IMPORTANT! Please read this entire notice about the Granite Advantage Health Care Program Community Engagement requirements. If you need help with reading or understanding this notice, please contact the Department of Health and Human Services Customer Service Line at 1-844-275-3447 (1-844-ASK DHHS).

People covered by Medicaid through the Granite Advantage Health Care Program typically must complete 100 hours of Community Engagement activities each month to maintain medical coverage unless they are exempted. Some exemptions include an individual who has a disability, is pregnant, is a parent or caretaker for a child under the age of six, is medically frail as certified by a licensed medical professional, or is enrolled in a state-certified drug court program. If you have been identified as mandatory, you have at least 75 days from the date of this letter to request an exemption or to start qualifying activities.

There are many ways to do Community Engagement activities. Activities include work, school, volunteering, job training, and more. See the enclosed Things You Need to Know for a full list of qualifying activities for Community Engagement.

If you do not meet the monthly hours requirements and you are not exempt, your Medicaid eligibility could be suspended.

Your Community Engagement status is Mandatory. Your participation status and current hours are based on your eligibility information provided by you. Based on what you’ve already told us, these hours will be automatically counted each month as long as the information remains valid. Please contact DHHS Customer Service at the number above if you think that the information is incorrect or if there is other information we should consider. Our records show:
COMMUNITY ENGAGEMENT STATUS

<table>
<thead>
<tr>
<th>Participation Status</th>
<th>Participation Start Date</th>
<th>Monthly Hours</th>
<th>Required</th>
<th>Current</th>
<th>Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mandatory</td>
<td>06/01/2019</td>
<td></td>
<td>100</td>
<td>100</td>
<td>0</td>
</tr>
</tbody>
</table>

Currently due to your enrollment in SNAP you are considered compliant with the Community Engagement requirements while you remain active in SNAP.

**Good Cause**
If something out of the ordinary happens to you during the month that prevents you from completing the hours requirement such as a family emergency, your car breaking down, or you or someone in your household having a serious illness, you may submit a good cause request that can cover some or all of your missing hours.

**How to apply for an Exemption from the Community Engagement requirement**
If you think you should be exempt from the Community Engagement requirement due to medical frailty, disability, illness, having a child under 6, or another reason, you may send us a medical frailty form signed by a licensed medical provider or an exemption form with the necessary licensed medical provider signature and/or other required documentation.

**Where to find Granite Advantage forms**
The Medical Frailty and Exemption forms can be found online by logging into NH EASY, by calling Customer Service and using the self-service option to ask that the form be sent to you, or by contacting your local district office by phone or in-person. Completed forms can be submitted to DHHS online, by mail, or by fax.

**How to find out more about Community Engagement**
To learn more about Community Engagement, see the enclosed Things You Need to Know. You can also visit [https://nheasy.nh.gov/#/granite-advantage](https://nheasy.nh.gov/#/granite-advantage) for additional information or call DHHS Customer Service at 1-844-275-3447 (1-844-ASK DHHS).

**The best way to manage your Community Engagement is through NH EASY**
To create your account, go to NH EASY by entering the following URL into your internet browser: [https://nheasy.nh.gov](https://nheasy.nh.gov). Here is your NH EASY PIN D2442. Keep this in a safe place where no one else can see it.

Access your Community Engagement details 24 hours a day, 7 days a week
Call Customer Service and select the Granite Advantage option under the Self-Service menu. Here is your Temporary Self-Service PIN 5569.

**Notice of right to receive reasonable modification**
If you have a disability that impacts your ability to meet the Community Engagement requirement, you are entitled to reasonable modification of the program requirements so that you can participate. We can help you with applying for an exemption or good cause, getting information about appealing a suspension or disenrollment, reporting your Community Engagement hours, and reading our notices and program rules.
If you are unable to do some or all of the 100 hours because of your disability, we can reduce the number of hours that you are required to participate in or, if you qualify for an exemption, we can exempt you entirely from the Community Engagement requirement.

We are happy to provide you with additional services such as assistance with understanding the Granite Advantage program. Some examples of things we can explain include, but are not limited to, departmental notices, eligibility requirements, exemption requirements, how to apply for an ADA exemption, program benefits, how to establish eligibility, and how to meet and report Community Engagement activities to maintain eligibility.

If you think we made a mistake: Your Right to an Administrative Appeal ("Hearing")
You can appeal our decision. For example, you can appeal if you think there is an error on your participation status, suspension, or termination of your benefits. If you have any questions about the action we took, please contact Customer Service.

Only call the Administrative Appeals Unit if you want to ask for an appeal or if you have questions about a current appeal. You can contact the Appeals Unit directly at 1-800-852-3345, extension 4292. You can also write your own letter to ask for an appeal. Send your written request to the address at the top of the first page of this Notice. You must ask for an appeal within 30 days of the date of this notice. If you are already getting benefits and you ask for an appeal, you can also ask to keep getting the same benefits while you wait for the decision on your appeal. If you want to do this, you must ask for your benefits to continue within 15 days of the date of this notice of the action you are appealing.

Once you ask for an appeal, we will try to fix the problem over the phone or by meeting with you. If a phone call or meeting does not fix the problem, you can schedule a hearing. A hearing is a meeting between you, someone from DHHS, and an appeals officer. At the hearing, you can explain why you think we made a mistake. To get ready for your hearing, you can:

- Ask for a copy of your file before the hearing.
- Bring someone with you to the hearing, like a friend, relative, or lawyer, or, come by yourself. DHHS will not pay for the cost of any legal services you may want. However, there are free and reduced cost legal services available in NH.
- Bring documents, information, or witnesses to show us where you think we made a mistake.
Granite Advantage members who have to participate can use a combination of qualifying activities to fulfill their 100-hour Community Engagement requirements including:

- **Employment**: Having a job.
- **Training**: Receiving job skills training including vocational training.
- **Education**: Working towards getting a high school diploma or attending an accredited college or university.
- **Job Search**: Such as looking for a job and attending job readiness workshops.
- **Community and Public Service**: Doing volunteer community or public service.
- **Caregiving**: Acting as the caretaker of a person, not in your household.
- **Substance Use Disorder Treatment**: Receiving outpatient substance use disorder treatment.
- **Subject to another work requirement**: Complying with a work program such as TANF or SNAP.

Some Granite Advantage members may not be able to participate in Community Engagement. These individuals may be exempt and will not have to complete community engagement activities. Individuals who are exempt include those with the following conditions/situations:

- **Disabled**: Have a disability that prevents you from participating.
- **Pregnant**: Are currently pregnant or within 60 days of the end of a pregnancy.
- **Medically Frail**: Have a physical, mental, or emotional condition that makes it hard to do daily activities, as certified by a licensed medical professional.
- **Temporary Illness**: Are sick, or getting treatment in the hospital, including intensive outpatient (IOP) or residential substance use disorder treatment.
- **Parent or Caretaker**: Are a parent or caretaker of a child under six or individuals living in the household with needs that require care, as certified by a licensed medical professional.
- **State-Certified Drug Court Program**: Are participating in a state-certified drug court program, as certified by the Administrative Office of the Superior Court.
- **Exempt from another work requirement**: Are currently exempt in TANF, SNAP, or other work program.
- **Employer Sponsored Insurance**: Are enrolled in the Health Insurance Premium Payment (HIPP) Program.

Sometimes things out of your control happen. If something out of the ordinary happens to you during the month that prevents you from completing the hours such as a family emergency, your car breaking down, or you or someone in your household having a serious illness, you may submit a good cause request that can cover some or all the missed hours.

How To Request An Exemption, Good Cause, Or Medical Frailty Form
If you think that you have an exemption reason, good cause for not meeting your monthly hourly requirement, or are medically frail, you can ask for an exemption by logging into NH EASY, by calling DHHS at 1-844-275-3447 and use the self-service option to ask that a Granite Advantage Exemption form, Good Cause form or Medically Frail form be sent to you, or contact your local district office by phone or in-person.

How To Report Your Community Engagement Hours
You can report and track your reported hours through NH EASY, where you will also find the Activity Reporting forms. If you do not have an NH EASY account, go online to NHEASY.NH.GOV and make one today. You can also report your hours by calling DHHS at 1-844-275-3447, in person at your local District Office, mailing them to the DHHS Granite Advantage Health Plan, PO Box 3778, Concord, NH 03302-3778, or by fax to (603) 271-5623.
Granite Workforce: Granite Workforce is a pilot work program being offered by NH Employment Security (NHES) and the NH Department of Health and Human Services. This work program is available to Granite Advantage members, ages 19-64, that are:
- A parent responsible for a child under the age of 18.
- Any Granite Advantage member ages 19-24.

NHES will determine program eligibility and provide assessment and case management services. NHES case managers will offer eligible members:
- Direct job placement into employment,
- On-the-job training programs,
- Referral services to education/training/apprenticeship programs,
- Job search and job readiness assistance, and
- Referral to community services for those not yet ready for work.

Granite Workforce can provide the following employment supports for eligible participants. Up to:
- $5,000 in tuition assistance,
- $650 in emergency housing costs,
- $450 in basic education costs,
- $160 a month for mileage reimbursement up to 4 months, and/or
- $100 for child care registration fees.

For more information, please visit NHEASY.NH.GOV. If you do not have an NH EASY account, you can create one now.
<table>
<thead>
<tr>
<th>Language</th>
<th>Message</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
<td>ATTENTION: If you speak [insert language], language assistance services, free of charge, are available to you. Call 1-844-275-3447 (TTY: 1-800-735-2964)</td>
</tr>
<tr>
<td>Español</td>
<td>ATENCIÓN: Si usted habla español, tiene a disposición servicios de asistencia lingüística, gratuitos. Llame al 1-844-275-3447 (TTY: 1-800-735-2964)</td>
</tr>
<tr>
<td>Ikinyarwanda</td>
<td>IKITONDERWA: Nuvuga Ikinyarwanda, serivisi z’ubufasha bw’ururimi, zitishyurwa, urazibona. Hamagara 1-844-275-3447 (TTY: 1-800-735-2964)</td>
</tr>
<tr>
<td>Nepali</td>
<td>ध्यान दिनुहोस्: यदि तपाईं नेपाली भाषा बोल्नुहुन्छ भने, तपाईको लागि निःशुल्क नेपाली भाषा सहायता सेवा उपलब्ध छ ठ। 1-844-ASK-DHHS (TTY: 1-800-735-2964) मा फोन गर्नुहोस्।</td>
</tr>
<tr>
<td>Kiswahili</td>
<td>TAHADHARI: Ikiwa unaongea Kiswahili, huduma za usaidizi wa lugha ya Kiswahili, zinapatikana kwako bila malipo. Piga simu 1-844-275-3447 (TTY: 1-800-735-2964)</td>
</tr>
<tr>
<td>Arabic</td>
<td>انتباه: إذا كنت تتحدث العربية، هناك خدمة ترجمة مجانية متاحة لك. الرجاء الاتصال بالرقم 1-844-275-3447 (TTY: 1-800-735-2964)</td>
</tr>
<tr>
<td>Kreyòl Ayisyen</td>
<td>ATANSYON: Si ou pale Kreyòl Ayisyen, Nou mete sèvis asistans lang ki gratis disponib pou ou. Rele nan nimewo 1-844-275-3447 (TTY: 1-800-735-2964)</td>
</tr>
<tr>
<td>Ikirundi</td>
<td>MENYA NEZA: Ukaba uvuga Ikirundi, urashobora kuronswa ubufasha mu gusiguza muzindi ndimi kubuntu. Hamagara kuri 1-844-275-3447 (TTY: 1-800-735-2964)</td>
</tr>
<tr>
<td>Português</td>
<td>ATENÇÃO: Se você fala Português temos serviços gratuitos de assistência linguística disponíveis para você. Ligue para o número 1-844-275-3447 (TTY: 1-800-735-2964)</td>
</tr>
<tr>
<td>Soomaali</td>
<td>DIGTOONI: Haddii aad ku hadasho Soomaali, adeegyada caawimada luqadda, bilaash ah, ayaa laguu heli karaa. Wac 1-844-275-3447 (TTY: 1-800-735-2964)</td>
</tr>
<tr>
<td>Maay</td>
<td>FIIRA QAAS EH: Hattii ka koothaasa af Maay, atheegatha kaalmatha afka, bilaash eh, yaa la kin helee. Han weer 1-844-275-3447 (TTY: 1-800-735-2964)</td>
</tr>
</tbody>
</table>
Get help in your language

Burmese
Get help in your language by calling 1-844-275-3447 (TTY: 1-800-735-2964)

French
ATTENTION: Si vous parlez français, des services d'assistance linguistique sont mis à votre disposition gratuitement. Appelez le 1-844-275-3447 (TTY: 1-800-735-2964)

Bosnian/Croatian
PAŽNJA: Ako govorite Bosanski/Hrvatski, besplatne prevodilačke usluge su vam na raspolaganju. Pozovite 1-844-275-3447 (TTY: 1-800-735-2964)

Vietnamese
LUU Y: Nếu quý vị nói tiếng Việt, các dịch vụ hỗ trợ ngôn ngữ tiếng Việt miễn phí sẵn có dành cho quý vị. Hãy gọi 1-844-275-3447 (Đành cho người khiếm thính: TTY: 1-800-735-2964)

Mandarin Chinese
注意：如果您讲普通话，可免费享受普通话帮助服务。请拨打1-844-275-3447 (TTY: 1-800-735-2964)

Punjabi
ਪੰਜਾਬੀ: ਜੇਕਰ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਿੇ ਹੋ, ਤਾਂ ਪੰਜਾਬੀ ਭਾਸਾ ਧ ਿੱਚ ਸਹਾਇਤਾ ਸੇ ਾ ਾਂ, ਤੁਹਾਡੇ ਲਈ ਮੁਫ਼ਤ ਉਪਲਬਿ 

Russian
ВНИМАНИЕ: Если вы говорите по-русски, переводческие услуги могут предоставляться вам бесплатно. Звоните 1-844-275-3447 (TTY: 1-800-735-2964)

Greek
ΠΡΟΣΟΧΗ: Εάν μιλάτε ελληνικά, διατίθενται δωρεάν γλωσσικές υπηρεσίες υποστήριξης. Καλέστε 1-844-275-3447 (TTY: 1-800-735-2964)

Hindi
ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपके लिए भाषा सहायता सेवाएँ मुफ्त उपलब्ध हैं। कॉल करें 1-844-275-3447 (TTY: 1-800-735-2964)