



State of New Hampshire

DEPARTMENT OF HEALTH AND HUMAN SERVICES

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JEFFREY A. MEYERS
COMMISSIONER

April 11, 2016

The Honorable Neal M. Kurk, Chairman
Fiscal Committee of the General Court
State House
Concord, NH 03301

Re: INFORMATIONAL ITEM: Health and Human Services Dashboard

Information

The Department of Health and Human Services (DHHS) hereby submits as an information item the department's monthly dashboard in order to inform the legislature and the public on the current status of the utilization of the department's programs and services and the related implications for the department's budget. The monthly dashboard also includes a status report on significant initiatives being implemented to transform and improve the department's programs. Please note that financial and caseload information contained in this monthly dashboard is current through March 2016.

Explanation

Funding Issues

As of March 31, 2016 the Department has identified a potential budget deficit of \$32.5 million, on a cash basis. This deficit results from unexpected costs not budgeted and budget assumptions that either have not been realized or that are not now anticipated to be realized. The principal assumption not realized is the drop in Medicaid caseloads reflected in the budget. Current deficits in the (Non-NHHPP) Medicaid program account for 80% of the identified shortfall.

General Fund Only -Figures in \$Millions

Medicaid	\$26.2
SYSC	\$1.7
Other	<u>\$4.6</u>
Total Potential Deficit	\$32.5

At this point in time, there has been no reduction in programs or services to fund the potential deficit. As we move toward the conclusion of SFY 2016, the department will continue to examine the Medicaid caseload trends and areas of potential savings in its budget. In reviewing the department's lapse practice over the past 5 years, the department met or exceeded the legislative lapse in each of those years except 2012, when it met approximately one-half its lapse target.

Caseload Trends

	SFY 14	SFY 15	SFY 16			
	6/30/2014	6/30/2015	12/31/2015	1/31/2016	2/29/2016	3/31/2016
Medicaid Standard	139,105	138,252	138,959	138,697	138,819	139,242
<i>% increase over prior</i>		-0.60%	0.50%	-0.20%	0.10%	0.30 %
NHHPP	-	41,657	46,996	47,902	49,135	49,203
<i>% increase over prior</i>			12.80%	1.90%	2.60%	0.10%
Food Stamps (SNAP)	110,590	105,322	100,495	99,978	99,486	99,543
<i>% increase over prior</i>		-4.80%	-4.50%	-0.10%	-0.10%	0.05%
FANF Persons	7,116	6,138	5,425	5,435	5,307	5,183
<i>% increase over prior</i>		-13.70%	-11.60%	0.00%	-2.40%	-2.30%
APTD Persons	7,745	7,526	7,116	7,081	7,117	7,033
<i>% increase over prior</i>		-2.80%	-5.50%	0.00%	0.00%	0.01%
LTC - Persons	7,271	7,109	7,191	7,114	7,206	TBD
<i>% increase over prior</i>		-2.20%	1.20%	-1.10%	1.30%	TBD

Medicaid Shortfall

The current Medicaid shortfall is primarily the result of caseloads not trending as budgeted and increases in the PMPM. When the budget was passed, the caseload was expected to drop 2% beginning July 1, 2015. As seen from the table above, caseloads are trending slightly higher than last year. The aggregate PMPM paid to the MCO's as of June 30, 2015 was \$331.01 and the current contract rate is \$345.01 (effective 2/1/16).

The General Fund Medicaid shortfall has increased \$3.9 million as compared to last month's dashboard, \$22.3 million up to \$26.2 million. Of the \$3.9 million General Funds, \$1.9 million General Funds is related to a payment made for Mental Health services on 4/7/16 that was for Dates of Service January 31, 2016 and prior. During the last month's projection, it was not anticipated that there was a delay from providers to DHHS in receiving claims with dates of service dating that far back. The remaining increase is the result of FFS claims for Outpatient Hospital and Provider Payments still trending at the same FFS levels as prior to Feb 1st.

Sununu Youth Services Center (SYSC)

N.H. Laws of 2015, Chap. 276, (HB2), requires a reduction in appropriation to SYSC of \$1.7 million general funds for SFY16 and \$3.5 million for SFY17 and for the Department to develop a plan around the use of SYSC. At present, it appears that the department will lapse approximately \$700,000 in certain SYSC vacancies and accounts for FY 2016. The department will therefore be seeking legislative action to reduce or otherwise allow the department to cover the balance of the FY 2016 reduction from other funds, as opposed to a reduction in the SYSC operating line.

NHH Inpatient Stabilization Unit & Nurse Recruitment

As a result of the approval to enhance nurse salaries by 15%, under the N130 pay scale, NHH has been able to fill some nursing positions. Five nurse vacancies have been filled with others in various stages of interviews, background checks and reference calls since the enhancement took effect. Despite the salary enhancement, the current hiring process has not identified the full complement of nurses needed for the new 10-bed unit. As a result, the department will contract with one or more staffing agencies in order to hire the additional nurses in May so that those nurses are fully trained and can staff the unit when it opens on or before July 1, 2016.

Enhanced Child Protective Service Workers (CPSW's)

DCYF Child Protection Workers (CPSWs) perform child protective investigations in response to child abuse or neglect reports. DCYF has made a concerted effort to examine the capacity of the agency to establish a reasonable and sustainable plan for expanded coverage for abuse and neglect inquiries and reports. The agency reviewed its current child protection business practices, staffing patterns, met with law enforcement and other stakeholders as well as discussed with other New England Child Welfare Commissioners and Directors what they currently have in place to provide continuous coverage.

In late March, the Commission on Child Fatalities chaired by Senator Boutin endorsed the department's plan to use non-DCYF vacant positions to hire 18 new child protective workers and central intake staff to cover a new shift from 12:00 noon to 8:00 pm, together with some overtime money to cover overnight and weekend hours.

Transformation Initiatives

The department is currently engaged in a number of significant initiatives that will help transform the delivery of services and programs. This new section provides a summary of key initiatives. While the list is not all inclusive of the Department's projects, it does highlight several of the key projects of highest importance at this time. While the fiscal year progresses, this section will include updates to these projects and will include new initiatives. The initiatives included in this month's dashboard are:

- 1115 Transformation Waiver
- Therapeutic Cannabis
- Community Mental Health Agreement Compliance
- Substance Use Disorder (SUD) Benefit for Standard Medicaid
- Telehealth

Respectfully submitted,



Jeffrey A. Meyers
Commissioner

Enclosure

The Honorable Neal M. Kurk, Chairman

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April 11, 2016

cc: Her Excellency, Governor Margaret Wood Hassan
The Honorable Neal M. Kurk, Chairman, House Finance Committee
The Honorable Chuck W. Morse, President, NH State Senate
The Honorable Shawn Jasper, Speaker, NH House of Representatives
Michael W. Kane, Legislative Budget Assistant

Executive Council

The Honorable Colin Van Ostern The Honorable Christopher Sununu
The Honorable Christopher Pappas The Honorable David Wheeler
The Honorable Joseph D. Kenney

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Senate Finance Committee

The Honorable Jeanie Forrester	The Honorable Lou D'Allesandro	The Honorable Andrew Hosmer
The Honorable Gerald Little	The Honorable John Reagan	

DEPARTMENT OF HEALTH AND HUMAN SERVICES



OPERATING STATISTICS DASHBOARD

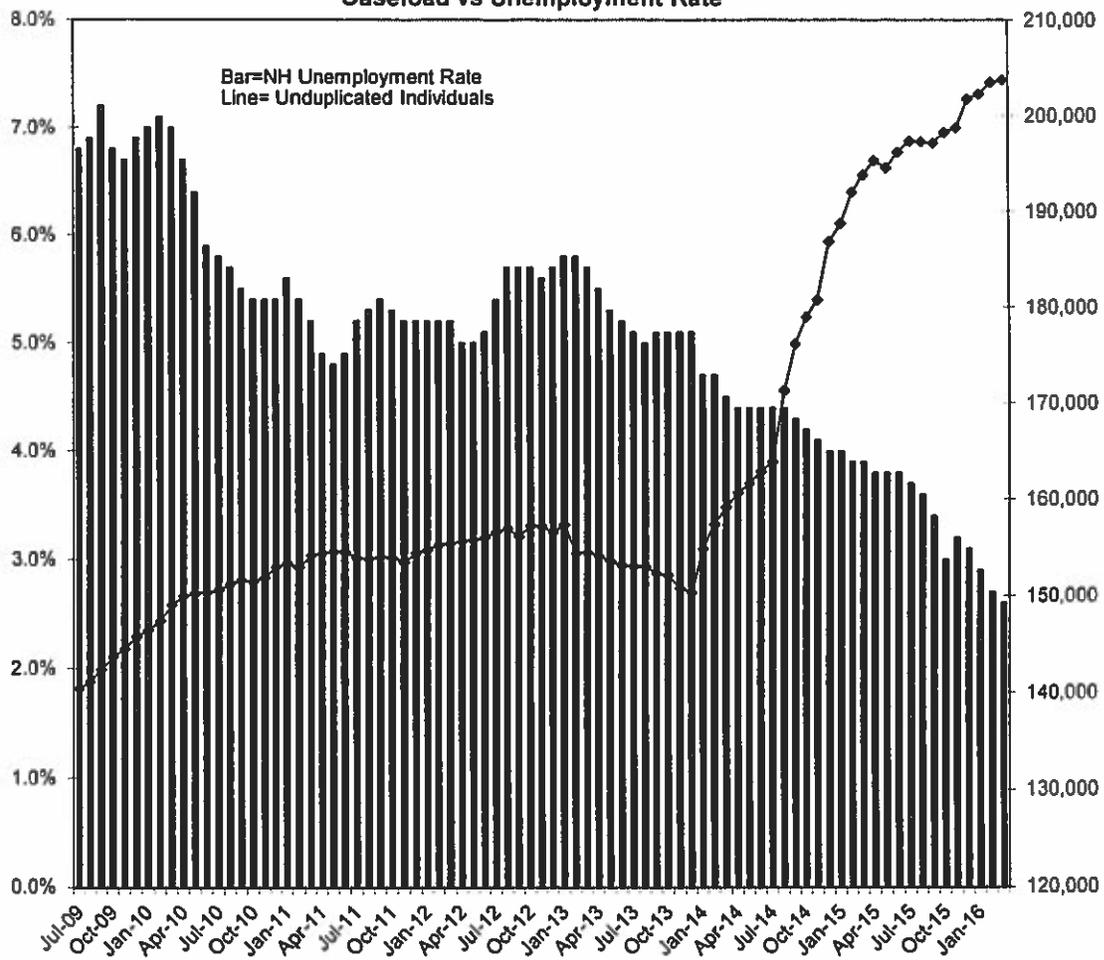
Fiscal Meeting April 2016

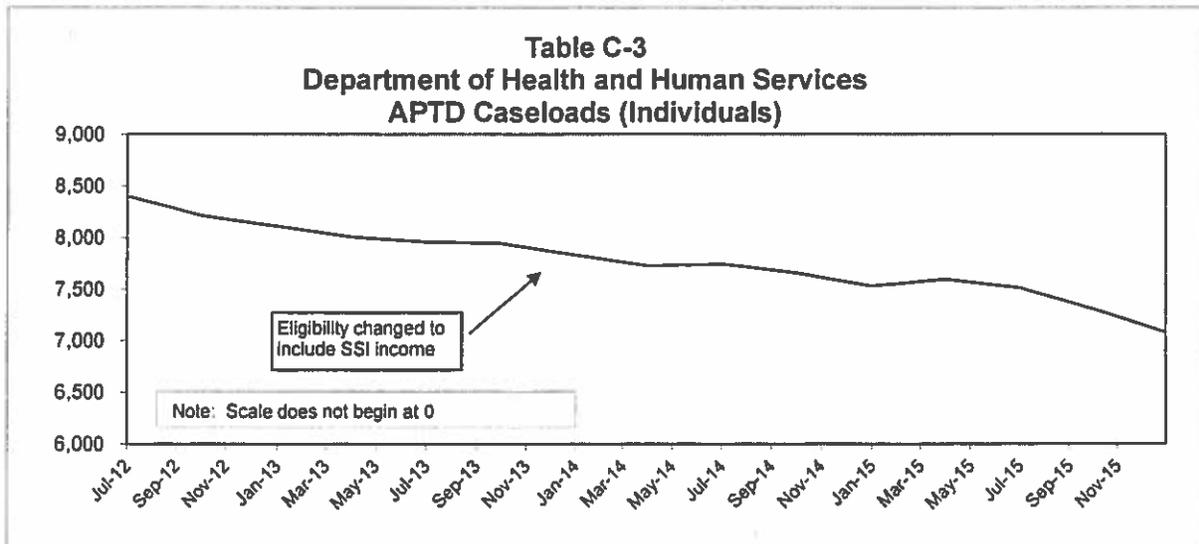
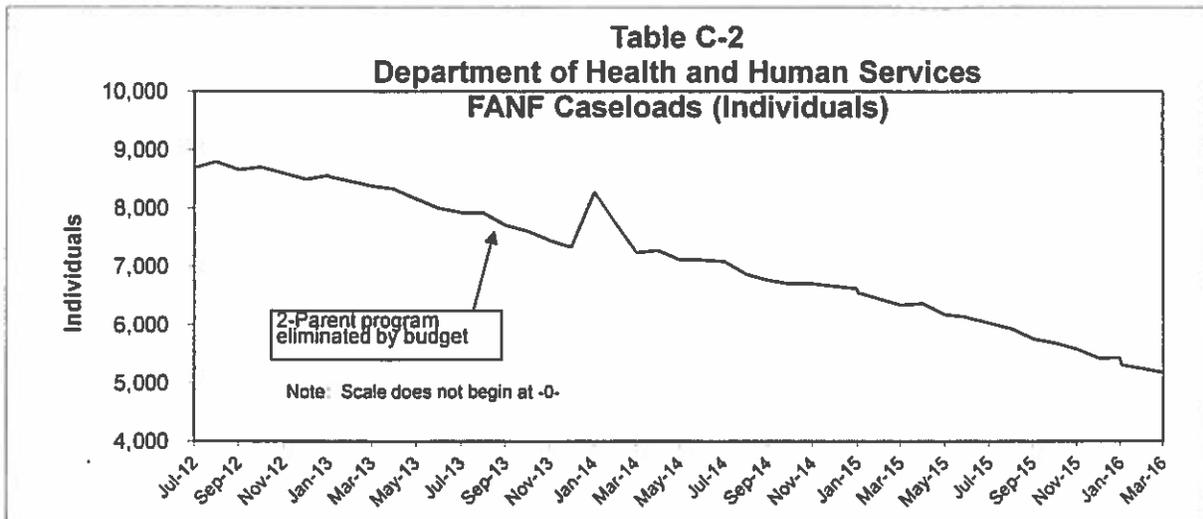
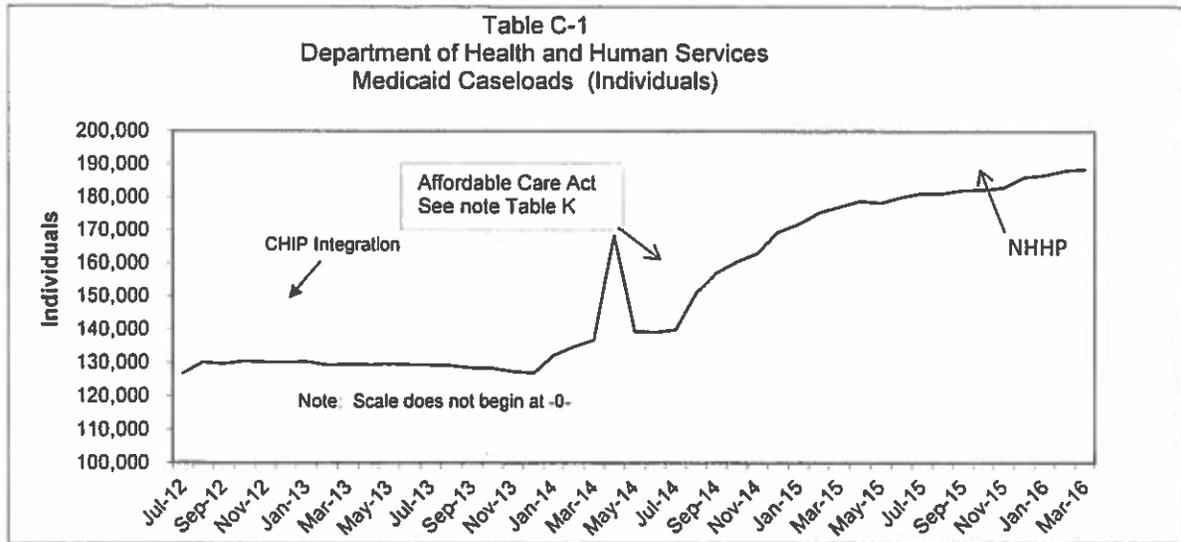
SFY16

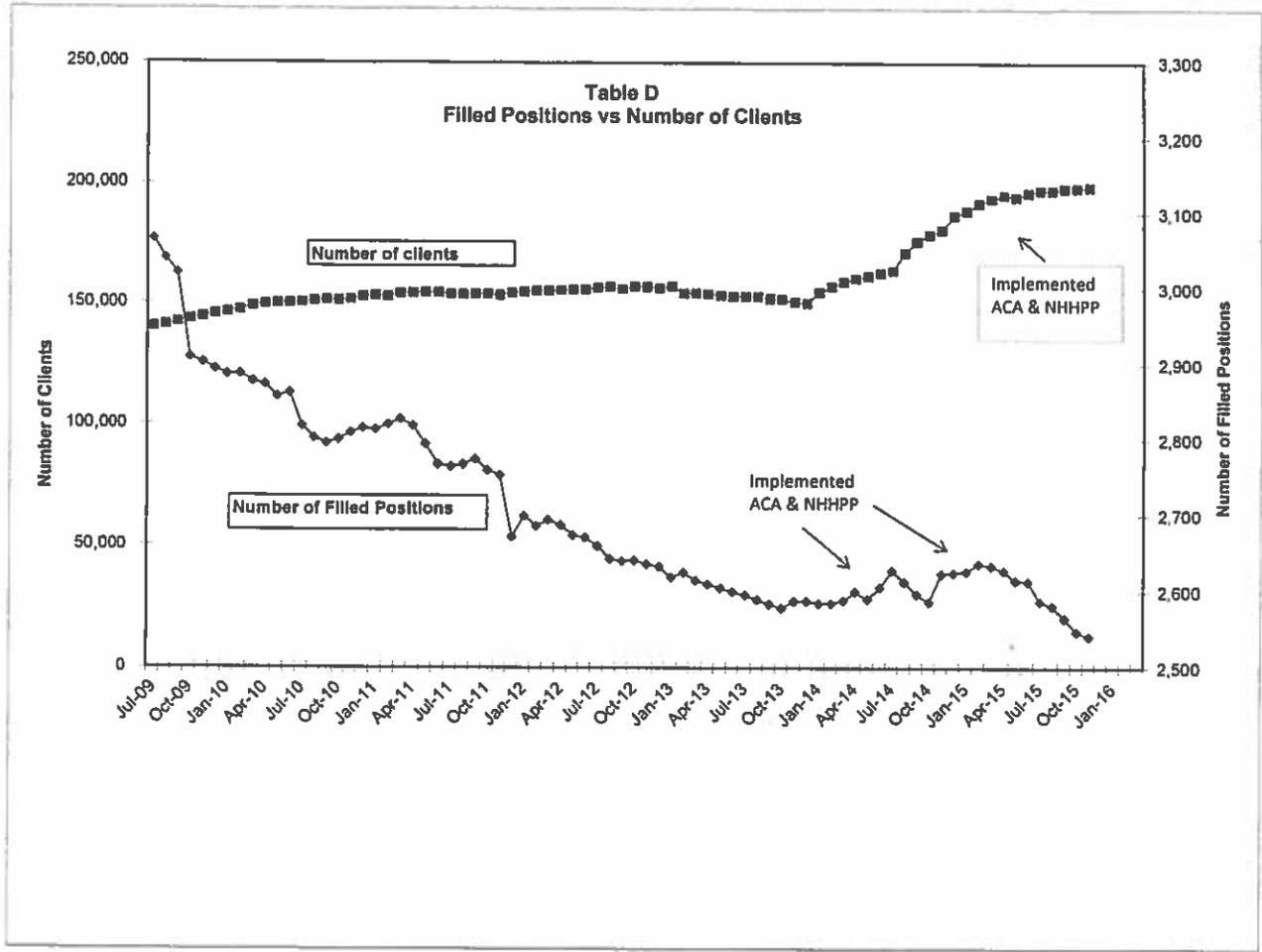
**Budget Summary as of 3/31/16
Data/Caseloads as of 3/31/16 (except for MH as of 2/29/16)**

	A	B	C	E	F	G
1	Department of Health and Human Services					
2	Financial Summary - CASH BASIS					
3	As of March 31 --- SFY16					
4	General Funds Rounded to \$000					
5						
6	The budget for SFY16-17 provides insufficient general funds to address the legislative intents for services and obligations that are expected to be incurred.					
7	The items reported on the list include only those which a) are likely to be incurred and b) for which amounts can be reasonably estimated.					
8						
9	Legislative Lapse Target per Final Budget (3.3%) = \$20,856					
10						
11				As of	As of	As of
12	Shortfalls			1/31/16	2/29/16	3/31/16
13	Programs					
14	Medicaid (step 1 svcs)	Medicaid services (excluding BDS waivers & Nursing/CFI)		\$20,500	\$15,400	\$19,100
15	Medicaid	MCO Health Reimbursement Fee		\$3,250	\$3,250	\$3,250
16	Medicaid	Part A&B		\$994	\$994	\$994
17	Medicaid	Part D: State Phasedown		\$3,055	\$2,700	\$2,900
18	Subtotal Medicaid			\$27,799	\$22,344	\$26,244
19	Change over prior month			\$ (5,451)	\$ (5,455)	\$ 3,900
20						
21	SYSC	Footnote reduction HB2		\$1,722	\$1,722	\$1,722
22	DFA	APTD & Old Age Assistance cost per case		\$507	\$300	\$295
23	NHH	Nursing shortfall - salary enhancement		\$465	\$465	\$465
24	NHH	Nursing Temps Pending Contract				\$375
25	DCYF	Enhanced CPSW coverage			\$252	\$252
26	DCYF	Foster Care & Out of Home Placement Case increases				\$600
27						
28	Litigation					
29		Chase Home Settlement		TBD	TBD	TBD
30		Harbor Homes Settlement (paid)		TBD	\$1,300	\$1,350
31						
32	Operational Challenges					
33	Medicaid	Contracts: Actuarial		\$609	\$0	\$0
36	Medicaid	Non-Emergency Medical Transportation		\$522	\$522	\$522
38	Public Health	Water Testing Pease		\$225	\$225	\$225
39	Medicaid	HIPP program		\$50	\$50	\$50
40	Glenciff	Revenue Shortfall - Census Down			\$425	\$425
41	Total Estimated Shortfalls			\$31,899	\$27,605	\$32,525
42	Change over prior month			\$ (6,010)	\$ (4,294)	\$ 4,920
43	Funds that would otherwise Lapse					
44						
45	Medicaid	Drug Rebate Revenue		\$10,000	\$10,000	\$10,000
46	Medicaid	UCC payments reduction		TBD	TBD	TBD
47	DHHS	Salary & Benefits - Department Wide		\$7,000	\$7,000	\$6,906
48	Non Salary & Benefit Accounts					
49	DHHS	Utilities, Rent, Fuel		\$2,500	\$2,500	\$540
50	OIS	IT		\$500	\$500	\$456
51	Client Services	Misc Contracts (DDU, Transportation, Broker)		\$500	\$475	\$244
52	SYSC	Utilities, Prescriptions, misc operations		\$400	\$400	\$700
53	GH	Utilities		\$100	\$250	\$425
54	NHH	Maintenance, Utilities, Misc Contracts		\$500	\$425	\$953
55	Human Services	Misc Operations		\$750	\$500	\$502
56	DFA	State Asst Non TANF Interim Disabled Parent (IDP)		\$300	\$300	\$295
57	BEAS	Projected spend under budget from Step 2 FFS		\$1,250	\$2,750	\$2,239
58	BEAS	Social Services Non-Medicaid Contracts		\$1,045	\$1,045	\$1,038
59	BBH	Transfer pending to OMBP to cover BBH FFS			\$2,500	\$4,541
60	PH	Rent, Lab Supplies, Contracts:Emerg Prep & Maternal Child Health			\$585	\$483
61	Other	Other misc lapses		TBD	\$550	\$550
62	Total Estimated Funds that Would Otherwise Lapse			\$24,845	\$29,780	\$ 29,872

Table B
Department of Health and Human Services
Caseload vs Unemployment Rate







	A	B	C	D	E	F	G	H
1	Table E							
2	Department of Health and Human Services							
3	Operating Statistics							
4	Children In Services							
5								
6		DCYF	DCYF	Family Foster	Residential	Child Care	Child Care	SYSC
7		Referrals	Assessments	Care	Placement	Related	Wait List	Secure
8				Placement				Census
9		Actual	Actual	Actual	Actual	Actual	Actual	Actual
59	Jul-13	1,124	772	571	315	5,568	0	61
60	Aug-13	1,045	591	570	323	5,517	0	60
61	Sep-13	1,276	544	560	297	5,345	0	56
62	Oct-13	1,276	603	567	305	5,357	0	58
63	Nov-13	1,083	536	565	304	5,350	0	61
64	Dec-13	1,111	649	559	299	5,322	0	61
65	Jan-14	1,260	706	542	290	5,298	0	66
66	Feb-14	962	688	531	309	5,238	0	59
67	Mar-14	1,307	1,016	537	311	5,459	0	62
68	Apr-14	1,324	972	539	313	5,512	0	62
69	May-14	1,370	866	531	317	5,737	0	59
70	Jun-14	1,267	684	535	324	5,694	0	59
71	Jul-14	1,049	890	510	319	5,742	0	52
72	Aug-14	1,273	827	510	254	5,626	0	52
73	Sep-14	1,485	921	501	282	5,543	0	48
74	Oct-14	1,356	790	519	301	5,341	0	47
75	Nov-14	1,090	681	512	308	5,384	0	50
76	Dec-14	1,312	768	544	313	5,438	0	47
77	Jan-15	1,169	587	532	303	5,370	0	41
78	Feb-15	1,079	467	550	301	5,259	0	36
79	Mar-15	1,427	630	554	319	5,494	0	40
80	Apr-15	1,281	874	564	334	5,474	0	42
81	May-15	1,298	858	566	341	5,497	0	43
82	Jun-15	1,314	869	578	348	5,581	0	47
83	Jul-15	1,120	908	564	322	5,651	0	48
84	Aug-15	1,074	743	571	319	5,588	0	51
85	Sep-15	1,298	895	570	304	5,528	0	49
86	Oct-15	1,336	863	591	308	5,192	0	54
87	Nov-15	1,182	680	605	303	5,219	0	59
88	Dec-15	1,280	825	647	316	5,267	0	65
89	Jan-16	1,178	736	658	335	5,370	0	72
90	Feb-16	1,143	2,569	666	336	5,201	0	73
91	Mar-16	1,458	1,165	691	341	5,269	0	74
92	Apr-16							
93	May-16							
94	Jun-16							
95	YEAR-TO-DATE AVERAGE							
96	SFY11	1,115	734	630	412	4,695	1,570	57
97	SFY12	1,167	747	592	314	5,005	0	58
98	SFY13	1,147	727	609	316	5,120	0	58
99	SFY14	1,160	678	556	306	5,384	0	60
100	SFY15	1,249	729	526	300	5,466	0	46
101	SFY16	1,230	1,043	618	320	5,365	0	60
102								
103	Source of Data							
104	Column							
105	B	DCYF SFY Management Database Report: Bridges.						
106	C	DCYF Assessment Supervisory Report: Bridges.						
107	D	Bridges placement authorizations during the month, unduplicated.						
108	E	Bridges placement authorizations during the month, unduplicated.						
109	F	Bridges Expenditure Report, NHB-OAR8-128						
110	G	Child Care Wait List Screen: New Heights						
111	H	Bridges Service Day Query - Bed days divided by days in month						

	A	B	C	D	E	F	G	H	I
1	Table F								
2	Department of Health and Human Services								
3	Operating Statistics								
4	Social Services								
5									
6		FANF	APTD	Food	Child Support Cases				
7			Persons	Stamps	Current	Former	Never	Total	
8				Persons	Cases	Cases	Cases	Cases	
9		Actual	Actual	Actual	Actual	Actual	Actual	Actual	
58	Jul-13	7,926	7,962	115,691	4,035	17,724	13,193	34,952	
59	Aug-13	7,922	7,955	115,499	3,866	17,901	13,180	34,947	
60	Sep-13	7,709	7,889	114,725	3,772	17,913	13,183	34,868	
61	Oct-13	7,609	7,945	114,915	3,938	17,797	13,227	34,962	
62	Nov-13	7,449	7,882	113,514	3,793	17,908	13,325	35,026	
63	Dec-13	7,334	7,820	112,908	3,803	17,774	13,331	34,908	
64	Jan-14	7,330	7,834	113,326	3,762	17,783	13,316	34,861	
65	Feb-14	7,353	7,803	112,791	3,767	17,695	13,329	34,791	
66	Mar-14	7,242	7,704	112,511	3,723	17,734	13,361	34,818	
67	Apr-14	7,277	7,727	112,144	3,863	17,593	13,453	34,909	
68	May-14	7,119	7,751	111,362	3,828	17,592	13,518	34,938	
69	Jun-14	7,116	7,745	110,590	3,700	17,766	13,683	35,149	
70	Jul-14	7,085	7,741	109,239	3,672	17,849	13,748	35,269	
71	Aug-14	6,871	7,727	108,767	3,671	17,803	13,741	35,215	
72	Sep-14	6,767	7,679	108,434	3,598	17,831	13,736	35,165	
73	Oct-14	6,705	7,657	108,343	3,702	18,674	13,214	35,590	
74	Nov-14	6,705	7,607	107,214	3,711	18,814	13,347	35,872	
75	Dec-14	6,660	7,532	107,900	3,753	18,868	13,529	36,150	
76	Jan-15	6,622	7,530	107,934	3,917	18,811	13,735	36,463	
77	Feb-15	6,547	7,542	107,224	3,956	18,906	13,981	36,843	
78	Mar-15	6,339	7,538	107,521	3,803	19,202	14,294	37,299	
79	Apr-15	6,366	7,596	107,283	3,842	19,249	14,538	37,629	
80	May-15	6,179	7,561	106,042	3,914	19,180	14,666	37,760	
81	Jun-15	6,138	7,526	106,322	3,820	19,207	14,742	37,769	
82	Jul-15	6,120	7,513	104,705	3,852	19,228	14,937	38,017	
83	Aug-15	5,934	7,438	103,544	3,866	19,211	15,004	38,081	
84	Sep-15	5,764	7,343	102,869	3,685	19,344	15,133	38,162	
85	Oct-15	5,688	7,307	101,917	3,808	19,263	15,257	38,328	
86	Nov-15	5,583	7,227	100,525	3,763	19,319	15,345	38,427	
87	Dec-15	5,425	7,116	100,495	3,614	19,366	15,373	38,353	
88	Jan-16	5,435	7,081	99,978	3,699	19,261	15,402	38,362	
89	Feb-16	5,307	7,117	99,486	3,658	19,258	15,506	38,422	
90	Mar-16	5,183	7,033	99,543	3,558	19,390	15,694	38,642	
91	Apr-16								
92	May-16								
93	Jun-16								
94	YEAR-TO-DATE AVERAGE								
95	SFY11	13,795	8,713	111,565	5,616	17,260	13,024	35,900	
96	SFY12	11,540	8,850	115,439	5,185	17,244	12,807	35,235	
97	SFY13	8,601	8,185	118,360	4,109	17,655	12,889	34,653	
98	SFY14	7,542	7,866	113,987	3,829	17,803	13,272	34,904	
99	SFY15	6,700	7,617	108,064	3,754	18,529	13,703	35,985	
100	SFY16	5,604	7,242	101,451	3,723	19,293	15,295	38,310	
101									
102	Source of Data								
103	Column								
104	B	Office of Research & Analysis, Caseload Statistics							
105	C	Budget Document							
106	D	Budget Document							
107	E-H	DCSS Caseload (Month End Actual from NECSES)							
108									
109	Note	* Effective 3/1/12, SSI or SSP is considered when determining FANF							
110		eligibility. Those child support cases no longer eligible, are now "Former"							
111		assistance cases.							
112									

	A	B	C	D	E
1	Table G-1				
2	Department of Health and Human Services				
3	Operating Statistics				
4	Clients Served by Community Mental Health Centers				
5					
6	Annual Totals				
7		Adults	Children	Total	
8	FY2012	36,407	13,122	49,529	
9	FY2013	34,819	13,013	47,832	
10	FY2014	35,657	14,202	49,859	
11	FY2015	34,725	10,736	45,461	
12					
13		Adults	Children	Total	
14					
15	Jul-14	14,818	5,179	19,997	
16	Aug-14	14,436	5,132	19,568	
17	Sep-14	14,981	5,382	20,363	
18	Oct-14	15,172	5,651	20,823	
19	Nov-14	14,142	5,591	19,733	
20	Dec-14	14,734	5,775	20,509	
21	Jan-15	14,960	5,257	20,217	
22	Feb-15	14,024	4,757	18,781	
23	Mar-15	15,083	5,044	20,127	
24	Apr-15	14,641	5,073	19,714	
25	May-15	15,467	5,996	21,463	
26	Jun-15	15,935	6,044	21,979	
27	Jul-15	15,467	5,741	21,208	
28	Aug-15	15,213	5,806	21,019	
29	Sep-15	15,232	5,769	21,001	
30	Oct-15	15,324	6,027	21,351	
31	Nov-15	14,438	5,957	20,395	
32	Dec-15	14,753	6,084	20,837	
33	Jan-16	15,150	5,637	20,787	
34	Feb-16	15,393	5,041	20,434	
35	Mar-16				
36	Apr-16				
37	May-16				
38	Jun-16				
39					
40	Notes:				
41	1. Monthly data is a duplicated count.				
42	2. Year-end data is unduplicated.				

	A	B	C	D	E	F	G	H	I	J	K	L	M	N
1	Table H													
2	Department of Health and Human Services													
3	Operating Statistics													
4	Elderly & Adult Long Term Care													
5														
6		Total Nursing Clients		CFI Home Health	CFI Midlevel	Other Nursing	Nursing Home Beds		Pct In NF	APS Clients Assmnts	APS Cases Ongoing	SSBG AIHC Waitlist	Total SSBG IHCS	
7		Actual	Budget	Note 2		Note 1	3 mo. Avg	Budget					Note 3	
8														
56	Jul-13	7,153	7,358	2,452	421	72	4,280	4,380	59.8%	278	1,230	1		
57	Aug-13	7,284	7,358	2,532	439	25	4,313	4,380	59.2%	283	1,225	1		
58	Sep-13	7,145	7,358	2,480	449	20	4,218	4,380	59.0%	284	1,247	1	474	YTD
59	Oct-13	7,290	7,358	2,435	459	24	4,396	4,380	60.3%	291	1,255	1		
60	Nov-13	7,264	7,358	2,422	468	36	4,354	4,380	59.9%	224	1,242	6		
61	Dec-13	7,342	7,358	2,417	454	27	4,471	4,380	60.9%	255	1,267	3	573	YTD
62	Jan-14	7,265	7,358	2,428	481	27	4,356	4,380	80.0%	319	1,269	3		
63	Feb-14	7,041	7,358	2,372	449	37	4,220	4,380	59.9%	258	1,270	0		
64	Mar-14	7,121	7,358	2,366	455	27	4,300	4,380	60.4%	283	1,266	0	652	YTD
65	Apr-14	7,125	7,358	2,317	493	24	4,315	4,380	60.6%	298	1,238	0		
66	May-14	7,439	7,358	2,418	477	24	4,544	4,380	61.1%	312	1,265	0		
67	Jun-14	7,271	7,358	2,356	475	32	4,440	4,380	61.1%	282	1,216	0	675	YTD
68	Jul-14	7,337	7,421	2,431	444	44	4,462	4,380	60.8%	363	801	0	0	
69	Aug-14	7,094	7,421	2,403	439	44	4,252	4,380	59.9%	276	786	0	1168	
70	Sep-14	7,088	7,421	2,428	431	37	4,229	4,380	59.7%	270	794	0	1438	
71	Oct-14	7,242	7,421	2,453	492	36	4,297	4,380	59.3%	301	757	0	2177	
72	Nov-14	7,180	7,421	2,422	460	36	4,278	4,380	59.7%	212	752	0	1276	
73	Dec-14	7,181	7,421	2,431	469	35	4,281	4,380	59.6%	263	764	0	1990	
74	Jan-15	6,996	7,421	2,404	469	32	4,123	4,380	58.9%	246	736	0	1845	
75	Feb-15	7,026	7,421	2,400	472	32	4,154	4,380	59.1%	221	739	0	1589	
76	Mar-15	7,109	7,421	2,432	448	32	4,229	4,380	59.5%	278	716	0	1802	
77	Apr-15	7,230	7,421	2,422	484	30	4,324	4,380	59.8%	244	723	0	1958	
78	May-15	7,170	7,421	2,428	464	29	4,278	4,380	59.7%	210	716	0	1838	
79	Jun-15	7,109	7,421	2,404	479	32	4,226	4,380	59.4%	294	726	0	1410	
80	Jul-15	7,045	7,232	2,409	463	33	4,173	4,325	59.2%	316	738	0	1410	
81	Aug-15	8,949	7,232	2,339	453	35	4,157	4,325	59.8%	301	750	0	1762	
82	Sep-15	7,042	7,232	2,335	481	40	4,226	4,325	60.0%	320	756	0	1645	
83	Oct-15	7,056	7,232	2,302	502	35	4,252	4,325	60.3%	332	756	0	1320	
84	Nov-15	7,047	7,232	2,317	444	40	4,266	4,325	60.8%	276	763	0	1842	
85	Dec-15	7,191	7,232	2,428	463	39	4,300	4,325	59.8%	284	734	0	1743	
86	Jan-16	7,114	7,232	2,434	435	35	4,245	4,325	59.7%	289	732	0	1712	
87	Feb-16	7,225	7,232	2,505	452	35	4,268	4,325	59.1%	289	742	0	1561	
88	Mar-16	7,231	7,232	2,671	345	34	4,215	4,325	58.3%	352	725	0	1709	
89	Apr-16													
90	May-16													
91	Jun-16													
92	YEAR-TO-DATE AVERAGE													
93	SFY11	7,207	7,740	2,525	391	33	4,291	4,063	59.5%	208	1,075	3	560	
94	SFY12	7,195	7,515	2,403	441	33	4,351	4,400	60.5%	224	1,086	4	646	
95	SFY13	7,232	7,578	2,448	461	36	4,323	4,422	59.8%	217	1,156	3	619	
96	SFY14	7,212	7,356	2,434	455	33	4,323	4,380	59.9%	270	1,252	2	566	
97	SFY15	7,137	7,421	2,423	458	36	4,256	4,380	59.6%	270	761	0	1,476	
98	SFY16	7,100	7,232	2,416	449	36	4,236	4,325	59.7%	307	744	0	1,634	
99														
100		Note 1: These clients are also captured under OMBP Provider Payments												
101		Note 2: CFI Home Health = CFI Home Support and Home Health Care Waiver Services												
102		Note 3: In preparation for 2016, Converted IHCS to monthly paid basis												
103														
104	Source of Data													
105	Columns													
106														
107	D-F	MDSS monthly client counts												
108	G	3 month Avg of the number of paid bed days in the month/days in prior month by the number of days in the previous month. MDSS												
109														
110	J	Options Monthly Protective Reports												
111	K	Options Monthly Activity Report												
112	L	SSBG Adult In-Home Care verbal report from Adult Protective Services Administrator												
113	M	Quarterly Options Paid Claims from Business Systems Unit Manager												
114														

	A	B	C	D	E	F	G	H	I
1									
2	Developmental Services Long Term Care								
3									
4		BDS Programs served FYTD**	BDS Programs FYTD Unduplicated Count	Early Supports & Services	Special Medical Services	Partners In Health Program	Devl. Serv. Priority #1 DD Waitlist	Devl. Serv. ABD Waitlist	
5					(8-09 to 8-12 Actual)	(8-09 to 8-12 Actual)	Actual*	Actual*	
53	Jul-13	8,995	6,364	1,865	1,646	985	373	15	
54	Aug-13	10,041	7,291	2,074	1,755	995	186	5	
55	Sep-13	10,978	8,160	2,381	1,813	1,005	103	6	
56	Oct-13	11,573	8,648	2,618	1,903	1,022	108	10	
57	Nov-13	12,129	9,122	2,978	1,963	1,044	116	12	
58	Dec-13	12,764	9,658	3,231	2,047	1,059	51	16	
59	Jan-14	13,265	10,043	3,404	2,142	1,080	40	14	
60	Feb-14	13,712	10,409	3,640	2,208	1,095	59	16	
61	Mar-14	14,174	10,730	3,863	2,325	1,119	69	18	
62	Apr-14	14,702	11,093	4,112	2,464	1,145	81	17	
63	May-14	15,144	11,488	4,383	2,508	1,148	10	0	
64	Jun-14	15,525	11,742	4,577	2,614	1,169	79	19	
65	Jul-14	9,996	7,049	1,810	1,979	968	86	0	
66	Aug-14	10,721	7,697	2,152	2,040	984	95	0	
67	Sep-14	11,675	8,467	2,545	2,212	996	120	3	
68	Oct-14	12,567	9,127	2,785	2,421	1,019	139	2	
69	Nov-14	13,078	9,567	3,010	2,476	1,035	132	3	
70	Dec-14	13,538	9,880	3,187	2,618	1,040	152	3	
71	Jan-15	14,027	10,286	3,406	2,708	1,033	98	6	
72	Feb-15	14,424	10,600	3,613	2,778	1,046	115	4	
73	Mar-15	14,837	10,893	3,837	2,876	1,068	97	5	
74	Apr-15	15,389	11,313	4,172	2,995	1,081	114	8	
75	May-15	15,787	11,604	4,384	3,102	1,081	138	8	
76	Jun-15	16,229	11,919	4,624	3,210	1,100	101	8	
77	Jul-15	9,683	6,663	2,099	2,088	932	186	8	
78	Aug-15	11,567	8,421	2,597	2,199	947	195	17	
79	Sep-15	12,228	8,964	2,816	2,298	966	186	0	
80	Oct-15	12,859	9,503	3,095	2,372	984	196	0	
81	Nov-15	13,340	9,919	3,317	2,432	989	149	0	
82	Dec-15	13,776	10,264	3,546	2,515	997	153	0	
83	Jan-16	14,097	10,521	3,720	2,569	1,007	150	0	
84	Feb-16	14,448	10,794	3,911	2,632	1,022	152	0	
85	Mar-16	14,783	10,984	4,002	2,760	1,039	127	2	
86	Apr-16								
87	May-16								
88	Jun-16								
89	YEAR-TO-DATE AVERAGE ***								
90	SFY11	12,071	9,251	2,060	1,689	1,132	20	0	
91	SFY12	11,874	9,042	2,825	1,750	1,083	56	5	
92	SFY13	12,052	9,054	2,804	1,941	1,057	180	0	
93	SFY14	11,959	8,936	2,895	1,978	1,045	123	12	
94	SFY15	12,763	9,285	2,927	2,456	1,021	115	3	
95	SFY16	12,976	9,559	3,234	2,429	987	166	3	
96	***(1/4/16 - formulas corrected)								
97	Data Sources:	NHLeads	NHLeads	NHLeads	SMSdb	PIHdb	Registry	Registry	
98									
99	*G & *H Represent the number of individuals waiting at least 90-days for DD or ABD								
100	Waiver funding.								
101	** BDS count excludes MTS Students served								
102	E & F	Represents year-to-date total number served							

	A	B	C	D	E	F	G	H	I	J
1	Table I									
2	Department of Health and Human Services									
3	Operating Statistics									
4	Shelters & Institutions									
5										
6		NHH					BHHS			Glenciff
7		APS & APC Census	APS & APC Admissions	APS Waiting List	APC Waiting List	THS Census	All Shelters		% of	GH Census
8		Actual	Actual	Actual	Actual	Actual	Capacity	Actual	Capacity	Actual
9				Adult	Adolescent					
58	Jul-13	155	187			n/a				117
59	Aug-13	161	164			n/a				116
60	Sep-13	163	165			n/a				115
61	Oct-13	161	184			n/a				116
62	Nov-13	164	149			n/a				119
63	Dec-13	151	144			n/a				118
64	Jan-14	160	190			n/a				118
65	Feb-14	161	165			n/a				116
66	Mar-14	160	181			n/a				118
67	Apr-14	163	193			n/a				118
68	May-14	164	184			n/a				116
69	Jun-14	162	164			n/a				114
70	Jul-14	141	153	23	1	n/a	13,826	11,737	85%	116
71	Aug-14	135	142	30	1	n/a	13,826	12,121	88%	117
72	Sep-14	145	173	33	5	n/a	13,380	11,625	87%	118
73	Oct-14	146	181	29	4	n/a	13,826	12,783	92%	116
74	Nov-14	150	166	27	6	n/a	13,380	12,084	90%	117
75	Dec-14	149	180	15	4	n/a	15,004	14,056	94%	118
76	Jan-15	150	159	22	3	n/a	15,748	15,016	95%	118
77	Feb-15	152	169	18	4	n/a	14,224	13,940	98%	116
78	Mar-15	156	171	16	8	n/a	15,748	14,996	95%	113
79	Apr-15	153	165	10	8	n/a	13,380	11,990	90%	115
80	May-15	150	170	14	7	n/a	13,826	11,598	84%	117
81	Jun-15	150	180	14	5	n/a	13,380	10,830	81%	114
82	Jul-15	148	169	13	1	n/a	14,694	11,628	79%	112
83	Aug-15	150	152	20	1	n/a	14,694	12,229	83%	115
84	Sep-15	151	162	17	5	n/a	14,220	11,861	83%	116
85	Oct-15	146	154	19	6	n/a	14,694	12,452	85%	116
86	Nov-15	144	163	18	5	n/a	14,220	12,684	89%	113
87	Dec-15	152	165	24	7	n/a	14,694	12,758	87%	114
88	Jan-16	153	133	28	5	n/a	14,694	12,351	84%	112
89	Feb-16	153	137	31	7	n/a	13,746	12,160	88%	113
90	Mar-16	156	191	22	5		14,694	11,224	76%	113
91	Apr-16									
92	May-16									
93	Jun-16									
94	YEAR-TO-DATE AVERAGE									
95	SFY11	152	186			42	11,059	9,218	83%	111
96	SFY12	146	197			39	11,224	10,702	95%	115
97	SFY13	153	160							118
98	SFY14	160	170							117
99	SFY15	147	166	24	4		14,329	13,149	92%	117
100	SFY16	150	158	21	5		14,483	12,150	84%	114
101										
102	Source of Data									
103	Column									
104	B	Daily in-house midnight census averaged per month*								
105	C	Daily census report of admissions totalled per month								
106	D	Daily Average wait list for adults								
107	E	Daily average wait list for adolescents								
108	F	Daily Average census in Transitional Housing (privatized 12/2011)								
109	G	Total number of individual bednights available in emergency shelters								
110	H	Total number of individual bednights utilized in emergency shelters								
111	I	Percentage of individual bednights utilized during month								
112	J	Daily in-house midnight census averaged per month								
113										
114		* July 2014 average Census no longer reflects Pts on Leave								

	A	B	E	H	K	N	O	S	T	U	V	W	X	Y	Z	AA	AB	AC
1																		
2																		
3	Table J Medicaid Medical Caseloads (Persons)																	
4	Enrollment as of	12/30/13	3/31/14	6/30/14	9/30/14	12/31/14	3/31/15	6/30/15	9/30/15	12/31/15	3/31/16	6/30/16	9/30/16	12/31/16	3/31/17	6/30/17	9/30/17	12/31/17
5	1. Low-Income Children (Age 0-18)	82,129	88,064	88,961	89,702	90,618	90,249	89,400	89,849	90,104	89,934	90,345	90,197	90,298	91,089	91,095	91,105	91,276
6	2. Children With Severe Disabilities (Age 0-18)	1,604	1,680	1,670	1,619	1,622	1,631	1,639	1,623	1,613	1,623	1,613	1,602	1,598	1,593	1,588	1,571	1,570
7	3. Foster Care & Adoption Subsidy (Age 0-25)	1,946	2,003	2,004	2,048	2,085	2,173	2,192	2,166	2,160	2,139	2,152	2,163	2,175	2,181	2,173	2,227	2,215
8	4. Low-Income Parents (Age 19-64)	10,324	12,955	13,976	13,267	13,212	13,595	13,558	13,677	13,869	13,581	14,272	14,179	13,927	13,651	13,599	13,571	13,568
9	5. Low-Income Pregnant Women (Age 19+)	2,275	3,051	3,248	2,848	2,602	2,532	2,412	2,432	2,430	2,356	2,297	2,290	2,220	2,244	2,208	2,189	2,284
10	6. Adults With Disabilities (Age 19-64)	19,697	19,991	20,222	19,930	19,540	19,627	19,730	19,727	19,629	19,543	19,413	19,349	19,206	19,111	19,139	19,218	19,388
11	7. Elderly & Elderly With Disabilities (Age 65+)	6,828	6,779	6,822	6,771	6,714	6,545	6,594	6,608	6,644	6,650	6,652	6,714	6,756	6,741	6,747	6,788	6,795
12	8. BCCP (Age 19-64)	205	200	204	194	189	177	177	172	168	167	164	154	153	149	148	150	148
13	9. NH Health Protection Program (Age 19-64)	127,310	136,663	139,105	138,297	138,562	139,529	137,692	138,252	138,817	137,963	138,908	138,645	138,319	138,959	138,697	138,819	139,242
14	10. Total By Category	127,310	136,663	139,105	138,297	138,562	139,529	137,692	138,252	138,817	137,963	138,908	138,645	138,319	138,959	138,697	138,819	139,242
15	16. Reconciling Differences (Detail to Summary)	(405)	122	0	0	1	2	0	0	0	0	0	0	0	0	0	0	0
16	17. Reported On Summary	126,905	136,815	139,105	138,913	139,294	139,933	138,148	138,909	139,009	138,198	139,015	138,222	138,887	139,555	138,599	138,819	139,445
17	18. Enrollment as of	01/01/14	04/01/14	07/01/14	10/01/14	1/1/2015	4/1/2015	7/1/2015	10/1/2015	1/1/2016	4/1/2016	7/1/2016	10/1/2016	1/1/2017	4/1/2017	7/1/2017	10/1/2017	1/1/2018
18	21. Enrollment as of	108,206	118,299	120,915	133,716	145,763	155,873	158,638	161,224	162,128	162,654	163,779	163,411	161,307	128,349	138,854	138,033	137,841
19	22. Enrolled in Care Management	25,186	17,708	15,549	22,090	22,067	20,187	18,067	17,594	17,219	17,098	17,191	17,117	19,987	19,100	36,884	38,875	39,557
20	23. Premium Assistance Program (NHI/PP formerly w/MCO, previously shown in Care Management and not new enrollees)	133,392	134,007	136,464	155,806	167,630	176,070	178,703	178,618	179,347	179,752	180,970	180,528	181,274	184,333	185,134	186,659	188,812
21	24. Enrolled in Fee-For-Service	(6,082)	2,688	2,641	1,108	1,463	681	1,445	1,081	1,840	1,367	1,045	1,694	1,813	1,622	1,465	1,295	1,033
22	25. Total	108,206	118,299	120,915	133,716	145,763	155,873	158,638	161,224	162,128	162,654	163,779	163,411	161,307	128,349	138,854	138,033	137,841
23	26. Figures by category versus figures by coverage are taken from two points in time: Medicaid Care Management first of the month and the some people drop out during the month and go into Fee-For-Service. FFS is end of the month and builds during the month to include the spend down clients excluded from MCM. The early data points are switched because the MCM data includes retrospective FFS enrollment for those earlier months.																	

		A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S
		Table K																		
		Department of Health and Human Services																		
		Caseloads Versus Prior Year & Prior Month																		
1	2	Unduplicated Persons			Medicaid Persons			Long Term Care-Seniors			FANF Persons			APTD Persons			SNAP Persons			
		Actual	Vs PY	Vs Pmo	Actual	Vs PY	Vs Pmo	Actual	Vs PY	Vs Pmo	Actual	Vs PY	Vs Pmo	Actual	Vs PY	Vs Pmo	Actual	Vs PY	Vs Pmo	
68	Jul-13	153,075	-2.3%	-0.1%	129,255	-0.2%	-0.1%	7,153	-1.0%	1.6%	7,926	-8.8%	-1.0%	7,962	-5.3%	0.1%	115,691	-1.6%	-0.3%	
69	Aug-13	153,065	-2.5%	0.0%	129,063	-0.7%	-0.1%	7,284	-2.2%	1.8%	7,922	-9.9%	-0.1%	7,955	-4.1%	-0.1%	115,499	0.5%	-0.2%	
70	Sep-13	152,338	-2.4%	-0.5%	128,364	-0.9%	-0.5%	7,145	-1.9%	2.0%	7,709	-11.0%	-2.7%	7,889	4.0%	-0.8%	114,725	2.4%	-0.7%	
71	Oct-13	152,132	-3.3%	-0.1%	128,276	-1.6%	-0.1%	7,290	0.0%	2.0%	7,609	-12.6%	-1.3%	7,945	3.3%	0.7%	114,915	-3.5%	0.2%	
72	Nov-13	150,798	-4.1%	-0.9%	127,359	-2.1%	-0.7%	7,264	0.1%	-0.4%	7,449	-13.4%	-2.1%	7,882	-3.7%	-0.8%	113,514	-4.6%	-1.2%	
73	Dec-13	150,372	-4.0%	-0.3%	126,905	-2.4%	-0.4%	7,342	1.2%	1.1%	7,334	-13.6%	-1.5%	7,820	-4.2%	-0.8%	112,908	-5.0%	-0.5%	
74	Jan-14	154,862	-1.6%	3.0%	132,034	1.4%	4.0%	7,265	1.0%	-1.0%	7,330	-14.4%	-0.1%	7,834	-3.5%	0.2%	113,326	-5.7%	0.4%	
75	Feb-14	157,897	2.0%	1.6%	134,728	4.3%	2.0%	7,041	-0.7%	-3.1%	7,353	-13.9%	0.3%	7,803	-3.2%	-0.4%	112,791	-4.1%	-0.5%	
76	Mar-14	159,213	3.0%	1.2%	136,815	5.7%	1.5%	7,121	1.0%	1.1%	7,242	-13.6%	-1.5%	7,704	-3.8%	-1.3%	112,511	-4.2%	-0.2%	
77	Apr-14	160,682	4.2%	0.9%	138,157	6.8%	1.0%	7,125	n/a	0.1%	7,277	-12.7%	0.5%	7,727	-3.5%	0.3%	112,144	-4.3%	-0.3%	
78	May-14	161,647	5.2%	0.6%	138,562	6.9%	0.3%	7,439	5.7%	4.4%	7,119	-12.9%	-2.2%	7,751	-3.1%	0.3%	111,362	-6.7%	-0.7%	
79	Jun-14	162,897	6.3%	0.9%	139,105	7.5%	0.4%	7,271	3.3%	-2.3%	7,116	-11.1%	0.0%	7,745	-2.6%	-0.1%	110,590	-4.7%	-0.7%	
80	Jul-14	163,903	7.1%	0.6%	139,881	8.2%	0.6%	7,337	2.6%	0.9%	7,085	-10.6%	-0.4%	7,741	-2.8%	-0.1%	109,239	-5.6%	-1.2%	
81	Aug-14	171,328	11.9%	4.5%	150,820	16.9%	7.8%	7,094	-2.6%	-3.3%	6,871	-13.3%	-3.0%	7,727	-2.9%	-0.2%	108,767	-5.8%	-0.4%	
82	Sep-14	176,192	15.7%	2.8%	156,913	22.2%	4.0%	7,088	-0.8%	-0.1%	6,767	-12.2%	-1.5%	7,679	-2.7%	-0.6%	108,434	-5.5%	-0.3%	
83	Oct-14	178,952	17.6%	1.6%	160,334	25.0%	2.2%	7,242	-0.7%	2.2%	6,705	-11.9%	-0.9%	7,657	-3.6%	-0.3%	108,343	-5.7%	-0.1%	
84	Nov-14	180,798	19.9%	1.0%	162,848	27.9%	1.6%	7,160	-1.4%	-1.1%	6,705	-10.0%	0.0%	7,607	-3.5%	-0.7%	107,214	-5.5%	-1.0%	
85	Dec-14	186,837	24.2%	3.3%	169,294	33.4%	4.0%	7,181	-2.2%	0.3%	6,660	-9.2%	-0.7%	7,532	-3.7%	-1.0%	107,900	-4.4%	0.6%	
86	Jan-15	188,750	21.9%	1.0%	171,732	30.1%	1.4%	6,996	-3.7%	-3.7%	6,622	-9.7%	-0.6%	7,530	-3.9%	0.0%	107,934	-4.8%	0.0%	
87	Feb-15	192,008	22.0%	1.7%	175,266	30.1%	2.1%	7,026	-0.2%	0.4%	6,547	-11.0%	-1.1%	7,542	-3.3%	0.2%	107,224	-4.9%	-0.7%	
88	Mar-15	193,829	21.7%	0.9%	176,933	29.3%	1.0%	7,109	-0.2%	1.2%	6,339	-12.5%	-3.2%	7,538	-2.7%	-0.1%	107,521	-4.4%	0.3%	
89	Apr-15	195,333	21.6%	0.8%	178,752	29.4%	1.0%	7,230	1.5%	1.7%	6,366	-12.5%	0.4%	7,596	-1.7%	0.8%	107,283	-4.3%	-0.2%	
90	May-15	194,555	20.4%	-0.4%	178,143	28.6%	-0.3%	7,170	-3.6%	-0.8%	6,179	-13.2%	-2.9%	7,561	-2.5%	-0.5%	106,042	-4.8%	-1.2%	
91	Jun-15	196,212	20.5%	0.9%	179,910	29.3%	1.0%	7,109	-2.2%	-0.9%	6,138	-13.7%	-0.7%	7,526	-2.8%	-0.5%	105,322	-4.8%	-0.7%	
92	Jul-15	197,379	20.4%	0.6%	181,192	29.5%	0.7%	7,045	-4.0%	-0.9%	6,120	-13.6%	-0.3%	7,513	-2.9%	-0.2%	104,705	-4.2%	-0.6%	
93	Aug-15	197,305	15.2%	0.0%	181,115	20.1%	0.0%	6,949	-2.0%	-1.4%	5,934	-13.6%	-3.0%	7,438	-3.7%	-1.0%	103,544	-4.8%	-1.1%	
94	Sep-15	198,157	12.5%	0.4%	182,017	16.0%	0.5%	7,042	-0.6%	1.3%	5,764	-14.8%	-2.9%	7,343	-4.4%	-1.3%	102,869	-5.1%	-0.7%	
95	Oct-15	198,265	10.8%	0.1%	182,225	13.7%	0.1%	7,056	-2.6%	0.2%	5,688	-15.2%	-1.3%	7,307	-4.8%	-0.5%	101,917	-5.9%	-0.9%	
96	Nov-15	198,716	9.8%	0.2%	182,889	12.3%	0.4%	7,047	-1.6%	-0.1%	5,583	-16.7%	-1.8%	7,227	-5.0%	-1.1%	100,525	-6.2%	-1.4%	
97	Dec-15	201,743	8.0%	1.5%	185,957	9.8%	1.7%	7,191	0.1%	2.0%	5,425	-18.5%	-2.8%	7,116	-5.5%	-1.5%	100,495	-6.9%	0.0%	
98	Jan-16	202,248	7.2%	0.3%	186,599	8.7%	0.3%	7,114	1.7%	-1.1%	5,435	-17.9%	0.2%	7,081	-6.0%	-0.5%	99,978	-7.4%	-0.5%	
99	Feb-16	203,485	6.0%	0.6%	187,954	7.2%	0.7%	7,225	2.8%	1.6%	5,307	-18.9%	-2.4%	7,117	-5.6%	0.5%	99,486	-7.2%	-0.5%	
100	Mar-16	203,739	5.1%	0.1%	188,445	6.5%	0.3%	7,231	1.7%	0.1%	5,183	-18.2%	-2.3%	7,033	-6.7%	-1.2%	99,543	-7.4%	0.1%	
101	Apr-16																			
102	May-16																			
103	Jun-16																			
104																				
		ANNUAL YEAR-TO-DATE AVERAGES																		
105	SFY10	143,977			115,947			7,298			13,945			8,150			95,300			
106	SFY11	154,215	7.1%		119,527	3.1%		7,154	-2.0%		11,833	-15.2%		8,885	9.0%		115,213	20.9%		
107	SFY12	152,465	-1.1%		119,344	-0.2%		7,197	0.6%		13,779	16.5%		8,725	-1.8%		111,669	-2.9%		
108	SFY13	156,560	2.7%		129,868	n/a		7,255	0.8%		8,629	-37.4%		8,207	-5.9%		118,103	5.6%		
109	SFY14	153,005	-2.3%		129,498	-0.3%		7,223	-0.4%		7,579	-12.2%		7,886	-3.9%		114,171	-3.3%		
110	SFY15	179,846	17.5%		160,886	24.2%		7,141	-1.1%		6,745	-11.0%		7,627	-3.3%		108,132	-5.3%		
111	SFY16	199,662	11.0%		183,744	14.2%		7,084	-0.8%		5,657	-16.1%		7,268	-4.7%		101,690	-6.0%		
112																				

1115 TRANSFORMATION WAIVER

DESCRIPTION	PURPOSE
<p>The Section 1115(a) Research and Demonstration “Transformation” Medicaid Waiver provides access to new federal funding to help transform the Medicaid behavioral health delivery system to:</p> <ol style="list-style-type: none"> 1. integrate physical and behavioral health care to better address the full range of individuals’ needs 2. build capacity to deliver behavioral health care services to address emerging and ongoing behavioral health needs in an appropriate setting 3. reduce gaps in care during transitions across care settings by improving coordination across providers and linking patients with community supports. 	<p>Under the waiver, New Hampshire has access to up to \$30 million in federal funding each of five years (2016-2020) to create a transformation fund, which will make performance-based incentive payments to new regional networks of health care and community service providers called Integrated Delivery Networks or IDNs. The IDNs will select specific projects from a menu of projects that will strengthen the capacity of the state’s behavioral health system, integrate mental health and substance use disorder care with primary care, and lower the long-term growth in health care costs for the state. By providing funding to support delivery system transformation—rather than to cover the costs of specific services rendered by providers—the waiver will encourage and enable health care providers and community partners within a region to form relationships focused on transforming care.</p>

STATUS

- CMS approved the waiver application January 5, 2016. Federal funding is valued at \$150 million over a five year period
- 10 scheduled stakeholder information sessions were completed in March of 2016, with an additional session for NH Senate members held on 4/6/16.
- Draft application for Integrated Delivery Networks published for public comment on 3/31/16
- Project and Metric Specifications Guide to support the comprehensive Project Menu of statewide and community-based initiatives is in development and on track to be posted for public comment by 4/29/16
- RFPs published for Independent Assessor and Evaluation Plan Design
- Received confirmation from CMS that NHHPP population is attributable to DSRIP (will be included)
- DHHS website pages for DSRIP in use and being updated regularly: <http://www.dhhs.nh.gov/section-1115-waiver/index.htm>

TOP ISSUES (I) & RISKS (R)	RECENT & UPCOMING MILESTONES	DATE
1 (R) Risk that procuring independent assessor is not completed by 5/31 to score IDN Apps by 6/31 and develop project plan applications by 8/1	<i>CMS Approves 1115 Transformation Waiver</i>	<i>1/5/16</i>
	<i>Draft Funding Mechanics & Project Menu Submitted to CMS</i>	<i>3/1/16</i>
	<i>9 Stakeholder Information Sessions Completed</i>	<i>3/28/16</i>
2 (R) Risk that procuring for IT lead and Workforce lead won't happen in time to advise IDNS in the fall	<i>Draft IDN Application and Project and Metric Spec Guide posted for public comment</i>	<i>3/31/16</i>
	<i>15 Non-Binding Letters of Intent Received from Candidate Administrative Leads</i>	<i>4/1/16</i>
	<i>Deadline for all Non-Binding Letters of Intent</i>	<i>4/18/16</i>
3 (R) Risk that JT Fiscal doesn't give permission to accept and expend DSRIP funds	<i>State Releases Final IDN Application</i>	<i>4/29/16</i>
	<i>Deadline for IDNs to Submit Applications to State</i>	<i>5/31/16</i>
	<i>State Announces Names of Approved IDNs & Distributes Initial Capacity Building Funds</i>	<i>7/1/16</i>
4 (R) Risk That the necessary contracts (assessor, evaluator, HIT technical assistance, learning collaborative) aren't approved by G&C	<i>Deadline for IDNs to Submit Project Plans to State</i>	<i>9/1/16</i>
	<i>State Distributes Project Plan Awards</i>	<i>11/1/16</i>

THERAPEUTIC CANNABIS

DESCRIPTION	PURPOSE	
The Department is responsible for the administration of the New Hampshire Therapeutic Cannabis Program (Program) by designing and implementing a comprehensive process for the distribution of therapeutic cannabis in the State of New Hampshire, pursuant to RSA 126-X.	The Department's goal is the implementation and continued operation of a self-sustaining (budget neutral) Program that safely and efficiently provides therapeutic cannabis to qualified individuals and their caregivers. Success will be measured by: Program efficiency and security, Program accessibility; and Program financial sustainability	
STATUS		
<p>After a comprehensive and detailed review of applications in response to the RFA released 12/19/14, the Department selected three qualifying entities to begin the post-selection registration: Prime Alternative Treatment Centers of NH, Inc., Temescal Wellness, Inc., and Sanctuary ATC.</p> <p>On 11/25/15 the Department issued the first qualifying patient registry identification card. As of 04/08/16,</p> <ul style="list-style-type: none"> • 679 applications for registration cards were received for qualifying patients • 36 applications for registration cards were received for caregivers • The Department issued 357 qualifying patient cards and 21 designated caregiver cards. <p>On 10/23/15 changes to the ATC rules became effective allowing the Department to grant conditional registration certificates to cultivation centers in order to allow ATCs to begin growing therapeutic cannabis. On January 8, 2016, Sanctuary ATC (Geographic Area 4) was granted the first conditional registration certificate to operate its cultivation center. On February 26, 2016, this was updated to permit transportation of cannabis. On January 22, 2016, Temescal Wellness, Inc. (Geographic Areas 1 and 3) was granted a conditional registration certificate to operate its cultivation center. On March 9, 2016, this was updated to permit transportation of cannabis. Prime Alternative Treatment Centers (Geographic Area 2) will be ready for inspection at a later date, presumably late May. It is anticipated that Sanctuary ATC will be ready to begin dispensing cannabis late April/early May 2016 with Temescal Wellness Inc. to follow shortly thereafter. Additionally, on April 4, 2016, the Department certified the first New Hampshire lab, permitting it to test therapeutic cannabis.</p>		
TOP ISSUES (I) & RISKS (R)	REGENT & UPCOMING MILESTONES	DATE
1 (R) Until ATC dispensaries are operational, qualifying patients have no legal access to therapeutic cannabis in NH	<i>RFA for ATCs Issued</i>	<i>10/20/14</i>
	<i>Registry Rules Adopted</i>	<i>11/30/14</i>
	<i>ATCs Selected</i>	<i>01/23/15</i>
2 (R) Litigation regarding ATC selection could delay implementation	<i>Inspection Program Established</i>	<i>04/10/15</i>
	<i>Begin Inspection of ATC Cultivation Sites</i>	<i>09/27/15</i>
3 (I) Level of effort and expertise required to administer and oversee this new, fee-funded program will continue to be a significant challenge for the Department	<i>Issuance of Registry ID Cards Begins</i>	<i>11/15/15</i>
	<i>Sanctuary ATC Conditionally Certified to Cultivate</i>	<i>01/08/16</i>
	<i>Temescal ATC Conditionally Certified to Cultivate</i>	<i>01/22/16</i>
	<i>Sanctuary & Temescal Certified & Operational to Dispense</i>	<i>05/31/16</i>
	<i>Prime ATC Certified & Operational to Dispense Cannabis</i>	<i>Summer '16</i>

COMMUNITY MENTAL HEALTH AGREEMENT

DESCRIPTION	PURPOSE
For adults with Severe Mental Illness (SMI), establish and enhance community-based programs, including: mobile crisis services; supported employment; Assertive Community Treatment (ACT); supported housing; peer and family support; transition planning; and quality assurance of programs.	To meet the terms of the Community Mental Health Agreement (CMHA) to provide immediate and long-term support to individuals with SMI to reduce the institutionalization and risk of institutionalization of adults with SMI.

STATUS

- DHHS Behavioral Health Central team operational meetings held monthly to facilitate transitions from NH Hospital and the Glencliff Home to community-based settings.
- Continued progress made toward objectives of the CMHA including: (a) Implementation of the NH Hospital policy for referrals to ACT for conditional discharges, (b) Working with stakeholders on the draft rule for the Bridge Subsidy Housing Program; and (c) Improving standard data measures and reporting processes.
- First Mobile Crisis Team and crisis apartments fully implemented in Concord.
- Request for Proposals issued for Mobile Crisis Team and Crisis Apartments for Greater Manchester area.
- Two-day session with Expert Reviewer, Steve Day and TA consultant Lyne Rucker regarding Quality Service Review (QSR) process.
- Continue to work with the Community Mental Health Centers and community partners to address milestones that are not yet met, including (a) Supported employment penetration rate of individuals with SMI; (b) Capacity of ACT teams, and (c) Transitions of individuals from Glencliff Home.

TOP ISSUES (I) & RISKS (R)	RECENT & UPCOMING MILESTONES	DATE
1 (I) Redoubling efforts in areas of concerns outlined in the Expert Reviewer's January 2016 Report	Mobile Crisis capacity in Concord area	6/30/15
	Increase supported housing units to 340	6/30/15
2 (R) Capability of the Community Mental Health Centers (CMHCs) to meet ACT/SE requirements	ACT Teams w/ capacity to serve 1300 individuals by 6/30/15	TBD
	Transition 4 individuals from Glencliff by 6/30/15	TBD
	Achieve 16.1% SMI penetration rate of SMI eligible by 6/30/15	6/30/16
	ACT Teams w/ capacity to serve 1500 individuals	TBD
	Achieve 18.1% Supported Employment penetration rate of SMI eligible	6/30/16
	Mobile Crisis capacity in Manchester area	6/30/16

SUBSTANCE USE DISORDER (SUD) BENEFIT FOR STANDARD MEDICAID

DESCRIPTION	PURPOSE	
<p>HB2 Chapter 276:231 requires the commissioner of the department of health and human services to submit a state plan amendment (SPA) to the Centers of Medicare and Medicaid (CMS) to provide substance use disorder services to Title XIX and Title XXI beneficiaries. The commissioner shall design the benefit consistent with Substance Abuse and Mental Health Service Administration (SAMHSA) treatment guidelines. The commissioner shall also determine the process and timeline for implementing services and, if necessary, phase in the benefit.</p>	<p>To implement the already defined SUD Benefit array offered to the NH Health Protection Program population to the Standard Medicaid population. The benefits include a continuum of SUD services to meet the range of needs from misuse, addiction and withdrawal.</p>	
STATUS		
<ul style="list-style-type: none"> Project Charter signed by State Medicaid Director Katie Dunn Policy decisions made to include same benefit as NHHPP, same rates as NHHPP and implementation of the entire benefit on 7/1/16. Fiscal Impact Statement complete Administrative Rules complete and to LJCAR May 20, 2016 MMIS systems requirements submitted and in development Meeting with MCOs to coordinate communications Stakeholder meeting on 3/3/16 complete Peer Recovery provider type created 		
TOP ISSUES (I) & RISKS (R)	RECENT & UPCOMING MILESTONES	DATE
<p>1 (I) Limited SUD provider Network</p> <p>2 (R) As a result of a limited provider network, recipients may not be able to access services in a timely manner.</p>	<i>Kick off meeting</i>	11/16/15
	<i>Systems changes identified</i>	1/19/16
	<i>Policy Decisions Communicated to MCOs</i>	2/11/16
	<i>SUD Rules approved by JLCAR</i>	5/20/16
	<i>Stakeholder Engagement Completed</i>	3/3/16
	<i>State Plan Approved by CMS</i>	9/30/16
	<i>MCO Contract Approved by G&C</i>	6/15/16
	<i>SUD Benefits Available to Expanded Population</i>	7/1/16

TELEHEALTH

DESCRIPTION	PURPOSE	
<p>Chapter 206, Laws of 2015 requires the Department to develop a telehealth services program to commence on July 1, 2016 which will include telehealth services provided by medical specialists and which will not result in increased costs to the Medicaid Program.</p>	<p>Provide the standards and guidelines for a statewide Telehealth network to be delivered through the use of Dartmouth Hitchcock Center for Telehealth's infrastructure.</p> <p>Ensure telehealth services provided under Medicaid are to be "cost neutral."</p>	
STATUS		
<ul style="list-style-type: none"> Telehealth 101 hosted by DRED provided status of current statewide infrastructure to support telehealth implementation Received Fiscal Committee approval on January 22, 2016 to proceed with Pilot Project which is to begin on July 1, 2016 Pilot Project will provide data for analysis of utilization of telehealth consultations for specialty services. Pilot Project Planning Meeting February 26, 2016 with DHMC staff. Pilot Project Plan sent to DHMC for review and comment Tuesday, April 5, 2016. 		
TOP ISSUES (I) & RISKS (R)	RECENT & UPCOMING MILESTONES	DATE
<p>(R) Fee for Service population may not provide sufficient client pool to support determination of "cost neutrality."</p>	<i>Fiscal Committee approval for Pilot Project</i>	1/22/2016
	<i>House & Senate Financial Committees & HHS Oversight Committee Progress Report</i>	3/1/2017
	<i>Pilot Project Planning Meeting</i>	2/26/2016
	<i>Pilot Project Plan Completed</i>	4/29/2016
	<i>Pilot Project Implementation</i>	7/1/2016
	<i>Data Collection & Analysis Starts</i>	8/1/2016