the services that their loved ones needed.

These consumers said that something needs to be done to make people aware that help is available through Medicaid and other human service programs, prior to the eligibility step, and that once they are eligible for Medicaid they need a "guider" to help them navigate the system. This "guider" might be the Team Coordinator in the proposed model, which will be described in more detail in the Model Overview section of this plan, or it might be a case manager with an organization in which they work.

Many of these stakeholders find the Medicaid eligibility process daunting and burdensome. They understand that there needs to be protection against fraud; however, they find the eligibility paperwork and documentation process to be a barrier to helping those who need help. They suggested shortening the current 5-year eligibility look-back period to 3 years.

Even medical eligibility for this population is cumbersome. According to participants in one group, it takes 45 days to two months for the client to receive an in-home eligibility assessment by a nurse. They said that it is easier to place a loved one in a nursing home, which they said will perform the medical eligibility assessment in a day and work with Medicaid so that they can receive "back-payment" for services provided while awaiting financial eligibility determination.

If the goal is to keep people in their own homes, they asked, why can't the system send a nurse out to a person's home sooner, and "back-pay" for services being provided to home care agencies too?

¹⁶ <http://www.nh.gov/servicelink/>

Eligibility Assessment, Life Planning, and Team Coordination Approach

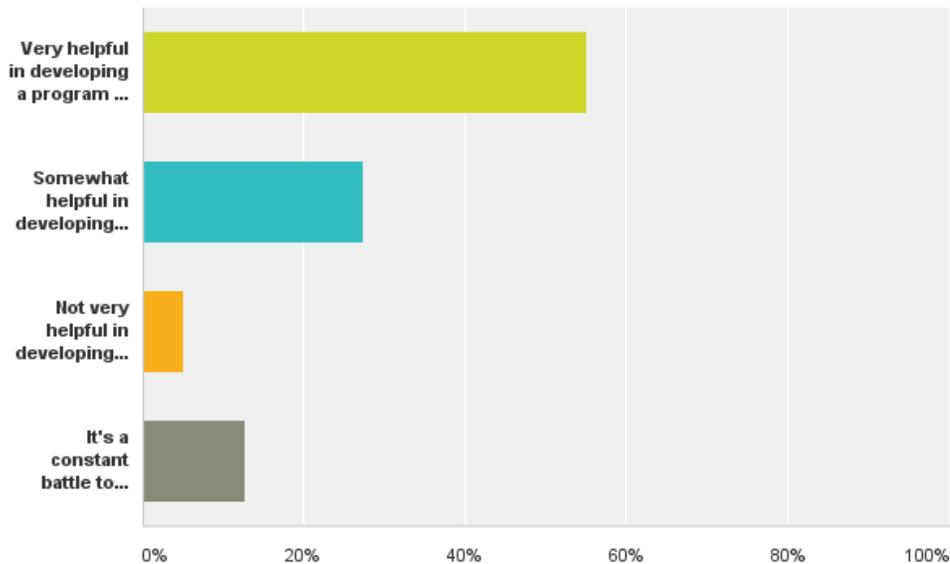
Focus group participants were in favor of the concept of assessing and addressing wants and values, as well as needs. Behavioral health consumers, for example, raised the point that a “crisis plan” must be a part of the Life Plan and that allowances should be made to update or change the Life Plan continually because their kids cycle through changes on a near daily basis.

The concept of a team coordination approach with a Life Plan and budget are appealing. Many people in the groups have had experience with similar models, either in school with children with special needs (family and child’s team develops IEP, service plan, or wraparound plan) or in the developmental disability system, and are comfortable with it.

1. 80% of survey respondents have had experience with a plan
2. 77% said they had developed it in consultation with school or agency staff members, a case manager or other professionals
3. 25% said they took the lead in developing the plan
4. 55% of those who had experience with a team said that it was “very helpful in developing a program of services and supports to meet my (our) needs”

Q14 What statement comes closest to your general experience with these teams of service providers?

Answered: 433 Skipped: 459



Focus group participants liked the concept of a team and Team Coordinator function as it indicates that someone has responsibility for making things happen, as long as everyone on the team, including the individual or family, has equal weight and that decisions will be made by consensus rather than decree. They view the role and expertise of the Team Coordinator as absolutely crucial to the success of the whole model. In terms of the most desirable qualities that a Team Coordinator should possess, survey respondents cited:

1. Is experienced and knows how the system works – 79%
2. Listens to me (us) – 76%
3. Is someone I (we) can meet with face-to-face – 74%

The option of offering life planning to people before they become eligible for Medicaid was viewed very positively as well. Children of older adults with dementia or other memory-impacting disorders, for example, suggested the “earlier the better.” This would address one of the biggest challenges for this consumer group. They know they need help, but don’t know what help to ask for because they do not have insight into what help might be available to them or their loved one. Transition-age children and their families are also positively impacted with this planned approach as private insurance often ends as they approach adulthood and independence, and become eligible for LTSS.

Wellness Incentives

The concept of wellness incentives was generally well received; however, the question of the appropriate match between incentives and the legitimate ability of people to accomplish them arose. People said that incentives should be within the reach of the individual consumer. Health activities most often mentioned as worthy of incentives included nutrition and exercise programs. Our approach to addressing this concept and implementing wellness incentives is described in the Model Overview section of this plan.

Encouraging People to be “Shrewd Consumers”

The most common suggestion among participants in our focus groups related to helping individuals become better purchasers of health care by letting them see the bills that Medicaid pays on their behalf.

When consumers were asked what would help them select a provider the three most common responses were:

1. Provide them with a list of who is available
2. Provide them with information on the provider’s background and credentials
3. Provide them with the flexibility to switch providers when and if they want to

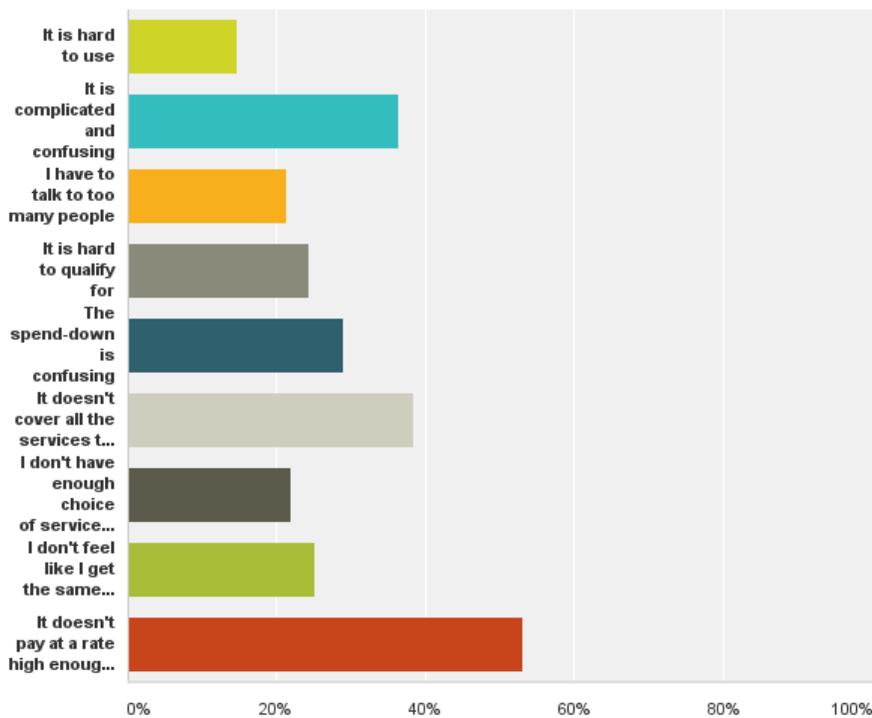
Consumers said that satisfaction with a provider is largely a matter of chemistry or fit. This means it is largely a matter of trial and error, so if they don't click with a provider, they'd like the flexibility to try a new one.

Workforce Quality

Workforce issues came up in nearly every focus group. We heard that most direct support and home care providers receive little training and are poorly compensated. This results in high turnover, which means that the consumer's progress reboots with each new care provider. Turnover of agency case managers due to high performance expectations and poor compensation was also cited as problematic. We heard several times, "Every time I get a new case manager I have to start over."

Q11 What don't you like about the current NH Medicaid Long-Term-Care program? (Choose all that apply)

Answered: 477 Skipped: 415



We heard from direct support staff and others in focus groups that the role of direct support is undervalued in the current system and as a result consumer outcomes are not what they could or should be. They said that those who work with consumers on a daily basis are the foundation of the long-term-care system, and that improving training and compensation should be features of a system redesign in

order to improve consumer satisfaction and outcomes. We were told that this undervaluing illustrates “deviancy image juxtaposition.” Society doesn’t recognize the value in someone with a disability or an elder because they are consumers not producers. The person in society isn’t seen as valuable and the person who works with them isn’t either. Our approach toward addressing these workforce retention issues is outlined in the Training Supports section of this plan.

However, system consumers appear to recognize the value of good service providers. When asked what they didn’t like about the current Medicaid LTSS system, the leading response among survey respondents (53%) was, “It doesn’t pay at a rate high enough to keep good personal care attendants or direct support providers.”

Greater Breadth of Services Needed

Focus group participants in the northern part of the State said there was a great need for professional services and specialists closer to them. They frequently drive 90 minutes or more to southern New Hampshire to access care for their children.

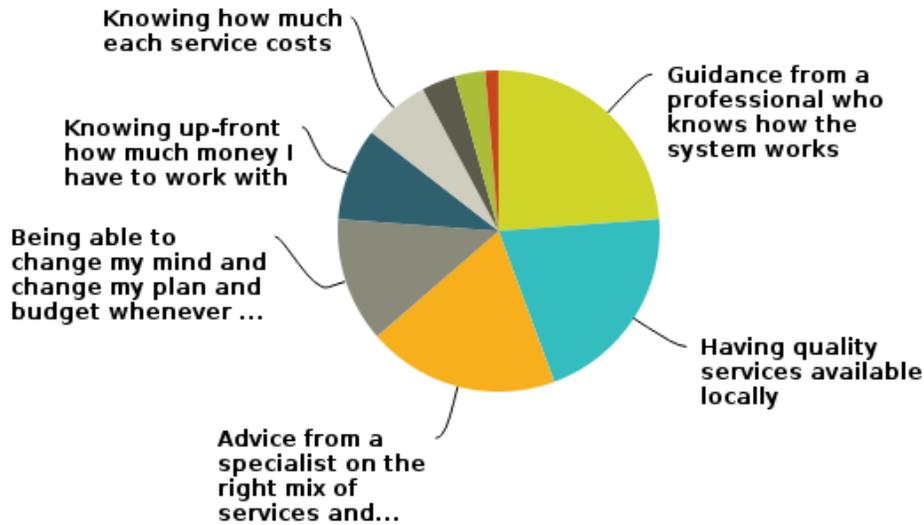
While other consumer groups, e.g. those with developmental or physical disabilities, or the elderly, discussed wanting to remain in their homes or in their community. Parents of young adults with behavioral health issues see small institutions, which may relate to assisted living facilities for people with behavioral health needs, as a highly desired alternative to homelessness, providing peer support and safety. Housing also came up as a need in other focus groups representing other behavioral health consumers and the elderly.

Interestingly, when asked what they might find difficult about managing a services account, if they had one, survey respondents’ top responses were:

1. Finding quality services – 42%
2. Finding the needed services – 39%
3. Finding affordable services – 35%

Q25 If you could only choose one thing, what would help you the most in developing and managing a flexible, annual Medicaid services account and budget for yourself or your family member?

Answered: 525 Skipped: 376



Quality Paperwork is not the Best Indicator of Service Quality

We heard in several focus groups that current system quality measures and payment tend to focus on completed paperwork and not on consumer outcomes. Focus group members suggested that the new system extend evaluation to consumer outcomes rather than system inputs. For example, having consumers sign off on their Life Plan and compensating an organization for that work is not as strong a measure of quality as consumers actually accomplishing the goals in their Life Plan.

We also heard that the goal of the LTSS system should not be custodial. “We need to help people stay at home, get jobs, make friends, have dates,” a member of one group said. “Most people’s relationship circles are with staff and family. No one measures relationships.”

The Role of the Advocate

We heard that while a care team could be a positive experience, it could also be intimidating for many consumers. “Sometimes these meetings can be uncomfortable,” said one consumer. “They try to put words in your mouth or try to have you set goals that they think you should set. You see things differently

than what they are saying and you have a room full of professionals that are telling you what you need to do.”

The solution, we heard, is to have someone attend these meetings with the consumer as their advocate. It could be a family member, a friend, or a direct support worker -- the person who knows the consumer best and can help present their viewpoint. As part of the care team process it would be useful to encourage consumers to bring an advocate with them, if their Team Coordinator is not “the person who knows them best.”

Show us the Money

Although the reaction to the proposed model was highly positive at some point in most groups, someone raised the point that in theory this was a great idea, but without enough money behind it, the model can't deliver on its promise.

Base the Design on Art, not Science

A common theme with Medicaid consumers is that every person or family's situation is distinctly different. The State's LTSS service system has to be designed to accommodate and deliver on a nearly infinite variety of Life Plans designed to accommodate a nearly infinite variety of needs, wants, and values. Consumers felt that to be successful, the system should be based on art, not science. As one mom said, "I want my kid's plan to be based on her needs, not her diagnosis."

For a complete breakdown of the results from the 35-question online survey, please refer to Appendix B.

Model Overview

Current State of the LTSS System

The current LTSS system in New Hampshire consists of a number of “siloes” sub-systems with limited consistency of payor care management and siloes accountability. While we recognize that within the siloes vertical alignment has proven to be beneficial in certain areas, e.g. for the developmentally disabled population, this system of siloes does not consistently promote coordination of services across the different delivery systems. In addition, the State's current approach to LTSS has varied across the various populations and waiver programs. In looking at the current model, we identified the need for better coordination between medical, behavioral, and LTSS delivery systems statewide. Fee for service payments drive the system and do not support collaboration, creativity, or efficiency within and across agencies providing LTSS. We believe that improving coordination across these various systems of care

and strengthening the alignment of payors will encourage the promotion of overall cost reduction and quality improvement.

Impetus for Change

New Hampshire's model focuses on individuals who are either in need of or at risk for LTSS. The State chose this population for the following reasons:

1. This population has complex health needs that are served by multiple service delivery systems that have struggled to coordinate care across those systems, resulting in poor outcomes for individuals and a compromised quality of care
2. Multiple payors access these delivery systems and have little commonality in their approach to care management, how they engage and enable consumers, and measurement of outcomes
3. There is no current mechanism to look across the delivery systems and across the payors to measure the cost effectiveness of the provided services or to measure their performance in improving the health status and quality of life for the consumers they serve

Vision and Mission

At the very beginning of this SIM design process, prior to receiving a grant award from CMS, the State and its stakeholders developed vision and mission statements, as well as sets of goals and values for this model. The development of these foundational elements occurred prior to the development of any of the initiatives and/or supporting strategies set forth in this plan. It was through this visioning and goal-setting process that, as a group, we were able to refine this model and ultimately produce this plan.

The vision of this plan is for all eligible New Hampshire citizens to have access to the full array of long term supports and services. This allows them to exercise personal choice and control, and affords them dignity and respect throughout their lives. To the greatest extent possible, each citizen should be able to make informed decisions about their aging, health, and care needs. There should be a high level of quality and accountability in everything offered and in everything provided. Over time, New Hampshire will truly become an extended community of people who care about, value, and help one another.

The mission of this plan is to create a dynamic and enduring community-based system of long term services and supports, so all New Hampshire citizens may live and age with respect, dignity, choice, and control until the end of life.

Goals and Values

We have maintained the following three stakeholder-developed goals throughout the development of this plan:

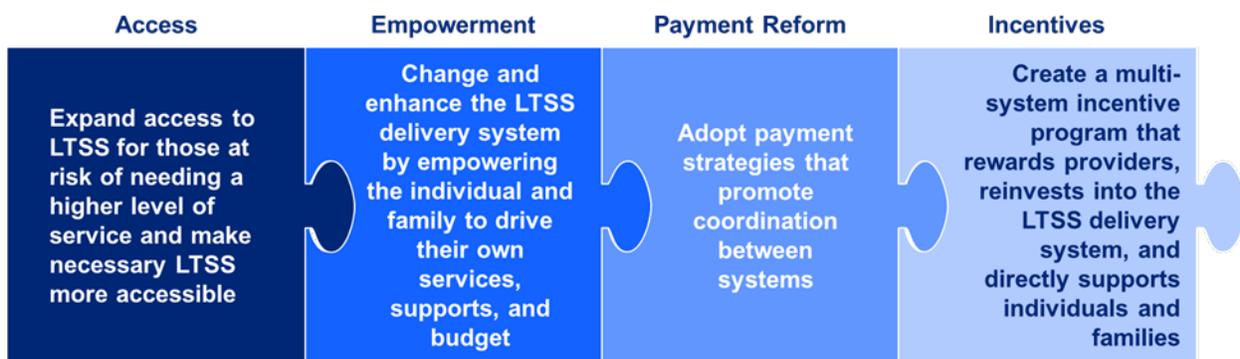
1. Empowers consumers to access services across the service delivery system “silos” and improves care and service coordination across those systems
2. Aligns the payors for long term services and supports around common goals and outcomes
3. Employs a payment system that creates global accountability for effectiveness in outcomes and cost

In conjunction with these goals, we have developed a set of values that helped to shape and define the initiatives included within this system redesign:

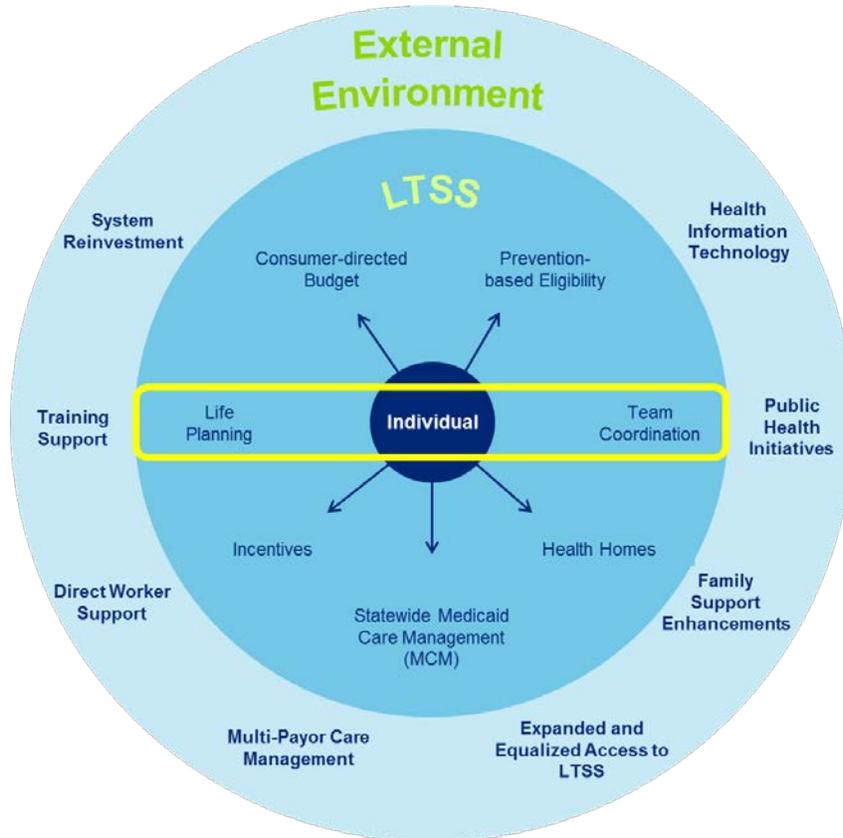
1. Person/family centered – “from the person outward”
2. The person’s needs are viewed holistically and met seamlessly
3. Persons/families are empowered to make informed and responsible choices
4. Providers and payors collaborate to ensure access to high quality services
5. Services are accessible, affordable, and efficiently provided

Strategy

We took the following four-step approach in developing the initiatives that encompass the goals and values identified by the State and its stakeholders:



By taking this approach, we are able to develop a model that begins with the individual and/or family, but also provides a set of supports that occur on a more system-wide, external level. This inside-out approach has been visualized in the graphic below. Each of the initiatives that follow were conceptualized and formed as a result of this multi-layered strategy.



The Prevention Focused and Person Centered and Driven LTSS Initiative

A key part of the State’s plan is to redesign how LTSS consumers access comprehensive services, how those services are coordinated, and to give those individuals more control over the services they receive. We have conceptualized this initiative into 8 steps.



The first four steps are geared toward increasing access to needed services, improving care and service coordination for individuals receiving LTSS. The LTSS Eligibility Assessment, Life Plan Creation, Team Coordinator Selection, and Health Home Selection initiatives contain care and service coordination components on a variety of different levels and impact the broadest set of individuals serviced by the system.

The latter set of steps, the LTSS Budget Creation and LTSS Reimbursement Account Creation and Operation, promote the individuals' ability to access and direct needed long term services and supports. A major design element in the SIM plan is to significantly increase the number of individuals directing their own budget, and to do so across all waiver populations. Also within these steps is the goal that the same set of LTSS would be made available for everyone who comes into the system, regardless of the "door" they enter through or the waiver they are a part of.

LTSS Eligibility Assessment

The first step within this initiative is the LTSS eligibility assessment. The Prevention, Transition and Person Centered and Driven LTSS Initiative that is the backbone of this model will begin during this initial step. While this assessment already occurs within the State, we are proposing to expand its current scope to reach a larger population of individuals. The existing eligibility criteria make LTSS available because the individual would be eligible for a higher level of service. We plan to expand the criteria to include those who would be at risk of needing a higher level of service in the future if LTSS is not provided to the individual. The Balancing Incentives Program (BIP) team will draft these new criteria.

In addition to expanding the criteria used for the LTSS eligibility assessment, we also plan to expand the availability of this assessment to individuals who are nearing a transitional point in their lives and will soon be eligible for LTSS. Specifically, we plan to provide a Life Plan and team coordination services to individuals who do not currently meet assessment criteria because they fall into one of the following categories:

1. Individuals less than 21 years of age
2. Seniors with currently ineligible income and/or asset levels, but who are on a trajectory to become eligible in the near future

For individuals who would have otherwise been granted LTSS by the system except for being less than 21 years of age, this assessment and subsequent care coordination activities will allow for a smoother transition into the system when they reach the eligible age. For seniors who would have been granted LTSS except for their income and/or asset levels, and for whom there is the strong likelihood of gaining

eligibility in the near future, this service acts as a prevention strategy until they are determined eligible to begin receiving LTSS.

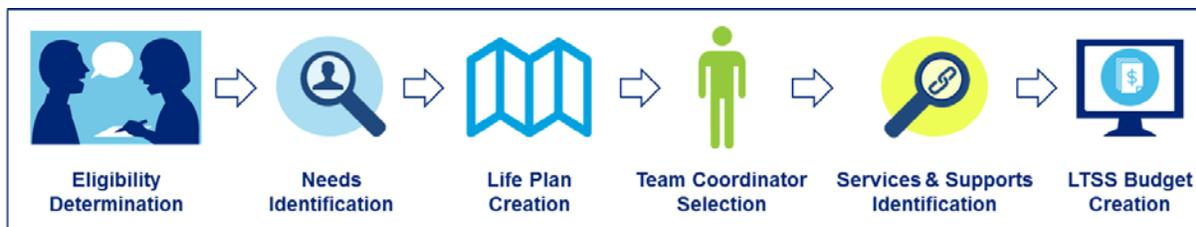
While we have defined our approach for expanding eligibility to these two populations, we also recognize the opportunities to engage other transitional populations. As we move into testing and implementing this model, we plan to explore the inclusion of other transition populations that would benefit from this level of coordination, including youths transitioning out of the school system, and individuals transitioning out of correctional facilities.

Equalization of Available LTSS Services

Another important element of our strategy to improve access to needed services is our plan to provide individuals access to the full range of LTSS regardless of the what LTSS waiver program or LTSS State Plan service they are determined eligible for. Our primary principle is to maintain flexibility to meet the individual’s needs, with the long term goal of creating access to the most comprehensive set of approved services across all populations. To do so, we plan to conduct research and outreach into other states’ approaches, including the consolidation of existing waivers into a single waiver and develop an approach that can be implemented in conjunction with Step 2 of the State’s care management program.

Life Plan Creation

As part of the previously described eligibility assessment process, the individual and/or family will benefit from the creation of a multi-systemic Life Plan. The Life Plan will be created with the staff of the various agencies through which the individual enters in New Hampshire’s “no wrong door” process for eligibility determination. The nature and scope of this Life Plan will vary depending on each individual’s needs. The graphic below illustrates where Life Plan creation occurs in relation to the larger process.



During this phase, individuals and/or families will work with staff at the agency or entity that they are entering the LTSS system through to identify values and needed supports to promote independence, better health, responsibility, and vitality. Potential services and supports from all payor sources contributing to

this model will be identified, and services and supports that are not currently covered by any payor will also be included in the individual's Life Plan.

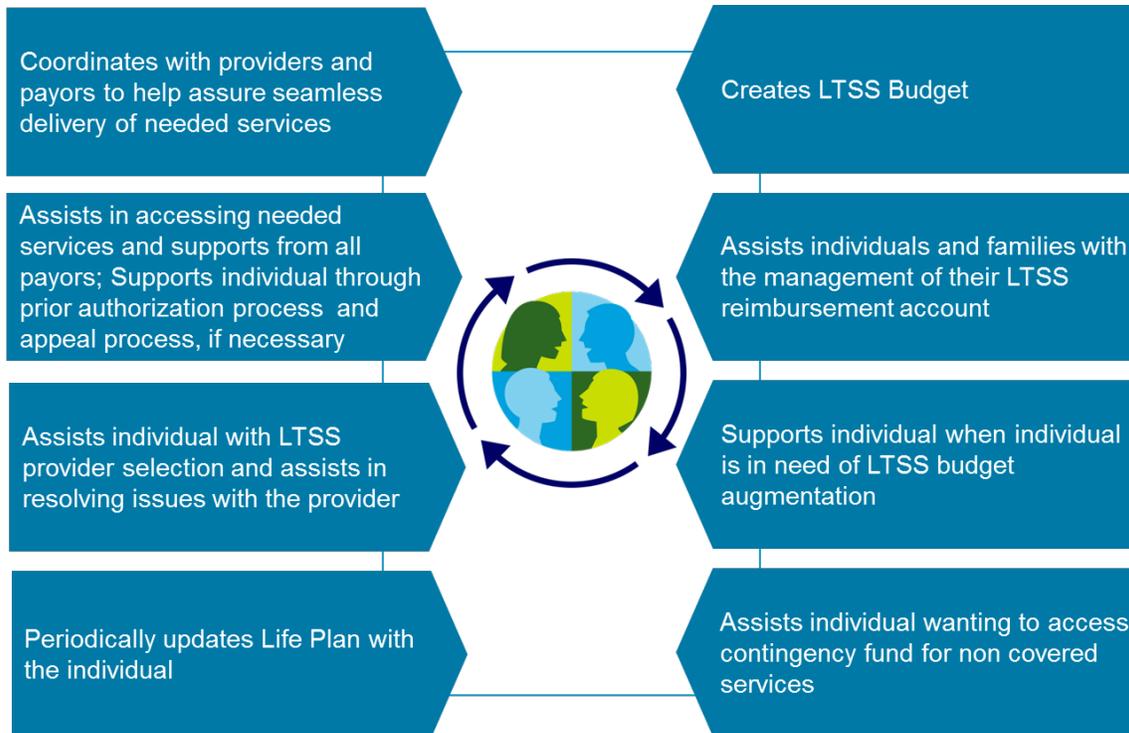
Once the Life Plan is created, it will be used to inform the creation of the LTSS budget, as described in a future section. The Life Plan will be periodically updated to reflect any changes in an individual's circumstance or necessary services and supports.

Team Coordinator Selection

Eligible individuals can select an individual who will assume a set of team coordination functions ("Team Coordinator") upon the creation of their Life Plan. The entity responsible for eligibility determination and creation of the Life Plan will utilize an established set of criteria to determine the need and/or eligibility for the Team Coordinator function. Selection of a Team Coordinator who is already part of the individual's Life Plan will be encouraged to minimize duplication or additional layering. Guidance will be developed to determine the most appropriate Team Coordinator for an individual to select, based upon their needs and the care team with which they coordinate. The criteria for determining if an individual will receive a Team Coordinator will be developed through an ongoing stakeholder engagement and consensus process. We have, however, developed a set of core principles that will inform the development of specific criteria for team coordination eligibility. The following principles help to identify those individuals who would benefit most from receiving this level of enhanced support:

1. Meets the needs of individuals whose needs are multi-systemic and require enhanced cross-coordination of care
2. Meets the needs of individuals that are *transitional* in nature, e.g. new to the system, and therefore may be uninformed and/or unsure of all options for obtaining LTSS
3. Meets the needs of individuals that are *transactional* in nature and who require this function for a specific purpose only, e.g. initial, temporary coaching on how to manage an LTSS budget

The Team Coordinator is an individual who will assume additional functions beyond his or her current role or responsibility relating to the individual. We envision that in most cases the person performing team coordination functions is not another staff person involved in the cost of care and support for the individual, but rather is already engaged or is planned to be engaged in the meeting the needs of the individual and has been trained to perform multiple coordination functions in collaboration with the individual. The graphic below lists the specific Team Coordinator functions.



It is also important to recognize that an individual may decline to have someone serve as a Team Coordinator. If an individual does decide to decline a Team Coordinator, all currently existing systems of care coordination in which they operate will still remain intact. Should they decide to select a Team Coordinator, however, they can select anyone who has been trained as a Team Coordinator to perform this function. An individual cannot, however, select themselves as their own Team Coordinator and receive compensation for performing Team Coordinator functions.

In order to perform the Team Coordinator function, one must complete a training program, as well as recertification programs on a regular basis. The intent of this training program and subsequent recertification programs will be to provide the individual performing the Team Coordinator function with a general understanding and awareness of the systems and programs in place. It is important to recognize that this individual will not be trained to a subject matter expert level, but rather to the necessary level to perform the eight functions outlined in the graphic above.

Individuals performing Team Coordinator functions will be evaluated on annual basis. The primary measure used to evaluate Team Coordinator effectiveness will be the Team Coordinator’s ability to help the individual address the needs and goals identified in the individual’s Life Plan. To supplement this primary measure, the State and its stakeholders have identified the following areas in which Team Coordinators may be evaluated within this measure, if applicable to the individual:

1. Increasing the utilization of medically necessary services and supports
2. Customer satisfaction of the individual for whom they coordinate care
3. Facilitating and monitoring the individual's activity against their annual budget
4. Ability to identify relevant public health prevention programs
5. Ability to identify relevant mental health programs
6. Ability to identify and increase utilization of necessary substance use disorders (SUD) treatment
7. Ability to identify employment opportunities, if included as an objective of the Life Plan
8. Ability to identify opportunities for isolated individuals to establish and maintain a connection with their community

The Team Coordinator function is a compensated function which is funded by all payors participating in the LTSS initiative. This compensation falls outside of the individual's LTSS budget. While the specific payment methodologies for compensating the team coordination are still to be developed, we have developed the following set of principles that will be used to inform the development of these methodologies:

1. The Team Coordinator function is an additional cost, and is not to take away funding for other care coordination/case management activities
2. The payment structure must take into consideration the fragility of the LTSS system
3. Reimbursement must be related to the time, effort, and level of service being provided
4. Payment must be predictable, dependable, and administratively simple

It is important to recognize that this designation of the Team Coordinator function, as well as every element of this State Health Care Innovation Plan, have been designed and will be implemented to meet CMS requirements for conflict free case management.

Health Home Selection

It is the State's intention to deploy a statewide Health Home model during Step 2 of its care management program. The Health Home care model is envisioned to meet the complex medical and non-medical needs of some of New Hampshire's most vulnerable citizens. It is anticipated that the State will complete its design of its Health Home program by the beginning of Step 2 implementation. The State will work with commercial insurers and other payors to adopt this Health Home model for their enrollees.

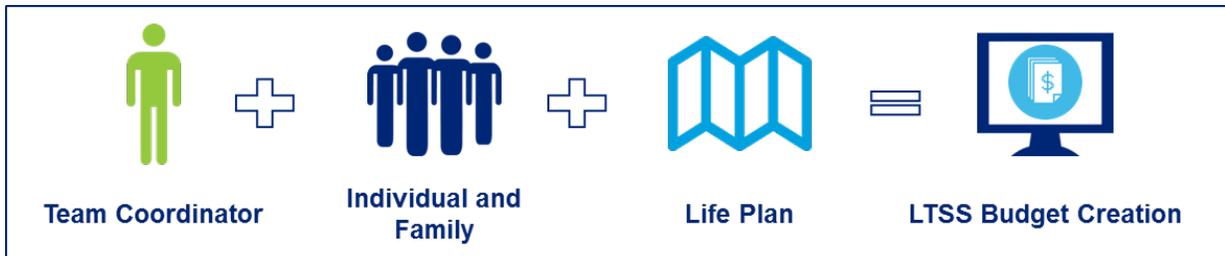
It is the State's intention to expand the definition of a Health Home to include individuals who have LTSS needs as well as a behavioral health comorbidity and a physical health comorbidity. The individual will be given the opportunity to select a Health Home provider. Health Home providers will deliver in-

person services and face-to-face coordination while maintaining medical, behavioral health, and LTSS networks that meet the diverse needs of the target Health Home population. The Health Home provider will be a physical, behavioral health, or LTSS provider.

For the purpose of the SIM initiative, the Health Home provider will also perform the team coordination function for the enrolled individual. Enhanced compensation for the Health Home provider, that will be performing an enhanced, specialized team coordination role, will be paid exclusively by the individual’s primary health insurer and would not be deducted from the individual’s LTSS budget. The State will work with commercial insurers and other payors to prioritize adoption of consumer-friendly Health Homes for people with the greatest need for coordinated care.

LTSS Budget Creation

The Team Coordinator, working with the individual and with assistance from providers and, where appropriate, the individual’s MCO, will create a proposed annual LTSS budget based on the LTSS needs derived from the individual’s Life Plan. If an individual chooses to decline team coordination, then the person and/or entity who creates the individual’s Life Plan will assume responsibility for creating their LTSS budget. This process is outlined in graphic form below.



An LTSS budget is based on services and supports that meet the needs of the individuals, as outlined in the individual’s Life Plan. The specific pricing model for these services and supports to be used in the creation of an LTSS budget will be developed by the State, and through an ongoing stakeholder engagement and consensus process. We have identified the following set of principles with respect to pricing LTSS:

1. Reflects the need for access within the delivery system
2. Reflects a standardized budget methodology across all populations
3. Takes into account circumstances of the individual and allows for individualization
4. Considers cost of services and supports

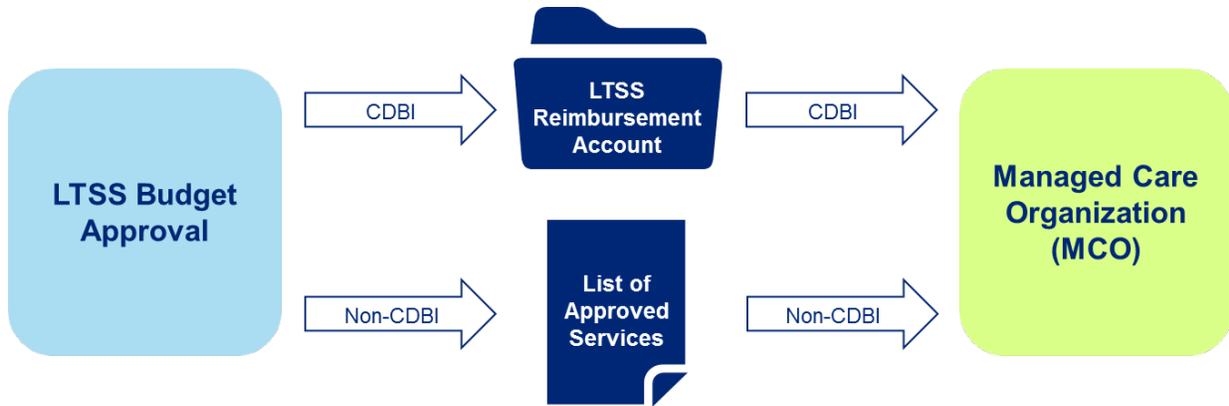
In the case where an individual does not have a Team Coordinator, the person and/or entity that takes this individual through the eligibility “door” of the system and creates their multi-systemic Life Plan will also create their proposed LTSS budget. This person will be provided with the necessary training and support to do so.

Once the LTSS budget is created it will follow a defined path for budget approval. Through significant stakeholder discussion, review, and consensus, we have developed an approach for budget approval. In this approach, once the individual’s Team Coordinator, or the person and/or entity that creates the individual’s Life Plan, creates the LTSS budget, they will submit the budget to the individual’s MCO. The MCO will review and subsequently recommend the LTSS budget to DHHS, and DHHS will make the final budget decision. Once a decision is reached, DHHS sends a determination to the individual and to the MCO. Should an individual wish to dispute any determinations within their LTSS budget, the individual can appeal through DHHS’ Fair Hearings and Appeals process. This approach was chosen to balance the need of the MCOs, who are assuming the financial risk of LTSS costs, to influence the approval of the budget, while at the same time providing the individuals with an ability to appeal adverse decisions directly to DHHS, since DHSS will be the ultimate decision maker. The flow of this approach is demonstrated in graphic form below:



As part of the budget approval process, we plan to assess who is eligible to manage their own consumer-directed LTSS budget. For those who do not move into the consumer-directed budget initiative, the budget approval process will not differ from the current model. In this case, once the individual’s LTSS budget is created and approved, the budget information will be sent to the individual’s MCO as a list of approved services.

For those individuals who choose to manage their own LTSS budget, the budget approval process will result in the creation of an LTSS Reimbursement Account, which is outlined in more detail in the next section. The criteria for determining who will manage their own LTSS budget is not yet determined, and will be developed through an ongoing stakeholder engagement and consensus process. The graphic below illustrates these two paths for accessing LTSS services.



In order to support the State’s objective of encouraging the expansion of the use of consumer-directed budgets, it is anticipated that the MCOs will be measured and incented to promote increased adoption of consumer-directed budgets through their contracts with the State.

We recognize that not all individuals will opt into or qualify for this initiative. For those individuals who do not opt into or qualify for a consumer-directed budget, it is important to recognize that the current system in which they receive LTSS will remain in place and they will also benefit from several components of the new SIM related initiatives. The side-by-side comparison below helps to show the differences between the model for individuals who choose to direct their own budget and individuals who do not.

Individuals participating in CDBI	Individuals not participating in CDBI
<ul style="list-style-type: none"> • Have a Life Plan created • Can select a Team Coordinator • Have an LTSS Reimbursement Account created • Can use budget to pay for non-traditional services • Have the opportunity to receive rewards and/or incentive payments • Have the ability to “shop” for providers based upon price for and quality of services • Have the ability to recruit, select, and set wage, duties, and schedules for the individual(s) they would like to have provide their supports • May retain a portion of savings from year-to-year 	<ul style="list-style-type: none"> • Have a Life Plan created • Can select a Team Coordinator • Have a list of payor-authorized/approved services created • Must utilize payor-authorized/approved set of services • Have the opportunity to receive rewards and/or incentive payments • Will not be able to select providers by price • Surpluses from anticipated spending authorizations will not be retained

The option to participate in the consumer-directed budget initiative will be rolled out in a phased manner. Roll out to new populations will occur after an outreach, education, and training program is conducted. Those individuals who are already using consumer-directed budgets, however, will continue to do so within this model with the addition of the features of the LTSS Reimbursement Account as described below.

LTSS Reimbursement Account Creation and Operation

Currently, there are approximately 1000 individuals within the State system who are managing their own consumer-directed LTSS budget. These individuals are primarily part of the State's Developmentally Disabled or In-Home Support waivers, and are part of an Agency with Choice Model with employer of record and fiscal services. This model helps to assure participants continue to have choice and control over their services. The goal of the LTSS Reimbursement Account initiative is to significantly increase the number of individuals directing their own budget, and to do so across all waiver populations. We recognize that accomplishing this goal will require significant training and support provided to the individual, as this is a new concept to many and one that requires an enhanced level of support.

For individuals that do elect to participate in the consumer-directed budget initiative, they will manage their LTSS budget through an LTSS Reimbursement Account. This will allow individuals to track their expenditures, as well as earn and receive access to rewards and incentives.

Each MCO, or agency to which the MCO delegates authority, will administer the individual's LTSS Reimbursement Account and provide web based tools for the individual to manage their account. This initiative will allow MCOs and/or delegated agencies to do the following:

1. Track expenditures and flag projected year-end overruns
2. Pay claims on behalf of the individual
3. Make contributions to the account when rewards/ incentives are earned

The individual's Team Coordinator (if applicable) is available to support the individual in selecting LTSS providers. When available, provider pricing and quality information will be provided to the individual. Individuals will also be allowed to manage their budget and access services not used in the development of their LTSS budget, including non-traditional services and supports. These non-traditional services and supports could include things like transportation to non-covered services and activities, and home improvements that improve quality of life.

As shown in the side-by-side comparison above, only individuals who opt into an LTSS Reimbursement Account may use their budget funds to pay for non-traditional services. MCOs will be responsible for

providing pricing information for these non-traditional LTSS services that the individual chooses. While the premise behind this opportunity is to allow for individual choice, we also recognize that a form of accountability for these non-traditional providers and supplies will need to be in place within the MCOs. To provide for this balance without imposing a barrier, the State and its stakeholders have developed a principle that will be used in developing this type of safeguard:

- The MCO must ensure that an individual can use their LTSS Reimbursement Account to fund the non-traditional services of their choice, while providing the opportunity for the MCO, or agency in which the MCO delegates authority, to find an appropriate source for that service

In addition to the use of non-traditional services, rewards and incentives will be provided to augment budget amounts. This incentive program will be offered to both individuals who opt into a consumer-directed budget and individuals who do not and instead use a list of payor-authorized/approved services. The goal of this rewards and incentives program is to enhance individual behavior as it relates to health and wellness. It is important to recognize that this differs from use of non-traditional services, which will only be made available to individuals using a consumer-directed budget.

Through our stakeholder engagement process and research into lessons learned from a CMS-funded Healthy Choices-Healthy Changes (HCHC) program in the State, we have developed a list a potential incentives that this program would include. HCHC is an innovative wellness program that provides individuals with various types of support in the areas of health, exercise, and nutrition¹⁷. New Hampshire is 1 of only 10 programs funded by CMS nationwide. In considering the types of activities and supports available through this program, we have developed the list below which combines clinical health and social health concepts that may be used to inform the development of the rewards and incentives program for the LTSS population:

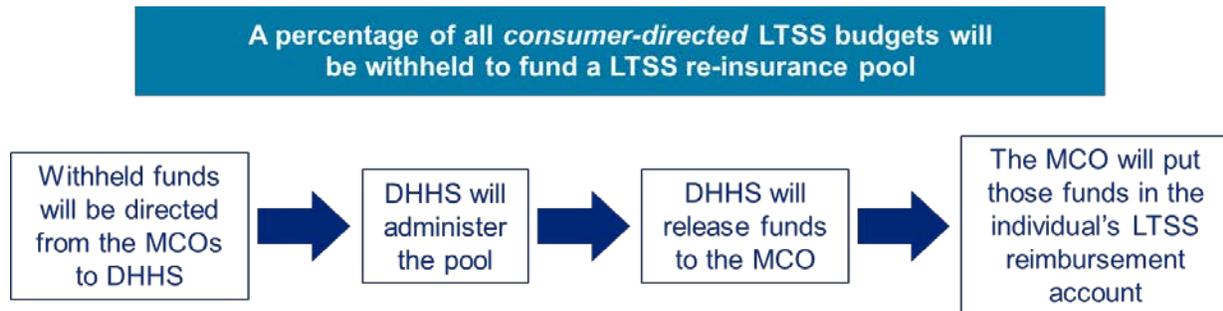
1. Completion of public health and/or prevention programs, e.g. smoking cessation
2. Completion of nutritional programs
3. Utilization of wellness and/or exercise-based programs
4. Medication adherence
5. Volunteerism
6. Participation in day programs
7. Employment seeking efforts and/or entrepreneurship
8. Community-based, socialization activities
9. Continuing education programs

¹⁷ [The New Hampshire Medicaid Healthy Choices-Healthy Changes](#)

- 10. Life skills and/or organization training
- 11. Completing a safety evaluation and/or environment assessment

Once the consumer-directed budget is created, the Team Coordinator, or if there is no Team Coordinator, the individual’s MCO or designee, will help monitor the individual’s expenditures against their annual budget and flag any anticipated overruns. Should the individual expend their budget prior to receiving necessary services and supports, there will be a process in place for potentially adding funds to their LTSS Reimbursement Account. A reassessment of the individual’s budget will be triggered if the individual’s LTSS Reimbursement Account runs out of money. A significant change in the individual’s health or functional status will also trigger a reassessment of their consumer-directed budget.

DHHS will be responsible for the reassessment with input from the individual and family, the Team Coordinator, providers, and the MCOs. If warranted, DHHS will transfer funds from the previously mentioned reinsurance pool to the MCO to augment the individual’s account. Should an increase in an individual’s budget not be realized, individuals will have the right to appeal reassessment decisions. This reinsurance pool operation is further displayed in the graphic below:



In the opposite scenario, should an individual have a budget surplus at the end of twelve months, the surplus will be split between the payor and the individual. The individual’s portion of the surplus will be allowed to be carried forward to the next year’s budget, however rolled over surpluses are not considered when establishing the next year’s annual budget.

Supporting Strategies

In addition to the Prevention, Transition and Person Centered and Driven LTSS Initiative presented above, this model design contains a set of supporting strategies that necessary to reach the Triple Aim of better health, better care, and reduced costs for New Hampshire residents. Each of the support strategies outlined below work to enhance and improve upon the other initiatives that form this plan.

Public Health

As noted in the Introduction, DHHS recently released a State Health Improvement Plan that introduces priorities and objectives that are intended to provide support, guidance, and focus for public health activities throughout the State¹⁸. As the initiatives outlined in this plan have a prevention focus for individuals receiving LTSS, it is important to recognize how they align with the public health goals in the State. The table below outlines each focus area included in the State Health Improvement Plan and its intended objectives. We then describe our approach to maintaining alignment with these important objectives.

Public Health Focus Area	Program Objectives
Tobacco	Reduce adult cigarette smoking, the initiation of tobacco use in children, tobacco use by adolescents, smoking during pregnancy, and exposure to indoor tobacco use
Obesity/Diabetes	Reduce adult and childhood obesity; decrease emergency department visits and hospitalizations for diabetes
Heart Disease and Stroke	Reduce high blood pressure and cholesterol in adults, and death from coronary heart disease and/or stroke
Healthy Mothers and Babies	Reduce preterm births, unintended teen births, and children dental caries; increase screening for Autism Spectrum Disorder (ASD) and other developmental delays
Cancer Prevention	Increase colorectal cancer screening and mammogram screening for breast cancer; reduce melanoma and lung cancer deaths
Asthma	Increase asthma control in adults and children
Injury Prevention	Reduce unintentional poisoning deaths, falls-related deaths in older adults, motor vehicle crash injuries in teens, suicide deaths for all persons, and suicide attempts by adolescents
Infectious Disease	Increase childhood vaccinations, timeliness of foodborne illness investigations, and seasonal influenza vaccinations; reduce health care associated infections, and enhance food safety
Emergency Preparedness	Increase community engagement in public health emergency activities and the State’s ability to dispense emergency counter-measures to the public; strengthen the capacity to respond to public health emergencies in a timely manner and the capacity to maintain situational awareness of health threats
Misuse of Alcohol and Drugs	Reduce binge drinking, marijuana use in youth, the non-medical use of pain relievers, and drug-related overdose deaths

¹⁸ <http://www.dhhs.nh.gov/dphs/documents/nhship2013-2020.pdf>

As part of our design work, we have begun to identify strategies for encouraging individuals with LTSS participation toward these public health goals. In order to create alignment with these objectives and subsequent programs, we first identified the current barriers within the LTSS population to access public health programs offered or funded by the State. Stakeholder workgroups identified transportation and awareness of available programs as primary barriers to these programs, and have started the process to develop solutions to bridge these gaps.

For example, we envision that the LTSS Reimbursement Account, as outlined above, could be used to fund this type of transportation necessary for individuals to participate in these programs. Another concept under discussion is to incorporate incentives and rewards for participation in public health initiatives in the design of the LTSS Reimbursement Accounts.

We also plan to document possible utilization of public health programs during Life Plan Creation. In addition, the Team Coordinator function within this model can be used to help individuals receiving LTSS enroll and participate in public health programs that not only focus on disease prevention and self-management, but also on increasing vitality and way of life. In order to support the use of these public health programs, we plan to include a public health awareness component in the Team Coordinator training certification program. We also plan to incorporate the facilitation of participation in these programs as a measurable aspect of the Team Coordinator function, and one that contributes to bettering the health of the individual they support.

While this function helps the LTSS population and individuals participating in this model design, we also recognize how this connection can impact the broader population and success of these programs as well. For the majority of the programs outlined in the State Health Improvement Plan, individuals receiving LTSS are not targeted populations for strategic communications or enrollment. Along with the inclusion of substance misuse in the Team Coordinator initiative, we see the value-add of increased participation from a new subset of the population. This increased enrollment can add to the success and ultimate evaluation of the public health programs the State is focused on expanding.

This alignment not only supports the success of these public health initiatives and statewide goals, but it also works toward the long term goal of prevention that is present in this plan and its model. There is the opportunity to ultimately reduce the need for LTSS within this population, and future populations, by promoting these public health programs and using this model to help facilitate their success.

We also recognize the opportunity to work alongside the Department's Division of Public Health Services in its effort to address the following three core measurable areas, as prescribed by CMS and the Centers for Disease Control and Prevention (CDC):

1. Tobacco use
2. Obesity
3. Diabetes

In providing state-level and county-level population health data to the State, CMS and CDC is helping to guide New Hampshire in its population-wide health initiatives, which can be further supported through this model as described above. We plan to access and report on these data in collaboration with the Department's Division of Public Health Services, to help improve the health of the entire state, and not just the health of those covered within this model.

Substance Misuse

In addition to the alignment between this plan and the State Health Improvement Plan, we also recognize the opportunity to address substance misuse needs within this population, and services and supports not currently Medicaid-covered, but planned under a future statewide benefit. With the baseline in this area being the lack of treatment for non-able bodied individuals and the lack of enough treatment options for the population as a whole, we recognize the room for innovation. Specifically, we plan to use this model as a means for incentivizing the provision of certain types of substance use disorders (SUD) treatment, as well as adding a broader array of this targeted care into the Life Plan itself. We recognize that incorporating screening for SUDs during the initial assessment phase for each of these populations (developmentally disabled, elderly, and behavioral health) is an important step to inform the individual's Life Plan creation and its periodic updates.

Along with the inclusion of SUD treatment in the Life Plan, we also recognize the role of the Team Coordinator in this area. Specifically, we have identified a role for SUD treatment in both the training and evaluation components of the Team Coordinator function. First, we plan to include a substance misuse awareness component in the training certification program for the Team Coordinator, in order to provide the knowledge necessary to complete assessment screening and include treatment plans within an individual's Life Plan. Second, we plan to include a measure within the evaluation of Team Coordinator effectiveness that focuses on the utilization of available substance misuse services.

The final identified area of alignment between substance misuse and this model relates to the reinvestment of savings within the system. The concept of a contingency pool funded by the reinvestment

of a percentage of funds saved from the system will be reviewed in greater detail below. However, a key function of this contingency pool will be to provide coverage for non-traditional services to the individuals who participate in the consumer-directed budget initiative. In exploring the role of substance misuse within this model, we recognize the potential opportunity to include non-traditional services relating to SUD treatment within this contingency pool.

Health Information Technology

We recognize that investments in Health Information Technology (HIT) infrastructure are critical to the long term success of the SIM initiatives. There are numerous current HIT challenges that could limit the robustness of the SIM initiatives; however, the HIT/IT stakeholder workgroup has worked to develop a long term approach to develop an enhanced system that promotes coordination and allows individuals to have more control over the services that they need. This approach consists of establishing a set of HIT priorities and a list of relevant stakeholders that would benefit from HIT investments, as well as the concept to build a robust, database-driven, web-based system to support the SIM initiatives.

Currently, the HIT infrastructure varies widely across LTSS providers and, in most cases, is in need of upgrading or replacing. Little clinical data is now being shared between or with LTSS providers electronically, and current platforms may not be able to accept and transfer clinical data. In order to address each of these gaps, we have developed a plan for building and implementing a new database-driven system to support the roll out of the SIM initiatives in which we have agreed should be technology enabled: Life Plan creation, activity and update monitoring, and LTSS budget sharing.

Our proposed plan to develop a robust, database-driven, web-based system to support these steps works toward a set of priorities defined by the HIT/IT stakeholder workgroup. These priorities are as follows:

1. Receive and transmit Life Plan
2. Receive and transmit activity and updates
3. Receive and transmit LTSS budgets
4. Receive and transmit health outcomes data
5. Provide consumer access via a web portal

As it relates to this identified set of priorities, we have also developed a list of stakeholders whose technology and or access to technology will need to be enhanced to address these priorities:

1. Consumers
2. State system(s)
3. Provider system(s)

4. Agency system(s)
5. Managed Care Organizations (MCOs)

Alongside the development of this system, we recognize the need for a robust privacy and security framework with respect to the permissions within this system. To maintain compliance with electronic health record transaction standards, as outlined in the Health Insurance Portability and Accountability Act (HIPAA), we plan to develop an extensive set of permissions that will be applied to each stakeholder group and reflect their capacity to access individual consumer data. We propose to base system permissions for each stakeholder on the individual’s comfort level in relation to sharing their Life Plan and subsequent activity data. The graphic below visualizes our proposed database-drive, web-based system for receiving, transmitting, and storing the key aspects of the SIM initiatives, and where these permissions may be applied.



In addition to the above stakeholders, the New Hampshire Health Information Organization (NHHIO) is leading health information exchange (HIE) efforts in New Hampshire. We recognize the opportunity to use the SIM initiatives as a means to expand the use of HIE in the State. However, under current statute granting NHHIO its authority, LTSS providers are limited in their access and therefore use of the HIE to exchange patient data¹⁹. We recommend amending this legislation to identify LTSS providers as eligible participants in the HIE, and therefore enhance the level of care coordination between these providers in their siloed systems.

Training Supports

In order to implement these initiatives successfully, we recognize the need for training supports and tools on a variety of different levels. It has become increasingly clear through our consumer outreach that

¹⁹ [Chapter 332:I Medical Records, Patient Information, and The Health Information Organization Corporation](#)

stronger education and outreach tools, as well as programs to promote the awareness of the availability of LTSS, would be beneficial within this model. Working in conjunction with the Balancing Incentives Program (BIP), we plan to develop several training programs and on-demand tools to provide the individuals participating in these initiatives with the knowledge and support they need.

Specifically, we plan to develop the following training programs that span across the modeled initiatives:

1. An LTSS CME program for PCPs who want to raise their awareness of the needs of their LTSS patients
2. A training program for individuals, providers, and entities serving as an individual's Team Coordinator
3. A care coordination training program for all providers serving individuals receiving LTSS
4. Training programs for direct care workers and other LTSS providers, including dentists, pharmacists, and behavioral health providers
5. Training programs for consumers and providers on consumer-directed budgets and services

In addition to training programs for both providers and individuals and families, we recognize the need to address direct support worker training and retention needs within this model. This need has been identified by Stakeholders, but also by consumers as described in the Consumer Education and Outreach section of this plan, beginning on page 19. While we plan to incorporate direct support worker training and retention support into this model, it is important to recognize that efforts to address this concern are underway in the State. In 2008, the New Hampshire Department of Health and Human Services, New Hampshire Hospital Bureau of Behavioral Health, and The Community Behavioral Health Association developed and released a ten-year plan titled *Addressing the Critical Mental Health Needs of NH's Citizens*²⁰. This plan specifically identified the need to address staff training and retention. This year, the State began to implement system improvements through the allocation of approximately \$28 million new dollars to mental health, and is working to meet the needs that both Stakeholders and consumers have identified as essential.

Other Payment Methodologies

We are also exploring the development of additional payment methodologies that focus in three specific areas:

1. Payment methodologies that will encourage the use of telemedicine, in home monitoring technologies, and other assisted technologies

²⁰ <http://www.dhhs.nh.gov/dcbcs/bbh/documents/restoration.pdf>

2. An incentive/risk arrangement with residential facilities, community residencies, and nursing homes focused on reducing hospital admissions and re-admissions of their residents that coincides with the CMS Dual Eligible Financial Alignment Demonstration Project
3. An incentive/risk arrangement with community mental health centers focused on managing the need for New Hampshire Hospital admissions and re-admissions that coincides with the second year of Step 2 of the care management program.

If realized, these proposed payment methodologies will be developed through an ongoing stakeholder engagement and consensus process prior to adoption.

Legal, Regulatory, and Legislative Authority

We recognize that in order to implement the initiatives proposed in this model design, and pursue waiver equalization, significant legal, regulatory, and legislative authority will be needed. To identify the types of authority and/or changes that would be required for each initiative, the Legal and Regulatory stakeholder workgroup completed the matrix below. This matrix identifies all possible options for each of the SIM initiatives; however, we recognize that each selected change may not be necessary pending the completion of another. DHHS’ intent is to work closely with State Legislature to make the initiatives set forth in this plan possible and successful within the State.

Initiative	Rule Change	Statute Change	MCO Contract Change	State Plan Amendment	Waiver Authority
Risk and Prevention Based LTSS Eligibility	X	X		X	X
Life Plan Planning and Creation	X		X		
Multi-Payor Team Coordinator Payments (<i>currently eligible</i>)	X	X			
Multi-Payor Team Coordinator Payments (<i>not currently eligible</i>)	X	X			X
Multi-Payor Health Homes	X	X	X	X	X
Expanded Consumer Directed Care Budgeting	X		X		X

Provider Quality and Price Transparency	X		X	X	X
Global Triple Aim Incentive Pool	X	X	X		X
Reinsurance Pool Operationalization	X		X	X	X
Medical Necessity Criteria for Individuals who Receive LTSS	X	X	X	X	
Nursing Home/Hospital Re-Admission Incentive Program	X		X	X	X
New Hampshire Hospital Admission Incentive Program	X		X	X	X
Expanded Availability of LTSS-type Services Across all Waivers	X		X	X	X
Health Information Technology Initiatives	X	X			
Substance Use Disorder Benefit			X	X	X

Global Triple Aim Incentive Pool Initiative

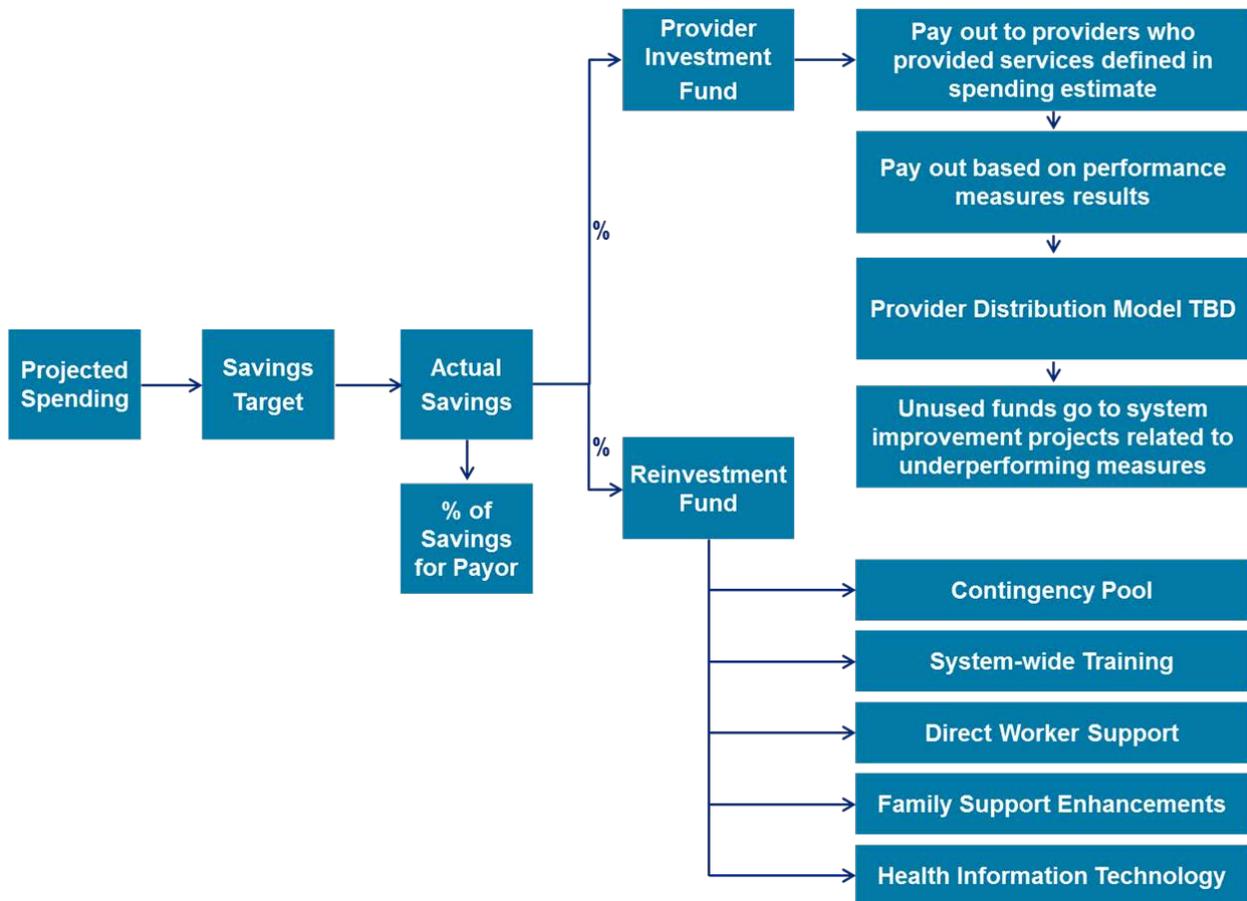
In addition to the set of initiatives and supporting strategies included within this design, we also plan to operate an incentive pool that works toward meeting the Triple Aim of better health, better care, and reduced costs for New Hampshire residents. We have established a step-by-step process for developing and operationalizing this Triple Aim Incentive Pool.

Each year spending will be projected for all medical, behavioral, and LTSS costs for individuals receiving LTSS. Based upon this amount, a savings target will be established as a percent of the spending projection, and this projection will be reconciled with assumptions in the State’s budget. At the end of the year, savings are calculated by subtracting the actual costs from the projected costs. These actual savings reflect savings within the system, and are exclusive of the individual’s actual savings within their LTSS Reimbursement Accounts. In this model, we recognize that a decision will need to be made as to whether incentives will be paid out if actual savings do not equal or exceed the savings target.

If savings do result in a payout, savings would be distributed three ways: to the payors, to the providers, and to various reinvestment initiatives. Provider incentives would be paid if global quality and performance measures are met. These measures will reflect overall system performance, e.g. decreased preventable admissions to hospitals for all individuals utilizing LTSS, and not individual provider performance.

We recognize that how these reinvestment funds are allocated and spent is an important factor and this determination process will therefore need to be further developed through an ongoing stakeholder engagement and consensus process. The current thinking of the stakeholder group about the focus of the reinvestment strategies is described in the Reinvestment Fund section below.

The graphic below presents a comprehensive view of the process flow for the Global Triple Aim Incentive Pool described above.



Provider Investment Fund

As shown above, a portion of the actual savings within the system will be allocated to a provider reinvestment fund. The distribution model for these provider payouts will be developed in conjunction with the State and its stakeholders. Our provider investment strategy will focus on rewarding providers based on the performance of the various delivery systems to improve outcomes for individuals receiving LTSS as opposed to individual provider performance. Performance will be measured using a set of six defined, agreed upon performance measures. We have established three requirements for the selection of provider incentive measures:

1. They must be valid and reliable
2. They should measure impact in a short time frame
3. They should reflect the relevant guiding principles of the program
 - a. Person and/or family should be informed and empowered
 - b. Providers and payors should collaborate
 - c. Services should be affordable and efficient

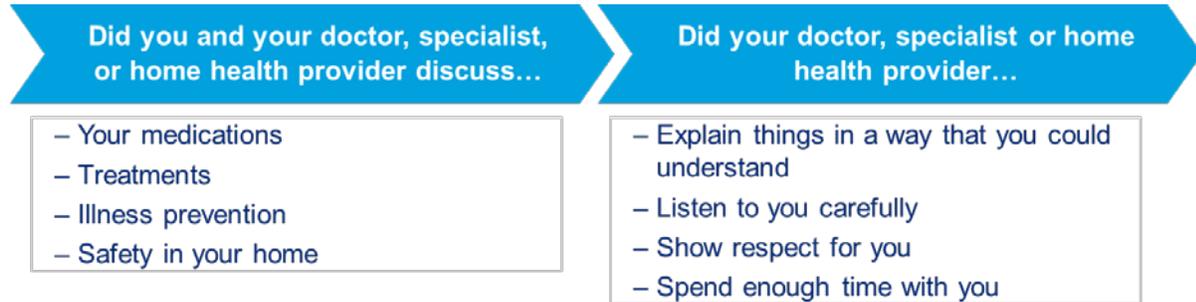
In order meet each of these requirements in the development of provider incentive measures, we have decided to focus initially on six reliable, vetted measures that have been used on the national scale. Our proposed combination of performance measures is as follows:

1. Two clinical health measures from The Healthcare Effectiveness Data and Information Set (HEDIS)
2. Two consumer satisfaction measures from the Consumer Assessment of Healthcare Providers and Systems (CAHPS)
3. Two measures from the set of National Core Indicators (NCI)

HEDIS is a tool used by more than 90% of America's health plans to measure performance on important dimensions of care and service, and consists of 75 measures across 8 domains of care²¹. By establishing HEDIS as a baseline for our provider incentive measures, we plan to evaluate collaboration and efficiency in two tangible areas. While these measurable clinical health areas have not yet been selected, proposed examples may be: 30 day readmission to hospitals, preventable admissions to hospitals, transition records transmitted to health care professionals, and annual flu shots for adults.

²¹ <http://www.ncqa.org/HEDISQualityMeasurement.aspx>

Along with HEDIS measures, we also plan to utilize CAHPS and/or Home Health Care CAHPS survey questions²². To measure patient engagement, which is a key component to this overall model design, we plan to use two CAHPS and/or Home Health Care CAHPS questions geared toward measuring person and/or family participation and education. The graphic below outlines two potential measures we plan to use to yield results that reflect patient engagement.



Last, we plan to select two measures from the NCI. These core indicators are standard measures used across states to assess the outcomes of services provided to individuals and families²³. The NCI have proven to be successful forms of measurement within the developmentally disabled system in the State, and we recognize the opportunity to leverage this existing work and apply it to the broader LTSS population.

Reinvestment Fund

In addition to the provider investment fund, we plan to reinvest a portion of the actual savings within the system back into the system itself. This reinvestment fund will play a key role in the sustainability of the model as whole. As noted in the introduction to the Global Triple Aim Incentive Pool, how these reinvestment funds are allocated and spent is being determined through an ongoing stakeholder engagement and consensus process. However, stakeholders to date have identified five potential high-priority reinvestment areas in which these funds may be allocated and spent:

1. Contingency Pool
2. System-wide Training
3. Direct Worker Training and Retention Support
4. Family Support Enhancements
5. Health Information Technology

²² <https://cahps.ahrq.gov/>

²³ <http://www.nationalcoreindicators.org/>

These five reinvestment areas can be further broken down into two categories: providing new support opportunities for the individual, and providing overall improvements to the system. The contingency pool, for example, could be used by the State to fund non-traditional services that are not typically covered for those participating in the consumer-directed budget initiative. Examples of these services include transportation to public health-sponsored programs or events, coverage of non-traditional substance use disorders (SUD) treatment, adult dental services, and the purchase of in-home supports geared toward meeting individual needs. The contingency pool's primary objective would be to provide new supports to the individual through funding of these types of services.

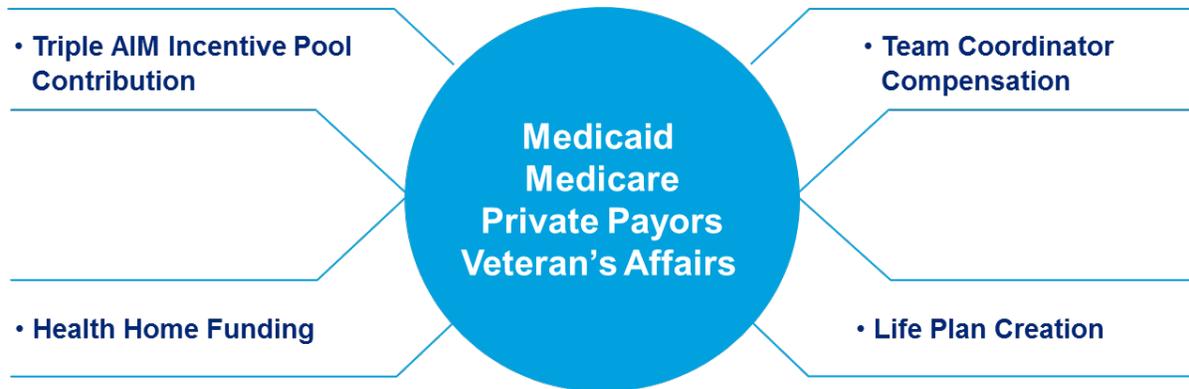
The additional four reinvestment areas focus on providing overall improvements to the system. System-wide training, for example could be used to strengthen the current workforce in identified areas of development and/or knowledge building. Similarly, direct worker training and retention support and family support enhancements could be used to provide additional funding to supports already in place, and also potentially new support initiatives. In addition to providing additional funding to these three programs, we plan to use this pool of reinvestment funding to support ongoing development of an HIT infrastructure in the State that supports the implementation of this model. We envision that this additional funding source will provide the State with means to maintain and upgrade the systems necessary to successfully drive this program.

While stakeholders have identified these five specific areas to date, we are not limiting the reinvestment fund to these areas, and we plan to further explore other relevant programs as we conceptualize this plan.

Multi-Payor Strategies

While Medicaid is the predominate payor for LTSS in New Hampshire, we have identified numerous intersection points within the various initiatives that could allow for a broad set of payors to participate. We have begun the process of engaging these potential participants, including both private payors and Veteran's Affairs (VA). Given that the majority of individuals receiving LTSS are dual eligibles, as part of our multi-payor strategy we will also pursue with CMS participation in a Dual Eligible Financial Alignment Demonstration Project.

In addition to engaging with potential payors about SIM, we have identified several steps within this model that will benefit from multi-payor participation and increased sustainability. The four steps, as displayed in the graphic below, represent both the provider and individual levels included within the model.



Medicare

As noted above, the majority of individuals receiving LTSS in New Hampshire are Medicaid and Medicare dual eligible. In recognizing the significant overlap between Medicaid and Medicare services we plan to pursue with CMS a Dual Eligible Financial Alignment Demonstration Project. We recognize the significance of including Medicare as a payor within this model, and the opportunity for savings between both systems as a result.

Veteran's Affairs

As noted above, we have begun the process of engaging the Department of Veteran's Affairs (VA) in the State as a stakeholder and/or payor within this model. We recognize the importance of including the VA as a stakeholder and/or payor in this plan as there is significant overlap between New Hampshire veterans that access VA LTSS and New Hampshire veterans that access Medicaid and Medicare LTSS. We have primarily focused on identifying points of intersection between the SIM initiatives and veteran-based care initiatives. To date, it is clear that the VA supports the vision and mission of this plan, as presented by the State and its stakeholders, and is in support of the consumer-directed, person-centered initiatives set forth in this model. Together we have identified several points of intersection within this model in which the VA and the Department recognize potential partnership:

1. Funding for Team Coordinator function
2. A resource for Life Plan creation
3. Assistance with consumer education and outreach

We recognize the importance of strengthening these points of intersection between the VA and this model, and therefore plan to continue engaging the VA throughout the implementation process.

Other Payors

In addition to recognizing the VA as a potential stakeholder and/or payor within this model, we plan to engage a similar partnership with private payors in the State as well. We recognize that a significant amount of New Hampshire citizens receive certain sets of services from a private payor, but also receive others from Medicaid.

In recognizing that this level of coordination has been difficult to achieve to date, we have identified the opportunity to improve coordination between private payors and the State using this model. Specifically, we see the inherent benefit of private payor participation in the Team Coordinator function for those individuals who are enrolled in a commercial health plan and also receive LTSS from Medicaid. To date, we have engaged insurers and the State's Medicaid Managed Care Organizations in the stakeholder engagement process and have begun to discuss this potential area of alignment. We plan to further this conversation as this plan is adopted and engage other payors as well.

Implementation Approach

This State Health Care Innovation Plan outlines our plan to develop the preceding set of initiatives and supporting strategies. The approach below demonstrates how we plan to phase the implementation of each initiative. As this is a preliminary approach toward implementation, a more detailed implementation plan for each of the steps described above and displayed below will need to be developed and incorporated into DHHS' planning for Step 2 of its care management program. We recognize that some of the initiatives will be phased in and are dependent on having sufficient resources to successfully implement the initiative. To address this need, and others, we plan to develop detailed implementation plans for each initiative that contain, but are not limited to, the following elements:

1. Waiver approvals, if necessary
2. State approvals, if necessary
3. Identified resources and/or constraints
4. Training supports
5. Education and outreach
6. Detailed timeline

To begin this process, we plan to spend the majority of calendar year 2014 completing pre-implementation activities, including obtaining necessary funding and/or state approvals and completing the detailed design work necessary for finalizing this model. We plan to launch a number of the initiatives

in December 2014 as part of the launch of Step 2 of our care management expansion; those initiatives include expanded LTSS eligibility criteria, LTSS Reimbursement Accounts, and Life Planning.

We plan to begin the baseline measurement process for both the Triple Aim Incentive Pool and the LTSS Provider Quality Measurement in January 2015. We plan to establish an annual cycle for these measurements, and would therefore spend calendar year 2015 establishing the baseline for each measure.

In July 2015, we plan to launch the Health Home and the Nursing Home and New Hampshire Hospital initiatives. We are targeting July 2015 as this coincides with the State's biannual budget approval cycle. Also in July 2015, we plan to launch each of the training programs described in the model, including the Team Coordinator training program as this is six months in advance of launching the Team Coordinator function as a whole. The subsequent launch of the Team Coordinator function, targeted for December 2015, will coincide with the second year of Step 2 of care management. Also targeted for December 2015 is our planned CMS Dual Eligible Financial Alignment Demonstration Project.

The final phase of this implementation plan will include the launch of both the Triple Aim Incentive Pool and the availability of Provider Quality Information. As mentioned above, this will allow for an established baseline and will continue the annual measurement cycle that we plan to conduct and report on each year.

This implementation approach is an initial plan that is subject to legislative, legal, and regulatory approvals, for which timeframe planning has already begun.

Date (Month and Year)	February 2014	July 2014	August 2014	December 2014	January 2015	July 2015	December 2015	January 2016
SIM FOA Response	X							
SIM Testing Grant		X						
CMS 1115 Waiver Approval			X					
Obtain State Approvals				X				
Launch Step 2 Managed Care				X				
Expanded Eligibility Criteria				X				
Begin to Equalize Availability of Services Across Waivers				X				
Begin Rollout of CDBI to all Waiver Populations				X				
Launch LTTS Reimbursement Accounts				X				
Launch Provider Price Transparency				X				
Launch Life Plan initiative				X				
Health Home Designation, Design, and Training				X				
Begin Baseline Triple Aim Measurement					X			
Begin Baseline LTSS Provider Quality Measurement					X			
Launch Health Homes						X		
Launch Nursing Home and New Hampshire Hospital Initiatives						X		
Begin Team Coordinator Training						X		
Begin Other Training Programs						X		
Dual Eligible Financial Alignment Demonstration							X	
Launch Team Coordinator Program							X	
Launch Triple Aim Incentive Pool								X
Launch Availability of Provider Quality Information								X

Program Evaluation

To encourage refinement and improvement of this model over time, we plan to conduct an ongoing evaluation of the implementation of this plan. We plan to evaluate this program on an annual basis, against our defined goals. Our proposed annual report will also include documentation on reported gaps in the model, progress against evaluation measures, and consumer satisfaction.

Overall Measurement

In order to conduct an evaluation of the impact of this model on quality, costs, patient experience, and overall population health, we plan to develop a set of state-based overall measures. While these measures and the evaluation format will be developed through an ongoing stakeholder engagement and consensus process, we have begun to define the type of information these measures could include. Examples of potential evaluation topics include:

1. The Department as the administrator of this system
2. The timeframe required for entrance to the system, creation of the Life Plan, development of the LTSS budget, and receipt of services and supports
3. How the eligibility assessment process differs between each of the three populations (developmentally disabled, elderly, and behavioral health)
4. How the Team Coordinator function helps to facilitate the swift receipt of services
5. The frequency of appeals and comparison of upheld vs. reversed decisions as it relates to LTSS services
6. The length of time required to complete redeterminations
7. Individual Managed Care Organization (MCO) performance
8. Actual utilization of authorized services included in Life Plan
9. Assessment of behavior with respect to expanding the use of consumer-direct budgets

We recognize the importance in developing both quantitative and qualitative metrics, from defined data sources, in each of the potential domains listed above, as well as others. These data sources and defined metrics will be established during the first phase of this plan's implementation. To evaluate health care quality and patient experience, we plan to leverage the measures we will be using within the previously-described Provider Reinvestment Fund, e.g. CAHPS and/or Home Health Care CAHPS.

In addition to monitoring outcomes, we plan to monitor the extent to which the drivers of this model are being implemented. Potential drivers we proposed to monitor may include: the use of consumer directed

care budgeting, training and use of the Team Coordinator function, training for LTSS providers, and reinvestment funds. Potential examples of how this monitoring may occur include:

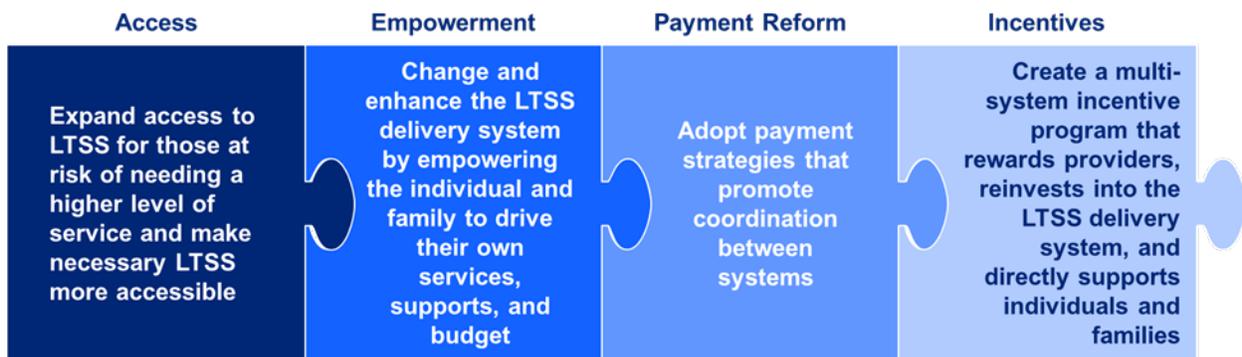
1. Monitoring by MCO and in the aggregate the percentage of the eligible population that:
 - a. Choose the consumer directed budget initiative
 - b. Enroll in the Health Home initiative
 - c. Choose a Team Coordinator
 - d. Are being screened for and found in need of substance misuse treatment
2. Monitoring the number of Team Coordinators trained and utilized
3. Monitoring the effectiveness of the various components of the reinvestment fund

We recognize that empirical challenges to identifying some groups of individuals who are “at risk” for LTSS may arise, given that these individuals may not always be covered under the Medicaid program. Our final, detailed evaluation plan will present strategies to identify and track these individuals.

For each of the potential evaluation topics described above, we propose using calendar year 2014 as our baseline for data capture, and begin to evaluate this model in calendar year 2015. We also propose to capture this data for the broader LTSS population, not just those individuals who participate in the consumer-directed budget initiative.

Savings Estimates

The New Hampshire Department of Health and Human Services contracted with Milliman to provide actuarial support related to the State’s State Innovation Model design. This section provides high level expenditure estimates related to the initiatives set forth in this plan. The tables below contain preliminary findings from the projection model we developed to provide expenditure estimates related to the initiatives. We conducted these calculations to look at potential savings that could be achieved through the plan’s initiatives, and realized by implementing this model’s four key strategies:



These expenditure projections are based on high level assumptions about trend, population shifts from nursing home to waiver services resulting from delaying nursing home admissions in favor of the increased use of community supports, and the net impact of other initiatives. The model is meant to estimate the magnitude of reasonable expenditure savings objectives for the SIM initiatives in general – it is not intended to be a definitive study of the potential impact of each individual initiative. As we move to the testing and implementation phases of this model, we will work with Milliman to develop more detailed modeling of various populations and services. It is also important to note that our plan does not yet establish what additional costs would be required to implement and sustain these initiatives. These costs will include training, implementation, HIT/IT infrastructure, Team Coordinator and Health Home compensation, and incremental increases in administrative costs incurred by DHSS, the MCOs, agencies, and providers. We recognize that these costs will have to be considered when developing capitation rates for the MCOs as well. A detailed budget plan and financial projection for these costs will be developed in the implementation phase of this plan.

Table 1 summarizes CY 2015 projected system expenditures by SIM population under the status quo system design and two system savings scenarios. Expenditures include services paid through Medicaid, Medicare (estimated), and third party private payors²⁴. Additional detailed results for these two system savings scenarios, including our methodology, data, and assumptions, can be found in Appendix A.

Table 1 New Hampshire Department of Health and Human Services State Health Care Innovation Model (SIM) Projection Summaries CY 2015 Expenditure Estimates by SIM Population (\$ millions)			
SIM Population	Status Quo	1.7% System Savings Scenario	3.6% System Savings Scenario
CFI Waiver Enrollees	\$155.9	\$160.8	\$164.5
Nursing Home Residents	351.5	334.7	318.0
DD Waiver Enrollees	326.6	323.9	320.2
ABD Waiver Enrollees	27.5	27.2	26.9
IHS Waiver Enrollees	14.7	14.6	14.5
BBH Consumers	177.4	174.7	171.1

²⁴ Third Party Payor Expenditures: we included expenditures identified in the Medicaid claims data as “third party” payments. The third party payments likely understate the total private payor expenditures for the SIM population. Future analysis will leverage the New Hampshire Comprehensive Health Care Information System (CHIS) data, which is currently undergoing a major update.

Total	\$1,053.5	\$1,036.0	\$1,015.2
Total Projected Savings (\$ millions)		\$17.6	\$38.3
Total Projected Savings (%)		1.7%	3.6%

We developed two system savings scenarios based on CMS savings expectations for State Demonstrations to Integrate Care for Dual Eligible Individuals (i.e., the Dual Demonstration program). While actual Dual Demonstration program savings are negotiated by CMS with each State, general savings expectations are similar among the programs approved in various states. Savings are generated from shifting a portion of the nursing home population to a community setting, (resulting from delaying nursing home admissions in favor of the increased use of community supports), as well as savings in Medicaid and Medicare acute care expenditures.

1. **The 1.7% System Savings Scenario** is generally consistent with CMS savings expectations for the first year of the Dual Demonstration program.
2. **The 3.6% System Savings Scenario** is generally consistent with CMS savings expectations for the second year of the Dual Demonstration program.

Table 2 summarizes CY 2015 projected system expenditures by broad service category for the total SIM population under the status quo system design and two system savings scenarios.

Table 2 New Hampshire Department of Health and Human Services State Health Care Innovation Model (SIM) Projection Summaries CY 2015 Expenditure Estimates by Broad Service Category (\$ millions)			
Broad Service Category	Status Quo	1.7% System Savings Scenario	3.6% System Savings Scenario
Medicaid Expenditures			
Hospital Inpatient	\$15.1	\$14.3	\$13.5
Skilled Nursing Facility & Intermediate Care Facility	221.6	213.8	206.1
Hospital Outpatient	16.4	16.2	15.6
Professional and Other State Plan Services	51.7	52.4	50.9
Prescription Drugs	33.1	32.5	31.2
Mental Health Center	83.0	83.1	83.3

State Plan Services – DCYF	7.6	7.6	7.6
State Plan Services – BDS	1.4	1.4	1.4
Waiver Services – BDS	241.0	241.0	241.0
Waiver Services - BEAS	58.0	60.9	63.9
Medicaid to School Program	26.0	25.9	25.9
Total Medicaid Expenditures	\$754.8	\$749.1	\$740.3
Medicare Expenditures	\$287.1	\$275.7	\$264.3
Third Party Private Payor Expenditures	\$11.7	\$11.2	\$10.8
Total Expenditures	\$1,053.6	\$1,036.0	\$1,015.2
Total Projected Savings (\$ millions)		\$17.6	\$38.3
Total Projected Savings (%)		1.7%	3.6%

For the purposes of this projection model, we assumed 0% enrollment growth to provide a “steady state” estimate of potential system savings based on current demand for long term services and supports (LTSS). Long term demographic changes will result in an older population with an increased demand for LTSS compared to today. For example, New Hampshire’s age 65 and over population is expected to grow by 10% over the next five years and by almost 20% over the next ten years. We plan to consider this increased demand along with potential system savings projections in future projection models.

Conclusion

New Hampshire’s State Health Care Innovation Plan introduces a new model design for transforming the current delivery system for LTSS in the State. While this plan introduces a new set of initiatives and long term goals, it builds on existing strengths within the State, including a strong stakeholder engagement process and passion for health care innovation and reform. The State’s vision and plan to create a dynamic and enduring community-based system of LTSS, so all New Hampshire citizens may live and age with respect, dignity, choice, and control until the end of life, is essential and possible. In conjunction with our government counterparts, stakeholders, providers, payors, and consumers, we plan to deliver on this model design and reach the Triple Aim of better health, better care, and reduced costs for New Hampshire residents.

Appendix A1

State Innovation Model
Projection Model Results



15800 Bluemound Road
 Suite 100
 Brookfield, WI 53005
 USA
 Tel +1 262 784 2250
 Fax +1 262 923 3680

milliman.com

John D. Meerschaert, FSA, MAAA
 Principal and Consulting Actuary

john.meerschaert@milliman.com

December 18, 2013

Ms. Sheri L. Rockburn, CPA, MBA
 Director of Finance
 Division of Community Based Care Services
 Department of Health and Human Services
 129 Pleasant St.
 Concord, NH 03301

Re: SIM Projection Model Results

Dear Sheri:

The New Hampshire Department of Health and Human Services (DHHS) retained Milliman to provide actuarial support related to New Hampshire's State Health Care Innovation Model (SIM) grant. This letter provides high level expenditure estimates related to the SIM initiatives.

The SIM expenditure projections are based on assumptions about trend, population shifts from nursing home to waiver services resulting from delaying nursing home admissions in favor of the increased use of community supports, and the net impact of other initiatives. The model is meant to estimate the magnitude of reasonable expenditure savings objectives for the SIM initiatives in general – it is not intended to be a definitive study of the potential impact of each individual initiative. As DHHS moves to the testing and implementation phases of the SIM process, we will work with DHHS to provide more detailed modeling of various populations and services.

SIM PROJECTION MODEL RESULTS

Table 1 summarizes CY 2015 projected system expenditures by SIM population under the status quo system design and two system savings scenarios. Expenditures include services paid through Medicaid, Medicare (estimated), and third party private payers as described in this letter. Appendices A and B present more detailed results for the two system savings scenarios.

Table 1 New Hampshire Department of Health and Human Services State Health Care Innovation Model (SIM) Projection Summaries CY 2015 Expenditure Estimates by SIM Population (\$ millions)			
SIM Population	Status Quo	1.7% System Savings Scenario	3.6% System Savings Scenario
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BBH Consumers	177.4	174.7	171.1
Total	\$1,053.6	\$1,036.0	\$1,015.2
Total Projected Savings (\$ millions)		\$17.6	\$38.3
Total Projected Savings (%)		1.7%	3.6%

We developed two system savings scenarios based on CMS savings expectations for State Demonstrations to Integrate Care for Dual Eligible Individuals (i.e., the Dual Demonstration program). While actual Dual Demonstration program savings are negotiated by CMS with each State, general savings expectations are similar among the programs approved in various states. Savings are generated from shifting a portion of the nursing home population to a community setting (resulting from delaying nursing home admissions in favor of the increased use of community supports), as well as savings in Medicaid and Medicare acute care expenditures.

- **The 1.7% System Savings Scenario** is generally consistent with CMS savings expectations for the first year of the Dual Demonstration program.
- **The 3.6% System Savings Scenario** is generally consistent with CMS savings expectations for the second year of the Dual Demonstration program.

Table 2 summarizes CY 2015 projected system expenditures by broad service category for the total SIM population under the status quo system design and two system savings scenarios.

Table 2
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
CY 2015 Expenditure Estimates by Broad Service Category (\$ millions)

Broad Service Category	Status Quo	1.7% System Savings Scenario	3.6% System Savings Scenario
Medicaid Expenditures			
Hospital Inpatient	\$15.1	\$14.3	\$13.5
Skilled Nursing Facility & Intermediate Care Facility	221.6	213.8	206.1
Hospital Outpatient	16.4	16.2	15.6
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Total Expenditures	\$1,053.6	\$1,036.0	\$1,015.2
Total Projected Savings (\$ millions)		\$17.6	\$38.3
Total Projected Savings (%)		1.7%	3.6%

For the purposes of this projection model, we assumed 0% enrollment growth to provide a “steady state” estimate of potential system savings based on current demand for long term services and supports (LTSS). Long term demographic changes will result in an older population with an increased demand for LTSS compared to today. For example, New Hampshire’s age 65 and over population is expected to grow by 10% over the next five years and by almost 20% over the next ten years. Future budget projections should consider this increased demand along with potential system savings projections.

METHODOLOGY AND ASSUMPTIONS

The SIM projection model is based on the following methodology, data, and assumptions.

Population Definition

We developed a high level projection model for New Hampshire’s “SIM population,” defined in our model as Medicaid beneficiaries receiving long term supports and services (LTSS). The SIM population is further categorized into the following populations:

- Choices for Independence (CFI) waiver enrollees
- Nursing Facility Residents (including skilled nursing facility and intermediate care facility residents)
- Developmental Disabilities (DD) waiver enrollees
- Acquired Brain Disorder (ABD) waiver enrollees
- In Home Supports (IHS) waiver enrollees
- Bureau of Behavioral Health (BBH) consumers

The projection model excludes individuals receiving LTSS outside of the Medicaid system due to data availability issues.

Base Period Enrollment

Base period enrollment reflects SFY 2012 Medicaid member months for each SIM population. Unlike our other analyses (the base period summaries and the decile analysis), we did not allow a person to be in multiple SIM populations in a particular month. We assigned a person showing up in multiple SIM populations in the following order: nursing facility resident, CFI wavier enrollee, DD waiver enrollee, ABD waiver enrollee, IHS waiver enrollee, and BBH consumer. We limited the SIM population to people with Medicaid eligibility on the first of the month.

Medicaid Expenditures

We developed the base period Medicaid expenditures based on SFY 2011 and SFY 2012 per member per month (PMPM) expenditures multiplied by the SFY 2012 member months for each SIM population and service category. The PMPM base period expenditures are based on two years of data to enhance the credibility of small populations. Expenditures are summarized based on the following service categories:

- Hospital Inpatient
- Skilled Nursing Facility & Intermediate Care Facility
- Hospital Outpatient
- Professional and Other State Plan Services
- Prescription Drugs
- Mental Health Center
- State Plan Services - DCYF
- State Plan Services - BDS

- Waiver Services - BDS
- Waiver Services - BEAS
- Medicaid to School Program

Medicare Expenditures

The Medicare expenditures for dual eligibles represent **estimated** Medicare expenditures for disabled and aged dual eligibles using the CMS 5% sample data for the state of New Hampshire and average Part D pharmacy expenditures. We developed acuity adjustments to adjust the average dual eligible Medicare expenditures to reflect expected acuity differenced based on diagnosis profile and / or the institutionalized status of each SIM population. The acuity adjusted average Medicare PMPM expenditure estimates were assigned to each dual eligible based on their age for each month they were eligible for both Medicaid and Medicare.

The Medicare expenditure estimates do not represent the actual Medicare expenditures for the actual SIM population, but rather represent acuity adjusted average Medicare dual eligible expenditures. We will update our Medicare estimates if we get access to the 100% New Hampshire sample data from CMS during future phases of SIM testing or implementation.

Table 3 summarizes the Medicare expenditure estimates PMPM for each SIM population.

Table 3 New Hampshire Department of Health and Human Services State Health Care Innovation Model (SIM) Projection Summaries Medicare Expenditure Estimates for Dual Eligibles				
Age	SIM Population	Average Dual Eligible CY 2011 NH Medicare Expenditures PMPM	Assumed Acuity Factor	Estimated CY 2011 NH Medicare Expenditures PMPM
<65	CFI Waiver Enrollees	\$1,351.48	1.332	\$1,800.44
	Nursing Home Residents	1,351.48	1.332	1,800.44
	DD Waiver Enrollees	1,351.48	1.285	1,736.48
	ICF-MR Residents	1,351.48	1.285	1,736.48
	ABD Waiver Enrollees	1,351.48	1.806	2,440.27
	IHS Waiver Enrollees	1,351.48	1.545	2,088.38
	BBH Consumers	1,351.48	1.075	1,452.99
65+	CFI Waiver Enrollees	\$912.52	2.109	\$1,924.45
	Nursing Home Residents	912.52	2.109	1,924.45
	DD Waiver Enrollees	912.52	1.804	1,646.49
	ICF-MR Residents	912.52	1.804	1,646.49
	ABD Waiver Enrollees	912.52	2.828	2,580.52
	IHS Waiver Enrollees	912.52	2.316	2,113.50
	BBH Consumers	912.52	1.537	1,402.22

Third Party Payer Expenditures

We included expenditures identified in the Medicaid claims data as “third party” payments. The third party payments likely understate the total private payer expenditures for the SIM population. Future analysis will leverage the New Hampshire Comprehensive Health Care Information System (CHIS) data, which is currently undergoing a major update.

Status Quo Projection Assumptions

We adjusted the baseline enrollment and expenditures to reflect the status quo system in CY 2015 using the following adjustment factors:

- 0% enrollment change
- 3% annual Medicaid expenditure trend
- 6% annual Medicare expenditure trend
- 8% annual third party private payer expenditure trend

System Savings Scenarios:

Table 4 shows the assumptions underlying the two system savings scenarios. Savings assumptions are shown net of system administrative expenditures.

Table 4 New Hampshire Department of Health and Human Services State Health Care Innovation Model (SIM) Projection Summaries System Savings Scenario Assumptions		
	1.7% System Savings Scenario	3.6% System Savings Scenario
Medicaid Expenditures		
Hospital Inpatient	-5%	-10%
Skilled Nursing Facility & Intermediate Care Facility	0%	0%
Hospital Outpatient	-2%	-6%
Professional and Other State Plan Services	0%	-4%
Prescription Drugs	-2%	-6%
Mental Health Center	0%	0%
State Plan Services - DCYF	0%	0%
State Plan Services - BDS	0%	0%
Waiver Services - BDS	0%	0%
Waiver Services - BEAS	0%	0%
Medicaid to School Program	0%	0%
Medicare Expenditures		
	-4%	-8%
Third Party Private Payer Expenditures		
	-4%	-8%
Population Shift from NH Residents to CFI Waiver (resulting from delaying nursing home admissions in favor of the increased use of community supports)		
	2%	4%

DATA RELIANCE AND IMPORTANT CAVEATS

We used FFS Medicaid expenditure and eligibility data for June 2010 through December 2012 and other DHHS information to develop the historical data summaries shown in this letter. This data was provided by DHHS. We have not audited or verified this data and other information. If the underlying data or information is inaccurate or incomplete, the results of our analysis may likewise be inaccurate or incomplete. We performed a limited review of the data used directly in our analysis for reasonableness and consistency and have not found material defects in the data. If there are material defects in the data, it is possible that they would be uncovered by a detailed, systematic review and comparison of the data to search for data values that are questionable or for relationships that are materially inconsistent. Such a review was beyond the scope of our assignment.

Milliman prepared this letter and the accompanying appendices for the specific purpose of providing SIM population expenditure projections. This report should not be used for any other purpose. This report has been prepared solely for the internal business use of and is only to be relied upon by the management of DHHS. Milliman does not intend to benefit or create a legal duty to any third party recipient of its work. This letter should only be reviewed in its entirety.

The results of this letter are technical in nature and are dependent upon specific assumptions and methods. No party should rely on these results without a thorough understanding of those assumptions and methods. Such an understanding may require consultation with qualified professionals.

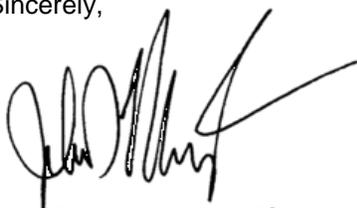
I am a Principal and Consulting Actuary for Milliman, a member of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of my knowledge and belief, this report is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices.

The terms of Milliman's contract with the New Hampshire Department of Health and Human Services signed on November 16, 2012 apply to this report and its use.



Please call me at (262) 796-3434 if you have any questions.

Sincerely,



John D. Meerschaert, FSA, MAAA
Principal and Consulting Actuary

JDM/zk



Appendix A

1.7% System Savings Scenario

Appendix A - 1a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 1.7% System Savings Scenario
Population: Total

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Post SIM		Projected	Projected		Projected	Projected
Member Months	132,018	132,018	132,018	113,195	113,195	113,195	245,213	245,213	245,213
Medicaid Spend Summary									
Hospital Inpatient	\$3,578,292	\$4,030,528	\$3,879,338	\$9,791,144	\$11,028,580	\$10,420,351	\$13,369,436	\$15,059,108	\$14,299,689
Skilled Nursing Facility & Intermediate Care Facility	178,681,947	201,264,352	195,409,640	18,057,354	20,339,501	18,418,533	196,739,301	221,603,852	213,828,173
Hospital Outpatient	5,290,492	5,959,122	5,914,987	9,294,610	10,469,293	10,278,194	14,585,103	16,428,415	16,193,181
Professional and Other State Plan Services	16,735,274	18,850,333	19,378,069	29,203,636	32,894,487	33,021,852	45,938,911	51,744,819	52,399,920
Prescription Drugs	1,645,314	1,853,254	1,825,561	27,739,007	31,244,753	30,653,061	29,384,321	33,098,007	32,478,622
Mental Health Center	26,985,902	30,396,468	30,514,242	46,682,806	52,582,731	52,611,607	73,668,709	82,979,199	83,125,848
State Plan Services - DCYF	114,160	128,588	128,588	6,607,252	7,442,298	7,442,042	6,721,412	7,570,886	7,570,629
State Plan Services - BDS	158,204	178,198	178,562	1,050,056	1,182,766	1,180,061	1,208,260	1,360,964	1,358,623
Waiver Services - BDS	138,400,488	155,891,991	155,894,324	75,537,308	85,083,958	85,074,098	213,937,796	240,975,949	240,968,422
Waiver Services - BEAS	43,246,980	48,712,674	51,208,338	8,202,918	9,239,592	9,709,461	51,449,898	57,952,266	60,917,800
Medicaid to School Program	189,094	212,993	213,748	22,888,752	25,781,507	25,723,751	23,077,846	25,994,500	25,937,498
Total Medicaid Spend	415,026,148	467,478,500	464,545,397	255,054,844	287,289,466	284,533,010	670,080,992	754,767,966	749,078,407
Medicare Services	227,397,732	287,084,398	275,658,025	0	0	0	227,397,732	287,084,398	275,658,025
Other Private Insurance	2,174,325	2,958,145	2,839,209	6,433,291	8,752,422	8,393,891	8,607,616	11,710,567	11,233,100
Total	\$644,598,206	\$757,521,043	\$743,042,631	\$261,488,135	\$296,041,887	\$292,926,901	\$906,086,340	\$1,053,562,931	\$1,035,969,532
Total Savings (\$)			\$14,478,412			\$3,114,987			\$17,593,399
Total Savings (%)			1.9%			1.1%			1.7%

Appendix A - 1b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Total

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Post SIM		Projected	Projected		Projected	Projected
Member Months	132,018	132,018	132,018	113,195	113,195	113,195	245,213	245,213	245,213
Spend Summary									
Hospital Inpatient	\$27.10	\$30.53	\$29.38	\$86.50	\$97.43	\$92.06	\$54.52	\$61.41	\$58.32
Skilled Nursing Facility & Intermediate Care Facility	1,353.47	1,524.52	1,480.17	159.52	179.69	162.72	802.32	903.72	872.01
Hospital Outpatient	40.07	45.14	44.80	82.11	92.49	90.80	59.48	67.00	66.04
Professional and Other State Plan Services	126.77	142.79	146.78	257.99	290.60	291.73	187.34	211.02	213.69
Prescription Drugs	12.46	14.04	13.83	245.06	276.03	270.80	119.83	134.98	132.45
Mental Health Center	204.41	230.24	231.14	412.41	464.53	464.79	300.43	338.40	338.99
State Plan Services - DCYF	0.86	0.97	0.97	58.37	65.75	65.75	27.41	30.87	30.87
State Plan Services - BDS	1.20	1.35	1.35	9.28	10.45	10.43	4.93	5.55	5.54
Waiver Services - BDS	1,048.35	1,180.84	1,180.86	667.32	751.66	751.57	872.46	982.72	982.69
Waiver Services - BEAS	327.58	368.99	387.89	72.47	81.63	85.78	209.82	236.33	248.43
Medicaid to School BEAS	1.43	1.61	1.62	202.21	227.76	227.25	94.11	106.01	105.78
Total Medicaid Spend	3,144	3,541	3,519	2,253	2,538	2,514	2,733	3,078	3,055
Medicare Services	1,722.48	2,174.59	2,088.03	0.00	0.00	0.00	927.35	1,170.76	1,124.16
Other Private Insurance	16.47	22.41	21.51	56.83	77.32	74.15	35.10	47.76	45.81
Total	\$4,882.65	\$5,738.01	\$5,628.34	\$2,310.07	\$2,615.33	\$2,587.81	\$3,695.10	\$4,296.52	\$4,224.77
Total Savings (\$)			\$109.67			\$27.52			\$71.75
Total Savings (%)			1.9%			1.1%			1.7%

Appendix A - 2a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 1.7% System Savings Scenario
Population: Choices For Independence Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	28,568	28,568	30,054	5,097	5,097	5,362	33,665	33,665	35,416
Spend Summary									
Hospital Inpatient	\$1,489,398	\$1,677,632	\$1,676,646	\$1,253,184	\$1,411,565	\$1,410,735	\$2,742,582	\$3,089,198	\$3,087,381
Skilled Nursing Facility & Intermediate Care Facility	16,868	19,000	19,988	0	0	0	16,868	19,000	19,988
Hospital Outpatient	1,935,225	2,179,805	2,247,319	1,559,122	1,756,168	1,810,561	3,494,347	3,935,974	4,057,879
Professional and Other State Plan Services	10,145,856	11,428,122	12,022,527	4,508,933	5,078,787	5,342,947	14,654,789	16,506,909	17,365,474
Prescription Drugs	344,914	388,505	400,538	3,605,330	4,060,983	4,186,761	3,950,244	4,449,488	4,587,299
Mental Health Center	2,065,636	2,326,697	2,447,715	543,105	611,744	643,563	2,608,741	2,938,442	3,091,277
State Plan Services - DCYF	0	0	0	0	0	0	0	0	0
State Plan Services - BDS	13,043	14,691	15,456	6,700	7,547	7,940	19,743	22,239	23,395
Waiver Services - BDS	90,778	102,251	107,569	104,014	117,160	123,254	194,792	219,411	230,823
Waiver Services - BEAS	42,827,690	48,240,392	50,749,495	8,137,532	9,165,980	9,642,725	50,965,222	57,406,372	60,392,220
Medicaid to School Program	12,884	14,512	15,267	3,876	4,366	4,593	16,760	18,878	19,860
Total Medicaid Spend	58,942,290	66,391,608	69,702,518	19,721,796	22,214,300	23,173,078	78,664,086	88,605,909	92,875,596
Medicare Services	52,608,720	66,417,296	67,076,951	0	0	0	52,608,720	66,417,296	67,076,951
Other Private Insurance	243,030	330,640	333,924	378,069	514,359	519,468	621,099	844,999	853,391
Total	\$111,794,040	\$133,139,545	\$137,113,393	\$20,099,865	\$22,728,659	\$23,692,545	\$131,893,905	\$155,868,204	\$160,805,939
Total Savings (\$)			-\$3,973,848			-\$963,886			-\$4,937,734
Total Savings (%)			-3.0%			-4.2%			-3.2%

Appendix A - 2b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Choices For Independence Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	28,568	28,568	30,054	5,097	5,097	5,362	33,665	33,665	35,416
Spend Summary									
Hospital Inpatient	\$52.14	\$58.72	\$55.79	\$245.87	\$276.94	\$263.09	\$81.47	\$91.76	\$87.17
Skilled Nursing Facility & Intermediate Care Facility	0.59	0.67	0.67	0.00	0.00	0.00	0.50	0.56	0.56
Hospital Outpatient	67.74	76.30	74.78	305.89	344.55	337.66	103.80	116.92	114.58
Professional and Other State Plan Services	355.15	400.03	400.03	884.62	996.43	996.43	435.31	490.33	490.33
Prescription Drugs	12.07	13.60	13.33	707.34	796.74	780.81	117.34	132.17	129.53
Mental Health Center	72.31	81.44	81.44	106.55	120.02	120.02	77.49	87.28	87.28
State Plan Services - DCYF	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
State Plan Services - BDS	0.46	0.51	0.51	1.31	1.48	1.48	0.59	0.66	0.66
Waiver Services - BDS	3.18	3.58	3.58	20.41	22.99	22.99	5.79	6.52	6.52
Waiver Services - BEAS	1,499.15	1,688.62	1,688.62	1,596.53	1,798.31	1,798.31	1,513.89	1,705.22	1,705.22
Medicaid to School Program	0.45	0.51	0.51	0.76	0.86	0.86	0.50	0.56	0.56
Total Medicaid Spend	2,063.23	2,323.99	2,319.25	3,869.29	4,358.31	4,321.64	2,336.67	2,631.99	2,622.42
Medicare Services	1,841.53	2,324.88	2,231.89	0.00	0.00	0.00	1,562.71	1,972.89	1,893.97
Other Private Insurance	8.51	11.57	11.11	74.17	100.91	96.88	18.45	25.10	24.10
Total	\$3,913.26	\$4,660.44	\$4,562.25	\$3,943.47	\$4,459.22	\$4,418.51	\$3,917.83	\$4,629.98	\$4,540.49
Total Savings (\$)			\$98.19			\$40.71			\$89.49
Total Savings (%)			2.1%			0.9%			1.9%

Appendix A - 3a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 1.7% System Savings Scenario
Population: Nursing Home Residents

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	51,066	51,066	49,580	2,807	2,807	2,542	53,873	53,873	52,122
Spend Summary									
Hospital Inpatient	\$1,045,663	\$1,177,817	\$1,086,368	\$1,252,184	\$1,410,439	\$1,213,368	\$2,297,846	\$2,588,256	\$2,299,736
Skilled Nursing Facility & Intermediate Care Facility	178,664,023	201,244,162	195,388,462	18,057,354	20,339,501	18,418,533	196,721,377	221,583,663	213,806,995
Hospital Outpatient	1,122,745	1,264,641	1,203,286	683,230	769,579	682,958	1,805,974	2,034,219	1,886,244
Professional and Other State Plan Services	2,034,144	2,291,226	2,224,557	1,285,891	1,448,407	1,311,612	3,320,035	3,739,632	3,536,168
Prescription Drugs	324,744	365,787	348,040	1,667,027	1,877,712	1,666,363	1,991,772	2,243,498	2,014,404
Mental Health Center	98,981	111,491	108,247	27,661	31,157	28,214	126,642	142,648	136,461
State Plan Services - DCYF	0	0	0	2,415	2,720	2,463	2,415	2,720	2,463
State Plan Services - BDS	12,221	13,765	13,365	29,110	32,789	29,693	41,331	46,555	43,057
Waiver Services - BDS	91,088	102,600	99,614	149,971	168,925	152,971	241,059	271,524	252,585
Waiver Services - BEAS	409,991	461,807	448,370	64,638	72,807	65,931	474,629	534,614	514,300
Medicaid to School Program	0	0	0	545,052	613,937	555,954	545,052	613,937	555,954
Total Medicaid Spend	183,803,600	207,033,295	200,920,309	23,764,532	26,767,971	24,128,059	207,568,132	233,801,266	225,048,368
Medicare Services	92,422,978	116,681,880	108,755,261	0	0	0	92,422,978	116,681,880	108,755,261
Other Private Insurance	450,481	612,874	571,240	276,583	376,288	327,119	727,064	989,162	898,359
Total	\$276,677,058	\$324,328,050	\$310,246,810	\$24,041,115	\$27,144,259	\$24,455,178	\$300,718,173	\$351,472,308	\$334,701,988
Total Savings (\$)			\$14,081,240			\$2,689,081			\$16,770,321
Total Savings (%)			4.3%			9.9%			4.8%

Appendix A - 3b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Nursing Home Residents

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	51,066	51,066	49,580	2,807	2,807	2,542	53,873	53,873	52,122
Spend Summary									
Hospital Inpatient	\$20.48	\$23.06	\$21.91	\$446.09	\$502.47	\$477.35	\$42.65	\$48.04	\$44.12
Skilled Nursing Facility & Intermediate Care Facility	3,498.69	3,940.86	3,940.86	6,432.97	7,245.99	7,245.99	3,651.58	4,113.07	4,102.05
Hospital Outpatient	21.99	24.76	24.27	243.40	274.16	268.68	33.52	37.76	36.19
Professional and Other State Plan Services	39.83	44.87	44.87	458.10	516.00	516.00	61.63	69.42	67.84
Prescription Drugs	6.36	7.16	7.02	593.88	668.94	655.56	36.97	41.64	38.65
Mental Health Center	1.94	2.18	2.18	9.85	11.10	11.10	2.35	2.65	2.62
State Plan Services - DCYF	0.00	0.00	0.00	0.86	0.97	0.97	0.04	0.05	0.05
State Plan Services - BDS	0.24	0.27	0.27	10.37	11.68	11.68	0.77	0.86	0.83
Waiver Services - BDS	1.78	2.01	2.01	53.43	60.18	60.18	4.47	5.04	4.85
Waiver Services - BEAS	8.03	9.04	9.04	23.03	25.94	25.94	8.81	9.92	9.87
Medicaid to School Program	0.00	0.00	0.00	194.18	218.72	218.72	10.12	11.40	10.67
Total Medicaid Spend	3,599.33	4,054.23	4,052.44	8,466.17	9,536.15	9,492.16	3,852.92	4,339.86	4,317.72
Medicare Services	1,809.87	2,284.92	2,193.53	0.00	0.00	0.00	1,715.57	2,165.87	2,086.55
Other Private Insurance	8.82	12.00	11.52	98.53	134.05	128.69	13.50	18.36	17.24
Total	\$5,418.03	\$6,351.15	\$6,257.49	\$8,564.70	\$9,670.20	\$9,620.85	\$5,581.98	\$6,524.09	\$6,421.51
Total Savings (\$)			\$93.67			\$49.35			\$102.58
Total Savings (%)			1.5%			0.5%			1.6%

Appendix A - 4a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 1.7% System Savings Scenario
Population: Blended Choices For Independence Waiver Enrollees and Nursing Home Residents

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015 Projected	CY 2015 Projected Post SIM	Base	CY 2015 Projected	CY 2015 Projected Post SIM	Base	CY 2015 Projected	CY 2015 Projected Post SIM
Member Months	79,634	79,634	79,634	7,904	7,904	7,904	87,538	87,538	87,538
Spend Summary									
Hospital Inpatient	\$2,535,060	\$2,855,449	\$2,763,014	\$2,505,368	\$2,822,004	\$2,624,103	\$5,040,428	\$5,677,453	\$5,387,117
Skilled Nursing Facility & Intermediate Care Facility	178,680,891	201,263,162	195,408,450	18,057,354	20,339,501	18,418,533	196,738,244	221,602,662	213,826,983
Hospital Outpatient	3,057,970	3,444,446	3,450,604	2,242,351	2,525,747	2,493,519	5,300,321	5,970,193	5,944,123
Professional and Other State Plan Services	12,180,000	13,719,348	14,247,084	5,794,825	6,527,193	6,654,559	17,974,824	20,246,541	20,901,642
Prescription Drugs	669,658	754,292	748,578	5,272,357	5,938,695	5,853,124	5,942,015	6,692,986	6,601,702
Mental Health Center	2,164,617	2,438,188	2,555,962	570,766	642,901	671,777	2,735,383	3,081,090	3,227,739
State Plan Services - DCYF	0	0	0	2,415	2,720	2,463	2,415	2,720	2,463
State Plan Services - BDS	25,264	28,457	28,820	35,811	40,337	37,632	61,074	68,793	66,453
Waiver Services - BDS	181,866	204,851	207,183	253,985	286,085	276,224	435,851	490,935	483,408
Waiver Services - BEAS	43,237,681	48,702,200	51,197,864	8,202,170	9,238,787	9,708,656	51,439,851	57,940,986	60,906,520
Medicaid to School Program	12,884	14,512	15,267	548,927	618,302	560,546	561,811	632,815	575,813
Total Medicaid Spend									
Medicare Services	145,031,697	183,099,176	175,832,212	0	0	0	145,031,697	183,099,176	175,832,212
Other Private Insurance	693,511	943,514	905,163	654,652	890,647	846,587	1,348,163	1,834,161	1,751,750
Total	\$388,471,099	\$457,467,594	\$447,360,203	\$44,140,980	\$49,872,918	\$48,147,723	\$432,612,079	\$507,340,513	\$495,507,926
Total Savings (\$)			\$10,107,391			\$1,725,195			\$11,832,587
Total Savings (%)			2.2%			3.5%			2.3%

Appendix A - 4b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Blended Choices For Independence Waiver Enrollees and Nursing Home Residents

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015 Projected	CY 2015 Projected Post SIM	Base	CY 2015 Projected	CY 2015 Projected Post SIM	Base	CY 2015 Projected	CY 2015 Projected Post SIM
Member Months	79,634	79,634	79,634	7,904	7,904	7,904	87,538	87,538	87,538
Spend Summary									
Hospital Inpatient	\$31.83	\$35.86	\$34.70	\$316.97	\$357.03	\$332.00	\$57.58	\$64.86	\$61.54
Skilled Nursing Facility & Intermediate Care Facility	2,243.78	2,527.35	2,453.83	2,284.58	2,573.32	2,330.28	2,247.46	2,531.50	2,442.68
Hospital Outpatient	38.40	43.25	43.33	283.70	319.55	315.48	60.55	68.20	67.90
Professional and Other State Plan Services	152.95	172.28	178.91	733.15	825.81	841.92	205.34	231.29	238.77
Prescription Drugs	8.41	9.47	9.40	667.05	751.35	740.53	67.88	76.46	75.42
Mental Health Center	27.18	30.62	32.10	72.21	81.34	84.99	31.25	35.20	36.87
State Plan Services - DCYF	0.00	0.00	0.00	0.31	0.34	0.31	0.03	0.03	0.03
State Plan Services - BDS	0.32	0.36	0.36	4.53	5.10	4.76	0.70	0.79	0.76
Waiver Services - BDS	2.28	2.57	2.60	32.13	36.19	34.95	4.98	5.61	5.52
Waiver Services - BEAS	542.96	611.58	642.91	1,037.72	1,168.87	1,228.32	587.63	661.90	695.77
Medicaid to School Program	0.16	0.18	0.19	69.45	78.23	70.92	6.42	7.23	6.58
Total Medicaid Spend	3,048.27	3,433.52	3,398.33	5,501.81	6,197.15	5,984.46	3,269.81	3,683.05	3,631.84
Medicare Services	1,821.23	2,299.26	2,208.00	0.00	0.00	0.00	1,656.79	2,091.65	2,008.64
Other Private Insurance	8.71	11.85	11.37	82.83	112.68	107.11	15.40	20.95	20.01
Total	\$4,878.21	\$5,744.63	\$5,617.70	\$5,584.64	\$6,309.83	\$6,091.56	\$4,941.99	\$5,795.66	\$5,660.49
Total Savings (\$)			\$126.92			\$218.27			\$135.17
Total Savings (%)			2.2%			3.5%			2.3%

Appendix A - 5a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 1.7% System Savings Scenario
Population: Developmentally Disabled Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	26,522	26,522	26,522	26,707	26,707	26,707	53,229	53,229	53,229
Spend Summary									
Hospital Inpatient	\$373,381	\$420,570	\$399,541	\$1,234,300	\$1,390,295	\$1,320,781	\$1,607,681	\$1,810,865	\$1,720,322
Skilled Nursing Facility & Intermediate Care Facility	787	887	887	0	0	0	787	887	887
Hospital Outpatient	724,502	816,067	799,746	1,566,453	1,764,427	1,729,138	2,290,955	2,580,494	2,528,884
Professional and Other State Plan Services	3,001,458	3,380,792	3,380,792	13,705,368	15,437,497	15,437,497	16,706,827	18,818,290	18,818,290
Prescription Drugs	399,340	449,809	440,813	5,559,565	6,262,201	6,136,956	5,958,904	6,712,010	6,577,770
Mental Health Center	1,006,886	1,134,140	1,134,140	1,856,939	2,091,625	2,091,625	2,863,825	3,225,765	3,225,765
State Plan Services - DCYF	108,271	121,955	121,955	624,639	703,583	703,583	732,911	825,539	825,539
State Plan Services - BDS	117,825	132,716	132,716	903,526	1,017,716	1,017,716	1,021,350	1,150,432	1,150,432
Waiver Services - BDS	123,908,814	139,568,812	139,568,812	66,620,872	75,040,634	75,040,634	190,529,686	214,609,446	214,609,446
Waiver Services - BEAS	4,258	4,796	4,796	748	806	806	5,006	5,602	5,602
Medicaid to School Program	141,958	159,899	159,899	13,568,070	15,282,847	15,282,847	13,710,028	15,442,746	15,442,746
Total Medicaid Spend	129,787,480	146,190,443	146,144,097	105,640,481	118,991,631	118,761,584	235,427,961	265,182,074	264,905,681
Medicare Services	43,902,436	55,425,814	53,208,781	0	0	0	43,902,436	55,425,814	53,208,781
Other Private Insurance	1,130,139	1,537,541	1,476,040	3,305,758	4,497,448	4,317,550	4,435,897	6,034,989	5,793,589
Total	\$174,820,055	\$203,153,798	\$200,828,918	\$108,946,239	\$123,489,079	\$123,079,133	\$283,766,294	\$326,642,877	\$323,908,051
Total Savings (\$)			\$2,324,880			\$409,945			\$2,734,825
Total Savings (%)			1.1%			0.3%			0.8%

Appendix A - 5b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Developmentally Disabled Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	26,522	26,522	26,522	26,707	26,707	26,707	53,229	53,229	53,229
Spend Summary									
Hospital Inpatient	\$14.08	\$15.86	\$15.06	\$46.22	\$52.06	\$49.45	\$30.20	\$34.02	\$32.32
Skilled Nursing Facility & Intermediate Care Facility	0.03	0.03	0.03	0.00	0.00	0.00	0.01	0.02	0.02
Hospital Outpatient	27.32	30.77	30.15	58.65	66.07	64.74	43.04	48.48	47.51
Professional and Other State Plan Services	113.17	127.47	127.47	513.18	578.03	578.03	313.87	353.53	353.53
Prescription Drugs	15.06	16.96	16.62	208.17	234.48	229.79	111.95	126.10	123.57
Mental Health Center	37.96	42.76	42.76	69.53	78.32	78.32	53.80	60.60	60.60
State Plan Services - DCYF	4.08	4.60	4.60	23.39	26.34	26.34	13.77	15.51	15.51
State Plan Services - BDS	4.44	5.00	5.00	33.83	38.11	38.11	19.19	21.61	21.61
Waiver Services - BDS	4,671.93	5,262.38	5,262.38	2,494.51	2,809.77	2,809.77	3,579.43	4,031.81	4,031.81
Waiver Services - BEAS	0.16	0.18	0.18	0.03	0.03	0.03	0.09	0.11	0.11
Medicaid to School BEAS	5.35	6.03	6.03	508.03	572.24	572.24	257.57	290.12	290.12
Total Medicaid Spend	4,893.58	5,512.04	5,510.30	3,955.54	4,455.45	4,446.83	4,422.93	4,981.91	4,976.72
Medicare Services	1,655.32	2,089.81	2,006.21	0.00	0.00	0.00	824.78	1,041.27	999.62
Other Private Insurance	42.61	57.97	55.65	123.78	168.40	161.66	83.34	113.38	108.84
Total	\$6,591.51	\$7,659.82	\$7,572.16	\$4,079.31	\$4,623.85	\$4,608.50	\$5,331.05	\$6,136.56	\$6,085.18
Total Savings (\$)			\$87.66			\$15.35			\$51.38
Total Savings (%)			1.1%			0.3%			0.8%

Appendix A - 6a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 1.7% System Savings Scenario
Population: Acquired Brain Disorder Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	Projected
Member Months	1,810	1,810	1,810	462	462	462	2,272	2,272	2,272
Spend Summary									
Hospital Inpatient	\$46,691	\$52,592	\$49,963	\$57,442	\$64,702	\$61,467	\$104,133	\$117,294	\$111,429
Skilled Nursing Facility & Intermediate Care Facility	33	37	37	0	0	0	33	37	37
Hospital Outpatient	77,676	87,493	85,743	59,908	67,480	66,130	137,584	154,973	151,873
Professional and Other State Plan Services	299,638	337,507	337,507	194,104	218,635	218,635	493,742	556,143	556,143
Prescription Drugs	26,521	29,872	29,275	222,667	250,808	245,792	249,187	280,681	275,067
Mental Health Center	39,349	44,322	44,322	6,310	7,108	7,108	45,659	51,430	51,430
State Plan Services - DCYF	0	0	0	0	0	0	0	0	0
State Plan Services - BDS	6,462	7,279	7,279	512	577	577	6,974	7,856	7,856
Waiver Services - BDS	14,284,040	16,089,303	16,089,303	3,466,346	3,904,435	3,904,435	17,750,386	19,993,737	19,993,737
Waiver Services - BEAS	3,261	3,673	3,673	0	0	0	3,261	3,673	3,673
Medicaid to School Program	0	0	0	0	0	0	0	0	0
Total Medicaid Spend	14,783,670	16,652,078	16,647,101	4,007,291	4,513,745	4,504,144	18,790,960	21,165,823	21,151,245
Medicare Services	4,661,423	5,884,940	5,649,542	0	0	0	4,661,423	5,884,940	5,649,542
Other Private Insurance	290,190	394,800	379,008	34,642	47,130	45,245	324,832	441,930	424,253
Total	\$19,735,283	\$22,931,818	\$22,675,651	\$4,041,933	\$4,560,875	\$4,549,389	\$23,777,216	\$27,492,693	\$27,225,041
Total Savings (\$)			\$256,166			\$11,486			\$267,653
Total Savings (%)			1.1%			0.3%			1.0%

Appendix A - 6b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Acquired Brain Disorder Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	Projected
Member Months	1,810	1,810	1,810	462	462	462	2,272	2,272	2,272
Spend Summary									
Hospital Inpatient	\$25.80	\$29.06	\$27.60	\$124.33	\$140.05	\$133.04	\$45.83	\$51.63	\$49.04
Skilled Nursing Facility & Intermediate Care Facility	0.02	0.02	0.02	0.00	0.00	0.00	0.01	0.02	0.02
Hospital Outpatient	42.91	48.34	47.37	129.67	146.06	143.14	60.56	68.21	66.85
Professional and Other State Plan Services	165.55	186.47	186.47	420.14	473.24	473.24	217.32	244.78	244.78
Prescription Drugs	14.65	16.50	16.17	481.96	542.88	532.02	109.68	123.54	121.07
Mental Health Center	21.74	24.49	24.49	13.66	15.39	15.39	20.10	22.64	22.64
State Plan Services - DCYF	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
State Plan Services - BDS	3.57	4.02	4.02	1.11	1.25	1.25	3.07	3.46	3.46
Waiver Services - BDS	7,891.73	8,889.12	8,889.12	7,502.91	8,451.16	8,451.16	7,812.67	8,800.06	8,800.06
Waiver Services - BEAS	1.80	2.03	2.03	0.00	0.00	0.00	1.44	1.62	1.62
Medicaid to School Program	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Medicaid Spend	8,167.77	9,200.04	9,197.29	8,673.79	9,770.01	9,749.23	8,270.67	9,315.94	9,309.53
Medicare Services	2,575.37	3,251.35	3,121.29	0.00	0.00	0.00	2,051.68	2,590.20	2,486.59
Other Private Insurance	160.33	218.12	209.40	74.98	102.01	97.93	142.97	194.51	186.73
Total	\$10,903.47	\$12,669.51	\$12,527.98	\$8,748.77	\$9,872.02	\$9,847.16	\$10,465.32	\$12,100.66	\$11,982.85
Total Savings (\$)			\$141.53			\$24.86			\$117.80
Total Savings (%)			1.1%			0.3%			1.0%

Appendix A - 7a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 1.7% System Savings Scenario
Population: In Home Supports Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	Projected
Member Months	12	12	12	3,519	3,519	3,519	3,531	3,531	3,531
Spend Summary									
Hospital Inpatient	\$0	\$0	\$0	\$225,952	\$254,508	\$241,783	\$225,952	\$254,508	\$241,783
Skilled Nursing Facility & Intermediate Care Facility	0	0	0	0	0	0	0	0	0
Hospital Outpatient	0	0	0	163,377	184,025	180,344	163,377	184,025	180,344
Professional and Other State Plan Services	150	169	169	1,208,351	1,361,066	1,361,066	1,208,501	1,361,235	1,361,235
Prescription Drugs	479	540	529	623,661	702,481	688,431	624,140	703,021	688,961
Mental Health Center	1,118	1,260	1,260	324,322	365,311	365,311	325,441	366,571	366,571
State Plan Services - DCYF	0	0	0	52,937	59,627	59,627	52,937	59,627	59,627
State Plan Services - BDS	0	0	0	12,761	14,374	14,374	12,761	14,374	14,374
Waiver Services - BDS	19,583	22,058	22,058	5,036,474	5,673,000	5,673,000	5,056,057	5,695,057	5,695,057
Waiver Services - BEAS	0	0	0	0	0	0	0	0	0
Medicaid to School Program	8,163	9,195	9,195	4,577,380	5,155,884	5,155,884	4,585,543	5,165,078	5,165,078
Total Medicaid Spend	29,493	33,221	33,210	12,225,215	13,770,277	13,739,822	12,254,708	13,803,498	13,773,032
Medicare Services	25,362	32,019	30,738	0	0	0	25,362	32,019	30,738
Other Private Insurance	0	0	0	625,001	850,307	816,294	625,001	850,307	816,294
Total	\$54,855	\$65,240	\$63,948	\$12,850,216	\$14,620,584	\$14,556,116	\$12,905,071	\$14,685,824	\$14,620,064
Total Savings (\$)			\$1,292			\$64,468			\$65,759
Total Savings (%)			2.0%			0.4%			0.4%

Appendix A - 7b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: In Home Supports Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	Projected
Member Months	12	12	12	3,519	3,519	3,519	3,531	3,531	3,531
Spend Summary									
Hospital Inpatient	\$0.00	\$0.00	\$0.00	\$64.21	\$72.32	\$68.71	\$63.99	\$72.08	\$68.47
Skilled Nursing Facility & Intermediate Care Facility	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Hospital Outpatient	0.00	0.00	0.00	46.43	52.29	51.25	46.27	52.12	51.07
Professional and Other State Plan Services	12.50	14.08	14.08	343.38	386.78	386.78	342.25	385.51	385.51
Prescription Drugs	39.96	45.01	44.11	177.23	199.63	195.63	176.76	199.10	195.12
Mental Health Center	93.19	104.97	104.97	92.16	103.81	103.81	92.17	103.82	103.82
State Plan Services - DCYF	0.00	0.00	0.00	15.04	16.94	16.94	14.99	16.89	16.89
State Plan Services - BDS	0.00	0.00	0.00	3.63	4.08	4.08	3.61	4.07	4.07
Waiver Services - BDS	1,631.88	1,838.13	1,838.13	1,431.22	1,612.11	1,612.11	1,431.91	1,612.87	1,612.87
Waiver Services - BEAS	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Medicaid to School Program	680.25	766.22	766.22	1,300.76	1,465.16	1,465.16	1,298.65	1,462.78	1,462.78
Total Medicaid Spend	2,457.78	2,768.40	2,767.50	3,474.06	3,913.12	3,904.47	3,470.61	3,909.23	3,900.60
Medicare Services	2,113.50	2,668.25	2,561.52	0.00	0.00	0.00	7.18	9.07	8.71
Other Private Insurance	0.00	0.00	0.00	177.61	241.63	231.97	177.00	240.81	231.18
Total	\$4,571.28	\$5,436.65	\$5,329.02	\$3,651.67	\$4,154.76	\$4,136.44	\$3,654.79	\$4,159.11	\$4,140.49
Total Savings (\$)			\$107.63			\$18.32			\$18.62
Total Savings (%)			2.0%			0.4%			0.4%

Appendix A - 8a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 1.7% System Savings Scenario
Population: Bureau of Behavioral Health Consumers

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
		Post SIM	Post SIM		Post SIM	Post SIM		Post SIM	Post SIM
Member Months	24,040	24,040	24,040	74,603	74,603	74,603	98,643	98,643	98,643
Spend Summary									
Hospital Inpatient	\$623,159	\$701,916	\$666,821	\$5,768,082	\$6,497,071	\$6,172,218	\$6,391,242	\$7,198,988	\$6,839,038
Skilled Nursing Facility & Intermediate Care Facility	236	266	266	0	0	0	236	266	266
Hospital Outpatient	1,430,345	1,611,116	1,578,894	5,262,521	5,927,615	5,809,063	6,692,866	7,538,732	7,387,957
Professional and Other State Plan Services	1,254,028	1,412,517	1,412,517	8,300,988	9,350,094	9,350,094	9,555,017	10,762,611	10,762,611
Prescription Drugs	549,316	618,741	606,366	16,060,757	18,090,568	17,728,757	16,610,074	18,709,309	18,335,122
Mental Health Center	23,773,932	26,778,559	26,778,559	43,924,469	49,475,785	49,475,785	67,698,401	76,254,344	76,254,344
State Plan Services - DCYF	5,888	6,633	6,633	5,927,261	6,676,368	6,676,368	5,933,150	6,683,000	6,683,000
State Plan Services - BDS	8,653	9,747	9,747	97,446	109,761	109,761	106,099	119,508	119,508
Waiver Services - BDS	6,186	6,968	6,968	159,630	179,805	179,805	165,817	186,773	186,773
Waiver Services - BEAS	1,780	2,005	2,005	0	0	0	1,780	2,005	2,005
Medicaid to School Program	26,090	29,387	29,387	4,194,375	4,724,473	4,724,473	4,220,464	4,753,860	4,753,860
Total Medicaid Spend	27,679,615	31,177,855	31,098,162	89,695,529	101,031,541	100,226,324	117,375,144	132,209,396	131,324,486
Medicare Services	33,776,814	42,642,449	40,936,751	0	0	0	33,776,814	42,642,449	40,936,751
Other Private Insurance	60,486	82,290	78,998	1,813,238	2,466,890	2,368,214	1,873,723	2,549,180	2,447,213
Total	\$61,516,914	\$73,902,593	\$72,113,911	\$91,508,767	\$103,498,431	\$102,594,538	\$153,025,681	\$177,401,025	\$174,708,449
Total Savings (\$)			\$1,788,683			\$903,893			\$2,692,575
Total Savings (%)			2.4%			0.9%			1.5%

Appendix A - 8b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Bureau of Behavioral Health Consumers

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
		Post SIM	Post SIM		Post SIM	Post SIM		Post SIM	Post SIM
Member Months	24,040	24,040	24,040	74,603	74,603	74,603	98,643	98,643	98,643
Spend Summary									
Hospital Inpatient	\$25.92	\$29.20	\$27.74	\$77.32	\$87.09	\$82.73	\$64.79	\$72.98	\$69.33
Skilled Nursing Facility & Intermediate Care Facility	0.01	0.01	0.01	0.00	0.00	0.00	0.00	0.00	0.00
Hospital Outpatient	59.50	67.02	65.68	70.54	79.46	77.87	67.85	76.42	74.90
Professional and Other State Plan Services	52.16	58.76	58.76	111.27	125.33	125.33	96.86	109.11	109.11
Prescription Drugs	22.85	25.74	25.22	215.28	242.49	237.64	168.39	189.67	185.87
Mental Health Center	988.93	1,113.92	1,113.92	588.78	663.19	663.19	686.30	773.03	773.03
State Plan Services - DCYF	0.24	0.28	0.28	79.45	89.49	89.49	60.15	67.75	67.75
State Plan Services - BDS	0.36	0.41	0.41	1.31	1.47	1.47	1.08	1.21	1.21
Waiver Services - BDS	0.26	0.29	0.29	2.14	2.41	2.41	1.68	1.89	1.89
Waiver Services - BEAS	0.07	0.08	0.08	0.00	0.00	0.00	0.02	0.02	0.02
Medicaid to School Program	1.09	1.22	1.22	56.22	63.33	63.33	42.79	48.19	48.19
Total Medicaid Spend	1,151.40	1,296.92	1,293.60	1,202.30	1,354.26	1,343.46	1,189.90	1,340.28	1,331.31
Medicare Services	1,405.03	1,773.81	1,702.86	0.00	0.00	0.00	342.41	432.29	415.00
Other Private Insurance	2.52	3.42	3.29	24.31	33.07	31.74	18.99	25.84	24.81
Total	\$2,558.94	\$3,074.15	\$2,999.75	\$1,226.61	\$1,387.32	\$1,375.21	\$1,551.31	\$1,798.41	\$1,771.12
Total Savings (\$)			\$74.40			\$12.12			\$27.30
Total Savings (%)			2.4%			0.9%			1.5%



Appendix B

3.6% System Savings Scenario

Appendix B - 1a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 3.6% System Savings Scenario
Population: Total

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	132,018	132,018	132,018	113,195	113,195	113,195	245,213	245,213	245,213
Medicaid Spend Summary									
Hospital Inpatient	\$3,578,292	\$4,030,528	\$3,722,850	\$9,791,144	\$11,028,580	\$9,818,100	\$13,369,436	\$15,059,108	\$13,540,951
Skilled Nursing Facility & Intermediate Care Facility	178,681,947	201,264,352	189,554,928	18,057,354	20,339,501	16,497,565	196,739,301	221,603,852	206,052,494
Hospital Outpatient	5,290,492	5,959,122	5,745,544	9,294,610	10,469,293	9,876,216	14,585,103	16,428,415	15,621,759
Professional and Other State Plan Services	16,735,274	18,850,333	19,109,572	29,203,636	32,894,487	31,823,248	45,938,911	51,744,819	50,932,821
Prescription Drugs	1,645,314	1,853,254	1,760,038	27,739,007	31,244,753	29,433,764	29,384,321	33,098,007	31,193,802
Mental Health Center	26,985,902	30,396,468	30,632,015	46,682,806	52,582,731	52,640,482	73,668,709	82,979,199	83,272,497
State Plan Services - DCYF	114,160	128,588	128,588	6,607,252	7,442,298	7,441,785	6,721,412	7,570,886	7,570,373
State Plan Services - BDS	158,204	178,198	178,925	1,050,056	1,182,766	1,177,357	1,208,260	1,360,964	1,356,282
Waiver Services - BDS	138,400,488	155,891,991	155,896,657	75,537,308	85,083,958	85,064,238	213,937,796	240,975,949	240,960,894
Waiver Services - BEAS	43,246,980	48,712,674	53,704,003	8,202,918	9,239,592	10,179,330	51,449,898	57,952,266	63,883,334
Medicaid to School Program	189,094	212,993	214,502	22,888,752	25,781,507	25,665,994	23,077,846	25,994,500	25,880,497
Total Medicaid Spend	415,026,148	467,478,500	460,647,624	255,054,844	287,289,466	279,618,080	670,080,992	754,767,966	740,265,704
Medicare Services	227,397,732	287,084,398	264,226,902	0	0	0	227,397,732	287,084,398	264,226,902
Other Private Insurance	2,174,325	2,958,145	2,720,324	6,433,291	8,752,422	8,036,063	8,607,616	11,710,567	10,756,387
Total	\$644,598,206	\$757,521,043	\$727,594,850	\$261,488,135	\$296,041,887	\$287,654,143	\$906,086,340	\$1,053,562,931	\$1,015,248,992
Total Savings (\$)			\$29,926,194			\$8,387,745			\$38,313,939
Total Savings (%)			4.0%			2.8%			3.6%

Appendix B - 1b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Total

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	132,018	132,018	132,018	113,195	113,195	113,195	245,213	245,213	245,213
Spend Summary									
Hospital Inpatient	\$27.10	\$30.53	\$28.20	\$86.50	\$97.43	\$86.74	\$54.52	\$61.41	\$55.22
Skilled Nursing Facility & Intermediate Care Facility	1,353.47	1,524.52	1,435.83	159.52	179.69	145.74	802.32	903.72	840.30
Hospital Outpatient	40.07	45.14	43.52	82.11	92.49	87.25	59.48	67.00	63.71
Professional and Other State Plan Services	126.77	142.79	144.75	257.99	290.60	281.14	187.34	211.02	207.71
Prescription Drugs	12.46	14.04	13.33	245.06	276.03	260.03	119.83	134.98	127.21
Mental Health Center	204.41	230.24	232.03	412.41	464.53	465.04	300.43	338.40	339.59
State Plan Services - DCYF	0.86	0.97	0.97	58.37	65.75	65.74	27.41	30.87	30.87
State Plan Services - BDS	1.20	1.35	1.36	9.28	10.45	10.40	4.93	5.55	5.53
Waiver Services - BDS	1,048.35	1,180.84	1,180.87	667.32	751.66	751.48	872.46	982.72	982.66
Waiver Services - BEAS	327.58	368.99	406.79	72.47	81.63	89.93	209.82	236.33	260.52
Medicaid to School BEAS	1.43	1.61	1.62	202.21	227.76	226.74	94.11	106.01	105.54
Total Medicaid Spend	3,144	3,541	3,489	2,253	2,538	2,470	2,733	3,078	3,019
Medicare Services	1,722.48	2,174.59	2,001.45	0.00	0.00	0.00	927.35	1,170.76	1,077.54
Other Private Insurance	16.47	22.41	20.61	56.83	77.32	70.99	35.10	47.76	43.87
Total	\$4,882.65	\$5,738.01	\$5,511.33	\$2,310.07	\$2,615.33	\$2,541.23	\$3,695.10	\$4,296.52	\$4,140.27
Total Savings (\$)			\$226.68			\$74.10			\$156.25
Total Savings (%)			4.0%			2.8%			3.6%

Appendix B - 2a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 3.6% System Savings Scenario
Population: Choices For Independence Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	28,568	28,568	31,540	5,097	5,097	5,627	33,665	33,665	37,167
Spend Summary									
Hospital Inpatient	\$1,489,398	\$1,677,632	\$1,666,933	\$1,253,184	\$1,411,565	\$1,402,563	\$2,742,582	\$3,089,198	\$3,069,496
Skilled Nursing Facility & Intermediate Care Facility	16,868	19,000	20,976	0	0	0	16,868	19,000	20,976
Hospital Outpatient	1,935,225	2,179,805	2,262,166	1,559,122	1,756,168	1,822,523	3,494,347	3,935,974	4,084,688
Professional and Other State Plan Services	10,145,856	11,428,122	12,112,255	4,508,933	5,078,787	5,382,823	14,654,789	16,506,909	17,495,078
Prescription Drugs	344,914	388,505	403,184	3,605,330	4,060,983	4,214,421	3,950,244	4,449,488	4,617,605
Mental Health Center	2,065,636	2,326,697	2,568,732	543,105	611,744	675,381	2,608,741	2,938,442	3,244,113
State Plan Services - DCYF	0	0	0	0	0	0	0	0	0
State Plan Services - BDS	13,043	14,691	16,220	6,700	7,547	8,332	19,743	22,239	24,552
Waiver Services - BDS	90,778	102,251	112,888	104,014	117,160	129,348	194,792	219,411	242,235
Waiver Services - BEAS	42,827,690	48,240,392	53,258,597	8,137,532	9,165,980	10,119,470	50,965,222	57,406,372	63,378,067
Medicaid to School Program	12,884	14,512	16,022	3,876	4,366	4,820	16,760	18,878	20,841
Total Medicaid Spend	58,942,290	66,391,608	72,437,971	19,721,796	22,214,300	23,759,681	78,664,086	88,605,909	96,197,652
Medicare Services	52,608,720	66,417,296	67,460,244	0	0	0	52,608,720	66,417,296	67,460,244
Other Private Insurance	243,030	330,640	335,832	378,069	514,359	522,436	621,099	844,999	858,268
Total	\$111,794,040	\$133,139,545	\$140,234,048	\$20,099,865	\$22,728,659	\$24,282,117	\$131,893,905	\$155,868,204	\$164,516,164
Total Savings (\$)			-\$7,094,503			-\$1,553,457			-\$8,647,960
Total Savings (%)			-5.3%			-6.8%			-5.5%

Appendix B - 2b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Choices For Independence Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	28,568	28,568	31,540	5,097	5,097	5,627	33,665	33,665	37,167
Spend Summary									
Hospital Inpatient	\$52.14	\$58.72	\$52.85	\$245.87	\$276.94	\$249.25	\$81.47	\$91.76	\$82.59
Skilled Nursing Facility & Intermediate Care Facility	0.59	0.67	0.67	0.00	0.00	0.00	0.50	0.56	0.56
Hospital Outpatient	67.74	76.30	71.72	305.89	344.55	323.88	103.80	116.92	109.90
Professional and Other State Plan Services	355.15	400.03	384.03	884.62	996.43	956.57	435.31	490.33	470.72
Prescription Drugs	12.07	13.60	12.78	707.34	796.74	748.94	117.34	132.17	124.24
Mental Health Center	72.31	81.44	81.44	106.55	120.02	120.02	77.49	87.28	87.28
State Plan Services - DCYF	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
State Plan Services - BDS	0.46	0.51	0.51	1.31	1.48	1.48	0.59	0.66	0.66
Waiver Services - BDS	3.18	3.58	3.58	20.41	22.99	22.99	5.79	6.52	6.52
Waiver Services - BEAS	1,499.15	1,688.62	1,688.62	1,596.53	1,798.31	1,798.31	1,513.89	1,705.22	1,705.22
Medicaid to School Program	0.45	0.51	0.51	0.76	0.86	0.86	0.50	0.56	0.56
Total Medicaid Spend	2,063.23	2,323.99	2,296.72	3,869.29	4,358.31	4,222.28	2,336.67	2,631.99	2,588.25
Medicare Services	1,841.53	2,324.88	2,138.89	0.00	0.00	0.00	1,562.71	1,972.89	1,815.06
Other Private Insurance	8.51	11.57	10.65	74.17	100.91	92.84	18.45	25.10	23.09
Total	\$3,913.26	\$4,660.44	\$4,446.26	\$3,943.47	\$4,459.22	\$4,315.12	\$3,917.83	\$4,629.98	\$4,426.40
Total Savings (\$)			\$214.18			\$144.10			\$203.57
Total Savings (%)			4.6%			3.2%			4.4%

Appendix B - 3a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 3.6% System Savings Scenario
Population: Nursing Home Residents

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	51,066	51,066	48,094	2,807	2,807	2,277	53,873	53,873	50,371
Spend Summary									
Hospital Inpatient	\$1,045,663	\$1,177,817	\$998,346	\$1,252,184	\$1,410,439	\$1,029,618	\$2,297,846	\$2,588,256	\$2,027,965
Skilled Nursing Facility & Intermediate Care Facility	178,664,023	201,244,162	189,532,762	18,057,354	20,339,501	16,497,565	196,721,377	221,583,663	206,030,328
Hospital Outpatient	1,122,745	1,264,641	1,119,582	683,230	769,579	586,760	1,805,974	2,034,219	1,706,342
Professional and Other State Plan Services	2,034,144	2,291,226	2,071,572	1,285,891	1,448,407	1,127,824	3,320,035	3,739,632	3,199,396
Prescription Drugs	324,744	365,787	323,830	1,667,027	1,877,712	1,431,648	1,991,772	2,243,498	1,755,478
Mental Health Center	98,981	111,491	105,003	27,661	31,157	25,272	126,642	142,648	130,274
State Plan Services - DCYF	0	0	0	2,415	2,720	2,206	2,415	2,720	2,206
State Plan Services - BDS	12,221	13,765	12,964	29,110	32,789	26,596	41,331	46,555	39,560
Waiver Services - BDS	91,088	102,600	96,629	149,971	168,925	137,016	241,059	271,524	233,645
Waiver Services - BEAS	409,991	461,807	434,932	64,638	72,807	59,054	474,629	534,614	493,987
Medicaid to School Program	0	0	0	545,052	613,937	497,970	545,052	613,937	497,970
Total Medicaid Spend	183,803,600	207,033,295	194,695,621	23,764,532	26,767,971	21,421,531	207,568,132	233,801,266	216,117,152
Medicare Services	92,422,978	116,681,880	101,100,254	0	0	0	92,422,978	116,681,880	101,100,254
Other Private Insurance	450,481	612,874	531,031	276,583	376,288	280,794	727,064	989,162	811,825
Total	\$276,677,058	\$324,328,050	\$296,326,907	\$24,041,115	\$27,144,259	\$21,702,324	\$300,718,173	\$351,472,308	\$318,029,231
Total Savings (\$)			\$28,001,143			\$5,441,934			\$33,443,077
Total Savings (%)			8.6%			20.0%			9.5%

Appendix B - 3b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Nursing Home Residents

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	51,066	51,066	48,094	2,807	2,807	2,277	53,873	53,873	50,371
Spend Summary									
Hospital Inpatient	\$20.48	\$23.06	\$20.76	\$446.09	\$502.47	\$452.22	\$42.65	\$48.04	\$40.26
Skilled Nursing Facility & Intermediate Care Facility	3,498.69	3,940.86	3,940.86	6,432.97	7,245.99	7,245.99	3,651.58	4,113.07	4,090.26
Hospital Outpatient	21.99	24.76	23.28	243.40	274.16	257.71	33.52	37.76	33.88
Professional and Other State Plan Services	39.83	44.87	43.07	458.10	516.00	495.36	61.63	69.42	63.52
Prescription Drugs	6.36	7.16	6.73	593.88	668.94	628.80	36.97	41.64	34.85
Mental Health Center	1.94	2.18	2.18	9.85	11.10	11.10	2.35	2.65	2.59
State Plan Services - DCYF	0.00	0.00	0.00	0.86	0.97	0.97	0.04	0.05	0.04
State Plan Services - BDS	0.24	0.27	0.27	10.37	11.68	11.68	0.77	0.86	0.79
Waiver Services - BDS	1.78	2.01	2.01	53.43	60.18	60.18	4.47	5.04	4.64
Waiver Services - BEAS	8.03	9.04	9.04	23.03	25.94	25.94	8.81	9.92	9.81
Medicaid to School Program	0.00	0.00	0.00	194.18	218.72	218.72	10.12	11.40	9.89
Total Medicaid Spend	3,599.33	4,054.23	4,048.21	8,466.17	9,536.15	9,408.68	3,852.92	4,339.86	4,290.51
Medicare Services	1,809.87	2,284.92	2,102.13	0.00	0.00	0.00	1,715.57	2,165.87	2,007.11
Other Private Insurance	8.82	12.00	11.04	98.53	134.05	123.33	13.50	18.36	16.12
Total	\$5,418.03	\$6,351.15	\$6,161.38	\$8,564.70	\$9,670.20	\$9,532.01	\$5,581.98	\$6,524.09	\$6,313.74
Total Savings (\$)			\$189.77			\$138.20			\$210.35
Total Savings (%)			3.0%			1.4%			3.2%

Appendix B - 4a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 3.6% System Savings Scenario
Population: Blended Choices For Independence Waiver Enrollees and Nursing Home Residents

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015 Projected	CY 2015 Projected Post SIM	Base	CY 2015 Projected	CY 2015 Projected Post SIM	Base	CY 2015 Projected	CY 2015 Projected Post SIM
Member Months	79,634	79,634	79,634	7,904	7,904	7,904	87,538	87,538	87,538
Spend Summary									
Hospital Inpatient	\$2,535,060	\$2,855,449	\$2,665,280	\$2,505,368	\$2,822,004	\$2,432,181	\$5,040,428	\$5,677,453	\$5,097,461
Skilled Nursing Facility & Intermediate Care Facility	178,680,891	201,263,162	189,553,738	18,057,354	20,339,501	16,497,565	196,738,244	221,602,662	206,051,304
Hospital Outpatient	3,057,970	3,444,446	3,381,748	2,242,351	2,525,747	2,409,282	5,300,321	5,970,193	5,791,030
Professional and Other State Plan Services	12,180,000	13,719,348	14,183,827	5,794,825	6,527,193	6,510,647	17,974,824	20,246,541	20,694,474
Prescription Drugs	669,658	754,292	727,014	5,272,357	5,938,695	5,646,069	5,942,015	6,692,986	6,373,083
Mental Health Center	2,164,617	2,438,188	2,673,735	570,766	642,901	700,653	2,735,383	3,081,090	3,374,387
State Plan Services - DCYF	0	0	0	2,415	2,720	2,206	2,415	2,720	2,206
State Plan Services - BDS	25,264	28,457	29,184	35,811	40,337	34,928	61,074	68,793	64,112
Waiver Services - BDS	181,866	204,851	209,516	253,985	286,085	266,364	435,851	490,935	475,880
Waiver Services - BEAS	43,237,681	48,702,200	53,693,529	8,202,170	9,238,787	10,178,525	51,439,851	57,940,986	63,872,054
Medicaid to School Program	12,884	14,512	16,022	548,927	618,302	502,790	561,811	632,815	518,812
Total Medicaid Spend									
Medicare Services	145,031,697	183,099,176	168,560,498	0	0	0	145,031,697	183,099,176	168,560,498
Other Private Insurance	693,511	943,514	866,863	654,652	890,647	803,230	1,348,163	1,834,161	1,670,093
Total	\$388,471,099	\$457,467,594	\$436,560,954	\$44,140,980	\$49,872,918	\$45,984,441	\$432,612,079	\$507,340,513	\$482,545,395
Total Savings (\$)			\$20,906,640			\$3,888,477			\$24,795,117
Total Savings (%)			4.6%			7.8%			4.9%

Appendix B - 4b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Blended Choices For Independence Waiver Enrollees and Nursing Home Residents

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015 Projected	CY 2015 Projected Post SIM	Base	CY 2015 Projected	CY 2015 Projected Post SIM	Base	CY 2015 Projected	CY 2015 Projected Post SIM
Member Months	79,634	79,634	79,634	7,904	7,904	7,904	87,538	87,538	87,538
Spend Summary									
Hospital Inpatient	\$31.83	\$35.86	\$33.47	\$316.97	\$357.03	\$307.72	\$57.58	\$64.86	\$58.23
Skilled Nursing Facility & Intermediate Care Facility	2,243.78	2,527.35	2,380.31	2,284.58	2,573.32	2,087.24	2,247.46	2,531.50	2,353.85
Hospital Outpatient	38.40	43.25	42.47	283.70	319.55	304.82	60.55	68.20	66.15
Professional and Other State Plan Services	152.95	172.28	178.11	733.15	825.81	823.72	205.34	231.29	236.41
Prescription Drugs	8.41	9.47	9.13	667.05	751.35	714.33	67.88	76.46	72.80
Mental Health Center	27.18	30.62	33.58	72.21	81.34	88.65	31.25	35.20	38.55
State Plan Services - DCYF	0.00	0.00	0.00	0.31	0.34	0.28	0.03	0.03	0.03
State Plan Services - BDS	0.32	0.36	0.37	4.53	5.10	4.42	0.70	0.79	0.73
Waiver Services - BDS	2.28	2.57	2.63	32.13	36.19	33.70	4.98	5.61	5.44
Waiver Services - BEAS	542.96	611.58	674.25	1,037.72	1,168.87	1,287.77	587.63	661.90	729.65
Medicaid to School Program	0.16	0.18	0.20	69.45	78.23	63.61	6.42	7.23	5.93
Total Medicaid Spend	3,048.27	3,433.52	3,354.52	5,501.81	6,197.15	5,716.25	3,269.81	3,683.05	3,567.76
Medicare Services	1,821.23	2,299.26	2,116.69	0.00	0.00	0.00	1,656.79	2,091.65	1,925.57
Other Private Insurance	8.71	11.85	10.89	82.83	112.68	101.62	15.40	20.95	19.08
Total	\$4,878.21	\$5,744.63	\$5,482.09	\$5,584.64	\$6,309.83	\$5,817.87	\$4,941.99	\$5,795.66	\$5,512.41
Total Savings (\$)			\$262.53			\$491.96			\$283.25
Total Savings (%)			4.6%			7.8%			4.9%

Appendix B - 5a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 3.6% System Savings Scenario
Population: Developmentally Disabled Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	Projected
Member Months	26,522	26,522	26,522	26,707	26,707	26,707	53,229	53,229	53,229
Spend Summary									
Hospital Inpatient	\$373,381	\$420,570	\$378,513	\$1,234,300	\$1,390,295	\$1,251,266	\$1,607,681	\$1,810,865	\$1,629,779
Skilled Nursing Facility & Intermediate Care Facility	787	887	887	0	0	0	787	887	887
Hospital Outpatient	724,502	816,067	767,103	1,566,453	1,764,427	1,658,561	2,290,955	2,580,494	2,425,664
Professional and Other State Plan Services	3,001,458	3,380,792	3,245,561	13,705,368	15,437,497	14,819,997	16,706,827	18,818,290	18,065,558
Prescription Drugs	399,340	449,809	422,821	5,559,565	6,262,201	5,886,468	5,958,904	6,712,010	6,309,289
Mental Health Center	1,006,886	1,134,140	1,134,140	1,856,939	2,091,625	2,091,625	2,863,825	3,225,765	3,225,765
State Plan Services - DCYF	108,271	121,955	121,955	624,639	703,583	703,583	732,911	825,539	825,539
State Plan Services - BDS	117,825	132,716	132,716	903,526	1,017,716	1,017,716	1,021,350	1,150,432	1,150,432
Waiver Services - BDS	123,908,814	139,568,812	139,568,812	66,620,872	75,040,634	75,040,634	190,529,686	214,609,446	214,609,446
Waiver Services - BEAS	4,258	4,796	4,796	748	806	806	5,006	5,602	5,602
Medicaid to School Program	141,958	159,899	159,899	13,568,070	15,282,847	15,282,847	13,710,028	15,442,746	15,442,746
Total Medicaid Spend	129,787,480	146,190,443	145,937,202	105,640,481	118,991,631	117,753,504	235,427,961	265,182,074	263,690,706
Medicare Services	43,902,436	55,425,814	50,991,749	0	0	0	43,902,436	55,425,814	50,991,749
Other Private Insurance	1,130,139	1,537,541	1,414,538	3,305,758	4,497,448	4,137,652	4,435,897	6,034,989	5,552,190
Total	\$174,820,055	\$203,153,798	\$198,343,488	\$108,946,239	\$123,489,079	\$121,891,156	\$283,766,294	\$326,642,877	\$320,234,644
Total Savings (\$)			\$4,810,310			\$1,597,923			\$6,408,233
Total Savings (%)			2.4%			1.3%			2.0%

Appendix B - 5b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Developmentally Disabled Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	Projected
Member Months	26,522	26,522	26,522	26,707	26,707	26,707	53,229	53,229	53,229
Spend Summary									
Hospital Inpatient	\$14.08	\$15.86	\$14.27	\$46.22	\$52.06	\$46.85	\$30.20	\$34.02	\$30.62
Skilled Nursing Facility & Intermediate Care Facility	0.03	0.03	0.03	0.00	0.00	0.00	0.01	0.02	0.02
Hospital Outpatient	27.32	30.77	28.92	58.65	66.07	62.10	43.04	48.48	45.57
Professional and Other State Plan Services	113.17	127.47	122.37	513.18	578.03	554.91	313.87	353.53	339.39
Prescription Drugs	15.06	16.96	15.94	208.17	234.48	220.41	111.95	126.10	118.53
Mental Health Center	37.96	42.76	42.76	69.53	78.32	78.32	53.80	60.60	60.60
State Plan Services - DCYF	4.08	4.60	4.60	23.39	26.34	26.34	13.77	15.51	15.51
State Plan Services - BDS	4.44	5.00	5.00	33.83	38.11	38.11	19.19	21.61	21.61
Waiver Services - BDS	4,671.93	5,262.38	5,262.38	2,494.51	2,809.77	2,809.77	3,579.43	4,031.81	4,031.81
Waiver Services - BEAS	0.16	0.18	0.18	0.03	0.03	0.03	0.09	0.11	0.11
Medicaid to School Program	5.35	6.03	6.03	508.03	572.24	572.24	257.57	290.12	290.12
Total Medicaid Spend	4,893.58	5,512.04	5,502.50	3,955.54	4,455.45	4,409.09	4,422.93	4,981.91	4,953.89
Medicare Services	1,655.32	2,089.81	1,922.62	0.00	0.00	0.00	824.78	1,041.27	957.97
Other Private Insurance	42.61	57.97	53.33	123.78	168.40	154.93	83.34	113.38	104.31
Total	\$6,591.51	\$7,659.82	\$7,478.45	\$4,079.31	\$4,623.85	\$4,564.02	\$5,331.05	\$6,136.56	\$6,016.17
Total Savings (\$)			\$181.37			\$59.83			\$120.39
Total Savings (%)			2.4%			1.3%			2.0%

Appendix B - 6a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 3.6% System Savings Scenario
Population: Acquired Brain Disorder Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	1,810	1,810	1,810	462	462	462	2,272	2,272	2,272
Spend Summary									
Hospital Inpatient	\$46,691	\$52,592	\$47,333	\$57,442	\$64,702	\$58,231	\$104,133	\$117,294	\$105,564
Skilled Nursing Facility & Intermediate Care Facility	33	37	37	0	0	0	33	37	37
Hospital Outpatient	77,676	87,493	82,243	59,908	67,480	63,431	137,584	154,973	145,674
Professional and Other State Plan Services	299,638	337,507	324,007	194,104	218,635	209,890	493,742	556,143	533,897
Prescription Drugs	26,521	29,872	28,080	222,667	250,808	235,760	249,187	280,681	263,840
Mental Health Center	39,349	44,322	44,322	6,310	7,108	7,108	45,659	51,430	51,430
State Plan Services - DCYF	0	0	0	0	0	0	0	0	0
State Plan Services - BDS	6,462	7,279	7,279	512	577	577	6,974	7,856	7,856
Waiver Services - BDS	14,284,040	16,089,303	16,089,303	3,466,346	3,904,435	3,904,435	17,750,386	19,993,737	19,993,737
Waiver Services - BEAS	3,261	3,673	3,673	0	0	0	3,261	3,673	3,673
Medicaid to School Program	0	0	0	0	0	0	0	0	0
Total Medicaid Spend	14,783,670	16,652,078	16,626,277	4,007,291	4,513,745	4,479,432	18,790,960	21,165,823	21,105,709
Medicare Services	4,661,423	5,884,940	5,414,145	0	0	0	4,661,423	5,884,940	5,414,145
Other Private Insurance	290,190	394,800	363,216	34,642	47,130	43,360	324,832	441,930	406,576
Total	\$19,735,283	\$22,931,818	\$22,403,637	\$4,041,933	\$4,560,875	\$4,522,792	\$23,777,216	\$27,492,693	\$26,926,429
Total Savings (\$)			\$528,181			\$38,083			\$566,264
Total Savings (%)			2.3%			0.8%			2.1%

Appendix B - 6b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Acquired Brain Disorder Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	1,810	1,810	1,810	462	462	462	2,272	2,272	2,272
Spend Summary									
Hospital Inpatient	\$25.80	\$29.06	\$26.15	\$124.33	\$140.05	\$126.04	\$45.83	\$51.63	\$46.46
Skilled Nursing Facility & Intermediate Care Facility	0.02	0.02	0.02	0.00	0.00	0.00	0.01	0.02	0.02
Hospital Outpatient	42.91	48.34	45.44	129.67	146.06	137.30	60.56	68.21	64.12
Professional and Other State Plan Services	165.55	186.47	179.01	420.14	473.24	454.31	217.32	244.78	234.99
Prescription Drugs	14.65	16.50	15.51	481.96	542.88	510.30	109.68	123.54	116.13
Mental Health Center	21.74	24.49	24.49	13.66	15.39	15.39	20.10	22.64	22.64
State Plan Services - DCYF	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
State Plan Services - BDS	3.57	4.02	4.02	1.11	1.25	1.25	3.07	3.46	3.46
Waiver Services - BDS	7,891.73	8,889.12	8,889.12	7,502.91	8,451.16	8,451.16	7,812.67	8,800.06	8,800.06
Waiver Services - BEAS	1.80	2.03	2.03	0.00	0.00	0.00	1.44	1.62	1.62
Medicaid to School Program	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Medicaid Spend	8,167.77	9,200.04	9,185.79	8,673.79	9,770.01	9,695.74	8,270.67	9,315.94	9,289.48
Medicare Services	2,575.37	3,251.35	2,991.24	0.00	0.00	0.00	2,051.68	2,590.20	2,382.99
Other Private Insurance	160.33	218.12	200.67	74.98	102.01	93.85	142.97	194.51	178.95
Total	\$10,903.47	\$12,669.51	\$12,377.70	\$8,748.77	\$9,872.02	\$9,789.59	\$10,465.32	\$12,100.66	\$11,851.42
Total Savings (\$)			\$291.81			\$82.43			\$249.24
Total Savings (%)			2.3%			0.8%			2.1%

Appendix B - 7a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 3.6% System Savings Scenario
Population: In Home Supports Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015 Projected	CY 2015 Projected Post SIM	Base	CY 2015 Projected	CY 2015 Projected Post SIM	Base	CY 2015 Projected	CY 2015 Projected Post SIM
Member Months	12	12	12	3,519	3,519	3,519	3,531	3,531	3,531
Spend Summary									
Hospital Inpatient	\$0	\$0	\$0	\$225,952	\$254,508	\$229,057	\$225,952	\$254,508	\$229,057
Skilled Nursing Facility & Intermediate Care Facility	0	0	0	0	0	0	0	0	0
Hospital Outpatient	0	0	0	163,377	184,025	172,983	163,377	184,025	172,983
Professional and Other State Plan Services	150	169	162	1,208,351	1,361,066	1,306,624	1,208,501	1,361,235	1,306,786
Prescription Drugs	479	540	508	623,661	702,481	660,332	624,140	703,021	660,840
Mental Health Center	1,118	1,260	1,260	324,322	365,311	365,311	325,441	366,571	366,571
State Plan Services - DCYF	0	0	0	52,937	59,627	59,627	52,937	59,627	59,627
State Plan Services - BDS	0	0	0	12,761	14,374	14,374	12,761	14,374	14,374
Waiver Services - BDS	19,583	22,058	22,058	5,036,474	5,673,000	5,673,000	5,056,057	5,695,057	5,695,057
Waiver Services - BEAS	0	0	0	0	0	0	0	0	0
Medicaid to School Program	8,163	9,195	9,195	4,577,380	5,155,884	5,155,884	4,585,543	5,165,078	5,165,078
Total Medicaid Spend	29,493	33,221	33,182	12,225,215	13,770,277	13,637,193	12,254,708	13,803,498	13,670,375
Medicare Services	25,362	32,019	29,457	0	0	0	25,362	32,019	29,457
Other Private Insurance	0	0	0	625,001	850,307	782,282	625,001	850,307	782,282
Total	\$54,855	\$65,240	\$62,639	\$12,850,216	\$14,620,584	\$14,419,476	\$12,905,071	\$14,685,824	\$14,482,115
Total Savings (\$)			\$2,601			\$201,108			\$203,709
Total Savings (%)			4.0%			1.4%			1.4%

Appendix B - 7b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: In Home Supports Waiver Enrollees

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015 Projected	CY 2015 Projected Post SIM	Base	CY 2015 Projected	CY 2015 Projected Post SIM	Base	CY 2015 Projected	CY 2015 Projected Post SIM
Member Months	12	12	12	3,519	3,519	3,519	3,531	3,531	3,531
Spend Summary									
Hospital Inpatient	\$0.00	\$0.00	\$0.00	\$64.21	\$72.32	\$65.09	\$63.99	\$72.08	\$64.87
Skilled Nursing Facility & Intermediate Care Facility	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Hospital Outpatient	0.00	0.00	0.00	46.43	52.29	49.16	46.27	52.12	48.99
Professional and Other State Plan Services	12.50	14.08	13.52	343.38	386.78	371.31	342.25	385.51	370.09
Prescription Drugs	39.96	45.01	42.31	177.23	199.63	187.65	176.76	199.10	187.15
Mental Health Center	93.19	104.97	104.97	92.16	103.81	103.81	92.17	103.82	103.82
State Plan Services - DCYF	0.00	0.00	0.00	15.04	16.94	16.94	14.99	16.89	16.89
State Plan Services - BDS	0.00	0.00	0.00	3.63	4.08	4.08	3.61	4.07	4.07
Waiver Services - BDS	1,631.88	1,838.13	1,838.13	1,431.22	1,612.11	1,612.11	1,431.91	1,612.87	1,612.87
Waiver Services - BEAS	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Medicaid to School Program	680.25	766.22	766.22	1,300.76	1,465.16	1,465.16	1,298.65	1,462.78	1,462.78
Total Medicaid Spend	2,457.78	2,768.40	2,765.14	3,474.06	3,913.12	3,875.30	3,470.61	3,909.23	3,871.53
Medicare Services	2,113.50	2,668.25	2,454.79	0.00	0.00	0.00	7.18	9.07	8.34
Other Private Insurance	0.00	0.00	0.00	177.61	241.63	222.30	177.00	240.81	221.55
Total	\$4,571.28	\$5,436.65	\$5,219.92	\$3,651.67	\$4,154.76	\$4,097.61	\$3,654.79	\$4,159.11	\$4,101.42
Total Savings (\$)			\$216.72			\$57.15			\$57.69
Total Savings (%)			4.0%			1.4%			1.4%

Appendix B - 8a
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Expenditure Estimates - 3.6% System Savings Scenario
Population: Bureau of Behavioral Health Consumers

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	24,040	24,040	24,040	74,603	74,603	74,603	98,643	98,643	98,643
Spend Summary									
Hospital Inpatient	\$623,159	\$701,916	\$631,725	\$5,768,082	\$6,497,071	\$5,847,364	\$6,391,242	\$7,198,988	\$6,479,089
Skilled Nursing Facility & Intermediate Care Facility	236	266	266	0	0	0	236	266	266
Hospital Outpatient	1,430,345	1,611,116	1,514,449	5,262,521	5,927,615	5,571,958	6,692,866	7,538,732	7,086,408
Professional and Other State Plan Services	1,254,028	1,412,517	1,356,016	8,300,988	9,350,094	8,976,090	9,555,017	10,762,611	10,332,106
Prescription Drugs	549,316	618,741	581,616	16,060,757	18,090,568	17,005,134	16,610,074	18,709,309	17,586,750
Mental Health Center	23,773,932	26,778,559	26,778,559	43,924,469	49,475,785	49,475,785	67,698,401	76,254,344	76,254,344
State Plan Services - DCYF	5,888	6,633	6,633	5,927,261	6,676,368	6,676,368	5,933,150	6,683,000	6,683,000
State Plan Services - BDS	8,653	9,747	9,747	97,446	109,761	109,761	106,099	119,508	119,508
Waiver Services - BDS	6,186	6,968	6,968	159,630	179,805	179,805	165,817	186,773	186,773
Waiver Services - BEAS	1,780	2,005	2,005	0	0	0	1,780	2,005	2,005
Medicaid to School Program	26,090	29,387	29,387	4,194,375	4,724,473	4,724,473	4,220,464	4,753,860	4,753,860
Total Medicaid Spend	27,679,615	31,177,855	30,917,371	89,695,529	101,031,541	98,566,739	117,375,144	132,209,396	129,484,110
Medicare Services	33,776,814	42,642,449	39,231,053	0	0	0	33,776,814	42,642,449	39,231,053
Other Private Insurance	60,486	82,290	75,707	1,813,238	2,466,890	2,269,539	1,873,723	2,549,180	2,345,245
Total	\$61,516,914	\$73,902,593	\$70,224,131	\$91,508,767	\$103,498,431	\$100,836,278	\$153,025,681	\$177,401,025	\$171,060,409
Total Savings (\$)			\$3,678,463			\$2,662,153			\$6,340,616
Total Savings (%)			5.0%			2.6%			3.6%

Appendix B - 8b
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Projection Summaries
Annual Per Member Expenditure Estimates - 1.7% System Savings Scenario
Population: Bureau of Behavioral Health Consumers

	Dual Eligible			Medicaid Only			Total		
	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015	Base	CY 2015	CY 2015
		Projected	Projected		Projected	Projected		Projected	
Member Months	24,040	24,040	24,040	74,603	74,603	74,603	98,643	98,643	98,643
Spend Summary									
Hospital Inpatient	\$25.92	\$29.20	\$26.28	\$77.32	\$87.09	\$78.38	\$64.79	\$72.98	\$65.68
Skilled Nursing Facility & Intermediate Care Facility	0.01	0.01	0.01	0.00	0.00	0.00	0.00	0.00	0.00
Hospital Outpatient	59.50	67.02	63.00	70.54	79.46	74.69	67.85	76.42	71.84
Professional and Other State Plan Services	52.16	58.76	56.41	111.27	125.33	120.32	96.86	109.11	104.74
Prescription Drugs	22.85	25.74	24.19	215.28	242.49	227.94	168.39	189.67	178.29
Mental Health Center	988.93	1,113.92	1,113.92	588.78	663.19	663.19	686.30	773.03	773.03
State Plan Services - DCYF	0.24	0.28	0.28	79.45	89.49	89.49	60.15	67.75	67.75
State Plan Services - BDS	0.36	0.41	0.41	1.31	1.47	1.47	1.08	1.21	1.21
Waiver Services - BDS	0.26	0.29	0.29	2.14	2.41	2.41	1.68	1.89	1.89
Waiver Services - BEAS	0.07	0.08	0.08	0.00	0.00	0.00	0.02	0.02	0.02
Medicaid to School Program	1.09	1.22	1.22	56.22	63.33	63.33	42.79	48.19	48.19
Total Medicaid Spend	1,151.40	1,296.92	1,286.08	1,202.30	1,354.26	1,321.22	1,189.90	1,340.28	1,312.65
Medicare Services	1,405.03	1,773.81	1,631.91	0.00	0.00	0.00	342.41	432.29	397.71
Other Private Insurance	2.52	3.42	3.15	24.31	33.07	30.42	18.99	25.84	23.78
Total	\$2,558.94	\$3,074.15	\$2,921.14	\$1,226.61	\$1,387.32	\$1,351.64	\$1,551.31	\$1,798.41	\$1,734.14
Total Savings (\$)			\$153.01			\$35.68			\$64.28
Total Savings (%)			5.0%			2.6%			3.6%

Appendix A2

Expenditure Decile Summaries for New Hampshire SIM Population



15800 Bluemound Road
Suite 100
Brookfield, WI 53005
USA
Tel +1 262 784 2250
Fax +1 262 923 3680

milliman.com

John D. Meerschaert, FSA, MAAA
Principal and Consulting Actuary

john.meerschaert@milliman.com

December 18, 2013

Ms. Sheri L. Rockburn, CPA, MBA
Director of Finance
Division of Community Based Care Services
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

Re: Expenditure Decile Summaries for New Hampshire SIM Population

Dear Sheri:

The New Hampshire Department of Health and Human Services (DHHS) retained Milliman to provide actuarial support related to New Hampshire's State Health Care Innovation Model (SIM) grant. This letter includes data summaries that can be used to better understand the expenditure profile and the acuity of New Hampshire's SIM population.

SIM POPULATION DEFINITION

We created several data summaries for New Hampshire's "SIM population," defined as Medicaid beneficiaries receiving long term supports and services (LTSS). The SIM population is further categorized into the following populations:

- Choices for Independence (CFI) waiver enrollees
- Developmental Disabilities (DD) waiver enrollees
- Acquired Brain Disorder (ABD) waiver enrollees
- In Home Supports (IHS) waiver enrollees
- Nursing Facility Residents (including skilled nursing facility and intermediate care facility residents)
- Bureau of Behavioral Health (BBH) consumers

The data summaries exclude individuals receiving LTSS outside of the Medicaid system due to data availability issues.

EXPENDITURE DECILE SUMMARIES

We developed "decile summaries" by summarizing total annual expenditures for SFY 2011 and SFY 2012 for each individual and ranking them from least expensive to most expensive. We then assigned each individual one of ten decile groupings based on that ranking system. For example, the 90% - 100% decile group is the most expensive 10% of the population. The 80% - 90% decile is the next most expensive 10% of the population.

Exhibits A1 - A6 show expenditure deciles for the SIM population in total grouped by age as follows:

- Exhibit A1 – Total All Ages
- Exhibit A2 – Ages Under 18
- Exhibit A3 – Ages 19-64
- Exhibit A4 – Ages 65-74
- Exhibit A5 – Ages 75-84
- Exhibit A6 – Ages 85+

Exhibit B1 shows counts of individuals from the SIM populations for each decile while Exhibit B2 shows the distribution for each decile.

We also created a decile summary for the following major populations that will be impacted by the SIM model design:

- Exhibit C1 – CFI waiver enrollees
- Exhibit C2 – DD waiver enrollees
- Exhibit C3 – ABD waiver enrollees
- Exhibit C4 – IHS waiver enrollees
- Exhibit C5 – Nursing home residents
- Exhibit C6 – BBH consumer population

Each exhibit shows total annual expenditures, annual expenditure per member, and per member per month (PMPM) expenditures and allows for the comparison of expenditure distribution by major service category across individuals with various levels of need.

Expenditures are summarized based on the following service categories:

- Medicaid ICF / SNF services
- Medicaid HCBS Waiver services
- Medicaid CMHC services
- Medicaid Hospital Inpatient and Outpatient services
- Medicaid at School services
- Medicaid – Other services
- Medicare services (estimated)
- Third Party Private Payer

Exhibit D provides more information about the services included in the “Medicaid – Other” service category by SIM population for the 90% - 100% decile, the 80% - 90% decile, and all deciles combined.

The Medicare expenditures for dual eligibles represent **estimated** Medicare expenditures for disabled and aged dual eligibles using the CMS 5% sample data for the state of New Hampshire and average Part D pharmacy expenditures. We developed acuity adjustments to adjust the average dual eligible Medicare expenditures to reflect expected acuity differenced based on diagnosis profile and / or the institutionalized status of each SIM population. The acuity adjusted average Medicare PMPM expenditure estimates were assigned to each dual eligible based on their age for each month they were eligible for both Medicaid and Medicare.

The Medicare expenditure estimates do not represent the actual Medicare expenditures for the actual SIM population, but rather represent acuity adjusted average Medicare dual eligible expenditures. We will update our Medicare estimates if we get access to the 100% New Hampshire sample data from CMS during future phases of SIM testing or implementation.

We included expenditures identified in the Medicaid claims data as “third party” payments. The third party payments likely understate the total private payer expenditures for the SIM population. Future analysis will leverage the New Hampshire Comprehensive Health Care Information System (CHIS) data, which is currently undergoing a major update.

DATA RELIANCE AND IMPORTANT CAVEATS

We used FFS Medicaid expenditure and eligibility data for June 2010 through December 2012 and other DHHS information to develop the historical data summaries shown in this letter. This data was provided by DHHS. We have not audited or verified this data and other information. If the underlying data or information is inaccurate or incomplete, the results of our analysis may likewise be inaccurate or incomplete. We performed a limited review of the data used directly in our analysis for reasonableness and consistency and have not found material defects in the data. If there are material defects in the data, it is possible that they would be uncovered by a detailed, systematic review and comparison of the data to search for data values that are questionable or for relationships that are materially inconsistent. Such a review was beyond the scope of our assignment.

Milliman prepared this letter and the accompanying appendices for the specific purpose of providing SIM population baseline data summaries. This report should not be used for any other purpose. This report has been prepared solely for the internal business use of, and is only to be relied upon by, the management of DHHS. Milliman does not intend to benefit, or create a legal duty to, any third party recipient of its work. This letter should only be reviewed in its entirety.

The results of this letter are technical in nature and are dependent upon specific assumptions and methods. No party should rely on these results without a thorough understanding of those assumptions and methods. Such an understanding may require consultation with qualified professionals.

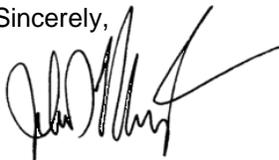
I am a Principal and Consulting Actuary for Milliman, a member of the American Academy of Actuaries, and meet the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of my knowledge and belief, this report is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices.

The terms of Milliman’s contract with the New Hampshire Department of Health and Human Services signed on November 16, 2012 apply to this report and its use.



Please call me at (262) 796-3434 if you have any questions.

Sincerely,



John D. Meerschaert, FSA, MAAA
Principal and Consulting Actuary

JDM/cm



EXHIBITS A1 - A6

Exhibit A1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Total All Ages

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid		Medicaid - Other	Medicare (estimated)	Third Party Amount	
							Hospital IP and OP	Medicaid at School				
90-100%	2,699	31,948	71%	\$39,191,371	\$159,629,010	\$10,032,939	\$7,076,121	\$5,542,869	\$31,436,359	\$39,703,043	\$3,432,401	\$296,044,112
80-90%	2,699	31,972	90%	83,208,827	21,219,350	3,603,279	2,546,326	2,363,739	7,230,947	51,464,066	660,670	172,297,205
70-80%	2,700	30,785	82%	38,708,276	30,906,546	5,700,556	3,490,498	3,338,543	9,379,238	44,772,387	1,003,021	137,299,065
60-70%	2,699	29,233	76%	14,232,194	25,347,606	7,984,384	3,728,770	3,883,512	8,414,284	37,808,000	867,167	102,265,917
50-60%	2,699	27,764	65%	7,405,338	11,343,281	11,729,528	3,385,794	3,260,804	7,890,929	26,787,869	786,035	72,589,578
40-50%	2,699	24,939	48%	4,378,726	4,399,439	11,990,780	2,677,753	2,284,951	8,144,423	14,173,918	750,641	48,800,631
30-40%	2,699	22,805	31%	2,053,098	1,504,026	10,901,283	2,074,612	1,227,460	5,983,365	5,053,963	500,878	29,298,685
20-30%	2,700	18,801	28%	877,341	661,357	7,058,405	1,093,544	434,238	3,399,826	2,712,633	260,266	16,497,610
10-20%	2,699	13,842	25%	254,718	209,640	3,893,698	451,292	156,903	1,750,208	1,397,565	148,084	8,262,108
0-10%	2,713	8,376	9%	5,725	46,797	1,477,909	104,147	44,896	564,046	345,701	71,117	2,660,338
Total	27,006	240,465	52%	\$190,315,614	\$255,267,052	\$74,372,759	\$26,628,858	\$22,537,915	\$84,193,624	\$224,219,144	\$8,480,281	\$886,015,248

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid		Medicaid - Other	Medicare (estimated)	Third Party Amount	
							Hospital IP and OP	Medicaid at School				
90-100%	2,728	32,362	73%	\$44,604,065	\$162,936,365	\$9,760,036	\$7,297,395	\$4,168,937	\$29,653,550	\$41,241,616	\$3,111,728	\$302,773,693
80-90%	2,729	32,253	89%	88,927,651	20,726,682	3,835,275	3,369,275	2,035,453	7,987,565	51,494,390	653,166	179,029,456
70-80%	2,728	30,953	82%	38,302,832	34,505,118	5,506,212	3,905,530	3,647,381	8,587,955	44,766,665	1,018,830	140,240,523
60-70%	2,729	29,432	75%	14,237,187	27,105,584	7,160,225	3,601,242	4,396,016	7,887,000	37,639,026	1,055,883	103,082,165
50-60%	2,728	27,869	65%	8,400,285	11,328,382	11,136,438	3,612,791	3,391,758	7,473,263	26,816,600	785,196	72,944,713
40-50%	2,729	25,574	48%	4,383,550	4,622,351	11,571,526	3,152,965	2,412,107	8,215,989	14,583,845	782,470	49,724,802
30-40%	2,728	22,973	32%	2,244,080	1,685,027	10,734,510	2,242,076	1,031,819	5,999,046	5,455,076	529,196	29,920,829
20-30%	2,729	20,108	26%	816,490	582,915	7,659,443	1,173,623	397,647	3,507,828	2,686,508	267,709	17,092,164
10-20%	2,728	14,126	25%	261,801	215,318	4,002,745	466,039	187,828	1,823,213	1,454,451	156,023	8,567,419
0-10%	2,743	8,209	10%	14,977	33,278	1,495,023	115,379	31,825	546,627	380,795	75,507	2,693,412
Total	27,299	243,859	52%	\$202,192,918	\$263,741,020	\$72,861,434	\$28,936,315	\$21,700,772	\$81,682,037	\$226,518,973	\$8,435,707	\$906,069,176

Exhibit A1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Total All Ages

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	2,699	31,948	71%	\$14,521	\$59,144	\$3,717	\$2,622	\$2,054	\$11,647	\$14,710	\$1,272	\$109,687
80-90%	2,699	31,972	90%	30,830	7,862	1,335	943	876	2,679	19,068	245	63,837
70-80%	2,700	30,785	82%	14,336	11,447	2,111	1,293	1,236	3,474	16,582	371	50,852
60-70%	2,699	29,233	76%	5,273	9,391	2,958	1,382	1,439	3,118	14,008	321	37,890
50-60%	2,699	27,764	65%	2,744	4,203	4,346	1,254	1,208	2,924	9,925	291	26,895
40-50%	2,699	24,939	48%	1,622	1,630	4,443	992	847	3,018	5,252	278	18,081
30-40%	2,699	22,805	31%	761	557	4,039	769	455	2,217	1,873	186	10,855
20-30%	2,700	18,801	28%	325	245	2,614	405	161	1,259	1,005	96	6,110
10-20%	2,699	13,842	25%	94	78	1,443	167	58	648	518	55	3,061
0-10%	2,713	8,376	9%	2	17	545	38	17	208	127	26	981
Total	27,006	240,465	52%	\$7,047	\$9,452	\$2,754	\$986	\$835	\$3,118	\$8,303	\$314	\$32,808

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	2,728	32,362	73%	\$16,350	\$59,727	\$3,578	\$2,675	\$1,528	\$10,870	\$15,118	\$1,141	\$110,987
80-90%	2,729	32,253	89%	32,586	7,595	1,405	1,235	746	2,927	18,869	239	65,603
70-80%	2,728	30,953	82%	14,041	12,649	2,018	1,432	1,337	3,148	16,410	373	51,408
60-70%	2,729	29,432	75%	5,217	9,932	2,624	1,320	1,611	2,890	13,792	387	37,773
50-60%	2,728	27,869	65%	3,079	4,153	4,082	1,324	1,243	2,739	9,830	288	26,739
40-50%	2,729	25,574	48%	1,606	1,694	4,240	1,155	884	3,011	5,344	287	18,221
30-40%	2,728	22,973	32%	823	618	3,935	822	378	2,199	2,000	194	10,968
20-30%	2,729	20,108	26%	299	214	2,807	430	146	1,285	984	98	6,263
10-20%	2,728	14,126	25%	96	79	1,467	171	69	668	533	57	3,141
0-10%	2,743	8,209	10%	5	12	545	42	12	199	139	28	982
Total	27,299	243,859	52%	\$7,407	\$9,661	\$2,669	\$1,060	\$795	\$2,992	\$8,298	\$309	\$33,191

Exhibit A1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Total All Ages

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total	
				Medicaid							Medicare (estimated)		Third Party Amount
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other				
90-100%	2,699	31,948	71%	\$1,226.72	\$4,996.53	\$314.04	\$221.49	\$173.50	\$983.99	\$1,242.74	\$107.44	\$9,266.44	
80-90%	2,699	31,972	90%	2,602.55	663.69	112.70	79.64	73.93	226.16	1,609.66	20.66	5,389.00	
70-80%	2,700	30,785	82%	1,257.37	1,003.95	185.17	113.38	108.45	304.67	1,454.36	32.58	4,459.93	
60-70%	2,699	29,233	76%	486.85	867.09	273.13	127.55	132.85	287.84	1,293.33	29.66	3,498.30	
50-60%	2,699	27,764	65%	266.72	408.56	422.47	121.95	117.45	284.21	964.84	28.31	2,614.52	
40-50%	2,699	24,939	48%	175.58	176.41	480.80	107.37	91.62	326.57	568.34	30.10	1,956.80	
30-40%	2,699	22,805	31%	90.03	65.95	478.02	90.97	53.82	262.37	221.62	21.96	1,284.75	
20-30%	2,700	18,801	28%	46.66	35.18	375.43	58.16	23.10	180.83	144.28	13.84	877.49	
10-20%	2,699	13,842	25%	18.40	15.15	281.30	32.60	11.34	126.44	100.97	10.70	596.89	
0-10%	2,713	8,376	9%	0.68	5.59	176.45	12.43	5.36	67.34	41.27	8.49	317.61	
Total	27,006	240,465	52%	\$791.45	\$1,061.56	\$309.29	\$110.74	\$93.73	\$350.13	\$932.44	\$35.27	\$3,684.59	

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total	
				Medicaid							Medicare (estimated)		Third Party Amount
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other				
90-100%	2,728	32,362	73%	\$1,378.29	\$5,034.81	\$301.59	\$225.49	\$128.82	\$916.31	\$1,274.38	\$96.15	\$9,355.84	
80-90%	2,729	32,253	89%	2,757.19	642.63	118.91	104.46	63.11	247.65	1,596.58	20.25	5,550.78	
70-80%	2,728	30,953	82%	1,237.45	1,114.76	177.89	126.18	117.84	277.45	1,446.28	32.92	4,530.76	
60-70%	2,729	29,432	75%	483.73	920.96	243.28	122.36	149.36	267.97	1,278.85	35.88	3,502.38	
50-60%	2,728	27,869	65%	301.42	406.49	399.60	129.63	121.70	268.16	962.24	28.17	2,617.41	
40-50%	2,729	25,574	48%	171.41	180.74	452.47	123.29	94.32	321.26	570.26	30.60	1,944.35	
30-40%	2,728	22,973	32%	97.68	73.35	467.27	97.60	44.91	261.13	237.46	23.04	1,302.43	
20-30%	2,729	20,108	26%	40.61	28.99	380.92	58.37	19.78	174.45	133.60	13.31	850.02	
10-20%	2,728	14,126	25%	18.53	15.24	283.36	32.99	13.30	129.07	102.96	11.05	606.50	
0-10%	2,743	8,209	10%	1.82	4.05	182.12	14.06	3.88	66.59	46.39	9.20	328.10	
Total	27,299	243,859	52%	\$829.14	\$1,081.53	\$298.79	\$118.66	\$88.99	\$334.96	\$928.89	\$34.59	\$3,715.55	

Exhibit A2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages Under 18

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	824	9,467	0%	\$3,411,742	\$5,661,927	\$4,011,648	\$3,527,757	\$13,322,993	\$16,805,660	\$16,827	\$2,181,258	\$48,939,812
80-90%	825	9,186	0%	43,376	1,605,869	6,110,338	1,056,731	4,095,968	5,140,610	9,816	753,860	18,816,569
70-80%	824	8,841	0%	10,593	530,780	5,675,487	608,713	1,250,932	2,962,626	0	380,298	11,419,429
60-70%	825	8,567	0%	9,887	246,656	4,334,383	492,604	605,644	1,988,773	0	222,684	7,900,632
50-60%	824	7,852	0%	0	197,224	3,164,056	300,884	293,631	1,429,437	0	141,257	5,526,489
40-50%	824	6,604	0%	0	137,708	2,210,824	192,627	150,160	1,061,683	0	105,725	3,858,726
30-40%	825	5,721	0%	0	65,672	1,573,328	129,789	87,084	682,808	0	62,518	2,601,200
20-30%	824	4,420	0%	0	20,992	1,053,954	65,567	39,618	443,379	0	49,472	1,672,981
10-20%	825	3,082	0%	0	9,884	608,439	33,362	26,170	212,461	0	25,958	916,274
0-10%	829	2,181	0%	0	2,099	234,731	7,900	4,881	84,510	0	14,789	348,910
Total	8,249	65,921	0%	\$3,475,598	\$8,478,811	\$28,977,189	\$6,415,935	\$19,877,080	\$30,811,947	\$26,642	\$3,937,819	\$102,001,021

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	812	9,353	0%	\$3,829,229	\$5,155,785	\$4,112,305	\$4,347,335	\$12,445,334	\$16,304,407	\$9,816	\$2,179,325	\$48,383,536
80-90%	813	9,148	0%	36,586	1,403,219	6,053,157	1,564,797	4,082,291	4,911,756	0	678,170	18,729,976
70-80%	812	8,855	0%	26,014	612,683	5,463,121	660,798	1,253,481	3,294,039	0	433,236	11,743,372
60-70%	812	8,524	0%	0	264,435	4,360,083	470,339	586,261	2,177,351	0	202,005	8,060,474
50-60%	812	7,964	0%	2,354	178,653	3,342,561	296,808	288,334	1,462,524	0	141,100	5,712,334
40-50%	813	7,008	0%	0	116,904	2,396,603	205,920	150,611	1,083,937	0	86,279	4,040,254
30-40%	812	5,767	0%	785	65,260	1,590,112	115,645	101,516	746,212	0	87,462	2,706,993
20-30%	812	4,368	0%	0	37,545	1,045,086	82,267	56,084	433,259	0	35,782	1,690,023
10-20%	812	2,956	0%	785	8,392	607,677	33,962	13,812	214,916	0	37,760	917,303
0-10%	820	1,986	0%	0	1,427	240,976	8,178	5,519	72,742	0	17,180	346,023
Total	8,130	65,929	0%	\$3,895,751	\$7,844,303	\$29,211,682	\$7,786,050	\$18,983,244	\$30,701,144	\$9,816	\$3,898,298	\$102,330,287

Exhibit A2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages Under 18

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	824	9,467	0%	\$4,140	\$6,871	\$4,869	\$4,281	\$16,169	\$20,395	\$20	\$2,647	\$59,393
80-90%	825	9,186	0%	53	1,947	7,406	1,281	4,965	6,231	12	914	22,808
70-80%	824	8,841	0%	13	644	6,888	739	1,518	3,595	0	462	13,859
60-70%	825	8,567	0%	12	299	5,254	597	734	2,411	0	270	9,577
50-60%	824	7,852	0%	0	239	3,840	365	356	1,735	0	171	6,707
40-50%	824	6,604	0%	0	167	2,683	234	182	1,288	0	128	4,683
30-40%	825	5,721	0%	0	80	1,907	157	106	828	0	76	3,153
20-30%	824	4,420	0%	0	25	1,279	80	48	538	0	60	2,030
10-20%	825	3,082	0%	0	12	738	40	32	258	0	31	1,111
0-10%	829	2,181	0%	0	3	283	10	6	102	0	18	421
Total	8,249	65,921	0%	\$421	\$1,028	\$3,513	\$778	\$2,410	\$3,735	\$3	\$477	\$12,365

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	812	9,353	0%	\$4,716	\$6,349	\$5,064	\$5,354	\$15,327	\$20,079	\$12	\$2,684	\$59,586
80-90%	813	9,148	0%	45	1,726	7,445	1,925	5,021	6,042	0	834	23,038
70-80%	812	8,855	0%	32	755	6,728	814	1,544	4,057	0	534	14,462
60-70%	812	8,524	0%	0	326	5,370	579	722	2,681	0	249	9,927
50-60%	812	7,964	0%	3	220	4,116	366	355	1,801	0	174	7,035
40-50%	813	7,008	0%	0	144	2,948	253	185	1,333	0	106	4,970
30-40%	812	5,767	0%	1	80	1,958	142	125	919	0	108	3,334
20-30%	812	4,368	0%	0	46	1,287	101	69	534	0	44	2,081
10-20%	812	2,956	0%	1	10	748	42	17	265	0	47	1,130
0-10%	820	1,986	0%	0	2	294	10	7	89	0	21	422
Total	8,130	65,929	0%	\$479	\$965	\$3,593	\$958	\$2,335	\$3,776	\$1	\$479	\$12,587

Exhibit A2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages Under 18

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures							Total	
				Medicaid				Medicaid at School	Medicaid - Other	Medicare (estimated)		Third Party Amount
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP					
90-100%	824	9,467	0%	\$360.38	\$598.07	\$423.75	\$372.64	\$1,407.31	\$1,775.18	\$1.78	\$230.41	\$5,169.52
80-90%	825	9,186	0%	4.72	174.82	665.18	115.04	445.89	559.61	1.07	82.07	2,048.40
70-80%	824	8,841	0%	1.20	60.04	641.95	68.85	141.49	335.10	0.00	43.02	1,291.64
60-70%	825	8,567	0%	1.15	28.79	505.94	57.50	70.70	232.14	0.00	25.99	922.22
50-60%	824	7,852	0%	0.00	25.12	402.96	38.32	37.40	182.05	0.00	17.99	703.83
40-50%	824	6,604	0%	0.00	20.85	334.77	29.17	22.74	160.76	0.00	16.01	584.30
30-40%	825	5,721	0%	0.00	11.48	275.01	22.69	15.22	119.35	0.00	10.93	454.68
20-30%	824	4,420	0%	0.00	4.75	238.45	14.83	8.96	100.31	0.00	11.19	378.50
10-20%	825	3,082	0%	0.00	3.21	197.42	10.82	8.49	68.94	0.00	8.42	297.30
0-10%	829	2,181	0%	0.00	0.96	107.63	3.62	2.24	38.75	0.00	6.78	159.98
Total	8,249	65,921	0%	\$52.72	\$128.62	\$439.57	\$97.33	\$301.53	\$467.41	\$0.40	\$59.74	\$1,547.32

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures							Total	
				Medicaid				Medicaid at School	Medicaid - Other	Medicare (estimated)		Third Party Amount
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP					
90-100%	812	9,353	0%	\$409.41	\$551.24	\$439.68	\$464.81	\$1,330.62	\$1,743.23	\$1.05	\$233.01	\$5,173.05
80-90%	813	9,148	0%	4.00	153.39	661.69	171.05	446.25	536.92	0.00	74.13	2,047.44
70-80%	812	8,855	0%	2.94	69.19	616.95	74.62	141.56	372.00	0.00	48.93	1,326.19
60-70%	812	8,524	0%	0.00	31.02	511.51	55.18	68.78	255.44	0.00	23.70	945.62
50-60%	812	7,964	0%	0.30	22.43	419.71	37.27	36.20	183.64	0.00	17.72	717.27
40-50%	813	7,008	0%	0.00	16.68	341.98	29.38	21.49	154.67	0.00	12.31	576.52
30-40%	812	5,767	0%	0.14	11.32	275.73	20.05	17.60	129.39	0.00	15.17	469.39
20-30%	812	4,368	0%	0.00	8.60	239.26	18.83	12.84	99.19	0.00	8.19	386.91
10-20%	812	2,956	0%	0.27	2.84	205.57	11.49	4.67	72.70	0.00	12.77	310.32
0-10%	820	1,986	0%	0.00	0.72	121.34	4.12	2.78	36.63	0.00	8.65	174.23
Total	8,130	65,929	0%	\$59.09	\$118.98	\$443.08	\$118.10	\$287.93	\$465.67	\$0.15	\$59.13	\$1,552.13

Exhibit A3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages 19 - 64

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	1,112	13,195	70%	\$12,673,229	\$103,284,856	\$2,449,931	\$2,483,200	\$804,577	\$14,034,099	\$16,382,187	\$1,421,697	\$153,533,775
80-90%	1,113	13,114	74%	5,909,274	47,464,386	7,314,390	2,309,724	398,079	8,732,298	16,539,225	766,154	89,433,529
70-80%	1,112	12,841	72%	5,623,860	25,233,702	4,789,429	2,257,595	498,975	5,654,498	16,241,059	523,318	60,822,434
60-70%	1,113	12,700	73%	1,285,572	14,555,359	5,827,976	2,070,061	245,861	4,071,988	15,565,119	301,435	43,923,373
50-60%	1,112	12,480	68%	515,074	7,177,064	6,190,640	1,727,851	192,523	3,472,037	12,464,206	197,551	31,936,946
40-50%	1,112	11,877	69%	456,105	2,920,972	5,075,939	1,377,729	177,809	2,933,789	11,494,910	163,513	24,600,767
30-40%	1,113	10,155	47%	310,511	1,623,228	4,656,196	1,508,519	179,948	3,580,197	5,174,132	132,927	17,165,659
20-30%	1,112	7,933	43%	206,397	495,209	3,409,176	947,714	109,884	2,061,437	2,736,034	89,060	10,054,911
10-20%	1,113	4,994	48%	100,498	194,914	1,787,103	472,382	38,004	905,063	1,620,210	37,718	5,155,892
0-10%	1,121	2,612	33%	11,686	45,224	633,032	107,348	15,175	293,510	548,228	27,448	1,681,650
Total	11,133	101,901	60%	\$27,092,207	\$202,994,913	\$42,133,811	\$15,262,123	\$2,660,835	\$45,738,915	\$98,765,311	\$3,660,820	\$438,308,936

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	1,145	13,624	70%	\$12,057,655	\$107,417,323	\$4,337,777	\$2,885,017	\$337,758	\$12,971,750	\$16,948,496	\$1,362,848	\$158,318,625
80-90%	1,144	13,397	73%	8,378,696	48,636,646	5,641,551	2,389,308	493,087	9,030,799	16,748,021	639,486	91,957,595
70-80%	1,145	13,252	75%	5,266,871	26,703,940	4,467,678	2,366,860	647,208	5,003,130	17,311,890	532,356	62,299,934
60-70%	1,145	13,035	69%	1,607,642	16,035,553	4,762,240	1,915,307	578,166	4,261,067	15,044,001	435,072	44,639,048
50-60%	1,145	12,801	67%	761,604	7,151,303	6,166,246	1,717,567	184,371	3,125,239	12,846,008	253,577	32,205,914
40-50%	1,144	12,485	69%	384,713	2,702,954	4,754,912	1,412,162	262,890	2,726,203	12,147,985	172,729	24,564,548
30-40%	1,145	9,976	46%	418,275	1,523,334	4,391,949	1,688,585	113,660	3,418,959	4,895,585	220,018	16,670,365
20-30%	1,145	8,165	41%	145,803	521,670	3,331,310	1,041,129	54,315	1,882,159	2,612,465	108,472	9,697,324
10-20%	1,144	5,211	44%	98,471	157,522	1,841,480	441,406	30,323	850,172	1,501,913	53,709	4,974,996
0-10%	1,154	2,847	32%	7,508	32,952	636,371	101,993	15,750	284,114	526,919	17,136	1,622,744
Total	11,456	104,793	59%	\$29,127,238	\$210,883,197	\$40,331,515	\$15,959,333	\$2,717,528	\$43,553,593	\$100,583,283	\$3,795,403	\$446,951,091

Exhibit A3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages 19 - 64

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	1,112	13,195	70%	\$11,397	\$92,882	\$2,203	\$2,233	\$724	\$12,621	\$14,732	\$1,279	\$138,070
80-90%	1,113	13,114	74%	5,309	42,645	6,572	2,075	358	7,846	14,860	688	80,354
70-80%	1,112	12,841	72%	5,057	22,692	4,307	2,030	449	5,085	14,605	471	54,696
60-70%	1,113	12,700	73%	1,155	13,078	5,236	1,860	221	3,659	13,985	271	39,464
50-60%	1,112	12,480	68%	463	6,454	5,567	1,554	173	3,122	11,209	178	28,720
40-50%	1,112	11,877	69%	410	2,627	4,565	1,239	160	2,638	10,337	147	22,123
30-40%	1,113	10,155	47%	279	1,458	4,183	1,355	162	3,217	4,649	119	15,423
20-30%	1,112	7,933	43%	186	445	3,066	852	99	1,854	2,460	80	9,042
10-20%	1,113	4,994	48%	90	175	1,606	424	34	813	1,456	34	4,632
0-10%	1,121	2,612	33%	10	40	565	96	14	262	489	24	1,500
Total	11,133	101,901	60%	\$2,434	\$18,234	\$3,785	\$1,371	\$239	\$4,108	\$8,871	\$329	\$39,370

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	1,145	13,624	70%	\$10,531	\$93,814	\$3,788	\$2,520	\$295	\$11,329	\$14,802	\$1,190	\$138,270
80-90%	1,144	13,397	73%	7,324	42,515	4,931	2,089	431	7,894	14,640	559	80,383
70-80%	1,145	13,252	75%	4,600	23,322	3,902	2,067	565	4,370	15,120	465	54,410
60-70%	1,145	13,035	69%	1,404	14,005	4,159	1,673	505	3,721	13,139	380	38,986
50-60%	1,145	12,801	67%	665	6,246	5,385	1,500	161	2,729	11,219	221	28,127
40-50%	1,144	12,485	69%	336	2,363	4,156	1,234	230	2,383	10,619	151	21,473
30-40%	1,145	9,976	46%	365	1,330	3,836	1,475	99	2,986	4,276	192	14,559
20-30%	1,145	8,165	41%	127	456	2,909	909	47	1,644	2,282	95	8,469
10-20%	1,144	5,211	44%	86	138	1,610	386	27	743	1,313	47	4,349
0-10%	1,154	2,847	32%	7	29	551	88	14	246	457	15	1,406
Total	11,456	104,793	59%	\$2,543	\$18,408	\$3,521	\$1,393	\$237	\$3,802	\$8,780	\$331	\$39,015

Exhibit A3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages 19 - 64

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures							Total	
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)		Third Party Amount
90-100%	1,112	13,195	70%	\$960.46	\$7,827.58	\$185.67	\$188.19	\$60.98	\$1,063.59	\$1,241.55	\$107.75	\$11,635.75
80-90%	1,113	13,114	74%	450.61	3,619.37	557.75	176.13	30.36	665.88	1,261.19	58.42	6,819.70
70-80%	1,112	12,841	72%	437.96	1,965.09	372.98	175.81	38.86	440.35	1,264.78	40.75	4,736.58
60-70%	1,113	12,700	73%	101.23	1,146.09	458.90	163.00	19.36	320.63	1,225.60	23.74	3,458.53
50-60%	1,112	12,480	68%	41.27	575.09	496.04	138.45	15.43	278.21	998.73	15.83	2,559.05
40-50%	1,112	11,877	69%	38.40	245.94	427.38	116.00	14.97	247.01	967.83	13.77	2,071.29
30-40%	1,113	10,155	47%	30.58	159.85	458.51	148.55	17.72	352.56	509.52	13.09	1,690.37
20-30%	1,112	7,933	43%	26.02	62.42	429.75	119.46	13.85	259.86	344.89	11.23	1,267.48
10-20%	1,113	4,994	48%	20.12	39.03	357.85	94.59	7.61	181.23	324.43	7.55	1,032.42
0-10%	1,121	2,612	33%	4.47	17.31	242.36	41.10	5.81	112.37	209.89	10.51	643.82
Total	11,133	101,901	60%	\$265.87	\$1,992.08	\$413.48	\$149.77	\$26.11	\$448.86	\$969.23	\$35.93	\$4,301.32

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures							Total	
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)		Third Party Amount
90-100%	1,145	13,624	70%	\$885.03	\$7,884.42	\$318.39	\$211.76	\$24.79	\$952.12	\$1,244.02	\$100.03	\$11,620.57
80-90%	1,144	13,397	73%	625.42	3,630.41	421.11	178.35	36.81	674.09	1,250.13	47.73	6,864.04
70-80%	1,145	13,252	75%	397.44	2,015.09	337.13	178.60	48.84	377.54	1,306.36	40.17	4,701.17
60-70%	1,145	13,035	69%	123.33	1,230.19	365.34	146.94	44.35	326.89	1,154.12	33.38	3,424.55
50-60%	1,145	12,801	67%	59.50	558.65	481.70	134.17	14.40	244.14	1,003.52	19.81	2,515.89
40-50%	1,144	12,485	69%	30.81	216.50	380.85	113.11	21.06	218.36	973.01	13.83	1,967.52
30-40%	1,145	9,976	46%	41.93	152.70	440.25	169.26	11.39	342.72	490.74	22.05	1,671.05
20-30%	1,145	8,165	41%	17.86	63.89	408.00	127.51	6.65	230.52	319.96	13.28	1,187.67
10-20%	1,144	5,211	44%	18.90	30.23	353.38	84.71	5.82	163.15	288.22	10.31	954.71
0-10%	1,154	2,847	32%	2.64	11.57	223.52	35.82	5.53	99.79	185.08	6.02	569.98
Total	11,456	104,793	59%	\$277.95	\$2,012.38	\$384.87	\$152.29	\$25.93	\$415.62	\$959.83	\$36.22	\$4,265.09

Exhibit A4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages 65 - 74

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid		Medicaid - Other	Medicare (estimated)	Third Party Amount	
							Hospital IP and OP	Medicaid at School				
90-100%	189	2,226	90%	\$5,172,284	\$8,651,505	\$558,866	\$455,032	\$0	\$1,184,431	\$3,556,666	\$58,861	\$19,637,645
80-90%	188	2,222	97%	6,950,233	1,094,709	356,538	163,523	0	507,355	3,852,800	8,766	12,933,924
70-80%	189	2,203	95%	5,561,159	1,310,589	232,084	246,832	0	372,516	3,738,131	9,101	11,470,411
60-70%	188	2,106	92%	2,678,404	2,261,728	388,630	318,781	0	479,911	3,479,578	13,789	9,620,821
50-60%	189	2,067	96%	1,297,631	2,628,040	152,032	266,767	0	322,793	3,582,967	13,675	8,263,903
40-50%	188	1,932	96%	1,109,824	1,839,857	220,905	202,414	0	309,862	3,309,545	10,626	7,003,034
30-40%	189	1,732	92%	959,868	1,229,289	214,498	218,112	0	286,681	2,742,526	27,032	5,678,007
20-30%	188	1,330	89%	809,421	568,550	316,942	161,810	0	188,619	1,892,544	2,511	3,940,397
10-20%	189	728	91%	452,591	308,417	161,977	101,350	0	112,970	981,885	635	2,119,824
0-10%	188	291	87%	154,419	45,502	66,428	28,890	0	33,831	367,732	1,043	697,843
Total	1,885	16,837	93%	\$25,145,833	\$19,938,186	\$2,668,898	\$2,163,511	\$0	\$3,798,970	\$27,504,373	\$146,038	\$81,365,809

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid		Medicaid - Other	Medicare (estimated)	Third Party Amount	
							Hospital IP and OP	Medicaid at School				
90-100%	205	2,404	93%	\$6,319,236	\$8,947,338	\$624,792	\$558,656	\$0	\$1,078,390	\$3,943,419	\$79,676	\$21,551,507
80-90%	204	2,415	96%	7,748,299	1,450,226	259,013	216,391	0	390,045	4,159,334	51,810	14,275,119
70-80%	205	2,344	93%	5,811,179	1,797,088	234,625	270,251	0	510,627	3,898,967	24,316	12,547,054
60-70%	204	2,241	96%	3,269,430	2,218,845	254,965	277,935	0	449,253	3,813,614	42,965	10,327,007
50-60%	205	2,217	95%	1,377,586	2,615,955	314,292	280,918	0	332,642	3,790,936	10,750	8,723,078
40-50%	204	2,052	96%	1,020,975	2,047,956	279,894	249,698	0	306,762	3,486,937	21,481	7,413,702
30-40%	205	1,775	93%	1,180,511	1,083,499	311,019	212,662	0	232,623	2,791,424	15,204	5,826,943
20-30%	204	1,272	90%	783,892	763,071	228,369	189,881	0	242,765	1,824,752	3,920	4,036,651
10-20%	205	808	87%	479,683	334,848	160,202	129,863	0	135,218	996,081	691	2,236,586
0-10%	204	340	84%	152,374	63,588	59,286	39,813	0	55,381	394,228	1,770	766,439
Total	2,045	17,868	92%	\$28,143,165	\$21,322,414	\$2,726,458	\$2,426,067	\$0	\$3,733,705	\$29,099,694	\$252,583	\$87,704,086

Exhibit A4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages 65 - 74

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	189	2,226	90%	\$27,367	\$45,775	\$2,957	\$2,408	\$0	\$6,267	\$18,818	\$311	\$103,903
80-90%	188	2,222	97%	36,969	5,823	1,896	870	0	2,699	20,494	47	68,797
70-80%	189	2,203	95%	29,424	6,934	1,228	1,306	0	1,971	19,778	48	60,690
60-70%	188	2,106	92%	14,247	12,030	2,067	1,696	0	2,553	18,508	73	51,175
50-60%	189	2,067	96%	6,866	13,905	804	1,411	0	1,708	18,957	72	43,724
40-50%	188	1,932	96%	5,903	9,786	1,175	1,077	0	1,648	17,604	57	37,250
30-40%	189	1,732	92%	5,079	6,504	1,135	1,154	0	1,517	14,511	143	30,042
20-30%	188	1,330	89%	4,305	3,024	1,686	861	0	1,003	10,067	13	20,960
10-20%	189	728	91%	2,395	1,632	857	536	0	598	5,195	3	11,216
0-10%	188	291	87%	821	242	353	154	0	180	1,956	6	3,712
Total	1,885	16,837	93%	\$13,340	\$10,577	\$1,416	\$1,148	\$0	\$2,015	\$14,591	\$77	\$43,165

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	205	2,404	93%	\$30,826	\$43,646	\$3,048	\$2,725	\$0	\$5,260	\$19,236	\$389	\$105,129
80-90%	204	2,415	96%	37,982	7,109	1,270	1,061	0	1,912	20,389	254	69,976
70-80%	205	2,344	93%	28,347	8,766	1,145	1,318	0	2,491	19,019	119	61,205
60-70%	204	2,241	96%	16,027	10,877	1,250	1,362	0	2,202	18,694	211	50,623
50-60%	205	2,217	95%	6,720	12,761	1,533	1,370	0	1,623	18,492	52	42,552
40-50%	204	2,052	96%	5,005	10,039	1,372	1,224	0	1,504	17,093	105	36,342
30-40%	205	1,775	93%	5,759	5,285	1,517	1,037	0	1,135	13,617	74	28,424
20-30%	204	1,272	90%	3,843	3,741	1,119	931	0	1,190	8,945	19	19,788
10-20%	205	808	87%	2,340	1,633	781	633	0	660	4,859	3	10,910
0-10%	204	340	84%	747	312	291	195	0	271	1,932	9	3,757
Total	2,045	17,868	92%	\$13,762	\$10,427	\$1,333	\$1,186	\$0	\$1,826	\$14,230	\$124	\$42,887

Exhibit A4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages 65 - 74

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total
				Medicaid				Medicare				
				ICF/SNF	HCBS Waiver	CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	189	2,226	90%	\$2,323.58	\$3,886.57	\$251.06	\$204.42	\$0.00	\$532.09	\$1,597.78	\$26.44	\$8,821.94
80-90%	188	2,222	97%	3,127.92	492.67	160.46	73.59	0.00	228.33	1,733.93	3.95	5,820.85
70-80%	189	2,203	95%	2,524.36	594.91	105.35	112.04	0.00	169.10	1,696.84	4.13	5,206.72
60-70%	188	2,106	92%	1,271.80	1,073.95	184.53	151.37	0.00	227.88	1,652.22	6.55	4,568.29
50-60%	189	2,067	96%	627.78	1,271.43	73.55	129.06	0.00	156.17	1,733.41	6.62	3,998.02
40-50%	188	1,932	96%	574.44	952.31	114.34	104.77	0.00	160.38	1,713.01	5.50	3,624.76
30-40%	189	1,732	92%	554.20	709.75	123.84	125.93	0.00	165.52	1,583.44	15.61	3,278.29
20-30%	188	1,330	89%	608.59	427.48	238.30	121.66	0.00	141.82	1,422.97	1.89	2,962.70
10-20%	189	728	91%	621.69	423.65	222.50	139.22	0.00	155.18	1,348.74	0.87	2,911.85
0-10%	188	291	87%	530.65	156.36	228.27	99.28	0.00	116.26	1,263.68	3.58	2,398.09
Total	1,885	16,837	93%	\$1,493.49	\$1,184.19	\$158.51	\$128.50	\$0.00	\$225.63	\$1,633.57	\$8.67	\$4,832.56

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total
				Medicaid				Medicare				
				ICF/SNF	HCBS Waiver	CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	205	2,404	93%	\$2,628.63	\$3,721.85	\$259.90	\$232.39	\$0.00	\$448.58	\$1,640.36	\$33.14	\$8,964.85
80-90%	204	2,415	96%	3,208.41	600.51	107.25	89.60	0.00	161.51	1,722.29	21.45	5,911.02
70-80%	205	2,344	93%	2,479.17	766.68	100.10	115.29	0.00	217.84	1,663.38	10.37	5,352.84
60-70%	204	2,241	96%	1,458.92	990.11	113.77	124.02	0.00	200.47	1,701.75	19.17	4,608.21
50-60%	205	2,217	95%	621.37	1,179.95	141.76	126.71	0.00	150.04	1,709.94	4.85	3,934.63
40-50%	204	2,052	96%	497.55	998.03	136.40	121.69	0.00	149.49	1,699.29	10.47	3,612.92
30-40%	205	1,775	93%	665.08	610.42	175.22	119.81	0.00	131.06	1,572.63	8.57	3,282.78
20-30%	204	1,272	90%	616.27	599.90	179.54	149.28	0.00	190.85	1,434.55	3.08	3,173.47
10-20%	205	808	87%	593.67	414.42	198.27	160.72	0.00	167.35	1,232.77	0.85	2,768.05
0-10%	204	340	84%	448.16	187.02	174.37	117.10	0.00	162.89	1,159.49	5.21	2,254.23
Total	2,045	17,868	92%	\$1,575.06	\$1,193.33	\$152.59	\$135.78	\$0.00	\$208.96	\$1,628.59	\$14.14	\$4,908.44

Exhibit A5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages 75 - 84

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid		Medicaid - Other	Medicare (estimated)	Third Party Amount	
							Hospital IP and OP	Medicaid at School				
90-100%	268	3,163	97%	\$11,384,279	\$2,995,699	\$139,158	\$295,127	\$0	\$737,269	\$5,488,575	\$402,407	\$21,442,514
80-90%	267	3,174	99%	10,500,300	829,133	13,551	135,111	0	164,595	5,644,819	4,762	17,292,270
70-80%	268	3,112	99%	8,759,381	1,087,176	35,573	122,624	0	319,666	5,537,002	8,118	15,869,540
60-70%	267	2,999	97%	6,582,962	1,596,434	48,536	189,436	0	240,227	5,223,991	13,188	13,894,773
50-60%	268	2,770	99%	3,843,929	2,411,022	108,548	260,364	0	217,601	4,909,991	11,727	11,763,181
40-50%	267	2,680	97%	2,511,994	2,184,063	57,052	300,315	0	240,587	4,645,089	11,112	9,950,211
30-40%	268	2,224	95%	2,489,463	1,324,553	51,758	178,230	0	179,644	3,710,811	17,851	7,952,311
20-30%	267	1,443	92%	2,147,360	707,168	31,396	155,063	0	173,091	2,281,174	3,567	5,498,819
10-20%	268	963	94%	1,244,037	398,646	36,200	105,303	0	90,446	1,469,507	2,072	3,346,210
0-10%	267	381	96%	452,510	105,823	11,403	28,713	0	24,156	622,099	4,109	1,248,813
Total	2,675	22,909	96%	\$49,916,214	\$13,639,717	\$533,174	\$1,770,284	\$0	\$2,387,281	\$39,533,059	\$478,912	\$108,258,641

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid		Medicaid - Other	Medicare (estimated)	Third Party Amount	
							Hospital IP and OP	Medicaid at School				
90-100%	264	3,145	96%	\$12,017,644	\$2,996,625	\$158,473	\$291,138	\$0	\$689,874	\$5,410,159	\$43,698	\$21,607,612
80-90%	263	3,132	98%	11,094,137	552,562	50,930	126,130	0	226,803	5,550,382	15,398	17,616,343
70-80%	264	3,073	98%	9,350,304	855,579	36,072	163,205	0	211,156	5,426,353	37,499	16,080,169
60-70%	264	2,927	97%	6,507,481	1,866,360	81,298	203,904	0	253,230	5,116,595	20,189	14,049,058
50-60%	264	2,776	100%	3,590,078	2,633,440	106,759	229,313	0	254,580	4,969,360	25,171	11,808,700
40-50%	263	2,545	96%	2,702,443	2,237,206	36,552	243,337	0	205,663	4,404,661	27,624	9,857,485
30-40%	264	2,225	97%	2,610,004	1,229,879	21,166	156,808	0	162,476	3,860,753	17,634	8,058,719
20-30%	264	1,558	92%	2,033,216	944,125	36,871	125,586	0	197,083	2,346,791	7,100	5,690,772
10-20%	263	934	94%	1,354,927	445,394	25,415	87,126	0	82,925	1,417,446	7,170	3,420,402
0-10%	264	399	91%	469,585	114,920	15,119	38,415	0	28,795	604,442	687	1,271,963
Total	2,637	22,714	96%	\$51,729,817	\$13,876,090	\$568,655	\$1,664,962	\$0	\$2,312,586	\$39,106,943	\$202,169	\$109,461,221

Exhibit A5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages 75 - 84

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	268	3,163	97%	\$42,479	\$11,178	\$519	\$1,101	\$0	\$2,751	\$20,480	\$1,502	\$80,009
80-90%	267	3,174	99%	39,327	3,105	51	506	0	616	21,142	18	64,765
70-80%	268	3,112	99%	32,684	4,057	133	458	0	1,193	20,660	30	59,215
60-70%	267	2,999	97%	24,655	5,979	182	709	0	900	19,566	49	52,040
50-60%	268	2,770	99%	14,343	8,996	405	972	0	812	18,321	44	43,892
40-50%	267	2,680	97%	9,408	8,180	214	1,125	0	901	17,397	42	37,267
30-40%	268	2,224	95%	9,289	4,942	193	665	0	670	13,846	67	29,673
20-30%	267	1,443	92%	8,043	2,649	118	581	0	648	8,544	13	20,595
10-20%	268	963	94%	4,642	1,487	135	393	0	337	5,483	8	12,486
0-10%	267	381	96%	1,695	396	43	108	0	90	2,330	15	4,677
Total	2,675	22,909	96%	\$18,660	\$5,099	\$199	\$662	\$0	\$892	\$14,779	\$179	\$40,471

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	264	3,145	96%	\$45,521	\$11,351	\$600	\$1,103	\$0	\$2,613	\$20,493	\$166	\$81,847
80-90%	263	3,132	98%	42,183	2,101	194	480	0	862	21,104	59	66,982
70-80%	264	3,073	98%	35,418	3,241	137	618	0	800	20,554	142	60,910
60-70%	264	2,927	97%	24,650	7,070	308	772	0	959	19,381	76	53,216
50-60%	264	2,776	100%	13,599	9,975	404	869	0	964	18,823	95	44,730
40-50%	263	2,545	96%	10,275	8,506	139	925	0	782	16,748	105	37,481
30-40%	264	2,225	97%	9,886	4,659	80	594	0	615	14,624	67	30,525
20-30%	264	1,558	92%	7,702	3,576	140	476	0	747	8,889	27	21,556
10-20%	263	934	94%	5,152	1,694	97	331	0	315	5,390	27	13,005
0-10%	264	399	91%	1,779	435	57	146	0	109	2,290	3	4,818
Total	2,637	22,714	96%	\$19,617	\$5,262	\$216	\$631	\$0	\$877	\$14,830	\$77	\$41,510

Exhibit A5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages 75 - 84

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total	
				Medicaid							Medicare (estimated)		Third Party Amount
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other				
90-100%	268	3,163	97%	\$3,599.20	\$947.11	\$44.00	\$93.31	\$0.00	\$233.09	\$1,735.24	\$127.22	\$6,779.17	
80-90%	267	3,174	99%	3,308.22	261.23	4.27	42.57	0.00	51.86	1,778.46	1.50	5,448.10	
70-80%	268	3,112	99%	2,814.71	349.35	11.43	39.40	0.00	102.72	1,779.24	2.61	5,099.47	
60-70%	267	2,999	97%	2,195.05	532.32	16.18	63.17	0.00	80.10	1,741.91	4.40	4,633.14	
50-60%	268	2,770	99%	1,387.70	870.40	39.19	93.99	0.00	78.56	1,772.56	4.23	4,246.64	
40-50%	267	2,680	97%	937.31	814.95	21.29	112.06	0.00	89.77	1,733.24	4.15	3,712.77	
30-40%	268	2,224	95%	1,119.36	595.57	23.27	80.14	0.00	80.78	1,668.53	8.03	3,575.68	
20-30%	267	1,443	92%	1,488.12	490.07	21.76	107.46	0.00	119.95	1,580.86	2.47	3,810.69	
10-20%	268	963	94%	1,291.83	413.96	37.59	109.35	0.00	93.92	1,525.97	2.15	3,474.78	
0-10%	267	381	96%	1,187.69	277.75	29.93	75.36	0.00	63.40	1,632.80	10.79	3,277.72	
Total	2,675	22,909	96%	\$2,178.89	\$595.39	\$23.27	\$77.27	\$0.00	\$104.21	\$1,725.66	\$20.90	\$4,725.59	

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total	
				Medicaid							Medicare (estimated)		Third Party Amount
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other				
90-100%	264	3,145	96%	\$3,821.19	\$952.82	\$50.39	\$92.57	\$0.00	\$219.36	\$1,720.24	\$13.89	\$6,870.46	
80-90%	263	3,132	98%	3,542.19	176.42	16.26	40.27	0.00	72.41	1,772.15	4.92	5,624.63	
70-80%	264	3,073	98%	3,042.73	278.42	11.74	53.11	0.00	68.71	1,765.82	12.20	5,232.73	
60-70%	264	2,927	97%	2,223.26	637.64	27.78	69.66	0.00	86.52	1,748.07	6.90	4,799.81	
50-60%	264	2,776	100%	1,293.26	948.65	38.46	82.61	0.00	91.71	1,790.12	9.07	4,253.85	
40-50%	263	2,545	96%	1,061.86	879.06	14.36	95.61	0.00	80.81	1,730.71	10.85	3,873.27	
30-40%	264	2,225	97%	1,173.04	552.75	9.51	70.48	0.00	73.02	1,735.17	7.93	3,621.90	
20-30%	264	1,558	92%	1,305.02	605.99	23.67	80.61	0.00	126.50	1,506.28	4.56	3,652.61	
10-20%	263	934	94%	1,450.67	476.87	27.21	93.28	0.00	88.78	1,517.61	7.68	3,662.10	
0-10%	264	399	91%	1,176.90	288.02	37.89	96.28	0.00	72.17	1,514.89	1.72	3,187.88	
Total	2,637	22,714	96%	\$2,277.44	\$610.90	\$25.04	\$73.30	\$0.00	\$101.81	\$1,721.71	\$8.90	\$4,819.11	

Exhibit A6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages Over 85

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid		Medicaid - Other	Medicare (estimated)	Third Party Amount	
							Hospital IP and OP	Medicaid at School				
90-100%	369	4,413	100%	\$16,965,495	\$1,015,158	\$1,911	\$115,880	\$0	\$341,091	\$7,917,852	\$42,828	\$26,400,215
80-90%	370	4,419	100%	15,154,546	275,905	1,290	78,224	0	127,042	7,956,080	37,268	23,630,355
70-80%	369	4,369	100%	13,701,184	457,549	1,328	75,661	0	143,079	7,863,682	3,306	22,245,791
60-70%	370	4,300	100%	12,011,205	689,936	1,552	80,889	0	147,387	7,718,486	12,978	20,662,433
50-60%	369	4,034	99%	9,111,792	1,556,668	39,966	114,288	0	142,769	7,214,133	26,257	18,205,875
40-50%	369	3,756	98%	5,397,893	2,889,831	6,520	166,352	0	198,664	6,620,218	38,896	15,318,373
30-40%	370	3,308	97%	4,804,233	1,787,793	624	142,037	0	184,423	5,719,998	39,396	12,678,504
20-30%	369	2,359	98%	4,183,559	921,783	3,302	111,896	0	95,003	4,054,591	38,223	9,408,357
10-20%	370	1,352	98%	2,526,830	471,163	892	86,522	0	54,839	2,345,973	12,080	5,498,299
0-10%	369	587	97%	829,024	149,637	2,302	45,256	0	22,214	978,744	5,461	2,032,638
Total	3,694	32,897	99%	\$84,685,762	\$10,215,424	\$59,688	\$1,017,005	\$0	\$1,456,511	\$58,389,759	\$256,692	\$156,080,840

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid		Medicaid - Other	Medicare (estimated)	Third Party Amount	
							Hospital IP and OP	Medicaid at School				
90-100%	369	4,407	100%	\$18,204,383	\$648,336	\$1,176	\$106,412	\$0	\$335,258	\$7,903,513	\$101,230	\$27,300,308
80-90%	369	4,417	100%	16,018,454	287,567	1,095	94,120	0	147,530	7,950,743	4,690	24,504,199
70-80%	369	4,378	99%	14,326,606	655,824	909	109,171	0	156,885	7,823,945	26,264	23,099,604
60-70%	369	4,280	100%	12,993,219	442,279	1,374	94,828	0	130,899	7,680,677	40,385	21,383,661
50-60%	369	3,949	99%	9,924,228	1,416,122	3,919	158,917	0	145,046	7,023,516	19,961	18,691,710
40-50%	368	3,718	99%	5,244,844	3,109,675	9,190	192,313	0	176,662	6,610,704	21,715	15,365,103
30-40%	369	3,272	97%	4,542,198	1,903,238	565	139,478	0	136,535	5,683,989	47,888	12,453,892
20-30%	369	2,215	96%	4,528,082	792,218	348	107,054	0	77,553	3,732,312	4,933	9,242,500
10-20%	369	1,330	98%	2,642,901	403,036	484	49,373	0	55,512	2,306,236	18,501	5,476,043
0-10%	369	589	96%	872,031	156,720	4,064	48,239	0	19,129	1,003,603	1,686	2,105,472
Total	3,689	32,555	99%	\$89,296,947	\$9,815,015	\$23,125	\$1,099,904	\$0	\$1,381,009	\$57,719,238	\$287,253	\$159,622,491

Exhibit A6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages Over 85

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	369	4,413	100%	\$45,977	\$2,751	\$5	\$314	\$0	\$924	\$21,458	\$116	\$71,545
80-90%	370	4,419	100%	40,958	746	3	211	0	343	21,503	101	63,866
70-80%	369	4,369	100%	37,131	1,240	4	205	0	388	21,311	9	60,287
60-70%	370	4,300	100%	32,463	1,865	4	219	0	398	20,861	35	55,844
50-60%	369	4,034	99%	24,693	4,219	108	310	0	387	19,550	71	49,338
40-50%	369	3,756	98%	14,628	7,832	18	451	0	538	17,941	105	41,513
30-40%	370	3,308	97%	12,984	4,832	2	384	0	498	15,459	106	34,266
20-30%	369	2,359	98%	11,338	2,498	9	303	0	257	10,988	104	25,497
10-20%	370	1,352	98%	6,829	1,273	2	234	0	148	6,340	33	14,860
0-10%	369	587	97%	2,247	406	6	123	0	60	2,652	15	5,509
Total	3,694	32,897	99%	\$22,925	\$2,765	\$16	\$275	\$0	\$394	\$15,807	\$69	\$42,253

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	369	4,407	100%	\$49,334	\$1,757	\$3	\$288	\$0	\$909	\$21,419	\$274	\$73,985
80-90%	369	4,417	100%	43,410	779	3	255	0	400	21,547	13	66,407
70-80%	369	4,378	99%	38,825	1,777	2	296	0	425	21,203	71	62,601
60-70%	369	4,280	100%	35,212	1,199	4	257	0	355	20,815	109	57,950
50-60%	369	3,949	99%	26,895	3,838	11	431	0	393	19,034	54	50,655
40-50%	368	3,718	99%	14,252	8,450	25	523	0	480	17,964	59	41,753
30-40%	369	3,272	97%	12,309	5,158	2	378	0	370	15,404	130	33,750
20-30%	369	2,215	96%	12,271	2,147	1	290	0	210	10,115	13	25,047
10-20%	369	1,330	98%	7,162	1,092	1	134	0	150	6,250	50	14,840
0-10%	369	589	96%	2,363	425	11	131	0	52	2,720	5	5,706
Total	3,689	32,555	99%	\$24,206	\$2,661	\$6	\$298	\$0	\$374	\$15,646	\$78	\$43,270

Exhibit A6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Ages Over 85

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total	
				Medicaid							Medicare (estimated)		Third Party Amount
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other				
90-100%	369	4,413	100%	\$3,844.44	\$230.04	\$0.43	\$26.26	\$0.00	\$77.29	\$1,794.21	\$9.71	\$5,982.37	
80-90%	370	4,419	100%	3,429.41	62.44	0.29	17.70	0.00	28.75	1,800.43	8.43	5,347.44	
70-80%	369	4,369	100%	3,136.00	104.73	0.30	17.32	0.00	32.75	1,799.88	0.76	5,091.74	
60-70%	370	4,300	100%	2,793.30	160.45	0.36	18.81	0.00	34.28	1,795.00	3.02	4,805.22	
50-60%	369	4,034	99%	2,258.75	385.89	9.91	28.33	0.00	35.39	1,788.33	6.51	4,513.11	
40-50%	369	3,756	98%	1,437.14	769.39	1.74	44.29	0.00	52.89	1,762.57	10.36	4,078.37	
30-40%	370	3,308	97%	1,452.31	540.45	0.19	42.94	0.00	55.75	1,729.14	11.91	3,832.68	
20-30%	369	2,359	98%	1,773.45	390.75	1.40	47.43	0.00	40.27	1,718.78	16.20	3,988.28	
10-20%	370	1,352	98%	1,868.96	348.49	0.66	64.00	0.00	40.56	1,735.19	8.94	4,066.79	
0-10%	369	587	97%	1,412.31	254.92	3.92	77.10	0.00	37.84	1,667.37	9.30	3,462.76	
Total	3,694	32,897	99%	\$2,574.27	\$310.53	\$1.81	\$30.91	\$0.00	\$44.27	\$1,774.93	\$7.80	\$4,744.53	

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total	
				Medicaid							Medicare (estimated)		Third Party Amount
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other				
90-100%	369	4,407	100%	\$4,130.79	\$147.12	\$0.27	\$24.15	\$0.00	\$76.07	\$1,793.40	\$22.97	\$6,194.76	
80-90%	369	4,417	100%	3,626.55	65.10	0.25	21.31	0.00	33.40	1,800.03	1.06	5,547.70	
70-80%	369	4,378	99%	3,272.41	149.80	0.21	24.94	0.00	35.83	1,787.10	6.00	5,276.29	
60-70%	369	4,280	100%	3,035.80	103.34	0.32	22.16	0.00	30.58	1,794.55	9.44	4,996.18	
50-60%	369	3,949	99%	2,513.10	358.60	0.99	40.24	0.00	36.73	1,778.56	5.05	4,733.28	
40-50%	368	3,718	99%	1,410.66	836.38	2.47	51.72	0.00	47.52	1,778.03	5.84	4,132.63	
30-40%	369	3,272	97%	1,388.20	581.67	0.17	42.63	0.00	41.73	1,737.16	14.64	3,806.20	
20-30%	369	2,215	96%	2,044.28	357.66	0.16	48.33	0.00	35.01	1,685.02	2.23	4,172.69	
10-20%	369	1,330	98%	1,987.14	303.03	0.36	37.12	0.00	41.74	1,734.01	13.91	4,117.33	
0-10%	369	589	96%	1,480.53	266.08	6.90	81.90	0.00	32.48	1,703.91	2.86	3,574.66	
Total	3,689	32,555	99%	\$2,742.96	\$301.49	\$0.71	\$33.79	\$0.00	\$42.42	\$1,772.98	\$8.82	\$4,903.16	



APPENDIX B1 - B2

Exhibit B1
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Baseline Summaries
Decile Summary - Counts of Individuals
Population: Total All Ages

SFY 2011 Population Member Distribution

Decile	Annual Expenditures					Bureau of Behavioral Health Consumers	Total
	Choices For Independence Waiver Enrollees	Developmentally Disabled Waiver Enrollees	Acquired Brain Disorder Waiver Enrollees	In Home Supports Waiver Enrollees	Nursing Home Residents		
90-100%	211	1,591	140	35	558	164	2,699
80-90%	196	311	11	33	2,045	103	2,699
70-80%	565	497	6	54	1,361	216	2,699
60-70%	837	541	6	65	758	492	2,699
50-60%	501	506	6	35	534	1,118	2,700
40-50%	219	362	5	23	375	1,715	2,699
30-40%	138	248	2	13	358	1,940	2,699
20-30%	94	205	2	9	274	2,115	2,699
10-20%	90	122	0	7	192	2,288	2,699
0-10%	66	121	1	5	40	2,481	2,714
Total	2,917	4,504	179	279	6,495	12,632	27,006

SFY 2012 Population Member Distribution

Decile	Annual Expenditures					Bureau of Behavioral Health Consumers	Total
	Choices For Independence Waiver Enrollees	Developmentally Disabled Waiver Enrollees	Acquired Brain Disorder Waiver Enrollees	In Home Supports Waiver Enrollees	Nursing Home Residents		
90-100%	173	1,588	151	36	624	156	2,728
80-90%	159	327	9	35	2,096	103	2,729
70-80%	576	544	10	63	1,333	202	2,728
60-70%	937	596	8	60	688	439	2,728
50-60%	507	529	7	40	578	1,068	2,729
40-50%	222	366	3	32	375	1,730	2,728
30-40%	144	259	3	16	352	1,954	2,728
20-30%	110	174	2	4	245	2,194	2,729
10-20%	95	145	0	3	194	2,291	2,728
0-10%	74	148	2	2	28	2,490	2,744
Total	2,997	4,676	195	291	6,513	12,627	27,299

Exhibit B2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary - Distribution of Individuals
 Population: Total All Ages

SFY 2011 Population Member Distribution

Decile	Annual Expenditures						Total
	Choices For Independence Waiver Enrollees	Developmentally Disabled Waiver Enrollees	Acquired Brain Disorder Waiver Enrollees	In Home Supports Waiver Enrollees	Nursing Home Residents	Bureau of Behavioral Health Consumers	
90-100%	8%	59%	5%	1%	21%	6%	100%
80-90%	7%	12%	0%	1%	76%	4%	100%
70-80%	21%	18%	0%	2%	50%	8%	100%
60-70%	31%	20%	0%	2%	28%	18%	100%
50-60%	19%	19%	0%	1%	20%	41%	100%
40-50%	8%	13%	0%	1%	14%	64%	100%
30-40%	5%	9%	0%	0%	13%	72%	100%
20-30%	3%	8%	0%	0%	10%	78%	100%
10-20%	3%	5%	0%	0%	7%	85%	100%
0-10%	2%	4%	0%	0%	1%	91%	100%
Total	11%	17%	1%	1%	24%	47%	100%

SFY 2012 Population Member Distribution

Decile	Annual Expenditures						Total
	Choices For Independence Waiver Enrollees	Developmentally Disabled Waiver Enrollees	Acquired Brain Disorder Waiver Enrollees	In Home Supports Waiver Enrollees	Nursing Home Residents	Bureau of Behavioral Health Consumers	
90-100%	6%	58%	6%	1%	23%	6%	100%
80-90%	6%	12%	0%	1%	77%	4%	100%
70-80%	21%	20%	0%	2%	49%	7%	100%
60-70%	34%	22%	0%	2%	25%	16%	100%
50-60%	19%	19%	0%	1%	21%	39%	100%
40-50%	8%	13%	0%	1%	14%	63%	100%
30-40%	5%	9%	0%	1%	13%	72%	100%
20-30%	4%	6%	0%	0%	9%	80%	100%
10-20%	3%	5%	0%	0%	7%	84%	100%
0-10%	3%	5%	0%	0%	1%	91%	100%
Total	11%	17%	1%	1%	24%	46%	100%



APPENDIX C1 - C6

Exhibit C1
New Hampshire Department of Health and Human Services
State Health Care Innovation Model (SIM) Baseline Summaries
Decile Summary
Population: Choices For Independence Waiver Enrollees

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures									
				Medicaid								Third Party Amount	Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)			
90-100%	359	4,227	77%	\$64,174	\$10,322,797	\$706,279	\$2,126,046	\$0	\$12,359,818	\$6,078,368	\$470,224	\$32,127,707	
80-90%	358	4,232	89%	179,450	9,379,575	593,522	791,908	0	2,246,619	6,983,053	54,010	20,228,137	
70-80%	359	4,201	87%	177,764	7,353,960	528,365	904,190	0	1,439,109	6,797,442	30,062	17,230,892	
60-70%	358	4,220	94%	122,566	6,392,803	249,356	529,453	0	849,187	7,265,350	26,910	15,435,625	
50-60%	359	4,170	92%	111,183	5,587,664	143,899	539,898	0	719,751	6,999,528	27,276	14,129,198	
40-50%	358	4,100	90%	197,441	4,390,388	151,111	465,320	0	698,926	6,705,316	37,875	12,646,375	
30-40%	359	3,675	86%	216,942	3,616,780	82,426	516,438	0	752,241	5,664,092	44,959	10,893,879	
20-30%	358	2,971	73%	293,592	3,102,395	80,200	510,369	0	787,604	3,571,830	31,816	8,377,806	
10-20%	359	1,874	84%	279,318	1,615,655	42,010	328,332	0	382,546	2,538,524	8,054	5,194,438	
0-10%	359	774	80%	113,064	422,186	27,469	105,170	0	128,348	976,321	4,109	1,776,667	
Total	3,586	34,444	85%	\$1,755,493	\$52,184,203	\$2,604,637	\$6,817,123	\$0	\$20,364,148	\$53,579,823	\$735,296	\$138,040,723	

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures									
				Medicaid								Third Party Amount	Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)			
90-100%	359	4,273	79%	\$111,688	\$10,014,975	\$702,634	\$2,299,072	\$0	\$10,908,089	\$6,190,570	\$312,938	\$30,539,967	
80-90%	359	4,246	93%	212,708	8,951,058	634,424	814,107	0	1,847,278	7,264,077	83,412	19,807,064	
70-80%	360	4,243	93%	144,118	7,359,596	470,179	704,474	0	987,778	7,219,411	27,704	16,913,261	
60-70%	359	4,245	92%	85,858	6,386,411	257,090	506,868	0	793,045	7,188,863	32,885	15,251,022	
50-60%	359	4,187	91%	120,309	5,381,578	155,247	472,628	0	811,537	7,013,614	10,130	13,965,043	
40-50%	359	4,073	91%	159,209	4,453,013	158,184	417,109	0	561,141	6,738,992	19,534	12,507,182	
30-40%	359	3,757	84%	151,640	3,639,082	116,185	449,965	0	728,840	5,566,262	38,400	10,690,373	
20-30%	360	2,825	77%	308,376	2,984,397	110,205	391,856	0	602,906	3,416,445	20,674	7,834,858	
10-20%	359	1,765	81%	269,915	1,510,582	62,519	308,652	0	343,564	2,193,772	14,234	4,703,238	
0-10%	359	715	81%	128,658	353,615	15,450	107,391	0	102,795	925,164	7,395	1,640,469	
Total	3,592	34,329	86%	\$1,692,479	\$51,034,307	\$2,682,118	\$6,472,122	\$0	\$17,686,975	\$53,717,171	\$567,305	\$133,852,476	

Exhibit C1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Choices For Independence Waiver Enrollees

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	359	4,227	77%	\$179	\$28,754	\$1,967	\$5,922	\$0	\$34,428	\$16,931	\$1,310	\$89,492
80-90%	358	4,232	89%	501	26,200	1,658	2,212	0	6,275	19,506	151	56,503
70-80%	359	4,201	87%	495	20,485	1,472	2,519	0	4,009	18,934	84	47,997
60-70%	358	4,220	94%	342	17,857	697	1,479	0	2,372	20,294	75	43,116
50-60%	359	4,170	92%	310	15,565	401	1,504	0	2,005	19,497	76	39,357
40-50%	358	4,100	90%	552	12,264	422	1,300	0	1,952	18,730	106	35,325
30-40%	359	3,675	86%	604	10,075	230	1,439	0	2,095	15,777	125	30,345
20-30%	358	2,971	73%	820	8,666	224	1,426	0	2,200	9,977	89	23,402
10-20%	359	1,874	84%	778	4,500	117	915	0	1,066	7,071	22	14,469
0-10%	359	774	80%	315	1,176	77	293	0	358	2,720	11	4,949
Total	3,586	34,444	85%	\$490	\$14,552	\$726	\$1,901	\$0	\$5,679	\$14,941	\$205	\$38,494

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	359	4,273	79%	\$311	\$27,897	\$1,957	\$6,404	\$0	\$30,385	\$17,244	\$872	\$85,070
80-90%	359	4,246	93%	593	24,933	1,767	2,268	0	5,146	20,234	232	55,173
70-80%	360	4,243	93%	400	20,443	1,306	1,957	0	2,744	20,054	77	46,981
60-70%	359	4,245	92%	239	17,789	716	1,412	0	2,209	20,025	92	42,482
50-60%	359	4,187	91%	335	14,990	432	1,317	0	2,261	19,537	28	38,900
40-50%	359	4,073	91%	443	12,404	441	1,162	0	1,563	18,772	54	34,839
30-40%	359	3,757	84%	422	10,137	324	1,253	0	2,030	15,505	107	29,778
20-30%	360	2,825	77%	857	8,290	306	1,088	0	1,675	9,490	57	21,763
10-20%	359	1,765	81%	752	4,208	174	860	0	957	6,111	40	13,101
0-10%	359	715	81%	358	985	43	299	0	286	2,577	21	4,570
Total	3,592	34,329	86%	\$471	\$14,208	\$747	\$1,802	\$0	\$4,924	\$14,955	\$158	\$37,264

Exhibit C1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Choices For Independence Waiver Enrollees

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total	
				Medicaid				Medicaid - Other			Medicare (estimated)		Third Party Amount
				ICF/SNF	HCBS Waiver	CMHC	Hospital IP and OP	Medicaid at School	Other				
90-100%	359	4,227	77%	\$15.18	\$2,442.11	\$167.09	\$502.97	\$0.00	\$2,924.02	\$1,437.99	\$111.24	\$7,600.59	
80-90%	358	4,232	89%	42.40	2,216.35	140.25	187.12	0.00	530.86	1,650.06	12.76	4,779.81	
70-80%	359	4,201	87%	42.31	1,750.53	125.77	215.23	0.00	342.56	1,618.05	7.16	4,101.62	
60-70%	358	4,220	94%	29.04	1,514.88	59.09	125.46	0.00	201.23	1,721.65	6.38	3,657.73	
50-60%	359	4,170	92%	26.66	1,339.97	34.51	129.47	0.00	172.60	1,678.54	6.54	3,388.30	
40-50%	358	4,100	90%	48.16	1,070.83	36.86	113.49	0.00	170.47	1,635.44	9.24	3,084.48	
30-40%	359	3,675	86%	59.03	984.16	22.43	140.53	0.00	204.69	1,541.25	12.23	2,964.32	
20-30%	358	2,971	73%	98.82	1,044.23	26.99	171.78	0.00	265.10	1,202.23	10.71	2,819.86	
10-20%	359	1,874	84%	149.05	862.14	22.42	175.20	0.00	204.13	1,354.60	4.30	2,771.85	
0-10%	359	774	80%	146.08	545.46	35.49	135.88	0.00	165.82	1,261.40	5.31	2,295.43	
Total	3,586	34,444	85%	\$50.97	\$1,515.04	\$75.62	\$197.92	\$0.00	\$591.22	\$1,555.56	\$21.35	\$4,007.69	

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total	
				Medicaid				Medicaid - Other			Medicare (estimated)		Third Party Amount
				ICF/SNF	HCBS Waiver	CMHC	Hospital IP and OP	Medicaid at School	Other				
90-100%	359	4,273	79%	\$26.14	\$2,343.78	\$164.44	\$538.05	\$0.00	\$2,552.79	\$1,448.76	\$73.24	\$7,147.20	
80-90%	359	4,246	93%	50.10	2,108.12	149.42	191.74	0.00	435.06	1,710.80	19.64	4,664.88	
70-80%	360	4,243	93%	33.97	1,734.53	110.81	166.03	0.00	232.80	1,701.49	6.53	3,986.16	
60-70%	359	4,245	92%	20.23	1,504.45	60.56	119.40	0.00	186.82	1,693.49	7.75	3,592.70	
50-60%	359	4,187	91%	28.73	1,285.31	37.08	112.88	0.00	193.82	1,675.09	2.42	3,335.33	
40-50%	359	4,073	91%	39.09	1,093.30	38.84	102.41	0.00	137.77	1,654.55	4.80	3,070.75	
30-40%	359	3,757	84%	40.36	968.61	30.92	119.77	0.00	194.00	1,481.57	10.22	2,845.45	
20-30%	360	2,825	77%	109.16	1,056.42	39.01	138.71	0.00	213.42	1,209.36	7.32	2,773.40	
10-20%	359	1,765	81%	152.93	855.85	35.42	174.87	0.00	194.65	1,242.93	8.06	2,664.72	
0-10%	359	715	81%	179.94	494.57	21.61	150.20	0.00	143.77	1,293.94	10.34	2,294.36	
Total	3,592	34,329	86%	\$49.30	\$1,486.62	\$78.13	\$188.53	\$0.00	\$515.22	\$1,564.78	\$16.53	\$3,899.11	

Exhibit C2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Developmentally Disabled Waiver Enrollees

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures									
				Medicaid								Third Party Amount	Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)			
90-100%	459	5,482	63%	\$1,486,675	\$55,652,590	\$471,782	\$687,893	\$1,516,206	\$6,636,668	\$5,571,593	\$874,488	\$72,897,895	
80-90%	459	5,481	72%	83,390	38,289,308	217,730	416,358	904,179	3,366,864	6,520,564	300,589	50,098,982	
70-80%	458	5,452	74%	62,334	29,347,287	197,097	584,239	839,571	2,744,113	6,699,297	469,699	40,943,638	
60-70%	459	5,406	64%	977,464	20,812,112	197,251	506,411	1,350,540	2,673,264	5,779,457	525,308	32,821,807	
50-60%	459	5,313	63%	86,484	14,128,860	219,464	402,779	1,754,256	2,196,758	5,437,074	517,864	24,743,539	
40-50%	459	5,328	59%	82,424	9,452,191	299,167	397,900	1,815,864	1,709,680	5,109,277	326,317	19,192,820	
30-40%	459	5,269	45%	32,159	6,435,830	358,425	184,480	2,052,086	1,264,157	3,850,991	438,411	14,616,540	
20-30%	458	5,114	33%	25,426	4,204,568	262,979	240,502	1,666,447	1,196,807	2,695,627	276,041	10,568,396	
10-20%	459	4,368	12%	5,352	1,978,230	395,746	218,619	1,336,003	1,162,747	389,715	307,162	5,793,575	
0-10%	464	3,371	6%	0	564,187	79,854	89,789	224,229	497,107	79,301	84,147	1,618,615	
Total	4,593	50,584	49%	\$2,841,709	\$180,865,164	\$2,699,494	\$3,728,971	\$13,459,382	\$23,448,165	\$42,132,897	\$4,120,026	\$273,295,808	

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures									
				Medicaid								Third Party Amount	Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)			
90-100%	476	5,689	63%	\$1,614,422	\$59,676,114	\$310,120	\$660,363	\$967,861	\$7,146,454	\$5,777,978	\$939,464	\$77,092,775	
80-90%	476	5,700	73%	100,288	40,148,017	398,431	564,537	714,612	3,089,860	6,786,420	541,543	52,343,708	
70-80%	476	5,686	74%	110,021	30,400,297	252,646	513,446	735,324	3,121,304	6,952,050	400,218	42,485,306	
60-70%	477	5,634	64%	954,685	20,986,617	154,076	608,390	1,541,176	3,142,726	5,985,380	576,266	33,949,315	
50-60%	476	5,616	63%	75,180	14,537,163	311,484	377,205	1,751,294	2,184,961	5,761,281	461,234	25,459,801	
40-50%	476	5,575	59%	24,392	10,177,631	321,450	312,272	1,873,378	1,577,872	5,256,872	444,823	19,988,691	
30-40%	476	5,540	47%	43,795	6,996,263	382,422	326,421	1,908,163	1,186,671	4,186,149	358,372	15,388,256	
20-30%	476	5,404	37%	31,329	4,278,353	171,584	270,010	1,960,089	1,160,615	3,184,313	335,402	11,391,696	
10-20%	476	4,921	12%	23,405	2,154,336	478,986	249,692	1,388,043	1,451,447	531,645	398,995	6,676,549	
0-10%	482	3,857	3%	6,438	534,566	79,975	101,200	256,078	579,109	41,766	91,363	1,690,495	
Total	4,767	53,622	49%	\$2,983,956	\$189,889,357	\$2,861,173	\$3,983,536	\$13,096,018	\$24,641,020	\$44,463,853	\$4,547,680	\$286,466,592	

Exhibit C2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Developmentally Disabled Waiver Enrollees

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	459	5,482	63%	\$3,239	\$121,247	\$1,028	\$1,499	\$3,303	\$14,459	\$12,139	\$1,905	\$158,819
80-90%	459	5,481	72%	182	83,419	474	907	1,970	7,335	14,206	655	109,148
70-80%	458	5,452	74%	136	64,077	430	1,276	1,833	5,992	14,627	1,026	89,397
60-70%	459	5,406	64%	2,130	45,342	430	1,103	2,942	5,824	12,591	1,144	71,507
50-60%	459	5,313	63%	188	30,782	478	878	3,822	4,786	11,845	1,128	53,907
40-50%	459	5,328	59%	180	20,593	652	867	3,956	3,725	11,131	711	41,814
30-40%	459	5,269	45%	70	14,021	781	402	4,471	2,754	8,390	955	31,844
20-30%	458	5,114	33%	56	9,180	574	525	3,639	2,613	5,886	603	23,075
10-20%	459	4,368	12%	12	4,310	862	476	2,911	2,533	849	669	12,622
0-10%	464	3,371	6%	0	1,216	172	194	483	1,071	171	181	3,488
Total	4,593	50,584	49%	\$619	\$39,378	\$588	\$812	\$2,930	\$5,105	\$9,173	\$897	\$59,503

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	476	5,689	63%	\$3,392	\$125,370	\$652	\$1,387	\$2,033	\$15,014	\$12,139	\$1,974	\$161,960
80-90%	476	5,700	73%	211	84,345	837	1,186	1,501	6,491	14,257	1,138	109,966
70-80%	476	5,686	74%	231	63,866	531	1,079	1,545	6,557	14,605	841	89,255
60-70%	477	5,634	64%	2,001	43,997	323	1,275	3,231	6,589	12,548	1,208	71,173
50-60%	476	5,616	63%	158	30,540	654	792	3,679	4,590	12,104	969	53,487
40-50%	476	5,575	59%	51	21,382	675	656	3,936	3,315	11,044	935	41,993
30-40%	476	5,540	47%	92	14,698	803	686	4,009	2,493	8,794	753	32,328
20-30%	476	5,404	37%	66	8,988	360	567	4,118	2,438	6,690	705	23,932
10-20%	476	4,921	12%	49	4,526	1,006	525	2,916	3,049	1,117	838	14,026
0-10%	482	3,857	3%	13	1,109	166	210	531	1,201	87	190	3,507
Total	4,767	53,622	49%	\$626	\$39,834	\$600	\$836	\$2,747	\$5,169	\$9,327	\$954	\$60,094

Exhibit C2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Developmentally Disabled Waiver Enrollees

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures							Total	
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)		Third Party Amount
90-100%	459	5,482	63%	\$271.19	\$10,151.88	\$86.06	\$125.48	\$276.58	\$1,210.63	\$1,016.34	\$159.52	\$13,297.68
80-90%	459	5,481	72%	15.21	6,985.83	39.72	75.96	164.97	614.28	1,189.67	54.84	9,140.48
70-80%	458	5,452	74%	11.43	5,382.85	36.15	107.16	153.99	503.32	1,228.78	86.15	7,509.84
60-70%	459	5,406	64%	180.81	3,849.82	36.49	93.68	249.82	494.50	1,069.08	97.17	6,071.37
50-60%	459	5,313	63%	16.28	2,659.30	41.31	75.81	330.18	413.47	1,023.35	97.47	4,657.17
40-50%	459	5,328	59%	15.47	1,774.06	56.15	74.68	340.82	320.89	958.95	61.25	3,602.26
30-40%	459	5,269	45%	6.10	1,221.45	68.03	35.01	389.46	239.92	730.88	83.21	2,774.06
20-30%	458	5,114	33%	4.97	822.17	51.42	47.03	325.86	234.03	527.11	53.98	2,066.56
10-20%	459	4,368	12%	1.23	452.89	90.60	50.05	305.86	266.20	89.22	70.32	1,326.37
0-10%	464	3,371	6%	0.00	167.36	23.69	26.64	66.52	147.47	23.52	24.96	480.16
Total	4,593	50,584	49%	\$56.18	\$3,575.54	\$53.37	\$73.72	\$266.08	\$463.55	\$832.93	\$81.45	\$5,402.81

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures							Total	
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)		Third Party Amount
90-100%	476	5,689	63%	\$283.78	\$10,489.74	\$54.51	\$116.08	\$170.13	\$1,256.19	\$1,015.64	\$165.14	\$13,551.20
80-90%	476	5,700	73%	17.59	7,043.51	69.90	99.04	125.37	542.08	1,190.60	95.01	9,183.11
70-80%	476	5,686	74%	19.35	5,346.52	44.43	90.30	129.32	548.95	1,222.66	70.39	7,471.91
60-70%	477	5,634	64%	169.45	3,724.99	27.35	107.99	273.55	557.81	1,062.37	102.28	6,025.79
50-60%	476	5,616	63%	13.39	2,588.53	55.46	67.17	311.84	389.06	1,025.87	82.13	4,533.44
40-50%	476	5,575	59%	4.38	1,825.58	57.66	56.01	336.03	283.03	942.94	79.79	3,585.42
30-40%	476	5,540	47%	7.91	1,262.86	69.03	58.92	344.43	214.20	755.62	64.69	2,777.66
20-30%	476	5,404	37%	5.80	791.70	31.75	49.96	362.71	214.77	589.25	62.07	2,108.01
10-20%	476	4,921	12%	4.76	437.78	97.34	50.74	282.07	294.95	108.04	81.08	1,356.75
0-10%	482	3,857	3%	1.67	138.60	20.73	26.24	66.39	150.14	10.83	23.69	438.29
Total	4,767	53,622	49%	\$55.65	\$3,541.26	\$53.36	\$74.29	\$244.23	\$459.53	\$829.21	\$84.81	\$5,342.33

Exhibit C3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Acquired Brain Disorder Waiver Enrollees

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	20	240	80%	\$182,490	\$2,954,482	\$463	\$83,004	\$0	\$213,679	\$494,804	\$24,915	\$3,953,836
80-90%	20	237	95%	0	2,603,776	831	28,787	0	65,130	581,515	25,475	3,305,514
70-80%	21	251	95%	0	2,460,899	1,414	14,059	0	50,050	601,261	47,630	3,175,313
60-70%	20	237	85%	113,380	2,039,799	1,347	27,146	0	64,024	510,812	14,228	2,770,736
50-60%	20	230	70%	28	1,802,558	902	67,188	0	101,116	423,205	64,315	2,459,312
40-50%	20	226	75%	13,773	1,613,570	10,533	13,715	0	80,846	447,327	15,190	2,194,954
30-40%	20	223	80%	24,434	1,346,783	1,112	14,920	0	76,886	436,781	60,673	1,961,589
20-30%	21	237	67%	122,554	1,109,932	211	19,309	0	46,892	380,691	11,724	1,691,312
10-20%	20	222	75%	135,446	528,688	2,278	23,397	0	33,813	375,193	15,785	1,114,599
0-10%	20	120	60%	67,592	212,958	17,045	23,639	0	33,330	159,992	2,744	517,300
Total	202	2,223	78%	\$659,697	\$16,673,443	\$36,134	\$315,164	\$0	\$765,767	\$4,411,581	\$282,679	\$23,144,465

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	22	260	91%	\$188,059	\$3,234,799	\$448	\$38,552	\$0	\$212,824	\$590,398	\$51,872	\$4,316,952
80-90%	23	273	91%	266,146	2,832,916	187	20,673	0	55,537	627,964	38,718	3,842,140
70-80%	22	264	86%	0	2,566,051	861	15,707	0	112,486	588,359	26,238	3,309,702
60-70%	22	258	73%	135,434	2,197,897	29,595	21,399	0	77,740	456,708	88,678	3,007,450
50-60%	23	267	78%	98,242	2,001,671	3,047	44,886	0	105,824	518,603	10,990	2,783,264
40-50%	22	257	86%	4,271	1,669,891	5,163	26,283	0	63,296	563,934	54,619	2,387,456
30-40%	22	243	91%	64,235	1,396,083	1,978	18,022	0	50,176	539,897	26,188	2,096,579
20-30%	22	227	68%	263,142	990,701	176	34,214	0	50,930	339,708	35,355	1,714,227
10-20%	23	233	65%	180,028	622,201	3,163	16,430	0	51,623	410,696	10,904	1,295,046
0-10%	22	143	64%	22,314	199,341	7,264	9,003	0	22,451	228,310	4,778	493,462
Total	223	2,425	79%	\$1,221,871	\$17,711,552	\$51,883	\$245,167	\$0	\$802,887	\$4,864,577	\$348,340	\$25,246,277

Exhibit C3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Acquired Brain Disorder Waiver Enrollees

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	20	240	80%	\$9,124	\$147,724	\$23	\$4,150	\$0	\$10,684	\$24,740	\$1,246	\$197,692
80-90%	20	237	95%	0	130,189	42	1,439	0	3,257	29,076	1,274	165,276
70-80%	21	251	95%	0	117,186	67	669	0	2,383	28,631	2,268	151,205
60-70%	20	237	85%	5,669	101,990	67	1,357	0	3,201	25,541	711	138,537
50-60%	20	230	70%	1	90,128	45	3,359	0	5,056	21,160	3,216	122,966
40-50%	20	226	75%	689	80,678	527	686	0	4,042	22,366	760	109,748
30-40%	20	223	80%	1,222	67,339	56	746	0	3,844	21,839	3,034	98,079
20-30%	21	237	67%	5,836	52,854	10	919	0	2,233	18,128	558	80,539
10-20%	20	222	75%	6,772	26,434	114	1,170	0	1,691	18,760	789	55,730
0-10%	20	120	60%	3,380	10,648	852	1,182	0	1,667	8,000	137	25,865
Total	202	2,223	78%	\$3,266	\$82,542	\$179	\$1,560	\$0	\$3,791	\$21,840	\$1,399	\$114,577

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	22	260	91%	\$8,548	\$147,036	\$20	\$1,752	\$0	\$9,674	\$26,836	\$2,358	\$196,225
80-90%	23	273	91%	11,572	123,170	8	899	0	2,415	27,303	1,683	167,050
70-80%	22	264	86%	0	116,639	39	714	0	5,113	26,744	1,193	150,441
60-70%	22	258	73%	6,156	99,904	1,345	973	0	3,534	20,759	4,031	136,702
50-60%	23	267	78%	4,271	87,029	132	1,952	0	4,601	22,548	478	121,011
40-50%	22	257	86%	194	75,904	235	1,195	0	2,877	25,633	2,483	108,521
30-40%	22	243	91%	2,920	63,458	90	819	0	2,281	24,541	1,190	95,299
20-30%	22	227	68%	11,961	45,032	8	1,555	0	2,315	15,441	1,607	77,919
10-20%	23	233	65%	7,827	27,052	138	714	0	2,244	17,856	474	56,306
0-10%	22	143	64%	1,014	9,061	330	409	0	1,021	10,378	217	22,430
Total	223	2,425	79%	\$5,479	\$79,424	\$233	\$1,099	\$0	\$3,600	\$21,814	\$1,562	\$113,212

Exhibit C3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Acquired Brain Disorder Waiver Enrollees

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures							Third Party Amount	Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)		
90-100%	20	240	80%	\$760.37	\$12,310.34	\$1.93	\$345.85	\$0.00	\$890.33	\$2,061.68	\$103.81	\$16,474.32
80-90%	20	237	95%	0.00	10,986.40	3.50	121.46	0.00	274.81	2,453.65	107.49	13,947.32
70-80%	21	251	95%	0.00	9,804.38	5.63	56.01	0.00	199.40	2,395.46	189.76	12,650.65
60-70%	20	237	85%	478.40	8,606.75	5.68	114.54	0.00	270.14	2,155.32	60.03	11,690.87
50-60%	20	230	70%	0.12	7,837.21	3.92	292.12	0.00	439.63	1,840.02	279.63	10,692.66
40-50%	20	226	75%	60.94	7,139.69	46.61	60.69	0.00	357.73	1,979.33	67.21	9,712.19
30-40%	20	223	80%	109.57	6,039.38	4.99	66.91	0.00	344.78	1,958.66	272.08	8,796.36
20-30%	21	237	67%	517.11	4,683.26	0.89	81.47	0.00	197.86	1,606.29	49.47	7,136.34
10-20%	20	222	75%	610.11	2,381.48	10.26	105.39	0.00	152.31	1,690.06	71.10	5,020.72
0-10%	20	120	60%	563.27	1,774.65	142.04	196.99	0.00	277.75	1,333.27	22.86	4,310.83
Total	202	2,223	78%	\$296.76	\$7,500.42	\$16.25	\$141.77	\$0.00	\$344.47	\$1,984.52	\$127.16	\$10,411.37

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures							Third Party Amount	Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)		
90-100%	22	260	91%	\$723.31	\$12,441.53	\$1.72	\$148.28	\$0.00	\$818.56	\$2,270.76	\$199.51	\$16,603.66
80-90%	23	273	91%	974.89	10,376.98	0.68	75.72	0.00	203.43	2,300.23	141.82	14,073.77
70-80%	22	264	86%	0.00	9,719.89	3.26	59.49	0.00	426.08	2,228.63	99.39	12,536.75
60-70%	22	258	73%	524.94	8,518.98	114.71	82.94	0.00	301.32	1,770.19	343.71	11,656.78
50-60%	23	267	78%	367.95	7,496.90	11.41	168.11	0.00	396.35	1,942.33	41.16	10,424.21
40-50%	22	257	86%	16.62	6,497.63	20.09	102.27	0.00	246.29	2,194.29	212.53	9,289.71
30-40%	22	243	91%	264.34	5,745.20	8.14	74.17	0.00	206.48	2,221.80	107.77	8,627.90
20-30%	22	227	68%	1,159.22	4,364.32	0.78	150.72	0.00	224.36	1,496.51	155.75	7,551.66
10-20%	23	233	65%	772.65	2,670.39	13.58	70.51	0.00	221.56	1,762.64	46.80	5,558.14
0-10%	22	143	64%	156.04	1,394.00	50.80	62.96	0.00	157.00	1,596.58	33.41	3,450.78
Total	223	2,425	79%	\$503.86	\$7,303.73	\$21.40	\$101.10	\$0.00	\$331.09	\$2,006.01	\$143.65	\$10,410.84

Exhibit C4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: In Home Supports Waiver Enrollees

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures							Total	
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)		Third Party Amount
90-100%	35	408	0%	\$140,358	\$798,202	\$120,898	\$190,969	\$1,241,418	\$888,753	\$0	\$228,610	\$3,609,208
80-90%	36	425	0%	618	799,172	22,713	97,578	968,880	311,366	0	80,593	2,280,921
70-80%	35	396	0%	0	664,386	71,571	66,967	705,787	177,106	0	87,317	1,773,135
60-70%	36	403	0%	0	647,054	13,056	9,165	638,338	165,867	0	66,473	1,539,953
50-60%	35	396	3%	0	592,020	43,116	18,444	439,989	122,823	23,249	59,871	1,299,512
40-50%	36	410	3%	9,416	556,935	19,360	13,706	356,600	145,122	2,114	59,587	1,162,838
30-40%	35	388	0%	0	526,673	33,987	9,544	254,153	79,272	0	28,336	931,965
20-30%	36	376	0%	0	476,890	18,563	6,104	96,101	63,136	0	23,050	683,844
10-20%	35	303	0%	785	270,861	10,084	5,366	49,932	78,577	0	9,491	425,095
0-10%	36	127	0%	0	56,628	5,605	4,144	33,300	35,871	0	11,451	146,999
Total	355	3,632	1%	\$151,176	\$5,388,821	\$358,953	\$421,987	\$4,784,497	\$2,067,894	\$25,362	\$654,779	\$13,853,469

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures							Total	
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)		Third Party Amount
90-100%	31	372	0%	\$150,994	\$598,197	\$43,683	\$209,828	\$1,107,118	\$820,915	\$0	\$209,955	\$3,140,690
80-90%	31	372	0%	4,316	668,800	106,289	52,998	844,141	213,951	0	85,619	1,976,114
70-80%	31	370	0%	4,316	560,197	23,635	42,939	736,184	229,888	0	47,386	1,644,544
60-70%	31	361	3%	10,522	577,907	13,403	29,060	479,968	207,392	12,681	80,937	1,411,871
50-60%	32	379	0%	0	508,958	11,779	12,866	557,646	101,499	0	77,681	1,270,430
40-50%	31	366	0%	0	543,100	36,482	6,186	331,414	83,859	0	42,473	1,043,514
30-40%	31	369	0%	0	508,802	7,485	10,392	232,701	88,572	0	29,276	877,229
20-30%	31	347	3%	0	397,489	28,313	2,804	128,906	73,289	8,454	27,794	667,049
10-20%	31	350	0%	0	364,759	17,695	4,671	56,612	34,826	0	21,021	499,583
0-10%	31	262	3%	0	139,443	11,181	4,887	25,066	47,493	4,227	5,071	237,368
Total	311	3,548	1%	\$170,147	\$4,867,653	\$299,947	\$376,632	\$4,499,755	\$1,901,684	\$25,362	\$627,213	\$12,768,392

Exhibit C4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: In Home Supports Waiver Enrollees

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	35	408	0%	\$4,010	\$22,806	\$3,454	\$5,456	\$35,469	\$25,393	\$0	\$6,532	\$103,120
80-90%	36	425	0%	17	22,199	631	2,711	26,913	8,649	0	2,239	63,359
70-80%	35	396	0%	0	18,982	2,045	1,913	20,165	5,060	0	2,495	50,661
60-70%	36	403	0%	0	17,974	363	255	17,732	4,607	0	1,846	42,776
50-60%	35	396	3%	0	16,915	1,232	527	12,571	3,509	664	1,711	37,129
40-50%	36	410	3%	262	15,470	538	381	9,906	4,031	59	1,655	32,301
30-40%	35	388	0%	0	15,048	971	273	7,262	2,265	0	810	26,628
20-30%	36	376	0%	0	13,247	516	170	2,669	1,754	0	640	18,996
10-20%	35	303	0%	22	7,739	288	153	1,427	2,245	0	271	12,146
0-10%	36	127	0%	0	1,573	156	115	925	996	0	318	4,083
Total	355	3,632	1%	\$426	\$15,180	\$1,011	\$1,189	\$13,477	\$5,825	\$71	\$1,844	\$39,024

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	31	372	0%	\$4,871	\$19,297	\$1,409	\$6,769	\$35,713	\$26,481	\$0	\$6,773	\$101,313
80-90%	31	372	0%	139	21,574	3,429	1,710	27,230	6,902	0	2,762	63,746
70-80%	31	370	0%	139	18,071	762	1,385	23,748	7,416	0	1,529	53,050
60-70%	31	361	3%	339	18,642	432	937	15,483	6,690	409	2,611	45,544
50-60%	32	379	0%	0	15,905	368	402	17,426	3,172	0	2,428	39,701
40-50%	31	366	0%	0	17,519	1,177	200	10,691	2,705	0	1,370	33,662
30-40%	31	369	0%	0	16,413	241	335	7,506	2,857	0	944	28,298
20-30%	31	347	3%	0	12,822	913	90	4,158	2,364	273	897	21,518
10-20%	31	350	0%	0	11,766	571	151	1,826	1,123	0	678	16,116
0-10%	31	262	3%	0	4,498	361	158	809	1,532	136	164	7,657
Total	311	3,548	1%	\$547	\$15,652	\$964	\$1,211	\$14,469	\$6,115	\$82	\$2,017	\$41,056

Exhibit C4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: In Home Supports Waiver Enrollees

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures							Total	
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)		Third Party Amount
90-100%	35	408	0%	\$344.01	\$1,956.38	\$296.32	\$468.06	\$3,042.69	\$2,178.32	\$0.00	\$560.32	\$8,846.10
80-90%	36	425	0%	1.45	1,880.41	53.44	229.60	2,279.72	732.63	0.00	189.63	5,366.87
70-80%	35	396	0%	0.00	1,677.74	180.73	169.11	1,782.29	447.24	0.00	220.50	4,477.61
60-70%	36	403	0%	0.00	1,605.59	32.40	22.74	1,583.97	411.58	0.00	164.95	3,821.22
50-60%	35	396	3%	0.00	1,495.00	108.88	46.57	1,111.08	310.16	58.71	151.19	3,281.60
40-50%	36	410	3%	22.97	1,358.38	47.22	33.43	869.76	353.96	5.15	145.33	2,836.19
30-40%	35	388	0%	0.00	1,357.41	87.59	24.60	655.03	204.31	0.00	73.03	2,401.97
20-30%	36	376	0%	0.00	1,268.32	49.37	16.23	255.59	167.92	0.00	61.30	1,818.73
10-20%	35	303	0%	2.59	893.93	33.28	17.71	164.79	259.33	0.00	31.32	1,402.95
0-10%	36	127	0%	0.00	445.89	44.14	32.63	262.20	282.45	0.00	90.16	1,157.47
Total	355	3,632	1%	\$41.62	\$1,483.71	\$98.83	\$116.19	\$1,317.32	\$569.35	\$6.98	\$180.28	\$3,814.28

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures							Total	
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)		Third Party Amount
90-100%	31	372	0%	\$405.90	\$1,608.06	\$117.43	\$564.05	\$2,976.12	\$2,206.76	\$0.00	\$564.40	\$8,442.72
80-90%	31	372	0%	11.60	1,797.85	285.72	142.47	2,269.20	575.14	0.00	230.16	5,312.13
70-80%	31	370	0%	11.66	1,514.05	63.88	116.05	1,989.69	621.32	0.00	128.07	4,444.71
60-70%	31	361	3%	29.15	1,600.85	37.13	80.50	1,329.55	574.49	35.13	224.20	3,911.00
50-60%	32	379	0%	0.00	1,342.90	31.08	33.95	1,471.36	267.81	0.00	204.96	3,352.06
40-50%	31	366	0%	0.00	1,483.88	99.68	16.90	905.50	229.12	0.00	116.05	2,851.13
30-40%	31	369	0%	0.00	1,378.87	20.29	28.16	630.63	240.03	0.00	79.34	2,377.31
20-30%	31	347	3%	0.00	1,145.50	81.59	8.08	371.49	211.21	24.36	80.10	1,922.33
10-20%	31	350	0%	0.00	1,042.17	50.56	13.34	161.75	99.50	0.00	60.06	1,427.38
0-10%	31	262	3%	0.00	532.23	42.68	18.65	95.67	181.27	16.13	19.35	905.98
Total	311	3,548	1%	\$47.96	\$1,371.94	\$84.54	\$106.15	\$1,268.25	\$535.99	\$7.15	\$176.78	\$3,598.76

Exhibit C5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Nursing Home Residents

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	650	7,558	85%	\$45,831,176	\$96,551	\$27,494	\$1,063,912	\$0	\$2,507,012	\$11,834,099	\$607,290	\$61,967,536
80-90%	649	7,749	99%	28,727,842	6,446	6,487	262,542	0	440,727	13,845,586	9,685	43,299,315
70-80%	650	7,732	98%	26,456,209	970	8,332	245,986	0	372,079	13,749,969	45,266	40,878,811
60-70%	649	7,617	98%	24,343,949	5,070	4,679	179,872	0	383,963	13,455,685	17,443	38,390,660
50-60%	650	7,313	96%	21,659,261	15,828	5,628	210,364	0	431,104	12,600,255	16,300	34,938,740
40-50%	649	6,160	97%	17,418,057	55,305	8,906	330,234	0	430,275	10,787,001	48,051	29,077,828
30-40%	650	4,470	94%	12,861,525	97,295	15,229	452,299	0	423,073	7,647,925	77,766	21,575,112
20-30%	649	2,830	92%	7,892,604	125,114	18,029	471,692	0	387,717	4,758,168	35,203	13,688,527
10-20%	650	1,559	89%	3,815,991	177,903	25,704	425,264	0	356,503	2,575,346	8,864	7,385,575
0-10%	649	742	90%	1,295,944	110,279	20,980	136,491	0	121,374	1,204,104	7,744	2,896,916
Total	6,495	53,730	94%	\$190,302,558	\$690,760	\$141,468	\$3,778,656	\$0	\$5,853,826	\$92,458,138	\$873,613	\$294,099,021

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	651	7,571	85%	\$47,313,947	\$154,148	\$14,019	\$1,183,900	\$0	\$2,281,132	\$11,952,910	\$180,139	\$63,080,195
80-90%	652	7,774	98%	30,547,956	23,694	6,735	280,900	0	501,179	13,781,399	6,327	45,148,190
70-80%	651	7,697	98%	28,119,529	11,715	4,457	319,111	0	436,273	13,632,877	13,291	42,537,253
60-70%	651	7,619	97%	25,858,746	3,197	7,765	290,380	0	434,234	13,341,701	86,067	40,022,091
50-60%	652	7,303	96%	23,054,914	9,779	10,048	287,245	0	342,625	12,721,239	45,559	36,471,409
40-50%	651	6,081	95%	18,738,336	56,243	7,113	419,023	0	505,330	10,500,979	71,830	30,298,854
30-40%	651	4,448	94%	13,550,048	101,436	10,367	413,166	0	397,199	7,600,737	97,187	22,170,140
20-30%	651	2,904	91%	8,837,335	108,084	11,893	526,736	0	428,910	4,888,916	26,825	14,828,698
10-20%	652	1,653	89%	4,589,900	150,320	25,362	435,661	0	292,416	2,709,763	29,826	8,233,248
0-10%	651	818	88%	1,559,576	109,581	12,475	159,596	0	120,657	1,296,799	7,279	3,265,963
Total	6,513	53,868	93%	\$202,170,285	\$728,198	\$110,235	\$4,315,718	\$0	\$5,739,956	\$92,427,319	\$564,330	\$306,056,041

Exhibit C5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Nursing Home Residents

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	650	7,558	85%	\$70,510	\$149	\$42	\$1,637	\$0	\$3,857	\$18,206	\$934	\$95,335
80-90%	649	7,749	99%	44,265	10	10	405	0	679	21,334	15	66,717
70-80%	650	7,732	98%	40,702	1	13	378	0	572	21,154	70	62,890
60-70%	649	7,617	98%	37,510	8	7	277	0	592	20,733	27	59,154
50-60%	650	7,313	96%	33,322	24	9	324	0	663	19,385	25	53,752
40-50%	649	6,160	97%	26,838	85	14	509	0	663	16,621	74	44,804
30-40%	650	4,470	94%	19,787	150	23	696	0	651	11,766	120	33,192
20-30%	649	2,830	92%	12,161	193	28	727	0	597	7,332	54	21,092
10-20%	650	1,559	89%	5,871	274	40	654	0	548	3,962	14	11,362
0-10%	649	742	90%	1,997	170	32	210	0	187	1,855	12	4,464
Total	6,495	53,730	94%	\$29,300	\$106	\$22	\$582	\$0	\$901	\$14,235	\$135	\$45,281

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	651	7,571	85%	\$72,679	\$237	\$22	\$1,819	\$0	\$3,504	\$18,361	\$277	\$96,897
80-90%	652	7,774	98%	46,853	36	10	431	0	769	21,137	10	69,246
70-80%	651	7,697	98%	43,194	18	7	490	0	670	20,941	20	65,341
60-70%	651	7,619	97%	39,722	5	12	446	0	667	20,494	132	61,478
50-60%	652	7,303	96%	35,360	15	15	441	0	525	19,511	70	55,938
40-50%	651	6,081	95%	28,784	86	11	644	0	776	16,131	110	46,542
30-40%	651	4,448	94%	20,814	156	16	635	0	610	11,675	149	34,056
20-30%	651	2,904	91%	13,575	166	18	809	0	659	7,510	41	22,778
10-20%	652	1,653	89%	7,040	231	39	668	0	448	4,156	46	12,628
0-10%	651	818	88%	2,396	168	19	245	0	185	1,992	11	5,017
Total	6,513	53,868	93%	\$31,041	\$112	\$17	\$663	\$0	\$881	\$14,191	\$87	\$46,992

Exhibit C5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Nursing Home Residents

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	650	7,558	85%	\$6,063.93	\$12.77	\$3.64	\$140.77	\$0.00	\$331.70	\$1,565.77	\$80.35	\$8,198.93
80-90%	649	7,749	99%	3,707.30	0.83	0.84	33.88	0.00	56.88	1,786.76	1.25	5,587.73
70-80%	650	7,732	98%	3,421.65	0.13	1.08	31.81	0.00	48.12	1,778.32	5.85	5,286.96
60-70%	649	7,617	98%	3,196.00	0.67	0.61	23.61	0.00	50.41	1,766.53	2.29	5,040.13
50-60%	650	7,313	96%	2,961.75	2.16	0.77	28.77	0.00	58.95	1,722.99	2.23	4,777.62
40-50%	649	6,160	97%	2,827.61	8.98	1.45	53.61	0.00	69.85	1,751.14	7.80	4,720.43
30-40%	650	4,470	94%	2,877.30	21.77	3.41	101.19	0.00	94.65	1,710.95	17.40	4,826.65
20-30%	649	2,830	92%	2,788.91	44.21	6.37	166.68	0.00	137.00	1,681.33	12.44	4,836.94
10-20%	650	1,559	89%	2,447.72	114.11	16.49	272.78	0.00	228.67	1,651.92	5.69	4,737.38
0-10%	649	742	90%	1,746.56	148.62	28.27	183.95	0.00	163.58	1,622.78	10.44	3,904.20
Total	6,495	53,730	94%	\$3,541.83	\$12.86	\$2.63	\$70.33	\$0.00	\$108.95	\$1,720.79	\$16.26	\$5,473.65

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total
				Medicaid								
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	651	7,571	85%	\$6,249.37	\$20.36	\$1.85	\$156.37	\$0.00	\$301.30	\$1,578.78	\$23.79	\$8,331.82
80-90%	652	7,774	98%	3,929.50	3.05	0.87	36.13	0.00	64.47	1,772.76	0.81	5,807.59
70-80%	651	7,697	98%	3,653.31	1.52	0.58	41.46	0.00	56.68	1,771.19	1.73	5,526.47
60-70%	651	7,619	97%	3,393.98	0.42	1.02	38.11	0.00	56.99	1,751.11	11.30	5,252.93
50-60%	652	7,303	96%	3,156.91	1.34	1.38	39.33	0.00	46.92	1,741.92	6.24	4,994.03
40-50%	651	6,081	95%	3,081.46	9.25	1.17	68.91	0.00	83.10	1,726.85	11.81	4,982.54
30-40%	651	4,448	94%	3,046.32	22.80	2.33	92.89	0.00	89.30	1,708.80	21.85	4,984.29
20-30%	651	2,904	91%	3,043.16	37.22	4.10	181.38	0.00	147.70	1,683.51	9.24	5,106.30
10-20%	652	1,653	89%	2,776.71	90.94	15.34	263.56	0.00	176.90	1,639.30	18.04	4,980.79
0-10%	651	818	88%	1,906.57	133.96	15.25	195.11	0.00	147.50	1,585.33	8.90	3,992.62
Total	6,513	53,868	93%	\$3,753.07	\$13.52	\$2.05	\$80.12	\$0.00	\$106.56	\$1,715.81	\$10.48	\$5,681.59

Exhibit C6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Bureau of Behavioral Health Consumers

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures									
				Medicaid								Third Party Amount	Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)			
90-100%	1,342	15,441	55%	\$578,301	\$11,888,229	\$26,599,530	\$5,733,661	\$2,357,694	\$13,267,001	\$13,184,350	\$734,587	\$74,343,353	
80-90%	1,343	15,180	62%	33,292	651,984	11,861,262	2,402,692	1,160,884	5,830,050	13,020,540	381,309	35,342,012	
70-80%	1,342	14,238	42%	37,518	268,142	9,421,719	1,611,093	844,557	5,211,266	7,654,492	326,236	25,375,024	
60-70%	1,342	13,051	24%	23,116	148,482	8,223,178	1,357,336	508,531	4,214,738	2,647,248	306,138	17,428,766	
50-60%	1,342	12,322	19%	8,989	64,452	6,403,047	920,139	305,791	2,804,193	1,480,993	202,888	12,190,492	
40-50%	1,343	10,544	19%	3,163	37,615	4,520,069	603,771	135,979	1,935,992	1,077,719	136,128	8,450,436	
30-40%	1,342	8,414	21%	138	25,768	3,048,640	359,037	102,826	1,236,003	800,113	89,773	5,662,297	
20-30%	1,342	7,076	15%	550	12,646	2,057,632	192,097	54,776	838,684	353,455	57,705	3,567,545	
10-20%	1,342	4,619	19%	0	3,260	1,122,532	86,168	25,950	413,197	366,589	42,353	2,060,049	
0-10%	1,349	3,423	0%	0	2,845	512,625	23,764	7,236	168,764	0	25,615	740,850	
Total	13,429	104,308	28%	\$685,066	\$13,103,424	\$73,770,234	\$13,289,757	\$5,504,224	\$35,919,888	\$40,585,498	\$2,302,732	\$185,160,824	

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Expenditures									
				Medicaid								Third Party Amount	Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)			
90-100%	1,349	15,379	53%	\$650,275	\$11,685,044	\$25,814,717	\$7,339,029	\$2,371,223	\$13,403,370	\$12,795,710	\$860,784	\$74,920,152	
80-90%	1,349	15,214	61%	107,590	635,816	11,449,848	2,644,567	1,143,860	5,372,035	13,169,955	372,527	34,896,199	
70-80%	1,348	14,438	41%	34,221	319,454	9,004,477	1,976,667	894,213	5,159,790	7,556,468	336,732	25,282,022	
60-70%	1,349	13,013	24%	13,620	183,436	7,992,491	1,466,204	406,462	4,246,839	2,712,064	323,074	17,344,190	
50-60%	1,349	12,265	20%	6,959	111,728	6,226,950	1,017,778	259,273	2,773,157	1,626,907	180,030	12,202,782	
40-50%	1,349	10,992	18%	3,667	43,761	4,749,454	563,501	160,556	1,902,006	1,065,441	135,168	8,623,554	
30-40%	1,348	8,873	20%	0	20,324	3,160,379	389,389	95,379	1,349,997	778,455	105,147	5,899,069	
20-30%	1,349	7,005	16%	0	13,166	2,111,877	206,348	57,550	830,974	414,724	78,664	3,713,303	
10-20%	1,349	4,644	21%	64	3,865	1,139,272	93,734	23,266	397,851	399,449	41,719	2,099,219	
0-10%	1,356	3,180	0%	0	709	533,560	24,078	4,945	157,372	0	28,126	748,791	
Total	13,495	105,003	27%	\$816,396	\$13,017,304	\$72,183,025	\$15,721,295	\$5,416,725	\$35,593,391	\$40,519,175	\$2,461,971	\$185,729,282	

Exhibit C6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Bureau of Behavioral Health Consumers

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	1,342	15,441	55%	\$431	\$8,859	\$19,821	\$4,272	\$1,757	\$9,886	\$9,824	\$547	\$55,397
80-90%	1,343	15,180	62%	25	485	8,832	1,789	864	4,341	9,695	284	26,316
70-80%	1,342	14,238	42%	28	200	7,021	1,201	629	3,883	5,704	243	18,908
60-70%	1,342	13,051	24%	17	111	6,128	1,011	379	3,141	1,973	228	12,987
50-60%	1,342	12,322	19%	7	48	4,771	686	228	2,090	1,104	151	9,084
40-50%	1,343	10,544	19%	2	28	3,366	450	101	1,442	802	101	6,292
30-40%	1,342	8,414	21%	0	19	2,272	268	77	921	596	67	4,219
20-30%	1,342	7,076	15%	0	9	1,533	143	41	625	263	43	2,658
10-20%	1,342	4,619	19%	0	2	836	64	19	308	273	32	1,535
0-10%	1,349	3,423	0%	0	2	380	18	5	125	0	19	549
Total	13,429	104,308	28%	\$51	\$976	\$5,493	\$990	\$410	\$2,675	\$3,022	\$171	\$13,788

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	Annual Per Member Expenditures								Total
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other	Medicare (estimated)	Third Party Amount	
90-100%	1,349	15,379	53%	\$482	\$8,662	\$19,136	\$5,440	\$1,758	\$9,936	\$9,485	\$638	\$55,538
80-90%	1,349	15,214	61%	80	471	8,488	1,960	848	3,982	9,763	276	25,868
70-80%	1,348	14,438	41%	25	237	6,680	1,466	663	3,828	5,606	250	18,755
60-70%	1,349	13,013	24%	10	136	5,925	1,087	301	3,148	2,010	239	12,857
50-60%	1,349	12,265	20%	5	83	4,616	754	192	2,056	1,206	133	9,046
40-50%	1,349	10,992	18%	3	32	3,521	418	119	1,410	790	100	6,393
30-40%	1,348	8,873	20%	0	15	2,344	289	71	1,001	577	78	4,376
20-30%	1,349	7,005	16%	0	10	1,566	153	43	616	307	58	2,753
10-20%	1,349	4,644	21%	0	3	845	69	17	295	296	31	1,556
0-10%	1,356	3,180	0%	0	1	393	18	4	116	0	21	552
Total	13,495	105,003	27%	\$60	\$965	\$5,349	\$1,165	\$401	\$2,638	\$3,003	\$182	\$13,763

Exhibit C6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Decile Summary
 Population: Bureau of Behavioral Health Consumers

SFY 2011 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total	
				Medicaid				Medicaid - Other			Medicare (estimated)		Third Party Amount
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other				
90-100%	1,342	15,441	55%	\$37.45	\$769.91	\$1,722.66	\$371.33	\$152.69	\$859.21	\$853.85	\$47.57	\$4,814.67	
80-90%	1,343	15,180	62%	2.19	42.95	781.37	158.28	76.47	384.06	857.74	25.12	2,328.20	
70-80%	1,342	14,238	42%	2.64	18.83	661.73	113.15	59.32	366.01	537.61	22.91	1,782.20	
60-70%	1,342	13,051	24%	1.77	11.38	630.08	104.00	38.96	322.94	202.84	23.46	1,335.44	
50-60%	1,342	12,322	19%	0.73	5.23	519.64	74.67	24.82	227.58	120.19	16.47	989.33	
40-50%	1,343	10,544	19%	0.30	3.57	428.69	57.26	12.90	183.61	102.21	12.91	801.44	
30-40%	1,342	8,414	21%	0.02	3.06	362.33	42.67	12.22	146.90	95.09	10.67	672.96	
20-30%	1,342	7,076	15%	0.08	1.79	290.79	27.15	7.74	118.53	49.95	8.15	504.18	
10-20%	1,342	4,619	19%	0.00	0.71	243.02	18.66	5.62	89.46	79.37	9.17	445.99	
0-10%	1,349	3,423	0%	0.00	0.83	149.76	6.94	2.11	49.30	0.00	7.48	216.43	
Total	13,429	104,308	28%	\$6.57	\$125.62	\$707.23	\$127.41	\$52.77	\$344.36	\$389.09	\$22.08	\$1,775.14	

SFY 2012 Population Expenditure Distribution

Decile	Number of Individuals	Member Months	Percent Dual Eligible	PMPM Expenditures								Total	
				Medicaid				Medicaid - Other			Medicare (estimated)		Third Party Amount
				Medicaid ICF/SNF	Medicaid HCBS Waiver	Medicaid CMHC	Medicaid Hospital IP and OP	Medicaid at School	Medicaid - Other				
90-100%	1,349	15,379	53%	\$42.28	\$759.81	\$1,678.57	\$477.21	\$154.19	\$871.54	\$832.02	\$55.97	\$4,871.59	
80-90%	1,349	15,214	61%	7.07	41.79	752.59	173.82	75.18	353.10	865.65	24.49	2,293.69	
70-80%	1,348	14,438	41%	2.37	22.13	623.67	136.91	61.93	357.38	523.37	23.32	1,751.08	
60-70%	1,349	13,013	24%	1.05	14.10	614.19	112.67	31.24	326.35	208.41	24.83	1,332.84	
50-60%	1,349	12,265	20%	0.57	9.11	507.70	82.98	21.14	226.10	132.65	14.68	994.93	
40-50%	1,349	10,992	18%	0.33	3.98	432.08	51.26	14.61	173.04	96.93	12.30	784.53	
30-40%	1,348	8,873	20%	0.00	2.29	356.18	43.88	10.75	152.15	87.73	11.85	664.83	
20-30%	1,349	7,005	16%	0.00	1.88	301.48	29.46	8.22	118.63	59.20	11.23	530.09	
10-20%	1,349	4,644	21%	0.01	0.83	245.32	20.18	5.01	85.67	86.01	8.98	452.03	
0-10%	1,356	3,180	0%	0.00	0.22	167.79	7.57	1.55	49.49	0.00	8.84	235.47	
Total	13,495	105,003	27%	\$7.77	\$123.97	\$687.44	\$149.72	\$51.59	\$338.97	\$385.89	\$23.45	\$1,768.80	



APPENDIX D1 - D7

Exhibit D1
New Hampshire Department of Health and Human Services
SFY 2012 Annual Per Member Expenditures
Medicaid All Other
Population: Total

Service Category	Decile		
	Total	90 - 100	80 - 90
Prescription Drugs	\$1,050	\$2,612	\$858
Durable Medical Equipment	295	1,310	349
Physician	284	679	239
Home Health	270	1,416	337
Personal Care	234	1,942	253
Private Duty Nursing	195	1,764	118
DCYF - Private Non-Medical Institution for Children	112	132	215
Wheelchair Van	95	282	258
Dental	75	28	18
All Other	383	705	281
Total	\$2,992	\$10,870	\$2,927

Exhibit D2
New Hampshire Department of Health and Human Services
SFY 2012 Annual Per Member Expenditures
Medicaid All Other
Population: Choices For Independence Waiver Enrollees

Service Category	Decile		
	Total	90 - 100	80 - 90
Personal Care	\$1,750	\$15,976	\$843
Prescription Drugs	987	4,537	1,025
Durable Medical Equipment	619	2,493	900
Physician	468	2,201	571
Wheelchair Van	381	1,616	905
Home Health	244	989	342
Private Duty Nursing	182	1,765	0
Adult Medical Day Care	121	290	347
Federally Qualified and Rural Health Clinics	53	104	72
All Other	119	414	140
Total	\$4,924	\$30,385	\$5,146

Exhibit D3
New Hampshire Department of Health and Human Services
SFY 2012 Annual Per Member Expenditures
Medicaid All Other
Population: Developmentally Disabled Waiver Enrollees

Service Category	Decile		
	Total	90 - 100	80 - 90
Prescription Drugs	\$1,231	\$3,421	\$1,624
Home Health	1,191	1,891	1,601
Private Duty Nursing	897	6,327	1,050
Durable Medical Equipment	836	2,392	1,213
Physician	243	355	320
BDS - Targeted Case Management	167	60	28
DCYF - Private Non-Medical Institution for Children	127	6	197
BDS - Early Intervention	65	37	2
Adult Medical Day Care	64	15	103
All Other	347	510	354
Total	\$5,169	\$15,014	\$6,491

Exhibit D4
New Hampshire Department of Health and Human Services
SFY 2012 Annual Per Member Expenditures
Medicaid All Other
Population: Acquired Brain Disorder Waiver Enrollees

Service Category	Decile		
	Total	90 - 100	80 - 90
Prescription Drugs	\$1,375	\$4,612	\$701
Durable Medical Equipment	941	2,276	1,368
Physician	462	303	174
Wheelchair Van	270	1,664	13
Adult Medical Day Care	156	481	0
Home Health	72	0	37
Ambulance	66	221	53
Federally Qualified and Rural Health Clinics	45	7	29
BDS - Targeted Case Management	42	0	0
All Other	173	109	41
Total	\$3,600	\$9,674	\$2,415

Exhibit D5
New Hampshire Department of Health and Human Services
SFY 2012 Annual Per Member Expenditures
Medicaid All Other
Population: In Home Supports Waiver Enrollees

Service Category	Decile		
	Total	90 - 100	80 - 90
Prescription Drugs	\$2,046	\$5,852	\$1,985
Durable Medical Equipment	1,864	6,381	3,253
Private Duty Nursing	991	8,599	808
Physician	270	903	254
Home Health	232	1,726	29
Dental	117	112	229
DCYF - Intensive Home and Community Service	117	649	0
Psychology	55	0	1
DCYF - Private Non-Medical Institution for Children	49	0	0
All Other	373	2,260	343
Total	\$6,115	\$26,481	\$6,902

Exhibit D6
New Hampshire Department of Health and Human Services
SFY 2012 Annual Per Member Expenditures
Medicaid All Other
Population: Nursing Home Residents

Service Category	Decile		
	Total	90 - 100	80 - 90
Prescription Drugs	\$287	\$1,279	\$318
Physician	160	551	101
Wheelchair Van	151	378	177
Durable Medical Equipment	82	317	80
Ambulance	34	114	21
Federally Qualified and Rural Health Clinics	25	44	38
Private Duty Nursing	17	1	0
Home Health	13	15	0
Optometry / Glasses	8	11	15
All Other	104	794	19
Total	\$881	\$3,504	\$769

Exhibit D7
New Hampshire Department of Health and Human Services
SFY 2012 Annual Per Member Expenditures
Medicaid All Other
Population: Bureau of Behavioral Health Consumers

Service Category	Decile		
	Total	90 - 100	80 - 90
Prescription Drugs	\$1,372	\$5,035	\$2,100
Physician	306	804	458
DCYF - Private Non-Medical Institution for Children	191	1,185	289
Dental	128	109	126
DCYF - Intensive Home and Community Service	85	312	205
Home Health	81	628	106
DCYF - Placement Services	80	536	139
Federally Qualified and Rural Health Clinics	77	114	94
Durable Medical Equipment	67	365	103
All Other	250	848	364
Total	\$2,638	\$9,936	\$3,982

Appendix A3

Detailed Expenditure Summaries for New Hampshire SIM Population



15800 Bluemound Road
Suite 100
Brookfield, WI 53005
USA
Tel +1 262 784 2250
Fax +1 262 923 3680

milliman.com

John D. Meerschaert, FSA, MAAA
Principal and Consulting Actuary

john.meerschaert@milliman.com

December 18, 2013

Ms. Sheri L. Rockburn, CPA, MBA
Director of Finance
Division of Community Based Care Services
Department of Health and Human Services
129 Pleasant St.
Concord, NH 03301

Re: Detailed Expenditure Summaries for New Hampshire SIM Population

Dear Sheri:

The New Hampshire Department of Health and Human Services (DHHS) retained Milliman to provide actuarial support related to New Hampshire's State Health Care Innovation Model (SIM) grant. This letter includes data summaries that can be used to better understand the detailed expenditure profile of New Hampshire's SIM population.

SIM POPULATION DEFINITION

We created several data summaries for New Hampshire's "SIM population," defined as Medicaid beneficiaries receiving long term supports and services (LTSS). The SIM population is further categorized into the following populations:

- > Choices for Independence (CFI) waiver enrollees
- > Developmental Disabilities (DD) waiver enrollees
- > Acquired Brain Disorder (ABD) waiver enrollees
- > In Home Supports (IHS) waiver enrollees
- > Nursing Facility Residents (including skilled nursing facility and intermediate care facility residents)
- > Bureau of Behavioral Health (BBH) consumers

The data summaries exclude individuals receiving LTSS outside of the Medicaid system due to data availability issues.

DETAILED EXPENDITURE PROFILE

We developed detailed data summaries for each SIM population:

- > Appendix A – CFI waiver enrollees
- > Appendix B – DD waiver enrollees
- > Appendix C – ABD waiver enrollees
- > Appendix D – IHS waiver enrollees
- > Appendix E – Nursing home residents
- > Appendix F – BBH consumers

Appendices A - F include a summary of utilization and per member per month (PMPM) expenditures by detailed type of service category for the following six state fiscal year (SFY) and dual status combinations:

- > SFY 2011 – Total
- > SFY 2011 – Dual Eligible
- > SFY 2011 – Medicaid Only
- > SFY 2012 – Total
- > SFY 2012 – Dual Eligible
- > SFY 2012 – Medicaid Only

Appendix G provides a “population overlap” summary that shows how the SIM populations in Appendices A – F overlap. The entire New Hampshire Medicaid population is cross-referenced to show overlaps for each member month between waiver status, nursing home residency, and BBH consumer status. This information can be used to answer questions such as:

- > How many DD waiver enrollees are also BBH consumers?
- > How many CFI waiver enrollees are admitted to a SNF/ICF while they are still enrolled in the CFI waiver?
- > How many BBH consumers are also enrolled in a waiver?
- > What are the PMPM expenditure differences among different SIM populations?

DATA SUMMARY PARAMETERS

We developed the detailed expenditure summaries using the following parameters:

1. All Medicaid covered services, including services included in “Step 1” of the Medicaid Care Management (MCM) Program and all other Medicaid covered services
2. Estimated Medicare expenditures as documented below
3. Third party payer expenditures as documented below
4. Dual eligible status
 - a. Full dual eligibles
 - b. Medicaid only eligibles
5. Waiver population definitions
 - a. CFI
 - b. DD
 - c. ABD
 - d. IHS
6. BBH consumer population
 - a. Severe / Persistent Mental Illness (SPMI)
 - b. Severe Mental Illness (SMI)
 - c. Serious Emotionally Disturbed Child (SED)
 - d. Low Utilizers
7. Nursing home residents (identified using room and board claims in a skilled nursing facility or a nursing home in a particular month)

8. Category of service
 - a. Normal MMIS service categories
 - b. Enhanced detail for several service categories
 - i. Hospital inpatient
 - ii. Hospital outpatient
 - iii. Prescription drugs
 - iv. Mental health center
 - v. CFI waiver services
 - vi. BDS waiver services

MEDICARE EXPENDITURES

The Medicare expenditures for dual eligibles represent **estimated** Medicare expenditures for disabled and aged dual eligibles using the CMS 5% sample data for the state of New Hampshire and average Part D pharmacy expenditures. We developed acuity adjustments to adjust the average dual eligible Medicare expenditures to reflect expected acuity differenced based on diagnosis profile and / or the institutionalized status of each SIM population. The acuity adjusted average Medicare PMPM expenditure estimates were assigned to each dual eligible based on their age for each month they were eligible for both Medicaid and Medicare.

The Medicare expenditure estimates do not represent the actual Medicare expenditures for the actual SIM population, but rather represent acuity adjusted average Medicare dual eligible expenditures. We will update our Medicare estimates if we get access to the 100% New Hampshire sample data from CMS during future phases of SIM testing or implementation.

THIRD PARTY PAYER EXPENDITURES

We included expenditures identified in the Medicaid claims data as “third party” payments. The third party payments likely understate the total private payer expenditures for the SIM population. Future analysis will leverage the New Hampshire Comprehensive Health Care Information System (CHIS) data, which is currently undergoing a major update.

DATA RELIANCE AND IMPORTANT CAVEATS

We used FFS Medicaid expenditure and eligibility data for June 2010 through December 2012 and other DHHS information to develop the historical data summaries shown in this letter. This data was provided by DHHS. We have not audited or verified this data and other information. If the underlying data or information is inaccurate or incomplete, the results of our analysis may likewise be inaccurate or incomplete. We performed a limited review of the data used directly in our analysis for reasonableness and consistency and have not found material defects in the data. If there are material defects in the data, it is possible that they would be uncovered by a detailed, systematic review and comparison of the data to search for data values that are questionable or for relationships that are materially inconsistent. Such a review was beyond the scope of our assignment.

Milliman prepared this letter and the accompanying appendices for the specific purpose of providing SIM population baseline data summaries. This report should not be used for any other purpose. This report has been prepared solely for the internal business use of and is only to be relied upon by the management of DHHS. Milliman does not intend to benefit or create a legal duty to any third party recipient of its work. This letter should only be reviewed in its entirety.

The results of this letter are technical in nature and are dependent upon specific assumptions and methods. No party should rely on these results without a thorough understanding of those assumptions and methods. Such an understanding may require consultation with qualified professionals.

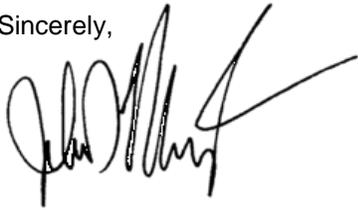
John Meerschaert is a Principal and Consulting Actuary for Milliman, a member of the American Academy of Actuaries, and meets the Qualification Standards of the Academy to render the actuarial opinion contained herein. To the best of his knowledge and belief, this report is complete and accurate and has been prepared in accordance with generally recognized and accepted actuarial principles and practices.

The terms of Milliman's contract with the New Hampshire Department of Health and Human Services signed on November 16, 2012 apply to this report and its use.



Please call me at (262) 796-3434 if you have any questions.

Sincerely,



John D. Meerschaert, FSA, MAAA
Principal and Consulting Actuary

JDM/laa



APPENDIX A

Choices for Independence Waiver Enrollees

Appendix A1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Choices For Independence Waiver Enrollees - Total Population

SFY	10/11	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	CFI
Area	All	Dual Status	All
Population	All	Service Group	All

Member Months: 34,512

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$1,261,740	314	2,056	109.2	714.9	\$613.69	\$36.56
Surgical	349,382	49	316	17.0	109.9	1,105.64	10.12
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	22,527	9	139	3.1	48.3	162.06	0.65
Alcohol and Drug Abuse	3,690	2	11	0.7	3.8	335.46	0.11
Crossover	1,593,586	1,285	7,307	446.8	2,540.7	218.09	46.17
Other	0	0	0	0.0	0.0	0.00	0.00
	\$3,230,925	1,659	9,829	576.8	3,417.6	\$328.71	\$93.62
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$1,067,491	327	10,891	113.7	3,786.9	\$98.02	\$30.93
Intermediate Care Facility	619,358	199	4,626	69.2	1,608.5	133.89	17.95
Swing Beds - Skilled Nursing Facility	25,867	34	248	11.8	86.2	104.30	0.75
Swing Beds - Intermediate Care Facility	10,618	9	104	3.1	36.2	102.10	0.31
Skilled Nursing Facility Atypical Care	27,187	0	53	0.0	18.4	512.97	0.79
Intermediate Care Facility Atypical Care	4,971	2	28	0.7	9.7	177.55	0.14
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$1,755,493	571	15,950	198.5	5,545.9	\$110.06	\$50.87
Hospital Outpatient							
Emergency Room	\$167,201		1,563	0	543.5	\$106.97	\$4.84
Surgery	205,321		5,120	0	1,780.3	40.10	5.95
Radiology	582,917		3,963	0	1,378.0	147.09	16.89
Pathology/Lab	311,767		15,450	0	5,372.0	20.18	9.03
Pharmacy	1,618,515		62,875	0	21,862.0	25.74	46.90
Cardiovascular	69,655		830	0	288.6	83.92	2.02
PT/OT/ST	136,777		3,840	0	1,335.2	35.62	3.96
Psychiatric	588		20	0	7.0	29.38	0.02
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	312,251		8,718	0	3,031.3	35.82	9.05
Other	181,206		5,791	0	2,013.6	31.29	5.25
	\$3,586,199		108,170	0	37,611.3	\$33.15	\$103.91
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$33,359		163	0	56.7	\$204.65	\$0.97
Physician	1,978,133		254,686	0	88,555.6	7.77	57.32
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	4,864		223	0	77.5	21.81	0.14
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	91		4	0	1.4	22.75	0.00
Audiology	335		16	0	5.6	20.92	0.01
Psychology	24,175		587	0	204.1	41.18	0.70
Physical Therapy	17,286		925	0	321.6	18.69	0.50
Speech Therapy	655		31	0	10.8	21.12	0.02
Occupational Therapy	968		54	0	18.8	17.93	0.03
Podiatry	13,927		501	0	174.2	27.80	0.40
Laboratory	23,393		3,016	0	1,048.7	7.76	0.68
X-Ray	20,501		550	0	191.2	37.27	0.59
Methadone Treatment Clinic	3,454		338	0	117.5	10.22	0.10
Medical Services Clinic	209		5	0	1.7	41.86	0.01
Federally Qualified and Rural Health Clinics	207,711		3,593	0	1,249.3	57.81	6.02
Home Health	832,123		35,787	0	12,443.3	23.25	24.11
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	2,370,150		1,367,928	0	475,635.6	1.73	68.68
Ambulance	173,407		9,042	0	3,143.9	19.18	5.02
Wheelchair Van	1,705,024		281,069	0	97,729.1	6.07	49.40
Optometry / Glasses	44,069		2,019	0	702.0	21.83	1.28
Private Duty Nursing	876,338		22,469	0	7,812.6	39.00	25.39
Personal Care	6,861,099		1,566,485	0	544,674.9	4.38	198.80
Adult Medical Day Care	481,276		25,193	0	8,759.7	19.10	13.95
Dental	58,377		893	0	310.5	65.37	1.69
Other	0		0	0	0.0	0.00	0.00
	\$15,730,925		3,575,577	0	1,243,246.5	\$4.40	\$455.81

Appendix A1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Choices For Independence Waiver Enrollees - Total Population

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver CFI
 Area All Dual Status All
 Population All Service Group All

Member Months: 34,512

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$770,134		52,825	0	18,367.5	\$14.58	\$22.31
Single Source Brand	3,065,127		11,674	0	4,059.1	262.56	88.81
Multi-Source Brand	464,600		1,410	0	490.3	329.50	13.46
Other	293,336		3,832	0	1,332.4	76.55	8.50
	\$4,593,196		69,741	0	24,249.3	\$65.86	\$133.09
Mental Health Center							
Case Management	\$1,047,658		2,758	0	959.0	\$379.86	\$30.36
Long Term Support Service	1,155,011		49,083	0	17,066.4	23.53	33.47
Partial Hospital	46,385		469	0	163.1	98.90	1.34
Psychotherapy	59,001		1,109	0	385.6	53.20	1.71
Evidence Based Practice	71,551		3,268	0	1,136.3	21.89	2.07
Medication Management	23,078		632	0	219.7	36.52	0.67
Emergency Service 24/7	15,755		670	0	233.0	23.51	0.46
APRTP	168,198		3,454	0	1,201.0	48.70	4.87
Other	18,002		243	0	84.5	74.08	0.52
	\$2,604,637		61,686	0	21,448.5	\$42.22	\$75.47
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	21,607		84	0	29.2	257.23	0.63
	\$21,607		84	0	29.2	\$257.23	\$0.63
Waiver Services - BDS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Community Support Services	0		0	0	0.0	0.00	0.00
Consolidated Developmental Services	0		0	0	0.0	0.00	0.00
Specialty Services	208,147		27,338	0	9,505.6	7.61	6.03
Day Habilitation Services	0		0	0	0.0	0.00	0.00
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$208,147		27,338	0	9,505.6	\$7.61	\$6.03
Waiver Services - BEAS							
Case Management *	\$6,054,232		710,514	0	247,049.4	\$8.52	\$175.42
Respite Care Services *	135,610		81,438	0	28,316.4	1.67	3.93
Environmental Modifications Services *	657,223		109	0	37.9	6,029.57	19.04
Homemaker and Other In-Home Services	3,735,601		759,662	0	264,138.4	4.92	108.24
Personal Care Services	21,023,445		4,805,870	0	1,671,025.7	4.37	609.16
Emergency Response System	658,118		19,446	0	6,761.5	33.84	19.07
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	1,096,741		22,274	0	7,744.8	49.24	31.78
Home Health Aide	5,506,714		713,797	0	248,190.9	7.71	159.56
Skilled Nursing	3,874,012		46,328	0	16,108.5	83.62	112.25
Adult Family Care	74,822		1,230	0	427.7	60.83	2.17
Kinship Care	87,814		1,549	0	538.6	56.69	2.54
Supported Housing	1,497,496		29,530	0	10,267.7	50.71	43.39
Residential Care	7,236,757		159,474	0	55,449.9	45.38	209.69
Medical Equipment and Delivery of Goods	337,471		1,050	0	365.1	321.40	9.78
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$51,976,056		7,352,271	0	2,556,422.5	\$7.07	\$1,506.03
Medicaid to School Program							
Clinic Services	18,419		13,875	0	4,824.4	1.33	0.53
	\$18,419		13,875	0	4,824.4	\$1.33	\$0.53
All Medicaid Services	\$83,725,604	2,230	11,234,521	775.4	3,906,300.8	\$7.45	\$2,425.99
Medicare	\$53,676,918						\$1,555.31
Third Party Amount	\$735,296						\$21.31
All Services	\$138,137,818	2,230	11,234,521	775.4	3,906,300.8	\$12.30	\$4,002.60

Appendix A2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Choices For Independence Waiver Enrollees - Full Duals

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver CFI
 Area All Dual Status Full Duals
 Population All Service Group All

Member Months: 29,150

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$51,313	14	123	5.8	50.6	\$417.18	\$1.76
Surgical	8,765	1	9	0.4	3.7	973.84	0.30
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	1,939	1	3	0.4	1.2	646.41	0.07
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	1,585,758	1,278	7,292	526.1	3,001.9	217.47	54.40
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,647,774	1,294	7,427	532.7	3,057.4	\$221.86	\$56.53
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$994,665	308	10,420	126.8	4,289.5	\$95.46	\$34.12
Intermediate Care Facility	536,707	177	4,035	72.9	1,661.1	133.01	18.41
Swing Beds - Skilled Nursing Facility	16,333	17	161	7.0	66.3	101.45	0.56
Swing Beds - Intermediate Care Facility	7,733	6	73	2.5	30.1	105.93	0.27
Skilled Nursing Facility Atypical Care	3,212	0	6	0.0	2.5	535.38	0.11
Intermediate Care Facility Atypical Care	4,971	2	28	0.8	11.5	177.55	0.17
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$1,563,622	510	14,723	209.9	6,060.9	\$106.20	\$53.64
Hospital Outpatient							
Emergency Room	\$43,953		543	0	223.5	\$80.94	\$1.51
Surgery	41,484		1,037	0	426.9	40.00	1.42
Radiology	265,306		2,427	0	999.1	109.31	9.10
Pathology/Lab	219,011		4,421	0	1,820.0	49.54	7.51
Pharmacy	931,055		38,986	0	16,049.1	23.88	31.94
Cardiovascular	31,174		387	0	159.3	80.55	1.07
PT/OT/ST	77,641		1,431	0	589.1	54.26	2.66
Psychiatric	588		20	0	8.2	29.38	0.02
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	311,796		8,709	0	3,585.2	35.80	10.70
Other	35,937		1,622	0	667.7	22.16	1.23
	\$1,957,943		59,583	0	24,528.2	\$32.86	\$67.17
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$7,177		61	0	25.1	\$117.66	\$0.25
Physician	842,440		116,085	0	47,788.0	7.26	28.90
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	1,481		85	0	35.0	17.42	0.05
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	18		1	0	0.4	17.56	0.00
Audiology	103		6	0	2.5	17.20	0.00
Psychology	12,267		406	0	167.1	30.21	0.42
Physical Therapy	3,491		285	0	117.3	12.25	0.12
Speech Therapy	0		0	0	0.0	0.00	0.00
Occupational Therapy	403		24	0	9.9	16.78	0.01
Podiatry	6,249		266	0	109.5	23.49	0.21
Laboratory	8,099		1,035	0	426.1	7.83	0.28
X-Ray	3,733		222	0	91.4	16.82	0.13
Methadone Treatment Clinic	3,454		338	0	139.1	10.22	0.12
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	99,740		2,710	0	1,115.6	36.80	3.42
Home Health	331,434		14,774	0	6,081.9	22.43	11.37
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	1,484,947		944,408	0	388,778.6	1.57	50.94
Ambulance	54,293		3,427	0	1,410.8	15.84	1.86
Wheelchair Van	1,453,705		237,757	0	97,876.0	6.11	49.87
Optometry / Glasses	31,705		1,504	0	619.1	21.08	1.09
Private Duty Nursing	467,554		11,826	0	4,868.3	39.54	16.04
Personal Care	5,375,854		1,227,388	0	505,271.2	4.38	184.42
Adult Medical Day Care	396,508		20,991	0	8,641.2	18.89	13.60
Dental	41,488		634	0	261.0	65.44	1.42
Other	0		0	0	0.0	0.00	0.00
	\$10,626,144		2,584,233	0	1,063,835.2	\$4.11	\$364.53

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SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver CFI
 Area All Dual Status Full Duals
 Population All Service Group All

Member Months: 29,150

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$141,944		19,314	0	7,950.9	\$7.35	\$4.87
Single Source Brand	235,152		1,503	0	618.7	156.45	8.07
Multi-Source Brand	33,478		140	0	57.6	239.13	1.15
Other	13,376		3,077	0	1,266.7	4.35	0.46
	\$423,949		24,034	0	9,893.9	\$17.64	\$14.54
Mental Health Center							
Case Management	\$854,491		2,251	0	926.7	\$379.60	\$29.31
Long Term Support Service	914,163		38,811	0	15,977.1	23.55	31.36
Partial Hospital	38,516		389	0	160.1	99.01	1.32
Psychotherapy	26,263		372	0	153.1	70.60	0.90
Evidence Based Practice	60,520		2,753	0	1,133.3	21.98	2.08
Medication Management	13,908		433	0	178.3	32.12	0.48
Emergency Service 24/7	10,681		454	0	186.9	23.53	0.37
APRTP	82,383		3,294	0	1,356.0	25.01	2.83
Other	4,084		69	0	28.4	59.19	0.14
	\$2,005,007		48,826	0	20,099.9	\$41.06	\$68.78
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	14,154		55	0	22.6	257.35	0.49
	\$14,154		55	0	22.6	\$257.35	\$0.49
Waiver Services - BDS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Community Support Services	0		0	0	0.0	0.00	0.00
Consolidated Developmental Services	0		0	0	0.0	0.00	0.00
Specialty Services	89,430		11,356	0	4,674.9	7.88	3.07
Day Habilitation Services	0		0	0	0.0	0.00	0.00
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$89,430		11,356	0	4,674.9	\$7.88	\$3.07
Waiver Services - BEAS							
Case Management *	\$5,131,048		602,159	0	247,887.1	\$8.52	\$176.02
Respite Care Services *	122,706		73,711	0	30,344.2	1.66	4.21
Environmental Modifications Services *	547,128		92	0	37.9	5,947.04	18.77
Homemaker and Other In-Home Services	3,168,368		645,868	0	265,880.5	4.91	108.69
Personal Care Services	16,651,054		3,806,932	0	1,567,176.1	4.37	571.22
Emergency Response System	566,953		16,730	0	6,887.1	33.89	19.45
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	964,987		19,598	0	8,067.8	49.24	33.10
Home Health Aide	4,488,514		571,877	0	235,421.1	7.85	153.98
Skilled Nursing	3,258,577		38,896	0	16,012.1	83.78	111.79
Adult Family Care	74,397		1,224	0	503.9	60.78	2.55
Kinship Care	87,814		1,549	0	637.7	56.69	3.01
Supported Housing	1,455,484		28,820	0	11,864.2	50.50	49.93
Residential Care	6,641,086		147,689	0	60,798.2	44.97	227.82
Medical Equipment and Delivery of Goods	281,409		910	0	374.6	309.24	9.65
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$43,439,525		5,956,055	0	2,451,892.3	\$7.29	\$1,490.21
Medicaid to School Program							
Clinic Services	10,869		7,405	0	3,048.4	1.47	0.37
	\$10,869		7,405	0	3,048.4	\$1.47	\$0.37
All Medicaid Services	\$61,778,417	1,804	8,713,697	742.6	3,587,113.7	\$7.09	\$2,119.33
Medicare	\$53,676,918						\$1,841.40
Third Party Amount	\$235,332						\$8.07
All Services	\$115,690,668	1,804	8,713,697	742.6	3,587,113.7	\$13.28	\$3,968.81

Appendix A3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Choices For Independence Waiver Enrollees - Medicaid Only

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver CFI
 Area All Dual Status Non Duals
 Population All Service Group All

Member Months: 5,362

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$1,210,428	300	1,933	671.4	4,326.0	\$626.19	\$225.74
Surgical	340,617	48	307	107.4	687.1	1,109.50	63.52
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	20,588	8	136	17.9	304.4	151.38	3.84
Alcohol and Drug Abuse	3,690	2	11	4.5	24.6	335.46	0.69
Crossover	7,828	7	15	15.7	33.6	521.87	1.46
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,583,150	365	2,402	816.9	5,375.6	\$659.10	\$295.25
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$72,826	19	471	42.5	1,054.1	\$154.62	\$13.58
Intermediate Care Facility	82,651	22	591	49.2	1,322.6	139.85	15.41
Swing Beds - Skilled Nursing Facility	9,534	17	87	38.0	194.7	109.58	1.78
Swing Beds - Intermediate Care Facility	2,885	3	31	6.7	69.4	93.08	0.54
Skilled Nursing Facility Atypical Care	23,975	0	47	0.0	105.2	510.11	4.47
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$191,871	61	1,227	136.5	2,746.0	\$156.37	\$35.78
Hospital Outpatient							
Emergency Room	\$123,248		1,020	0	2,282.7	\$120.83	\$22.99
Surgery	163,838		4,083	0	9,137.6	40.13	30.56
Radiology	317,611		1,536	0	3,437.5	206.78	59.23
Pathology/Lab	92,756		11,029	0	24,682.6	8.41	17.30
Pharmacy	687,460		23,889	0	53,462.9	28.78	128.21
Cardiovascular	38,482		443	0	991.4	86.87	7.18
PT/OT/ST	59,136		2,409	0	5,391.3	24.55	11.03
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	455		9	0	20.1	50.57	0.08
Other	145,270		4,169	0	9,330.1	34.85	27.09
	\$1,628,255		48,587	0	108,736.3	\$33.51	\$303.67
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$26,181		102	0	228.3	\$256.68	\$4.88
Physician	1,135,694		138,601	0	310,185.0	8.19	211.80
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	3,383		138	0	308.8	24.52	0.63
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	73		3	0	6.7	24.48	0.01
Audiology	232		10	0	22.4	23.16	0.04
Psychology	11,909		181	0	405.1	65.79	2.22
Physical Therapy	13,795		640	0	1,432.3	21.56	2.57
Speech Therapy	655		31	0	69.4	21.12	0.12
Occupational Therapy	565		30	0	67.1	18.84	0.11
Podiatry	7,678		235	0	525.9	32.67	1.43
Laboratory	15,294		1,981	0	4,433.4	7.72	2.85
X-Ray	16,768		328	0	734.1	51.12	3.13
Methodone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	209		5	0	11.2	41.86	0.04
Federally Qualified and Rural Health Clinics	107,971		883	0	1,976.1	122.28	20.14
Home Health	500,689		21,013	0	47,026.5	23.83	93.38
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	885,203		423,520	0	947,825.4	2.09	165.09
Ambulance	119,114		5,615	0	12,566.2	21.21	22.21
Wheelchair Van	251,319		43,312	0	96,931.0	5.80	46.87
Optometry / Glasses	12,364		515	0	1,152.6	24.01	2.31
Private Duty Nursing	408,784		10,643	0	23,818.7	38.41	76.24
Personal Care	1,485,245		339,097	0	758,889.2	4.38	276.99
Adult Medical Day Care	84,768		4,202	0	9,404.0	20.17	15.81
Dental	16,889		259	0	579.6	65.21	3.15
Other	0		0	0	0.0	0.00	0.00
	\$5,104,781		991,344	0	2,218,599.0	\$5.15	\$952.03

Appendix A3
 New Hampshire Department of Health and Human Services
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 Fee-For-Service Base Experience Data
 SFY 2011 Choices For Independence Waiver Enrollees - Medicaid Only

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver CFI
 Area All Dual Status Non Duals
 Population All Service Group All

Member Months: 5,362

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$628,190		33,511	0	74,996.6	\$18.75	\$117.16
Single Source Brand	2,829,975		10,171	0	22,762.4	278.24	527.78
Multi-Source Brand	431,122		1,270	0	2,842.2	339.47	80.40
Other	279,960		755	0	1,689.7	370.81	52.21
	\$4,169,247		45,707	0	102,290.9	\$91.22	\$777.55
Mental Health Center							
Case Management	\$193,167		507	0	1,134.7	\$381.00	\$36.03
Long Term Support Service	240,848		10,272	0	22,988.4	23.45	44.92
Partial Hospital	7,869		80	0	179.0	98.37	1.47
Psychotherapy	32,738		737	0	1,649.4	44.42	6.11
Evidence Based Practice	11,031		515	0	1,152.6	21.42	2.06
Medication Management	9,169		199	0	445.4	46.08	1.71
Emergency Service 24/7	5,074		216	0	483.4	23.49	0.95
APRTP	85,815		160	0	358.1	536.34	16.00
Other	13,918		174	0	389.4	79.99	2.60
	\$599,630		12,860	0	28,780.3	\$46.63	\$111.83
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	7,453		29	0	64.9	257.00	1.39
	\$7,453		29	0	64.9	\$257.00	\$1.39
Waiver Services - BDS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Community Support Services	0		0	0	0.0	0.00	0.00
Consolidated Developmental Services	0		0	0	0.0	0.00	0.00
Specialty Services	118,717		15,982	0	35,767.3	7.43	22.14
Day Habilitation Services	0		0	0	0.0	0.00	0.00
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$118,717		15,982	0	35,767.3	\$7.43	\$22.14
Waiver Services - BEAS							
Case Management *	\$923,185		108,355	0	242,495.3	\$8.52	\$172.17
Respite Care Services *	12,904		7,727	0	17,292.8	1.67	2.41
Environmental Modifications Services *	110,096		17	0	38.0	6,476.21	20.53
Homemaker and Other In-Home Services	567,233		113,794	0	254,667.7	4.98	105.79
Personal Care Services	4,372,391		998,938	0	2,235,594.2	4.38	815.44
Emergency Response System	91,165		2,716	0	6,078.3	33.57	17.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	131,754		2,676	0	5,988.8	49.24	24.57
Home Health Aide	1,018,199		141,920	0	317,612.8	7.17	189.89
Skilled Nursing	615,435		7,432	0	16,632.6	82.81	114.78
Adult Family Care	425		6	0	13.4	70.86	0.08
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	42,012		710	0	1,589.0	59.17	7.84
Residential Care	595,671		11,785	0	26,374.5	50.54	111.09
Medical Equipment and Delivery of Goods	56,062		140	0	313.3	400.44	10.46
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$8,536,530		1,396,216	0	3,124,690.8	\$6.11	\$1,592.04
Medicaid to School Program							
Clinic Services	7,551		6,470	0	14,479.7	1.17	1.41
	\$7,551		6,470	0	14,479.7	\$1.17	\$1.41
All Medicaid Services	\$21,947,187	426	2,520,824	953.4	5,641,530.8	\$8.71	\$4,093.10
Medicare	\$0						\$0.00
Third Party Amount	\$499,964						\$93.24
All Services	\$22,447,150	426	2,520,824	953.4	5,641,530.8	\$8.90	\$4,186.34

Appendix A4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Choices For Independence Waiver Enrollees - Total Population

SFY 11/12 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver CFI
 Area All Dual Status All
 Population All Service Group All

Member Months: 34,420

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$953,330	243	1,309	84.7	456.4	\$728.29	\$27.70
Surgical	323,836	44	361	15.3	125.9	897.05	9.41
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	38,000	15	194	5.2	67.6	195.88	1.10
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	1,424,060	1,213	6,797	422.9	2,369.7	209.51	41.37
Other	0	0	0	0.0	0.0	0.00	0.00
	\$2,739,227	1,515	8,661	528.2	3,019.5	\$316.27	\$79.58
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$963,881	263	13,292	91.7	4,634.0	\$72.52	\$28.00
Intermediate Care Facility	673,234	188	5,240	65.5	1,826.8	128.48	19.56
Swing Beds - Skilled Nursing Facility	14,512	16	132	5.6	46.0	109.94	0.42
Swing Beds - Intermediate Care Facility	5,085	4	48	1.4	16.7	105.93	0.15
Skilled Nursing Facility Atypical Care	35,767	4	83	1.4	28.9	430.92	1.04
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$1,692,479	475	18,795	165.6	6,552.6	\$90.05	\$49.17
Hospital Outpatient							
Emergency Room	\$174,995		1,394	0	486.0	\$125.53	\$5.08
Surgery	196,263		3,834	0	1,336.7	51.19	5.70
Radiology	568,555		3,857	0	1,344.7	147.41	16.52
Pathology/Lab	315,430		14,255	0	4,969.8	22.13	9.16
Pharmacy	1,733,908		63,656	0	22,192.7	27.24	50.38
Cardiovascular	77,106		855	0	298.1	90.18	2.24
PT/OT/ST	116,341		3,357	0	1,170.4	34.66	3.38
Psychiatric	378		16	0	5.6	23.64	0.01
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	336,595		9,434	0	3,289.0	35.68	9.78
Other	213,323		5,550	0	1,934.9	38.44	6.20
	\$3,732,895		106,208	0	37,027.8	\$35.15	\$108.45
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$19,085		108	0	37.7	\$176.71	\$0.55
Physician	1,680,096		172,120	0	60,007.0	9.76	48.81
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	4,695		219	0	76.4	21.44	0.14
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	623		15	0	5.2	41.53	0.02
Audiology	456		29	0	10.1	15.72	0.01
Psychology	24,184		594	0	207.1	40.71	0.70
Physical Therapy	10,555		783	0	273.0	13.48	0.31
Speech Therapy	475		64	0	22.3	7.42	0.01
Occupational Therapy	587		35	0	12.2	16.76	0.02
Podiatry	17,747		553	0	192.8	32.09	0.52
Laboratory	18,430		2,372	0	827.0	7.77	0.54
X-Ray	16,296		792	0	276.1	20.58	0.47
Methadone Treatment Clinic	3,597		352	0	122.7	10.22	0.10
Medical Services Clinic	13		1	0	0.3	13.38	0.00
Federally Qualified and Rural Health Clinics	191,975		3,420	0	1,192.3	56.13	5.58
Home Health	877,700		33,851	0	11,801.6	25.93	25.50
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	2,224,199		1,234,082	0	430,243.6	1.80	64.62
Ambulance	154,945		7,709	0	2,687.6	20.10	4.50
Wheelchair Van	1,367,201		232,141	0	80,932.4	5.89	39.72
Optometry / Glasses	52,159		3,524	0	1,228.6	14.80	1.52
Private Duty Nursing	654,636		16,924	0	5,900.3	38.68	19.02
Personal Care	6,285,243		1,435,185	0	500,355.0	4.38	182.60
Adult Medical Day Care	434,271		24,310	0	8,475.3	17.86	12.62
Dental	68,333		1,028	0	358.4	66.47	1.99
Other	0		0	0	0.0	0.00	0.00
	\$14,107,500		3,170,211	0	1,105,245.0	\$4.45	\$409.86

Appendix A4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Choices For Independence Waiver Enrollees - Total Population

SFY 11/12 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver CFI
 Area All Dual Status All
 Population All Service Group All

Member Months: 34,420

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$507,022		49,704	0	17,328.5	\$10.20	\$14.73
Single Source Brand	2,569,235		9,822	0	3,424.3	261.58	74.64
Multi-Source Brand	419,790		1,022	0	356.3	410.75	12.20
Other	49,759		4,814	0	1,678.3	10.34	1.45
	\$3,545,806		65,362	0	22,787.4	\$54.25	\$103.02
Mental Health Center							
Case Management	\$1,088,380		3,048	0	1,062.6	\$357.08	\$31.62
Long Term Support Service	1,256,653		50,787	0	17,706.1	24.74	36.51
Partial Hospital	38,527		396	0	138.1	97.29	1.12
Psychotherapy	59,450		1,214	0	423.2	48.97	1.73
Evidence Based Practice	73,708		3,431	0	1,196.2	21.48	2.14
Medication Management	29,523		796	0	277.5	37.09	0.86
Emergency Service 24/7	25,618		1,092	0	380.7	23.46	0.74
APRTP	92,711		3,199	0	1,115.3	28.98	2.69
Other	17,549		251	0	87.5	69.91	0.51
	\$2,682,118		64,214	0	22,387.2	\$41.77	\$77.92
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	18,529		72	0	25.1	257.35	0.54
	\$18,529		72	0	25.1	\$257.35	\$0.54
Waiver Services - BDS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Community Support Services	74		12	0	4.2	6.15	0.00
Consolidated Developmental Services	0		0	0	0.0	0.00	0.00
Specialty Services	195,406		22,983	0	8,012.7	8.50	5.68
Day Habilitation Services	0		0	0	0.0	0.00	0.00
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$195,480		22,995	0	8,016.9	\$8.50	\$5.68
Waiver Services - BEAS							
Case Management *	\$6,023,180		706,871	0	246,439.6	\$8.52	\$174.99
Respite Care Services *	114,480		69,235	0	24,137.7	1.65	3.33
Environmental Modifications Services *	660,507		117	0	40.8	5,645.35	19.19
Homemaker and Other In-Home Services	3,206,160		643,064	0	224,194.3	4.99	93.15
Personal Care Services	20,931,978		4,784,382	0	1,668,000.7	4.38	608.13
Emergency Response System	614,761		18,113	0	6,314.8	33.94	17.86
Non-Medical Transportation	1,024		128	0	44.6	8.00	0.03
Day Care Services	965,200		19,602	0	6,833.9	49.24	28.04
Home Health Aide	4,875,194		583,349	0	203,375.6	8.36	141.64
Skilled Nursing	3,704,084		41,099	0	14,328.5	90.13	107.61
Adult Family Care	75,911		1,263	0	440.3	60.10	2.21
Kinship Care	187,571		3,239	0	1,129.2	57.91	5.45
Supported Housing	1,527,785		29,784	0	10,383.7	51.30	44.39
Residential Care	7,587,504		169,044	0	58,934.6	44.88	220.44
Medical Equipment and Delivery of Goods	363,488		1,469	0	512.1	247.44	10.56
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$50,838,827		7,070,759	0	2,465,110.6	\$7.19	\$1,477.01
Medicaid to School Program							
Clinic Services	15,140		5,340	0	1,861.7	2.84	0.44
	\$15,140		5,340	0	1,861.7	\$2.84	\$0.44
All Medicaid Services	\$79,568,001	1,990	10,532,617	693.8	3,672,033.8	\$7.55	\$2,311.68
Medicare	\$53,875,104						\$1,565.23
Third Party Amount	\$567,305						\$16.48
All Services	\$134,010,410	1,990	10,532,617	693.8	3,672,033.8	\$12.72	\$3,893.39

Appendix A5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Choices For Independence Waiver Enrollees - Full Duals

SFY 11/12 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver CFI
 Area All Dual Status Full Duals
 Population All Service Group All

Member Months: 29,266

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$51,138	14	81	5.7	33.2	\$631.34	\$1.75
Surgical	6,627	1	4	0.4	1.6	1,656.65	0.23
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	3,783	2	57	0.8	23.4	66.37	0.13
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	1,412,596	1,203	6,747	493.3	2,766.5	209.37	48.27
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,474,144	1,220	6,889	500.2	2,824.7	\$213.99	\$50.37
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$928,765	256	12,991	105.0	5,326.7	\$71.49	\$31.74
Intermediate Care Facility	604,836	177	4,713	72.6	1,932.5	128.33	20.67
Swing Beds - Skilled Nursing Facility	5,402	9	51	3.7	20.9	105.93	0.18
Swing Beds - Intermediate Care Facility	3,602	3	34	1.2	13.9	105.93	0.12
Skilled Nursing Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$1,542,605	445	17,789	182.5	7,294.1	\$86.72	\$52.71
Hospital Outpatient							
Emergency Room	\$44,430		503	0	206.2	\$88.33	\$1.52
Surgery	60,950		1,602	0	656.9	38.05	2.08
Radiology	260,533		2,202	0	902.9	118.32	8.90
Pathology/Lab	230,721		4,537	0	1,860.3	50.85	7.88
Pharmacy	1,023,351		37,052	0	15,192.5	27.62	34.97
Cardiovascular	33,178		418	0	171.4	79.37	1.13
PT/OT/ST	64,458		1,389	0	569.5	46.41	2.20
Psychiatric	378		16	0	6.6	23.64	0.01
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	335,796		9,419	0	3,862.1	35.65	11.47
Other	38,268		1,399	0	573.6	27.35	1.31
	\$2,092,061		58,537	0	24,002.1	\$35.74	\$71.48
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$5,212		58	0	23.8	\$89.86	\$0.18
Physician	693,749		74,496	0	30,545.8	9.31	23.70
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	1,335		93	0	38.1	14.35	0.05
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	173		7	0	2.9	24.78	0.01
Audiology	421		27	0	11.1	15.60	0.01
Psychology	10,503		382	0	156.6	27.49	0.36
Physical Therapy	4,259		486	0	199.3	8.76	0.15
Speech Therapy	0		0	0	0.0	0.00	0.00
Occupational Therapy	208		17	0	7.0	12.26	0.01
Podiatry	6,778		273	0	111.9	24.83	0.23
Laboratory	4,316		487	0	199.7	8.86	0.15
X-Ray	2,437		368	0	150.9	6.62	0.08
Methadone Treatment Clinic	3,597		352	0	144.3	10.22	0.12
Medical Services Clinic	13		1	0	0.4	13.38	0.00
Federally Qualified and Rural Health Clinics	97,189		2,686	0	1,101.3	36.18	3.32
Home Health	395,472		14,119	0	5,789.2	28.01	13.51
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	1,490,997		963,148	0	394,921.6	1.55	50.95
Ambulance	53,487		3,166	0	1,298.2	16.89	1.83
Wheelchair Van	1,154,191		195,684	0	80,236.7	5.90	39.44
Optometry / Glasses	37,811		2,708	0	1,110.4	13.96	1.29
Private Duty Nursing	374,850		9,598	0	3,935.5	39.06	12.81
Personal Care	5,087,186		1,161,656	0	476,316.3	4.38	173.83
Adult Medical Day Care	372,962		20,936	0	8,584.4	17.81	12.74
Dental	47,656		745	0	305.5	63.97	1.63
Other	0		0	0	0.0	0.00	0.00
	\$9,844,803		2,451,493	0	1,005,190.9	\$4.02	\$336.39

Appendix A5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Choices For Independence Waiver Enrollees - Full Duals

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	CFI
Area	All	Dual Status	Full Duals
Population	All	Service Group	All

Member Months: 29,266

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$93,174		18,587	0	7,621.3	\$5.01	\$3.18
Single Source Brand	136,856		759	0	311.2	180.31	4.68
Multi-Source Brand	29,863		120	0	49.2	248.86	1.02
Other	16,015		3,624	0	1,486.0	4.42	0.55
	\$275,908		23,090	0	9,467.6	\$11.95	\$9.43
Mental Health Center							
Case Management	\$891,586		2,497	0	1,023.9	\$357.06	\$30.46
Long Term Support Service	1,045,759		41,984	0	17,214.8	24.91	35.73
Partial Hospital	34,231		353	0	144.7	96.97	1.17
Psychotherapy	26,813		420	0	172.2	63.84	0.92
Evidence Based Practice	61,801		2,866	0	1,175.2	21.56	2.11
Medication Management	17,940		546	0	223.9	32.86	0.61
Emergency Service 24/7	17,290		737	0	302.2	23.46	0.59
APRTP	71,116		3,156	0	1,294.1	22.53	2.43
Other	4,447		79	0	32.4	56.29	0.15
	\$2,170,983		52,638	0	21,583.3	\$41.24	\$74.18
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	12,095		47	0	19.3	257.35	0.41
	\$12,095		47	0	19.3	\$257.35	\$0.41
Waiver Services - BDS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Community Support Services	0		0	0	0.0	0.00	0.00
Consolidated Developmental Services	0		0	0	0.0	0.00	0.00
Specialty Services	93,714		9,159	0	3,755.5	10.23	3.20
Day Habilitation Services	0		0	0	0.0	0.00	0.00
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$93,714		9,159	0	3,755.5	\$10.23	\$3.20
Waiver Services - BEAS							
Case Management *	\$5,123,417		601,265	0	246,538.0	\$8.52	\$175.06
Respite Care Services *	102,983		62,165	0	25,489.6	1.66	3.52
Environmental Modifications Services *	544,168		93	0	38.1	5,851.27	18.59
Homemaker and Other In-Home Services	2,770,267		555,555	0	227,795.4	4.99	94.66
Personal Care Services	16,644,709		3,804,800	0	1,560,090.2	4.37	568.74
Emergency Response System	533,047		15,711	0	6,442.0	33.93	18.21
Non-Medical Transportation	1,008		126	0	51.7	8.00	0.03
Day Care Services	837,226		17,003	0	6,971.8	49.24	28.61
Home Health Aide	4,029,485		477,753	0	195,894.1	8.43	137.68
Skilled Nursing	3,175,691		35,235	0	14,447.5	90.13	108.51
Adult Family Care	75,856		1,262	0	517.5	60.11	2.59
Kinship Care	171,514		2,947	0	1,208.4	58.20	5.86
Supported Housing	1,477,135		28,865	0	11,835.6	51.17	50.47
Residential Care	6,920,608		156,080	0	63,997.8	44.34	236.47
Medical Equipment and Delivery of Goods	294,256		1,242	0	509.3	236.92	10.05
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$42,701,371		5,760,102	0	2,361,826.8	\$7.41	\$1,459.08
Medicaid to School Program							
Clinic Services	14,807		5,338	0	2,188.8	2.77	0.51
	\$14,807		5,338	0	2,188.8	\$2.77	\$0.51
All Medicaid Services	\$60,222,491	1,665	8,385,082	682.7	3,438,152.9	\$7.18	\$2,057.76
Medicare	\$53,875,104						\$1,840.88
Third Party Amount	\$276,446						\$9.45
All Services	\$114,374,042	1,665	8,385,082	682.7	3,438,152.9	\$13.64	\$3,908.09

Appendix A6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Choices For Independence Waiver Enrollees - Medicaid Only

SFY 11/12 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver CFI
 Area All Dual Status Non Duals
 Population All Service Group All

Member Months: 5,154

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$902,192	229	1,228	533.2	2,859.1	\$734.68	\$175.05
Surgical	317,210	43	357	100.1	831.2	888.54	61.55
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	34,218	13	137	30.3	319.0	249.76	6.64
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	11,464	10	50	23.3	116.4	229.28	2.22
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,265,083	295	1,772	686.8	4,125.7	\$713.93	\$245.46
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$35,116	7	301	16.3	700.8	\$116.67	\$6.81
Intermediate Care Facility	68,398	11	527	25.6	1,227.0	129.79	13.27
Swing Beds - Skilled Nursing Facility	9,110	7	81	16.3	188.6	112.47	1.77
Swing Beds - Intermediate Care Facility	1,483	1	14	2.3	32.6	105.93	0.29
Skilled Nursing Facility Atypical Care	35,767	4	83	9.3	193.2	430.92	6.94
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$149,874	30	1,006	69.8	2,342.3	\$148.98	\$29.08
Hospital Outpatient							
Emergency Room	\$130,565		891	0	2,074.5	\$146.54	\$25.33
Surgery	135,314		2,232	0	5,196.7	60.62	26.25
Radiology	308,022		1,655	0	3,853.3	186.12	59.76
Pathology/Lab	84,709		9,718	0	22,626.3	8.72	16.44
Pharmacy	710,558		26,604	0	61,941.8	26.71	137.87
Cardiovascular	43,929		437	0	1,017.5	100.52	8.52
PT/OT/ST	51,884		1,968	0	4,582.1	26.36	10.07
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	800		15	0	34.9	53.31	0.16
Other	175,055		4,151	0	9,664.7	42.17	33.96
	\$1,640,834		47,671	0	110,991.9	\$34.42	\$318.36
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$13,873		50	0	116.4	\$277.46	\$2.69
Physician	986,347		97,624	0	227,296.9	10.10	191.38
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	3,361		126	0	293.4	26.67	0.65
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	449		8	0	18.6	56.18	0.09
Audiology	35		2	0	4.7	17.33	0.01
Psychology	13,681		212	0	493.6	64.53	2.65
Physical Therapy	6,295		297	0	691.5	21.20	1.22
Speech Therapy	475		64	0	149.0	7.42	0.09
Occupational Therapy	378		18	0	41.9	21.00	0.07
Podiatry	10,969		280	0	651.9	39.18	2.13
Laboratory	14,114		1,885	0	4,388.8	7.49	2.74
X-Ray	13,859		424	0	987.2	32.69	2.69
Methadone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	94,786		734	0	1,709.0	129.14	18.39
Home Health	482,228		19,732	0	45,941.8	24.44	93.56
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	733,202		270,934	0	630,812.6	2.71	142.26
Ambulance	101,458		4,543	0	10,577.4	22.33	19.69
Wheelchair Van	213,010		36,457	0	84,882.4	5.84	41.33
Optometry / Glasses	14,348		816	0	1,899.9	17.58	2.78
Private Duty Nursing	279,785		7,326	0	17,057.0	38.19	54.29
Personal Care	1,198,057		273,529	0	636,854.5	4.38	232.45
Adult Medical Day Care	61,309		3,374	0	7,855.6	18.17	11.90
Dental	20,678		283	0	658.9	73.07	4.01
Other	0		0	0	0.0	0.00	0.00
	\$4,262,697		718,718	0	1,673,383.0	\$5.93	\$827.07

Appendix A6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Choices For Independence Waiver Enrollees - Medicaid Only

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	CFI
Area	All	Dual Status	Non Duals
Population	All	Service Group	All

Member Months: 5,154

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$413,848		31,117	0	72,449.4	\$13.30	\$80.30
Single Source Brand	2,432,378		9,063	0	21,101.3	268.39	471.94
Multi-Source Brand	389,928		902	0	2,100.1	432.29	75.66
Other	33,744		1,190	0	2,770.7	28.36	6.55
	\$3,269,898		42,272	0	98,421.4	\$77.35	\$634.44
Mental Health Center							
Case Management	\$196,793		551	0	1,282.9	\$357.16	\$38.18
Long Term Support Service	210,894		8,803	0	20,495.9	23.96	40.92
Partial Hospital	4,296		43	0	100.1	99.90	0.83
Psychotherapy	32,637		794	0	1,848.7	41.10	6.33
Evidence Based Practice	11,907		565	0	1,315.5	21.07	2.31
Medication Management	11,583		250	0	582.1	46.33	2.25
Emergency Service 24/7	8,328		355	0	826.5	23.46	1.62
APRTP	21,596		43	0	100.1	502.23	4.19
Other	13,102		172	0	400.5	76.17	2.54
	\$511,135		11,576	0	26,952.3	\$44.15	\$99.17
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	6,434		25	0	58.2	257.35	1.25
	\$6,434		25	0	58.2	\$257.35	\$1.25
Waiver Services - BDS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Community Support Services	74		12	0	27.9	6.15	0.01
Consolidated Developmental Services	0		0	0	0.0	0.00	0.00
Specialty Services	101,692		13,824	0	32,186.3	7.36	19.73
Day Habilitation Services	0		0	0	0.0	0.00	0.00
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$101,766		13,836	0	32,214.2	\$7.36	\$19.75
Waiver Services - BEAS							
Case Management *	\$899,763		105,606	0	245,881.3	\$8.52	\$174.58
Respite Care Services *	11,497		7,070	0	16,461.0	1.63	2.23
Environmental Modifications Services *	116,339		24	0	55.9	4,847.44	22.57
Homemaker and Other In-Home Services	435,893		87,509	0	203,746.2	4.98	84.57
Personal Care Services	4,287,268		979,582	0	2,280,749.7	4.38	831.83
Emergency Response System	81,714		2,402	0	5,592.5	34.02	15.85
Non-Medical Transportation	16		2	0	4.7	8.00	0.00
Day Care Services	127,974		2,599	0	6,051.2	49.24	24.83
Home Health Aide	845,709		105,596	0	245,858.0	8.01	164.09
Skilled Nursing	528,393		5,864	0	13,653.1	90.11	102.52
Adult Family Care	55		1	0	2.3	54.99	0.01
Kinship Care	16,057		292	0	679.9	54.99	3.12
Supported Housing	50,651		919	0	2,139.7	55.11	9.83
Residential Care	666,896		12,964	0	30,183.9	51.44	129.39
Medical Equipment and Delivery of Goods	69,232		227	0	528.5	304.99	13.43
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$8,137,456		1,310,657	0	3,051,587.9	\$6.21	\$1,578.86
Medicaid to School Program							
Clinic Services	333		2	0	4.7	166.60	0.06
	\$333		2	0	4.7	\$166.60	\$0.06
All Medicaid Services	\$19,345,509	325	2,147,535	756.7	5,000,081.5	\$9.01	\$3,753.49
Medicare	\$0						\$0.00
Third Party Amount	\$290,858						\$56.43
All Services	\$19,636,368	325	2,147,535	756.7	5,000,081.5	\$9.14	\$3,809.93



APPENDIX B

Developmental Disabilities Waiver Enrollees

Appendix B1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Developmental Disabilities Waiver Enrollees - Total Population

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver DD
 Area All Dual Status All
 Population All Service Group All

Member Months: 50,644

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$559,992	142	631	33.6	149.5	\$887.47	\$11.06
Surgical	563,448	51	405	12.1	96.0	1,391.23	11.13
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	129,215	33	336	7.8	79.6	384.57	2.55
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	338,017	253	1,725	59.9	408.7	195.95	6.67
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,590,672	479	3,097	113.5	733.8	\$513.62	\$31.41
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$161,636	30	1,792	7.1	424.6	\$90.20	\$3.19
Intermediate Care Facility	1,064,987	11	7,687	2.6	1,821.4	138.54	21.03
Swing Beds - Skilled Nursing Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	842,446	2	1,769	0.5	419.2	476.23	16.63
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	772,640	20	2,007	4.7	475.6	384.97	15.26
	\$2,841,709	63	13,255	14.9	3,140.7	\$214.39	\$56.11
Hospital Outpatient							
Emergency Room	\$201,044		2,155	0	510.6	\$93.29	\$3.97
Surgery	384,742		9,233	0	2,187.7	41.67	7.60
Radiology	347,085		2,672	0	633.1	129.90	6.85
Pathology/Lab	225,228		18,798	0	4,454.2	11.98	4.45
Pharmacy	305,975		15,266	0	3,617.2	20.04	6.04
Cardiovascular	50,240		439	0	104.0	114.44	0.99
PT/OT/ST	245,764		10,141	0	2,402.9	24.23	4.85
Psychiatric	310		8	0	1.9	38.75	0.01
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	131,501		3,490	0	826.9	37.68	2.60
Other	246,409		3,779	0	895.4	65.20	4.87
	\$2,138,298		65,981	0	15,634.1	\$32.41	\$42.22
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$12,264		43	0	10.2	\$285.22	\$0.24
Physician	1,105,772		36,456	0	8,638.2	30.33	21.83
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	7,908		246	0	58.3	32.15	0.16
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	2,119		112	0	26.5	18.92	0.04
Audiology	327		34	0	8.1	9.61	0.01
Psychology	147,814		2,769	0	656.1	53.38	2.92
Physical Therapy	45,706		2,606	0	617.5	17.54	0.90
Speech Therapy	21,618		930	0	220.4	23.24	0.43
Occupational Therapy	11,527		558	0	132.2	20.66	0.23
Podiatry	16,068		485	0	114.9	33.13	0.32
Laboratory	8,179		1,022	0	242.2	8.00	0.16
X-Ray	7,010		131	0	31.0	53.51	0.14
Methodone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	2,894		95	0	22.5	30.46	0.06
Federally Qualified and Rural Health Clinics	175,971		2,542	0	602.3	69.23	3.47
Home Health	5,385,989		860,289	0	203,843.9	6.26	106.35
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	3,856,500		3,130,978	0	741,879.3	1.23	76.15
Ambulance	82,249		5,744	0	1,361.0	14.32	1.62
Wheelchair Van	146,427		23,261	0	5,511.6	6.29	2.89
Optometry / Glasses	61,287		2,385	0	565.1	25.70	1.21
Private Duty Nursing	4,340,927		112,512	0	26,659.5	38.58	85.71
Personal Care	68,543		15,649	0	3,708.0	4.38	1.35
Adult Medical Day Care	260,941		6,915	0	1,638.5	37.74	5.15
Dental	314,498		5,159	0	1,222.4	60.96	6.21
Other	0		0	0	0.0	0.00	0.00
	\$16,082,537		4,210,921	0	997,769.8	\$3.82	\$317.56

Appendix B1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Developmental Disabilities Waiver Enrollees - Total Population

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver DD
 Area All Dual Status All
 Population All Service Group All

Member Months: 50,644

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$1,421,686		66,280	0	15,704.9	\$21.45	\$28.07
Single Source Brand	2,925,476		13,747	0	3,257.3	212.81	57.77
Multi-Source Brand	1,422,155		5,313	0	1,258.9	267.67	28.08
Other	45,118		5,305	0	1,257.0	8.50	0.89
	\$5,814,435		90,645	0	21,478.2	\$64.15	\$114.81
Mental Health Center							
Case Management	\$622,935		1,635	0	387.4	\$381.00	\$12.30
Long Term Support Service	1,400,103		57,660	0	13,662.4	24.28	27.65
Partial Hospital	104,898		1,072	0	254.0	97.85	2.07
Psychotherapy	259,716		8,181	0	1,938.5	31.75	5.13
Evidence Based Practice	58,856		2,485	0	588.8	23.68	1.16
Medication Management	55,499		1,234	0	292.4	44.97	1.10
Emergency Service 24/7	27,240		1,159	0	274.6	23.50	0.54
APRTP	103,000		3,645	0	863.7	28.26	2.03
Other	67,248		876	0	207.6	76.77	1.33
	\$2,699,494		77,947	0	18,469.4	\$34.63	\$53.30
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	13,848		725	0	171.8	19.10	0.27
Intensive Home and Community Service	90,471		664	0	157.3	136.25	1.79
Child Health Support Service	18,426		1,884	0	446.4	9.78	0.36
Home Based Therapy	25,857		461	0	109.2	56.09	0.51
Placement Services	187,725		1,877	0	444.8	100.01	3.71
Private Non-Medical Institution for Children	149,450		1,399	0	331.5	106.83	2.95
	\$485,776		7,010	0	1,661.0	\$69.30	\$9.59
State Plan Services - BDS							
Partners in Health	995		3	0	0.7	331.50	0.02
Early Intervention	237,030		1,044	0	247.4	227.04	4.68
Targeted Case Management	655,195		2,558	0	606.1	256.14	12.94
	\$893,219		3,605	0	854.2	\$247.77	\$17.64
Waiver Services - BDS							
Case Management *	\$8,539,431		32,230	0	7,636.8	\$264.95	\$168.62
Respite Care Services *	1,975,702		656,561	0	155,570.9	3.01	39.01
Environmental Modifications Services *	841,265		214	0	50.7	3,931.14	16.61
Personal Care Services	95,736,128		438,309	0	103,856.5	218.42	1,890.37
Community Support Services	3,566,057		582,165	0	137,942.9	6.13	70.41
Consolidated Developmental Services	19,588,643		5,948	0	1,409.4	3,293.32	386.79
Specialty Services	975,672		51,062	0	12,099.0	19.11	19.27
Day Habilitation Services	42,227,811		8,025,110	0	1,901,534.6	5.26	833.82
Supported Employment Services	5,108,878		997,329	0	236,315.2	5.12	100.88
Crisis Response Services	1,476,846		222,223	0	52,655.3	6.65	29.16
Assistive Technology Support Services	584,561		17,240	0	4,085.0	33.91	11.54
In-Home Support Waiver Services	241,232		149	0	35.3	1,619.00	4.76
	\$180,862,225		11,028,540	0	2,613,191.7	\$16.40	\$3,571.25
Waiver Services - BEAS							
Case Management *	\$443		52	0	12.3	\$8.52	\$0.01
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	1,152		263	0	62.3	4.38	0.02
Emergency Response System	0		0	0	0.0	0.00	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	148		5	0	1.2	29.60	0.00
Skilled Nursing	1,055		11	0	2.6	95.91	0.02
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	141		2	0	0.5	70.39	0.00
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$2,939		333	0	78.9	\$8.83	\$0.06
Medicaid to School Program							
Clinic Services	13,631,579		5,345,148	0	1,266,522.7	2.55	269.16
	\$13,631,579		5,345,148	0	1,266,522.7	\$2.55	\$269.16
All Medicaid Services	\$227,042,885	542	20,846,482	128.4	4,939,534.5	\$10.89	\$4,483.12
Medicare	\$42,167,751						\$832.63
Third Party Amount	\$4,120,026						\$81.35
All Services	\$273,330,662	542	20,846,482	128.4	4,939,534.5	\$13.11	\$5,397.10

Appendix B2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Developmental Disabilities Waiver Enrollees - Full Duals

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver DD
 Area All Dual Status Full Duals
 Population All Service Group All

Member Months: 25,443

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$33,003	5	39	2.4	18.4	\$846.22	\$1.30
Surgical	20,050	2	43	0.9	20.3	466.27	0.79
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	336,917	252	1,722	118.9	812.2	195.65	13.24
Other	0	0	0	0.0	0.0	0.00	0.00
	\$389,970	259	1,804	122.2	850.8	\$216.17	\$15.33
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$126,057	26	1,636	12.3	771.6	\$77.05	\$4.95
Intermediate Care Facility	956,438	8	7,034	3.8	3,317.5	135.97	37.59
Swing Beds - Skilled Nursing Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	65,645	0	131	0.0	61.8	501.11	2.58
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$1,148,140	34	8,801	16.0	4,150.9	\$130.46	\$45.13
Hospital Outpatient							
Emergency Room	\$26,485		456	0	215.1	\$58.08	\$1.04
Surgery	26,629		1,066	0	502.8	24.98	1.05
Radiology	101,494		1,181	0	557.0	85.94	3.99
Pathology/Lab	93,452		2,450	0	1,155.5	38.14	3.67
Pharmacy	238,182		6,566	0	3,096.8	36.28	9.36
Cardiovascular	15,269		145	0	68.4	105.30	0.60
PT/OT/ST	36,340		798	0	376.4	45.54	1.43
Psychiatric	310		8	0	3.8	38.75	0.01
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	131,447		3,489	0	1,645.6	37.67	5.17
Other	20,433		382	0	180.2	53.49	0.80
	\$690,042		16,541	0	7,801.4	\$41.72	\$27.12
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$2,852		16	0	7.5	\$178.23	\$0.11
Physician	274,117		12,725	0	6,001.7	21.54	10.77
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	2,260		71	0	33.5	31.82	0.09
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	921		44	0	20.8	20.93	0.04
Audiology	147		17	0	8.0	8.62	0.01
Psychology	28,115		828	0	390.5	33.96	1.11
Physical Therapy	2,848		267	0	125.9	10.67	0.11
Speech Therapy	0		0	0	0.0	0.00	0.00
Occupational Therapy	0		0	0	0.0	0.00	0.00
Podiatry	7,195		256	0	120.7	28.11	0.28
Laboratory	997		116	0	54.7	8.59	0.04
X-Ray	1,321		60	0	28.3	22.01	0.05
Methadone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	955		30	0	14.1	31.84	0.04
Federally Qualified and Rural Health Clinics	56,329		1,379	0	650.4	40.85	2.21
Home Health	741,817		85,027	0	40,102.3	8.72	29.16
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	784,640		885,256	0	417,524.3	0.89	30.84
Ambulance	5,853		258	0	121.7	22.69	0.23
Wheelchair Van	83,167		8,086	0	3,813.7	10.29	3.27
Optometry / Glasses	31,839		1,263	0	595.7	25.21	1.25
Private Duty Nursing	461,079		11,585	0	5,464.0	39.80	18.12
Personal Care	66,002		15,069	0	7,107.2	4.38	2.59
Adult Medical Day Care	239,467		6,426	0	3,030.8	37.27	9.41
Dental	66,157		895	0	422.1	73.92	2.60
Other	0		0	0	0.0	0.00	0.00
	\$2,858,076		1,029,674	0	485,638.0	\$2.78	\$112.33

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 SFY 2011 Developmental Disabilities Waiver Enrollees - Full Duals

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver DD
 Area All Dual Status Full Duals
 Population All Service Group All

Member Months: 25,443

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$141,113		15,254	0	7,194.4	\$9.25	\$5.55
Single Source Brand	261,540		950	0	448.1	275.31	10.28
Multi-Source Brand	123,033		323	0	152.3	380.91	4.84
Other	15,976		3,563	0	1,680.5	4.48	0.63
	\$541,662		20,090	0	9,475.3	\$26.96	\$21.29
Mental Health Center							
Case Management	\$100,203		263	0	124.0	\$381.00	\$3.94
Long Term Support Service	577,916		22,597	0	10,657.7	25.57	22.71
Partial Hospital	69,148		708	0	333.9	97.67	2.72
Psychotherapy	35,494		1,983	0	935.3	17.90	1.40
Evidence Based Practice	48,434		2,008	0	947.1	24.12	1.90
Medication Management	14,489		329	0	155.2	44.04	0.57
Emergency Service 24/7	22,846		972	0	458.4	23.50	0.90
APRTP	88,097		3,611	0	1,703.1	24.40	3.46
Other	7,404		123	0	58.0	60.20	0.29
	\$964,031		32,594	0	15,372.7	\$29.58	\$37.89
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	13,848		725	0	341.9	19.10	0.54
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	1,506		154	0	72.6	9.78	0.06
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	30,569		346	0	163.2	88.35	1.20
Private Non-Medical Institution for Children	28,449		269	0	126.9	105.76	1.12
	\$74,371		1,494	0	704.6	\$49.78	\$2.92
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	93,797		376	0	177.3	249.46	3.69
	\$93,797		376	0	177.3	\$249.46	\$3.69
Waiver Services - BDS							
Case Management *	\$5,652,369		21,261	0	10,027.6	\$265.86	\$222.16
Respite Care Services *	434,279		135,308	0	63,817.0	3.21	17.07
Environmental Modifications Services *	234,628		107	0	50.5	2,192.78	9.22
Personal Care Services	67,709,061		322,701	0	152,199.5	209.82	2,661.21
Community Support Services	2,674,637		436,963	0	206,090.3	6.12	105.12
Consolidated Developmental Services	8,151,904		2,415	0	1,139.0	3,375.53	320.40
Specialty Services	402,350		14,339	0	6,762.9	28.06	15.81
Day Habilitation Services	27,720,750		5,347,901	0	2,522,297.4	5.18	1,089.52
Supported Employment Services	4,356,167		859,963	0	405,595.1	5.07	171.21
Crisis Response Services	662,221		99,652	0	47,000.1	6.65	26.03
Assistive Technology Support Services	204,130		6,277	0	2,960.5	32.52	8.02
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$118,202,497		7,246,887	0	3,417,939.9	\$16.31	\$4,645.78
Waiver Services - BEAS							
Case Management *	\$51		6	0	2.8	\$8.52	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	193		44	0	20.8	4.38	0.01
Emergency Response System	0		0	0	0.0	0.00	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	148		5	0	2.4	29.60	0.01
Skilled Nursing	992		11	0	5.2	90.16	0.04
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	141		2	0	0.9	70.39	0.01
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$1,524		68	0	32.1	\$22.42	\$0.06
Medicaid to School Program							
Clinic Services	116,949		31,114	0	14,674.7	3.76	4.60
	\$116,949		31,114	0	14,674.7	\$3.76	\$4.60
All Medicaid Services	\$125,081,058	293	8,389,443	138.2	3,956,817.8	\$14.91	\$4,916.13
Medicare	\$42,167,751						\$1,657.34
Third Party Amount	\$978,369						\$38.45
All Services	\$168,227,178	293	8,389,443	138.2	3,956,817.8	\$20.05	\$6,611.92

Appendix B3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Developmental Disabilities Waiver Enrollees - Medicaid Only

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver DD
 Area All Dual Status Non Duals
 Population All Service Group All

Member Months: 25,201

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$526,989	137	592	65.2	281.9	\$890.18	\$20.91
Surgical	543,399	49	362	23.3	172.4	1,501.10	21.56
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	129,215	33	336	15.7	160.0	384.57	5.13
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	1,100	1	3	0.5	1.4	366.67	0.04
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,200,703	220	1,293	104.8	615.7	\$928.62	\$47.65
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$35,579	4	156	1.9	74.3	\$228.07	\$1.41
Intermediate Care Facility	108,549	3	653	1.4	310.9	166.23	4.31
Swing Beds - Skilled Nursing Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	776,801	2	1,638	1.0	780.0	474.24	30.82
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	772,640	20	2,007	9.5	955.7	384.97	30.66
	\$1,693,569	29	4,454	13.8	2,120.9	\$380.24	\$67.20
Hospital Outpatient							
Emergency Room	\$174,559		1,699	0	809.0	\$102.74	\$6.93
Surgery	358,113		8,167	0	3,888.9	43.85	14.21
Radiology	245,591		1,491	0	710.0	164.72	9.75
Pathology/Lab	131,777		16,348	0	7,784.5	8.06	5.23
Pharmacy	67,793		8,700	0	4,142.7	7.79	2.69
Cardiovascular	34,971		294	0	140.0	118.95	1.39
PT/OT/ST	209,424		9,343	0	4,448.9	22.42	8.31
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	54		1	0	0.5	53.50	0.00
Other	225,976		3,397	0	1,617.6	66.52	8.97
	\$1,448,257		49,440	0	23,541.9	\$29.29	\$57.47
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$9,413		27	0	12.9	\$348.62	\$0.37
Physician	831,655		23,731	0	11,300.0	35.05	33.00
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	5,649		175	0	83.3	32.28	0.22
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	1,198		68	0	32.4	17.62	0.05
Audiology	180		17	0	8.1	10.60	0.01
Psychology	119,699		1,941	0	924.2	61.67	4.75
Physical Therapy	42,858		2,339	0	1,113.8	18.32	1.70
Speech Therapy	21,618		930	0	442.8	23.24	0.86
Occupational Therapy	11,527		558	0	265.7	20.66	0.46
Podiatry	8,873		229	0	109.0	38.75	0.35
Laboratory	7,182		906	0	431.4	7.93	0.28
X-Ray	5,689		71	0	33.8	80.13	0.23
Methodone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	1,939		65	0	31.0	29.82	0.08
Federally Qualified and Rural Health Clinics	119,641		1,163	0	553.8	102.87	4.75
Home Health	4,644,172		775,262	0	369,157.7	5.99	184.29
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	3,071,860		2,245,722	0	1,069,349.0	1.37	121.89
Ambulance	76,396		5,486	0	2,612.3	13.93	3.03
Wheelchair Van	63,260		15,175	0	7,225.9	4.17	2.51
Optometry / Glasses	29,449		1,122	0	534.3	26.25	1.17
Private Duty Nursing	3,879,848		100,927	0	48,058.6	38.44	153.96
Personal Care	2,540		580	0	276.2	4.38	0.10
Adult Medical Day Care	21,474		489	0	232.8	43.91	0.85
Dental	248,342		4,264	0	2,030.4	58.24	9.85
Other	0		0	0	0.0	0.00	0.00
	\$13,224,462		3,181,247	0	1,514,819.4	\$4.16	\$524.76

Appendix B3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Developmental Disabilities Waiver Enrollees - Medicaid Only

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver DD
 Area All Dual Status Non Duals
 Population All Service Group All

Member Months: 25,201

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$1,280,574		51,026	0	24,297.1	\$25.10	\$50.81
Single Source Brand	2,663,936		12,797	0	6,093.6	208.17	105.71
Multi-Source Brand	1,299,122		4,990	0	2,376.1	260.35	51.55
Other	29,142		1,742	0	829.5	16.73	1.16
	\$5,272,773		70,555	0	33,596.3	\$74.73	\$209.23
Mental Health Center							
Case Management	\$522,732		1,372	0	653.3	\$381.00	\$20.74
Long Term Support Service	822,187		35,063	0	16,696.0	23.45	32.63
Partial Hospital	35,751		364	0	173.3	98.22	1.42
Psychotherapy	224,222		6,198	0	2,951.3	36.18	8.90
Evidence Based Practice	10,421		477	0	227.1	21.85	0.41
Medication Management	41,010		905	0	430.9	45.31	1.63
Emergency Service 24/7	4,394		187	0	89.0	23.49	0.17
APRTP	14,903		34	0	16.2	438.31	0.59
Other	59,844		753	0	358.6	79.47	2.37
	\$1,735,463		45,353	0	21,595.8	\$38.27	\$68.86
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	90,471		664	0	316.2	136.25	3.59
Child Health Support Service	16,919		1,730	0	823.8	9.78	0.67
Home Based Therapy	25,857		461	0	219.5	56.09	1.03
Placement Services	157,156		1,531	0	729.0	102.65	6.24
Private Non-Medical Institution for Children	121,002		1,130	0	538.1	107.08	4.80
	\$411,405		5,516	0	2,626.6	\$74.58	\$16.32
State Plan Services - BDS							
Partners in Health	995		3	0	1.4	331.50	0.04
Early Intervention	237,030		1,044	0	497.1	227.04	9.41
Targeted Case Management	561,399		2,182	0	1,039.0	257.29	22.28
	\$799,423		3,229	0	1,537.6	\$247.58	\$31.72
Waiver Services - BDS							
Case Management *	\$2,887,062		10,969	0	5,223.1	\$263.20	\$114.56
Respite Care Services *	1,541,423		521,253	0	248,205.9	2.96	61.17
Environmental Modifications Services *	606,637		107	0	51.0	5,669.51	24.07
Personal Care Services	28,027,067		115,608	0	55,049.2	242.43	1,112.14
Community Support Services	891,420		145,202	0	69,141.1	6.14	35.37
Consolidated Developmental Services	11,436,740		3,533	0	1,682.3	3,237.12	453.82
Specialty Services	573,321		36,723	0	17,486.4	15.61	22.75
Day Habilitation Services	14,507,061		2,677,209	0	1,274,810.8	5.42	575.65
Supported Employment Services	752,710		137,366	0	65,409.8	5.48	29.87
Crisis Response Services	814,626		122,571	0	58,364.8	6.65	32.33
Assistive Technology Support Services	380,431		10,963	0	5,220.3	34.70	15.10
In-Home Support Waiver Services	241,232		149	0	70.9	1,619.00	9.57
	\$62,659,729		3,781,653	0	1,800,715.7	\$16.57	\$2,486.40
Waiver Services - BEAS							
Case Management *	\$392		46	0	21.9	\$8.52	\$0.02
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	959		219	0	104.3	4.38	0.04
Emergency Response System	0		0	0	0.0	0.00	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	63		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$1,414		265	0	126.2	\$5.34	\$0.06
Medicaid to School Program							
Clinic Services	13,514,630		5,314,034	0	2,530,392.0	2.54	536.27
	\$13,514,630		5,314,034	0	2,530,392.0	\$2.54	\$536.27
All Medicaid Services	\$101,961,826	249	12,457,039	118.6	5,931,687.9	\$8.19	\$4,045.94
Medicare	\$0						\$0.00
Third Party Amount	\$3,141,658						\$124.66
All Services	\$105,103,484	249	12,457,039	118.6	5,931,687.9	\$8.44	\$4,170.61

Appendix B4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Developmental Disabilities Waiver Enrollees - Total Population

SFY 11/12 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver DD
 Area All Dual Status All
 Population All Service Group All

Member Months: 53,714

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$524,545	142	784	31.7	175.1	\$669.06	\$9.77
Surgical	504,799	46	317	10.3	70.8	1,592.43	9.40
Maternity Delivery	4,806	3	5	0.7	1.1	961.24	0.09
Maternity Non-Delivery	1,462	1	1	0.2	0.2	1,462.38	0.03
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	272,567	46	382	10.3	85.3	713.53	5.07
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	320,555	241	1,585	53.8	354.1	202.24	5.97
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,628,735	479	3,074	107.0	686.7	\$529.84	\$30.32
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$216,591	29	1,487	6.5	332.2	\$145.66	\$4.03
Intermediate Care Facility	1,380,585	12	8,942	2.7	1,997.7	154.39	25.70
Swing Beds - Skilled Nursing Facility	1,801	3	17	0.7	3.8	105.93	0.03
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	892,605	5	1,874	1.1	418.7	476.31	16.62
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	492,374	15	1,301	3.4	290.7	378.46	9.17
	\$2,983,956	64	13,621	14.3	3,043.0	\$219.07	\$55.55
Hospital Outpatient							
Emergency Room	\$225,849		2,061	0	460.4	\$109.58	\$4.20
Surgery	356,183		8,914	0	1,991.4	39.96	6.63
Radiology	386,489		2,645	0	590.9	146.12	7.20
Pathology/Lab	231,275		17,772	0	3,970.4	13.01	4.31
Pharmacy	345,403		17,245	0	3,852.6	20.03	6.43
Cardiovascular	71,193		499	0	111.5	142.67	1.33
PT/OT/ST	387,987		13,517	0	3,019.8	28.70	7.22
Psychiatric	489		8	0	1.8	61.12	0.01
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	146,987		3,757	0	839.3	39.12	2.74
Other	202,948		3,700	0	826.6	54.85	3.78
	\$2,354,801		70,118	0	15,664.7	\$33.58	\$43.84
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$11,727		38	0	8.5	\$308.59	\$0.22
Physician	1,160,567		43,702	0	9,763.3	26.56	21.61
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	6,450		193	0	43.1	33.42	0.12
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	2,987		128	0	28.6	23.34	0.06
Audiology	376		27	0	6.0	13.91	0.01
Psychology	171,602		3,370	0	752.9	50.92	3.19
Physical Therapy	48,882		2,598	0	580.4	18.82	0.91
Speech Therapy	40,106		1,616	0	361.0	24.82	0.75
Occupational Therapy	8,821		445	0	99.4	19.82	0.16
Podiatry	16,547		438	0	97.9	37.78	0.31
Laboratory	8,784		1,010	0	225.6	8.70	0.16
X-Ray	11,280		386	0	86.2	29.22	0.21
Methodone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	1,979		69	0	15.4	28.68	0.04
Federally Qualified and Rural Health Clinics	205,720		2,728	0	609.5	75.41	3.83
Home Health	5,679,820		913,674	0	204,119.7	6.22	105.74
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	3,985,727		3,446,947	0	770,066.7	1.16	74.20
Ambulance	87,265		6,791	0	1,517.1	12.85	1.62
Wheelchair Van	180,224		32,862	0	7,341.5	5.48	3.36
Optometry / Glasses	68,414		4,596	0	1,026.8	14.89	1.27
Private Duty Nursing	4,275,539		110,626	0	24,714.5	38.65	79.60
Personal Care	90,079		20,566	0	4,594.6	4.38	1.68
Adult Medical Day Care	304,127		8,353	0	1,866.1	36.41	5.66
Dental	260,529		4,926	0	1,100.5	52.89	4.85
Other	0		0	0	0.0	0.00	0.00
	\$16,627,549		4,606,089	0	1,029,025.4	\$3.61	\$309.56

Appendix B4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Developmental Disabilities Waiver Enrollees - Total Population

SFY 11/12 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver DD
 Area All Dual Status All
 Population All Service Group All

Member Months: 53,714

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$1,142,405		64,745	0	14,464.4	\$17.64	\$21.27
Single Source Brand	3,313,577		13,404	0	2,994.5	247.21	61.69
Multi-Source Brand	1,306,642		4,308	0	962.4	303.31	24.33
Other	107,246		6,662	0	1,488.3	16.10	2.00
	\$5,869,870		89,119	0	19,909.7	\$65.87	\$109.28
Mental Health Center							
Case Management	\$662,988		1,852	0	413.7	\$357.99	\$12.34
Long Term Support Service	1,514,065		62,582	0	13,981.2	24.19	28.19
Partial Hospital	114,103		1,191	0	266.1	95.80	2.12
Psychotherapy	267,839		7,270	0	1,624.2	36.84	4.99
Evidence Based Practice	65,613		2,686	0	600.1	24.43	1.22
Medication Management	57,375		1,313	0	293.3	43.70	1.07
Emergency Service 24/7	16,610		708	0	158.2	23.46	0.31
APRTP	98,050		3,989	0	891.2	24.58	1.83
Other	64,530		865	0	193.2	74.60	1.20
	\$2,861,173		82,456	0	18,421.1	\$34.70	\$53.27
State Plan Services - DCYF							
Day Habilitation Center	\$4,229		27	0	6.0	\$156.62	\$0.08
Crisis Intervention	3,268		172	0	38.4	19.00	0.06
Intensive Home and Community Service	103,652		935	0	208.9	110.86	1.93
Child Health Support Service	26,553		2,715	0	606.5	9.78	0.49
Home Based Therapy	21,247		378	0	84.4	56.21	0.40
Placement Services	168,545		1,725	0	385.4	97.71	3.14
Private Non-Medical Institution for Children	607,495		4,081	0	911.7	148.86	11.31
	\$934,988		10,033	0	2,241.4	\$93.19	\$17.41
State Plan Services - BDS							
Partners in Health	4,305		13	0	2.9	331.15	0.08
Early Intervention	311,461		1,359	0	303.6	229.18	5.80
Targeted Case Management	793,708		3,094	0	691.2	256.53	14.78
	\$1,109,475		4,466	0	997.7	\$248.43	\$20.66
Waiver Services - BDS							
Case Management *	\$8,607,844		32,506	0	7,262.0	\$264.81	\$160.25
Respite Care Services *	1,929,717		653,247	0	145,938.9	2.95	35.93
Environmental Modifications Services *	705,094		179	0	40.0	3,939.07	13.13
Personal Care Services	98,519,799		438,417	0	97,944.7	224.72	1,834.15
Community Support Services	3,756,929		612,941	0	136,934.4	6.13	69.94
Consolidated Developmental Services	23,081,570		6,837	0	1,527.4	3,375.98	429.71
Specialty Services	1,336,814		68,740	0	15,356.9	19.45	24.89
Day Habilitation Services	44,388,385		8,291,287	0	1,852,318.7	5.35	826.38
Supported Employment Services	5,315,359		1,038,064	0	231,909.1	5.12	98.96
Crisis Response Services	1,478,445		222,402	0	49,685.8	6.65	27.52
Assistive Technology Support Services	638,702		18,331	0	4,095.2	34.84	11.89
In-Home Support Waiver Services	123,894		102	0	22.8	1,214.65	2.31
	\$189,882,551		11,383,053	0	2,543,036.0	\$16.68	\$3,535.07
Waiver Services - BEAS							
Case Management *	\$145		17	0	3.8	\$8.52	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	1,555		355	0	79.3	4.38	0.03
Emergency Response System	103		3	0	0.7	34.30	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	5,003		1	0	0.2	5,003.05	0.09
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$6,806		376	0	84.0	\$18.10	\$0.13
Medicaid to School Program							
Clinic Services	13,195,156		4,350,163	0	971,850.1	3.03	245.66
	\$13,195,156		4,350,163	0	971,850.1	\$3.03	\$245.66
All Medicaid Services	\$237,455,060	543	20,612,568	121.3	4,604,959.9	\$11.52	\$4,420.73
Medicare	\$44,498,519						\$828.43
Third Party Amount	\$4,547,680						\$84.66
All Services	\$286,501,259	543	20,612,568	121.3	4,604,959.9	\$13.90	\$5,333.83

Appendix B5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Developmental Disabilities Waiver Enrollees - Full Duals

SFY 11/12
 Age All
 Gender All
 Area All
 Population All

Rate Group All
 Behavioral Health Category All
 Waiver DD
 Dual Status Full Duals
 Service Group All

Member Months: 26,841

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$10,706	4	22	1.8	9.8	\$486.63	\$0.40
Surgical	26,327	1	4	0.4	1.8	6,581.65	0.98
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	317,111	238	1,576	106.4	704.6	201.21	11.81
Other	0	0	0	0.0	0.0	0.00	0.00
	\$354,143	243	1,602	108.6	716.2	\$221.06	\$13.19
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$107,645	21	1,225	9.4	547.7	\$87.87	\$4.01
Intermediate Care Facility	1,154,129	9	7,895	4.0	3,529.7	146.18	43.00
Swing Beds - Skilled Nursing Facility	424	1	4	0.4	1.8	105.93	0.02
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	150,800	1	306	0.4	136.8	492.81	5.62
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$1,412,998	32	9,430	14.3	4,215.9	\$149.84	\$52.64
Hospital Outpatient							
Emergency Room	\$32,357		480	0	214.6	\$67.41	\$1.21
Surgery	27,504		418	0	186.9	65.80	1.02
Radiology	108,807		1,138	0	508.8	95.61	4.05
Pathology/Lab	99,177		2,443	0	1,092.2	40.60	3.69
Pharmacy	257,705		6,499	0	2,905.6	39.65	9.60
Cardiovascular	16,323		174	0	77.8	93.81	0.61
PT/OT/ST	42,080		898	0	401.5	46.86	1.57
Psychiatric	489		8	0	3.6	61.12	0.02
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	146,987		3,757	0	1,679.7	39.12	5.48
Other	7,711		277	0	123.8	27.84	0.29
	\$739,140		16,092	0	7,194.4	\$45.93	\$27.54
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$2,185		11	0	4.9	\$198.63	\$0.08
Physician	244,097		13,157	0	5,882.2	18.55	9.09
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	1,408		55	0	24.6	25.61	0.05
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	1,035		35	0	15.6	29.57	0.04
Audiology	131		12	0	5.4	10.93	0.00
Psychology	27,629		1,004	0	448.9	27.52	1.03
Physical Therapy	1,650		137	0	61.2	12.04	0.06
Speech Therapy	0		0	0	0.0	0.00	0.00
Occupational Therapy	269		6	0	2.7	44.79	0.01
Podiatry	6,480		207	0	92.5	31.31	0.24
Laboratory	974		89	0	39.8	10.94	0.04
X-Ray	3,509		64	0	28.6	54.83	0.13
Methadone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	590		23	0	10.3	25.66	0.02
Federally Qualified and Rural Health Clinics	53,095		1,405	0	628.1	37.79	1.98
Home Health	864,664		100,128	0	44,764.9	8.64	32.21
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	835,155		964,604	0	431,252.5	0.87	31.11
Ambulance	6,699		387	0	173.0	17.31	0.25
Wheelchair Van	134,345		22,037	0	9,852.2	6.10	5.01
Optometry / Glasses	35,091		2,314	0	1,034.5	15.16	1.31
Private Duty Nursing	405,511		10,296	0	4,603.1	39.39	15.11
Personal Care	75,424		17,220	0	7,698.7	4.38	2.81
Adult Medical Day Care	287,610		7,960	0	3,558.7	36.13	10.72
Dental	55,211		921	0	411.8	59.95	2.06
Other	0		0	0	0.0	0.00	0.00
	\$3,042,763		1,142,072	0	510,594.4	\$2.66	\$113.36

Appendix B5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Developmental Disabilities Waiver Enrollees - Full Duals

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	DD
Area	All	Dual Status	Full Duals
Population	All	Service Group	All

Member Months: 26,841

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$91,662		13,066	0	5,841.5	\$7.02	\$3.42
Single Source Brand	90,054		360	0	160.9	250.15	3.36
Multi-Source Brand	43,857		95	0	42.5	461.65	1.63
Other	15,514		3,817	0	1,706.5	4.06	0.58
	\$241,088		17,338	0	7,751.4	\$13.91	\$8.98
Mental Health Center							
Case Management	\$120,064		336	0	150.2	\$357.33	\$4.47
Long Term Support Service	599,667		23,982	0	10,721.8	25.00	22.34
Partial Hospital	75,205		782	0	349.6	96.17	2.80
Psychotherapy	29,413		1,232	0	550.8	23.87	1.10
Evidence Based Practice	44,488		1,807	0	807.9	24.62	1.66
Medication Management	16,408		425	0	190.0	38.61	0.61
Emergency Service 24/7	13,372		570	0	254.8	23.46	0.50
APRTP	96,161		3,981	0	1,779.8	24.16	3.58
Other	4,428		124	0	55.4	35.71	0.16
	\$999,206		33,239	0	14,860.4	\$30.06	\$37.23
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	3,268		172	0	76.9	19.00	0.12
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	2,650		271	0	121.2	9.78	0.10
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	68,700		691	0	308.9	99.42	2.56
Private Non-Medical Institution for Children	61,952		453	0	202.5	136.76	2.31
	\$136,571		1,587	0	709.5	\$86.06	\$5.09
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	143,478		567	0	253.5	253.05	5.35
	\$143,478		567	0	253.5	\$253.05	\$5.35
Waiver Services - BDS							
Case Management *	\$5,744,742		21,621	0	9,666.3	\$265.70	\$214.03
Respite Care Services *	363,564		120,431	0	53,842.0	3.02	13.55
Environmental Modifications Services *	205,100		97	0	43.4	2,114.43	7.64
Personal Care Services	69,324,934		323,455	0	144,609.4	214.33	2,582.80
Community Support Services	2,880,341		470,309	0	210,264.4	6.12	107.31
Consolidated Developmental Services	9,585,685		2,882	0	1,288.5	3,326.05	357.13
Specialty Services	487,810		16,046	0	7,173.8	30.40	18.17
Day Habilitation Services	29,146,549		5,536,824	0	2,475,388.0	5.26	1,085.90
Supported Employment Services	4,459,198		877,021	0	392,096.1	5.08	166.13
Crisis Response Services	967,650		145,587	0	65,088.6	6.65	36.05
Assistive Technology Support Services	194,140		5,635	0	2,519.3	34.45	7.23
In-Home Support Waiver Services	1,837		1	0	0.4	1,836.68	0.07
	\$123,361,549		7,519,909	0	3,361,980.1	\$16.40	\$4,596.01
Waiver Services - BEAS							
Case Management *	\$145		17	0	7.6	\$8.52	\$0.01
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	1,555		355	0	158.7	4.38	0.06
Emergency Response System	69		2	0	0.9	34.30	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	5,003		1	0	0.4	5,003.05	0.19
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$6,771		375	0	167.7	\$18.06	\$0.25
Medicaid to School Program							
Clinic Services	159,623		43,806	0	19,584.7	3.64	5.95
	\$159,623		43,806	0	19,584.7	\$3.64	\$5.95
All Medicaid Services	\$130,597,329	275	8,786,017	122.9	3,928,028.2	\$14.86	\$4,865.59
Medicare	\$44,498,519						\$1,657.86
Third Party Amount	\$1,226,558						\$45.70
All Services	\$176,322,406	275	8,786,017	122.9	3,928,028.2	\$20.07	\$6,569.14

Appendix B6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Developmental Disabilities Waiver Enrollees - Medicaid Only

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	DD
Area	All	Dual Status	Non Duals
Population	All	Service Group	All

Member Months: 26,873

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$513,839	138	762	61.6	340.3	\$674.33	\$19.12
Surgical	478,472	45	313	20.1	139.8	1,528.67	17.80
Maternity Delivery	4,806	3	5	1.3	2.2	961.24	0.18
Maternity Non-Delivery	1,462	1	1	0.4	0.4	1,462.38	0.05
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	272,567	46	382	20.5	170.6	713.53	10.14
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	3,444	3	9	1.3	4.0	382.67	0.13
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,274,592	236	1,472	105.4	657.3	\$865.89	\$47.43
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$108,946	8	262	3.6	117.0	\$415.82	\$4.05
Intermediate Care Facility	226,456	3	1,047	1.3	467.5	216.29	8.43
Swing Beds - Skilled Nursing Facility	1,377	2	13	0.9	5.8	105.93	0.05
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	741,805	4	1,568	1.8	700.2	473.09	27.60
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	492,374	15	1,301	6.7	581.0	378.46	18.32
	\$1,570,958	32	4,191	14.3	1,871.5	\$374.84	\$58.46
Hospital Outpatient							
Emergency Room	\$193,492		1,581	0	706.0	\$122.39	\$7.20
Surgery	328,679		8,496	0	3,793.8	38.69	12.23
Radiology	277,682		1,507	0	672.9	184.26	10.33
Pathology/Lab	132,097		15,329	0	6,845.1	8.62	4.92
Pharmacy	87,698		10,746	0	4,798.6	8.16	3.26
Cardiovascular	54,870		325	0	145.1	168.83	2.04
PT/OT/ST	345,906		12,619	0	5,634.9	27.41	12.87
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	0		0	0	0.0	0.00	0.00
Other	195,237		3,423	0	1,528.5	57.04	7.27
	\$1,615,661		54,026	0	24,125.0	\$29.91	\$60.12
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$9,542		27	0	12.1	\$353.39	\$0.36
Physician	916,470		30,545	0	13,639.7	30.00	34.10
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	5,041		138	0	61.6	36.53	0.19
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	1,952		93	0	41.5	20.99	0.07
Audiology	245		15	0	6.7	16.30	0.01
Psychology	143,973		2,366	0	1,056.5	60.85	5.36
Physical Therapy	47,232		2,461	0	1,098.9	19.19	1.76
Speech Therapy	40,106		1,616	0	721.6	24.82	1.49
Occupational Therapy	8,552		439	0	196.0	19.48	0.32
Podiatry	10,067		231	0	103.2	43.58	0.37
Laboratory	7,810		921	0	411.3	8.48	0.29
X-Ray	7,771		322	0	143.8	24.13	0.29
Methodone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	1,389		46	0	20.5	30.19	0.05
Federally Qualified and Rural Health Clinics	152,624		1,323	0	590.8	115.36	5.68
Home Health	4,815,156		813,546	0	363,284.8	5.92	179.18
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	3,150,571		2,482,343	0	1,108,477.5	1.27	117.24
Ambulance	80,566		6,404	0	2,859.7	12.58	3.00
Wheelchair Van	45,879		10,825	0	4,833.8	4.24	1.71
Optometry / Glasses	33,324		2,282	0	1,019.0	14.60	1.24
Private Duty Nursing	3,870,028		100,330	0	44,801.8	38.57	144.01
Personal Care	14,655		3,346	0	1,494.1	4.38	0.55
Adult Medical Day Care	16,517		393	0	175.5	42.03	0.61
Dental	205,318		4,005	0	1,788.4	51.27	7.64
Other	0		0	0	0.0	0.00	0.00
	\$13,584,787		3,464,017	0	1,546,839.0	\$3.92	\$505.52

Appendix B6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Developmental Disabilities Waiver Enrollees - Medicaid Only

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	DD
Area	All	Dual Status	Non Duals
Population	All	Service Group	All

Member Months: 26,873

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$1,050,743		51,679	0	23,077.0	\$20.33	\$39.10
Single Source Brand	3,223,524		13,044	0	5,824.7	247.13	119.95
Multi-Source Brand	1,262,784		4,213	0	1,881.3	299.74	46.99
Other	91,731		2,845	0	1,270.4	32.24	3.41
	\$5,628,782		71,781	0	32,053.4	\$78.42	\$209.46
Mental Health Center							
Case Management	\$542,924		1,516	0	677.0	\$358.13	\$20.20
Long Term Support Service	914,398		38,600	0	17,236.6	23.69	34.03
Partial Hospital	38,898		409	0	182.6	95.11	1.45
Psychotherapy	238,426		6,038	0	2,696.2	39.49	8.87
Evidence Based Practice	21,125		879	0	392.5	24.03	0.79
Medication Management	40,967		888	0	396.5	46.13	1.52
Emergency Service 24/7	3,237		138	0	61.6	23.46	0.12
APRTP	1,888		8	0	3.6	236.02	0.07
Other	60,102		741	0	330.9	81.11	2.24
	\$1,861,967		49,217	0	21,977.6	\$37.83	\$69.29
State Plan Services - DCYF							
Day Habilitation Center	\$4,229		27	0	12.1	\$156.62	\$0.16
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	103,652		935	0	417.5	110.86	3.86
Child Health Support Service	23,902		2,444	0	1,091.4	9.78	0.89
Home Based Therapy	21,247		378	0	168.8	56.21	0.79
Placement Services	99,845		1,034	0	461.7	96.56	3.72
Private Non-Medical Institution for Children	545,542		3,628	0	1,620.1	150.37	20.30
	\$798,418		8,446	0	3,771.5	\$94.53	\$29.71
State Plan Services - BDS							
Partners in Health	4,305		13	0	5.8	331.15	0.16
Early Intervention	311,461		1,359	0	606.9	229.18	11.59
Targeted Case Management	650,230		2,527	0	1,128.4	257.31	24.20
	\$965,996		3,899	0	1,741.1	\$247.75	\$35.95
Waiver Services - BDS							
Case Management *	\$2,863,102		10,885	0	4,860.6	\$263.03	\$106.54
Respite Care Services *	1,566,152		532,816	0	237,926.2	2.94	58.28
Environmental Modifications Services *	499,994		82	0	36.6	6,097.49	18.61
Personal Care Services	29,194,865		114,962	0	51,335.7	253.95	1,086.40
Community Support Services	876,588		142,632	0	63,691.6	6.15	32.62
Consolidated Developmental Services	13,495,885		3,955	0	1,766.1	3,412.36	502.21
Specialty Services	849,004		52,694	0	23,530.2	16.11	31.59
Day Habilitation Services	15,241,836		2,754,463	0	1,229,991.3	5.53	567.18
Supported Employment Services	856,161		161,043	0	71,912.9	5.32	31.86
Crisis Response Services	510,795		76,815	0	34,301.3	6.65	19.01
Assistive Technology Support Services	444,562		12,696	0	5,669.3	35.02	16.54
In-Home Support Waiver Services	122,058		101	0	45.1	1,208.49	4.54
	\$66,521,002		3,863,144	0	1,725,067.1	\$17.22	\$2,475.38
Waiver Services - BEAS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Emergency Response System	34		1	0	0.4	34.30	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$34		1	0	0.4	\$34.30	\$0.00
Medicaid to School Program							
Clinic Services	13,035,534		4,306,357	0	1,922,981.6	3.03	485.08
	\$13,035,534		4,306,357	0	1,922,981.6	\$3.03	\$485.08
All Medicaid Services	\$106,857,731	268	11,826,551	119.7	5,281,085.6	\$9.04	\$3,976.40
Medicare	\$0						\$0.00
Third Party Amount	\$3,321,122						\$123.59
All Services	\$110,178,853	268	11,826,551	119.7	5,281,085.6	\$9.32	\$4,099.98



APPENDIX C

Acquired Brain Disorder Waiver Enrollees

Appendix C1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Acquired Brain Disorder Waiver Enrollees - Total Population

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver ABD
 Area All Dual Status All
 Population All Service Group All

Member Months: 2,223

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$55,939	8	98	43.2	529.0	\$570.80	\$25.16
Surgical	78,477	5	36	27.0	194.3	2,179.92	35.30
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	2,815	1	9	5.4	48.6	312.82	1.27
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	33,448	30	184	161.9	993.3	181.78	15.05
Other	0	0	0	0.0	0.0	0.00	0.00
	\$170,679	44	327	237.5	1,765.2	\$521.95	\$76.78
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$131,388	3	528	16.2	2,850.2	\$248.84	\$59.10
Intermediate Care Facility	230,544	1	2,011	5.4	10,855.6	114.64	103.71
Swing Beds - Skilled Nursing Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	297,764	1	586	5.4	3,163.3	508.13	133.95
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$659,697	5	3,125	27.0	16,869.1	\$211.10	\$296.76
Hospital Outpatient							
Emergency Room	\$4,829		61	0	329.3	\$79.17	\$2.17
Surgery	7,368		230	0	1,241.6	32.03	3.31
Radiology	27,731		195	0	1,052.6	142.21	12.47
Pathology/Lab	13,290		908	0	4,901.5	14.64	5.98
Pharmacy	28,628		1,957	0	10,564.1	14.63	12.88
Cardiovascular	4,562		31	0	167.3	147.16	2.05
PT/OT/ST	27,454		1,030	0	5,560.1	26.65	12.35
Psychiatric	55		1	0	5.4	54.54	0.02
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	21,852		521	0	2,812.4	41.94	9.83
Other	8,717		253	0	1,365.7	34.45	3.92
	\$144,485		5,187	0	28,000.0	\$27.86	\$65.00
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$616		5	0	27.0	\$123.12	\$0.28
Physician	107,872		14,372	0	77,581.6	7.51	48.53
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	335		13	0	70.2	25.81	0.15
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	0		0	0	0.0	0.00	0.00
Audiology	120		6	0	32.4	19.92	0.05
Psychology	8,685		186	0	1,004.0	46.69	3.91
Physical Therapy	2,240		110	0	593.8	20.36	1.01
Speech Therapy	67		4	0	21.6	16.80	0.03
Occupational Therapy	1,699		80	0	431.8	21.23	0.76
Podiatry	1,525		50	0	269.9	30.49	0.69
Laboratory	2,271		305	0	1,646.4	7.45	1.02
X-Ray	3,152		212	0	1,144.4	14.87	1.42
Methadone Treatment Clinic	3,730		365	0	1,970.3	10.22	1.68
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	9,878		176	0	950.1	56.12	4.44
Home Health	16,551		1,010	0	5,452.1	16.39	7.45
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	250,783		166,381	0	898,143.0	1.51	112.81
Ambulance	14,603		1,644	0	8,874.5	8.88	6.57
Wheelchair Van	66,149		13,778	0	74,375.2	4.80	29.76
Optometry / Glasses	3,903		177	0	955.5	22.05	1.76
Private Duty Nursing	0		0	0	0.0	0.00	0.00
Personal Care	0		0	0	0.0	0.00	0.00
Adult Medical Day Care	20,927		425	0	2,294.2	49.24	9.41
Dental	6,013		76	0	410.3	79.12	2.70
Other	0		0	0	0.0	0.00	0.00
	\$521,117		199,375	0	1,076,248.3	\$2.61	\$234.42

Appendix C1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Acquired Brain Disorder Waiver Enrollees - Total Population

SFY	10/11	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	ABD
Area	All	Dual Status	All
Population	All	Service Group	All

Member Months: 2,223

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$59,761		4,296	0	23,190.3	\$13.91	\$26.88
Single Source Brand	122,146		607	0	3,276.7	201.23	54.95
Multi-Source Brand	50,012		118	0	637.0	423.83	22.50
Other	3,980		724	0	3,908.2	5.50	1.79
	\$235,899		5,745	0	31,012.1	\$41.06	\$106.12
Mental Health Center							
Case Management	\$8,382		22	0	118.8	\$381.00	\$3.77
Long Term Support Service	14,039		200	0	1,079.6	70.19	6.32
Partial Hospital	5,495		55	0	296.9	99.90	2.47
Psychotherapy	1,945		30	0	161.9	64.83	0.87
Evidence Based Practice	504		19	0	102.6	26.54	0.23
Medication Management	1,961		40	0	215.9	49.02	0.88
Emergency Service 24/7	94		4	0	21.6	23.46	0.04
APRTP	3,453		188	0	1,014.8	18.37	1.55
Other	262		4	0	21.6	65.55	0.12
	\$36,134		562	0	3,033.7	\$64.30	\$16.25
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	8,750		34	0	183.5	257.35	3.94
	\$8,750		34	0	183.5	\$257.35	\$3.94
Waiver Services - BDS							
Case Management *	\$444,339		1,722	0	9,295.5	\$258.04	\$199.88
Respite Care Services *	6,142		1,498	0	8,086.4	4.10	2.76
Environmental Modifications Services *	84,899		10	0	54.0	8,489.86	38.19
Personal Care Services	12,267,383		40,430	0	218,245.6	303.42	5,518.39
Community Support Services	32,886		6,473	0	34,942.0	5.08	14.79
Consolidated Developmental Services	1,700,787		247	0	1,333.3	6,885.78	765.09
Specialty Services	33,170		2,126	0	11,476.4	15.60	14.92
Day Habilitation Services	1,814,636		367,601	0	1,984,350.9	4.94	816.30
Supported Employment Services	11,084		2,019	0	10,898.8	5.49	4.99
Crisis Response Services	274,728		41,383	0	223,390.0	6.64	123.58
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$16,670,053		463,509	0	2,502,072.9	\$35.96	\$7,498.90
Waiver Services - BEAS							
Case Management *	\$281		33	0	178.1	\$8.52	\$0.13
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	830		148	0	798.9	5.61	0.37
Personal Care Services	1,428		326	0	1,759.8	4.38	0.64
Emergency Response System	34		1	0	5.4	34.30	0.02
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	778		94	0	507.4	8.28	0.35
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	39		1	0	5.4	39.20	0.02
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$3,390		603	0	3,255.1	\$5.62	\$1.53
Medicaid to School Program							
Clinic Services	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
All Medicaid Services	\$18,450,204	49	678,467	264.5	3,662,439.9	\$27.19	\$8,299.69
Medicare	\$4,411,581						\$1,984.52
Third Party Amount	\$282,679						\$127.16
All Services	\$23,144,465	49	678,467	264.5	3,662,439.9	\$34.11	\$10,411.37

Appendix C2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Acquired Brain Disorder Waiver Enrollees - Full Duals

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver ABD
 Area All Dual Status Full Duals
 Population All Service Group All

Member Months: 1,736

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Surgical	0	0	0	0.0	0.0	0.00	0.00
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	33,448	30	184	207.4	1,271.9	181.78	19.27
Other	0	0	0	0.0	0.0	0.00	0.00
	\$33,448	30	184	207.4	1,271.9	\$181.78	\$19.27
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$131,388	3	528	20.7	3,649.8	\$248.84	\$75.68
Intermediate Care Facility	230,544	1	2,011	6.9	13,900.9	114.64	132.80
Swing Beds - Skilled Nursing Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	7,450	0	18	0.0	124.4	413.89	4.29
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$369,382	4	2,557	27.6	17,675.1	\$144.46	\$212.78
Hospital Outpatient							
Emergency Room	\$685		18	0	124.4	\$38.08	\$0.39
Surgery	1,194		108	0	746.5	11.05	0.69
Radiology	9,636		111	0	767.3	86.81	5.55
Pathology/Lab	7,406		283	0	1,956.2	26.17	4.27
Pharmacy	23,174		658	0	4,548.4	35.22	13.35
Cardiovascular	1,068		6	0	41.5	177.95	0.62
PT/OT/ST	9,864		235	0	1,624.4	41.98	5.68
Psychiatric	55		1	0	6.9	54.54	0.03
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	21,852		521	0	3,601.4	41.94	12.59
Other	336		26	0	179.7	12.92	0.19
	\$75,269		1,967	0	13,596.8	\$38.27	\$43.36
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$85		3	0	20.7	\$28.20	\$0.05
Physician	20,637		2,133	0	14,744.2	9.68	11.89
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	0		0	0	0.0	0.00	0.00
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	0		0	0	0.0	0.00	0.00
Audiology	0		0	0	0.0	0.00	0.00
Psychology	3,624		109	0	753.5	33.24	2.09
Physical Therapy	106		12	0	82.9	8.84	0.06
Speech Therapy	0		0	0	0.0	0.00	0.00
Occupational Therapy	0		0	0	0.0	0.00	0.00
Podiatry	547		21	0	145.2	26.05	0.32
Laboratory	40		5	0	34.6	8.05	0.02
X-Ray	161		95	0	656.7	1.70	0.09
Methadone Treatment Clinic	858		84	0	580.6	10.22	0.49
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	3,399		105	0	725.8	32.37	1.96
Home Health	6,693		101	0	698.2	66.27	3.86
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	184,639		140,975	0	974,481.6	1.31	106.36
Ambulance	7,523		984	0	6,801.8	7.64	4.33
Wheelchair Van	43,645		8,920	0	61,659.0	4.89	25.14
Optometry / Glasses	2,840		140	0	967.7	20.29	1.64
Private Duty Nursing	0		0	0	0.0	0.00	0.00
Personal Care	0		0	0	0.0	0.00	0.00
Adult Medical Day Care	20,927		425	0	2,937.8	49.24	12.05
Dental	3,933		45	0	311.1	87.39	2.27
Other	0		0	0	0.0	0.00	0.00
	\$299,657		154,157	0	1,065,601.4	\$1.94	\$172.61

Appendix C2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Acquired Brain Disorder Waiver Enrollees - Full Duals

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver ABD
 Area All Dual Status Full Duals
 Population All Service Group All

Member Months: 1,736

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$12,852		1,753	0	12,117.5	\$7.33	\$7.40
Single Source Brand	11,549		73	0	504.6	158.21	6.65
Multi-Source Brand	2,284		12	0	82.9	190.35	1.32
Other	1,959		517	0	3,573.7	3.79	1.13
	\$28,645		2,355	0	16,278.8	\$12.16	\$16.50
Mental Health Center							
Case Management	\$8,001		21	0	145.2	\$381.00	\$4.61
Long Term Support Service	13,703		196	0	1,354.8	69.91	7.89
Partial Hospital	5,495		55	0	380.2	99.90	3.17
Psychotherapy	172		3	0	20.7	57.19	0.10
Evidence Based Practice	504		19	0	131.3	26.54	0.29
Medication Management	595		15	0	103.7	39.69	0.34
Emergency Service 24/7	94		4	0	27.6	23.46	0.05
APRTP	3,453		188	0	1,299.5	18.37	1.99
Other	124		2	0	13.8	61.96	0.07
	\$32,141		503	0	3,477.0	\$63.90	\$18.51
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	6,948		27	0	186.6	257.35	4.00
	\$6,948		27	0	186.6	\$257.35	\$4.00
Waiver Services - BDS							
Case Management *	\$348,866		1,360	0	9,400.9	\$256.52	\$200.96
Respite Care Services *	6,142		1,498	0	10,354.8	4.10	3.54
Environmental Modifications Services *	54,419		5	0	34.6	10,883.80	31.35
Personal Care Services	9,722,139		32,061	0	221,619.8	303.24	5,600.31
Community Support Services	30,621		6,029	0	41,675.1	5.08	17.64
Consolidated Developmental Services	1,280,972		174	0	1,202.8	7,361.91	737.89
Specialty Services	18,427		1,315	0	9,089.9	14.01	10.61
Day Habilitation Services	1,417,077		289,929	0	2,004,117.5	4.89	816.29
Supported Employment Services	11,084		2,019	0	13,956.2	5.49	6.38
Crisis Response Services	194,881		29,376	0	203,059.9	6.63	112.26
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$13,084,629		363,766	0	2,514,511.5	\$35.97	\$7,537.23
Waiver Services - BEAS							
Case Management *	\$281		33	0	228.1	\$8.52	\$0.16
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	830		148	0	1,023.0	5.61	0.48
Personal Care Services	1,428		326	0	2,253.5	4.38	0.82
Emergency Response System	34		1	0	6.9	34.30	0.02
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	778		94	0	649.8	8.28	0.45
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	39		1	0	6.9	39.20	0.02
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$3,390		603	0	4,168.2	\$5.62	\$1.95
Medicaid to School Program							
Clinic Services	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
All Medicaid Services	\$13,933,508	34	526,119	235.0	3,636,767.3	\$26.48	\$8,026.21
Medicare	\$4,411,581						\$2,541.23
Third Party Amount	\$264,324						\$152.26
All Services	\$18,609,414	34	526,119	235.0	3,636,767.3	\$35.37	\$10,719.71

Appendix C3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Acquired Brain Disorder Waiver Enrollees - Medicaid Only

SFY 10/11
 Age All
 Gender All
 Area All
 Population All

Rate Group All
 Behavioral Health Category All
 Waiver ABD
 Dual Status Non Duals
 Service Group All

Member Months: 487

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$55,939	8	98	197.1	2,414.8	\$570.80	\$114.86
Surgical	78,477	5	36	123.2	887.1	2,179.92	161.14
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	2,815	1	9	24.6	221.8	312.82	5.78
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$137,231	14	143	345.0	3,523.6	\$959.66	\$281.79
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Skilled Nursing Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	290,314	1	568	24.6	13,995.9	511.12	596.13
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$290,314	1	568	24.6	13,995.9	\$511.12	\$596.13
Hospital Outpatient							
Emergency Room	\$4,144		43	0	1,059.5	\$96.37	\$8.51
Surgery	6,174		122	0	3,006.2	50.60	12.68
Radiology	18,095		84	0	2,069.8	215.42	37.16
Pathology/Lab	5,884		625	0	15,400.4	9.42	12.08
Pharmacy	5,454		1,299	0	32,008.2	4.20	11.20
Cardiovascular	3,494		25	0	616.0	139.77	7.18
PT/OT/ST	17,590		795	0	19,589.3	22.13	36.12
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	0		0	0	0.0	0.00	0.00
Other	8,381		227	0	5,593.4	36.92	17.21
	\$69,216		3,220	0	79,342.9	\$21.50	\$142.13
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$531		2	0	49.3	\$265.50	\$1.09
Physician	87,235		12,239	0	301,577.0	7.13	179.13
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	335		13	0	320.3	25.81	0.69
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	0		0	0	0.0	0.00	0.00
Audiology	120		6	0	147.8	19.92	0.25
Psychology	5,061		77	0	1,897.3	65.73	10.39
Physical Therapy	2,134		98	0	2,414.8	21.77	4.38
Speech Therapy	67		4	0	98.6	16.80	0.14
Occupational Therapy	1,698		80	0	1,971.3	21.23	3.49
Podiatry	978		29	0	714.6	33.71	2.01
Laboratory	2,231		300	0	7,392.2	7.44	4.58
X-Ray	2,991		117	0	2,883.0	25.56	6.14
Methodone Treatment Clinic	2,872		281	0	6,924.0	10.22	5.90
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	6,479		71	0	1,749.5	91.26	13.30
Home Health	9,858		909	0	22,398.4	10.84	20.24
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	66,144		25,406	0	626,020.5	2.60	135.82
Ambulance	7,080		660	0	16,262.8	10.73	14.54
Wheelchair Van	22,504		4,858	0	119,704.3	4.63	46.21
Optometry / Glasses	1,063		37	0	911.7	28.72	2.18
Private Duty Nursing	0		0	0	0.0	0.00	0.00
Personal Care	0		0	0	0.0	0.00	0.00
Adult Medical Day Care	0		0	0	0.0	0.00	0.00
Dental	2,081		31	0	763.9	67.11	4.27
Other	0		0	0	0.0	0.00	0.00
	\$221,461		45,218	0	1,114,201.2	\$4.90	\$454.75

Appendix C3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Acquired Brain Disorder Waiver Enrollees - Medicaid Only

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver ABD
 Area All Dual Status Non Duals
 Population All Service Group All

Member Months: 487

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$46,909		2,543	0	62,661.2	\$18.45	\$96.32
Single Source Brand	110,597		534	0	13,158.1	207.11	227.10
Multi-Source Brand	47,728		106	0	2,611.9	450.26	98.00
Other	2,021		207	0	5,100.6	9.76	4.15
	\$207,255		3,390	0	83,531.8	\$61.14	\$425.57
Mental Health Center							
Case Management	\$381		1	0	24.6	\$381.00	\$0.78
Long Term Support Service	336		4	0	98.6	83.91	0.69
Partial Hospital	0		0	0	0.0	0.00	0.00
Psychotherapy	1,773		27	0	665.3	65.68	3.64
Evidence Based Practice	0		0	0	0.0	0.00	0.00
Medication Management	1,365		25	0	616.0	54.61	2.80
Emergency Service 24/7	0		0	0	0.0	0.00	0.00
APRTP	0		0	0	0.0	0.00	0.00
Other	138		2	0	49.3	69.13	0.28
	\$3,994		59	0	1,453.8	\$67.69	\$8.20
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	1,801		7	0	172.5	257.35	3.70
	\$1,801		7	0	172.5	\$257.35	\$3.70
Waiver Services - BDS							
Case Management *	\$95,474		362	0	8,919.9	\$263.74	\$196.04
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	30,480		5	0	123.2	6,095.91	62.59
Personal Care Services	2,545,243		8,369	0	206,217.7	304.13	5,226.37
Community Support Services	2,264		444	0	10,940.5	5.10	4.65
Consolidated Developmental Services	419,815		73	0	1,798.8	5,750.88	862.04
Specialty Services	14,743		811	0	19,983.6	18.18	30.27
Day Habilitation Services	397,560		77,672	0	1,913,889.1	5.12	816.34
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	79,847		12,007	0	295,860.4	6.65	163.96
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$3,585,424		99,743	0	2,457,733.1	\$35.95	\$7,362.27
Waiver Services - BEAS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Emergency Response System	0		0	0	0.0	0.00	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
Medicaid to School Program							
Clinic Services	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
All Medicaid Services	\$4,516,696	15	152,348	369.6	3,753,954.8	\$29.65	\$9,274.53
Medicare	\$0						\$0.00
Third Party Amount	\$18,355						\$37.69
All Services	\$4,535,051	15	152,348	369.6	3,753,954.8	\$29.77	\$9,312.22

Appendix C4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Acquired Brain Disorder Waiver Enrollees - Total Population

SFY 11/12
 Age All
 Gender All
 Area All
 Population All

Rate Group All
 Behavioral Health Category All
 Waiver ABD
 Dual Status All
 Service Group All

Member Months: 2,426

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$29,400	7	87	34.6	430.3	\$337.93	\$12.12
Surgical	22,938	3	15	14.8	74.2	1,529.23	9.46
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	43,424	38	239	188.0	1,182.2	181.69	17.90
Other	0	0	0	0.0	0.0	0.00	0.00
	\$95,763	48	341	237.4	1,686.7	\$280.83	\$39.47
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$184,291	4	694	19.8	3,432.8	\$265.55	\$75.96
Intermediate Care Facility	266,403	2	2,160	9.9	10,684.3	123.33	109.81
Swing Beds - Skilled Nursing Facility	2,860	2	27	9.9	133.6	105.93	1.18
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	733,730	0	3,237	0.0	16,011.5	226.67	302.44
Intermediate Care Facility Atypical Care	34,588	2	57	9.9	281.9	606.81	14.26
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$1,221,871	10	6,175	49.5	30,544.1	\$197.87	\$503.66
Hospital Outpatient							
Emergency Room	\$8,813		80	0	395.7	\$110.16	\$3.63
Surgery	9,409		128	0	633.1	73.51	3.88
Radiology	27,331		222	0	1,098.1	123.11	11.27
Pathology/Lab	14,851		918	0	4,540.8	16.18	6.12
Pharmacy	29,940		1,944	0	9,615.8	15.40	12.34
Cardiovascular	1,417		17	0	84.1	83.34	0.58
PT/OT/ST	27,883		637	0	3,150.9	43.77	11.49
Psychiatric	54		6	0	29.7	9.02	0.02
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	23,233		620	0	3,066.8	37.47	9.58
Other	6,474		233	0	1,152.5	27.79	2.67
	\$149,405		4,805	0	23,767.5	\$31.09	\$61.58
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$3,158		14	0	69.2	\$225.57	\$1.30
Physician	102,950		10,732	0	53,084.9	9.59	42.44
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	453		17	0	84.1	26.65	0.19
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	0		0	0	0.0	0.00	0.00
Audiology	0		0	0	0.0	0.00	0.00
Psychology	7,356		165	0	816.2	44.58	3.03
Physical Therapy	5,687		267	0	1,320.7	21.30	2.34
Speech Therapy	0		0	0	0.0	0.00	0.00
Occupational Therapy	136		8	0	39.6	17.03	0.06
Podiatry	1,338		47	0	232.5	28.48	0.55
Laboratory	1,944		264	0	1,305.9	7.36	0.80
X-Ray	1,071		23	0	113.8	46.59	0.44
Methadone Treatment Clinic	3,424		335	0	1,657.0	10.22	1.41
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	9,959		193	0	954.7	51.60	4.11
Home Health	15,985		1,665	0	8,235.8	9.60	6.59
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	209,757		197,622	0	977,520.2	1.06	86.46
Ambulance	14,703		1,686	0	8,339.7	8.72	6.06
Wheelchair Van	60,274		12,134	0	60,019.8	4.97	24.85
Optometry / Glasses	5,201		345	0	1,706.5	15.07	2.14
Private Duty Nursing	0		0	0	0.0	0.00	0.00
Personal Care	0		0	0	0.0	0.00	0.00
Adult Medical Day Care	34,785		848	0	4,194.6	41.02	14.34
Dental	8,718		113	0	558.9	77.15	3.59
Other	0		0	0	0.0	0.00	0.00
	\$486,898		226,478	0	1,120,253.9	\$2.15	\$200.70

Appendix C4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Acquired Brain Disorder Waiver Enrollees - Total Population

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	ABD
Area	All	Dual Status	All
Population	All	Service Group	All

Member Months: 2,426

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$48,975		4,293	0	21,235.0	\$11.41	\$20.19
Single Source Brand	200,332		632	0	3,126.1	316.98	82.58
Multi-Source Brand	36,859		76	0	375.9	484.99	15.19
Other	20,558		758	0	3,749.4	27.12	8.47
	\$306,724		5,759	0	28,486.4	\$53.26	\$126.43
Mental Health Center							
Case Management	\$13,609		38	0	188.0	\$358.14	\$5.61
Long Term Support Service	18,387		222	0	1,098.1	82.83	7.58
Partial Hospital	6,294		63	0	311.6	99.90	2.59
Psychotherapy	2,652		42	0	207.7	63.14	1.09
Evidence Based Practice	4,273		161	0	796.4	26.54	1.76
Medication Management	1,989		40	0	197.9	49.72	0.82
Emergency Service 24/7	0		0	0	0.0	0.00	0.00
APRTP	4,388		189	0	934.9	23.22	1.81
Other	291		4	0	19.8	72.84	0.12
	\$51,883		759	0	3,754.3	\$68.36	\$21.39
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	9,265		36	0	178.1	257.35	3.82
	\$9,265		36	0	178.1	\$257.35	\$3.82
Waiver Services - BDS							
Case Management *	\$470,078		1,818	0	8,992.6	\$258.57	\$193.77
Respite Care Services *	12,874		3,372	0	16,679.3	3.82	5.31
Environmental Modifications Services *	60,948		12	0	59.4	5,078.98	25.12
Personal Care Services	12,993,972		42,233	0	208,901.9	307.67	5,356.13
Community Support Services	79,581		13,550	0	67,023.9	5.87	32.80
Consolidated Developmental Services	1,833,609		291	0	1,439.4	6,301.06	755.82
Specialty Services	93,460		2,009	0	9,937.3	46.52	38.52
Day Habilitation Services	1,932,003		380,685	0	1,883,025.6	5.08	796.37
Supported Employment Services	36,180		7,051	0	34,877.2	5.13	14.91
Crisis Response Services	195,787		29,463	0	145,736.2	6.65	80.70
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$17,708,491		480,484	0	2,376,672.7	\$36.86	\$7,299.46
Waiver Services - BEAS							
Case Management *	\$469		55	0	272.1	\$8.52	\$0.19
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	154		22	0	108.8	6.98	0.06
Personal Care Services	1,682		384	0	1,899.4	4.38	0.69
Emergency Response System	34		1	0	4.9	34.30	0.01
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	722		12	0	59.4	60.20	0.30
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$3,061		474	0	2,344.6	\$6.46	\$1.26
Medicaid to School Program							
Clinic Services	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
All Medicaid Services	\$20,033,360	58	725,311	286.9	3,587,688.4	\$27.62	\$8,257.77
Medicare	\$4,867,157						\$2,006.25
Third Party Amount	\$348,340						\$143.59
All Services	\$25,248,858	58	725,311	286.9	3,587,688.4	\$34.81	\$10,407.61

Appendix C5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Acquired Brain Disorder Waiver Enrollees - Full Duals

SFY 11/12
 Age All
 Gender All
 Area All
 Population All

Rate Group All
 Behavioral Health Category All
 Waiver ABD
 Dual Status Full Duals
 Service Group All

Member Months: 1,919

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$15,779	2	11	12.5	68.8	\$1,434.45	\$8.22
Surgical	0	0	0	0.0	0.0	0.00	0.00
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	43,424	38	239	237.6	1,494.5	181.69	22.63
Other	0	0	0	0.0	0.0	0.00	0.00
	\$59,203	40	250	250.1	1,563.3	\$236.81	\$30.85
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$184,291	4	694	25.0	4,339.8	\$265.55	\$96.03
Intermediate Care Facility	266,403	2	2,160	12.5	13,507.0	123.33	138.82
Swing Beds - Skilled Nursing Facility	742	1	7	6.3	43.8	105.93	0.39
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	179,365	0	347	0.0	2,169.9	516.90	93.47
Intermediate Care Facility Atypical Care	16,798	1	27	6.3	168.8	622.16	8.75
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$647,598	8	3,235	50.0	20,229.3	\$200.18	\$337.47
Hospital Outpatient							
Emergency Room	\$1,558		29	0	181.3	\$53.71	\$0.81
Surgery	938		15	0	93.8	62.52	0.49
Radiology	10,933		130	0	812.9	84.10	5.70
Pathology/Lab	7,784		195	0	1,219.4	39.92	4.06
Pharmacy	27,304		1,035	0	6,472.1	26.38	14.23
Cardiovascular	745		7	0	43.8	106.47	0.39
PT/OT/ST	12,195		163	0	1,019.3	74.82	6.36
Psychiatric	54		6	0	37.5	9.02	0.03
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	23,233		620	0	3,877.0	37.47	12.11
Other	378		23	0	143.8	16.45	0.20
	\$85,122		2,223	0	13,901.0	\$38.29	\$44.36
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$0		0	0	0.0	\$0.00	\$0.00
Physician	21,490		1,785	0	11,162.1	12.04	11.20
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	0		0	0	0.0	0.00	0.00
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	0		0	0	0.0	0.00	0.00
Audiology	0		0	0	0.0	0.00	0.00
Psychology	3,051		101	0	631.6	30.21	1.59
Physical Therapy	0		0	0	0.0	0.00	0.00
Speech Therapy	0		0	0	0.0	0.00	0.00
Occupational Therapy	93		6	0	37.5	15.55	0.05
Podiatry	648		27	0	168.8	24.01	0.34
Laboratory	77		10	0	62.5	7.73	0.04
X-Ray	529		14	0	87.5	37.78	0.28
Methodone Treatment Clinic	3,424		335	0	2,094.8	10.22	1.78
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	3,713		126	0	787.9	29.47	1.94
Home Health	5,842		199	0	1,244.4	29.35	3.04
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	150,564		105,731	0	661,163.1	1.42	78.46
Ambulance	9,302		1,170	0	7,316.3	7.95	4.85
Wheelchair Van	42,498		8,419	0	52,646.2	5.05	22.15
Optometry / Glasses	3,638		255	0	1,594.6	14.27	1.90
Private Duty Nursing	0		0	0	0.0	0.00	0.00
Personal Care	0		0	0	0.0	0.00	0.00
Adult Medical Day Care	34,785		848	0	5,302.8	41.02	18.13
Dental	6,589		82	0	512.8	80.35	3.43
Other	0		0	0	0.0	0.00	0.00
	\$286,244		119,108	0	744,812.9	\$2.40	\$149.16

Appendix C5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Acquired Brain Disorder Waiver Enrollees - Full Duals

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	ABD
Area	All	Dual Status	Full Duals
Population	All	Service Group	All

Member Months: 1,919

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$10,563		1,800	0	11,255.9	\$5.87	\$5.50
Single Source Brand	7,595		45	0	281.4	168.77	3.96
Multi-Source Brand	3,545		16	0	100.1	221.57	1.85
Other	2,029		531	0	3,320.5	3.82	1.06
	\$23,732		2,392	0	14,957.8	\$9.92	\$12.37
Mental Health Center							
Case Management	\$13,251		37	0	231.4	\$358.14	\$6.91
Long Term Support Service	17,548		212	0	1,325.7	82.77	9.14
Partial Hospital	6,294		63	0	394.0	99.90	3.28
Psychotherapy	603		9	0	56.3	66.95	0.31
Evidence Based Practice	159		6	0	37.5	26.54	0.08
Medication Management	896		20	0	125.1	44.82	0.47
Emergency Service 24/7	0		0	0	0.0	0.00	0.00
APRTP	4,388		189	0	1,181.9	23.22	2.29
Other	62		1	0	6.3	61.96	0.03
	\$43,201		537	0	3,358.0	\$80.45	\$22.51
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	5,404		21	0	131.3	257.35	2.82
	\$5,404		21	0	131.3	\$257.35	\$2.82
Waiver Services - BDS							
Case Management *	\$378,025		1,470	0	9,192.3	\$257.16	\$196.99
Respite Care Services *	7,396		1,804	0	11,280.9	4.10	3.85
Environmental Modifications Services *	40,598		11	0	68.8	3,690.70	21.16
Personal Care Services	10,660,869		34,680	0	216,862.9	307.41	5,555.43
Community Support Services	70,363		12,021	0	75,170.4	5.85	36.67
Consolidated Developmental Services	1,336,303		200	0	1,250.7	6,681.52	696.35
Specialty Services	31,956		794	0	4,965.1	40.25	16.65
Day Habilitation Services	1,509,071		301,061	0	1,882,611.8	5.01	786.38
Supported Employment Services	36,180		7,051	0	44,091.7	5.13	18.85
Crisis Response Services	169,872		25,566	0	159,870.8	6.64	88.52
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$14,240,633		384,658	0	2,405,365.3	\$37.02	\$7,420.86
Waiver Services - BEAS							
Case Management *	\$469		55	0	343.9	\$8.52	\$0.24
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	154		22	0	137.6	6.98	0.08
Personal Care Services	1,682		384	0	2,401.3	4.38	0.88
Emergency Response System	34		1	0	6.3	34.30	0.02
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	722		12	0	75.0	60.20	0.38
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$3,061		474	0	2,964.0	\$6.46	\$1.59
Medicaid to School Program							
Clinic Services	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
All Medicaid Services	\$15,394,199	48	512,898	300.2	3,207,283.0	\$30.01	\$8,021.99
Medicare	\$4,867,157						\$2,536.30
Third Party Amount	\$291,100						\$151.69
All Services	\$20,552,456	48	512,898	300.2	3,207,283.0	\$40.07	\$10,709.98

Appendix C6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Acquired Brain Disorder Waiver Enrollees - Medicaid Only

SFY 11/12 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver ABD
 Area All Dual Status Non Duals
 Population All Service Group All

Member Months: 507

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$13,621	5	76	118.3	1,798.8	\$179.23	\$26.87
Surgical	22,938	3	15	71.0	355.0	1,529.23	45.24
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$36,560	8	91	189.3	2,153.8	\$401.75	\$72.11
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Skilled Nursing Facility	2,119	1	20	23.7	473.4	105.93	4.18
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	554,364	0	2,890	0.0	68,402.4	191.82	1,093.42
Intermediate Care Facility Atypical Care	17,790	1	30	23.7	710.1	592.99	35.09
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$574,273	2	2,940	47.3	69,585.8	\$195.33	\$1,132.69
Hospital Outpatient							
Emergency Room	\$7,255		51	0	1,207.1	\$142.25	\$14.31
Surgery	8,471		113	0	2,674.6	74.96	16.71
Radiology	16,398		92	0	2,177.5	178.24	32.34
Pathology/Lab	7,067		723	0	17,112.4	9.77	13.94
Pharmacy	2,636		909	0	21,514.8	2.90	5.20
Cardiovascular	672		10	0	236.7	67.15	1.32
PT/OT/ST	15,687		474	0	11,218.9	33.10	30.94
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	0		0	0	0.0	0.00	0.00
Other	6,096		210	0	4,970.4	29.03	12.02
	\$64,282		2,582	0	61,112.4	\$24.90	\$126.79
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$3,158		14	0	331.4	\$225.57	\$6.23
Physician	81,459		8,947	0	211,763.3	9.10	160.67
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	453		17	0	402.4	26.65	0.89
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	0		0	0	0.0	0.00	0.00
Audiology	0		0	0	0.0	0.00	0.00
Psychology	4,305		64	0	1,514.8	67.26	8.49
Physical Therapy	5,687		267	0	6,319.5	21.30	11.22
Speech Therapy	0		0	0	0.0	0.00	0.00
Occupational Therapy	43		2	0	47.3	21.45	0.08
Podiatry	690		20	0	473.4	34.51	1.36
Laboratory	1,867		254	0	6,011.8	7.35	3.68
X-Ray	543		9	0	213.0	60.29	1.07
Methadone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	6,245		67	0	1,585.8	93.22	12.32
Home Health	10,143		1,466	0	34,698.2	6.92	20.01
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	59,193		91,891	0	2,174,934.9	0.64	116.75
Ambulance	5,400		516	0	12,213.0	10.47	10.65
Wheelchair Van	17,776		3,715	0	87,929.0	4.78	35.06
Optometry / Glasses	1,563		90	0	2,130.2	17.36	3.08
Private Duty Nursing	0		0	0	0.0	0.00	0.00
Personal Care	0		0	0	0.0	0.00	0.00
Adult Medical Day Care	0		0	0	0.0	0.00	0.00
Dental	2,129		31	0	733.7	68.68	4.20
Other	0		0	0	0.0	0.00	0.00
	\$200,654		107,370	0	2,541,301.8	\$1.87	\$395.77

Appendix C6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Acquired Brain Disorder Waiver Enrollees - Medicaid Only

SFY 11/12 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver ABD
 Area All Dual Status Non Duals
 Population All Service Group All

Member Months: 507

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$38,412		2,493	0	59,005.9	\$15.41	\$75.76
Single Source Brand	192,737		587	0	13,893.5	328.34	380.15
Multi-Source Brand	33,314		60	0	1,420.1	555.24	65.71
Other	18,530		227	0	5,372.8	81.63	36.55
	\$282,992		3,367	0	79,692.3	\$84.05	\$558.17
Mental Health Center							
Case Management	\$358		1	0	23.7	\$358.14	\$0.71
Long Term Support Service	839		10	0	236.7	83.91	1.66
Partial Hospital	0		0	0	0.0	0.00	0.00
Psychotherapy	2,049		33	0	781.1	62.10	4.04
Evidence Based Practice	4,114		155	0	3,668.6	26.54	8.11
Medication Management	1,092		20	0	473.4	54.61	2.15
Emergency Service 24/7	0		0	0	0.0	0.00	0.00
APRTP	0		0	0	0.0	0.00	0.00
Other	229		3	0	71.0	76.47	0.45
	\$8,682		222	0	5,254.4	\$39.11	\$17.12
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	3,860		15	0	355.0	257.35	7.61
	\$3,860		15	0	355.0	\$257.35	\$7.61
Waiver Services - BDS							
Case Management *	\$92,054		348	0	8,236.7	\$264.52	\$181.57
Respite Care Services *	5,477		1,568	0	37,112.4	3.49	10.80
Environmental Modifications Services *	20,350		1	0	23.7	20,350.00	40.14
Personal Care Services	2,333,103		7,553	0	178,769.2	308.90	4,601.78
Community Support Services	9,218		1,529	0	36,189.3	6.03	18.18
Consolidated Developmental Services	497,305		91	0	2,153.8	5,464.89	980.88
Specialty Services	61,504		1,215	0	28,757.4	50.62	121.31
Day Habilitation Services	422,932		79,624	0	1,884,591.7	5.31	834.19
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	25,915		3,897	0	92,236.7	6.65	51.11
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$3,467,858		95,826	0	2,268,071.0	\$36.19	\$6,839.96
Waiver Services - BEAS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Emergency Response System	0		0	0	0.0	0.00	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
Medicaid to School Program							
Clinic Services	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
All Medicaid Services	\$4,639,161	10	212,413	236.7	5,027,526.6	\$21.84	\$9,150.22
Medicare	\$0						\$0.00
Third Party Amount	\$57,241						\$112.90
All Services	\$4,696,401	10	212,413	236.7	5,027,526.6	\$22.11	\$9,263.12



APPENDIX D

In Home Supports Waiver Enrollees

Appendix D1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 In Home Supports Waiver Enrollees - Total Population

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver IHS
 Area All Dual Status All
 Population All Service Group All

Member Months: 3,634

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$97,035	9	38	29.7	125.5	\$2,553.56	\$26.70
Surgical	93,359	3	14	9.9	46.2	6,668.49	25.69
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	72,326	8	68	26.4	224.5	1,063.62	19.90
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$262,720	20	120	66.0	396.3	\$2,189.34	\$72.30
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$618	1	1	3.3	3.3	\$617.95	\$0.17
Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Skilled Nursing Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	150,558	3	394	9.9	1,301.0	382.13	41.43
	\$151,176	4	395	13.2	1,304.3	\$382.73	\$41.60
Hospital Outpatient							
Emergency Room	\$17,677		161	0	531.6	\$109.80	\$4.86
Surgery	47,631		790	0	2,608.7	60.29	13.11
Radiology	24,041		127	0	419.4	189.30	6.62
Pathology/Lab	15,244		1,906	0	6,293.9	8.00	4.19
Pharmacy	2,388		459	0	1,515.7	5.20	0.66
Cardiovascular	1,973		15	0	49.5	131.56	0.54
PT/OT/ST	25,861		1,069	0	3,530.0	24.19	7.12
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	0		0	0	0.0	0.00	0.00
Other	24,451		402	0	1,327.5	60.82	6.73
	\$159,267		4,929	0	16,276.3	\$32.31	\$43.83
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$1,107		3	0	9.9	\$369.00	\$0.30
Physician	73,546		2,014	0	6,650.5	36.52	20.24
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	0		0	0	0.0	0.00	0.00
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	3		1	0	3.3	3.05	0.00
Audiology	0		0	0	0.0	0.00	0.00
Psychology	15,903		260	0	858.6	61.16	4.38
Physical Therapy	6,564		315	0	1,040.2	20.84	1.81
Speech Therapy	4,403		204	0	673.6	21.58	1.21
Occupational Therapy	1,338		70	0	231.2	19.12	0.37
Podiatry	265		6	0	19.8	44.14	0.07
Laboratory	356		41	0	135.4	8.67	0.10
X-Ray	170		3	0	9.9	56.70	0.05
Methadone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	9,475		100	0	330.2	94.75	2.61
Home Health	117,739		17,435	0	57,572.9	6.75	32.40
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	561,986		332,607	0	1,098,317.0	1.69	154.65
Ambulance	8,670		605	0	1,997.8	14.33	2.39
Wheelchair Van	5,106		1,660	0	5,481.6	3.08	1.41
Optometry / Glasses	2,815		112	0	369.8	25.13	0.77
Private Duty Nursing	484,319		12,223	0	40,362.1	39.62	133.27
Personal Care	0		0	0	0.0	0.00	0.00
Adult Medical Day Care	0		0	0	0.0	0.00	0.00
Dental	42,818		901	0	2,975.2	47.52	11.78
Other	0		0	0	0.0	0.00	0.00
	\$1,336,582		368,560	0	1,217,039.1	\$3.63	\$367.80

Appendix D1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 In Home Supports Waiver Enrollees - Total Population

SFY	10/11	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	IHS
Area	All	Dual Status	All
Population	All	Service Group	All

Member Months: 3,634

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$154,503		6,040	0	19,945.0	\$25.58	\$42.52
Single Source Brand	381,925		1,785	0	5,894.3	213.96	105.10
Multi-Source Brand	91,796		608	0	2,007.7	150.98	25.26
Other	885		86	0	284.0	10.29	0.24
	\$629,109		8,519	0	28,131.0	\$73.85	\$173.12
Mental Health Center							
Case Management	\$95,631		251	0	828.8	\$381.00	\$26.32
Long Term Support Service	211,513		8,944	0	29,534.4	23.65	58.20
Partial Hospital	746		9	0	29.7	82.88	0.21
Psychotherapy	39,651		1,235	0	4,078.2	32.11	10.91
Evidence Based Practice	0		0	0	0.0	0.00	0.00
Medication Management	3,653		92	0	303.8	39.71	1.01
Emergency Service 24/7	0		0	0	0.0	0.00	0.00
APRTP	41		1	0	3.3	40.73	0.01
Other	7,718		94	0	310.4	82.10	2.12
	\$358,953		10,626	0	35,088.6	\$33.78	\$98.78
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	3,904		148	0	488.7	26.38	1.07
Intensive Home and Community Service	28,227		294	0	970.8	96.01	7.77
Child Health Support Service	1,056		108	0	356.6	9.78	0.29
Home Based Therapy	4,216		75	0	247.7	56.21	1.16
Placement Services	6,152		192	0	634.0	32.04	1.69
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$43,555		817	0	2,697.9	\$53.31	\$11.99
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	14,154		55	0	181.6	257.35	3.89
	\$14,154		55	0	181.6	\$257.35	\$3.89
Waiver Services - BDS							
Case Management *	\$3,088		12	0	39.6	\$257.35	\$0.85
Respite Care Services *	2,304		852	0	2,813.4	2.70	0.63
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Community Support Services	0		0	0	0.0	0.00	0.00
Consolidated Developmental Services	213,706		49	0	161.8	4,361.35	58.81
Specialty Services	73,718		6,204	0	20,486.5	11.88	20.29
Day Habilitation Services	0		0	0	0.0	0.00	0.00
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	42,248		1,203	0	3,972.5	35.12	11.63
In-Home Support Waiver Services	5,053,756		3,127	0	10,325.8	1,616.17	1,390.69
	\$5,388,821		11,447	0	37,799.7	\$470.76	\$1,482.89
Waiver Services - BEAS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Emergency Response System	0		0	0	0.0	0.00	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
Medicaid to School Program							
Clinic Services	4,828,991		2,061,359	0	6,806,909.2	2.34	1,328.84
	\$4,828,991		2,061,359	0	6,806,909.2	\$2.34	\$1,328.84
All Medicaid Services	\$13,173,328	24	2,466,827	79.3	8,145,823.9	\$5.34	\$3,625.02
Medicare	\$25,362						\$6.98
Third Party Amount	\$654,779						\$180.18
All Services	\$13,853,469	24	2,466,827	79.3	8,145,823.9	\$5.62	\$3,812.18

Appendix D2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 In Home Supports Waiver Enrollees - Full Duals

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver IHS
 Area All Dual Status Full Duals
 Population All Service Group All

Member Months: 12

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Surgical	0	0	0	0.0	0.0	0.00	0.00
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Skilled Nursing Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Hospital Outpatient							
Emergency Room	\$0		0	0	0.0	\$0.00	\$0.00
Surgery	0		0	0	0.0	0.00	0.00
Radiology	0		0	0	0.0	0.00	0.00
Pathology/Lab	0		0	0	0.0	0.00	0.00
Pharmacy	0		0	0	0.0	0.00	0.00
Cardiovascular	0		0	0	0.0	0.00	0.00
PT/OT/ST	0		0	0	0.0	0.00	0.00
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	0		0	0	0.0	0.00	0.00
Other	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$0		0	0	0.0	\$0.00	\$0.00
Physician	147		2	0	2,000.0	73.36	12.23
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	0		0	0	0.0	0.00	0.00
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	0		0	0	0.0	0.00	0.00
Audiology	0		0	0	0.0	0.00	0.00
Psychology	0		0	0	0.0	0.00	0.00
Physical Therapy	0		0	0	0.0	0.00	0.00
Speech Therapy	0		0	0	0.0	0.00	0.00
Occupational Therapy	0		0	0	0.0	0.00	0.00
Podiatry	0		0	0	0.0	0.00	0.00
Laboratory	0		0	0	0.0	0.00	0.00
X-Ray	12		1	0	1,000.0	12.00	1.00
Methodone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	0		0	0	0.0	0.00	0.00
Home Health	0		0	0	0.0	0.00	0.00
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	0		0	0	0.0	0.00	0.00
Ambulance	0		0	0	0.0	0.00	0.00
Wheelchair Van	0		0	0	0.0	0.00	0.00
Optometry / Glasses	0		0	0	0.0	0.00	0.00
Private Duty Nursing	0		0	0	0.0	0.00	0.00
Personal Care	0		0	0	0.0	0.00	0.00
Adult Medical Day Care	0		0	0	0.0	0.00	0.00
Dental	0		0	0	0.0	0.00	0.00
Other	0		0	0	0.0	0.00	0.00
	\$159		3	0	3,000.0	\$52.90	\$13.23

Appendix D2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 In Home Supports Waiver Enrollees - Full Duals

SFY	10/11	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	IHS
Area	All	Dual Status	Full Duals
Population	All	Service Group	All

Member Months: 12

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$107		4	0	4,000.0	\$26.67	\$8.89
Single Source Brand	831		2	0	2,000.0	415.43	69.24
Multi-Source Brand	0		0	0	0.0	0.00	0.00
Other	0		0	0	0.0	0.00	0.00
	\$938		6	0	6,000.0	\$156.25	\$78.13
Mental Health Center							
Case Management	\$0		0	0	0.0	\$0.00	\$0.00
Long Term Support Service	0		0	0	0.0	0.00	0.00
Partial Hospital	0		0	0	0.0	0.00	0.00
Psychotherapy	0		0	0	0.0	0.00	0.00
Evidence Based Practice	0		0	0	0.0	0.00	0.00
Medication Management	0		0	0	0.0	0.00	0.00
Emergency Service 24/7	0		0	0	0.0	0.00	0.00
APRTP	41		1	0	1,000.0	40.73	3.39
Other	0		0	0	0.0	0.00	0.00
	\$41		1	0	1,000.0	\$40.73	\$3.39
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
Waiver Services - BDS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Community Support Services	0		0	0	0.0	0.00	0.00
Consolidated Developmental Services	0		0	0	0.0	0.00	0.00
Specialty Services	0		0	0	0.0	0.00	0.00
Day Habilitation Services	0		0	0	0.0	0.00	0.00
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	11,451		13	0	13,000.0	880.85	954.26
	\$11,451		13	0	13,000.0	\$880.85	\$954.26
Waiver Services - BEAS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Emergency Response System	0		0	0	0.0	0.00	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
Medicaid to School Program							
Clinic Services	2,790		5,036	0	5,036,000.0	0.55	232.50
	\$2,790		5,036	0	5,036,000.0	\$0.55	\$232.50
All Medicaid Services	\$15,378	0	5,059	0.0	5,059,000.0	\$3.04	\$1,281.50
Medicare	\$25,362						\$2,113.50
Third Party Amount	\$0						\$0.00
All Services	\$40,740	0	5,059	0.0	5,059,000.0	\$8.05	\$3,395.00

Appendix D3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 In Home Supports Waiver Enrollees - Medicaid Only

SFY 10/11
 Age All
 Gender All
 Area All
 Population All

Rate Group All
 Behavioral Health Category All
 Waiver IHS
 Dual Status Non Duals
 Service Group All

Member Months: 3,622

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$97,035	9	38	29.8	125.9	\$2,553.56	\$26.79
Surgical	93,359	3	14	9.9	46.4	6,668.49	25.78
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	72,326	8	68	26.5	225.3	1,063.62	19.97
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$262,720	20	120	66.3	397.6	\$2,189.34	\$72.53
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$618	1	1	3.3	3.3	\$617.95	\$0.17
Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Skilled Nursing Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	150,558	3	394	9.9	1,305.4	382.13	41.57
	\$151,176	4	395	13.3	1,308.7	\$382.73	\$41.74
Hospital Outpatient							
Emergency Room	\$17,677		161	0	533.4	\$109.80	\$4.88
Surgery	47,631		790	0	2,617.3	60.29	13.15
Radiology	24,041		127	0	420.8	189.30	6.64
Pathology/Lab	15,244		1,906	0	6,314.7	8.00	4.21
Pharmacy	2,388		459	0	1,520.7	5.20	0.66
Cardiovascular	1,973		15	0	49.7	131.56	0.54
PT/OT/ST	25,861		1,069	0	3,541.7	24.19	7.14
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	0		0	0	0.0	0.00	0.00
Other	24,451		402	0	1,331.9	60.82	6.75
	\$159,267		4,929	0	16,330.2	\$32.31	\$43.97
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$1,107		3	0	9.9	\$369.00	\$0.31
Physician	73,399		2,012	0	6,665.9	36.48	20.26
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	0		0	0	0.0	0.00	0.00
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	3		1	0	3.3	3.05	0.00
Audiology	0		0	0	0.0	0.00	0.00
Psychology	15,903		260	0	861.4	61.16	4.39
Physical Therapy	6,564		315	0	1,043.6	20.84	1.81
Speech Therapy	4,403		204	0	675.9	21.58	1.22
Occupational Therapy	1,338		70	0	231.9	19.12	0.37
Podiatry	265		6	0	19.9	44.14	0.07
Laboratory	356		41	0	135.8	8.67	0.10
X-Ray	158		2	0	6.6	79.05	0.04
Methodone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	9,475		100	0	331.3	94.75	2.62
Home Health	117,739		17,435	0	57,763.7	6.75	32.51
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	561,986		332,607	0	1,101,955.8	1.69	155.16
Ambulance	8,670		605	0	2,004.4	14.33	2.39
Wheelchair Van	5,106		1,660	0	5,499.7	3.08	1.41
Optometry / Glasses	2,815		112	0	371.1	25.13	0.78
Private Duty Nursing	484,319		12,223	0	40,495.9	39.62	133.72
Personal Care	0		0	0	0.0	0.00	0.00
Adult Medical Day Care	0		0	0	0.0	0.00	0.00
Dental	42,818		901	0	2,985.1	47.52	11.82
Other	0		0	0	0.0	0.00	0.00
	\$1,336,423		368,557	0	1,221,061.3	\$3.63	\$368.97

Appendix D3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 In Home Supports Waiver Enrollees - Medicaid Only

SFY 10/11
 Age All
 Gender All
 Area All
 Population All

Rate Group All
 Behavioral Health Category All
 Waiver IHS
 Dual Status Non Duals
 Service Group All

Member Months: 3,622

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$154,396		6,036	0	19,997.8	\$25.58	\$42.63
Single Source Brand	381,094		1,783	0	5,907.2	213.74	105.22
Multi-Source Brand	91,796		608	0	2,014.4	150.98	25.34
Other	885		86	0	284.9	10.29	0.24
	\$628,171		8,513	0	28,204.3	\$73.79	\$173.43
Mental Health Center							
Case Management	\$95,631		251	0	831.6	\$381.00	\$26.40
Long Term Support Service	211,513		8,944	0	29,632.2	23.65	58.40
Partial Hospital	746		9	0	29.8	82.88	0.21
Psychotherapy	39,651		1,235	0	4,091.7	32.11	10.95
Evidence Based Practice	0		0	0	0.0	0.00	0.00
Medication Management	3,653		92	0	304.8	39.71	1.01
Emergency Service 24/7	0		0	0	0.0	0.00	0.00
APRTP	0		0	0	0.0	0.00	0.00
Other	7,718		94	0	311.4	82.10	2.13
	\$358,912		10,625	0	35,201.5	\$33.78	\$99.09
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	3,904		148	0	490.3	26.38	1.08
Intensive Home and Community Service	28,227		294	0	974.0	96.01	7.79
Child Health Support Service	1,056		108	0	357.8	9.78	0.29
Home Based Therapy	4,216		75	0	248.5	56.21	1.16
Placement Services	6,152		192	0	636.1	32.04	1.70
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$43,555		817	0	2,706.8	\$53.31	\$12.03
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	14,154		55	0	182.2	257.35	3.91
	\$14,154		55	0	182.2	\$257.35	\$3.91
Waiver Services - BDS							
Case Management *	\$3,088		12	0	39.8	\$257.35	\$0.85
Respite Care Services *	2,304		852	0	2,822.7	2.70	0.64
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Community Support Services	0		0	0	0.0	0.00	0.00
Consolidated Developmental Services	213,706		49	0	162.3	4,361.35	59.00
Specialty Services	73,718		6,204	0	20,554.4	11.88	20.35
Day Habilitation Services	0		0	0	0.0	0.00	0.00
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	42,248		1,203	0	3,985.6	35.12	11.66
In-Home Support Waiver Services	5,042,305		3,114	0	10,317.0	1,619.24	1,392.13
	\$5,377,370		11,434	0	37,881.8	\$470.30	\$1,484.64
Waiver Services - BEAS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Emergency Response System	0		0	0	0.0	0.00	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
Medicaid to School Program							
Clinic Services	4,826,201		2,056,323	0	6,812,776.4	2.35	1,332.47
	\$4,826,201		2,056,323	0	6,812,776.4	\$2.35	\$1,332.47
All Medicaid Services	\$13,157,950	24	2,461,768	79.5	8,156,050.8	\$5.34	\$3,632.79
Medicare	\$0						\$0.00
Third Party Amount	\$654,779						\$180.78
All Services	\$13,812,729	24	2,461,768	79.5	8,156,050.8	\$5.61	\$3,813.56

Appendix D4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 In Home Supports Waiver Enrollees - Total Population

SFY 11/12 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver IHS
 Area All Dual Status All
 Population All Service Group All

Member Months: 3,554

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$30,568	3	10	10.1	33.8	\$3,056.82	\$8.60
Surgical	96,071	5	62	16.9	209.3	1,549.54	27.03
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	68,130	6	85	20.3	287.0	801.53	19.17
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$194,769	14	157	47.3	530.1	\$1,240.57	\$54.80
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Skilled Nursing Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	170,147	9	452	30.4	1,526.2	376.43	47.87
	\$170,147	9	452	30.4	1,526.2	\$376.43	\$47.87
Hospital Outpatient							
Emergency Room	\$16,408		126	0	425.4	\$130.22	\$4.62
Surgery	42,359		362	0	1,222.3	117.01	11.92
Radiology	24,201		131	0	442.3	184.74	6.81
Pathology/Lab	12,002		1,493	0	5,041.1	8.04	3.38
Pharmacy	9,524		508	0	1,715.3	18.75	2.68
Cardiovascular	2,817		26	0	87.8	108.34	0.79
PT/OT/ST	35,323		976	0	3,295.4	36.19	9.94
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	0		0	0	0.0	0.00	0.00
Other	39,229		311	0	1,050.1	126.14	11.04
	\$181,862		3,933	0	13,279.7	\$46.24	\$51.17
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$2,151		6	0	20.3	\$358.50	\$0.61
Physician	84,071		2,474	0	8,353.4	33.98	23.66
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	0		0	0	0.0	0.00	0.00
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	12		2	0	6.8	6.06	0.00
Audiology	56		3	0	10.1	18.67	0.02
Psychology	17,254		312	0	1,053.5	55.30	4.85
Physical Therapy	7,240		359	0	1,212.2	20.17	2.04
Speech Therapy	4,468		212	0	715.8	21.08	1.26
Occupational Therapy	1,840		90	0	303.9	20.45	0.52
Podiatry	111		4	0	13.5	27.70	0.03
Laboratory	628		86	0	290.4	7.30	0.18
X-Ray	329		4	0	13.5	82.13	0.09
Methodone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	4,881		47	0	158.7	103.85	1.37
Home Health	72,255		11,505	0	38,846.4	6.28	20.33
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	579,687		311,884	0	1,053,069.2	1.86	163.11
Ambulance	3,432		265	0	894.8	12.95	0.97
Wheelchair Van	1,875		439	0	1,482.3	4.27	0.53
Optometry / Glasses	3,101		229	0	773.2	13.54	0.87
Private Duty Nursing	308,104		7,638	0	25,789.5	40.34	86.69
Personal Care	0		0	0	0.0	0.00	0.00
Adult Medical Day Care	0		0	0	0.0	0.00	0.00
Dental	36,477		806	0	2,721.4	45.26	10.26
Other	0		0	0	0.0	0.00	0.00
	\$1,127,970		336,365	0	1,135,728.8	\$3.35	\$317.38

Appendix D4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 In Home Supports Waiver Enrollees - Total Population

SFY 11/12 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver IHS
 Area All Dual Status All
 Population All Service Group All

Member Months: 3,554

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$147,663		6,025	0	20,343.3	\$24.51	\$41.55
Single Source Brand	383,971		1,673	0	5,648.8	229.51	108.04
Multi-Source Brand	96,037		515	0	1,738.9	186.48	27.02
Other	8,559		193	0	651.7	44.35	2.41
	\$636,230		8,406	0	28,382.7	\$75.69	\$179.02
Mental Health Center							
Case Management	\$101,712		284	0	958.9	\$358.14	\$28.62
Long Term Support Service	154,203		6,541	0	22,085.5	23.57	43.39
Partial Hospital	0		0	0	0.0	0.00	0.00
Psychotherapy	31,316		869	0	2,934.2	36.04	8.81
Evidence Based Practice	0		0	0	0.0	0.00	0.00
Medication Management	3,408		78	0	263.4	43.69	0.96
Emergency Service 24/7	282		12	0	40.5	23.46	0.08
APRTP	173		4	0	13.5	43.30	0.05
Other	8,853		110	0	371.4	80.49	2.49
	\$299,947		7,898	0	26,667.4	\$37.98	\$84.40
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	36,468		328	0	1,107.5	111.18	10.26
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	2,136		38	0	128.3	56.21	0.60
Placement Services	9,882		342	0	1,154.8	28.90	2.78
Private Non-Medical Institution for Children	15,142		98	0	330.9	154.51	4.26
	\$63,628		806	0	2,721.4	\$78.94	\$17.90
State Plan Services - BDS							
Partners in Health	1,987		6	0	20.3	331.17	0.56
Early Intervention	690		3	0	10.1	230.00	0.19
Targeted Case Management	9,265		36	0	121.6	257.35	2.61
	\$11,942		45	0	151.9	\$265.37	\$3.36
Waiver Services - BDS							
Case Management *	\$257		1	0	3.4	\$257.35	\$0.07
Respite Care Services *	61		24	0	81.0	2.55	0.02
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Community Support Services	0		0	0	0.0	0.00	0.00
Consolidated Developmental Services	105,724		27	0	91.2	3,915.71	29.75
Specialty Services	71,095		6,936	0	23,419.2	10.25	20.00
Day Habilitation Services	0		0	0	0.0	0.00	0.00
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	30,880		878	0	2,964.5	35.17	8.69
In-Home Support Waiver Services	4,659,635		2,992	0	10,102.4	1,557.36	1,311.10
	\$4,867,653		10,858	0	36,661.8	\$448.30	\$1,369.63
Waiver Services - BEAS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Emergency Response System	0		0	0	0.0	0.00	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
Medicaid to School Program							
Clinic Services	4,561,670		1,641,525	0	5,542,571.8	2.78	1,283.53
	\$4,561,670		1,641,525	0	5,542,571.8	\$2.78	\$1,283.53
All Medicaid Services	\$12,115,817	23	2,010,445	77.7	6,788,221.7	\$6.03	\$3,409.06
Medicare	\$25,362						\$7.14
Third Party Amount	\$627,213						\$176.48
All Services	\$12,768,392	23	2,010,445	77.7	6,788,221.7	\$6.35	\$3,592.68

Appendix D5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 In Home Supports Waiver Enrollees - Full Duals

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	IHS
Area	All	Dual Status	Full Duals
Population	All	Service Group	All

Member Months: 12

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Surgical	0	0	0	0.0	0.0	0.00	0.00
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	0	0	0	0.0	0.0	0.00	0.00
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Skilled Nursing Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Hospital Outpatient							
Emergency Room	\$0	0	0	0	0.0	\$0.00	\$0.00
Surgery	0	0	0	0	0.0	0.00	0.00
Radiology	0	0	0	0	0.0	0.00	0.00
Pathology/Lab	0	0	0	0	0.0	0.00	0.00
Pharmacy	0	0	0	0	0.0	0.00	0.00
Cardiovascular	0	0	0	0	0.0	0.00	0.00
PT/OT/ST	0	0	0	0	0.0	0.00	0.00
Psychiatric	0	0	0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0	0	0	0	0.0	0.00	0.00
Crossover	0	0	0	0	0.0	0.00	0.00
Other	0	0	0	0	0.0	0.00	0.00
	\$0	0	0	0	0.0	\$0.00	\$0.00
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$0	0	0	0	0.0	\$0.00	\$0.00
Physician	128	3	0	0	3,000.0	42.72	10.68
Chiropractor	0	0	0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	0	0	0	0	0.0	0.00	0.00
Certified Midwife	0	0	0	0	0.0	0.00	0.00
Family Planning	0	0	0	0	0.0	0.00	0.00
Audiology	0	0	0	0	0.0	0.00	0.00
Psychology	0	0	0	0	0.0	0.00	0.00
Physical Therapy	0	0	0	0	0.0	0.00	0.00
Speech Therapy	0	0	0	0	0.0	0.00	0.00
Occupational Therapy	0	0	0	0	0.0	0.00	0.00
Podiatry	0	0	0	0	0.0	0.00	0.00
Laboratory	0	0	0	0	0.0	0.00	0.00
X-Ray	0	0	0	0	0.0	0.00	0.00
Methodone Treatment Clinic	0	0	0	0	0.0	0.00	0.00
Medical Services Clinic	0	0	0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	0	0	0	0	0.0	0.00	0.00
Home Health	0	0	0	0	0.0	0.00	0.00
Hospice	0	0	0	0	0.0	0.00	0.00
Durable Medical Equipment	13	1	0	0	1,000.0	13.22	1.10
Ambulance	0	0	0	0	0.0	0.00	0.00
Wheelchair Van	0	0	0	0	0.0	0.00	0.00
Optometry / Glasses	0	0	0	0	0.0	0.00	0.00
Private Duty Nursing	0	0	0	0	0.0	0.00	0.00
Personal Care	0	0	0	0	0.0	0.00	0.00
Adult Medical Day Care	0	0	0	0	0.0	0.00	0.00
Dental	0	0	0	0	0.0	0.00	0.00
Other	0	0	0	0	0.0	0.00	0.00
	\$141		4	0	4,000.0	\$35.35	\$11.78

Appendix D5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 In Home Supports Waiver Enrollees - Full Duals

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	IHS
Area	All	Dual Status	Full Duals
Population	All	Service Group	All

Member Months: 12

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$21		3	0	3,000.0	\$7.16	\$1.79
Single Source Brand	0		0	0	0.0	0.00	0.00
Multi-Source Brand	0		0	0	0.0	0.00	0.00
Other	0		0	0	0.0	0.00	0.00
	\$21		3	0	3,000.0	\$7.16	\$1.79
Mental Health Center							
Case Management	\$1,433		4	0	4,000.0	\$358.14	\$119.38
Long Term Support Service	84		1	0	1,000.0	83.91	6.99
Partial Hospital	0		0	0	0.0	0.00	0.00
Psychotherapy	506		12	0	12,000.0	42.18	42.18
Evidence Based Practice	0		0	0	0.0	0.00	0.00
Medication Management	0		0	0	0.0	0.00	0.00
Emergency Service 24/7	0		0	0	0.0	0.00	0.00
APRTP	173		4	0	4,000.0	43.30	14.43
Other	0		0	0	0.0	0.00	0.00
	\$2,196		21	0	21,000.0	\$104.56	\$182.98
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
Waiver Services - BDS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Community Support Services	0		0	0	0.0	0.00	0.00
Consolidated Developmental Services	0		0	0	0.0	0.00	0.00
Specialty Services	0		0	0	0.0	0.00	0.00
Day Habilitation Services	0		0	0	0.0	0.00	0.00
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	27,714		12	0	12,000.0	2,309.51	2,309.51
	\$27,714		12	0	12,000.0	\$2,309.51	\$2,309.51
Waiver Services - BEAS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Emergency Response System	0		0	0	0.0	0.00	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
Medicaid to School Program							
Clinic Services	13,536		7,128	0	7,128,000.0	1.90	1,128.00
	\$13,536		7,128	0	7,128,000.0	\$1.90	\$1,128.00
All Medicaid Services	\$43,609	0	7,168	0.0	7,168,000.0	\$6.08	\$3,634.06
Medicare	\$25,362						\$2,113.50
Third Party Amount	\$0						\$0.00
All Services	\$68,971	0	7,168	0.0	7,168,000.0	\$9.62	\$5,747.56

Appendix D6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 In Home Supports Waiver Enrollees - Medicaid Only

SFY 11/12
 Age All
 Gender All
 Area All
 Population All

Rate Group All
 Behavioral Health Category All
 Waiver IHS
 Dual Status Non Duals
 Service Group All

Member Months: 3,542

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$30,568	3	10	10.2	33.9	\$3,056.82	\$8.63
Surgical	96,071	5	62	16.9	210.1	1,549.54	27.12
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	68,130	6	85	20.3	288.0	801.53	19.23
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	0	0	0	0.0	0.0	0.00	0.00
Other	0	0	0	0.0	0.0	0.00	0.00
	\$194,769	14	157	47.4	531.9	\$1,240.57	\$54.99
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$0	0	0	0.0	0.0	\$0.00	\$0.00
Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Skilled Nursing Facility	0	0	0	0.0	0.0	0.00	0.00
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	170,147	9	452	30.5	1,531.3	376.43	48.04
	\$170,147	9	452	30.5	1,531.3	\$376.43	\$48.04
Hospital Outpatient							
Emergency Room	\$16,408		126	0	426.9	\$130.22	\$4.63
Surgery	42,359		362	0	1,226.4	117.01	11.96
Radiology	24,201		131	0	443.8	184.74	6.83
Pathology/Lab	12,002		1,493	0	5,058.2	8.04	3.39
Pharmacy	9,524		508	0	1,721.1	18.75	2.69
Cardiovascular	2,817		26	0	88.1	108.34	0.80
PT/OT/ST	35,323		976	0	3,306.6	36.19	9.97
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	0		0	0	0.0	0.00	0.00
Other	39,229		311	0	1,053.6	126.14	11.08
	\$181,862		3,933	0	13,324.7	\$46.24	\$51.34
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$2,151		6	0	20.3	\$358.50	\$0.61
Physician	83,943		2,471	0	8,371.5	33.97	23.70
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	0		0	0	0.0	0.00	0.00
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	12		2	0	6.8	6.06	0.00
Audiology	56		3	0	10.2	18.67	0.02
Psychology	17,254		312	0	1,057.0	55.30	4.87
Physical Therapy	7,240		359	0	1,216.3	20.17	2.04
Speech Therapy	4,468		212	0	718.2	21.08	1.26
Occupational Therapy	1,840		90	0	304.9	20.45	0.52
Podiatry	111		4	0	13.6	27.70	0.03
Laboratory	628		86	0	291.4	7.30	0.18
X-Ray	329		4	0	13.6	82.13	0.09
Methodone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	4,881		47	0	159.2	103.85	1.38
Home Health	72,255		11,505	0	38,978.0	6.28	20.40
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	579,674		311,883	0	1,056,633.5	1.86	163.66
Ambulance	3,432		265	0	897.8	12.95	0.97
Wheelchair Van	1,875		439	0	1,487.3	4.27	0.53
Optometry / Glasses	3,101		229	0	775.8	13.54	0.88
Private Duty Nursing	308,104		7,638	0	25,876.9	40.34	86.99
Personal Care	0		0	0	0.0	0.00	0.00
Adult Medical Day Care	0		0	0	0.0	0.00	0.00
Dental	36,477		806	0	2,730.7	45.26	10.30
Other	0		0	0	0.0	0.00	0.00
	\$1,127,829		336,361	0	1,139,563.0	\$3.35	\$318.42

Appendix D6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 In Home Supports Waiver Enrollees - Medicaid Only

SFY 11/12
 Age All
 Gender All
 Area All
 Population All

Rate Group All
 Behavioral Health Category All
 Waiver IHS
 Dual Status Non Duals
 Service Group All

Member Months: 3,542

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$147,642		6,022	0	20,402.0	\$24.52	\$41.68
Single Source Brand	383,971		1,673	0	5,668.0	229.51	108.41
Multi-Source Brand	96,037		515	0	1,744.8	186.48	27.11
Other	8,559		193	0	653.9	44.35	2.42
	\$636,208		8,403	0	28,468.7	\$75.71	\$179.62
Mental Health Center							
Case Management	\$100,279		280	0	948.6	\$358.14	\$28.31
Long Term Support Service	154,119		6,540	0	22,157.0	23.57	43.51
Partial Hospital	0		0	0	0.0	0.00	0.00
Psychotherapy	30,810		857	0	2,903.4	35.95	8.70
Evidence Based Practice	0		0	0	0.0	0.00	0.00
Medication Management	3,408		78	0	264.3	43.69	0.96
Emergency Service 24/7	282		12	0	40.7	23.46	0.08
APRTP	0		0	0	0.0	0.00	0.00
Other	8,853		110	0	372.7	80.49	2.50
	\$297,751		7,877	0	26,686.6	\$37.80	\$84.06
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	36,468		328	0	1,111.2	111.18	10.30
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	2,136		38	0	128.7	56.21	0.60
Placement Services	9,882		342	0	1,158.7	28.90	2.79
Private Non-Medical Institution for Children	15,142		98	0	332.0	154.51	4.27
	\$63,628		806	0	2,730.7	\$78.94	\$17.96
State Plan Services - BDS							
Partners in Health	1,987		6	0	20.3	331.17	0.56
Early Intervention	690		3	0	10.2	230.00	0.19
Targeted Case Management	9,265		36	0	122.0	257.35	2.62
	\$11,942		45	0	152.5	\$265.37	\$3.37
Waiver Services - BDS							
Case Management *	\$257		1	0	3.4	\$257.35	\$0.07
Respite Care Services *	61		24	0	81.3	2.55	0.02
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Community Support Services	0		0	0	0.0	0.00	0.00
Consolidated Developmental Services	105,724		27	0	91.5	3,915.71	29.85
Specialty Services	71,095		6,936	0	23,498.6	10.25	20.07
Day Habilitation Services	0		0	0	0.0	0.00	0.00
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	30,880		878	0	2,974.6	35.17	8.72
In-Home Support Waiver Services	4,631,921		2,980	0	10,096.0	1,554.34	1,307.71
	\$4,839,939		10,846	0	36,745.3	\$446.24	\$1,366.44
Waiver Services - BEAS							
Case Management *	\$0		0	0	0.0	\$0.00	\$0.00
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	0		0	0	0.0	0.00	0.00
Personal Care Services	0		0	0	0.0	0.00	0.00
Emergency Response System	0		0	0	0.0	0.00	0.00
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	0		0	0	0.0	0.00	0.00
Skilled Nursing	0		0	0	0.0	0.00	0.00
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	0		0	0	0.0	0.00	0.00
Medical Equipment and Delivery of Goods	0		0	0	0.0	0.00	0.00
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
Medicaid to School Program							
Clinic Services	4,548,134		1,634,397	0	5,537,200.5	2.78	1,284.06
	\$4,548,134		1,634,397	0	5,537,200.5	\$2.78	\$1,284.06
All Medicaid Services	\$12,072,208	23	2,003,277	77.9	6,786,935.1	\$6.03	\$3,408.30
Medicare	\$0						\$0.00
Third Party Amount	\$627,213						\$177.08
All Services	\$12,699,421	23	2,003,277	77.9	6,786,935.1	\$6.34	\$3,585.38



APPENDIX E
Nursing Home Residents

Appendix E1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Nursing Home Residents - Total Population

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver All
 Area All Dual Status All
 Population NH Service Group All

Member Months: 53,734

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$692,723	175	1,050	39.1	234.5	\$659.74	\$12.89
Surgical	394,678	53	329	11.8	73.5	1,199.63	7.35
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	51,016	10	190	2.2	42.4	268.50	0.95
Alcohol and Drug Abuse	3,127	2	12	0.4	2.7	260.62	0.06
Crossover	946,838	799	4,252	178.4	949.6	222.68	17.62
Other	0	0	0	0.0	0.0	0.00	0.00
	\$2,088,383	1,039	5,833	232.0	1,302.6	\$358.03	\$38.87
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$7,546,284	999	85,188	223.1	19,024.4	\$88.58	\$140.44
Intermediate Care Facility	170,351,900	1,145	1,463,465	255.7	326,824.4	116.40	3,170.28
Swing Beds - Skilled Nursing Facility	91,779	88	892	19.7	199.2	102.89	1.71
Swing Beds - Intermediate Care Facility	30,843	14	289	3.1	64.5	106.72	0.57
Skilled Nursing Facility Atypical Care	6,636,662	23	13,451	5.1	3,003.9	493.40	123.51
Intermediate Care Facility Atypical Care	2,638,045	28	14,356	6.3	3,206.0	183.76	49.09
Intermediate Care Facility for Mental Retardation	3,007,045	35	7,571	7.8	1,690.8	397.18	55.96
	\$190,302,558	2,332	1,585,212	520.8	354,013.2	\$120.05	\$3,541.57
Hospital Outpatient							
Emergency Room	\$64,844		514	0	114.8	\$126.15	\$1.21
Surgery	129,870		2,787	0	622.4	46.60	2.42
Radiology	283,735		2,162	0	482.8	131.24	5.28
Pathology/Lab	151,405		9,441	0	2,108.4	16.04	2.82
Pharmacy	655,916		38,537	0	8,606.2	17.02	12.21
Cardiovascular	25,630		398	0	88.9	64.40	0.48
PT/OT/ST	64,672		1,238	0	276.5	52.24	1.20
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	166,154		3,990	0	891.1	41.64	3.09
Other	148,048		4,501	0	1,005.2	32.89	2.76
	\$1,690,274		63,568	0	14,196.2	\$26.59	\$31.46
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$1,292		13	0	2.9	\$99.38	\$0.02
Physician	1,041,044		79,637	0	17,784.7	13.07	19.37
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	5,628		198	0	44.2	28.42	0.10
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	13		1	0	0.2	12.77	0.00
Audiology	1,391		94	0	21.0	14.80	0.03
Psychology	14,461		559	0	124.8	25.87	0.27
Physical Therapy	1,658		76	0	17.0	21.81	0.03
Speech Therapy	353		19	0	4.2	18.56	0.01
Occupational Therapy	209		10	0	2.2	20.90	0.00
Podiatry	22,131		1,058	0	236.3	20.92	0.41
Laboratory	11,545		1,775	0	396.4	6.50	0.21
X-Ray	15,169		1,069	0	238.7	14.19	0.28
Methadone Treatment Clinic	378		37	0	8.3	10.22	0.01
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	153,237		4,422	0	987.5	34.65	2.85
Home Health	98,128		9,239	0	2,063.3	10.62	1.83
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	491,372		142,331	0	31,785.7	3.45	9.14
Ambulance	283,703		25,798	0	5,761.3	11.00	5.28
Wheelchair Van	969,740		164,358	0	36,704.8	5.90	18.05
Optometry / Glasses	40,108		1,885	0	421.0	21.28	0.75
Private Duty Nursing	84,038		2,329	0	520.1	36.08	1.56
Personal Care	20,214		4,639	0	1,036.0	4.36	0.38
Adult Medical Day Care	2,883		134	0	29.9	21.52	0.05
Dental	9,353		122	0	27.2	76.66	0.17
Other	0		0	0	0.0	0.00	0.00
	\$3,268,045		439,803	0	98,217.8	\$7.43	\$60.82

Appendix E1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Nursing Home Residents - Total Population

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver All
 Area All Dual Status All
 Population NH Service Group All

Member Months: 53,734

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$614,571		70,531	0	15,751.1	\$8.71	\$11.44
Single Source Brand	893,445		4,797	0	1,071.3	186.25	16.63
Multi-Source Brand	360,731		1,418	0	316.7	254.39	6.71
Other	147,667		35,250	0	7,872.1	4.19	2.75
	\$2,016,414		111,996	0	25,011.2	\$18.00	\$37.53
Mental Health Center							
Case Management	\$52,817		146	0	32.6	\$361.76	\$0.98
Long Term Support Service	48,701		1,733	0	387.0	28.10	0.91
Partial Hospital	200		2	0	0.4	99.90	0.00
Psychotherapy	4,478		87	0	19.4	51.47	0.08
Evidence Based Practice	1,138		105	0	23.4	10.84	0.02
Medication Management	4,656		98	0	21.9	47.51	0.09
Emergency Service 24/7	2,889		123	0	27.5	23.49	0.05
APRTP	24,545		2,162	0	482.8	11.35	0.46
Other	2,044		25	0	5.6	81.74	0.04
	\$141,468		4,481	0	1,000.7	\$31.57	\$2.63
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	2,976		20	0	4.5	148.80	0.06
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$2,976		20	0	4.5	\$148.80	\$0.06
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	34,485		134	0	29.9	257.35	0.64
	\$34,485		134	0	29.9	\$257.35	\$0.64
Waiver Services - BDS							
Case Management *	\$17,403		70	0	15.6	\$248.62	\$0.32
Respite Care Services *	3,571		976	0	218.0	3.66	0.07
Environmental Modifications Services *	55,843		9	0	2.0	6,204.80	1.04
Personal Care Services	69,165		250	0	55.8	276.66	1.29
Community Support Services	6,076		988	0	220.6	6.15	0.11
Consolidated Developmental Services	21,952		4	0	0.9	5,487.91	0.41
Specialty Services	21,237		4,271	0	953.8	4.97	0.40
Day Habilitation Services	17,847		3,213	0	717.5	5.55	0.33
Supported Employment Services	1,560		240	0	53.6	6.50	0.03
Crisis Response Services	1,237		186	0	41.5	6.65	0.02
Assistive Technology Support Services	2,987		84	0	18.8	35.56	0.06
In-Home Support Waiver Services	4,036		3	0	0.7	1,345.22	0.08
	\$222,913		10,294	0	2,298.9	\$21.65	\$4.15
Waiver Services - BEAS							
Case Management *	\$97,115		11,300	0	2,523.5	\$8.59	\$1.81
Respite Care Services *	7,214		4,320	0	964.8	1.67	0.13
Environmental Modifications Services *	15,424		1	0	0.2	15,424.00	0.29
Homemaker and Other In-Home Services	24,523		4,849	0	1,082.9	5.06	0.46
Personal Care Services	134,312		30,678	0	6,851.1	4.38	2.50
Emergency Response System	14,845		452	0	100.9	32.84	0.28
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	8,321		169	0	37.7	49.24	0.15
Home Health Aide	27,964		3,921	0	875.6	7.13	0.52
Skilled Nursing	22,494		302	0	67.4	74.48	0.42
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	14,598		371	0	82.9	39.35	0.27
Residential Care	66,262		1,324	0	295.7	50.05	1.23
Medical Equipment and Delivery of Goods	34,775		59	0	13.2	589.41	0.65
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$467,847		57,746	0	12,896.0	\$8.10	\$8.71
Medicaid to School Program							
Clinic Services	531,906		90,025	0	20,104.6	5.91	9.90
	\$531,906		90,025	0	20,104.6	\$5.91	\$9.90
All Medicaid Services	\$200,767,270	3,371	2,369,112	752.8	529,075.5	\$84.74	\$3,736.32
Medicare	\$92,463,911						\$1,720.77
Third Party Amount	\$873,613						\$16.26
All Services	\$294,104,794	3,371	2,369,112	752.8	529,075.5	\$124.14	\$5,473.35

Appendix E2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Nursing Home Residents - Full Duals

SFY 10/11
 Age All
 Gender All
 Area All
 Population NH

Rate Group All
 Behavioral Health Category All
 Waiver All
 Dual Status Full Duals
 Service Group All

Member Months: 51,094

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$19,938	8	41	1.9	9.6	\$486.30	\$0.39
Surgical	3,989	1	2	0.2	0.5	1,994.27	0.08
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	30,245	3	61	0.7	14.3	495.81	0.59
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	943,506	796	4,246	186.9	997.2	222.21	18.47
Other	0	0	0	0.0	0.0	0.00	0.00
	\$997,678	808	4,350	189.8	1,021.6	\$229.35	\$19.53
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$6,261,001	915	80,793	214.9	18,975.1	\$77.49	\$122.54
Intermediate Care Facility	163,439,940	1,072	1,417,883	251.8	333,005.8	115.27	3,198.81
Swing Beds - Skilled Nursing Facility	27,055	24	272	5.6	63.9	99.47	0.53
Swing Beds - Intermediate Care Facility	12,598	8	122	1.9	28.7	103.26	0.25
Skilled Nursing Facility Atypical Care	1,125,085	3	2,408	0.7	565.5	467.23	22.02
Intermediate Care Facility Atypical Care	2,402,676	23	13,225	5.4	3,106.0	181.68	47.02
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$173,268,356	2,045	1,514,703	480.3	355,745.0	\$114.39	\$3,391.17
Hospital Outpatient							
Emergency Room	\$15,753		170	0	39.9	\$92.66	\$0.31
Surgery	26,746		523	0	122.8	51.14	0.52
Radiology	149,422		1,517	0	356.3	98.50	2.92
Pathology/Lab	94,592		2,066	0	485.2	45.78	1.85
Pharmacy	530,153		20,448	0	4,802.4	25.93	10.38
Cardiovascular	16,752		287	0	67.4	58.37	0.33
PT/OT/ST	31,538		341	0	80.1	92.49	0.62
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	164,726		3,973	0	933.1	41.46	3.22
Other	43,477		1,217	0	285.8	35.73	0.85
	\$1,073,158		30,542	0	7,173.1	\$35.14	\$21.00
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$446		11	0	2.6	\$40.54	\$0.01
Physician	511,947		32,831	0	7,710.7	15.59	10.02
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	1,627		61	0	14.3	26.67	0.03
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	0		0	0	0.0	0.00	0.00
Audiology	1,273		87	0	20.4	14.63	0.02
Psychology	8,590		470	0	110.4	18.28	0.17
Physical Therapy	0		0	0	0.0	0.00	0.00
Speech Therapy	0		0	0	0.0	0.00	0.00
Occupational Therapy	0		0	0	0.0	0.00	0.00
Podiatry	16,109		815	0	191.4	19.77	0.32
Laboratory	2,948		398	0	93.5	7.41	0.06
X-Ray	6,436		669	0	157.1	9.62	0.13
Methadone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	119,267		4,119	0	967.4	28.96	2.33
Home Health	2,987		57	0	13.4	52.40	0.06
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	293,419		81,164	0	19,062.3	3.62	5.74
Ambulance	154,529		12,560	0	2,949.9	12.30	3.02
Wheelchair Van	907,707		152,606	0	35,841.2	5.95	17.77
Optometry / Glasses	35,962		1,741	0	408.9	20.66	0.70
Private Duty Nursing	0		0	0	0.0	0.00	0.00
Personal Care	14,415		3,315	0	778.6	4.35	0.28
Adult Medical Day Care	2,642		126	0	29.6	20.97	0.05
Dental	7,226		76	0	17.8	95.08	0.14
Other	0		0	0	0.0	0.00	0.00
	\$2,087,531		291,106	0	68,369.5	\$7.17	\$40.86

Appendix E2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Nursing Home Residents - Full Duals

SFY	10/11	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	All
Area	All	Dual Status	Full Duals
Population	NH	Service Group	All

Member Months: 51,094

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$191,912		48,333	0	11,351.5	\$3.97	\$3.76
Single Source Brand	54,704		521	0	122.4	105.00	1.07
Multi-Source Brand	6,437		133	0	31.2	48.40	0.13
Other	96,209		33,725	0	7,920.7	2.85	1.88
	\$349,263		82,712	0	19,425.8	\$4.22	\$6.84
Mental Health Center							
Case Management	\$46,165		128	0	30.1	\$360.67	\$0.90
Long Term Support Service	42,467		1,488	0	349.5	28.54	0.83
Partial Hospital	200		2	0	0.5	99.90	0.00
Psychotherapy	2,503		41	0	9.6	61.04	0.05
Evidence Based Practice	985		94	0	22.1	10.48	0.02
Medication Management	1,736		43	0	10.1	40.38	0.03
Emergency Service 24/7	1,364		58	0	13.6	23.52	0.03
APRTP	24,469		2,156	0	506.4	11.35	0.48
Other	852		12	0	2.8	70.96	0.02
	\$120,740		4,022	0	944.6	\$30.02	\$2.36
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	8,493		33	0	7.8	257.35	0.17
	\$8,493		33	0	7.8	\$257.35	\$0.17
Waiver Services - BDS							
Case Management *	\$10,455		43	0	10.1	\$243.14	\$0.20
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	5,215		2	0	0.5	2,607.60	0.10
Personal Care Services	46,227		163	0	38.3	283.60	0.90
Community Support Services	1,697		276	0	64.8	6.15	0.03
Consolidated Developmental Services	12,907		3	0	0.7	4,302.33	0.25
Specialty Services	1,112		69	0	16.2	16.12	0.02
Day Habilitation Services	12,135		2,265	0	532.0	5.36	0.24
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	1,237		186	0	43.7	6.65	0.02
Assistive Technology Support Services	356		10	0	2.3	35.56	0.01
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$91,342		3,017	0	708.6	\$30.28	\$1.79
Waiver Services - BEAS							
Case Management *	\$87,717		10,197	0	2,394.9	\$8.60	\$1.72
Respite Care Services *	6,573		3,936	0	924.4	1.67	0.13
Environmental Modifications Services *	15,424		1	0	0.2	15,424.00	0.30
Homemaker and Other In-Home Services	20,463		4,079	0	958.0	5.02	0.40
Personal Care Services	112,868		25,774	0	6,053.3	4.38	2.21
Emergency Response System	13,635		415	0	97.5	32.85	0.27
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	7,287		148	0	34.8	49.24	0.14
Home Health Aide	23,734		3,332	0	782.6	7.12	0.46
Skilled Nursing	15,372		175	0	41.1	87.84	0.30
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	14,598		371	0	87.1	39.35	0.29
Residential Care	59,703		1,195	0	280.7	49.96	1.17
Medical Equipment and Delivery of Goods	29,886		51	0	12.0	586.00	0.58
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$407,260		49,674	0	11,666.5	\$8.20	\$7.97
Medicaid to School Program							
Clinic Services	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
All Medicaid Services	\$178,403,821	2,853	1,980,159	670.1	465,062.6	\$90.10	\$3,491.68
Medicare	\$92,463,911						\$1,809.68
Third Party Amount	\$567,084						\$11.10
All Services	\$271,434,817	2,853	1,980,159	670.1	465,062.6	\$137.08	\$5,312.46

Appendix E3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Nursing Home Residents - Medicaid Only

SFY 10/11 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver All
 Area All Dual Status Non Duals
 Population NH Service Group All

Member Months: 2,640

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$672,785	167	1,009	759.1	4,586.4	\$666.78	\$254.84
Surgical	390,689	52	327	236.4	1,486.4	1,194.77	147.99
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	20,771	7	129	31.8	586.4	161.02	7.87
Alcohol and Drug Abuse	3,127	2	12	9.1	54.5	260.62	1.18
Crossover	3,332	3	6	13.6	27.3	555.33	1.26
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,090,705	231	1,483	1,050.0	6,740.9	\$735.47	\$413.15
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$1,285,283	84	4,395	381.8	19,977.3	\$292.44	\$486.85
Intermediate Care Facility	6,911,960	73	45,582	331.8	207,190.9	151.64	2,618.17
Swing Beds - Skilled Nursing Facility	64,723	64	620	290.9	2,818.2	104.39	24.52
Swing Beds - Intermediate Care Facility	18,245	6	167	27.3	759.1	109.25	6.91
Skilled Nursing Facility Atypical Care	5,511,577	20	11,043	90.9	50,195.5	499.10	2,087.72
Intermediate Care Facility Atypical Care	235,369	5	1,131	22.7	5,140.9	208.11	89.16
Intermediate Care Facility for Mental Retardation	3,007,045	35	7,571	159.1	34,413.6	397.18	1,139.03
	\$17,034,202	287	70,509	1,304.5	320,495.5	\$241.59	\$6,452.35
Hospital Outpatient							
Emergency Room	\$49,091		344	0	1,563.6	\$142.71	\$18.60
Surgery	103,124		2,264	0	10,290.9	45.55	39.06
Radiology	134,312		645	0	2,931.8	208.24	50.88
Pathology/Lab	56,814		7,375	0	33,522.7	7.70	21.52
Pharmacy	125,763		18,089	0	82,222.7	6.95	47.64
Cardiovascular	8,877		111	0	504.5	79.97	3.36
PT/OT/ST	33,134		897	0	4,077.3	36.94	12.55
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	1,428		17	0	77.3	84.02	0.54
Other	104,571		3,284	0	14,927.3	31.84	39.61
	\$617,115		33,026	0	150,118.2	\$18.69	\$233.76
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$846		2	0	9.1	\$423.00	\$0.32
Physician	529,097		46,806	0	212,754.5	11.30	200.42
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	4,001		137	0	622.7	29.20	1.52
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	13		1	0	4.5	12.77	0.00
Audiology	118		7	0	31.8	16.80	0.04
Psychology	5,871		89	0	404.5	65.96	2.22
Physical Therapy	1,658		76	0	345.5	21.81	0.63
Speech Therapy	353		19	0	86.4	18.56	0.13
Occupational Therapy	209		10	0	45.5	20.90	0.08
Podiatry	6,022		243	0	1,104.5	24.78	2.28
Laboratory	8,597		1,377	0	6,259.1	6.24	3.26
X-Ray	8,733		400	0	1,818.2	21.83	3.31
Methadone Treatment Clinic	378		37	0	168.2	10.22	0.14
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	33,970		303	0	1,377.3	112.11	12.87
Home Health	95,141		9,182	0	41,736.4	10.36	36.04
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	197,953		61,167	0	278,031.8	3.24	74.98
Ambulance	129,174		13,238	0	60,172.7	9.76	48.93
Wheelchair Van	62,033		11,752	0	53,418.2	5.28	23.50
Optometry / Glasses	4,146		144	0	654.5	28.79	1.57
Private Duty Nursing	84,038		2,329	0	10,586.4	36.08	31.83
Personal Care	5,799		1,324	0	6,018.2	4.38	2.20
Adult Medical Day Care	241		8	0	36.4	30.09	0.09
Dental	2,127		46	0	209.1	46.23	0.81
Other	0		0	0	0.0	0.00	0.00
	\$1,180,514		148,697	0	675,895.5	\$7.94	\$447.16

Appendix E3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Nursing Home Residents - Medicaid Only

SFY	10/11	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	All
Area	All	Dual Status	Non Duals
Population	NH	Service Group	All

Member Months: 2,640

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$422,659		22,198	0	100,900.0	\$19.04	\$160.10
Single Source Brand	838,741		4,276	0	19,436.4	196.15	317.70
Multi-Source Brand	354,294		1,285	0	5,840.9	275.72	134.20
Other	51,457		1,525	0	6,931.8	33.74	19.49
	\$1,667,151		29,284	0	133,109.1	\$56.93	\$631.50
Mental Health Center							
Case Management	\$6,652		18	0	81.8	\$369.56	\$2.52
Long Term Support Service	6,235		245	0	1,113.6	25.45	2.36
Partial Hospital	0		0	0	0.0	0.00	0.00
Psychotherapy	1,975		46	0	209.1	42.94	0.75
Evidence Based Practice	153		11	0	50.0	13.92	0.06
Medication Management	2,920		55	0	250.0	53.08	1.11
Emergency Service 24/7	1,525		65	0	295.5	23.46	0.58
APRTP	76		6	0	27.3	12.69	0.03
Other	1,192		13	0	59.1	91.70	0.45
	\$20,728		459	0	2,086.4	\$45.16	\$7.85
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	2,976		20	0	90.9	148.80	1.13
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$2,976		20	0	90.9	\$148.80	\$1.13
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	25,992		101	0	459.1	257.35	9.85
	\$25,992		101	0	459.1	\$257.35	\$9.85
Waiver Services - BDS							
Case Management *	\$6,948		27	0	122.7	\$257.35	\$2.63
Respite Care Services *	3,571		976	0	4,436.4	3.66	1.35
Environmental Modifications Services *	50,628		7	0	31.8	7,232.57	19.18
Personal Care Services	22,938		87	0	395.5	263.66	8.69
Community Support Services	4,379		712	0	3,236.4	6.15	1.66
Consolidated Developmental Services	9,045		1	0	4.5	9,044.66	3.43
Specialty Services	20,124		4,202	0	19,100.0	4.79	7.62
Day Habilitation Services	5,712		948	0	4,309.1	6.02	2.16
Supported Employment Services	1,560		240	0	1,090.9	6.50	0.59
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	2,631		74	0	336.4	35.56	1.00
In-Home Support Waiver Services	4,036		3	0	13.6	1,345.22	1.53
	\$131,572		7,277	0	33,077.3	\$18.08	\$49.84
Waiver Services - BEAS							
Case Management *	\$9,398		1,103	0	5,013.6	\$8.52	\$3.56
Respite Care Services *	641		384	0	1,745.5	1.67	0.24
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	4,060		770	0	3,500.0	5.27	1.54
Personal Care Services	21,444		4,904	0	22,290.9	4.37	8.12
Emergency Response System	1,210		37	0	168.2	32.71	0.46
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	1,034		21	0	95.5	49.24	0.39
Home Health Aide	4,230		589	0	2,677.3	7.18	1.60
Skilled Nursing	7,121		127	0	577.3	56.07	2.70
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	0		0	0	0.0	0.00	0.00
Residential Care	6,559		129	0	586.4	50.84	2.48
Medical Equipment and Delivery of Goods	4,889		8	0	36.4	611.17	1.85
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$60,587		8,072	0	36,690.9	\$7.51	\$22.95
Medicaid to School Program							
Clinic Services	531,906		90,025	0	409,204.5	5.91	201.48
	\$531,906		90,025	0	409,204.5	\$5.91	\$201.48
All Medicaid Services	\$22,363,449	518	388,953	2,354.5	1,767,968.2	\$57.50	\$8,471.00
Medicare	\$0						\$0.00
Third Party Amount	\$306,529						\$116.11
All Services	\$22,669,978	518	388,953	2,354.5	1,767,968.2	\$58.28	\$8,587.11

Appendix E4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Nursing Home Residents - Total Population

SFY 11/12 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver All
 Area All Dual Status All
 Population NH Service Group All

Member Months: 53,873

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$744,159	179	1,125	39.9	250.6	\$661.47	\$13.81
Surgical	576,360	63	460	14.0	102.5	1,252.96	10.70
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	52,115	6	89	1.3	19.8	585.56	0.97
Alcohol and Drug Abuse	6,635	2	9	0.4	2.0	737.17	0.12
Crossover	1,054,564	797	4,532	177.5	1,009.5	232.69	19.57
Other	0	0	0	0.0	0.0	0.00	0.00
	\$2,433,832	1,047	6,215	233.2	1,384.4	\$391.61	\$45.18
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$7,567,138	961	81,955	214.1	18,255.2	\$92.33	\$140.46
Intermediate Care Facility	181,454,167	1,146	1,471,346	255.3	327,736.6	123.33	3,368.18
Swing Beds - Skilled Nursing Facility	107,752	81	1,077	18.0	239.9	100.05	2.00
Swing Beds - Intermediate Care Facility	30,529	10	315	2.2	70.2	96.92	0.57
Skilled Nursing Facility Atypical Care	6,972,389	23	16,013	5.1	3,566.8	435.42	129.42
Intermediate Care Facility Atypical Care	2,870,906	17	14,702	3.8	3,274.8	195.27	53.29
Intermediate Care Facility for Mental Retardation	3,167,405	41	7,741	9.1	1,724.3	409.17	58.79
	\$202,170,285	2,279	1,593,149	507.6	354,867.7	\$126.90	\$3,752.72
Hospital Outpatient							
Emergency Room	\$53,059		369	0	82.2	\$143.79	\$0.98
Surgery	118,382		1,434	0	319.4	82.55	2.20
Radiology	303,964		2,160	0	481.1	140.72	5.64
Pathology/Lab	153,241		9,857	0	2,195.6	15.55	2.84
Pharmacy	823,234		57,339	0	12,772.0	14.36	15.28
Cardiovascular	27,764		394	0	87.8	70.47	0.52
PT/OT/ST	66,007		1,338	0	298.0	49.33	1.23
Psychiatric	310		3	0	0.7	103.21	0.01
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	174,258		4,137	0	921.5	42.12	3.23
Other	161,670		5,815	0	1,295.3	27.80	3.00
	\$1,881,886		82,846	0	18,453.6	\$22.72	\$34.93
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$1,405		17	0	3.8	\$82.63	\$0.03
Physician	1,041,290		58,206	0	12,965.2	17.89	19.33
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	5,350		303	0	67.5	17.66	0.10
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	16		1	0	0.2	15.88	0.00
Audiology	3,695		244	0	54.4	15.15	0.07
Psychology	14,006		567	0	126.3	24.70	0.26
Physical Therapy	519		24	0	5.3	21.64	0.01
Speech Therapy	52		2	0	0.4	25.82	0.00
Occupational Therapy	0		0	0	0.0	0.00	0.00
Podiatry	24,886		1,074	0	239.2	23.17	0.46
Laboratory	12,785		1,810	0	403.2	7.06	0.24
X-Ray	20,009		1,318	0	293.6	15.18	0.37
Methodone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	162,253		4,811	0	1,071.6	33.73	3.01
Home Health	83,476		6,870	0	1,530.3	12.15	1.55
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	536,779		119,455	0	26,608.1	4.49	9.96
Ambulance	221,478		20,970	0	4,671.0	10.56	4.11
Wheelchair Van	980,330		171,939	0	38,298.7	5.70	18.20
Optometry / Glasses	51,514		3,101	0	690.7	16.61	0.96
Private Duty Nursing	113,790		3,085	0	687.2	36.89	2.11
Personal Care	9,759		2,228	0	496.3	4.38	0.18
Adult Medical Day Care	2,812		124	0	27.6	22.68	0.05
Dental	10,894		142	0	31.6	76.71	0.20
Other	0		0	0	0.0	0.00	0.00
	\$3,297,096		396,291	0	88,272.3	\$8.32	\$61.20

Appendix E4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Nursing Home Residents - Total Population

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	All
Area	All	Dual Status	All
Population	NH	Service Group	All

Member Months: 53,873

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$500,460		68,470	0	15,251.4	\$7.31	\$9.29
Single Source Brand	874,085		4,706	0	1,048.2	185.74	16.22
Multi-Source Brand	346,313		1,054	0	234.8	328.57	6.43
Other	147,865		32,589	0	7,259.1	4.54	2.74
	\$1,868,723		106,819	0	23,793.5	\$17.49	\$34.69
Mental Health Center							
Case Management	\$34,766		102	0	22.7	\$340.85	\$0.65
Long Term Support Service	44,270		1,216	0	270.9	36.41	0.82
Partial Hospital	0		0	0	0.0	0.00	0.00
Psychotherapy	4,934		70	0	15.6	70.49	0.09
Evidence Based Practice	938		53	0	11.8	17.70	0.02
Medication Management	5,107		100	0	22.3	51.07	0.09
Emergency Service 24/7	2,346		100	0	22.3	23.46	0.04
APRTP	16,176		963	0	214.5	16.80	0.30
Other	1,697		21	0	4.7	80.79	0.03
	\$110,235		2,625	0	584.7	\$41.99	\$2.05
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	110		1	0	0.2	109.76	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	1,601		14	0	3.1	114.36	0.03
	\$1,711		15	0	3.3	\$114.05	\$0.03
State Plan Services - BDS							
Partners in Health	331		1	0	0.2	331.00	0.01
Early Intervention	1,610		7	0	1.6	230.00	0.03
Targeted Case Management	44,522		173	0	38.5	257.35	0.83
	\$46,463		181	0	40.3	\$256.70	\$0.86
Waiver Services - BDS							
Case Management *	\$18,534		67	0	14.9	\$276.63	\$0.34
Respite Care Services *	2,055		586	0	130.5	3.51	0.04
Environmental Modifications Services *	26,908		4	0	0.9	6,727.09	0.50
Personal Care Services	94,002		390	0	86.9	241.03	1.74
Community Support Services	4,059		660	0	147.0	6.15	0.08
Consolidated Developmental Services	35,564		8	0	1.8	4,445.45	0.66
Specialty Services	30,654		2,061	0	459.1	14.87	0.57
Day Habilitation Services	22,413		4,012	0	893.7	5.59	0.42
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	427		12	0	2.7	35.56	0.01
In-Home Support Waiver Services	15,769		10	0	2.2	1,576.91	0.29
	\$250,385		7,810	0	1,739.6	\$32.06	\$4.65
Waiver Services - BEAS							
Case Management *	\$74,112		8,476	0	1,888.0	\$8.74	\$1.38
Respite Care Services *	11,564		6,944	0	1,546.7	1.67	0.21
Environmental Modifications Services *	88,794		12	0	2.7	7,399.46	1.65
Homemaker and Other In-Home Services	20,409		4,139	0	921.9	4.93	0.38
Personal Care Services	78,826		17,998	0	4,009.0	4.38	1.46
Emergency Response System	11,483		372	0	82.9	30.87	0.21
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	4,727		96	0	21.4	49.24	0.09
Home Health Aide	19,723		2,632	0	586.3	7.49	0.37
Skilled Nursing	13,344		148	0	33.0	90.16	0.25
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	1,417		20	0	4.5	70.86	0.03
Supported Housing	7,438		177	0	39.4	42.02	0.14
Residential Care	68,982		1,349	0	300.5	51.14	1.28
Medical Equipment and Delivery of Goods	76,994		82	0	18.3	938.95	1.43
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$477,813		42,445	0	9,454.5	\$11.26	\$8.87
Medicaid to School Program							
Clinic Services	525,964		87,752	0	19,546.4	5.99	9.76
	\$525,964		87,752	0	19,546.4	\$5.99	\$9.76
All Medicaid Services	\$213,064,392	3,326	2,326,148	740.9	518,140.4	\$91.60	\$3,954.94
Medicare	\$92,432,721						\$1,715.75
Third Party Amount	\$564,330						\$10.48
All Services	\$306,061,442	3,326	2,326,148	740.9	518,140.4	\$131.57	\$5,681.17

Appendix E5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Nursing Home Residents - Full Duals

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	All
Area	All	Dual Status	Full Duals
Population	NH	Service Group	All

Member Months: 51,066

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$19,854	5	16	1.2	3.8	\$1,240.86	\$0.39
Surgical	0	0	0	0.0	0.0	0.00	0.00
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	26,920	1	20	0.2	4.7	1,346.00	0.53
Alcohol and Drug Abuse	0	0	0	0.0	0.0	0.00	0.00
Crossover	1,047,447	792	4,510	186.1	1,059.8	232.25	20.51
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,094,221	798	4,546	187.5	1,068.3	\$240.70	\$21.43
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$6,241,686	871	77,135	204.7	18,126.0	\$80.92	\$122.23
Intermediate Care Facility	173,507,779	1,069	1,420,964	251.2	333,912.3	122.11	3,397.72
Swing Beds - Skilled Nursing Facility	42,076	23	415	5.4	97.5	101.39	0.82
Swing Beds - Intermediate Care Facility	22,356	7	216	1.6	50.8	103.50	0.44
Skilled Nursing Facility Atypical Care	1,835,215	5	3,840	1.2	902.4	477.92	35.94
Intermediate Care Facility Atypical Care	2,508,541	13	12,961	3.1	3,045.7	193.55	49.12
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$184,157,653	1,988	1,515,531	467.2	356,134.6	\$121.51	\$3,606.27
Hospital Outpatient							
Emergency Room	\$12,810		140	0	32.9	\$91.50	\$0.25
Surgery	22,646		277	0	65.1	81.75	0.44
Radiology	130,896		1,399	0	328.8	93.56	2.56
Pathology/Lab	97,603		2,040	0	479.4	47.84	1.91
Pharmacy	628,415		27,228	0	6,398.3	23.08	12.31
Cardiovascular	17,620		297	0	69.8	59.33	0.35
PT/OT/ST	35,300		363	0	85.3	97.25	0.69
Psychiatric	310		3	0	0.7	103.21	0.01
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	173,856		4,126	0	969.6	42.14	3.40
Other	53,489		2,829	0	664.8	18.91	1.05
	\$1,172,946		38,702	0	9,094.6	\$30.31	\$22.97
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$684		15	0	3.5	\$45.59	\$0.01
Physician	449,256		24,308	0	5,712.1	18.48	8.80
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	1,364		125	0	29.4	10.91	0.03
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	0		0	0	0.0	0.00	0.00
Audiology	3,337		218	0	51.2	15.31	0.07
Psychology	7,126		461	0	108.3	15.46	0.14
Physical Therapy	0		0	0	0.0	0.00	0.00
Speech Therapy	0		0	0	0.0	0.00	0.00
Occupational Therapy	0		0	0	0.0	0.00	0.00
Podiatry	16,290		762	0	179.1	21.38	0.32
Laboratory	2,400		302	0	71.0	7.95	0.05
X-Ray	6,675		767	0	180.2	8.70	0.13
Methadone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	127,308		4,521	0	1,062.4	28.16	2.49
Home Health	9,783		779	0	183.1	12.56	0.19
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	330,708		80,486	0	18,913.4	4.11	6.48
Ambulance	74,376		5,257	0	1,235.3	14.15	1.46
Wheelchair Van	885,190		148,839	0	34,975.7	5.95	17.33
Optometry / Glasses	46,338		2,875	0	675.6	16.12	0.91
Private Duty Nursing	0		0	0	0.0	0.00	0.00
Personal Care	9,627		2,198	0	516.5	4.38	0.19
Adult Medical Day Care	2,763		123	0	28.9	22.46	0.05
Dental	8,648		91	0	21.4	95.03	0.17
Other	0		0	0	0.0	0.00	0.00
	\$1,981,873		272,127	0	63,947.1	\$7.28	\$38.81

Appendix E5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Nursing Home Residents - Full Duals

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	All
Area	All	Dual Status	Full Duals
Population	NH	Service Group	All

Member Months: 51,066

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$166,631		45,151	0	10,610.0	\$3.69	\$3.26
Single Source Brand	37,710		452	0	106.2	83.43	0.74
Multi-Source Brand	7,677		111	0	26.1	69.16	0.15
Other	88,386		30,731	0	7,221.5	2.88	1.73
	\$300,404		76,445	0	17,963.8	\$3.93	\$5.88
Mental Health Center							
Case Management	\$23,665		71	0	16.7	\$333.31	\$0.46
Long Term Support Service	30,635		843	0	198.1	36.34	0.60
Partial Hospital	0		0	0	0.0	0.00	0.00
Psychotherapy	3,228		46	0	10.8	70.17	0.06
Evidence Based Practice	764		34	0	8.0	22.46	0.01
Medication Management	1,314		29	0	6.8	45.30	0.03
Emergency Service 24/7	1,267		54	0	12.7	23.46	0.02
APRTP	16,126		960	0	225.6	16.80	0.32
Other	278		3	0	0.7	92.70	0.01
	\$77,277		2,040	0	479.4	\$37.88	\$1.51
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	15,956		62	0	14.6	257.35	0.31
	\$15,956		62	0	14.6	\$257.35	\$0.31
Waiver Services - BDS							
Case Management *	\$12,322		45	0	10.6	\$273.83	\$0.24
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	3,174		1	0	0.2	3,174.32	0.06
Personal Care Services	40,326		197	0	46.3	204.70	0.79
Community Support Services	3,210		522	0	122.7	6.15	0.06
Consolidated Developmental Services	15,486		3	0	0.7	5,162.04	0.30
Specialty Services	2,666		118	0	27.7	22.60	0.05
Day Habilitation Services	13,698		2,471	0	580.7	5.54	0.27
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	0		0	0	0.0	0.00	0.00
In-Home Support Waiver Services	0		0	0	0.0	0.00	0.00
	\$90,884		3,357	0	788.9	\$27.07	\$1.78
Waiver Services - BEAS							
Case Management *	\$68,962		7,910	0	1,858.8	\$8.72	\$1.35
Respite Care Services *	10,762		6,464	0	1,519.0	1.66	0.21
Environmental Modifications Services *	71,004		10	0	2.3	7,100.39	1.39
Homemaker and Other In-Home Services	18,090		3,700	0	869.5	4.89	0.35
Personal Care Services	72,164		16,477	0	3,871.9	4.38	1.41
Emergency Response System	10,622		346	0	81.3	30.70	0.21
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	4,727		96	0	22.6	49.24	0.09
Home Health Aide	18,817		2,574	0	604.9	7.31	0.37
Skilled Nursing	11,540		128	0	30.1	90.16	0.23
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	1,417		20	0	4.7	70.86	0.03
Supported Housing	6,627		154	0	36.2	43.03	0.13
Residential Care	60,420		1,204	0	282.9	50.18	1.18
Medical Equipment and Delivery of Goods	57,794		68	0	16.0	849.92	1.13
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$412,947		39,151	0	9,200.1	\$10.55	\$8.09
Medicaid to School Program							
Clinic Services	0		0	0	0.0	0.00	0.00
	\$0		0	0	0.0	\$0.00	\$0.00
All Medicaid Services	\$189,304,160	2,786	1,951,961	654.7	458,691.3	\$96.98	\$3,707.05
Medicare	\$92,432,721						\$1,810.06
Third Party Amount	\$334,125						\$6.54
All Services	\$282,071,005	2,786	1,951,961	654.7	458,691.3	\$144.51	\$5,523.66

Appendix E6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Nursing Home Residents - Medicaid Only

SFY 11/12 Rate Group All
 Age All Behavioral Health Category All
 Gender All Waiver All
 Area All Dual Status Non Duals
 Population NH Service Group All

Member Months: 2,807

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$724,305	174	1,109	743.9	4,741.0	\$653.12	\$258.04
Surgical	576,360	63	460	269.3	1,966.5	1,252.96	205.33
Maternity Delivery	0	0	0	0.0	0.0	0.00	0.00
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	25,195	5	69	21.4	295.0	365.14	8.98
Alcohol and Drug Abuse	6,635	2	9	8.6	38.5	737.17	2.36
Crossover	7,117	5	22	21.4	94.1	323.50	2.54
Other	0	0	0	0.0	0.0	0.00	0.00
	\$1,339,611	249	1,669	1,064.5	7,135.0	\$802.64	\$477.24
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$1,325,452	90	4,820	384.8	20,605.6	\$274.99	\$472.20
Intermediate Care Facility	7,946,388	77	50,382	329.2	215,384.4	157.72	2,830.92
Swing Beds - Skilled Nursing Facility	65,677	58	662	248.0	2,830.1	99.21	23.40
Swing Beds - Intermediate Care Facility	8,173	3	99	12.8	423.2	82.55	2.91
Skilled Nursing Facility Atypical Care	5,137,173	18	12,173	77.0	52,039.9	422.01	1,830.13
Intermediate Care Facility Atypical Care	362,365	4	1,741	17.1	7,442.8	208.14	129.09
Intermediate Care Facility for Mental Retardation	3,167,405	41	7,741	175.3	33,093.0	409.17	1,128.40
	\$18,012,632	291	77,618	1,244.0	331,819.0	\$232.07	\$6,417.04
Hospital Outpatient							
Emergency Room	\$40,248		229	0	979.0	\$175.76	\$14.34
Surgery	95,736		1,157	0	4,946.2	82.74	34.11
Radiology	173,067		761	0	3,253.3	227.42	61.66
Pathology/Lab	55,638		7,817	0	33,417.9	7.12	19.82
Pharmacy	194,818		30,111	0	128,725.3	6.47	69.40
Cardiovascular	10,143		97	0	414.7	104.57	3.61
PT/OT/ST	30,707		975	0	4,168.2	31.49	10.94
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	402		11	0	47.0	36.56	0.14
Other	108,181		2,986	0	12,765.2	36.23	38.54
	\$708,940		44,144	0	188,716.8	\$16.06	\$252.56
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$721		2	0	8.6	\$360.40	\$0.26
Physician	592,034		33,898	0	144,914.9	17.47	210.91
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	3,986		178	0	761.0	22.40	1.42
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	16		1	0	4.3	15.88	0.01
Audiology	358		26	0	111.2	13.78	0.13
Psychology	6,879		106	0	453.2	64.90	2.45
Physical Therapy	519		24	0	102.6	21.64	0.19
Speech Therapy	52		2	0	8.6	25.82	0.02
Occupational Therapy	0		0	0	0.0	0.00	0.00
Podiatry	8,596		312	0	1,333.8	27.55	3.06
Laboratory	10,385		1,508	0	6,446.7	6.89	3.70
X-Ray	13,334		551	0	2,355.5	24.20	4.75
Methadone Treatment Clinic	0		0	0	0.0	0.00	0.00
Medical Services Clinic	0		0	0	0.0	0.00	0.00
Federally Qualified and Rural Health Clinics	34,945		290	0	1,239.8	120.50	12.45
Home Health	73,693		6,091	0	26,039.2	12.10	26.25
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	206,071		38,969	0	166,593.5	5.29	73.41
Ambulance	147,102		15,713	0	67,173.5	9.36	52.41
Wheelchair Van	95,140		23,100	0	98,753.1	4.12	33.89
Optometry / Glasses	5,175		226	0	966.2	22.90	1.84
Private Duty Nursing	113,790		3,085	0	13,188.5	36.89	40.54
Personal Care	131		30	0	128.3	4.38	0.05
Adult Medical Day Care	49		1	0	4.3	49.24	0.02
Dental	2,246		51	0	218.0	44.03	0.80
Other	0		0	0	0.0	0.00	0.00
	\$1,315,224		124,164	0	530,804.4	\$10.59	\$468.55

Appendix E6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Nursing Home Residents - Medicaid Only

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	All
Gender	All	Waiver	All
Area	All	Dual Status	Non Duals
Population	NH	Service Group	All

Member Months: 2,807

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$333,830		23,319	0	99,689.3	\$14.32	\$118.93
Single Source Brand	836,375		4,254	0	18,186.0	196.61	297.96
Multi-Source Brand	338,636		943	0	4,031.4	359.11	120.64
Other	59,479		1,858	0	7,943.0	32.01	21.19
	\$1,568,319		30,374	0	129,849.7	\$51.63	\$558.72
Mental Health Center							
Case Management	\$11,101		31	0	132.5	\$358.10	\$3.95
Long Term Support Service	13,635		373	0	1,594.6	36.55	4.86
Partial Hospital	0		0	0	0.0	0.00	0.00
Psychotherapy	1,706		24	0	102.6	71.09	0.61
Evidence Based Practice	175		19	0	81.2	9.19	0.06
Medication Management	3,793		71	0	303.5	53.43	1.35
Emergency Service 24/7	1,079		46	0	196.7	23.46	0.38
APRTP	51		3	0	12.8	16.86	0.02
Other	1,418		18	0	77.0	78.80	0.51
	\$32,958		585	0	2,500.9	\$56.34	\$11.74
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	110		1	0	4.3	109.76	0.04
Child Health Support Service	0		0	0	0.0	0.00	0.00
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	0		0	0	0.0	0.00	0.00
Private Non-Medical Institution for Children	1,601		14	0	59.9	114.36	0.57
	\$1,711		15	0	64.1	\$114.05	\$0.61
State Plan Services - BDS							
Partners in Health	331		1	0	4.3	331.00	0.12
Early Intervention	1,610		7	0	29.9	230.00	0.57
Targeted Case Management	28,566		111	0	474.5	257.35	10.18
	\$30,507		119	0	508.7	\$256.36	\$10.87
Waiver Services - BDS							
Case Management *	\$6,212		22	0	94.1	\$282.35	\$2.21
Respite Care Services *	2,055		586	0	2,505.2	3.51	0.73
Environmental Modifications Services *	23,734		3	0	12.8	7,911.35	8.46
Personal Care Services	53,676		193	0	825.1	278.11	19.12
Community Support Services	849		138	0	590.0	6.15	0.30
Consolidated Developmental Services	20,078		5	0	21.4	4,015.50	7.15
Specialty Services	27,987		1,943	0	8,306.4	14.40	9.97
Day Habilitation Services	8,715		1,541	0	6,587.8	5.66	3.10
Supported Employment Services	0		0	0	0.0	0.00	0.00
Crisis Response Services	0		0	0	0.0	0.00	0.00
Assistive Technology Support Services	427		12	0	51.3	35.56	0.15
In-Home Support Waiver Services	15,769		10	0	42.8	1,576.91	5.62
	\$159,501		4,453	0	19,036.7	\$35.82	\$56.82
Waiver Services - BEAS							
Case Management *	\$5,151		566	0	2,419.7	\$9.10	\$1.83
Respite Care Services *	802		480	0	2,052.0	1.67	0.29
Environmental Modifications Services *	17,790		2	0	8.6	8,894.80	6.34
Homemaker and Other In-Home Services	2,319		439	0	1,876.7	5.28	0.83
Personal Care Services	6,662		1,521	0	6,502.3	4.38	2.37
Emergency Response System	861		26	0	111.2	33.12	0.31
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	0		0	0	0.0	0.00	0.00
Home Health Aide	906		58	0	248.0	15.61	0.32
Skilled Nursing	1,803		20	0	85.5	90.16	0.64
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	811		23	0	98.3	35.28	0.29
Residential Care	8,562		145	0	619.9	59.05	3.05
Medical Equipment and Delivery of Goods	19,200		14	0	59.9	1,371.42	6.84
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$64,866		3,294	0	14,081.9	\$19.69	\$23.11
Medicaid to School Program							
Clinic Services	525,964		87,752	0	375,142.1	5.99	187.38
	\$525,964		87,752	0	375,142.1	\$5.99	\$187.38
All Medicaid Services	\$23,760,232	540	374,187	2,308.5	1,599,659.4	\$63.50	\$8,464.64
Medicare	\$0						\$0.00
Third Party Amount	\$230,206						\$82.01
All Services	\$23,990,438	540	374,187	2,308.5	1,599,659.4	\$64.11	\$8,546.65



APPENDIX F

Bureau of Behavioral Health Consumers

Appendix F1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Bureau of Behavioral Health Consumers - Total Population

SFY 10/11 Rate Group All
 Age All Behavioral Health Category *Non Blank
 Gender All Waiver All
 Area All Dual Status All
 Population All Service Group All

Member Months: 105,508

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$1,207,522	390	1,387	44.4	157.8	\$870.60	\$11.44
Surgical	903,854	104	646	11.8	73.5	1,399.15	8.57
Maternity Delivery	184,501	78	250	8.9	28.4	738.00	1.75
Maternity Non-Delivery	12,903	5	10	0.6	1.1	1,290.31	0.12
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	3,212,007	614	4,605	69.8	523.8	697.50	30.44
Alcohol and Drug Abuse	46,334	25	158	2.8	18.0	293.25	0.44
Crossover	704,139	624	3,324	71.0	378.1	211.83	6.67
Other	5,574	1	6	0.1	0.7	929.00	0.05
	\$6,276,834	1,841	10,386	209.4	1,181.3	\$604.36	\$59.49
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$267,159	66	2,554	7.5	290.5	\$104.60	\$2.53
Intermediate Care Facility	299,943	12	2,025	1.4	230.3	148.12	2.84
Swing Beds - Skilled Nursing Facility	6,144	7	58	0.8	6.6	105.93	0.06
Swing Beds - Intermediate Care Facility	106	1	1	0.1	0.1	105.93	0.00
Skilled Nursing Facility Atypical Care	91,820	0	180	0.0	20.5	510.11	0.87
Intermediate Care Facility Atypical Care	19,894	1	111	0.1	12.6	179.23	0.19
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$685,066	87	4,929	9.9	560.6	\$138.99	\$6.49
Hospital Outpatient							
Emergency Room	\$1,356,048		14,156	0	1,610.0	\$95.79	\$12.85
Surgery	865,378		28,072	0	3,192.8	30.83	8.20
Radiology	1,528,819		11,107	0	1,263.3	137.64	14.49
Pathology/Lab	874,195		76,922	0	8,748.8	11.36	8.29
Pharmacy	1,091,879		85,566	0	9,731.9	12.76	10.35
Cardiovascular	169,332		1,977	0	224.9	85.65	1.60
PT/OT/ST	268,252		10,278	0	1,169.0	26.10	2.54
Psychiatric	1,611		37	0	4.2	43.53	0.02
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	215,086		5,522	0	628.0	38.95	2.04
Other	642,323		17,092	0	1,944.0	37.58	6.09
	\$7,012,923		250,729	0	28,516.8	\$27.97	\$66.47
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$144,762		589	0	67.0	\$245.78	\$1.37
Physician	3,972,053		129,601	0	14,740.2	30.65	37.65
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	23,696		651	0	74.0	36.40	0.22
Certified Midwife	2,192		24	0	2.7	91.33	0.02
Family Planning	29,183		1,184	0	134.7	24.65	0.28
Audiology	1,553		278	0	31.6	5.59	0.01
Psychology	324,531		5,618	0	639.0	57.77	3.08
Physical Therapy	67,049		3,348	0	380.8	20.03	0.64
Speech Therapy	6,146		313	0	35.6	19.64	0.06
Occupational Therapy	5,367		271	0	30.8	19.80	0.05
Podiatry	25,810		645	0	73.4	40.02	0.24
Laboratory	95,711		10,334	0	1,175.3	9.26	0.91
X-Ray	71,033		1,201	0	136.6	59.15	0.67
Methodone Treatment Clinic	288,909		28,269	0	3,215.2	10.22	2.74
Medical Services Clinic	15,370		628	0	71.4	24.47	0.15
Federally Qualified and Rural Health Clinics	969,644		9,661	0	1,098.8	100.37	9.19
Home Health	1,006,457		113,416	0	12,899.4	8.87	9.54
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	784,498		433,608	0	49,316.6	1.81	7.44
Ambulance	418,416		23,061	0	2,622.9	18.14	3.97
Wheelchair Van	208,441		31,742	0	3,610.2	6.57	1.98
Optometry / Glasses	228,874		8,822	0	1,003.4	25.94	2.17
Private Duty Nursing	38,046		961	0	109.3	39.59	0.36
Personal Care	152,455		34,807	0	3,958.8	4.38	1.44
Adult Medical Day Care	193,560		6,756	0	768.4	28.65	1.83
Dental	1,735,044		31,539	0	3,587.1	55.01	16.44
Other	0		0	0	0.0	0.00	0.00
	\$10,808,800		877,327	0	99,783.2	\$12.32	\$102.45

Appendix F1
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Bureau of Behavioral Health Consumers - Total Population

SFY 10/11 Rate Group All
 Age All Behavioral Health Category *Non Blank
 Gender All Waiver All
 Area All Dual Status All
 Population All Service Group All

Member Months: 105,508

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$2,765,548		167,470	0	19,047.3	\$16.51	\$26.21
Single Source Brand	13,294,231		60,801	0	6,915.2	218.65	126.00
Multi-Source Brand	2,185,237		5,272	0	599.6	414.50	20.71
Other	51,504		2,485	0	282.6	20.73	0.49
	\$18,296,520		236,028	0	26,844.8	\$77.52	\$173.41
Mental Health Center							
Case Management	\$26,157,975		70,215	0	7,985.9	\$372.54	\$247.92
Long Term Support Service	29,890,158		1,104,577	0	125,629.6	27.06	283.30
Partial Hospital	2,219,146		22,652	0	2,576.3	97.97	21.03
Psychotherapy	8,877,829		203,044	0	23,093.3	43.72	84.14
Evidence Based Practice	2,293,125		95,679	0	10,882.1	23.97	21.73
Medication Management	743,739		18,493	0	2,103.3	40.22	7.05
Emergency Service 24/7	367,062		15,632	0	1,777.9	23.48	3.48
APRTP	1,752,561		33,483	0	3,808.2	52.34	16.61
Other	1,468,640		17,516	0	1,992.2	83.85	13.92
	\$73,770,234		1,581,291	0	179,848.8	\$46.65	\$699.19
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	12,432		805	0	91.6	15.44	0.12
Intensive Home and Community Service	1,701,195		18,732	0	2,130.5	90.82	16.12
Child Health Support Service	243,033		24,850	0	2,826.3	9.78	2.30
Home Based Therapy	608,919		10,834	0	1,232.2	56.20	5.77
Placement Services	934,964		10,653	0	1,211.6	87.77	8.86
Private Non-Medical Institution for Children	3,136,906		29,017	0	3,300.3	108.11	29.73
	\$6,637,450		94,891	0	10,792.5	\$69.95	\$62.91
State Plan Services - BDS							
Partners in Health	14,576		44	0	5.0	331.27	0.14
Early Intervention	4,140		18	0	2.0	230.00	0.04
Targeted Case Management	158,376		622	0	70.7	254.62	1.50
	\$177,092		684	0	77.8	\$258.91	\$1.68
Waiver Services - BDS							
Case Management *	\$397,724		1,514	0	172.2	\$262.70	\$3.77
Respite Care Services *	200,000		70,854	0	8,058.6	2.82	1.90
Environmental Modifications Services *	8,380		10	0	1.1	838.00	0.08
Personal Care Services	4,515,829		18,941	0	2,154.3	238.42	42.80
Community Support Services	245,464		40,235	0	4,576.1	6.10	2.33
Consolidated Developmental Services	534,052		186	0	21.2	2,871.25	5.06
Specialty Services	241,152		10,554	0	1,200.4	22.85	2.29
Day Habilitation Services	1,524,081		277,633	0	31,576.7	5.49	14.45
Supported Employment Services	215,871		40,073	0	4,557.7	5.39	2.05
Crisis Response Services	335,383		50,503	0	5,744.0	6.64	3.18
Assistive Technology Support Services	4,232		119	0	13.5	35.56	0.04
In-Home Support Waiver Services	495,594		315	0	35.8	1,573.31	4.70
	\$8,717,762		510,937	0	58,111.7	\$17.06	\$82.63
Waiver Services - BEAS							
Case Management *	\$568,942		66,713	0	7,587.6	\$8.53	\$5.39
Respite Care Services *	6,252		3,744	0	425.8	1.67	0.06
Environmental Modifications Services *	31,986		3	0	0.3	10,662.00	0.30
Homemaker and Other In-Home Services	390,903		74,916	0	8,520.6	5.22	3.70
Personal Care Services	1,318,095		301,901	0	34,336.8	4.37	12.49
Emergency Response System	61,245		1,798	0	204.5	34.06	0.58
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	58,689		1,192	0	135.6	49.24	0.56
Home Health Aide	400,616		39,007	0	4,436.5	10.27	3.80
Skilled Nursing	434,664		5,119	0	582.2	84.91	4.12
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	120,116		2,485	0	282.6	48.34	1.14
Residential Care	956,727		20,343	0	2,313.7	47.03	9.07
Medical Equipment and Delivery of Goods	37,429		176	0	20.0	212.66	0.35
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$4,385,663		517,397	0	58,846.4	\$8.48	\$41.57
Medicaid to School Program							
Clinic Services	5,504,250		3,027,085	0	344,286.9	1.82	52.17
	\$5,504,250		3,027,085	0	344,286.9	\$1.82	\$52.17
All Medicaid Services	\$142,272,593	1,928	7,111,684	219.3	808,850.6	\$20.01	\$1,348.45
Medicare	\$41,462,134						\$392.98
Third Party Amount	\$2,302,732						\$21.83
All Services	\$186,037,459	1,928	7,111,684	219.3	808,850.6	\$26.16	\$1,763.25

Appendix F2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Bureau of Behavioral Health Consumers - Full Duals

SFY 10/11 Rate Group All
 Age All Behavioral Health Category *Non Blank
 Gender All Waiver All
 Area All Dual Status Full Duals
 Population All Service Group All

Member Months: 28,373

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$10,917	4	23	1.7	9.7	\$474.65	\$0.38
Surgical	5,942	1	13	0.4	5.5	457.07	0.21
Maternity Delivery	9,710	5	17	2.1	7.2	571.20	0.34
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	50,252	19	91	8.0	38.5	552.22	1.77
Alcohol and Drug Abuse	11,442	5	20	2.1	8.5	572.12	0.40
Crossover	697,379	618	3,309	261.4	1,399.5	210.75	24.58
Other	0	0	0	0.0	0.0	0.00	0.00
	\$785,643	652	3,473	275.8	1,468.9	\$226.21	\$27.69
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$217,874	53	2,224	22.4	940.6	\$97.97	\$7.68
Intermediate Care Facility	297,228	11	2,004	4.7	847.6	148.32	10.48
Swing Beds - Skilled Nursing Facility	2,542	2	24	0.8	10.2	105.93	0.09
Swing Beds - Intermediate Care Facility	106	1	1	0.4	0.4	105.93	0.00
Skilled Nursing Facility Atypical Care	91,820	0	180	0.0	76.1	510.11	3.24
Intermediate Care Facility Atypical Care	19,894	1	111	0.4	46.9	179.23	0.70
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$629,464	68	4,544	28.8	1,921.8	\$138.53	\$22.19
Hospital Outpatient							
Emergency Room	\$131,598		1,817	0	768.5	\$72.43	\$4.64
Surgery	64,914		1,320	0	558.3	49.18	2.29
Radiology	297,443		2,753	0	1,164.3	108.04	10.48
Pathology/Lab	222,737		8,547	0	3,614.8	26.06	7.85
Pharmacy	687,257		31,356	0	13,261.6	21.92	24.22
Cardiovascular	32,562		367	0	155.2	88.73	1.15
PT/OT/ST	61,122		1,662	0	702.9	36.78	2.15
Psychiatric	1,611		37	0	15.6	43.53	0.06
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	214,357		5,497	0	2,324.9	39.00	7.55
Other	51,446		1,559	0	659.4	33.00	1.81
	\$1,765,047		54,915	0	23,225.6	\$32.14	\$62.21
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$14,081		119	0	50.3	\$118.32	\$0.50
Physician	509,847		23,861	0	10,091.7	21.37	17.97
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	1,269		47	0	19.9	26.99	0.04
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	2,511		121	0	51.2	20.75	0.09
Audiology	408		73	0	30.9	5.59	0.01
Psychology	18,659		740	0	313.0	25.22	0.66
Physical Therapy	4,266		378	0	159.9	11.28	0.15
Speech Therapy	43		2	0	0.8	21.73	0.00
Occupational Therapy	311		24	0	10.2	12.97	0.01
Podiatry	4,658		153	0	64.7	30.44	0.16
Laboratory	9,490		872	0	368.8	10.88	0.33
X-Ray	10,410		360	0	152.3	28.92	0.37
Methodone Treatment Clinic	100,912		9,874	0	4,176.1	10.22	3.56
Medical Services Clinic	1,990		128	0	54.1	15.55	0.07
Federally Qualified and Rural Health Clinics	100,554		2,432	0	1,028.6	41.35	3.54
Home Health	267,498		15,603	0	6,599.1	17.14	9.43
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	280,158		124,695	0	52,738.2	2.25	9.87
Ambulance	46,400		2,300	0	972.8	20.17	1.64
Wheelchair Van	150,249		21,370	0	9,038.2	7.03	5.30
Optometry / Glasses	54,203		2,348	0	993.1	23.08	1.91
Private Duty Nursing	27,194		700	0	296.1	38.85	0.96
Personal Care	121,138		27,657	0	11,697.2	4.38	4.27
Adult Medical Day Care	158,541		5,491	0	2,322.3	28.87	5.59
Dental	118,417		1,863	0	787.9	63.56	4.17
Other	0		0	0	0.0	0.00	0.00
	\$2,003,205		241,211	0	102,017.1	\$8.30	\$70.60

Appendix F2
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Bureau of Behavioral Health Consumers - Full Duals

SFY 10/11 Rate Group All
 Age All Behavioral Health Category *Non Blank
 Gender All Waiver All
 Area All Dual Status Full Duals
 Population All Service Group All

Member Months: 28,373

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$221,552		22,596	0	9,556.7	\$9.80	\$7.81
Single Source Brand	607,351		2,634	0	1,114.0	230.58	21.41
Multi-Source Brand	165,389		365	0	154.4	453.12	5.83
Other	6,294		1,491	0	630.6	4.22	0.22
	\$1,000,586		27,086	0	11,455.7	\$36.94	\$35.27
Mental Health Center							
Case Management	\$7,729,194		21,698	0	9,176.9	\$356.22	\$272.41
Long Term Support Service	14,605,291		497,394	0	210,366.5	29.36	514.76
Partial Hospital	1,520,627		15,522	0	6,564.8	97.97	53.59
Psychotherapy	373,862		12,055	0	5,098.5	31.01	13.18
Evidence Based Practice	1,449,344		60,880	0	25,748.4	23.81	51.08
Medication Management	259,695		7,675	0	3,246.0	33.84	9.15
Emergency Service 24/7	212,526		9,058	0	3,831.0	23.46	7.49
APRTP	1,087,447		32,096	0	13,574.6	33.88	38.33
Other	87,046		1,990	0	841.6	43.74	3.07
	\$27,325,032		658,368	0	278,448.4	\$41.50	\$963.06
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	518		53	0	22.4	9.78	0.02
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	23,527		303	0	128.2	77.65	0.83
Private Non-Medical Institution for Children	3,373		19	0	8.0	177.54	0.12
	\$27,419		375	0	158.6	\$73.12	\$0.97
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	20,843		87	0	36.8	239.58	0.73
	\$20,843		87	0	36.8	\$239.58	\$0.73
Waiver Services - BDS							
Case Management *	\$207,469		789	0	333.7	\$262.95	\$7.31
Respite Care Services *	18,449		4,908	0	2,075.8	3.76	0.65
Environmental Modifications Services *	4,241		4	0	1.7	1,060.31	0.15
Personal Care Services	2,472,691		10,862	0	4,593.9	227.65	87.15
Community Support Services	157,818		25,871	0	10,941.8	6.10	5.56
Consolidated Developmental Services	358,622		110	0	46.5	3,260.20	12.64
Specialty Services	47,188		1,935	0	818.4	24.39	1.66
Day Habilitation Services	877,539		164,262	0	69,472.5	5.34	30.93
Supported Employment Services	147,433		29,544	0	12,495.3	4.99	5.20
Crisis Response Services	96,864		14,594	0	6,172.3	6.64	3.41
Assistive Technology Support Services	213		6	0	2.5	35.56	0.01
In-Home Support Waiver Services	384		1	0	0.4	384.30	0.01
	\$4,388,912		252,886	0	106,954.9	\$17.36	\$154.69
Waiver Services - BEAS							
Case Management *	\$458,668		53,770	0	22,741.3	\$8.53	\$16.17
Respite Care Services *	6,252		3,744	0	1,583.5	1.67	0.22
Environmental Modifications Services *	31,986		3	0	1.3	10,662.00	1.13
Homemaker and Other In-Home Services	289,747		55,036	0	23,276.8	5.26	10.21
Personal Care Services	959,170		219,712	0	92,924.4	4.37	33.81
Emergency Response System	50,214		1,476	0	624.3	34.02	1.77
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	30,972		629	0	266.0	49.24	1.09
Home Health Aide	293,392		27,652	0	11,695.1	10.61	10.34
Skilled Nursing	347,133		4,100	0	1,734.0	84.67	12.23
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	119,092		2,456	0	1,038.7	48.49	4.20
Residential Care	805,247		17,349	0	7,337.5	46.41	28.38
Medical Equipment and Delivery of Goods	35,511		162	0	68.5	219.21	1.25
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$3,427,384		386,089	0	163,291.4	\$8.88	\$120.80
Medicaid to School Program							
Clinic Services	57,199		12,791	0	5,409.8	4.47	2.02
	\$57,199		12,791	0	5,409.8	\$4.47	\$2.02
All Medicaid Services	\$41,430,734	720	1,641,825	304.5	694,389.0	\$25.23	\$1,460.22
Medicare	\$41,462,134						\$1,461.32
Third Party Amount	\$110,695						\$3.90
All Services	\$83,003,562	720	1,641,825	304.5	694,389.0	\$50.56	\$2,925.44

Appendix F3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Bureau of Behavioral Health Consumers - Medicaid Only

SFY 10/11 Rate Group All
 Age All Behavioral Health Category *Non Blank
 Gender All Waiver All
 Area All Dual Status Non Duals
 Population All Service Group All

Member Months: 77,135

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$1,196,605	386	1,364	60.1	212.2	\$877.28	\$15.51
Surgical	897,912	103	633	16.0	98.5	1,418.50	11.64
Maternity Delivery	174,790	73	233	11.4	36.2	750.17	2.27
Maternity Non-Delivery	12,903	5	10	0.8	1.6	1,290.31	0.17
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	3,161,755	595	4,514	92.6	702.2	700.43	40.99
Alcohol and Drug Abuse	34,891	20	138	3.1	21.5	252.84	0.45
Crossover	6,760	6	15	0.9	2.3	450.67	0.09
Other	5,574	1	6	0.2	0.9	929.00	0.07
	\$5,491,191	1,189	6,913	185.0	1,075.5	\$794.33	\$71.19
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$49,285	13	330	2.0	51.3	\$149.35	\$0.64
Intermediate Care Facility	2,715	1	21	0.2	3.3	129.29	0.04
Swing Beds - Skilled Nursing Facility	3,602	5	34	0.8	5.3	105.93	0.05
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$55,602	19	385	3.0	59.9	\$144.42	\$0.72
Hospital Outpatient							
Emergency Room	\$1,224,450		12,339	0	1,919.6	\$99.23	\$15.87
Surgery	800,464		26,752	0	4,161.8	29.92	10.38
Radiology	1,231,376		8,354	0	1,299.6	147.40	15.96
Pathology/Lab	651,458		68,375	0	10,637.2	9.53	8.45
Pharmacy	404,622		54,210	0	8,433.5	7.46	5.25
Cardiovascular	136,770		1,610	0	250.5	84.95	1.77
PT/OT/ST	207,130		8,616	0	1,340.4	24.04	2.69
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	728		25	0	3.9	29.13	0.01
Other	590,877		15,533	0	2,416.5	38.04	7.66
	\$5,247,876		195,814	0	30,463.1	\$26.80	\$68.03
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$130,681		470	0	73.1	\$278.05	\$1.69
Physician	3,462,205		105,740	0	16,450.1	32.74	44.89
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	22,427		604	0	94.0	37.13	0.29
Certified Midwife	2,192		24	0	3.7	91.33	0.03
Family Planning	26,672		1,063	0	165.4	25.09	0.35
Audiology	1,145		205	0	31.9	5.58	0.01
Psychology	305,872		4,878	0	758.9	62.70	3.97
Physical Therapy	62,784		2,970	0	462.0	21.14	0.81
Speech Therapy	6,103		311	0	48.4	19.62	0.08
Occupational Therapy	5,055		247	0	38.4	20.47	0.07
Podiatry	21,152		492	0	76.5	42.99	0.27
Laboratory	86,221		9,462	0	1,472.0	9.11	1.12
X-Ray	60,623		841	0	130.8	72.08	0.79
Methodone Treatment Clinic	187,997		18,395	0	2,861.7	10.22	2.44
Medical Services Clinic	13,380		500	0	77.8	26.76	0.17
Federally Qualified and Rural Health Clinics	869,090		7,229	0	1,124.6	120.22	11.27
Home Health	738,959		97,813	0	15,216.9	7.55	9.58
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	504,340		308,913	0	48,058.0	1.63	6.54
Ambulance	372,017		20,761	0	3,229.8	17.92	4.82
Wheelchair Van	58,192		10,372	0	1,613.6	5.61	0.75
Optometry / Glasses	174,672		6,474	0	1,007.2	26.98	2.26
Private Duty Nursing	10,852		261	0	40.6	41.58	0.14
Personal Care	31,317		7,150	0	1,112.3	4.38	0.41
Adult Medical Day Care	35,019		1,265	0	196.8	27.68	0.45
Dental	1,616,627		29,676	0	4,616.7	54.48	20.96
Other	0		0	0	0.0	0.00	0.00
	\$8,805,595		636,116	0	98,961.5	\$13.84	\$114.16

Appendix F3
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2011 Bureau of Behavioral Health Consumers - Medicaid Only

SFY 10/11 Rate Group All
 Age All Behavioral Health Category *Non Blank
 Gender All Waiver All
 Area All Dual Status Non Duals
 Population All Service Group All

Member Months: 77,135

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$2,543,997		144,874	0	22,538.3	\$17.56	\$32.98
Single Source Brand	12,686,880		58,167	0	9,049.1	218.11	164.48
Multi-Source Brand	2,019,848		4,907	0	763.4	411.63	26.19
Other	45,210		994	0	154.6	45.48	0.59
	\$17,295,934		208,942	0	32,505.4	\$82.78	\$224.23
Mental Health Center							
Case Management	\$18,428,781		48,517	0	7,547.9	\$379.84	\$238.92
Long Term Support Service	15,284,867		607,183	0	94,460.3	25.17	198.16
Partial Hospital	698,519		7,130	0	1,109.2	97.97	9.06
Psychotherapy	8,503,967		190,989	0	29,712.4	44.53	110.25
Evidence Based Practice	843,782		34,799	0	5,413.7	24.25	10.94
Medication Management	484,043		10,818	0	1,683.0	44.74	6.28
Emergency Service 24/7	154,536		6,574	0	1,022.7	23.51	2.00
APRTP	665,114		1,387	0	215.8	479.53	8.62
Other	1,381,593		15,526	0	2,415.4	88.99	17.91
	\$46,445,203		922,923	0	143,580.4	\$50.32	\$602.13
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	12,432		805	0	125.2	15.44	0.16
Intensive Home and Community Service	1,701,195		18,732	0	2,914.2	90.82	22.05
Child Health Support Service	242,514		24,797	0	3,857.7	9.78	3.14
Home Based Therapy	608,919		10,834	0	1,685.5	56.20	7.89
Placement Services	911,437		10,350	0	1,610.2	88.06	11.82
Private Non-Medical Institution for Children	3,133,533		28,998	0	4,511.3	108.06	40.62
	\$6,610,031		94,516	0	14,704.0	\$69.94	\$85.69
State Plan Services - BDS							
Partners in Health	14,576		44	0	6.8	331.27	0.19
Early Intervention	4,140		18	0	2.8	230.00	0.05
Targeted Case Management	137,533		535	0	83.2	257.07	1.78
	\$156,249		597	0	92.9	\$261.72	\$2.03
Waiver Services - BDS							
Case Management *	\$190,255		725	0	112.8	\$262.42	\$2.47
Respite Care Services *	181,551		65,946	0	10,259.3	2.75	2.35
Environmental Modifications Services *	4,139		6	0	0.9	689.79	0.05
Personal Care Services	2,043,138		8,079	0	1,256.9	252.89	26.49
Community Support Services	87,646		14,364	0	2,234.6	6.10	1.14
Consolidated Developmental Services	175,430		76	0	11.8	2,308.28	2.27
Specialty Services	193,964		8,619	0	1,340.9	22.50	2.51
Day Habilitation Services	646,542		113,371	0	17,637.3	5.70	8.38
Supported Employment Services	68,439		10,529	0	1,638.0	6.50	0.89
Crisis Response Services	238,519		35,909	0	5,586.4	6.64	3.09
Assistive Technology Support Services	4,018		113	0	17.6	35.56	0.05
In-Home Support Waiver Services	495,210		314	0	48.8	1,577.10	6.42
	\$4,328,850		258,051	0	40,145.4	\$16.78	\$56.12
Waiver Services - BEAS							
Case Management *	\$110,274		12,943	0	2,013.6	\$8.52	\$1.43
Respite Care Services *	0		0	0	0.0	0.00	0.00
Environmental Modifications Services *	0		0	0	0.0	0.00	0.00
Homemaker and Other In-Home Services	101,156		19,880	0	3,092.8	5.09	1.31
Personal Care Services	358,925		82,189	0	12,786.3	4.37	4.65
Emergency Response System	11,031		322	0	50.1	34.26	0.14
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	27,717		563	0	87.6	49.23	0.36
Home Health Aide	107,224		11,355	0	1,766.5	9.44	1.39
Skilled Nursing	87,531		1,019	0	158.5	85.90	1.13
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	1,023		29	0	4.5	35.28	0.01
Residential Care	151,480		2,994	0	465.8	50.59	1.96
Medical Equipment and Delivery of Goods	1,917		14	0	2.2	136.96	0.02
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$958,278		131,308	0	20,427.8	\$7.30	\$12.42
Medicaid to School Program							
Clinic Services	5,447,051		3,014,294	0	468,937.9	1.81	70.62
	\$5,447,051		3,014,294	0	468,937.9	\$1.81	\$70.62
All Medicaid Services	\$100,841,860	1,208	5,469,859	187.9	850,953.6	\$18.44	\$1,307.34
Medicare	\$0						\$0.00
Third Party Amount	\$2,192,037						\$28.42
All Services	\$103,033,897	1,208	5,469,859	187.9	850,953.6	\$18.84	\$1,335.76

Appendix F4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Bureau of Behavioral Health Consumers - Total Population

SFY 11/12
 Age All
 Gender All
 Area All
 Population All

Rate Group All
 Behavioral Health Category *Non Blank
 Waiver All
 Dual Status All
 Service Group All

Member Months: 106,345

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$1,257,961	411	1,945	46.4	219.5	\$646.77	\$11.83
Surgical	879,735	101	616	11.4	69.5	1,428.14	8.27
Maternity Delivery	193,435	80	231	9.0	26.1	837.38	1.82
Maternity Non-Delivery	21,206	12	21	1.4	2.4	1,009.79	0.20
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	4,734,940	640	5,262	72.2	593.8	899.84	44.52
Alcohol and Drug Abuse	63,332	30	113	3.4	12.8	560.46	0.60
Crossover	722,447	588	3,477	66.4	392.3	207.78	6.79
Other	62,087	2	68	0.2	7.7	913.04	0.58
	\$7,935,142	1,864	11,733	210.3	1,324.0	\$676.31	\$74.62
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$334,513	55	2,479	6.2	279.7	\$134.94	\$3.15
Intermediate Care Facility	460,445	28	2,408	3.2	271.7	191.21	4.33
Swing Beds - Skilled Nursing Facility	17,161	12	158	1.4	17.8	108.61	0.16
Swing Beds - Intermediate Care Facility	318	1	3	0.1	0.3	105.93	0.00
Skilled Nursing Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility Atypical Care	3,959	0	31	0.0	3.5	127.70	0.04
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$816,396	96	5,079	10.8	573.1	\$160.74	\$7.68
Hospital Outpatient							
Emergency Room	\$1,540,090		13,339	0	1,505.2	\$115.46	\$14.48
Surgery	1,035,058		31,308	0	3,532.8	33.06	9.73
Radiology	1,636,670		10,707	0	1,208.2	152.86	15.39
Pathology/Lab	830,311		70,931	0	8,003.9	11.71	7.81
Pharmacy	1,283,773		94,597	0	10,674.4	13.57	12.07
Cardiovascular	164,882		2,059	0	232.3	80.08	1.55
PT/OT/ST	339,922		11,597	0	1,308.6	29.31	3.20
Psychiatric	2,636		46	0	5.2	57.29	0.02
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	228,544		5,700	0	643.2	40.10	2.15
Other	724,268		19,024	0	2,146.7	38.07	6.81
	\$7,786,152		259,308	0	29,260.4	\$30.03	\$73.22
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$131,080		505	0	57.0	\$259.57	\$1.23
Physician	4,135,857		133,991	0	15,119.6	30.87	38.89
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	20,957		675	0	76.2	31.05	0.20
Certified Midwife	1,599		11	0	1.2	145.34	0.02
Family Planning	43,457		1,113	0	125.6	39.04	0.41
Audiology	1,514		180	0	20.3	8.41	0.01
Psychology	327,763		5,746	0	648.4	57.04	3.08
Physical Therapy	68,516		3,455	0	389.9	19.83	0.64
Speech Therapy	8,998		453	0	51.1	19.86	0.08
Occupational Therapy	9,582		455	0	51.3	21.06	0.09
Podiatry	30,209		694	0	78.3	43.53	0.28
Laboratory	96,022		10,306	0	1,162.9	9.32	0.90
X-Ray	76,090		1,355	0	152.9	56.16	0.72
Methadone Treatment Clinic	361,195		35,342	0	3,988.0	10.22	3.40
Medical Services Clinic	7,213		330	0	37.2	21.86	0.07
Federally Qualified and Rural Health Clinics	1,036,817		9,915	0	1,118.8	104.57	9.75
Home Health	1,093,696		132,768	0	14,981.6	8.24	10.28
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	907,241		569,892	0	64,306.8	1.59	8.53
Ambulance	396,587		19,145	0	2,160.3	20.71	3.73
Wheelchair Van	242,490		40,771	0	4,600.6	5.95	2.28
Optometry / Glasses	242,832		15,242	0	1,719.9	15.93	2.28
Private Duty Nursing	0		0	0	0.0	0.00	0.00
Personal Care	73,755		16,839	0	1,900.1	4.38	0.69
Adult Medical Day Care	241,375		8,501	0	959.3	28.39	2.27
Dental	1,726,614		32,456	0	3,662.3	53.20	16.24
Other	0		0	0	0.0	0.00	0.00
	\$11,281,461		1,040,140	0	117,369.7	\$10.85	\$106.08

Appendix F4
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Bureau of Behavioral Health Consumers - Total Population

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	*Non Blank
Gender	All	Waiver	All
Area	All	Dual Status	All
Population	All	Service Group	All

Member Months: 106,345

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$2,109,132		167,752	0	18,929.2	\$12.57	\$19.83
Single Source Brand	14,074,746		57,884	0	6,531.6	243.15	132.35
Multi-Source Brand	2,082,424		4,423	0	499.1	470.82	19.58
Other	254,807		6,020	0	679.3	42.33	2.40
	\$18,521,108		236,079	0	26,639.2	\$78.45	\$174.16
Mental Health Center							
Case Management	\$25,602,724		72,987	0	8,235.9	\$350.78	\$240.75
Long Term Support Service	29,227,621		1,056,190	0	119,180.8	27.67	274.84
Partial Hospital	1,986,680		20,544	0	2,318.2	96.70	18.68
Psychotherapy	9,050,538		205,939	0	23,238.2	43.95	85.11
Evidence Based Practice	2,136,060		89,563	0	10,106.3	23.85	20.09
Medication Management	751,572		18,757	0	2,116.5	40.07	7.07
Emergency Service 24/7	361,964		15,438	0	1,742.0	23.45	3.40
APRTP	1,645,111		33,121	0	3,737.4	49.67	15.47
Other	1,420,756		16,471	0	1,858.6	86.26	13.36
	\$72,183,025		1,529,010	0	172,533.9	\$47.21	\$678.76
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	11,845		725	0	81.8	16.34	0.11
Intensive Home and Community Service	1,152,014		12,551	0	1,416.3	91.79	10.83
Child Health Support Service	349,828		35,783	0	4,037.8	9.78	3.29
Home Based Therapy	432,480		7,694	0	868.2	56.21	4.07
Placement Services	1,076,829		11,759	0	1,326.9	91.57	10.13
Private Non-Medical Institution for Children	2,575,895		23,127	0	2,609.7	111.38	24.22
	\$5,598,890		91,639	0	10,340.6	\$61.10	\$52.65
State Plan Services - BDS							
Partners in Health	13,251		40	0	4.5	331.26	0.12
Early Intervention	13,518		58	0	6.5	233.07	0.13
Targeted Case Management	152,159		592	0	66.8	257.03	1.43
	\$178,928		690	0	77.9	\$259.32	\$1.68
Waiver Services - BDS							
Case Management *	\$385,035		1,453	0	164.0	\$264.99	\$3.62
Respite Care Services *	220,544		76,007	0	8,576.7	2.90	2.07
Environmental Modifications Services *	8,997		6	0	0.7	1,499.58	0.08
Personal Care Services	4,327,396		17,691	0	1,996.3	244.61	40.69
Community Support Services	210,438		34,291	0	3,869.4	6.14	1.98
Consolidated Developmental Services	521,017		204	0	23.0	2,554.00	4.90
Specialty Services	329,688		14,950	0	1,687.0	22.05	3.10
Day Habilitation Services	1,546,810		275,706	0	31,110.7	5.61	14.55
Supported Employment Services	194,035		35,486	0	4,004.3	5.47	1.82
Crisis Response Services	51,021		7,676	0	866.2	6.65	0.48
Assistive Technology Support Services	4,694		132	0	14.9	35.56	0.04
In-Home Support Waiver Services	451,799		311	0	35.1	1,452.73	4.25
	\$8,251,472		463,913	0	52,348.1	\$17.79	\$77.59
Waiver Services - BEAS							
Case Management *	\$616,141		72,317	0	8,160.3	\$8.52	\$5.79
Respite Care Services *	7,391		4,504	0	508.2	1.64	0.07
Environmental Modifications Services *	25,281		6	0	0.7	4,213.42	0.24
Homemaker and Other In-Home Services	377,593		73,406	0	8,283.2	5.14	3.55
Personal Care Services	1,426,104		325,600	0	36,740.8	4.38	13.41
Emergency Response System	60,488		1,786	0	201.5	33.87	0.57
Non-Medical Transportation	928		116	0	13.1	8.00	0.01
Day Care Services	77,356		1,571	0	177.3	49.24	0.73
Home Health Aide	409,306		29,936	0	3,378.0	13.67	3.85
Skilled Nursing	465,812		5,167	0	583.0	90.15	4.38
Adult Family Care	7,809		142	0	16.0	54.99	0.07
Kinship Care	21,116		298	0	33.6	70.86	0.20
Supported Housing	173,486		3,127	0	352.9	55.48	1.63
Residential Care	1,059,005		23,069	0	2,603.1	45.91	9.96
Medical Equipment and Delivery of Goods	38,018		199	0	22.5	191.05	0.36
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$4,765,832		541,244	0	61,074.1	\$8.81	\$44.81
Medicaid to School Program							
Clinic Services	5,429,730		2,528,905	0	285,362.4	2.15	51.06
	\$5,429,730		2,528,905	0	285,362.4	\$2.15	\$51.06
All Medicaid Services	\$142,748,136	1,960	6,707,740	221.2	756,903.3	\$21.28	\$1,342.31
Medicare	\$41,397,065						\$389.27
Third Party Amount	\$2,461,971						\$23.15
All Services	\$186,607,172	1,960	6,707,740	221.2	756,903.3	\$27.82	\$1,754.73

Appendix F5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Bureau of Behavioral Health Consumers - Full Duals

SFY 11/12 Rate Group All
 Age All Behavioral Health Category *Non Blank
 Gender All Waiver All
 Area All Dual Status Full Duals
 Population All Service Group All

Member Months: 28,209

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$15,324	7	35	3.0	14.9	\$437.83	\$0.54
Surgical	32,953	2	8	0.9	3.4	4,119.15	1.17
Maternity Delivery	2,265	1	3	0.4	1.3	754.95	0.08
Maternity Non-Delivery	0	0	0	0.0	0.0	0.00	0.00
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	159,770	8	190	3.4	80.8	840.90	5.66
Alcohol and Drug Abuse	1,894	1	2	0.4	0.9	947.17	0.07
Crossover	721,291	587	3,476	249.7	1,478.7	207.51	25.57
Other	0	0	0	0.0	0.0	0.00	0.00
	\$933,498	606	3,714	257.8	1,579.9	\$251.35	\$33.09
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$198,270	40	1,813	17.0	771.2	\$109.36	\$7.03
Intermediate Care Facility	392,879	19	1,964	8.1	835.5	200.04	13.93
Swing Beds - Skilled Nursing Facility	1,271	2	12	0.9	5.1	105.93	0.05
Swing Beds - Intermediate Care Facility	0	0	0	0.0	0.0	0.00	0.00
Skilled Nursing Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility Atypical Care	3,959	0	31	0.0	13.2	127.70	0.14
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$596,378	61	3,820	25.9	1,625.0	\$156.12	\$21.14
Hospital Outpatient							
Emergency Room	\$118,106		1,489	0	633.4	\$79.32	\$4.19
Surgery	65,766		2,411	0	1,025.6	27.28	2.33
Radiology	262,654		2,357	0	1,002.7	111.44	9.31
Pathology/Lab	224,949		6,996	0	2,976.1	32.15	7.97
Pharmacy	720,272		23,456	0	9,978.1	30.71	25.53
Cardiovascular	24,511		300	0	127.6	81.70	0.87
PT/OT/ST	65,332		1,494	0	635.5	43.73	2.32
Psychiatric	2,636		46	0	19.6	57.29	0.09
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	227,836		5,677	0	2,415.0	40.13	8.08
Other	51,719		1,721	0	732.1	30.05	1.83
	\$1,763,780		45,947	0	19,545.7	\$38.39	\$62.53
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$16,796		125	0	53.2	\$134.37	\$0.60
Physician	420,410		20,979	0	8,924.4	20.04	14.90
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	1,012		59	0	25.1	17.15	0.04
Certified Midwife	0		0	0	0.0	0.00	0.00
Family Planning	13,418		168	0	71.5	79.87	0.48
Audiology	175		28	0	11.9	6.25	0.01
Psychology	16,611		619	0	263.3	26.84	0.59
Physical Therapy	6,170		475	0	202.1	12.99	0.22
Speech Therapy	0		0	0	0.0	0.00	0.00
Occupational Therapy	33		5	0	2.1	6.62	0.00
Podiatry	4,097		150	0	63.8	27.31	0.15
Laboratory	4,021		541	0	230.1	7.43	0.14
X-Ray	8,965		317	0	134.9	28.28	0.32
Methodone Treatment Clinic	148,670		14,547	0	6,188.2	10.22	5.27
Medical Services Clinic	1,455		90	0	38.3	16.16	0.05
Federally Qualified and Rural Health Clinics	90,342		2,359	0	1,003.5	38.30	3.20
Home Health	192,231		9,732	0	4,140.0	19.75	6.81
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	272,603		182,620	0	77,685.8	1.49	9.66
Ambulance	35,636		1,122	0	477.3	31.76	1.26
Wheelchair Van	170,309		29,047	0	12,356.5	5.86	6.04
Optometry / Glasses	55,151		3,735	0	1,588.9	14.77	1.96
Private Duty Nursing	0		0	0	0.0	0.00	0.00
Personal Care	73,755		16,839	0	7,163.2	4.38	2.61
Adult Medical Day Care	188,958		6,878	0	2,925.9	27.47	6.70
Dental	111,250		1,798	0	764.9	61.87	3.94
Other	0		0	0	0.0	0.00	0.00
	\$1,832,067		292,233	0	124,314.8	\$6.27	\$64.95

Appendix F5
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Bureau of Behavioral Health Consumers - Full Duals

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	*Non Blank
Gender	All	Waiver	All
Area	All	Dual Status	Full Duals
Population	All	Service Group	All

Member Months: 28,209

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$108,780		19,308	0	8,213.5	\$5.63	\$3.86
Single Source Brand	220,331		1,120	0	476.4	196.72	7.81
Multi-Source Brand	47,938		126	0	53.6	380.46	1.70
Other	15,168		1,742	0	741.0	8.71	0.54
	\$392,217		22,296	0	9,484.6	\$17.59	\$13.90
Mental Health Center							
Case Management	\$7,367,847		21,930	0	9,328.9	\$335.97	\$261.19
Long Term Support Service	14,314,762		464,794	0	197,721.6	30.80	507.45
Partial Hospital	1,411,130		14,586	0	6,204.8	96.75	50.02
Psychotherapy	400,084		13,210	0	5,619.5	30.29	14.18
Evidence Based Practice	1,364,501		57,181	0	24,324.6	23.86	48.37
Medication Management	254,532		7,767	0	3,304.1	32.77	9.02
Emergency Service 24/7	226,264		9,653	0	4,106.3	23.44	8.02
APRTP	976,448		31,794	0	13,525.0	30.71	34.61
Other	63,276		1,637	0	696.4	38.65	2.24
	\$26,378,845		622,552	0	264,831.2	\$42.37	\$935.12
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	0		0	0	0.0	0.00	0.00
Intensive Home and Community Service	0		0	0	0.0	0.00	0.00
Child Health Support Service	2,650		271	0	115.3	9.78	0.09
Home Based Therapy	0		0	0	0.0	0.00	0.00
Placement Services	42,617		429	0	182.5	99.34	1.51
Private Non-Medical Institution for Children	23,091		201	0	85.5	114.88	0.82
	\$68,358		901	0	383.3	\$75.87	\$2.42
State Plan Services - BDS							
Partners in Health	0		0	0	0.0	0.00	0.00
Early Intervention	0		0	0	0.0	0.00	0.00
Targeted Case Management	20,911		82	0	34.9	255.01	0.74
	\$20,911		82	0	34.9	\$255.01	\$0.74
Waiver Services - BDS							
Case Management *	\$207,533		779	0	331.4	\$266.41	\$7.36
Respite Care Services *	2,623		809	0	344.1	3.24	0.09
Environmental Modifications Services *	7,687		5	0	2.1	1,537.49	0.27
Personal Care Services	2,481,720		10,560	0	4,492.2	235.01	87.98
Community Support Services	179,571		29,272	0	12,452.2	6.13	6.37
Consolidated Developmental Services	249,225		84	0	35.7	2,966.96	8.83
Specialty Services	55,763		1,774	0	754.7	31.43	1.98
Day Habilitation Services	829,932		154,642	0	65,784.1	5.37	29.42
Supported Employment Services	144,337		26,892	0	11,439.8	5.37	5.12
Crisis Response Services	25,190		3,788	0	1,611.4	6.65	0.89
Assistive Technology Support Services	2,311		65	0	27.7	35.56	0.08
In-Home Support Waiver Services	12,333		4	0	1.7	3,083.15	0.44
	\$4,198,225		228,674	0	97,277.0	\$18.36	\$148.83
Waiver Services - BEAS							
Case Management *	\$500,192		58,708	0	24,974.2	\$8.52	\$17.73
Respite Care Services *	6,239		3,736	0	1,589.3	1.67	0.22
Environmental Modifications Services *	22,287		5	0	2.1	4,457.30	0.79
Homemaker and Other In-Home Services	292,534		56,365	0	23,977.5	5.19	10.37
Personal Care Services	1,082,385		247,125	0	105,126.0	4.38	38.37
Emergency Response System	50,438		1,490	0	633.8	33.85	1.79
Non-Medical Transportation	928		116	0	49.3	8.00	0.03
Day Care Services	53,278		1,082	0	460.3	49.24	1.89
Home Health Aide	308,417		22,666	0	9,642.0	13.61	10.93
Skilled Nursing	390,708		4,334	0	1,843.7	90.15	13.85
Adult Family Care	7,809		142	0	60.4	54.99	0.28
Kinship Care	21,116		298	0	126.8	70.86	0.75
Supported Housing	169,664		3,049	0	1,297.0	55.65	6.01
Residential Care	857,308		19,062	0	8,108.9	44.97	30.39
Medical Equipment and Delivery of Goods	35,698		165	0	70.2	216.35	1.27
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$3,798,999		418,343	0	177,961.5	\$9.08	\$134.67
Medicaid to School Program							
Clinic Services	33,315		13,851	0	5,892.2	2.41	1.18
	\$33,315		13,851	0	5,892.2	\$2.41	\$1.18
All Medicaid Services	\$40,016,592	667	1,652,413	283.7	702,930.1	\$24.22	\$1,418.58
Medicare	\$41,397,065						\$1,467.51
Third Party Amount	\$124,945						\$4.43
All Services	\$81,538,603	667	1,652,413	283.7	702,930.1	\$49.35	\$2,890.52

Appendix F6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Bureau of Behavioral Health Consumers - Medicaid Only

SFY 11/12
 Age All
 Gender All
 Area All
 Population All

Rate Group All
 Behavioral Health Category *Non Blank
 Waiver All
 Dual Status Non Duals
 Service Group All

Member Months: 78,136

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Hospital Inpatient							
Medical	\$1,242,637	404	1,910	62.0	293.3	\$650.60	\$15.90
Surgical	846,782	99	608	15.2	93.4	1,392.73	10.84
Maternity Delivery	191,170	79	228	12.1	35.0	838.46	2.45
Maternity Non-Delivery	21,206	12	21	1.8	3.2	1,009.79	0.27
Newborn	0	0	0	0.0	0.0	0.00	0.00
Psychiatric	4,575,170	632	5,072	97.1	778.9	902.04	58.55
Alcohol and Drug Abuse	61,437	29	111	4.5	17.0	553.49	0.79
Crossover	1,156	1	1	0.2	0.2	1,156.00	0.01
Other	62,087	2	68	0.3	10.4	913.04	0.79
	\$7,001,645	1,258	8,019	193.2	1,231.5	\$873.13	\$89.61
Skilled Nursing Facility & Intermediate Care Facility							
Skilled Nursing Facility	\$136,244	15	666	2.3	102.3	\$204.57	\$1.74
Intermediate Care Facility	67,567	9	444	1.4	68.2	152.18	0.86
Swing Beds - Skilled Nursing Facility	15,890	10	146	1.5	22.4	108.83	0.20
Swing Beds - Intermediate Care Facility	318	1	3	0.2	0.5	105.93	0.00
Skilled Nursing Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility Atypical Care	0	0	0	0.0	0.0	0.00	0.00
Intermediate Care Facility for Mental Retardation	0	0	0	0.0	0.0	0.00	0.00
	\$220,018	35	1,259	5.4	193.4	\$174.76	\$2.82
Hospital Outpatient							
Emergency Room	\$1,421,985		11,850	0	1,819.9	\$120.00	\$18.20
Surgery	969,292		28,897	0	4,438.0	33.54	12.41
Radiology	1,374,015		8,350	0	1,282.4	164.55	17.58
Pathology/Lab	605,362		63,935	0	9,819.0	9.47	7.75
Pharmacy	563,501		71,141	0	10,925.7	7.92	7.21
Cardiovascular	140,371		1,759	0	270.1	79.80	1.80
PT/OT/ST	274,590		10,103	0	1,551.6	27.18	3.51
Psychiatric	0		0	0	0.0	0.00	0.00
Alcohol & Drug Abuse	0		0	0	0.0	0.00	0.00
Crossover	708		23	0	3.5	30.76	0.01
Other	672,549		17,303	0	2,657.4	38.87	8.61
	\$6,022,373		213,361	0	32,767.6	\$28.23	\$77.08
Professional and Other State Plan Services							
Ambulatory Surgery Center	\$114,284		380	0	58.4	\$300.75	\$1.46
Physician	3,715,447		113,012	0	17,356.2	32.88	47.55
Chiropractor	0		0	0	0.0	0.00	0.00
Advance Registered Nurse Practitioner	19,946		616	0	94.6	32.38	0.26
Certified Midwife	1,599		11	0	1.7	145.34	0.02
Family Planning	30,039		945	0	145.1	31.79	0.38
Audiology	1,339		152	0	23.3	8.81	0.02
Psychology	311,152		5,127	0	787.4	60.69	3.98
Physical Therapy	62,346		2,980	0	457.7	20.92	0.80
Speech Therapy	8,998		453	0	69.6	19.86	0.12
Occupational Therapy	9,548		450	0	69.1	21.22	0.12
Podiatry	26,112		544	0	83.5	48.00	0.33
Laboratory	92,001		9,765	0	1,499.7	9.42	1.18
X-Ray	67,125		1,038	0	159.4	64.67	0.86
Methodone Treatment Clinic	212,525		20,795	0	3,193.7	10.22	2.72
Medical Services Clinic	5,759		240	0	36.9	23.99	0.07
Federally Qualified and Rural Health Clinics	946,475		7,556	0	1,160.4	125.26	12.11
Home Health	901,465		123,036	0	18,895.7	7.33	11.54
Hospice	0		0	0	0.0	0.00	0.00
Durable Medical Equipment	634,638		387,272	0	59,476.6	1.64	8.12
Ambulance	360,951		18,023	0	2,767.9	20.03	4.62
Wheelchair Van	72,181		11,724	0	1,800.6	6.16	0.92
Optometry / Glasses	187,681		11,507	0	1,767.2	16.31	2.40
Private Duty Nursing	0		0	0	0.0	0.00	0.00
Personal Care	0		0	0	0.0	0.00	0.00
Adult Medical Day Care	52,417		1,623	0	249.3	32.30	0.67
Dental	1,615,364		30,658	0	4,708.4	52.69	20.67
Other	0		0	0	0.0	0.00	0.00
	\$9,449,393		747,907	0	114,862.3	\$12.63	\$120.94

Appendix F6
 New Hampshire Department of Health and Human Services
 State Health Care Innovation Model (SIM) Baseline Summaries
 Fee-For-Service Base Experience Data
 SFY 2012 Bureau of Behavioral Health Consumers - Medicaid Only

SFY	11/12	Rate Group	All
Age	All	Behavioral Health Category	*Non Blank
Gender	All	Waiver	All
Area	All	Dual Status	Non Duals
Population	All	Service Group	All

Member Months: 78,136

Benefits	Total Paid Dollars	Total Admits	Total Services	Admits Per 1,000	Utilization Per 1,000	Average Paid Charge	Per Capita Monthly Paid Cost
Prescription Drugs							
Generic Scripts	\$2,000,352		148,444	0	22,797.8	\$13.48	\$25.60
Single Source Brand	13,854,414		56,764	0	8,717.7	244.07	177.31
Multi-Source Brand	2,034,486		4,297	0	659.9	473.47	26.04
Other	239,638		4,278	0	657.0	56.02	3.07
	\$18,128,891		213,783	0	32,832.4	\$84.80	\$232.02
Mental Health Center							
Case Management	\$18,234,877		51,057	0	7,841.3	\$357.15	\$233.37
Long Term Support Service	14,912,858		591,396	0	90,825.6	25.22	190.86
Partial Hospital	575,550		5,958	0	915.0	96.60	7.37
Psychotherapy	8,650,455		192,729	0	29,599.0	44.88	110.71
Evidence Based Practice	771,559		32,382	0	4,973.2	23.83	9.87
Medication Management	497,040		10,990	0	1,687.8	45.23	6.36
Emergency Service 24/7	135,700		5,785	0	888.5	23.46	1.74
APRTP	668,662		1,327	0	203.8	503.89	8.56
Other	1,357,480		14,834	0	2,278.2	91.51	17.37
	\$45,804,180		906,458	0	139,212.3	\$50.53	\$586.21
State Plan Services - DCYF							
Day Habilitation Center	\$0		0	0	0.0	\$0.00	\$0.00
Crisis Intervention	11,845		725	0	111.3	16.34	0.15
Intensive Home and Community Service	1,152,014		12,551	0	1,927.6	91.79	14.74
Child Health Support Service	347,178		35,512	0	5,453.9	9.78	4.44
Home Based Therapy	432,480		7,694	0	1,181.6	56.21	5.53
Placement Services	1,034,212		11,330	0	1,740.0	91.28	13.24
Private Non-Medical Institution for Children	2,552,804		22,926	0	3,520.9	111.35	32.67
	\$5,530,532		90,738	0	13,935.4	\$60.95	\$70.78
State Plan Services - BDS							
Partners in Health	13,251		40	0	6.1	331.26	0.17
Early Intervention	13,518		58	0	8.9	233.07	0.17
Targeted Case Management	131,249		510	0	78.3	257.35	1.68
	\$158,017		608	0	93.4	\$259.90	\$2.02
Waiver Services - BDS							
Case Management *	\$177,502		674	0	103.5	\$263.36	\$2.27
Respite Care Services *	217,922		75,198	0	11,548.8	2.90	2.79
Environmental Modifications Services *	1,310		1	0	0.2	1,310.00	0.02
Personal Care Services	1,845,676		7,131	0	1,095.2	258.82	23.62
Community Support Services	30,867		5,019	0	770.8	6.15	0.40
Consolidated Developmental Services	271,792		120	0	18.4	2,264.93	3.48
Specialty Services	273,925		13,176	0	2,023.5	20.79	3.51
Day Habilitation Services	716,878		121,064	0	18,592.8	5.92	9.17
Supported Employment Services	49,697		8,594	0	1,319.9	5.78	0.64
Crisis Response Services	25,831		3,888	0	597.1	6.64	0.33
Assistive Technology Support Services	2,383		67	0	10.3	35.56	0.03
In-Home Support Waiver Services	439,466		307	0	47.1	1,431.49	5.62
	\$4,053,247		235,239	0	36,127.6	\$17.23	\$51.87
Waiver Services - BEAS							
Case Management *	\$115,949		13,609	0	2,090.0	\$8.52	\$1.48
Respite Care Services *	1,152		768	0	117.9	1.50	0.01
Environmental Modifications Services *	2,994		1	0	0.2	2,994.00	0.04
Homemaker and Other In-Home Services	85,059		17,041	0	2,617.1	4.99	1.09
Personal Care Services	343,719		78,475	0	12,052.1	4.38	4.40
Emergency Response System	10,050		296	0	45.5	33.95	0.13
Non-Medical Transportation	0		0	0	0.0	0.00	0.00
Day Care Services	24,078		489	0	75.1	49.24	0.31
Home Health Aide	100,889		7,270	0	1,116.5	13.88	1.29
Skilled Nursing	75,103		833	0	127.9	90.16	0.96
Adult Family Care	0		0	0	0.0	0.00	0.00
Kinship Care	0		0	0	0.0	0.00	0.00
Supported Housing	3,822		78	0	12.0	49.00	0.05
Residential Care	201,698		4,007	0	615.4	50.34	2.58
Medical Equipment and Delivery of Goods	2,320		34	0	5.2	68.25	0.03
MFP Direct Care Worker Training	0		0	0	0.0	0.00	0.00
	\$966,833		122,901	0	18,874.9	\$7.87	\$12.37
Medicaid to School Program							
Clinic Services	5,396,415		2,515,054	0	386,257.9	2.15	69.06
	\$5,396,415		2,515,054	0	386,257.9	\$2.15	\$69.06
All Medicaid Services	\$102,731,544	1,293	5,055,327	198.6	776,388.9	\$20.32	\$1,314.78
Medicare	\$0						\$0.00
Third Party Amount	\$2,337,026						\$29.91
All Services	\$105,068,570	1,293	5,055,327	198.6	776,388.9	\$20.78	\$1,344.69



APPENDIX G

Population Overlap Summary

Appendix G1
New Hampshire Department of Health and Human Services
Summary of Member Months by Population and Waiver
SFY 2011 and SFY 2012 Combined

Population	Waiver					Total
	Choices For Independence	Developmental Disabilities	Acquired Brain Disorders	In-Home Supports	None	
Nursing Home Residents						
Non-Dual Eligibles	148	347	66	39	4,847	5,447
Dual Eligibles	1,485	612	195	0	99,868	102,160
Total	1,633	959	261	39	104,715	107,607
BBH Consumers						
Non-Dual Eligibles	1,340	4,617	12	764	148,538	155,271
Dual Eligibles	5,599	2,025	137	5	48,816	56,582
Total	6,939	6,642	149	769	197,354	211,853
Other						
Non-Dual Eligibles	9,028	47,110	916	6,361	2,278,884	2,342,299
Dual Eligibles	51,332	49,647	3,323	19	149,690	254,011
Total	60,360	96,757	4,239	6,380	2,428,574	2,596,310
Total						
Non-Dual Eligibles	10,516	52,074	994	7,164	2,432,269	2,503,017
Dual Eligibles	58,416	52,284	3,655	24	298,374	412,753
Grand Total	68,932	104,358	4,649	7,188	2,730,643	2,915,770

Appendix G2
New Hampshire Department of Health and Human Services
Summary of Member Counts by Population and Waiver
SFY 2011 and SFY 2012 Combined

Population	Waiver					Total
	Choices For Independence	Developmental Disabilities	Acquired Brain Disorders	In-Home Supports	None	
Nursing Home Residents						
Non-Dual Eligibles	79	37	14	5	547	682
Dual Eligibles	699	60	11	0	5,622	6,392
Total	778	97	25	5	6,169	7,074
BBH Consumers						
Non-Dual Eligibles	97	281	1	32	10,950	11,361
Dual Eligibles	388	130	10	1	3,708	4,237
Total	485	411	11	33	14,658	15,598
Other						
Non-Dual Eligibles	501	2,044	45	246	115,435	118,271
Dual Eligibles	2,585	1,826	133	2	11,032	15,578
Total	3,086	3,870	178	248	126,467	133,849
Total						
Non-Dual Eligibles	677	2,362	60	283	126,932	130,314
Dual Eligibles	3,672	2,016	154	3	20,362	26,207
Grand Total	4,349	4,378	214	286	147,294	156,521

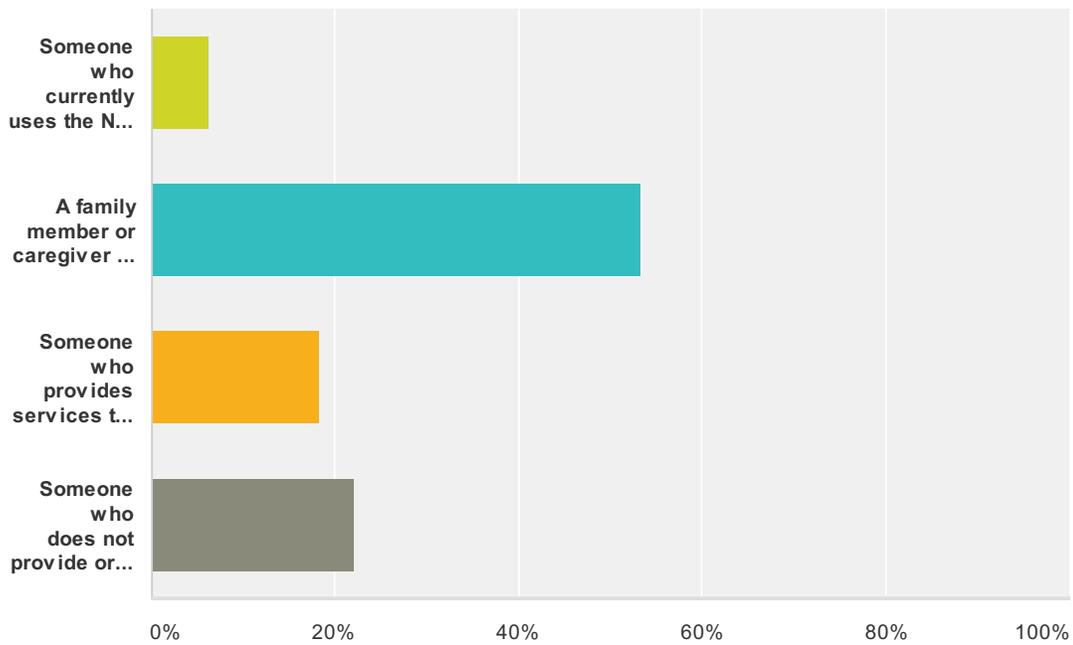
Appendix B

Online Consumer Survey Results

NH Medicaid Long-Term-Care Program Survey

Q1 Would you describe yourself as:

Answered: 901 Skipped: 0

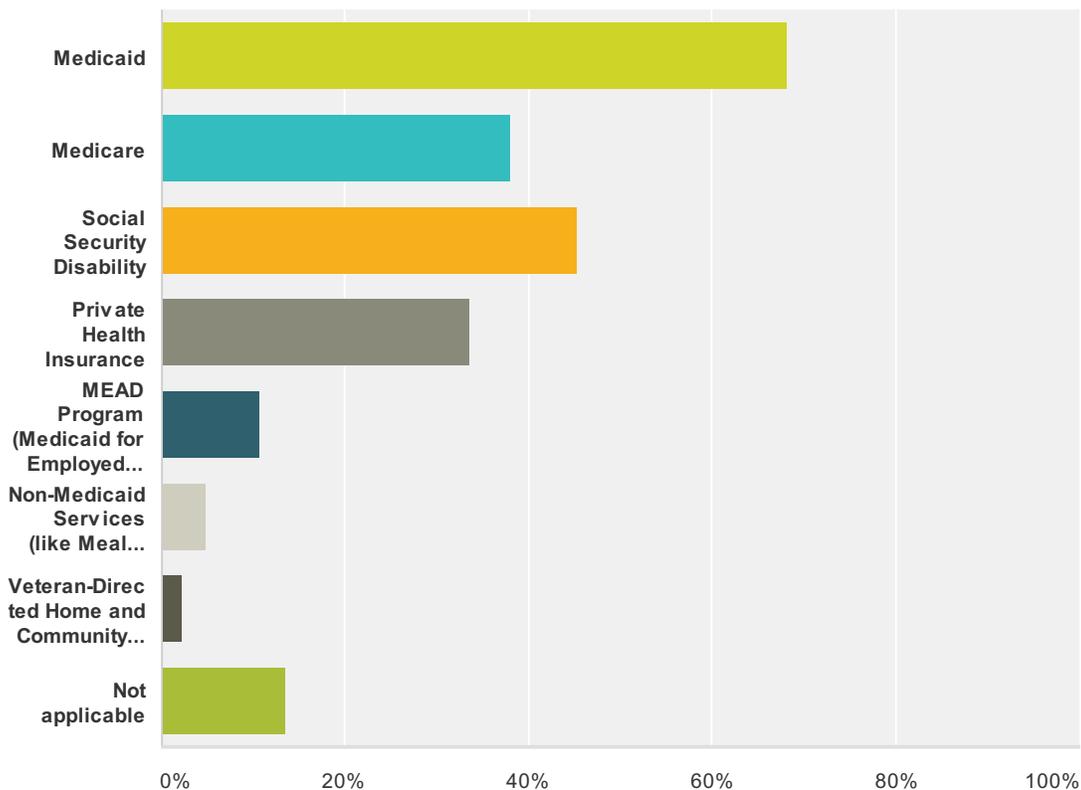


Answer Choices	Responses
Someone who currently uses the NH Medicaid Long-Term-Care system	6.33% 57
A family member or caregiver or guardian of someone who uses the Medicaid Long-Term-Care system	53.16% 479
Someone who provides services to people who use the Medicaid Long-Term-Care system	18.42% 166
Someone who does not provide or receive Medicaid Long-Term Care services or supports but who has an interest in how the NH Medicaid program operates	22.09% 199
Total	901

NH Medicaid Long-Term-Care Program Survey

Q2 Do you or your family member currently use (please check all that apply)

Answered: 818 Skipped: 83



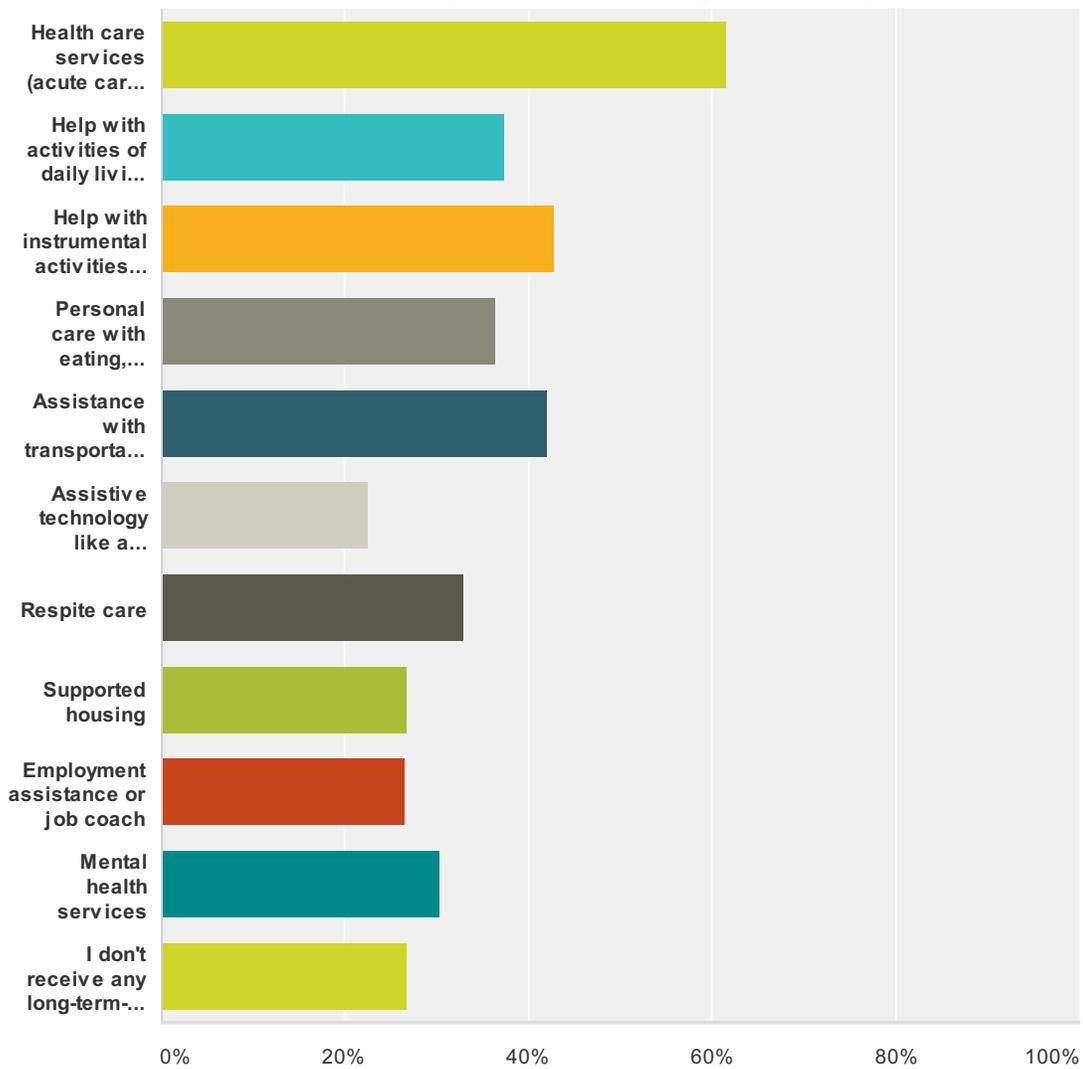
Answer Choices	Responses	
Medicaid	67.97%	556
Medicare	38.02%	311
Social Security Disability	45.11%	369
Private Health Insurance	33.62%	275
MEAD Program (Medicaid for Employed Adults with Disabilities)	10.76%	88
Non-Medicaid Services (like Meals on Wheels or non-medical Adult Day Care)	4.89%	40
Veteran-Directed Home and Community Based Services	2.20%	18
Not applicable	13.57%	111
Total Respondents: 818		

Q3 Medicaid long-term care services are different than the "acute care" or health care services that Medicaid also pays for.

Long term care services are used by people with developmental or physical disabilities, mental health needs or older adults who need assistance to stay in their homes. Long-term-care services include assistance with services like: - Activities of daily living (ADLs) - Instrumental activities of daily living (IADLs) - Personal care - Respite care - Supportive housing - Transportation - Assistive technology - Mental health services - Employment assistance - Transportation assistance
Please check any services you may receive with support of the Medicaid program.

Answered: 735 Skipped: 166

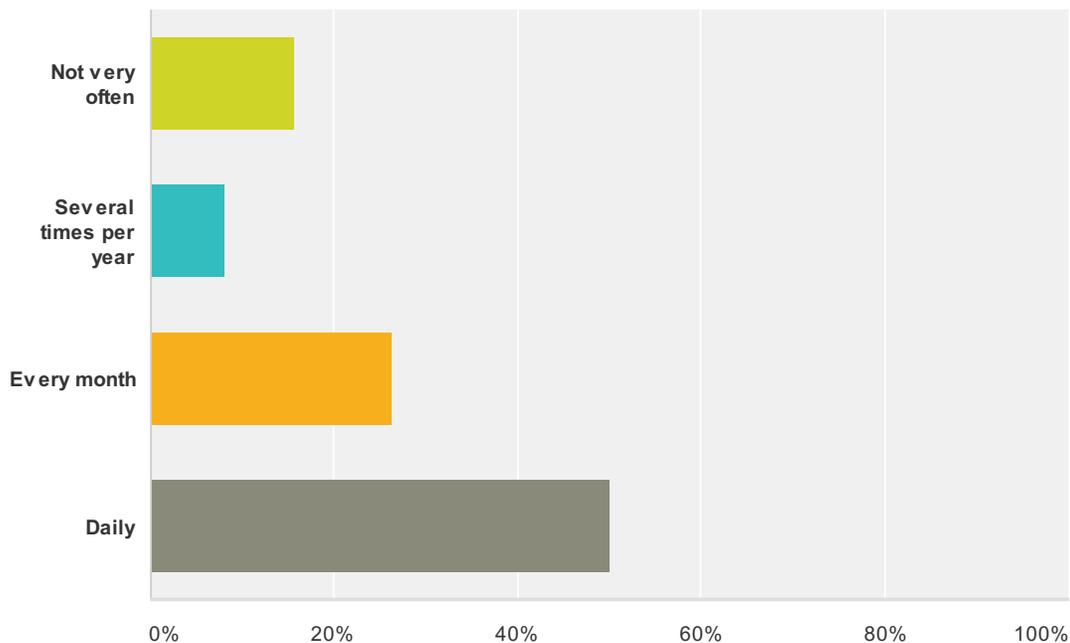
NH Medicaid Long-Term-Care Program Survey



Answer Choices	Responses
Health care services (acute care) like doctor's visits and medications	61.50% 452
Help with activities of daily living like eating, dressing, grooming, bathing	37.41% 275
Help with instrumental activities of daily living like shopping, laundry, housekeeping, handling finances	42.72% 314
Personal care with eating, dressing, shopping or other daily activities	36.33% 267
Assistance with transportation to where you need to go like doctor's appointments, shopping or work	42.04% 309
Assistive technology like a wheelchair or screen reader or another adaptive device	22.45% 165
Respite care	32.93% 242
Supported housing	26.80% 197
Employment assistance or job coach	26.53% 195
Mental health services	30.34% 223
I don't receive any long-term-care services	26.80% 197
Total Respondents: 735	

Q4 How frequently do you use services paid for by the NH Medicaid program?

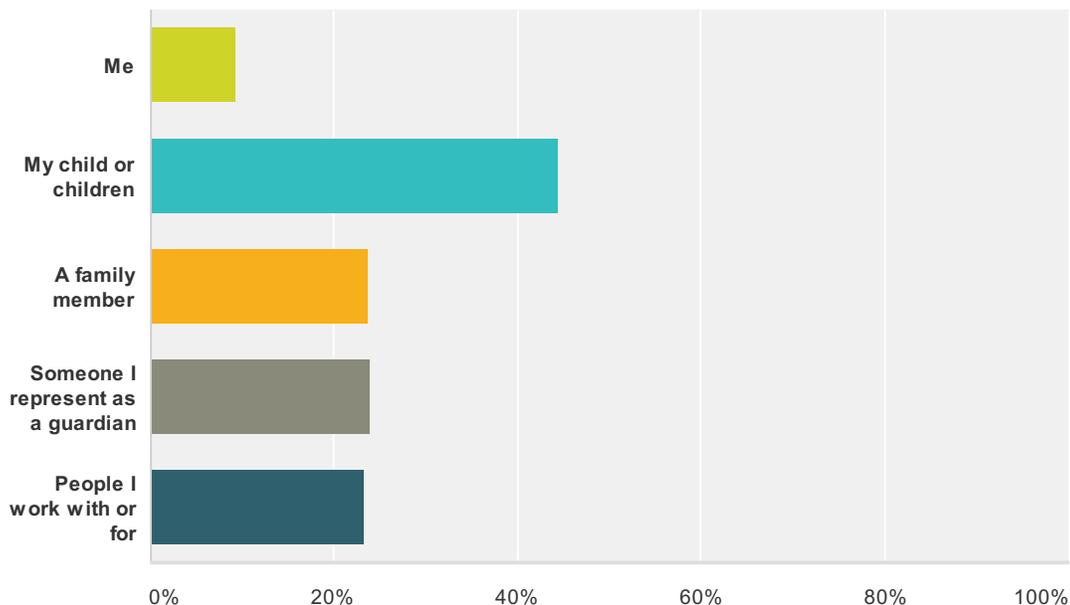
Answered: 620 Skipped: 281



Answer Choices	Responses
Not very often	15.65% 97
Several times per year	8.06% 50
Every month	26.29% 163
Daily	50% 310
Total	620

Q5 Who uses services paid for by the NH Medicaid program?

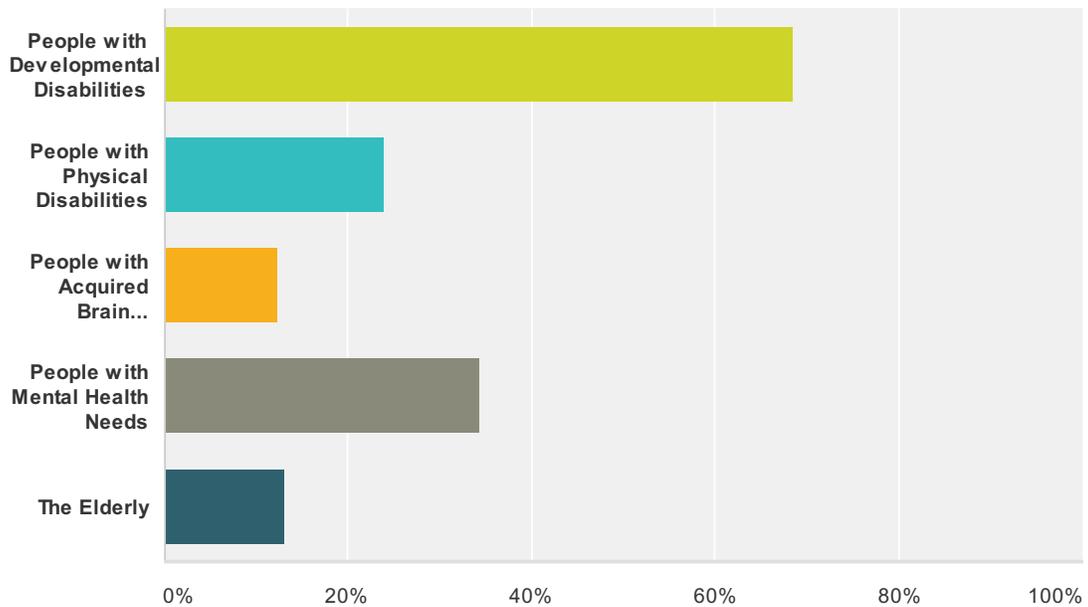
Answered: 673 Skipped: 228



Answer Choices	Responses
Me	9.21% 62
My child or children	44.28% 298
A family member	23.77% 160
Someone I represent as a guardian	23.92% 161
People I work with or for	23.33% 157
Total Respondents: 673	

Q6 Which Medicaid Long-Term-Care consumer population do you or your family member represent?

Answered: 682 Skipped: 219

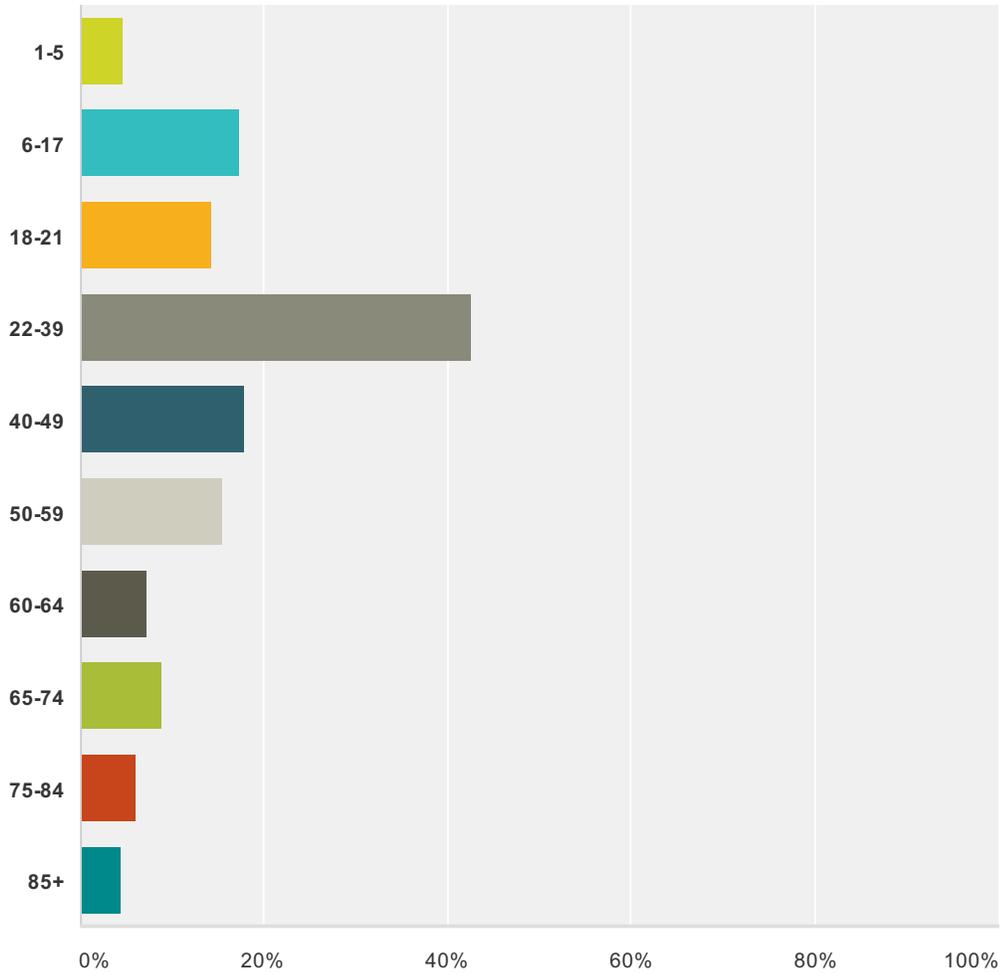


Answer Choices	Responses
People with Developmental Disabilities	68.33% 466
People with Physical Disabilities	23.90% 163
People with Acquired Brain Disorders	12.32% 84
People with Mental Health Needs	34.46% 235
The Elderly	13.20% 90
Total Respondents: 682	

NH Medicaid Long-Term-Care Program Survey

Q7 What age is the person (either you, your family member or your ward) who receives Long-Term-Care services through the Medicaid program?

Answered: 633 Skipped: 268



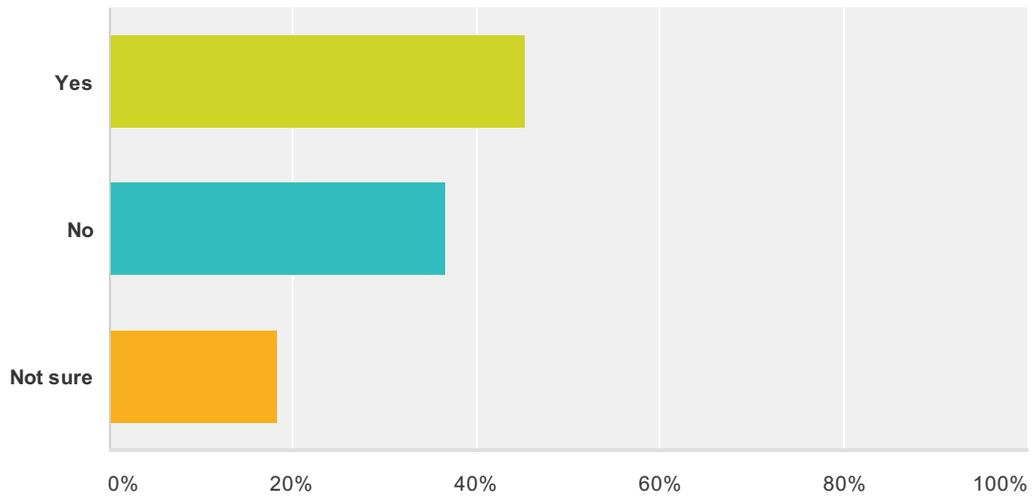
Answer Choices	Responses
1-5	4.74% 30
6-17	17.38% 110
18-21	14.38% 91
22-39	42.65% 270
40-49	18.01% 114
50-59	15.48% 98
60-64	7.27% 46
65-74	8.85% 56
75-84	6.16% 39
85+	4.58% 29

NH Medicaid Long-Term-Care Program Survey

Total Respondents: 633

Q8 Have you ever been on a waiting list for services?

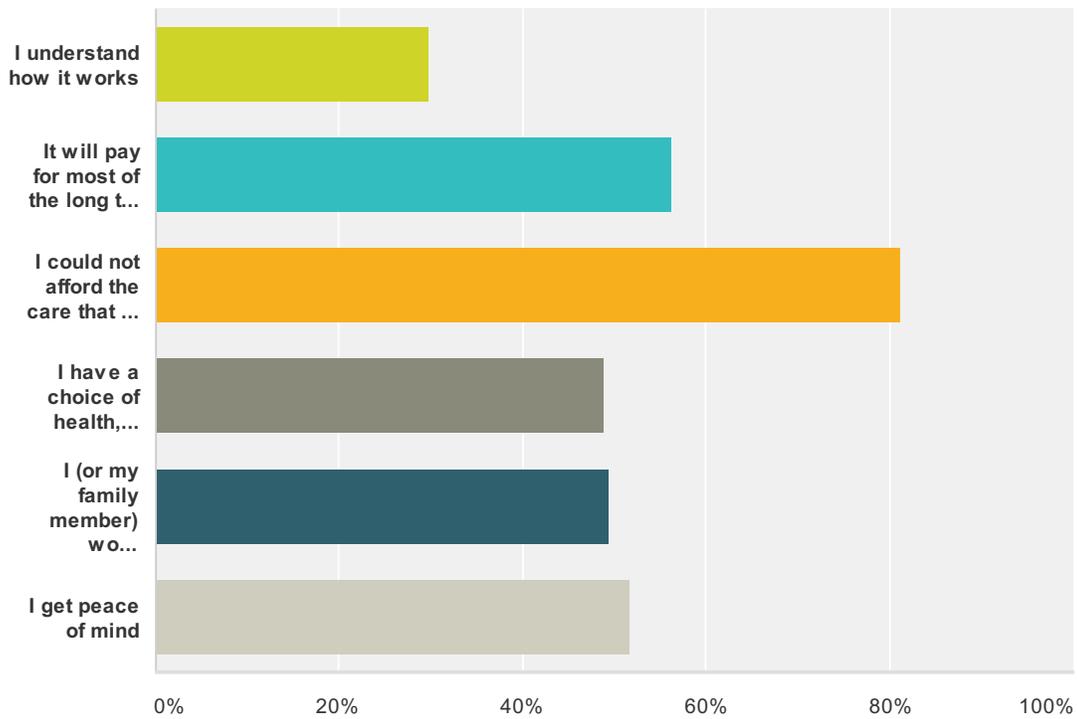
Answered: 652 Skipped: 249



Answer Choices	Responses
Yes	45.09% 294
No	36.66% 239
Not sure	18.25% 119
Total	652

**Q9 What do you like about the current NH Medicaid Long-Term-Care program?
(Choose all that apply)**

Answered: 586 Skipped: 315



Answer Choices	Responses	
I understand how it works	29.69%	174
It will pay for most of the long term care services that I (or my family member) needs	56.14%	329
I could not afford the care that I (or my family member) needs without it	81.06%	475
I have a choice of health, in-home or direct support providers	48.81%	286
I (or my family member) would not be able to stay in my (their) home without it	49.49%	290
I get peace of mind	51.54%	302
Total Respondents: 586		

NH Medicaid Long-Term-Care Program Survey

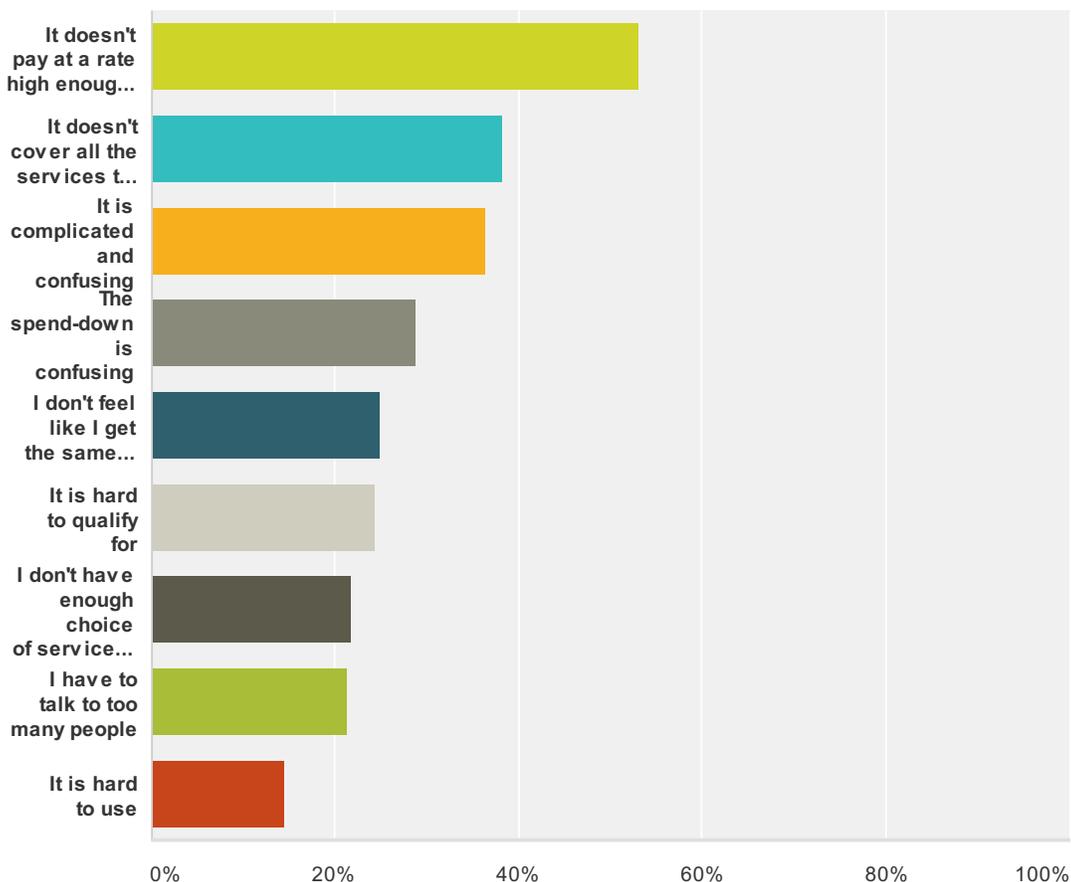
Q10 Is there anything else that you like about the current Medicaid Long-Term-Care program that you would like to tell us about?

Answered: 256 Skipped: 645

NH Medicaid Long-Term-Care Program Survey

Q11 What don't you like about the current NH Medicaid Long-Term-Care program? (Choose all that apply)

Answered: 481 Skipped: 420



Answer Choices	Responses
It doesn't pay at a rate high enough to keep good personal care attendants or direct support providers	53.01% 255
It doesn't cover all the services that I, or my family, needs	38.25% 184
It is complicated and confusing	36.38% 175
The spend-down is confusing	28.69% 138
I don't feel like I get the same quality of care as other people who have private insurance or who can afford to pay for services themselves	24.95% 120
It is hard to qualify for	24.32% 117
I don't have enough choice of service providers or specialists	21.83% 105
I have to talk to too many people	21.41% 103

NH Medicaid Long-Term-Care Program Survey

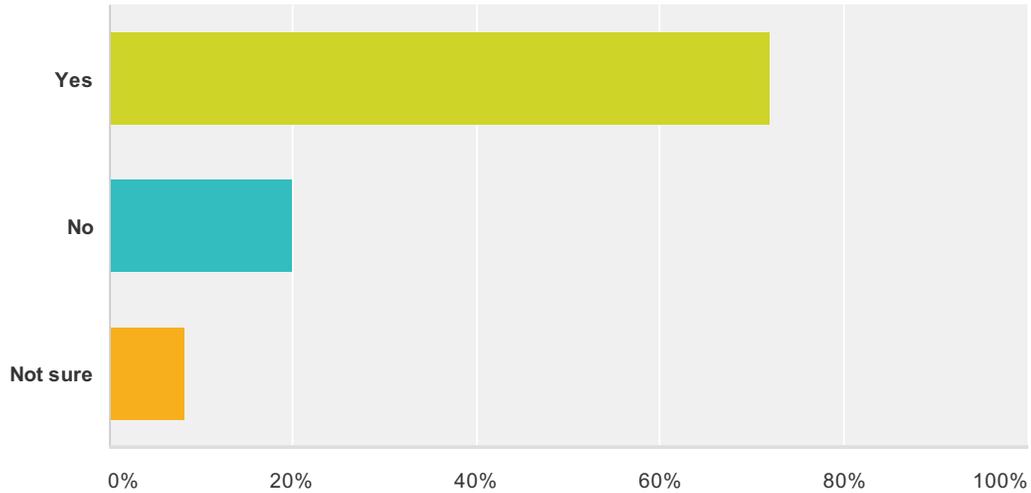
It is hard to use	14.55% 70
Total Respondents: 481	

Q12 Is there anything else that you don't like about the current NH Medicaid Long-Term-Care program that you would like to tell us about?

Answered: 180 Skipped: 721

Q13 Have you, or your family member, ever had experience with a team of service providers or professionals who meet on a regular basis to review your (or your family member's) progress and help set new goals?

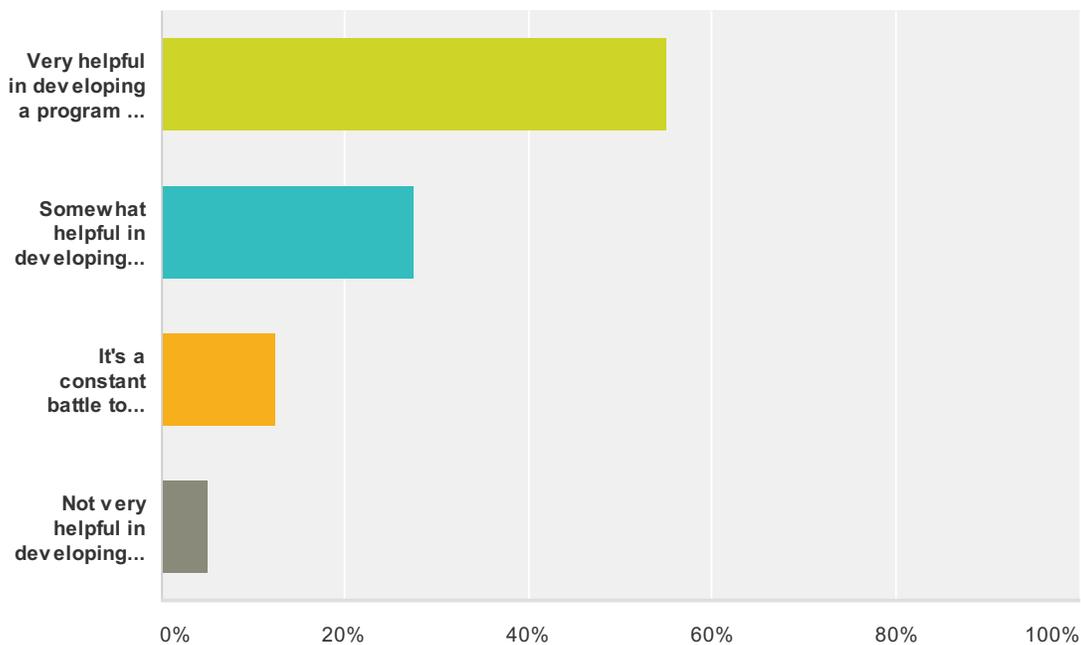
Answered: 618 Skipped: 283



Answer Choices	Responses
Yes	71.84% 444
No	19.90% 123
Not sure	8.25% 51
Total	618

Q14 What statement comes closest to your general experience with these teams of service providers?

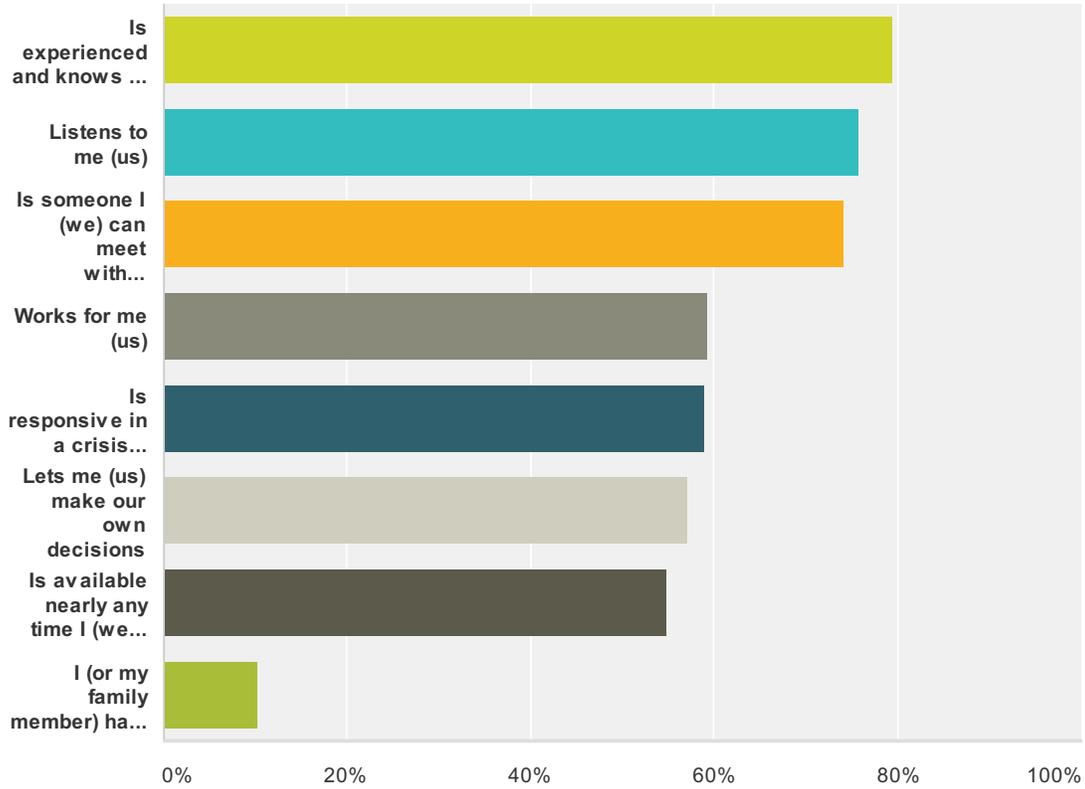
Answered: 437 Skipped: 464



Answer Choices	Responses
Very helpful in developing a program of services and supports to meet my (our) needs	54.92% 240
Somewhat helpful in developing a program of services and supports to meet my (our) needs	27.46% 120
It's a constant battle to advocate for the services and supports I (we) need	12.59% 55
Not very helpful in developing a program of services and supports to meet my (our) needs	5.03% 22
Total	437

Q15 If you have had experience with a case manager, service coordinator, or someone who serves in that role, what is important to you about that person's ability to help you meet your needs?

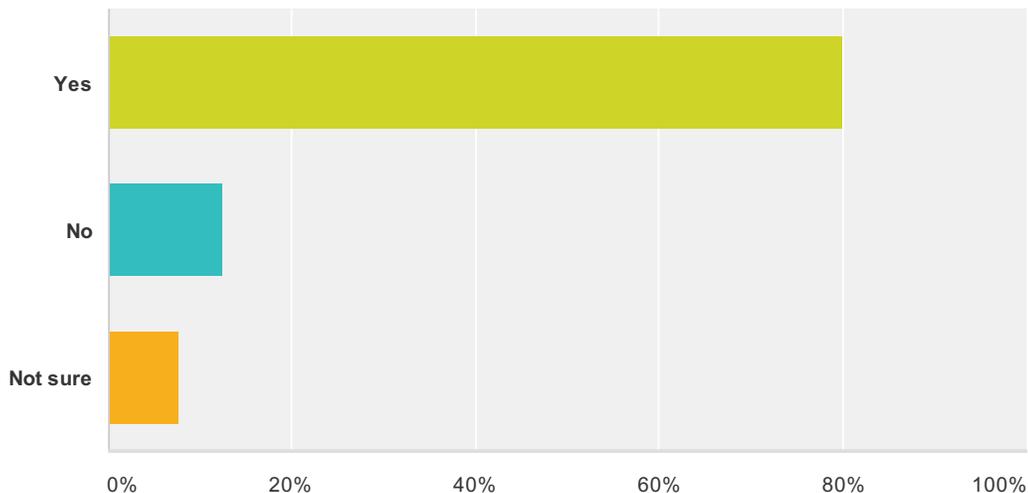
Answered: 571 Skipped: 330



Answer Choices	Responses	
Is experienced and knows how the system works	79.16%	452
Listens to me (us)	75.66%	432
Is someone I (we) can meet with face-to-face	74.08%	423
Works for me (us)	59.19%	338
Is responsive in a crisis situation	58.84%	336
Lets me (us) make our own decisions	56.92%	325
Is available nearly any time I (we) need him or her	54.82%	313
I (or my family member) has never had a case manager or service coordinator	10.33%	59
Total Respondents: 571		

Q16 Have you or your family member ever had a care plan or services plan (IEP, wrap around plan, service agreement, etc.) that outlines your goals and the services and supports that are needed to help accomplish them?

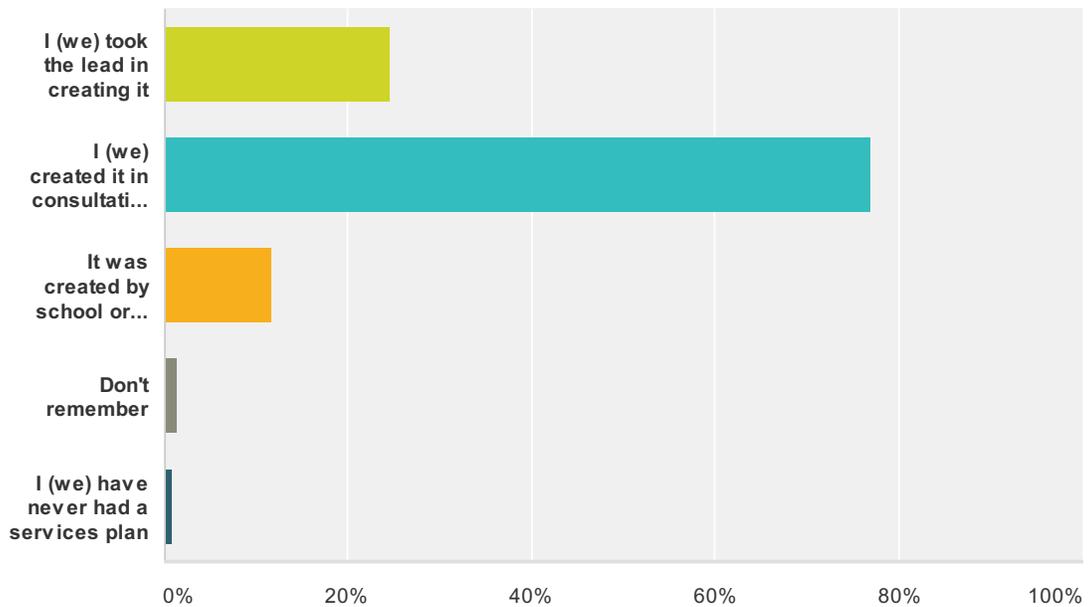
Answered: 594 Skipped: 307



Answer Choices	Responses
Yes	79.80% 474
No	12.46% 74
Not sure	7.74% 46
Total	594

Q17 If you or your family member have had, or currently have, a care or services plan, what was your role in developing it?

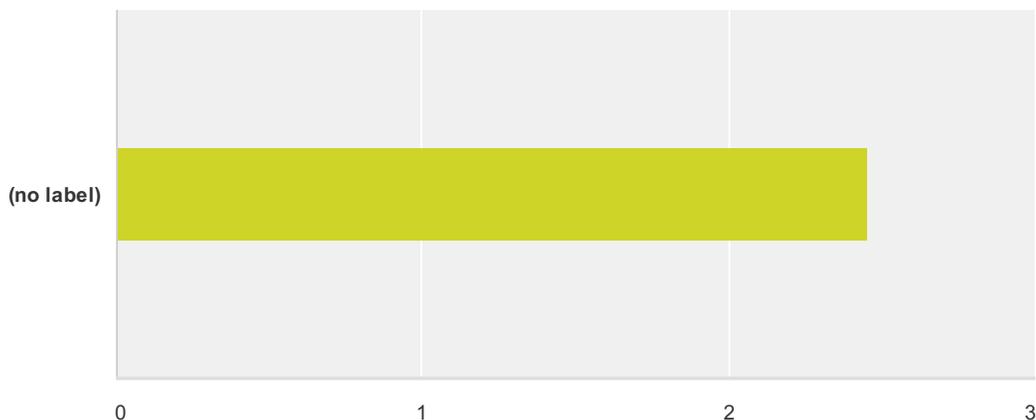
Answered: 467 Skipped: 434



Answer Choices	Responses
I (we) took the lead in creating it	24.63% 115
I (we) created it in consultation with school or agency staff members, a case manager or other professionals	76.87% 359
It was created by school or agency staff members, a case manager or other professionals and I (we) did not have much input into it	11.78% 55
Don't remember	1.50% 7
I (we) have never had a services plan	0.86% 4
Total Respondents: 467	

Q18 How satisfied are you with your current care or services plan, if you have one, or plans you have had in the past if you do not have one now?

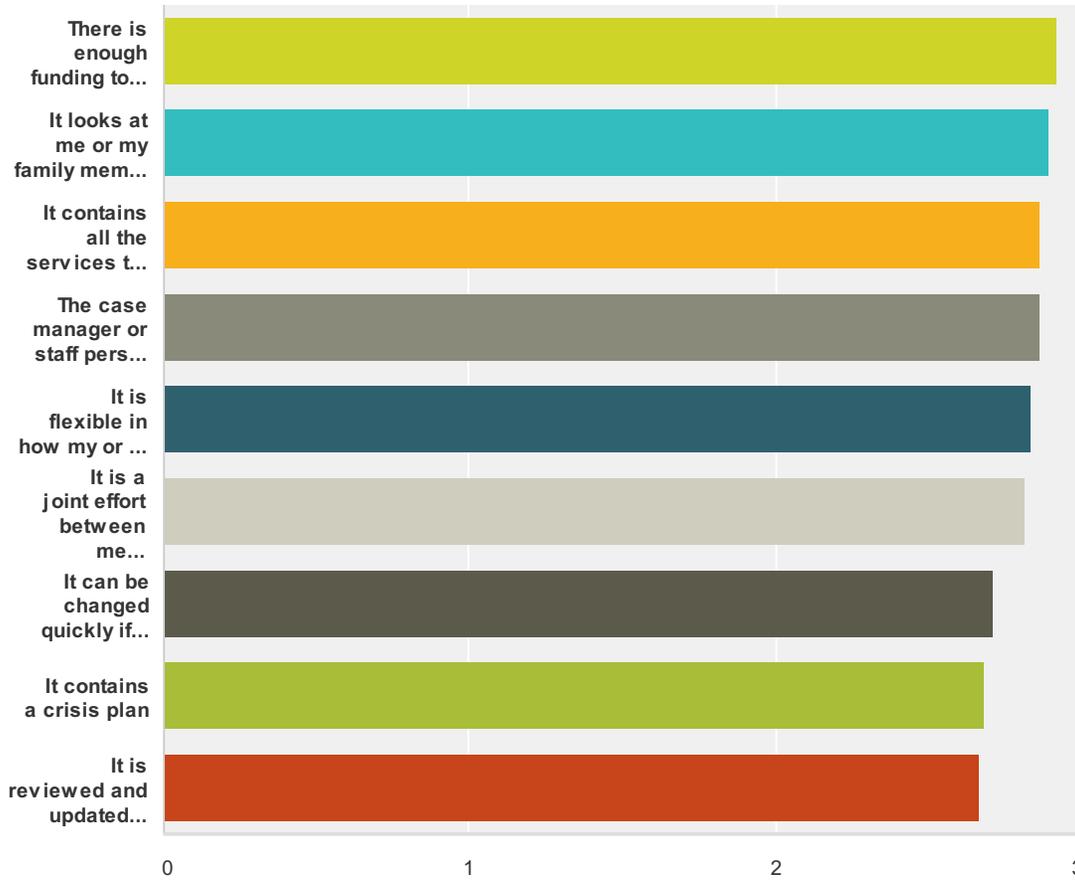
Answered: 486 Skipped: 415



	Dissatisfied	It's okay	Very satisfied	N/A	Total	Average Rating
(no label)	7.00% 34	38.07% 185	49.18% 239	5.76% 28	486	2.45

Q19 In your view, what makes a good care or services plan? Or would make a good one if you have not had one? Please rate all that apply.

Answered: 610 Skipped: 291



	Not important	Important	Very important	N/A	Total	Average Rating
There is enough funding to pay for the services I/we need	0.33% 2	7.81% 47	90.70% 546	1.16% 7	602	2.91
It looks at me or my family member as a whole person	0.67% 4	9.87% 59	87.96% 526	1.51% 9	598	2.89
It contains all the services that I/we need	0.17% 1	13.26% 79	85.40% 509	1.17% 7	596	2.86
The case manager or staff person who helps create the plan knows how the system works	0.33% 2	12.87% 78	85.31% 517	1.49% 9	606	2.86
It is flexible in how my or my family member's needs are met	0.83% 5	14.86% 89	82.97% 497	1.34% 8	599	2.83
It is a joint effort between me and the school or agency that I work with	1.19% 7	16.52% 97	79.39% 466	2.90% 17	587	2.81
It can be changed quickly if needed	1.35% 8	26.09% 155	71.55% 425	1.01% 6	594	2.71
It contains a crisis plan	3.23% 19	22.96% 135	66.67% 392	7.14% 42	588	2.68

NH Medicaid Long-Term-Care Program Survey

It is reviewed and updated regularly	2.18% 13	29.58% 176	66.89% 398	1.34% 8	595	2.66
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NH Medicaid Long-Term-Care Program Survey

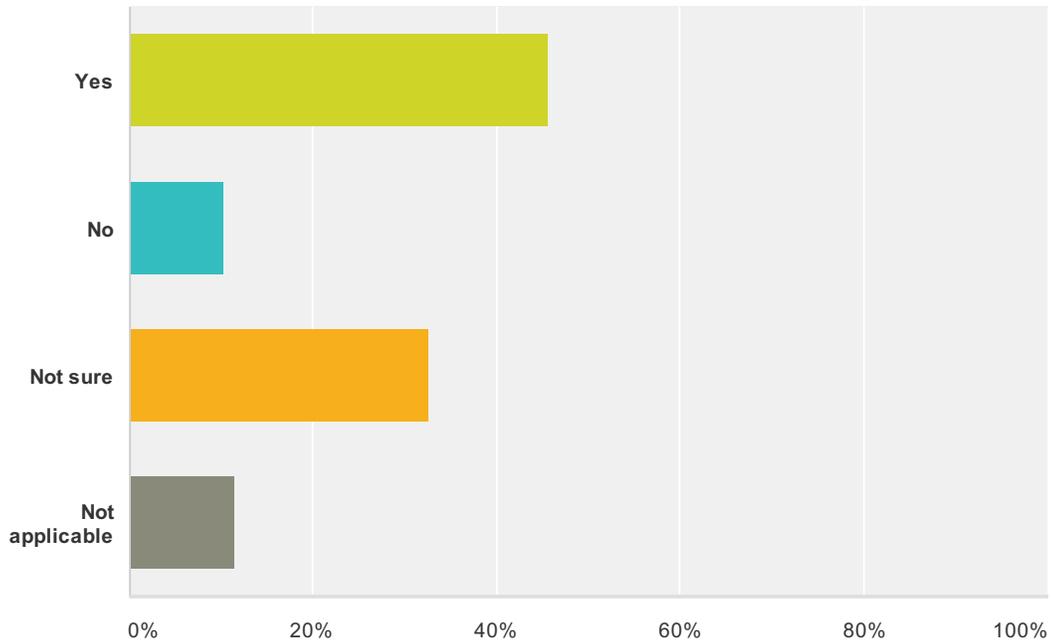
Q20 Have you ever had a bad experience with a care or services plan? Please rate all that apply.

Answered: 519 Skipped: 382

	Never happened to me	Has happened once	Has happened a few times	Often happens	Total	Average Rating
There was not enough funding to pay for the services I/we need	34.29% 168	14.90% 73	29.80% 146	21.02% 103	490	2.38
It did not include all the services that I/we need	38.95% 192	17.04% 84	28.60% 141	15.42% 76	493	2.20
It was a constant fight to get the right services	41.99% 207	15.62% 77	24.14% 119	18.26% 90	493	2.19
It did not contain a crisis plan	51.07% 238	16.52% 77	13.52% 63	18.88% 88	466	2.00
A need identified in the service plan was not available locally	50.72% 248	18.00% 88	20.04% 98	11.25% 55	489	1.92
It was inflexible in how my or my family member's needs are/were met	52.88% 257	13.37% 65	23.25% 113	10.49% 51	486	1.91
I found the process intimidating	52.64% 259	17.07% 84	19.92% 98	10.37% 51	492	1.88
The case manager or staff person who helped create the plan did not know how the system works	55.08% 271	17.89% 88	18.70% 92	8.33% 41	492	1.80
It was never reviewed or followed	58.61% 286	13.32% 65	20.08% 98	7.99% 39	488	1.77
It looked at me or my family member as a number, not a person	65.53% 327	13.23% 66	13.43% 67	7.82% 39	499	1.64
It could not be changed when needed	66.46% 319	11.25% 54	15.83% 76	6.46% 31	480	1.62
I had minimal involvement in creating the plan	67.55% 331	13.06% 64	13.67% 67	5.71% 28	490	1.58

Q21 Does your services plan have an annual, individualized budget or some type of annual services account? (Or did it if you do not have a plan now?)

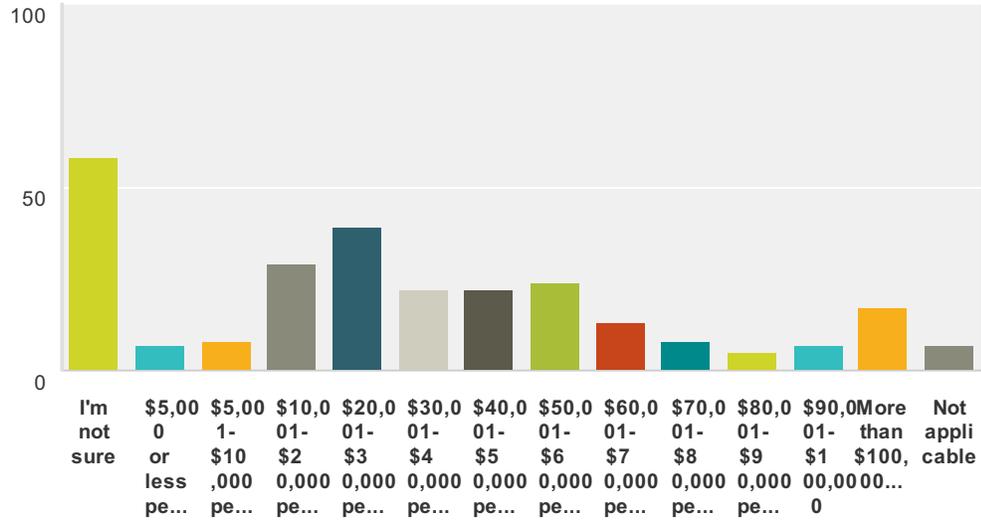
Answered: 573 Skipped: 328



Answer Choices	Responses
Yes	45.55% 261
No	10.30% 59
Not sure	32.64% 187
Not applicable	11.52% 66
Total	573

Q22 What do you estimate the annual budget is for the services in your plan? (Or for the annual services you receive through Medicaid.)

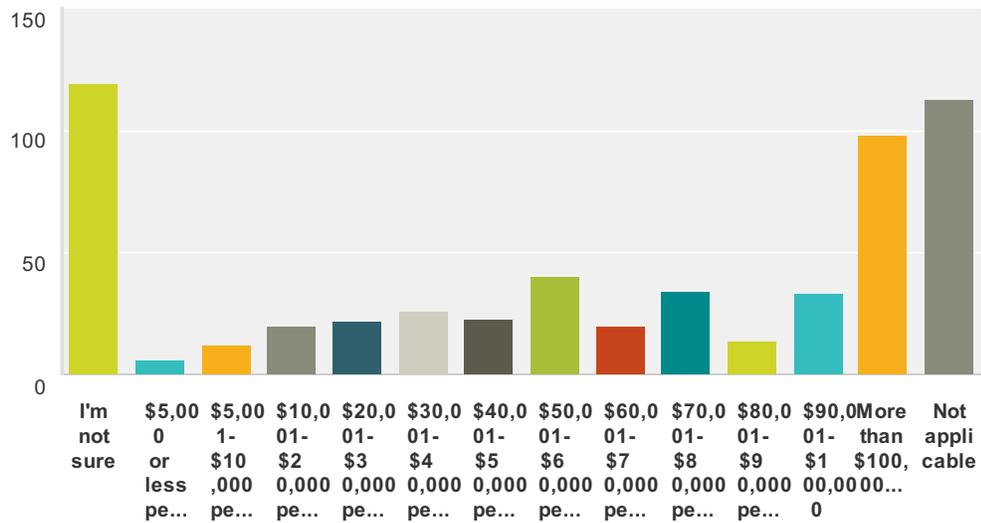
Answered: 266 Skipped: 635



Answer Choices	Responses	
I'm not sure	21.80%	58
\$5,000 or less per year	2.63%	7
\$5,001-\$10,000 per year	3.01%	8
\$10,001-\$20,000 per year	10.90%	29
\$20,001-\$30,000 per year	14.66%	39
\$30,001-\$40,000 per year	8.27%	22
\$40,001-\$50,000 per year	8.27%	22
\$50,001-\$60,000 per year	9.02%	24
\$60,001-\$70,000 per year	4.89%	13
\$70,001-\$80,000 per year	3.01%	8
\$80,001-\$90,000 per year	1.88%	5
\$90,001-\$100,000 per year	2.63%	7
More than \$100,000 per year	6.39%	17
Not applicable	2.63%	7
Total		266

Q23 What would you estimate that you or your family save the state of NH by caring for yourself or your family member in your home and avoiding institutionalization, out-of-home placement or placement in a hospital or nursing home? This might include the value of the direct care you provide, services and supports provided by other family members, friends, volunteers, etc.

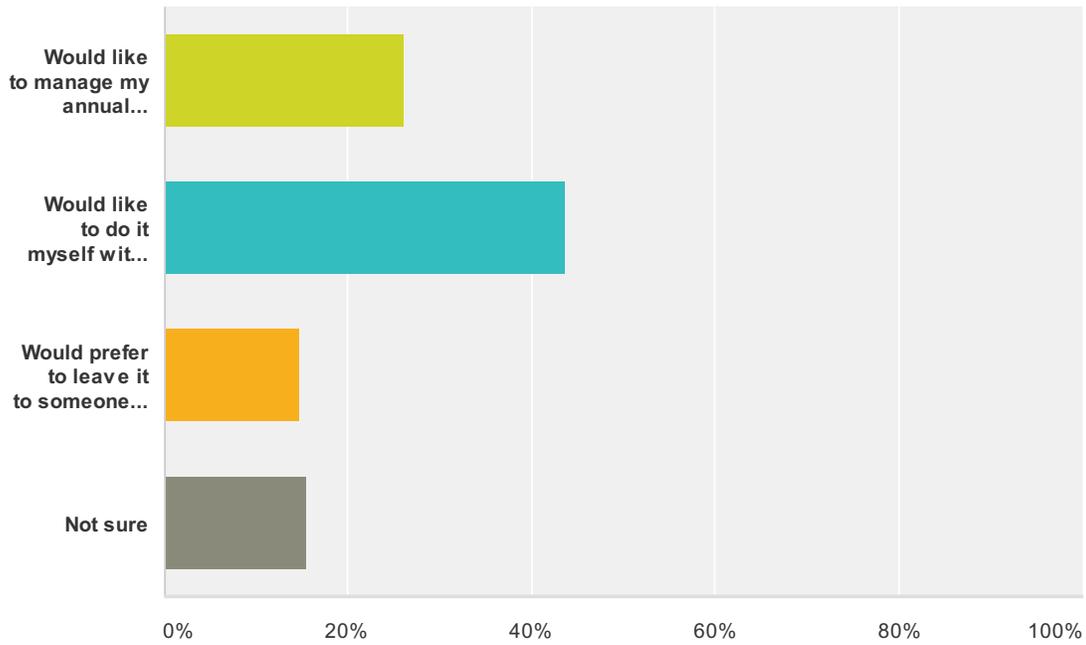
Answered: 579 Skipped: 322



Answer Choices	Responses	Count
I'm not sure	20.55%	119
\$5,000 or less per year	1.04%	6
\$5,001-\$10,000 per year	2.07%	12
\$10,001-\$20,000 per year	3.45%	20
\$20,001-\$30,000 per year	3.80%	22
\$30,001-\$40,000 per year	4.49%	26
\$40,001-\$50,000 per year	3.97%	23
\$50,001-\$60,000 per year	6.91%	40
\$60,001-\$70,000 per year	3.45%	20
\$70,001-\$80,000 per year	5.87%	34
\$80,001-\$90,000 per year	2.42%	14
\$90,001-\$100,000 per year	5.70%	33
More than \$100,000 per year	16.93%	98
Not applicable	19.34%	112
Total		579

Q24 If you were to have a flexible annual services account and budget through Medicaid, would you prefer to have the ability to manage it yourself and move money around in the account to spend more on services which are more important to you and less on services that are not as important? Or would you rather leave that to someone else and perhaps have less flexibility?

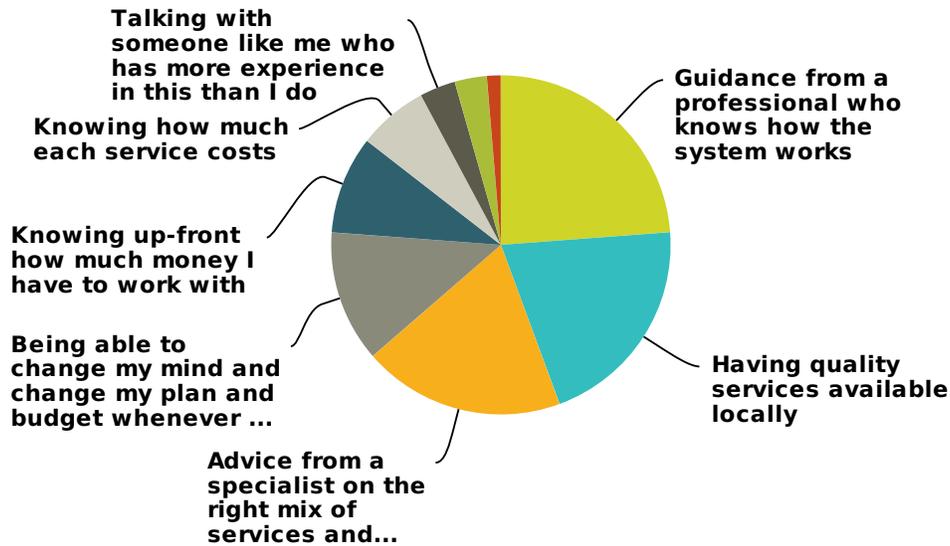
Answered: 545 Skipped: 356



Answer Choices	Responses
Would like to manage my annual services account and budget myself	26.24% 143
Would like to do it myself with help	43.49% 237
Would prefer to leave it to someone else	14.68% 80
Not sure	15.60% 85
Total	545

Q25 If you could only choose one thing, what would help you the most in developing and managing a flexible, annual Medicaid services account and budget for yourself or your family member?

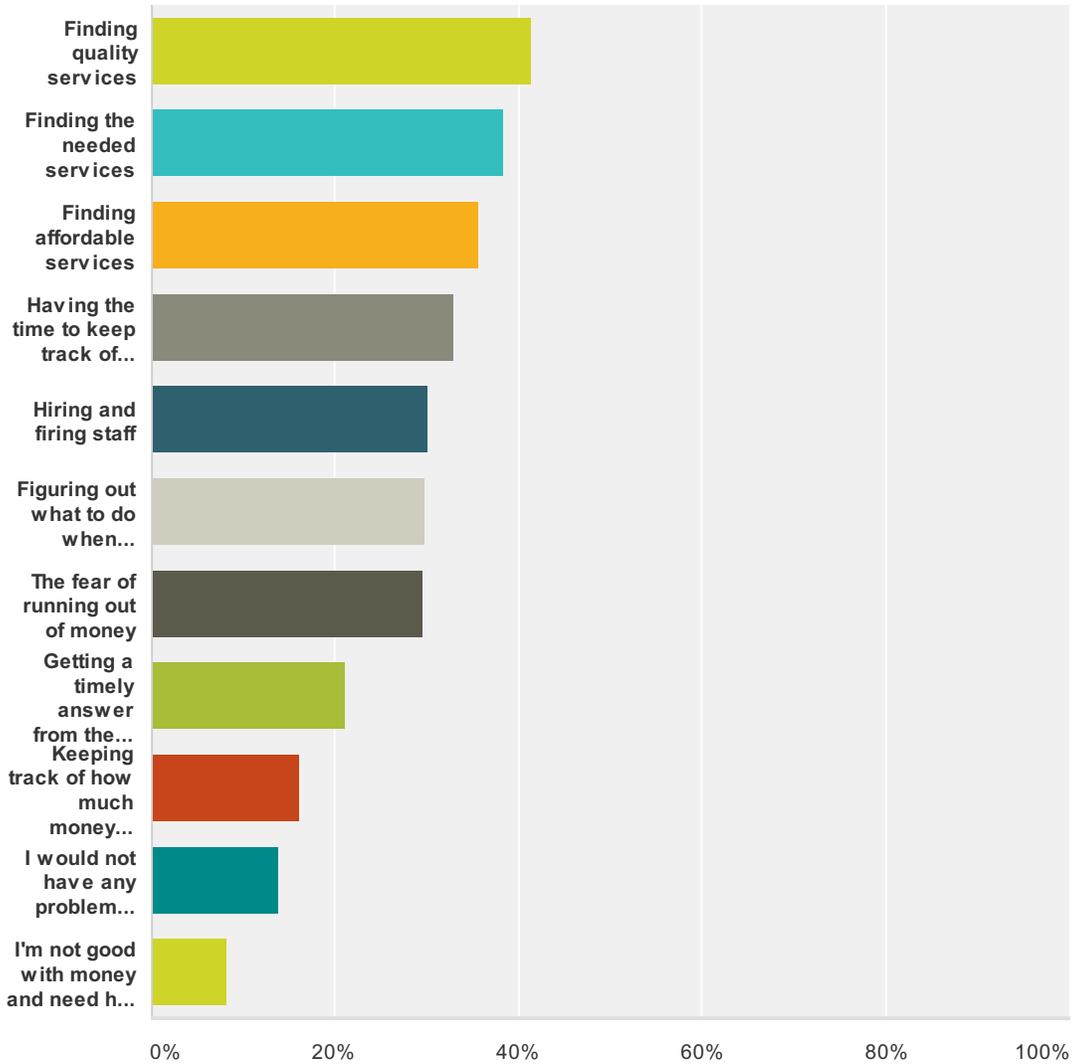
Answered: 525 Skipped: 376



Answer Choices	Responses	
Guidance from a professional who knows how the system works	23.81%	125
Having quality services available locally	20.57%	108
Advice from a specialist on the right mix of services and supports for me or my family member	19.24%	101
Being able to change my mind and change my plan and budget whenever I need to	12.57%	66
Knowing up-front how much money I have to work with	9.33%	49
Knowing how much each service costs	6.67%	35
Talking with someone like me who has more experience in this than I do	3.43%	18
I do not think I would need any help	3.05%	16
Knowing the reputation of the service providers I have to choose from	1.33%	7
Total		525

Q26 What do you find difficult about managing a services account (if you have had one), or do you think would be difficult if you did have one?

Answered: 521 Skipped: 380



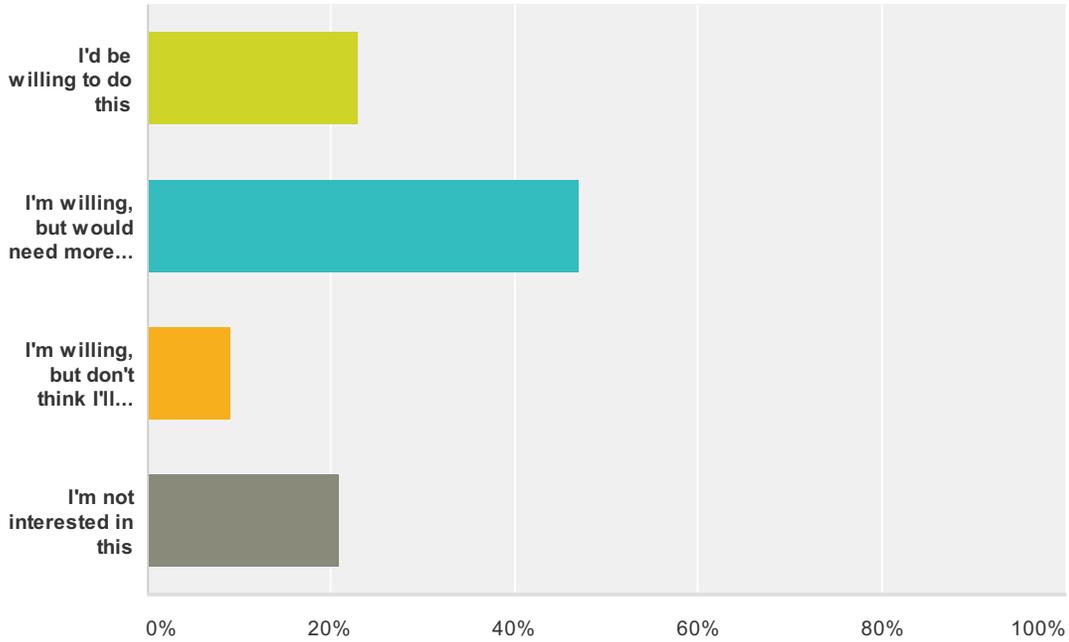
Answer Choices	Responses
Finding quality services	41.46% 216
Finding the needed services	38.39% 200
Finding affordable services	35.51% 185
Having the time to keep track of everything	33.01% 172
Hiring and firing staff	30.13% 157
Figuring out what to do when unexpected expenses come up	29.75% 155
The fear of running out of money	29.56% 154
Getting a timely answer from the professional who is helping me manage the budget	21.11% 110

NH Medicaid Long-Term-Care Program Survey

Keeping track of how much money I have spent during the year	16.12%	84
I would not have any problem managing an annual services budget	13.82%	72
I'm not good with money and need help managing it	8.25%	43
Total Respondents: 521		

Q27 How willing would you be to use the Medicaid funds in your annual services account as if it were your own money in order to get the best value for the dollar?

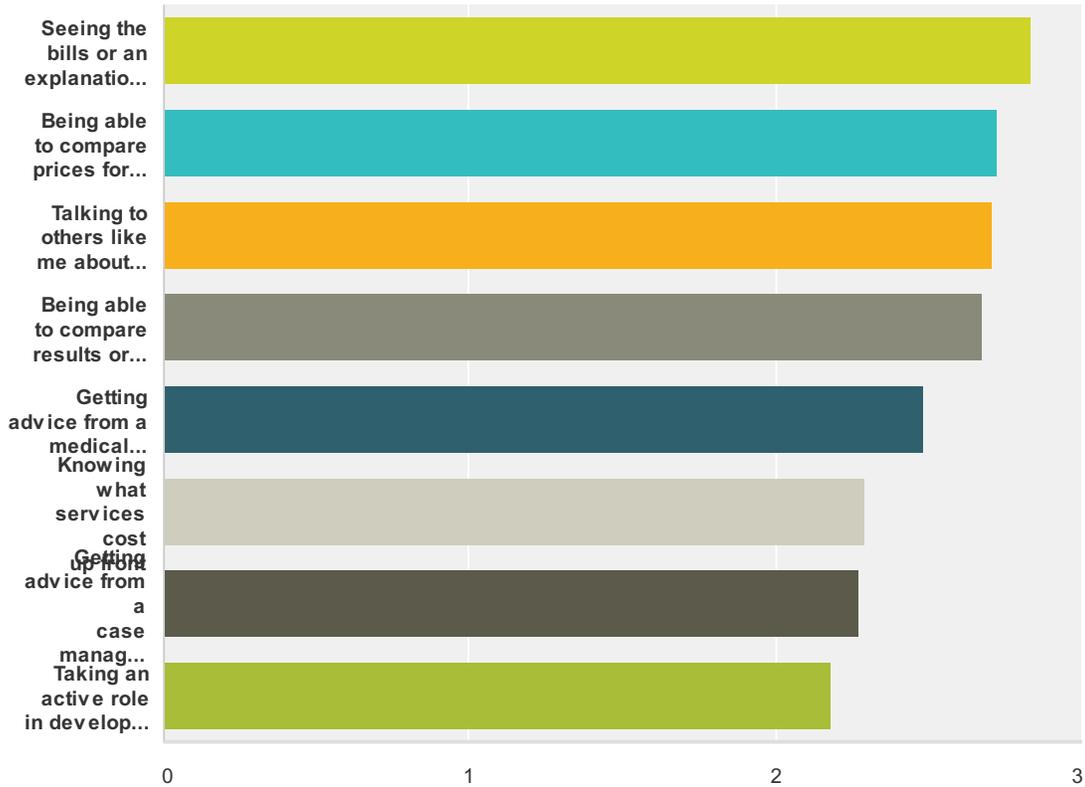
Answered: 527 Skipped: 374



Answer Choices	Responses	
I'd be willing to do this	22.96%	121
I'm willing, but would need more information on service costs and quality than I have now	47.06%	248
I'm willing, but don't think I'll get the opportunity	9.11%	48
I'm not interested in this	20.87%	110
Total		527

Q28 What are the top 4 things that would help you shop more effectively for the long-term-care services and supports Medicaid pays for? What would help you get the best services for the money you spend?

Answered: 502 Skipped: 399



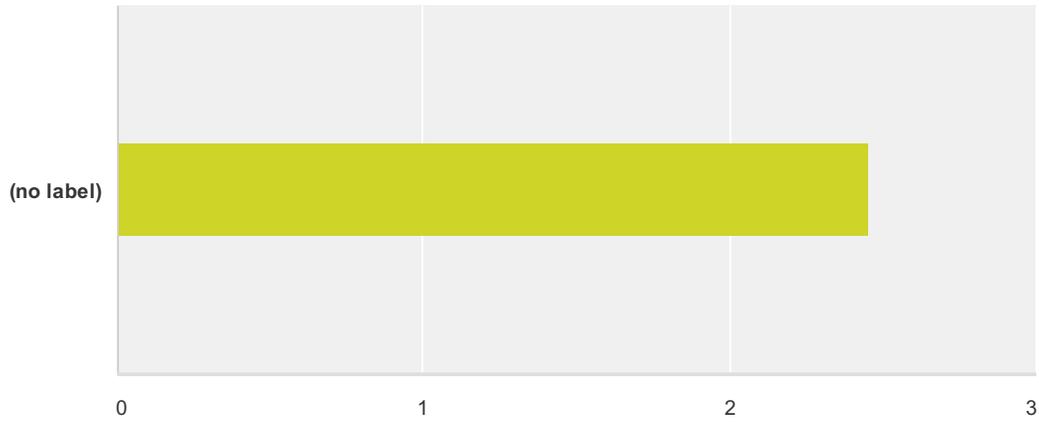
	1	2	3	4	Total	Average Rating
Seeing the bills or an explanation of benefits for services I use	14.29% 27	23.81% 45	26.46% 50	35.45% 67	189	2.83
Being able to compare prices for services from several service providers	13.43% 36	27.61% 74	32.46% 87	26.49% 71	268	2.72
Talking to others like me about their experiences with providers	15.64% 28	25.14% 45	32.96% 59	26.26% 47	179	2.70
Being able to compare results or outcomes from service providers	20.28% 43	22.17% 47	27.83% 59	29.72% 63	212	2.67
Getting advice from a medical specialist	23.81% 30	31.75% 40	16.67% 21	27.78% 35	126	2.48
Knowing what services cost up front	31.13% 80	28.40% 73	21.01% 54	19.46% 50	257	2.29
Getting advice from a case manager or other professional	36.36% 116	22.26% 71	19.75% 63	21.63% 69	319	2.27
Taking an active role in developing a care plan or services plan	40.07% 119	20.88% 62	20.20% 60	18.86% 56	297	2.18

Q29 What Long-Term-Care services and supports should be added to the NH Medicaid program that are not available to you now?

Answered: 290 Skipped: 611

Q30 How willing would you or your family member be to do something to add a small reward of funds to your annual services account -- like participating in a health screening or fitness program or volunteer work -- if it were something that it was within your (their) ability to do?

Answered: 515 Skipped: 386



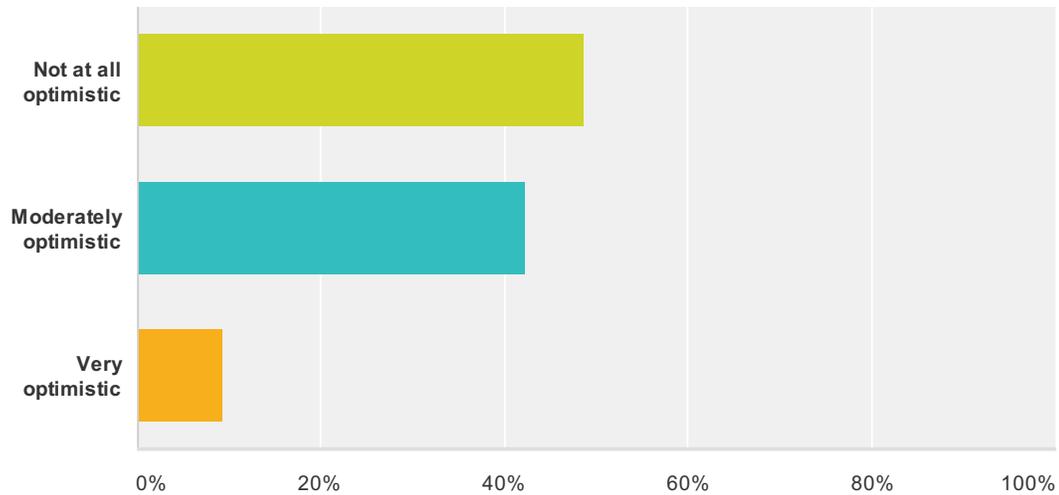
	Would not	Might	Would	Total	Average Rating
(no label)	8.74% 45	37.86% 195	53.40% 275	515	2.45

Q31 What activities that would increase your health or quality of life (or your family member's) should be considered for rewards to add funds to your annual services account if you had one?

Answered: 318 Skipped: 583

Q32 How optimistic are you that a redesigned Medicaid long-term-care system will be an improvement over the current service system that you use?

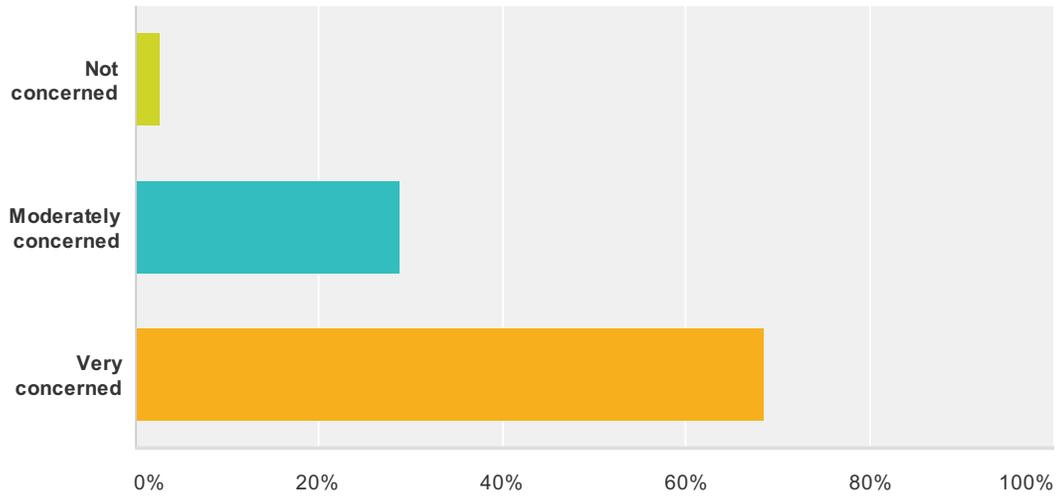
Answered: 537 Skipped: 364



Answer Choices	Responses	
Not at all optimistic	48.60%	261
Moderately optimistic	42.09%	226
Very optimistic	9.31%	50
Total		537

Q33 How concerned are you about the State's ability to fund the Medicaid program?

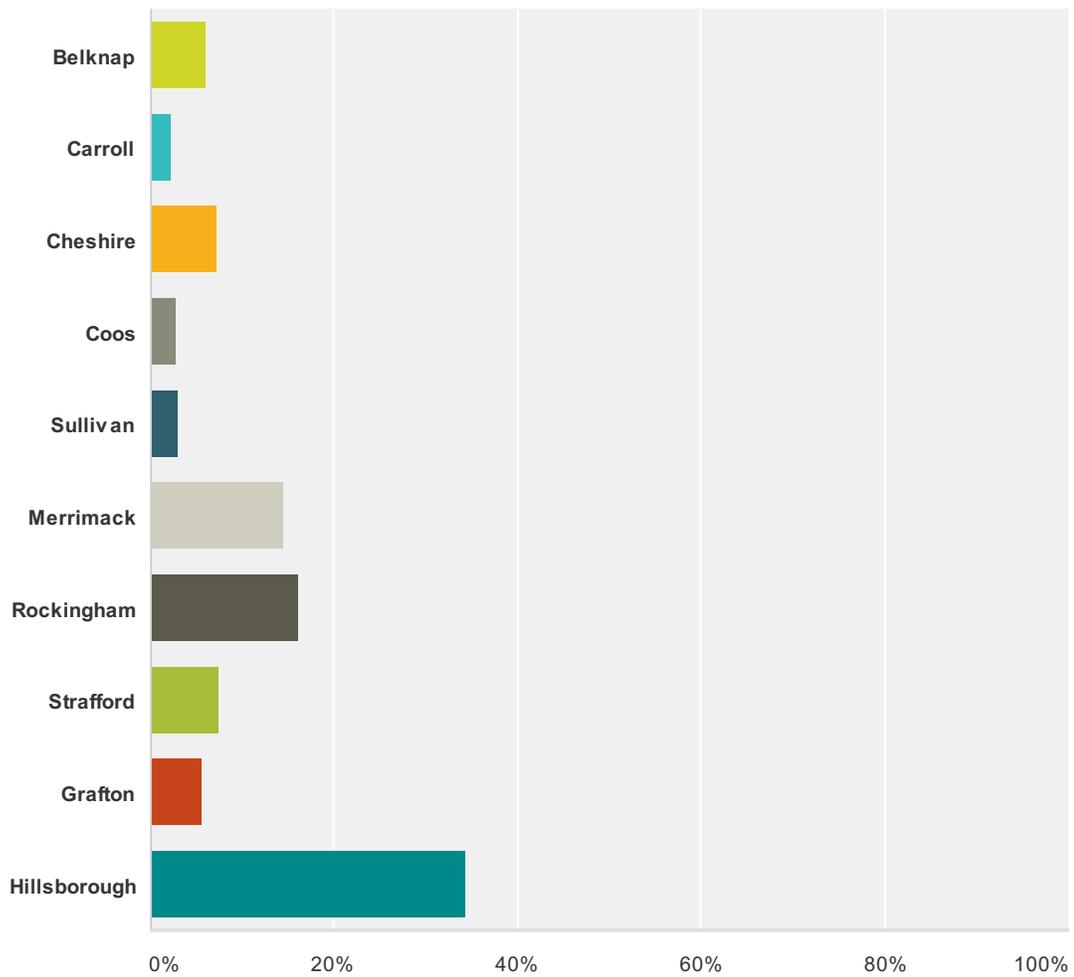
Answered: 555 Skipped: 346



Answer Choices	Responses
Not concerned	2.70% 15
Moderately concerned	28.83% 160
Very concerned	68.47% 380
Total	555

Q34 In which county do you live?

Answered: 568 Skipped: 333



Answer Choices	Responses
Belknap	6.16% 35
Carroll	2.29% 13
Cheshire	7.22% 41
Coos	2.99% 17
Sullivan	3.17% 18
Merrimack	14.44% 82
Rockingham	16.20% 92
Strafford	7.57% 43
Grafton	5.63% 32
Hillsborough	34.33% 195
Total	568

Q35 Is there anything else you wished we had asked or you would like to tell us?

Answered: 205 Skipped: 696

Appendix C

List of Stakeholders

New Hampshire State Innovation Model Stakeholders

Name	Organization
Abate, Kathleen	Granite State Federation of Families for Children's Mental Health
Ahnen, Steve	New Hampshire Hospital Association
Aiken, Sarah	The Family Support Council, Community Support Network, Inc.
Allen-Samuel, Sue	National Alliance for Mental Illness
Ally, Mohamed	Meridian Health Plan
Amdur, Deborah	Department of Veterans Affairs, Medical Center, White River Junction, VT
Argersinger, Erika	Children's Alliance of New Hampshire
Aultman, Wendi	New Hampshire Department of Health and Human Services, The Bureau of Elderly and Adult Services
Baggeroer, William	New Hampshire Department of Health and Human Services, Office of Information Services
Balkus, Gina M.	Home Care Association of New Hampshire
Behler, Rob	Centene Corporation
Berke, Bruce	Sheehan Phinney Capitol Group
Bertrand, Jennifer	The Family Support Council
Bizarro, Kathy	New Hampshire Hospital Association
Boggis, Leslie	Community Support Network, Inc.
Bowler, Cathy	Greater Nashua Mental Health Center
Boynton, Paul S.	The Moore Center
Brace, Aaron	Centene Corporation
Brady, Meghan	St. Joseph Community Services, Meals on Wheels
Brannen, Tyler	New Hampshire Insurance Department
Burke, Jill	Community Action Program Belknap and Merrimack Counties
Cambria, Susan	Community Support Network, Inc.

Capuchino, Kelley	New Hampshire Department of Health and Human Services, Bureau of Behavioral Health
Carlson, Robin	Developmental Services Quality Council
Cassidy, Suzanne	Well Sense Health Plan
Chandler, Howard	Carroll County Mountain View Nursing Home
Ciolfi, Monica	Office of U.S. House of Rep. Ann McLane Kuster (NH-02)
Clark, Kelly	AARP of New Hampshire
Cohen, Dick	Disabilities Rights Center
Colby, Scott	New Hampshire Medical Society
Collica, Nanci	New Hampshire State Behavioral Health Advisory Council
Collins, Brian	New Hampshire Community Behavioral Health Association, Community Partners NH
Coons, Kerri	New Hampshire Department of Health and Human Services, The Bureau of Elderly and Adult Services
Cooper, Cynthia S., MD	New Hampshire Medical Society
Crocker, Rich	State Committee on Aging
Curelop, Ellen	Life Coping, Inc.
Currier, Carol	EngAGING NH
Darius, Jennifer	Elliot Healthcare Systems
Davie, Laura	Institute for Health Policy & Practice, University of New Hampshire
Deary, Gail	New Hampshire Department of Health and Human Services, Division of Community Based Care Services:
DeScenza, Deborah	Farmsteads of New England
Dickinson, Jeff	Granite State Independent Living
Didona, Barbara	Family Support Council
Dillon, Elizabeth	New Hampshire Healthy Families
DiMartino, Lisa	New Hampshire House of Representatives
Djanabia, Georges	Easter Seals

Druzba, Alisa	New Hampshire Department of Health and Human Services, Bureau Public Health Systems, Policy & Performance
Edgerly, Ellen	Brain Injury Association of New Hampshire
Ertas, Matthew	New Hampshire Department of Health and Human Services, Bureau of Developmental Services
Faasen, Walter	New Hampshire Department of Health and Human Services, Office of the Commissioner
Faist, Paula	Silverthorne Adult Day Center
Feingold, Lisa	Well Sense Health Plan
Fineberg, Ellen	Children's Alliance of New Hampshire
Firth, Kim	Endowment for Health
Ford, Laura	New Hampshire Department of Health and Human Services, Office of Medicaid Business and Policy
Fox, Katja S.	New Hampshire Department of Health and Human Services, Office of the Commissioner
Fox, Susan	Center on Aging & Community Living, Institute on Disability, University of New Hampshire
Gagne, Wilfred	Department of Veterans Affairs, Medical Center, Manchester, NH
Garceau, Gail	Well Sense Health Plan
Gilbert, Nancy	Greater Nashua Mental Health Center
Gillespie, Patrick	Cigna
Goldsberry, Yvonne	Cheshire Medical Center, Dartmouth-Hitchcock Keene
Gorin, Steve	State Committee on Aging
Grathem, Jerry	State Independent Living Council
Griffin, Kristina	Well Sense Health Plan
Griffin, Suellen	New Hampshire Community Behavioral Health Association, West Central Behavioral Health
Grizwin, MaryGaye	New Hampshire Department of Health and Human Services, Office of Medicaid Business and Policy
Guertin, Lisa M.	Anthem Blue Cross Blue Shield
Guillemette, Jennifer	New Hampshire Foster and Adoptive Parent Association (NH FAPA)
Guillette, Lynn M.	Dartmouth-Hitchcock, Bedford

Hackett, Dave	Family Support Council
Hall, Erin	Brain Injury Association
Hannafin, Heather	Residential Resources, Inc.
Harding, Joseph	New Hampshire Department of Health and Human Services, Bureau of Drug and Alcohol Services
Harding, Laurie	New Hampshire House of Representatives, Upper Valley Community Nursing Project
Hatfield, Sue	New Hampshire Council on Developmental Disabilities
Hatz, Lisa	New Hampshire Vocational Rehabilitation, Department of Education
Heil, Jennifer	Centene Corporation
Helms, Ned	Institute for Health Policy & Practice, University of New Hampshire
Holleran, Joan	New Hampshire Vocational Rehabilitation, Department of Education
Holton, Brooke	St. Joseph Community Services, Meals on Wheels
Hooper, Heath	New Hampshire Foster and Adoptive Parent Association (NH FAPA)
Howell, Kenda	Residential Resources, Inc., Parent
Hunt, Janet	People First of New Hampshire
Hunter, Don	New Hampshire Department of Health and Human Services, Bureau of Behavioral Health
Johnson, Sheila	Dartmouth-Hitchcock
Jolivette, Pam	Community Action Program Belknap-Merrimack Counties, Inc.
Kelly Clark	AARP of New Hampshire
Kennedy, Amy	Office of the Governor Maggie Hassan
Kimball, Karen	New Hampshire Department of Health and Human Services, Bureau of Developmental Services
Kohler, Susan	Centene Corporation
Krider, Debbie	Granite State Independent Living
Krueger, Tammy	Department of Veterans Affairs, Medical Center, Manchester, NH
Kuenning, Keith	Child and Family Services of New Hampshire

Lacroix, David	New Hampshire Hospital, Peer Support Liaison
Langley, Diane	New Hampshire Department of Health and Human Services, Bureau of Elderly and Adult Services
Leahy, Matt	Office of U.S. Senator Jeanne Shaheen
Li, David Dr.	Elliot Healthcare Systems
Licata, Damien	Mental Health Consumer Council, Monadnock Area Peer Support Agency (MPS)
Lins, Peg	Crotched Mountain Community Care
Lipfert, Jenny MD	New Hampshire Pediatric Society
Lombard, Susan	New Hampshire Department of Health and Human Services, The Bureau of Elderly and Adult Services
Lotz, Doris	New Hampshire Department of Health and Human Services, Office of Medicaid Business and Policy
Lucas, Tricia	New Futures, Inc.
MacKay, Mariellen	New Hampshire House of Representatives, Granite State Federation for Families for Children's Mental Health, The Moore Center
Madison, Martha-Jean	New Hampshire Family Voices
Maggioncalda, Mary	New Hampshire Department of Health and Human Services, The Bureau of Elderly and Adult Services
Manning, Cheryl	New Hampshire Foster and Adoptive Parent Association (NH FAPA)
McDowell, Karen	Family Support Council
McGowan, Patrick	New Hampshire Department of Health and Human Services, Office of Medicaid Business and Policy
McMahon, Charlie	New Hampshire House of Representatives
McNutt, Doug	AARP of New Hampshire, Medical Care Advisory Committee
Melby, Leslie	New Hampshire Hospital Association
Meyers, Jeffrey	New Hampshire Department of Health and Human Services, Office of the Commissioner
Miller, Betsy	New Hampshire Association of Counties
Modlin, John Dr.	Children's Hospital at Dartmouth Hitchcock (CHAD)
Monahan, Janet	New Hampshire Medical Society
Montero, Jose	New Hampshire Department of Health and Human Services, Division of Public Health Services

Moser, Margaret	State Committee on Aging
Nahikian, Anoosh	New Hampshire Vocational Rehabilitation, Department of Education
Norton, Ken	National Alliance for Mental Illness
Ober, Richard	New Hampshire Charitable Foundation
Odell, Bob	New Hampshire State Senate
Ohlson-Martin, Terry	New Hampshire Family Voices
Oliver, Emily	Centene Corporation
Ostrowski, Mike	Child and Family Services of New Hampshire
Ouellette, David	New Hampshire Council on Developmental Disabilities
Paquette, Linda	New Futures, Inc.
Patterson, Jennifer	New Hampshire Insurance Department
Pepin, Amy	New Futures, Inc.
Perou, Debra	Rockingham Nutrition and Meals on Wheels Program
Perreault, Anita	New Hampshire Medical Care Advisory Committee
Philbrick, Hugh	Family Support Council
Philipson, Christine	Community Support Network, Inc.
Pineo, Jennifer	Family Support Council
Poirier, John	New Hampshire Health Care Association
Pritchard, Maggie	New Hampshire Community Behavioral Health Association, Genesis Behavioral Health
Quemere, Anne	Well Sense Health Plan
Quintanilha, Linda	Family Support Council
Raffio, Tom	Northeast Delta Dental
Reagan, John	New Hampshire State Senate
Reagan, Lorene	Well Sense Health Plan

Real, Lori H.	Bi-State Primary Care Association
Richards, John	Brain Injury Association of New Hampshire
Rockburn, Sheri	New Hampshire Department of Health and Human Services, Division of Community Based Care Services
Rogers, Paula	Anthem Blue Cross Blue Shield
Rosenwald, Cindy	New Hampshire House of Representatives
Rourke, Timothy	Governor's Commission on Alcohol and Drug Abuse Prevention, Intervention, and Treatment
Rowe, Steve	Endowment for Health
Rushalko, Erin	Monadnock Area Peer Support
Ryer, Jeanne	New Hampshire Citizens Health Initiative
Sadowski, Sarah	New Futures, Inc.
Salvatore, Barbara	EngAGING NH
Santaniello, Christine	Lakes Region Community Services
Sargent, Elizabeth C.	Sheehan Phinney Capitol Group
Scheetz, Deb	Gateways Community Services
Schwartzwalder, Ann	Crotched Mountain Community Care
Scott, Sarah	Well Sense Health Plan
Seifert, Bernie	New Hampshire Coalition on Substance Abuse, Mental Health and Aging
Sevigny, Roger A.	New Hampshire Insurance Department
Shields, Elizabeth	New Hampshire Department of Health and Human Services, Office of Information Services
Solsky, Lisabritt	New Hampshire Department of Health and Human Services, Office of Medicaid Business and Policy
Soucy, John	DCYF Residential Providers, Easter Seals
Souther, Geoffrey	New Hampshire Department of Health and Human Services, Bureau of Behavioral Health
Stamatakis, Carol	New Hampshire Council on Developmental Disabilities
Stuopis, Cecilia, W. DR.	Dartmouth-Hitchcock

Sullivan, Margo	Home Care Association of New Hampshire
Sullivan, Tim	The Institute of Professional Practice, Inc.
Terry, Clyde	Granite State Independent Living
Tilley, Patricia	New Hampshire Department of Health and Human Services, Division of Public Health Services
Touzin, Dawn	New Hampshire Department of Health and Human Services, Office of Operations Support
Treanor, Elin	Easter Seals
Treisner, Dotty	Community Support Network, Inc.
Trudo, Scott	Institute on Disability, Center on Aging and Community Living (CACL), University of New Hampshire
Trvalik, Kim	Well Sense Health Plan
Ungarelli, Erica	New Hampshire Department of Health and Human Services, Division for Children Youth & Families
Van Voorhis, Peter	Gateways Community Services
Varney, Sally	New Hampshire Department of Health and Human Services, Bureau of Elderly and Adult Services
Wade, Gregg	New Hampshire Medical Care Advisory Committee
Wade, Steve	Brain Injury Association of NH
Walters, Barbara Dr.	Dartmouth-Hitchcock, Bedford
Wojewoda, Daisy	Easter Seals NH, Inc.
Woodfin, Dona	EngAGING NH
Young, Brian	The Nashua Center
Young, Connie	Crotched Mountain Community Care
Zibailo, Jim	Bi-State Primary Care Association
Ziehm, Sandra	Hillsborough County Commissioner