



New Hampshire
Department of Health and Human Services

Substance Use Disorder Serious Mental Illness
Serious Emotional Disturbance
Treatment and Recovery Access
Section 1115(a) Research and Demonstration
Waiver

Amendment #4 Request

Presumptive Eligibility for Home and Community Based
Services

Final Submission Date to CMS: TBD

DRAFT - SUBJECT TO CHANGE

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I. Introduction

New Hampshire Chapter 79:568, Laws of 2023 establishes a System of Care for Healthy Aging. As part of the System of Care on Healthy Aging the New Hampshire Department of Health and Human Services (DHHS, or the Department) is required to submit an 1115 Demonstration Waiver in order to implement a robust presumptive eligibility (PE) for home and community-based services (HCBS) on or before September 30, 2024.

New Hampshire is seeking to engage in long-term services and supports (LTSS) program innovations by extending PE to individuals applying for HCBS under the Department's 1915(c), Choices for Independence (CFI) waiver. PE will be designed to prevent unnecessary institutionalization of individuals who are Medicaid-eligible for nursing facility services yet choose to receive services in less restrictive settings.

PE will be an important component of New Hampshire's effort to establish a comprehensive and coordinated system of care. Through the system of care initiative, New Hampshire is working to build upon existing infrastructure to ensure that older adults and adults with disabilities have access to and timely delivery of supports and services. This work is intended to result in several benefits, including: 1) reduced cost of providing long-term care through expanded availability of less costly HCBS; 2) improved access to HCBS in alignment with the State Plan on Aging, the Older Americans Act, and the ADA; 3) streamlined access to long-term care supports; and 4) promotion of healthy aging and the ability to have a meaningful choice in care options, including the ability for older adults and adults with disabilities to receive the care they need in their homes and communities (Source: NH Chapter 79:568, 151-E:22 I-III, and 151-E23).

II. Program Description, Goals, and Objectives

Program Description

DHHS is requesting approval from the Centers for Medicare & Medicaid Services (CMS) for an amendment to the SUD-SMI-SED-TRA Demonstration to include PE to individuals applying for the CFI Waiver who are at risk of institutionalization. This proposed benefit will provide a select set of CFI waiver services to individuals during a PE period following a determination by a qualified entity on the basis of preliminary information that the individual appears to meet functional and financial eligibility requirements using simplified methodology prescribed by the state and approved by CMS. PE will extend a limited period of Medicaid coverage to qualified individuals at risk of nursing home placement without the CFI HCBS waiver, pending final processing of their Medicaid application. This benefit will establish PE for individuals in need of expedited access to HCBS under Medicaid state plan and 1915(c) waiver authorities (CFI) and Medicaid medical coverage regardless of how individuals enter the LTSS system.

The demonstration will allow individuals to access HCBS benefits quickly, in the most appropriate and least restrictive setting, while full functional and/or financial eligibility are determined. This expedited path to services is intended to improve individuals' access to HCBS, and to prevent further decompensation which could lead to institutionalization in nursing facilities. Department analysis has shown that CFI is a significantly more cost-effective alternative to care in nursing facilities. Currently, individuals receiving HCBS through CFI represent an average cost of \$25,203 per fiscal year (based on SFY23 actuals). Comparatively, individuals receiving care in a nursing facility represent an average cost of \$70,679 (based on

SFY23 actuals). Increasing access to HCBS through CFI is a key goal of the PE benefit and larger LTSS system of care initiative.

This benefit is intended to be implemented on or around July 1, 2025. The State is not requesting any new changes to the SUD-SMI-SED-TRA Demonstration outside of those specified in this amendment request (notwithstanding changes previously submitted as part of the demonstration extension request dated September 30, 2022, i.e., the community reentry authority currently under CMS review).

Goals and Objectives

The overall objective of this amendment request is to expand and improve access to HCBS for older adults and adults with disabilities to ensure access to and timely delivery of supports and services and to ensure a meaningful range of options for beneficiaries.

Through this amendment, the State aims to achieve the following goals:

1. Improve the ratio of people using HCBS compared to institutional settings such as nursing facilities;
2. Reduce utilization rate of institutional care while waiting for Medicaid eligibility determination;
3. Reduce the average length of delay from the time an individual submits a Medicaid application until the time the individual begins to receive their first services in order to improve health outcomes and prevent decompensation while awaiting services; and
4. Improve access to the range of options and consumer choice by coordinating with state designated Aging and Disability Resource Centers and person-centered counseling.

Operation and Proposed Timeline

The demonstration will operate statewide. The State intends to implement the demonstration beginning July 1, 2025, through the end of the proposed demonstration extension period, which is June 30, 2029.

III. Eligibility, Delivery System, Benefits, and Cost Sharing

Eligibility

This demonstration will not affect any of the eligibility categories or criteria set forth in the New Hampshire Medicaid State Plan (the State Plan). Individuals aged 18 and older who qualify for an eligibility group approved in the current 1915(c) CFI HCBS Waiver will be eligible for this demonstration. The following eligibility groups will be excluded:

- Temporary eligibility groups;
- Non-citizens qualifying for emergency services only benefits; and
- Family planning only.

Delivery System

No modifications to the current New Hampshire Medicaid FFS or managed care arrangements are proposed through the presumptive eligibility amendment to the SUD-SMI-SED-TRA Demonstration; all enrollees will continue to receive services through their current delivery system.

Benefits

Through this requested demonstration amendment, the State will provide the following benefits to PE eligible individuals. PE eligible individuals will receive CFI HCBS PE benefits through a person-centered planning process. Individuals cannot receive HCBS PE benefits while also receiving services under a 1915(c) waiver. HCBS PE services are not duplicative of services covered under private insurance, Medicare, State Plan Medicaid, or through other federal or state programs. The following list illustrates the select set of CFI waiver services intended to be covered under the PE Demonstration:

- a. Case Management
- b. Cell Based PERS
- c. Community Transition
- d. Day Care Services (Adult Medical Day Care)
- e. Electronic Rx / Cell Based PERS
- f. Electronic Rx / PERS Device
- g. Electronic Rx Device Installation
- h. Electronic Rx Device Monthly Service
- i. Emergency Response System
- j. Home Delivered Meal
- k. Home Health Aide Per Visit
- l. Homemaker
- m. Personal Care Agency Directed
- n. Personal Care Consumer Directed
- o. Personal Care Special Rate
- p. Skilled Nurse Per Visit
- q. Specialized Medical Equipment
- r. Financial Management
- s. PDMS Personal Care
- t. PDMS Home Health Aide
- u. PDMS Homemaker
- v. PDMS Skilled Nurse
- w. Individual Directed Goods & Services
- x. Consultation

Cost Sharing

New Hampshire is not proposing any change to the cost sharing requirements under this amendment. Cost sharing will not differ from those provided under the 1915(c) CFI waiver.

IV. Demonstration Financing

Projected Enrollment and Expenditures

The State anticipates the amendment will result in increased annual Medicaid enrollment, as reflected by individuals who are able to receive PE services prior to eligibility determination for Medicaid and the 1915(c) CFI waiver.

Below is the projected enrollment and expenditures for each demonstration year.

	SFY25	SFY26	SFY27	SFY28	SFY29
Member Months	2,544	2,544	2,544	2,544	2,544
Expenditures	\$5,941,363	\$6,633,700	\$7,406,714	\$8,269,806	\$9,233,472
Individual Members	848	848	848	848	848

V. Waiver and Expenditure Authorities

New Hampshire requests a waiver of comparability, 1902(a)(10)(B), to allow the State to provide benefits for the PE population that are not available in the standard Medicaid State Plan. New Hampshire also requests a waiver of financial eligibility, Section 1902(e)(14), to allow the State to accept attestation of income and resources for enrollment in Medicaid medical services, as well as waiver of any other related federal statutes and regulations required to implement this authority.

No additional waivers of Title XIX or Title XXI are requested through this amendment.

VI. Demonstration Evaluation

Based on the goals defined in section two, New Hampshire proposes the following evaluation plan. DHHS will contract with an independent evaluator to create a more definitive evaluation plan and to conduct this review.

Hypotheses and Research Questions

Goals	Hypothesis	Measures
Goal 1: Improve the ratio of people using HCBS compared to institutional settings such as nursing facilities.	Hypothesis 1: The Demonstration will result in a higher percentage of people using HCBS, as compared to institutional settings such as nursing facilities.	<ul style="list-style-type: none"> • Number of people receiving HCBS through the CFI waiver • Number of people receiving LTSS in institutional settings • Ratio of people enrolled in HCBS as compared to total population receiving LTSS
Goal 2: Reduce utilization rate of	Hypothesis 2: The Demonstration will	<ul style="list-style-type: none"> • Number of individuals who utilize institutional settings

institutional care while waiting for Medicaid eligibility determination.	decrease the utilization rate of institutional care while waiting for Medicaid eligibility	in the period between Medicaid application submission and eligibility determination
Goal 3: Reduce the average length of delay from the time an individual submits a Medicaid application until the time the individual begins to receive their first service in order to improve health outcomes and prevent decompensation while awaiting services.	Hypothesis 3: The Demonstration will reduce the average length of delay from the time an individual submits a Medicaid application until the time the individual begins to receive their first service.	<ul style="list-style-type: none"> • Average length of time from the Medicaid application submission date until service initiation
Goal 4: Improve rate of utilization of the Aging and Disability Resource Centers person centered counseling.	Hypothesis 4: The Demonstration will improve the rate of utilization of the Aging and Disability Resource Centers person centered counseling.	<ul style="list-style-type: none"> • Number of person centered counseling encounters

VII. Public Notice and Tribal Consultation – To Be Completed Following Public Comment, Prior to Final Submission