CARE MANAGEMENT PLAN SELECTION

Coverage from the Qualified Health Plans in the NH Premium Assistance Program is ending on December 31, 2018. This does not mean you are losing your health care coverage. This does mean that you need to pick one of the Medicaid care management health plans listed below by December 3, 2018 at 4:00 p.m. or a new plan will be assigned to you. If you are assigned to a new health plan, you will still be able to switch by December 28, 2018 when annual open enrollment ends. Your coverage with the new plan will start on January 1, 2019.

Your two choices through the Medicaid Care Management Program are:

- NH Healthy Families
- Well Sense Health Plan

Under the Care Management Program, one of two companies called Health Plans will provide your health care coverage. Each Health Plan has doctors, hospitals, and other health care providers available to provide your care. You are getting this letter because you or someone in your case gets NH Medicaid and must pick a Health Plan. After you pick a health plan, you will be asked to pick a primary care provider (PCP). You may already have a PCP or know of a PCP you would like. If you do, you may tell us the PCP you want when you pick your Health Plan.

Call the Medicaid Service Center at 1-888-901-4999 to pick your Health Plan and PCP, or if you have any questions about this letter.

These are the people in your case who need to pick a health plan by the due date shown. If they don’t pick a Health Plan by the date below, they will be assigned one.

<table>
<thead>
<tr>
<th>Name</th>
<th>Enrollment Status</th>
<th>Reason</th>
<th>Due Date</th>
</tr>
</thead>
</table>

Each person in your case has an enrollment status.
“Mandatory” enrollment status means that a person must pick a Health Plan. If a person in your household is getting Medicaid but not listed here it may mean he or she is “Exempt”. Exempt means the person may not pick a Health Plan. The person will continue to be covered by Medicaid. For more information on who is exempt, call Medicaid Service Center at 1-888-901-4999.

HOW DO I PICK A HEALTH PLAN AND IDENTIFY WHICH PRIMARY CARE PROVIDER (PCP) I WANT?

You may pick from two Health Plans. The enclosed Frequently Asked Questions (FAQ), Side by Side comparison, and the Health Plan Worksheet will help you decide which Health Plan is best for you. After you pick a health plan, you will be asked to pick a PCP. You may already have a PCP or know of a PCP you would like. If you do, you may tell us the PCP you want when you pick your Health Plan. You do not have to pick a PCP now. For more information:

- Call the Medicaid Service Center at 1-888-901-4999 or
- Visit www.nheasy.nh.gov or
  To find your local ServiceLink, call 1-844-ASK-DHHS or 1-844-275-3447.

You do not have a NH EASY account yet, but if you create one, you can also pick your Health Plan and PCP online. The online process is easy and fast. Go to www.nheasy.nh.gov and create an account. You will need this Personal Identification Number (PIN): H3783

Once you have a NH EASY Gateway to Services account:
- Sign in to your NH EASY account by entering your User ID and password.
- Select the 'Health Plans' button.
- When picking your Health Plan, you can also pick your PCP if you want.
- When you know which Health Plan and PCP you want, select the 'Save Plans' button.

If you do not call the Medicaid Service Center at 1-888-901-4999 or create a NH EASY account to pick your Health Plan and PCP, you must complete and return the Health Plan Selection Form that is with this letter.

WHAT HAPPENS NEXT?
Continue using your Medicaid Card for all your health care needs. Don’t throw your Medicaid Card away. You will still need it. In a few weeks, you will also get a Welcome Packet and a health plan card from your Health Plan. When you receive services show both of your cards to your doctor and pharmacy.

QUESTIONS?
Call the Medicaid Service Center at 1-888-901-4999 for help with any questions you have about Care Management or if you need help in picking your Health Plan or PCP.
HEALTH PLAN SELECTION FORM

The people listed below must pick a health plan.

- If you do not already have a Health Plan, you MUST pick a Health Plan.
- You may tell us the primary care provider (PCP) you want by calling 1-888-901-4999, to get the PCP’s NPI Number (National Provider Identifier).
- If you do choose a PCP using this form, you must provide the NPI Number in the space below.
- You may call the Medicaid Service Center at 1-888-901-4999, rather than completing this form, if you choose.

Please review the instructions on the next page.

<table>
<thead>
<tr>
<th>Name</th>
<th>MID</th>
<th>Healthy Families</th>
<th>Well Sense</th>
<th>Opt Out</th>
<th>National Provider Identifier Number (Optional)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>O</td>
<td>O</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

Do not write below this grid.
HOW TO COMPLETE THIS FORM

To pick a Health Plan using this form, you must fill it out according to the guidelines below:

- Use BLACK ink.
- Fill in only one circle for each person.
- Fill in the entire circle, firmly, and within the lines, as much as possible.
- If you want to tell us the PCP you have picked, enter the PCP's NPI Number (National Provider Identifier). To get the NPI Number, you may call the Medicaid Service Center at 1-888-901-4999 or visit nheasy.nh.gov or for more information visit http://www.dhhs.nh.gov/ombp/caremgt/index.htm.

Do NOT do the following:

- Do not fill in more than one circle for any one person.
- Do not write outside of the circles.
- Do not cross out mistakes.
- Do not wrinkle this form.
- Do not write on or near the barcode.

Return the completed form in the enclosed envelope or mail it to:
Department of Health and Human Services
Care Management CSU
PO BOX 1810
Concord, NH 03302-9954

Questions?
If you have any questions, or you would like to talk to someone about picking your Health Plan, call the Medicaid Service Center at 1-888-901-4999.
Member Enrollment Guide to the Quality of NH Medicaid Health Plans

Choosing the managed care plan that works best for you and your family is important. One thing to think about before you decide is how well the different plans perform. NH compares Medicaid health plans using over 100 measures that can be found at: [https://medicaidquality.nh.gov/](https://medicaidquality.nh.gov/). This brief report shows how Medicaid managed care plans compared in 2017 using a few of those measures.

**NCQA Medicaid Health Insurance Plan Ratings 2018–2019**

National Committee for Quality Assurance (NCQA) rates Medicaid health plans on a scale of 0–5, where 5 is the highest score and 0 is the lowest score. The overall score considers the rating for customer satisfaction, prevention and treatment. Below are the NH Medicaid plan ratings:

- Boston Medical Center Health Plan Inc. (d/b/a Well Sense Health Plan) rated 4.5 out of 5.
- Granite State Health Plan d/b/a New Hampshire Healthy Families rated 4 out of 5.

**Rating of Health Plan - Adults**

This measure captures the percent of adults who gave their health plan a rating of 8, 9 or 10 on a scale of 1 through 10. The lowest rating is a 1 and the highest is a 10.

- NH HEALTHY FAMILIES: 77%
- NATIONAL MEDICAID: 77%
- WELL SENSE HEALTH PLAN: 72%

**Rating of Health Plan - Children**

This measure captures the percent of parents or guardians who gave their child’s health plan a rating of 8, 9 or 10 on a scale of 1 through 10. The lowest rating is a 1 and the highest is a 10.

- NH HEALTHY FAMILIES: 87%
- NATIONAL MEDICAID: 86%
- WELL SENSE HEALTH PLAN: 84%

**Well Child Visits for Children Age 3 - 6**

This measure captures the percent of children 3-6 years of age who had at least one well child visit with a primary care provider.  

- NH HEALTHY FAMILIES: 77%
- WELL SENSE HEALTH PLAN: 77%
- NATIONAL MEDICAID: 76%

The information used for this report was reviewed for accuracy. The most current information available was used for this report (Data Source: National Committee for Quality Assurance [NCQA] Healthcare Effectiveness Data and Information Set [HEDIS®] & Consumer Assessment of Healthcare Providers and Systems [CAHPS®] 2015). CAHPS® is a registered trademark of the Agency for Healthcare Research and Quality (AHRQ). HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).
Prenatal Care
This measure captures the percent of pregnant women who received a prenatal visit within the first trimester or within 42 days of enrolling in the health plan.²

Diabetes Care
This measure captures the percent of adults 18-75 years of age with diabetes whose blood glucose is being adequately controlled.⁴

High Blood Pressure
This measure captures the percent of adults 18-59 years of age with a history of high blood pressure whose blood pressure is being adequately controlled.⁵

Asthma
This measure captures the percent of members 5-85 years of age whose chronic condition is being managed with appropriate medications.⁶

Depression
This measure captures the percent of adults age 18 and older with major depression who remained on anti-depressant medication.⁷

Attention Deficit Hyperactivity Disorder
This measure captures the percent of children 6-12 years of age who saw a doctor after they started taking medication for attention deficit hyperactivity disorder.⁸

1 National Average of Medicaid Managed Care Plans 2018 NCQA Quality Compass. 2 HEDIS Well-Child Visits in the Third, Fourth, Fifth, and Sixth Years of Life. 3 –HEDIS Prenatal and Postpartum Care: Timeliness of Prenatal Care 4 –HEDIS Comprehensive Diabetes Care HbA1c control <8%. 5 –HEDIS Controlling High Blood Pressure 6 –HEDIS Asthma Medication Ration 50% 7 –HEDIS Antidepressant Medication Management: Initiation Phase 8 –HEDIS Follow up Care for Children Prescribed ADHD Medication: Initial Phase
At NH Healthy Families, we are transforming the health of the community, one person at a time. We do this by offering health insurance for Medicaid members and through specialty services that let us focus on your whole health.

Quality, compassionate care means we meet our members wherever they are. That is one of the reasons why NH Healthy Families is accredited through the National Committee for Quality Assurance.

The NH Healthy Families staff works in our New Hampshire office and serves members across the state. By delivering healthcare locally, our members are also our family, friends, and neighbors. Our fully integrated program, provided by an experienced local team allows us to offer many NO COST Extra Benefits.

NH Healthy Families Member Extras
AT NO COST TO YOU!

- CentAccount® Program
  Earn money for doing healthy behaviors. You choose how to spend your rewards.

- Member Connections
  At-home outreach to help you with your medical and social service needs.

- Vision Credit
  Use your credit to buy the glasses you want.

- Connections Plus
  Free Cell Phone for those who need it.

- Start Smart for Your Baby
  Pregnancy program for education, support, and help so you have a healthy baby.

(Some restrictions apply.)
Our members also receive:

- **Access** to a wide network of trusted hospitals, doctors, specialists, behavioral health providers and pharmacies across the State.
- **Personalized help** for chronic health conditions like asthma, diabetes, heart problems, or obesity
- **Program for Pregnant Women** offering extra help before, during, and after pregnancy

For more information about Well Sense, call us:

**Member Services:**
1-877-957-1300 (TTY: 711)  
Monday-Wednesday, 8 a.m. to 8 p.m.  
Thursday-Friday, 8 a.m. to 6 p.m.  
[wellsense.org](http://wellsense.org)

To view our online directory of providers, visit [wellsense.org/find-a-provider](http://wellsense.org/find-a-provider)

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**NH Healthy Families Integrated Comprehensive Benefits**

NH Healthy Families covers all NH Medicaid medical, behavioral health, pharmaceutical and preventive care services. Included in our coverage you will find:

**Integrated Care Management**  
Medical and behavioral health case managers working together for you

**Preventive Care Coverage**  
Screenings, vaccinations, check-ups, well-child visits

**Pharmacy**  
All NH Medicaid covered drugs – including some over-the-counter and specialty drugs are covered

**Health Coaches**  
For help with chronic ongoing conditions like asthma, diabetes and more

**24/7 Nurse Advice Line**  
For quick advice when you aren’t sure what to do

**Transportation**  
Rides available or mileage reimbursed

**Program Coordination**  
People to help you with your social service needs