



NEW HAMPSHIRE
HEALTH PROTECTION PROGRAM

**What Providers and Their Clients
Need to Know about the NHHPP**

July 21 and July 30, 2014

Office of Medicaid Business and Policy, NH DHHS



Presentation Overview

- ① **What is the NH Health Protection Program**
- ② **Purpose of the NH Health Protection Program**
- ③ **Eligibility**
- ④ **Basic Program Features**
- ⑤ **Program Timeline**
- ⑥ **How to Apply**
- ⑦ **Program Options May Change**
- ⑧ **Education & Outreach Plan**
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What is the NH Health Protection Program?

A federally-funded, locally-managed health care program that **expands coverage** to low-income New Hampshire residents.

*An estimated **50,000 residents** will apply.*



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Purpose of NH Health Protection Program

- ▶ Provide health insurance coverage to more of New Hampshire's low-income citizens.
- ▶ Provide access to private health insurance options.
- ▶ Improve population health.
- ▶ Reduce uncompensated care costs.



Purpose of NH Health Protection Program (Cont).

Legislation that created the NHHPP Bridge Program requires that:

- ▶ rates assure access;
- ▶ the program fosters personal responsibility; and
- ▶ it is a time-limited program while it is 100% federally funded and will need to be reauthorized.



Eligibility NH Health Protection Program

- **Adults age 19 to 65**
 - **Who are not:**
 - *Pregnant*
 - *Entitled to/enrolled in Medicare Part A or B*
 - *Otherwise eligible/enrolled in coverage under State's Medicaid plan*
 - Resources are excluded.
 - Applicants self-attest to income and other criteria (e.g., pregnancy, medically frail and residency).



Eligibility NH Health Protection Program

Household income is at or below the following levels:

Household Size	If Your Household Income Is This Amount or Less Each MONTH	OR	If Your Household Income Is This Amount or Less Each YEAR
1	\$1,342		\$16,105
2	\$1,809		\$21,707
3	\$2,276		\$27,310
4	\$2,743		\$32,913

For each additional household member, add \$450 per month or \$5,400 per year, up to a household size of 8 people.



Basic Program Features

1

The Health Insurance Premium Program (HIPP) is for those who have access to coverage through an employer.

Program will pay client's share of insurance costs.

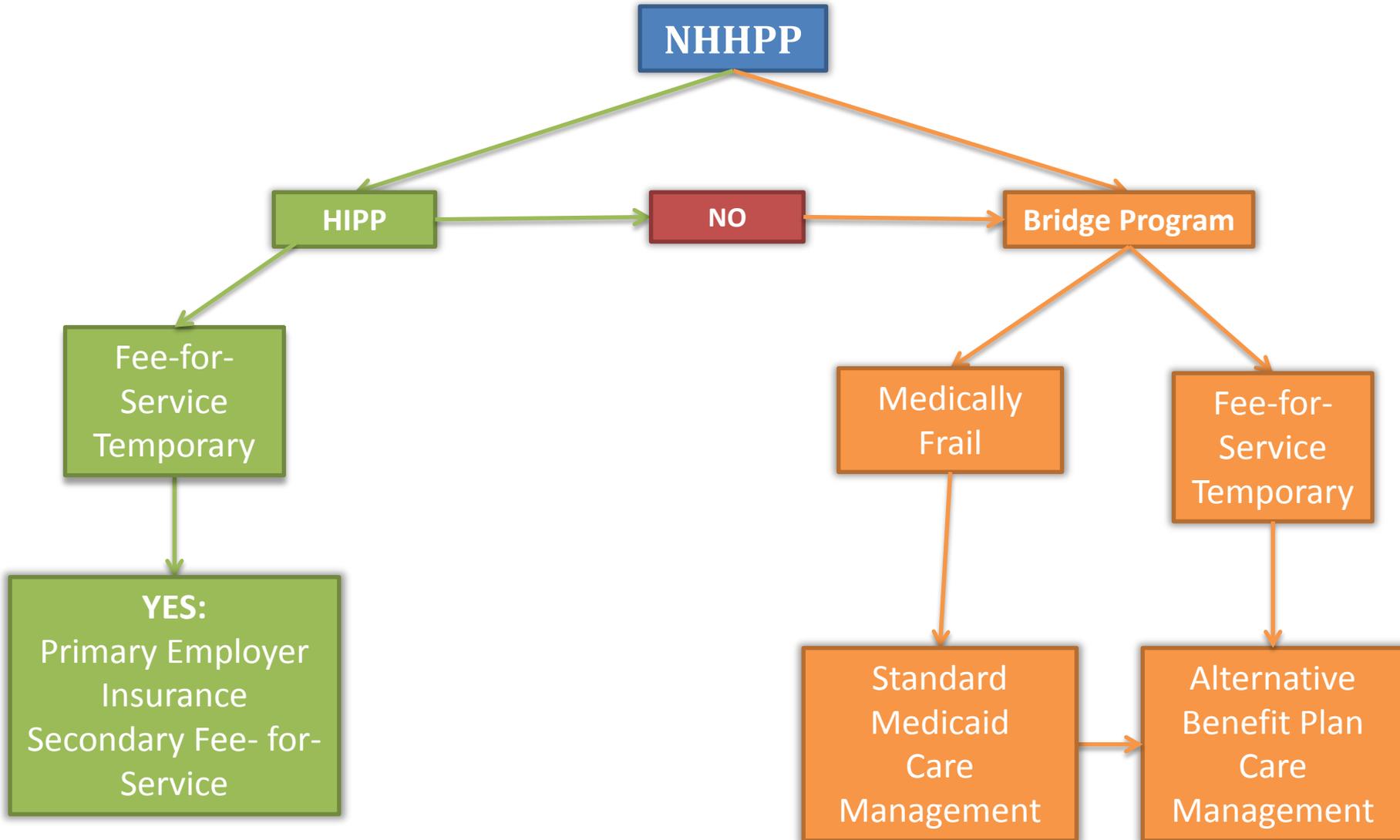
2

The Bridge Program is for those who do not have coverage available through an employer.

Clients receive services through one of the two Managed Care Organizations (MCOs) already under contract with DHHS.



Basic Program Features (Cont'd.)





Health Insurance Premium Payment (HIPP)

- ▶ If individual has health insurance available to them through their employer (ESI) – and it is cost effective - it is **mandatory** that they enroll in the HIPP option.
 - ❖ As long as it is cost effective, HIPP will reimburse the client's employer sponsored insurance premiums.
 - ❖ Premiums are deducted from employee's paycheck and reimbursed monthly via direct deposit or a check mailed to their home address.
 - ❖ Medicaid providers will be reimbursed for client's group health plan cost sharing in the same way they are now with TPL.
 - ❖ Client will pay non-Medicaid providers for co-pays and deductibles and submit paperwork to DHHS to be reimbursed the following month.



HIPP (continued)

NOTE: during the time period that assessment of eligibility for HIPP and/or prior to enrollment in an MCO, these individuals are in the NHHPP and are covered under Fee-for-Service (FFS) Medicaid.



The Bridge Program

- ▶ For those without access to health insurance through their employer (ESI).
- ▶ Will have a choice of 2 health plans - NH Healthy Families or Well Sense - in the NHHPP Care Management Program (MCM).
- ▶ The benefit package is the Alternative Benefit Plan (ABP), which covers many of the same services as regular Medicaid, plus chiropractic and Substance Use Disorder (SUD) services; also a different pharmacy co-pay.



Pharmacy Co-Pay Suspension

- ▶ Effective July 6, 2014 **through October 31, 2014**, pharmacies will not charge a co-pay for Medicaid/NHHPP enrollees, including those enrolled in one of the two MCOs.
- ▶ System changes were made to ensure pharmacies receive the total allowed amount of each Medicaid/NHHPP prescription.
- ▶ **After November 1**, Medicaid/NHHPP enrollees **<100% FPL** will have **no co-pay**.
- ▶ Those Medicaid/NHHPP enrollees **>100% FPL** will have co-pays of:
 - ❖ \$1/\$2 Medicaid
 - ❖ \$1/\$4 NHHPP



The Bridge Program: Care Management

- ▶ **Mandatory** enrollment in one of two MCOs.
- ▶ Client chooses a Managed Care Organization (MCO) within 60 days from eligibility determination or denial of HIPP:
 - ❖ If a client does not choose within 60 days they will be auto-assigned an MCO.
 - ❖ During selection period, individual is in Fee-for-Service NHHPP.
- ▶ Coverage in the MCO starts on the **1st day** of the first month *after* selection.
- ▶ Client has 90 days to change MCO.
- ▶ The next time they can change is during the Annual Open Enrollment period for all individuals in an MCO.



The Bridge Program: Care Management (Cont'd.)

Information for recipients on the 2 MCOs – New Hampshire Healthy Families and Well Sense – can be found on the DHHS's MCM webpage.

<http://www.dhhs.nh.gov/ombp/caremgt/medicaid-recipients.htm>

This includes:

- ▶ Client Sample Letters/Enrollment Packet
- ▶ *How Care Management Helps Me* Client brochure
- ▶ *Quick Guide to Enrolling*
- ▶ MCO Client Services Contact Information



The Bridge Program: Care Management (Cont'd.)

Once enrolled, MCOs will contact members:

- ▶ Confirm or establish the member's PCP.
- ▶ Perform a Health Risk Assessment (HRA).
- ▶ Send each member a card and a Member Handbook.
- ▶ Coverage begins first day of first month *after* selection.



What does it mean to be Medically Frail?

- ▶ Determination of medically frail is based on response to an application question.
- ▶ Individuals who are medically frail can choose:
 - ❖ Alternative Benefit Plan (ABP)
 - ❖ Standard Medicaid
- ▶ Individuals who are medically frail can change plans any time from Alternative Benefit Plan (ABP) to Standard Medicaid.



Medically Frail (Cont'd.)

The difference(s) between ABP and “Standard” Medicaid is:

- ▶ the ABP offers SUD and chiropractic services;
- ▶ “branded” drugs have a \$4 co-pay (vs. \$2 in Standard); and
- ▶ the ABP does not include nursing home care or waiver services.

NOTE: No pharmacy co-pays through October 31, 2014.



The Bridge Program: SUD Benefit

High Level Overview of Services/Rates

- ▶ Outpatient services / Crisis Intervention
- ▶ Opioid Treatment Program (Methadone)
- ▶ Prenatal Services
- ▶ Screening, brief Intervention, referral to Tx (SBIRT)
- ▶ Withdrawal Management
- ▶ Medication assisted treatment services
- ▶ Intensive & Partial Hospitalization Outpatient Services
- ▶ Residential treatment services
- ▶ Recovery support services
- ▶ Case management - CRM (continuous recovery monitoring)



The Bridge program: SUD Benefit (cont.)

Implementation/Phase-In

SUD Benefits / Services Available at Start up (8/15)

- ▶ Outpatient services / Crisis Intervention
- ▶ Opioid Treatment Program (Methadone)
- ▶ Medically Managed withdrawal management (hospital in-patient)

At Six Months:

- ▶ Prenatal Services
- ▶ Screening, brief Intervention, referral to Tx (SBIRT)
- ▶ Medication assisted treatment services
- ▶ Intensive & Partial Hospitalization Outpatient Services
- ▶ Residential treatment services

At One Year:

- ▶ Withdrawal Management (ambulatory / Med. Monitored inpatient)
- ▶ Recovery support services /Recovery Monitoring (case Management)



The Bridge program: SUD Benefit (cont.)

NEXT STEPS

- ▶ Enrolling SUD Specialty Providers
- ▶ Providers Contracting with MCOs
- ▶ Developing Capacity for Phase-in Services
- ▶ Further Refinement of Quality Measure and Review Process

Questions / Comments

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Program Timeline

— Summer 2014 —

- ▶ **July 1** – Applications acceptance began
- ▶ **Aug. 15** – Coverage begins; enrolled as Fee-for-Service
- ▶ **Sept. 1** – 1st potential day of Care Management coverage



There are 4 Ways to Apply

1

Online: Visit www.nheasy.nh.gov

Hours: 6:00AM -12:00AM (Midnight) 7 days a week

2

Phone: Call the Medicaid Service Center at **1-888-901-4999** to learn more and receive personalized assistance with your application.

Hours: 8:00AM to 4:00PM Monday – Friday

3

Paper Application: Visit a DHHS district office or download an application at www.dhhs.nh.gov

4

ACA Marketplace: Go online and sign up at www.healthcare.gov



Program Options May Change

- ▶ NH legislative intent is that people eventually transition to the Health Insurance Marketplace or employer-sponsored insurance (ESI), if possible.
- ▶ Some program details will change depending on Federal Govt. (CMS) granting waivers.
- ▶ Intent is to keep people covered; changes will be announced when known.



Premium Assistance Program (PAP)

- ▶ The Bridge program may transition to the Premium Assistance Program (PAP) if CMS approves waiver.
- ▶ If approved, enrollment would begin **October 15, 2015**, with coverage beginning **January 1, 2016**.
- ▶ Details will be announced well in advance.



Education and Outreach Plan

- ▶ **Identifying Potential Eligibles**
 - ❖ Individuals who applied to the FFM
 - ❖ Individuals served by DHHS
 - ❖ Likely eligibles in the general population

- ▶ **Research-Based Messaging**
 - ❖ Two statewide surveys
 - ❖ Focus groups

- ▶ **Multi-Channel Delivery**
 - ❖ Earned media
 - ❖ Social media
 - ❖ Digital media
 - ❖ Direct mail



Approach to Messaging

▶ Profile of the Uninsured

- ❖ 63% Male
- ❖ 34% Aged 18-29
 - 61% Aged 18-39
- ❖ 36% Have a high school education or less
 - 80% Didn't graduate from college
- ❖ 48% Live in South, 52% Live in North
- ❖ 90% Employed as hourly workers

▶ Key Message Points

- ❖ The law has changed, providing two new coverage options
- ❖ A new opportunity to get covered at little or no cost to you
- ❖ Thousands are eligible (*always show FPL chart*)
- ❖ Three easy ways to apply: online, by phone, or paper

▶ Consistency and Repetition

- ❖ Simple, straightforward, consistent



Communications to Likely Eligibles

- ▶ **Earned & Social Media**
- ▶ **In-Reach Direct Mail**
 - ❖ Audience includes individuals who applied to the FFM, populations served by DHHS
 - ❖ 4 waves of direct mail (one per month, starting in July through October)
- ▶ **Outreach Direct Mail**
 - ❖ Audience includes individuals aged 19 to 65 who are likely to be uninsured
 - ❖ 8-10 waves of direct mail in conjunction with FFM outreach
- ▶ **Digital Advertising**



Upcoming Training Sessions

- ▶ *What Providers and Their Clients Need to Know about the NHHPP*
July 30, 10 AM – NOON, Concord
- ▶ *Managing Your Business Practices Under the NHHPP*
August 4, 10 AM – NOON, Littleton
August 7, 10 AM – NOON, Concord
- ▶ *Newly Enrolled Medicaid Providers in the NHHPP (Chiropractors and SUD providers) Brown Building Auditorium, Concord, NH:*
**August 12, 10 AM – NOON, Chiropractors,
Staff available until 1:00 for additional questions.**
**August 14, 10 AM – NOON, SUD Providers,
Staff available until 1:00 for additional questions.**



Upcoming Training Sessions (continued)

Further information about upcoming trainings and resources/announcements about the NHHPP can be found at:

[Http://www.dhhs.nh.gov/ombp/nhhpp/index.htm](http://www.dhhs.nh.gov/ombp/nhhpp/index.htm)

- ▶ The Training Opportunities announcements contain a direct link to registration for in-person or webinar attendance.
- ▶ Recorded webinars (and transcripts), slide decks and associated materials will be posted on the NHHPP webpage after the training.

Questions?



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For copies of all NHHPP trainings, please go to:

[Http://www.dhhs.nh.gov/ombp/nhhpp/index.htm](http://www.dhhs.nh.gov/ombp/nhhpp/index.htm)
