Instructions
Section 12006(a) of the 21st Century Cures Act (Cures Act) mandates that states implement electronic visit verification (EVV) for all Medicaid personal care services by January 1, 2020, or otherwise be subject to incremental federal medical assistance percentage (FMAP) reductions. The Cures Act includes a provision that allows states to delay implementation of EVV for up to one year if they have encountered unavoidable delays but can demonstrate they have made a good faith effort (GFE) to comply with the Cures Act. Please be advised that the Cures Act provision on GFE exemptions does not provide CMS with authority to delay the FMAP reductions for more than one year.

Please note the following information before completing this form:
- Requests for GFE exemptions should be submitted by November 30, 2019 for PCS.
- Only the State Medicaid Agency Director or his/her designee can submit this form.
- This document is designed to be used electronically. It consists of the following sections. Section 2 and 3 must be completed in its entirety to be considered for GFE.
  - Section 1: Acronyms and Resources
  - Section 2: GFE Request Form
  - Section 3: State Medicaid Director Signature
- To correctly fill out the document electronically, please follow the following tips:
  - For each response, click or tap on the box.
  - The open response questions have no character limits. Type as much or as little as you believe adequately answers each question. To enter text, click on the box, delete the placeholder text, and begin typing your response.
  - For “yes/no” and date-specific answers, click on the drop-down arrow to the right of the answer box and select the appropriate answer. Be sure the click outside the box after completing the question to ensure that the answer does not change.
  - Save the document often to avoid losing work!

If you have any questions, please email EVV@cms.hhs.gov or contact your CMS Regional Office.
Section 1. Acronyms and Resources

List of commonly used acronyms in this file

- APD: Advance Planning Document
- CFC: Community First Choice
- EVV: Electronic Visit Verification
- GFE: Good Faith Effort
- HCBS: Home and Community-Based Service(s)
- IAPD: Implementation Advance Planning Document
- PAPD: Planning Advance Planning Document
- PAS: Personal Assistance Service(s)
- PCS: Personal Care Service(s)
- SMA: State Medicaid Agency
- SSA: Social Security Act

CMS EVV resources website link:
Click here to view detailed discussions of EVV models and section 12006 21st Century Cures Act requirements.
Section 2. Good Faith Exemption (GFE) Request Form

A. Basic State data
Date of Submission: 10/17/2019
State: New Hampshire
State Medicaid Agency (SMA) Requesting GFE: NH Department of Health and Human Services
SMA Contact Information
  Name: Henry D. Lipman
  Title: Medicaid Director
  Email: henry.lipman@dhhs.nh.gov
  Phone: 603-271-9422

Indicate the Social Security Act (SSA) Authority and service type SMA requests GFE consideration:

<table>
<thead>
<tr>
<th>Authority</th>
<th>PCS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 1905(a)(24) state plan personal care benefit</td>
<td>Yes</td>
</tr>
<tr>
<td>Section 1915(c) HCBS waivers</td>
<td>Yes</td>
</tr>
<tr>
<td>Section 1915(i) HCBS state plan option</td>
<td>No</td>
</tr>
<tr>
<td>Section 1915(j) self-directed PAS</td>
<td>No</td>
</tr>
<tr>
<td>Section 1915(k) CFC state plan option</td>
<td>No</td>
</tr>
<tr>
<td>Section 1115 demonstration projects</td>
<td>No</td>
</tr>
</tbody>
</table>
B. GFE Request Detail

1. Has the state chosen an EVV model? Yes
   a. If yes to above, please indicate the model chosen. Open Vendor
   b. If the model option chosen is "other", describe the model in detail here:
   c. If no to above response, please indicate when the state anticipates selecting a model. Date will be in month/year format. Click or tap to enter a date.

2. Has the state submitted an APD? No
   If yes, please complete 2.a through 2.c.
   a. Type of APD submitted: Choose APD submission type.
   b. Date of APD submission: Click or tap to enter a date.
   c. Most recent APD approval date from CMS (if available): Click or tap to enter a date.
   d. If no to above response, explain why the state has not submitted an APD. To secure funding through the NH biennial budget process, this project was not identified in time to meet the September 1, 2016 submission deadline for the SFY 2018-2019 capital budget so the EVV project was submitted as part of the State Fiscal Year 2020-2021 capital budget. The State Fiscal Year 2020-2021 budget was passed by the legislature and signed by the Governor on September 26, 2019. The State Fiscal Year 2020-2021 budget does not include funding for EVV. It is unclear at this time how the EVV system will be funded. NH is undertaking a two-step process; engage a consultant to assist with defining the business and technical requirements for the state’s EVV system and once complete to contract for the actual EVV system. NH has issued a Request for Proposals to engage the consultant (https://www.dhhs.nh.gov/business/rfp/rfp-2019-ltss-01-elect.htm) and the contract is targeted for award in November 2019. Funding is available for this consultant contract. The selected consultant will assist NH DHHS to gather input from internal and external stakeholders to define the business and technical requirements for the EVV and Aggregator systems. As part of that process, the APD for the systems implementation will be written and submitted to CMS in the first quarter of 2020 provided funding is identified and available.

3. When is the state’s expected implementation date for PCS? 01/2022
4. In the table on the following page, please describe the state’s progress towards EVV implementation to date. If you do not see a relevant answer, please choose “other” and write the specific implementation status in the “detailed description of the implementation stage” column. Please add additional rows or attach additional documentation as needed. There are no character limits in each cell. This section includes seven parts.

- **Implementation Stage**: States can choose from a CMS-defined list of EVV implementation stages. However, CMS does not expect that all states will define implementation stages in the same way. Therefore, if the state has a different implementation stage, please go to the “other” cell and describe in detail what the implementation stage is.

- **Detailed Description of the Implementation Stage**: Describe the state’s current implementation process for this stage if it is in progress. If the state has completed this specific implementation stage, describe the activities that have been completed. States are free to attach any additional documents and reference these files in the description for further information.

- **Not Applicable**: Check the box if the stage listed is not applicable to the state.

- **Is this stage delayed?** Mark “Yes” or “No” depending on if the specific implementation stage is delayed. If “Yes”, fill out step 6 in the pages below.

- **Date Completed**: If implementation stage was completed, select the date in which the stage was complete.

- **If in process, anticipated date of completion**: If the stage is in progress, mark the expected date of implementation.

- **Additional Information**: There is an extra field included below the table to include more specific details and information about the state’s unique implementation process.
<table>
<thead>
<tr>
<th>Implementation Stage</th>
<th>Detailed Description of the Implementation Stage</th>
<th>Check if not applicable (N/A)</th>
<th>Is this stage delayed? If yes, complete step 5.</th>
<th>Date Completed</th>
<th>If in the process, anticipated date of completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Planning - Environmental scanning</td>
<td>A RFP was issued for a consultant to assist the State with defining EVV requirements.</td>
<td>☐</td>
<td>Yes</td>
<td>Click or tap to enter a date.</td>
<td>3/12/2019</td>
</tr>
<tr>
<td>Planning – Stakeholder meetings</td>
<td>Stakeholder engagement will be performed in conjunction with the Environmental scanning stage. No activities have taken place to this point. New Hampshire is in the process of contracting with a consultant to assist with stakeholder engagement. The consultant contract will include an extensive planning and environmental scanning process. Specifically, the Contractor shall conduct stakeholder engagement and a seven (7) step Market Survey Process to inform and gather high-level needs and requirements that will be used to identify specific, measurable and testable, traceable, complete, and consistent requirements that will be utilized as a foundation for a Request for Proposal (RFP) to procure the Electronic Visit Verification (EVV) technology and services. State staff and external stakeholders will be solicited for input and feedback through public forums, surveys, and other means as proposed by the Contractor. A New Hampshire EVV website page will be published on the Department of Health and Human Services website by 11/15/19 and will be updated as the engagement plan is developed. All meetings will be posted on the website page and will be noticed through email and social media.</td>
<td>☐</td>
<td>Yes</td>
<td>Click or tap to enter a date.</td>
<td>3/31/2020</td>
</tr>
<tr>
<td>Planning – EVV model selection</td>
<td>NH is planning for an Open Model but this decision may be impacted by the conclusions and recommendations of the EVV consulting vendor during their analysis of the State’s environment and available EVV technology.</td>
<td>☐</td>
<td>Yes</td>
<td>Click or tap to enter a date.</td>
<td>3/31/2020</td>
</tr>
<tr>
<td>Implementation Stage</td>
<td>Detailed Description of the Implementation Stage</td>
<td>Check if not applicable (N/A)</td>
<td>Is this stage delayed? If yes, complete step 5.</td>
<td>Date Completed</td>
<td>If in the process, anticipated date of completion</td>
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<tr>
<td>Modification of the existing contract to include EVV</td>
<td>Our contracting approach has not been determined, but we may need to modify existing contracts, e.g. MMIS, to accommodate EVV.</td>
<td>☐</td>
<td>Yes</td>
<td>Click or tap to enter a date.</td>
<td>12/31/2020</td>
</tr>
<tr>
<td>Preparing for RFP issuance</td>
<td>Our EVV System RFP will be developed with assistance from the EVV consultant and is anticipated to be finalized, approved by CMS, and disseminated to the public by May 1, 2020.</td>
<td>☐</td>
<td>Yes</td>
<td>Click or tap to enter a date.</td>
<td>4/30/2020</td>
</tr>
<tr>
<td>RFP issued and awaiting vendor bids</td>
<td>The projected date that the RFP will be issued.</td>
<td>☐</td>
<td>Yes</td>
<td>Click or tap to enter a date.</td>
<td>5/1/2020</td>
</tr>
<tr>
<td>RFP closed and in the process of vendor selection</td>
<td>Vendor selected and contract approved by the NH Governor and Executive Council.</td>
<td>☐</td>
<td>Yes</td>
<td>Click or tap to enter a date.</td>
<td>12/18/2020</td>
</tr>
<tr>
<td>Vendor selected and developing work plans</td>
<td>Vendor begins and work plans refined and approved.</td>
<td>☐</td>
<td>Yes</td>
<td>Click or tap to enter a date.</td>
<td>2/28/2021</td>
</tr>
<tr>
<td>Implementing work plans</td>
<td>Development, Testing, and Implementation of the EVV and Aggregator systems.</td>
<td>☐</td>
<td>Yes</td>
<td>Click or tap to enter a date.</td>
<td>9/30/2021</td>
</tr>
<tr>
<td>Piloting the EVV system</td>
<td>Pilot with a limited number of providers and individuals.</td>
<td>☐</td>
<td>Yes</td>
<td>Click or tap to enter a date.</td>
<td>12/31/2021</td>
</tr>
<tr>
<td>Updating existing EVV system in the state</td>
<td>The State of NH does not currently have an EVV system. A limited number of providers in the state have EVV systems that may need modification.</td>
<td>☐</td>
<td>Yes</td>
<td>Click or tap to enter a date.</td>
<td>12/31/2021</td>
</tr>
<tr>
<td>Other implementation stages not described above (Please detail the state’s current implementation stage in the next column.)</td>
<td>From October- December 2021, the Department will pilot the system with a cross section of providers. Post pilot and lessons learned, the Department will operationalize with all individuals and providers.</td>
<td>☐</td>
<td>Yes</td>
<td>Click or tap to enter a date.</td>
<td>1/1/2022</td>
</tr>
</tbody>
</table>
5. In the table on the following page, choose the type of unavoidable delays the state has encountered related to EVV implementation. For each choice, describe in detail what the delays are, why those delays have occurred, and what the state’s plans are for addressing the delays. The list provided in the table includes examples of potential delays and will not encompass each unique circumstance of each state. If you do not see a relevant answer, please choose “other” and write the specific delay situation in the “detailed description of the delay” column. Please add additional rows or attach additional documentation as needed. There are no character limits in each cell.

This section includes four parts:

a. **Detailed Description of the Delay**: Detail the state’s circumstances for the delay. Describe and what specific events have occurred to cause this delay.

b. **Why Delays Occurred**: Detail why the state believes the cause of the delay happened.

c. **State’s Mitigation Plan**: Detail the state’s plan for addressing the delay going forward.

d. **Estimated Date of Completion**: Enter the estimated date that the state believes the task can and will be completed.
<table>
<thead>
<tr>
<th>Type of Unavoidable Delay</th>
<th>Detailed Description of the Delay</th>
<th>Why Delays Occurred</th>
<th>State’s Mitigation Plan</th>
<th>Estimated Date of Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Procurement issues</td>
<td>The procurement action to obtain a consultant to assist with the planning stage was delayed by six months.</td>
<td>Change in Department contracting staff and workload challenges. Contract staff were diverted to work on contracting actions for Opioid treatment services and reprurement of the Medicaid Managed Care Program, which delayed our EVV consultant RFP.</td>
<td>Staffing and workload was shifted to meet current deadlines. A Project Manager was assigned to keep the project on task.</td>
<td>11/25/2019</td>
</tr>
<tr>
<td>Budget and/or legislation appropriation issues / Funding issues</td>
<td>To secure funding through the NH biennial budget process, it was not possible until the State Fiscal Year 2020/2021 capital budget submission to request funds for the EVV project.</td>
<td>To secure funding through the NH biennial budget process, this project was not identified in time to meet the September 1, 2016 submission deadline for the SFY 2018-2019 capital budget so the EVV project was submitted as part of the State Fiscal Year 2020-2021 capital budget. The State Fiscal Year 2020-2021 budget was passed by the legislature and approved by the Governor on September 26, 2019. This does not include funding for EVV. Despite the Department of Health and Human Services requesting resources for EVV implementation, the Executive Branch and Legislature ultimately did not include this funding in the biennial appropriation package and did not explicitly enter into the legislative record their decision in adopting the capital budget. Moving forward, the Department is vetting funding options through the biennial appropriation for continued implementation.</td>
<td>NH is undertaking a two-step process; engage a consultant to assist with defining the business and technical requirements for the state’s EVV system and once complete to contract for the actual EVV system. A different source of funding is identified to fund the consultant during the Planning Stage. NH will continue to pursue a funding solution for the EVV system.</td>
<td>12/31/2019</td>
</tr>
<tr>
<td>Stakeholder engagement issues</td>
<td>Delay in working with Stakeholders to define EVV systems business and technical requirements.</td>
<td>The RFP for a consultant to assist the State with defining EVV requirements was delayed.</td>
<td>The consultant contract will include an extensive planning and environmental scanning process. State staff and external stakeholders have shown interest and will be solicited for input and feedback.</td>
<td>3/31/2020</td>
</tr>
<tr>
<td>--------------------------------</td>
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</tr>
<tr>
<td>System interoperability issue or IT issue</td>
<td>Delay in defining the EVV systems requirements has delayed defining specific MMIS requirements and contract amendments.</td>
<td>The RFP for a consultant to assist the State with defining EVV requirements was delayed.</td>
<td>The consultant contract will include defining MMIS requirements and assisting the State with APD development.</td>
<td>3/31/2020</td>
</tr>
</tbody>
</table>
Section 3. Medicaid Director Signature

This document is only accepted if the State Medicaid Director signs this form. States can print this file, sign, date the signature, and submit the signature page separately in a PDF file format or add a digital signature. To add a digital signature, right click on the signature line below and choose “sign” option and follow the prompts.

I, Henry D. Lipman, attest that the information provided in this form is accurate and reflective of the current activities regarding EVV of my state.

State Medicaid Director Name: Henry D. Lipman

State Medicaid Director Title: NH State Medicaid Director

October 17, 2019

[Signature]

Henry D. Lipman
NH State Medicaid Director

PRA DISCLOSURE STATEMENT: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148 (CMS-10398 #54). The time required to complete the information collection is estimated to average 8 hours, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.