



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF MEDICAID SERVICES

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March 13, 2017

The Honorable Frank Byron, Division III Chairperson  
Finance, Division III  
State House  
Concord, NH 03301

Subject: Request for Additional **Funding Information** –Agy 047 Office of Medicaid

Dear Representative Byron:

Thank you for providing the opportunity to provide an overview of programs and services as an introduction to our SFY18-19 budget. During our session on March 2 and 3rd, 2017, requests were made for additional information, which we are providing to you below.

Impacts the following accounting unit: 05 95 47 470010 7948 Medicaid Care Management  
Page 828:

Question #1: Summary of Optional Service users and related costs.

Response: Please reference Attachment A - Milliman letter dated March 13, 2017 – Table 1 titled “*Summary of Optional Medicaid Services – SFY 2016 Medicaid Enrollees Receiving Services*”; Page 2.

Children: \$156,882,000  
Adults: \$417,082,400  
TOTAL \$573,964,400

Top 3 category of service spend for Children:

Prescription Drugs	\$53,242,000
Community Mental Health Centers (CMHC)	\$37,873,000
Dental	\$23,780,000

Early and Periodic Screening, Diagnostic and Treatment requirements may limit the extent to which DHHS can exclude optional services for children under the age of 21.

Top 3 category of service spend for Adults:

Home & Community Based Services (HCBS)	\$289,886,000
Prescription Drugs	\$68,501,000
Community Mental Health Centers (CMHC)	\$39,978,400

Home & Community Based Services includes 4 waivers:

- Developmentally Disabled
- Acquired Brain Disorder
- In Home Supports
- Choices for Independence

Question #2: Estimate of future population case mix compared to current budget

Responses: See Attachment A Milliman letter dated March 13, 2017, Exhibit 1 titled "*Summary of projected Enrollment Levels Average Annual Member Count*".

Attachment B: Caseload percent Change by rate cell. Excluding Newborn and Maternity Kick Payments, the percentage of caseload changes ranges from a decrease of -11.4% Severe Mental Illness – Dual Eligibles to a 9.5% increase for Community Residents – Medicaid Only – Age 0-64.

Attachment C: Comparison of Gov Phase budget to Milliman's estimate based on caseload mix by rate cell. The per member per month ranges from \$136.14 for Low Income Children – Age 1-18 Years to a \$2,977.52 for Community Residents – Medicaid Only – Age 0-64.

The net change is a SFY18 decrease of \$5.5M Total funds / \$2.77M General Funds. Note: the Milliman estimate for SFY19 does not take into account future utilization and cost trends or other policy changes from SFY18 to SFY19.

Sincerely,



Deborah H. Fournier, Esq.  
Medicaid Director