



New Hampshire Department of Health and Human Services

*To join communities and families in providing opportunities
for citizens to achieve health and independence*



Office of Medicaid Business & Policy OMBP



OMBP

Mission Statement

To establish and maintain a health services delivery system for the New Hampshire Medicaid population within federal, state and local requirements.

Vision Statement

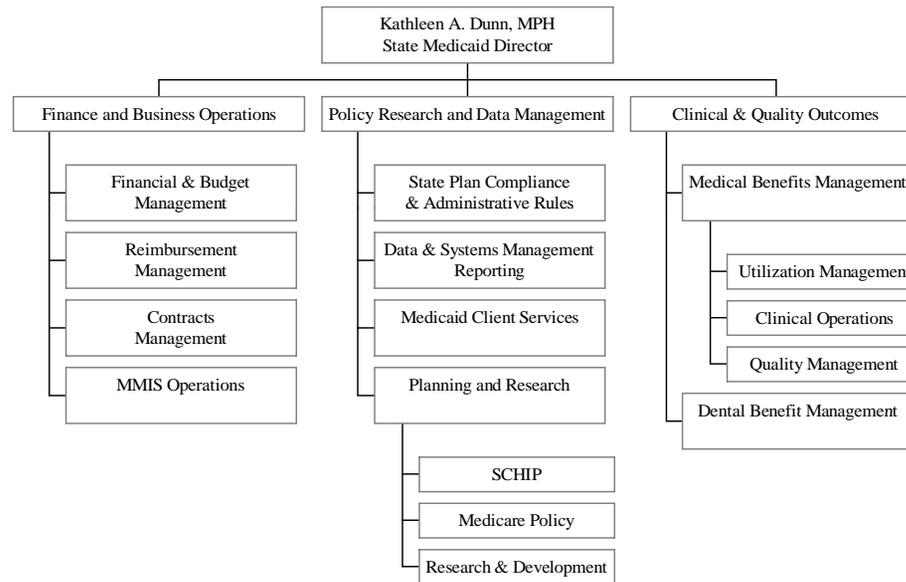
To work in partnership with the New Hampshire healthcare community to improve quality and health outcomes in an evolving health care system.

Goals

1. Protect and improve the health of the Medicaid population
2. Promote fiscal integrity as an effective purchaser of health care services.
3. Foster excellence through program design, operations and administration



OMBP



FY 12 Perspective
 Total 66 Staff
 \$ per staff member: \$7,780,689 TF
 # of clients per staff member: 1,804

	FY09	FY10	FY11	FY 12
Senior Management	1	1	1	1
Mid Management	3	3	3	3
Admin/Support	63	64	64	62
Total	67	68	68	66
Unfunded	0	2	2	2



Organization

- Finance – contracting, MMIS, budget, cost settlements
- Clinical – pharmacy, prior authorizations, care coordination, quality
- Policy & Research – state plan, data & statistics, health planning & research, client services (call center and transportation), Children's Health Insurance Program



Personnel and Administrative Profile

- 66 Authorized Positions
- To administer the Medicaid program consistent with federal and state mandates.



Enabling Legislation

42 USC §1396 et seq.: Title XIX and XXI

RSA 126 and 167



Target Population Served

- Low income children – 86,190*
 - Severely disabled children – 1,540
 - Foster children & adoption subsidy – 2,030
 - Needy blind children – 120
- Low income parents and pregnant women – 14,840
 - Pregnant women – 2,150
- Low income disabled adults – 15,000
- Needy blind adults – 120
- Breast and cervical cancer patients – 190
- Moderate income working disabled adults – 1,840
- Low and moderate income seniors – 8,180
- Cost-sharing programs for Medicare enrolled – 8,213

* Includes Healthy Kids Silver

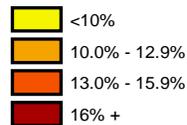
(as of 12/31/10)



Service Delivery

NH Medicaid Enrollment by Health Analysis Area State Fiscal Year 2010

Medicaid Enrollees as a Percent of Total Population

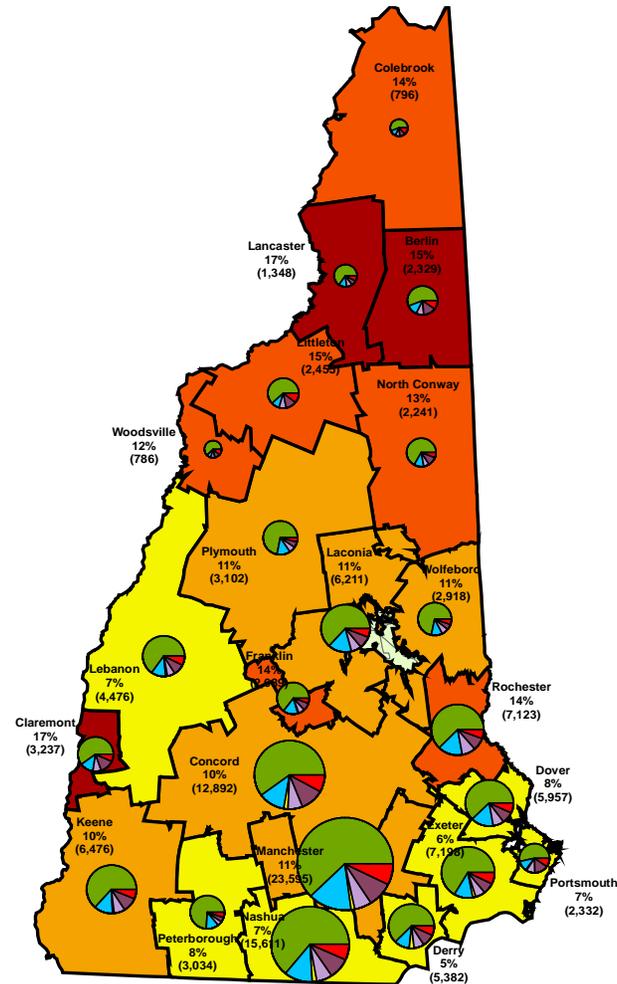
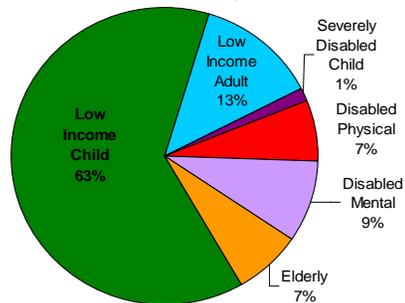


Eligibility Groups as a Percent of Medicaid Population

Size of Pie Represents Relative Number of Medicaid Enrollees



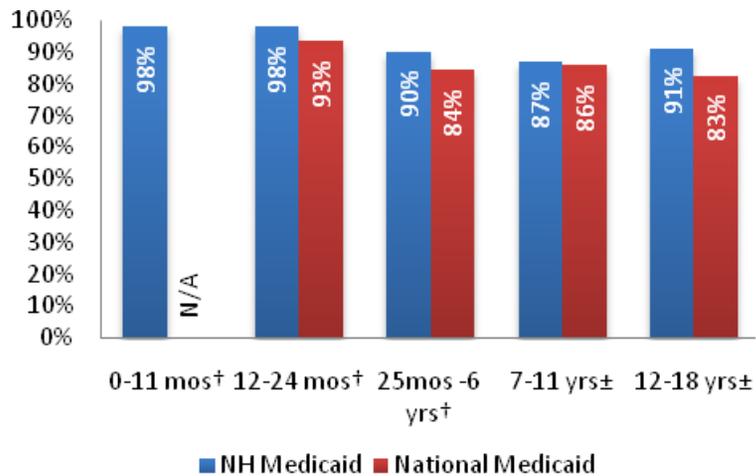
NH Enrollees by Eligibility Groups





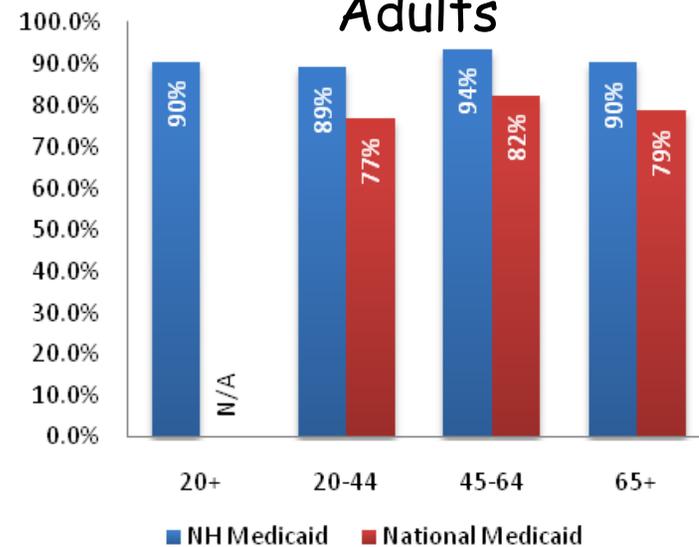
Access to Primary Care

Children



Source: NHDHHS, OMBP, NHCHIS

Adults

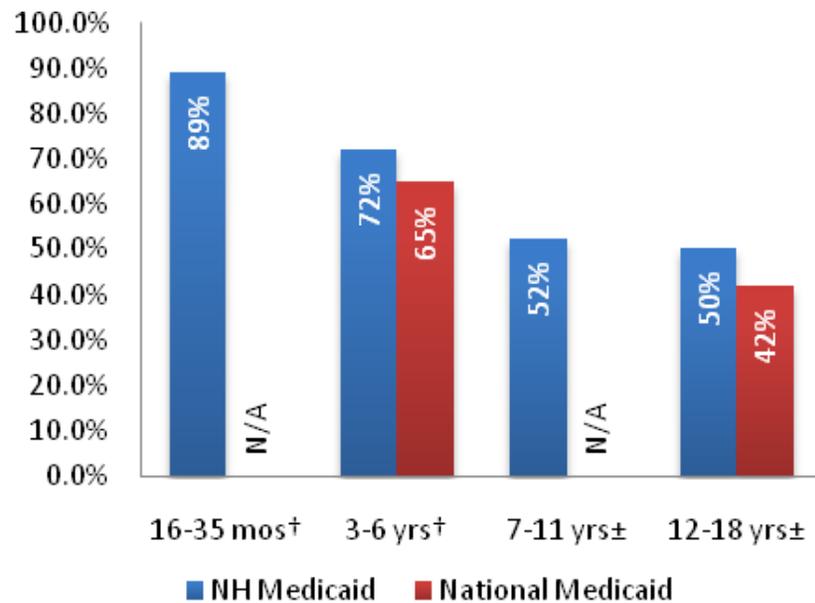


Source: NHDHHS, OMBP, NHCHIS



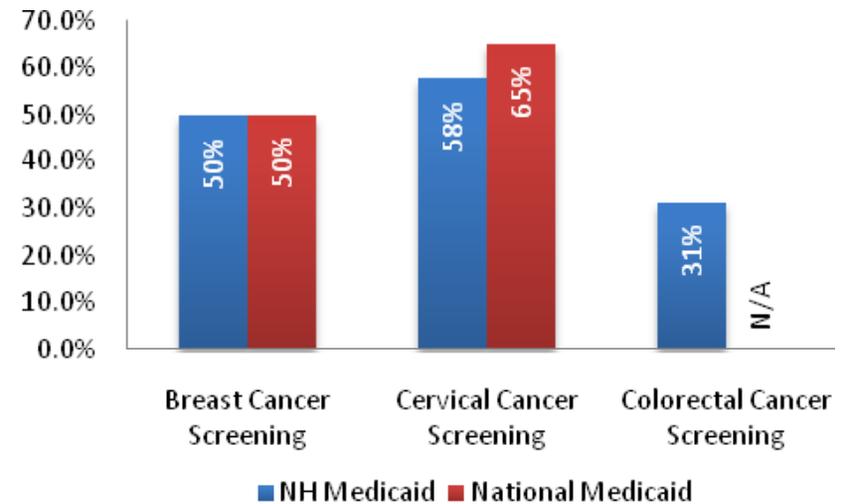
Preventive Care SYF 2009

Well Child Visits



Source: NH DHHS, OMBP, NH CHIS

Adult Preventive Screenings



Source: NH DHHS, OMBP, NH CHIS



Profile of NH Medicaid Recipients Reveals Higher Burden of Illness than Privately Insured Individuals

Medicaid recipients have greater burden of illness compared to commercial insured population:

- 2 times the prevalence of asthma
- 4 times the prevalence of Chronic Obstructive Pulmonary Disease (COPD)
- 5 times the incidence of lung cancer
- 2 times the prevalence of coronary artery disease
- 3.5 times the incidence of stroke
- 5 times the prevalence of heart failure
- 2 times the prevalence of hypertension
- 2 times the prevalence of mental health disorders
- 2 times the ambulatory sensitive hospital admission rate for children when compared to NH Commercial
- 4 times the ED utilization of NH commercial



Accomplishments

- Despite a higher burden of disease, NH Medicaid had higher rates of primary care visits and well child visits than national Medicaid managed care programs and NH commercial populations across all ages.
- NH Medicaid had higher "Effectiveness of Care Measures" (HEDIS, i.e., use the appropriate meds for asthma, appropriate testing for pharyngitis, etc) than national Medicaid managed care programs for all measured categories.



SFY 2010 Care for >118,000 enrollees

Operational Indicators

■ # of claims processed:	6,113,993
■ # active providers:	19,381
■ # client service calls	93,088
■ # Volunteer Transports	84,280

Clinical Service Indicators

■ # inpatient visits	21,450
■ # outpatient visits	420,343
■ # ER visits	114,525
■ # primary care visits	486,935
■ # births	4,952
■ # prescriptions filled	1,391,263
■ # home care visits	76,541
■ # child dental visits	143,347
■ # complex radiology tests	30,777



Where We've Been

Program	SFY 2010 Actual	SFY 2011 Agency Budget	SFY 2011 Step 2 & Step 3 Reductions to Appropriation	SFY 2011 Step 2 & Step 3 Cost Reductions	SFY 2012 Maintenance	SFY 2013 Maintenance
Medicaid Administration	\$11,461,584	\$16,744,281	(\$2,469,167)	\$0	\$12,579,800	\$13,051,401
SCHIP Premium Payments	\$15,844,669	\$17,696,879	\$0	\$0	\$23,322,854	\$27,544,608
Pharmacy Services	\$85,983,121	\$103,741,314	\$0	\$0	\$96,041,845	\$101,285,730
Provider Payments	\$243,504,450	\$248,781,885	(\$2,910,000)	(\$17,124,000)	\$274,553,526	\$309,335,652
Outpatient Hospital	\$77,077,423	\$80,785,398	(\$700,000)	(\$4,884,000)	\$75,022,263	\$78,792,013
BCC Program	\$2,255,085	\$3,774,780	\$0	\$0	\$3,115,710	\$3,265,027
Total	\$436,126,332	\$471,524,537	(\$6,079,167)	(\$22,008,000)	\$484,635,998	\$533,274,431



Challenges of Growth

Enrollment Growth

SFY 2010

Agency Phase Request: 3.9 %
Updated Request 4/2009: 1.95 %
Approved Budget: 0.975%
SFY 2010 Actual: **5.3%**

SFY 2011

Agency Phase Request: 3.50%
Updated Request 4/2009: 1.75%
Approved Budget: 0.875%

Utilization Growth

SFY 2010

Agency Phase Request: 1.8 %
Approved Budget: 0.43%
SFY 2010 Actual: **6.02%**

SFY 2011

Agency Phase Request: 1.3 %
Approved Budget: 0.49%

Cost Growth

SFY 2010

Agency Phase Request: 10.51%
Approved Budget: 2.9%
SFY 2010 Actual: **-4.75%**

SFY 2011

Agency Phase Request: 11.72%
Approved Budget: -.31%



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