

**Medical Care Advisory Committee (MCAC)
Monday, April 11, 2022**

Minutes

Members Lisa Adams, Michael Auerbach, Kathy Bates, Jake Berry, Kelley Capuchino, Lisa DiMartino, Tamme Dustin, Ellen Keith, Ellen McCahon, Paula Minnehan, Sarah Morrison, Kara Nickulas, Ronniann Rakoski, Karen Rosenberg, Holly Stevens, Carolyn Virtue, Brendan Williams, Michelle Winchester

Alternates: Amy Girouard, Nichole Von Dette, Elinor Wozniakowski

DHHS: Henry Lipman, Alyssa Cohen, Brooke Belanger, Rob Berry, Dr. Sarah Finne, Dawn Landry, Jane Hybsch, Lisa Richardson, Leslie Melby, Nancy Rollins, Allyson Zinno, Jody Farwell, Leslie Bartlett

Guests: Deb Fournier, Nick Toumpas, Judith Jones, Rich Sigel, Deb Ritcey, Lisabritt Solsky Stevens, Audrey Gerkin, Grace Roy, Jeb Curelop, Jesse Fennelly, Josh Krintzman, Krystal Chase Lisa Pettengill, Nicole St. Hilaire, Tim McKernon, Tracy Gillick, Vicki Jessup, Bill Keena

ANNOUNCEMENT

Introduction: Judith Jones of NHLA is working on a grant to promote HCBS as an alternative to nursing home care.

MINUTES: MARCH 14, 2022

M/S/A

AGENDA ITEMS – MAY 9, 2022

- Legislative Update

MEDICAID CONTINUOUS ENROLLMENT:

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

Due to the continuous enrollment requirement during the Public Health Emergency, enrollment has increased as follows since 2019: standard Medicaid increased by 17%; Granite Advantage increased by 69%; and total Medicaid enrollment increased by 32% increase to 237,915. The majority of individuals in protected status are in Granite Advantage, followed by standard Medicaid and CHIP.

DHHS has been working for over a year to support continuation of health insurance coverage for Medicaid beneficiaries once the PHE ends. The Beneficiary Outreach Coverage campaign includes:

- (1) *Pink Letter Campaign* to remind beneficiaries to complete administrative actions. NH's letter campaign was recognized by CMS as a best practice.
- (2) *Call Campaign* to inform beneficiaries of their status and how they can get help. Since the call campaign has started 38% of elderly, disabled and long-term care Medicaid beneficiaries have completed their redeterminations.
- (3) *Update Your Address Campaign*. More than 10,800 cases have been updated.
- (4) *Community outreach meetings* ongoing on how to act on behalf of beneficiaries.

The last renewal of the PHE is expected to be around April 15th or 16th. Assuming that is the case, the PHE will end July 15 with the last coverage date of July 31. There are rumors that continuous enrollment will end even if the PHE were to continue.

MEDICAID QUALITY PROGRAM:

Patrick McGowan, MS CPHQ, Administrator, Medicaid Quality Program

CMS requires State Medicaid programs with Medicaid Care Management to have a quality strategy and seek input from MCAC. The quality strategy will be presented to MCAC in three presentations.

The public comment period on the Department's quality strategy is 5/2/22 – 6/2/22.

MCO quality levers impact access and quality of care:

- Performance based auto-assignment programs incentivize MCO performance; top performing MCOs are awarded auto-assigned members.
- The withhold and incentive program withholds 2% of MCO capitation payments. The withhold amount is at risk if the MCO doesn't meet performance targets. MCOs with excellent performance may be eligible for incentives.
- Liquidated damages provides remedies for non-compliance. DHHS began tracking liquidated damages Sept 2019 and enforcing April 2021.
- The annual quality meeting addresses quality priorities for improvement. Stakeholders focus on one quality measure, reach consensus on barriers that affect Medicaid rates, and brainstorm support to address barriers. <https://medicaidquality.nh.gov/new-hampshire-annual-meeting>
- Alternative payment models focus on Medicaid priorities. Includes provider engagement and support requirements, APM transparency, and reporting requirements.
- The external quality review organization conducts Performance Measure Validation Audits, Contract Compliance Audits, Performance Improvement Project Validation, Additional Quality Studies, Encounter Data Validation, and Provider Network Validation.
- The health disparities plan is designed to identify, evaluate, and reduce health disparities based on age, race, ethnicity, sex, primary language, and disability status.

Patrick will return to MCAC May 9 to present the Access to Care portion of the quality strategy.

RULE: He-M 524, IN-HOME SERVICES:

Amy Girouard, Chair, IHS Rule Subcommittee

The In-Home Services Subcommittee has met since December 2021 to clarify and provide input on the IHS rules. The subcommittee will submit recommended changes at the April JLCAR meeting.

The subcommittee's rule revisions reflect the following values:

- inclusion of people with disabilities within the broader community
- professional standards for facilitation of services
- ensure wellness and habilitation of people served
- ensure standards to include choice of service coordination and services.

A PDMS manual is being developed to clarify waiver services operations. The subcommittee revised the definition of service coordinator to make it easier to meet people's needs.

The State is currently under a Corrective Action Plan (CAP) for its waivers with a focus on:

- conflict of interest regarding the provision of case management and direct service delivery; and
- compliance with directed payment rules, which allow qualified Medicaid providers to bill the state directly.

Carolyn Virtue noted she had requested the rule include federal definitions of case management and service coordination from the waiver. She will attend the JLCAR meeting representing herself, to suggest these items be defined in the rule.

COVID-19 LEGISLATION:

Paula Minnehan, Sr. VP, Government Relations, NHHA; Abby Rogers, Legislative Liaison, Division of Public Health

The following bills were highlighted:

HB 1210, *relative to exemptions from vaccine mandates*: Very high priority bill due to the impact on businesses and health care. It conflicts with federal requirements and puts the state's federal funding at risk.

HB 1606, *making the state vaccine registry an opt-in program*: Very high priority bill as it changes NH's vaccine registry from opt-out to opt-in by providing the opportunity to opt-in/opt-out of the registry for each individual vaccination. DHHS would be required to contract for the development of a new registry at significant cost.

HB 1022, *permitting pharmacists to dispense the drug Ivermectin by means of a standing order*. Ivermectin is not approved for COVID at this time. Efforts are being made to amend the bill to create a study committee.

HB 1604, *including state medical facilities in the statute providing medical freedom in immunizations*: The House removed conscientious objection and retained religious exemption for COVID vaccinations at state and county facilities. Implementation would require conformance with federal requirements.

HB 1131, *relative to facial covering policies for schools*. Public Health is trying to amend the bill to ensure it doesn't conflict with the State's communicable disease requirements.

HB 1439, *relative to hospital visitation policies*. Efforts are under way to amend the bill to be less burdensome and less restrictive for hospitals.

HB 1455, *relative to state enforcement of federal vaccination mandates*. Prohibits state enforcement of federal requirements regarding proof of COVID vaccination as a condition of employment. Working to amend to allow enforcement as a function of licensing of facilities.

HB 1241, *prohibiting a school district from mandating a COVID-19 vaccination for school attendance*. Such a mandate is not part of a school district's authority.

HB 1379, *relative to the department of health and human services' rulemaking authority regarding immunization requirements*. Oppose.

DEPARTMENT UPDATES

DISABILITY DETERMINATIONS:

Deb Sorli, Bureau of Family Assistance

As of March 25, 2022:

- 196 adults pending, of which 153 have Medicaid. 22 of those cases are over 90 days (19 have Medicaid). 8 of the 22 cases are awaiting consultative exams.
- 24 children pending, of which 9 have Medicaid. 2 of those cases are pending over 90 days (1 with Medicaid).

Delays in receiving medical records present the biggest challenge to completing applications. Case aides are using all available tools to obtain records, including requesting clients request their records directly.

HCBS SPENDING PLAN:

Brooke Belanger, Director of Medicaid Enterprise Development

- From January 2022 through April 14, 2022, New Hampshire distributed \$42,338,618 to HCBS providers.
- NH is waiting for one last approval from CMS to be able to distribute just under \$28M to HCBS providers who deliver services under Managed Care.
- NH submitted a disaster state plan amendment (SPA) to CMS in order to distribute \$2.8M to HCBS provider who deliver services under Fee-for-Service. CMS has provided technical assistance to NH on this SPA.

Heidi Kroll of Gallagher, Callahan and Gartrell inquired about the status of payment allocations to be made to Independent case management providers.

The Department is coordinating State Plan and Waiver authorities to ensure that all workforce investment funds for case management goes out together. The Department is awaiting CMS approval on an Amendment to the Appendix K for distribution of funds for non-CFI case management and approval of a Disaster SPA for distribution of funds for CFI case management. It has taken CMS longer than expected to review and approve requests made by states related to HCBS funds. By way of example, NH experienced a nearly 2 month delay as CMS worked out the finer points on our claiming methodology as it relates to distribution of workforce funds through directed payments for providers who deliver services under Managed Care.

MCO CONTRACT UPDATE:

Henry Lipman, Medicaid Director

MCO contract amendment #8 (FY 2023 rates) is expected to be considered in June by the Executive Council. Legislative actions this session and changes to federal regulations will affect future MCO rates. The challenge in developing the rates is around predicting enrollment during the PHE unwind and the percentage within eligibility categories. A risk corridor and retroactive risk adjustment are likely to be a part of the next amendment.

WAIVERS: SUD/SMI AND SUPPORTIVE HOUSING:

Alyssa Cohen, Deputy Medicaid Director

- SMI (Serious Mental Illness) amendment to the SUD (Substance Use Disorder) waiver: Approval is expected this month following a third round of CMS questions. DHHS is gearing up for submitting a renewal request this year of the SUD waiver that expires in June 2023; it would also include an extension of the IMD SMI amendment.
- 1915(i) Supportive Housing waiver: Responses to CMS questions will be submitted this week.

STATUS OF EXECUTIVE ORDER AND HOSPITAL DISCHARGES:

Alyssa Cohen, Deputy Medicaid Director

Of 242 nursing facility admissions during the COVID surge, 197 were discharged as of last week.

DENTAL BENEFIT LEGISLATION:

Sarah Finne, DDS, DMD, Medicaid Dental Director

The two dental bills are moving through the House and Senate where agreement on language has been reached. Additional information on the status of the legislation will be available at the May 9 meeting.

NON-EMERGENCY MEDICAL TRANSPORTATION:

Henry Lipman, Medicaid Director

CTS will be the new transportation provider for fee-for-service Medicaid beneficiaries as of May 1, 2022.

PRIVATE DUTY NURSING AND HOSPICE RULES:

Jane Hybsch, Administrator, Medicaid Medical Services

A stakeholders group will be formed to address private duty nursing (He-W 540) and the hospice (He-W 544) rules. Contact Dawn Landry to participate.

Congratulations to Jane who will be retiring at the end of the month. Appreciation was expressed for her years of work for the Department and citizens of the state.

DHHS WEBSITE REDESIGN:

Lisa Richardson, Webmaster, Bureau of Communications

The Department's current website will be replaced with the newly designed website on May 3rd. The website address will be the same – www.dhhs.nh.gov. Lisa demonstrated key elements of the website.

Medicaid is a primary feature on the website's home page. A website tutorial is provided. Accessibility features include tools for dyslexia, color sensitivities, cursor problems, information on language assistance, etc. Content is on a sixth-grade reading level with the exception of technical provider-related information.

A new functionality, "How can we help you today?" is available.

The MCAC webpage includes links to minutes, meetings, contact information, and documents.

MEMBERSHIP SUBCOMMITTEE:

Carolyn Virtue, Chair

The Membership Subcommittee (Carolyn Virtue, Henry Lipman, Paula Minnehan, Leslie Melby) requested MCAC approval to vote on a motion to appoint new members without the 30-day notice requirement:

M/S/A

Motion 1:

- Accept the resignation of MacKenzie Nicholson.
- Affirm the appointment of Kelley Capuchino as Member representing the NH Community Behavioral Health Association, replacing Bill Rider; and affirm the appointment of Jonathan Routhier as the NHCBHA Alternate. The NH Community Behavioral Health Association is an organizational member.
- Affirm the appointment of Holly Stevens as Member representing NAMI NH, replacing Ken Norton; and
- Affirm the appointment of Susan Stearns as the NAMI Alternate. NAMI NH is an organizational member.

M/S/A

Motion 2:

Reappoint the following members for a 3-year term ending June 30, 2025:

Lisa Adams, Michael Auerbach, Kathleen Bates, Lisa DiMartino, Tamme Dustin, Ellen Keith, Paula Minnehan, Sarah Morrison, Ronnie Rakoski, Marie-Elizabeth Ramas, Karen Rosenberg, Michelle Winchester.

With the approval of the Medicaid Director, the Membership subcommittee recommends these individuals be reappointed for another 3-year term ending June 30, 2025. The vote will be taken at the May 9th meeting.

Discussion:

Sarah Morrison will consult her alternate and get back to the subcommittee.

The Chair requested each member on the list of reappointments contact her with any changes for the May 9 vote.

M/S/A

BYLAWS SUBCOMMITTEE:

Carolyn Virtue, Chair

Carolyn Virtue, Henry Lipman, Paula Minnehan, and Leslie Melby are working on a revision of the MCAC bylaws. Once completed, a draft will be shared with members for consideration.

Meeting adjourned.