Medical Care Advisory Committee (MCAC)
Monday, May 10, 2021

Minutes

Alternates: Gina Balkus, Dawn McKinney, Heather Young
Members Excused: Lisa DiMartino
DHHS: Henry Lipman, Alyssa Cohen, Leslie Melby, Dawn Landry, Dr. Sarah Finne, Rob Berry, John Williams, Patrick McGowan, Sandy Davidson, Shirley Iacopino, Laura Ringelberg, Carol Early
Guests: Senator Cindy Rosenwald, Deb Fournier, Audrey Gerkin, Jasmine Harris, Nicole St. Hilaire, Rich Sigel, Jesse Fennelly, Dan Courter, Pam Becker, Deb Ritcey, Isaiah Anderson, Ann Potoczak, Robert Clegg

Announcements, Carolyn Virtue
Every effort will be made to cover all agenda items within allotted timeframes.

Review/Approval: M/S/A

Agenda Items – June 14, 2021
Home visiting program
Non-emergency medical transportation (mileage reimbursement)
Medicaid to Schools

Department Updates:

Legislation, John Williams, Esq, Director, Legislative Affairs
SB 149: Senate passed; currently in the House. Requires BH and SUD expenses to be counted as toward medical expense spenddown.
HB 343: House retained. Prohibits balanced billing for ambulance services. Possible amendment to include Medicaid.
HB 601: included in the budget trailer bill; prohibits sharing of personal information between health/social service agencies.
SB 162: Senate passed. This omnibus bill was requested by DHHS.

Agency/Governor/House/Senate Budget, Henry Lipman, Medicaid Director
The Department’s Medicaid priorities are: adult dental benefit, PHE, enrollment. The proposed start date of the dental benefit is January 2023. Once funding is available, the dental benefit work group will reconvene; followed by the RFP.

Home Visiting Program, Henry Lipman, Medicaid Director
During the last budget cycle, the program policy expanded eligibility for this service from young first-time mothers to all those with a child (no restriction on age and first child), but without adequate funding. This funding gap was identified during the rulemaking process. The Senate phase of the current budget process provides an opportunity to address this gap.
Disability Determinations, Henry Lipman, Medicaid Director
More work is needed to analyze the increase in the number of days for determinations. Additional information will be available at the June 14 meeting.

Private Duty Nursing (PDN) Policy/Funding, Sandy Davidson, Medical Services
The 1135 waiver is being used to allow the use of personal care services to fill the unmet need for PDN. 75% of hours needed were filled during Phase 3; there was a delay due to GSIL staffing. This waiver will terminate at the end of the PHE. The Department will continue to explore the option of allowing individual nurses to provider PDN. Once benefit design has been completed, the Department will engage stakeholders including families in the discussion around the pros and cons of this option. Continuing to work with MCOs to increase capacity. Additional information will be available at a future meeting. The NH Family Voices PDN presentation will be made at the June 14 meeting.

External Quality Review Q&A, Patrick McGowan, Administrator, Medicaid Quality Program
The DHHS Medicaid Quality Team was available to answer questions about the 2020 External Quality Review Organization Technical Report. There were no questions during the meeting. For questions, contact Patrick McGowan at Patrick.mcgowan@dhhs.nh.gov

Public Health Emergency (PHE), Henry Lipman, Medicaid Director
As of May 3, 2021:
Total enrollment: 219,486, an increase of 42,066 or 23.7%
Granite Advantage (GA): 75,665, a 47.3% increase. Forecasting 79,000 in Granite Advantage, a 60% increase.
Standard Medicaid: 143,821, a 14.1% increase.

According to current data, there are approximately 45,000 protected beneficiaries at risk of losing coverage after the end of the PHE. The Department is currently working with the UNH Institute of Health Policy to develop strategies to engage and support individuals who should remain covered and provide a longer timeframe to prepare beneficiaries and providers. Client notices will alert beneficiaries on what types of information must be submitted to maintain eligibility after the end of the PHE. The federal government will provide 60 days’ notice of the PHE end date, currently set for July 20, 2021.

COVID Vaccine, Alyssa Cohen, Deputy Medicaid Director
The American Relief package covers the cost of vaccine administration, as well as vaccines and treatment for the limited eligibility groups (COVID-19 testing, family planning). To qualify for the testing group, individuals must be uninsured, be a NH resident and SSN or have legal qualifying status.

Rules
- Medicaid for Employed Adults with Disabilities (MEAD), He-W 504, Robert Berry, General Counsel, Division of Medicaid Services
The emergency rule was filed in January to incorporate guidance from CMS on medical eligibility. The current proposed rule is the result of collaboration with NH Legal Assistance (NHLA) and MCAC member, Michelle Winchester. The MCAC subcommittee and NHLA agree with the proposed rule. There is more consultation in process with CMS. Public hearing - May 14. Final proposal due to JLCAR May 28.

- Telehealth, Dawn Landry, Medicaid Policy Administrator
The proposed rule was agreed to by the MCAC subcommittee to implement requirements for Medicaid coverage of telehealth. The rule includes definitions, eligibility, provider participation, service limits, covered services, confidentiality, patient rights and consent, prior authorization, failure of transmission,
TPL, and payment. Telehealth for home and community based waiver services must be consistent with CMS approval. Need to ensure that there are no artificial barriers to accessing telehealth.

- **Medicaid Care Management, He-W 506, Dawn Landry, Medicaid Policy Administrator**
The Department is proposing to readopt He-W 506 with amendment, which describes the requirements of the managed care program and updates terminology,

Under the new contract, plan selection is more liberal, including the opportunity to change plans for cause. With the addition of the third plan, in its first year members can opt for another plan without cause for the first 90-days. Members can make oral and written grievances; any problems should be sent to Henry Lipman.

**MCAC Subcommittees, Carolyn Virtue, Chair**
- Membership Committee, Jonathan Routhier, Vice Chair
Mel Spierer is retiring, leaving one open seat. Suggestions for unrepresented Medicaid recipient groups should be made to Jonathan Routhier within the week. The slate of officers will be nominated at the June 14 meeting. Chair and Vice Chair are at the end of their terms as officers.

- **Medicaid to Schools, Henry Lipman, Medicaid Director**
UNH Institute on Health Policy is working with the Department to strengthen the program’s guidance. Rulemaking will begin soon. The NH Charitable Foundation will fund efforts to support schools to navigate the program. MTS is on the next month’s agenda.

- **He-E 801 Rule**
The Chair advised that the subcommittee is working without the input of the department. The rule is scheduled to be published later this month. (It was subsequently published May 20, 2021.) She advised that the subcommittee will continue its work through the JLCAR process.

- **Closed Loop Referral and Blanket Consent Subcommittee:** The HHS Oversight Committee website has materials on closed loop referral and will continue to review.

Adjourn M/S/A