

Medical Care Advisory Committee (MCAC)

June 14, 2021

Minutes

Members Present: Lisa Adams, Michael Auerbach, Tamme Dustin, Ellen Keith, Peter Marshall, Ken Norton, Ronnieann Rakoski, Dr. Marie Ramas, Bill Rider, Karen Rosenberg, Jonathan Routhier, Holly Stevens, Carolyn Virtue, Nichole VonDette, Michelle Winchester

Alternates: Gina Balkus, Amy Girouard, Dawn McKinney, Nicole VonDette, Heather Young

Members Excused: Leslie Aronson, Lisa DiMartino, Paula Minnehan, Sarah Morrison, Nancy Rollins

DHHS: Henry Lipman, Alyssa Cohen, Ann Landry, Beth Daly, Brooke Belanger, Jane Hybsch, Dawn Landry, Dr. Sarah Finne, Leslie Melby, Melissa Hatfield, Stephanie Dahlberg, Rob Berry, Shirley Iacopino, Laura Ringelberg, Carol Early, John Poirier

Guests: Terry Olson-Martin, Lucy Hodder, Deb Fournier, Nick Toumpas, Jenn Pineo, Caroline Lavoie, Susan Paschell, Audrey Gerkin, Nicole St. Hilaire, Rich Sigel, Jesse Fennelly, Dan Courter, Pam Becker, Deb Ritcey, Kelley Capuchino, David Donohue, Carol Iacopino, Lisa Beaudoin, Lisa Pettingil, Sarah Aiken, Nicole St. Hilaire, Trina Loughery, Tory Jennison

ANNOUNCEMENTS: Plans are in the works to reconvene in person with a virtual participation option.

REVIEW/APPROVAL: May 10, 2021 Minutes. M/S/A

Agenda Items – July 12, 2021

Workforce shortage, home visiting budget, in-home supports, election of officers, disability determinations

DEPARTMENT UPDATES

Non-Emergency Medical Transportation, Brooke Belanger, Director, Medicaid Enterprise Development

42% of Medicaid transportation is provided through the Friends and Family program – mileage reimbursement. To arrange transportation, members call transportation broker in advance or same day. If the ride is arranged in advance, the transportation form is prepopulated. If arranged the same day, member must notify broker, complete form, have provider sign the form. Members have 30-60 days to submit forms. If not submitted on time, the request will not be automatically denied; the broker educates members.

Feedback: The form is more complicated with multiple trips reported on one form. When recent trips are itemized, older trips automatically appear as overdue. The transportation reimbursement form appears it can only be used for a single trip. It was recommended that the form be usable for multiple trips. If members are unable to complete the form, the broker will assist. The Department will review the forms and get back to Ellen.

MCO Amendment #6 Update, Henry Lipman, Medicaid Director

The amendment will be on the June 16 G&C agenda. A listening session will be held with CSNI, Able NH. Amendment #6 includes:

- Members will not be required to change prescription drugs more than once per calendar year, with limited exceptions: member is new to Medicaid or switched MCOs; the change is initiated by provider; biosimilar becomes available; FDA warnings or new clinical guidelines; drug withdrawn from market; drug not available due to supply shortage.
- Further extension of additional preferential auto-assignment awards for high-performing MCOs
- New CMS managed care rule provisions re beneficiary/member rights
- Update to the NCQA reporting compliance requirements

- New directed payment for community residential housing provided by CMHCs
- Continuation of directed payments for durable medical equipment (DME), CMHCs, and critical access hospitals (CAH).
- Incentivizing local care management within program
- Elimination of a risk corridor and replacement with minimum and maximum medical loss ratios (MLRs), the effect of which reduces the state’s risk compared to 2020 and 2021 risk corridors. The state has greater enrollment risk due to the unpredictable length of the PHE.
- Change in payment for psychiatric services by MCOs.

Agency/Governor/House/Senate Budget, Henry Lipman, Medicaid Director

The Medicaid budget thus far is reasonably funded. The home visiting program expansion is until the first year of life of the child; the adult dental benefit is under consideration by the budget Committee of Conference.

Personal Care Services (PCS) Pilot Evaluation Report, Jane Hybsch, Medical Services Administrator and Terry Ohlson-Martin, Co-Director, NH Family Voices

The PCS pilot evaluation report is based on a survey of 25 participating families. Eight families attended listening sessions. Findings: Families participated in the pilot due to the rate of pay, loss of work, and COVID. GSIL received very high ratings. Relationships with nursing agencies were mixed. The pediatric nursing shortage is a significant worry for families. The pilot has resulted in stress reduction, help with loss of income, and increased confidence. All pilot participants indicated they want this option to continue.

This option was not allowed by CMS prior to COVID and will therefore be discontinued at the end of the PHE. Recommendations to continue the option are ongoing and is a high priority. Efforts to promote options for families include nurse delegation, independent nurses, and consumer direction.

Vaccine Rollout, Beth Daly, DrPH, Chief, Bureau of Infectious Disease Control

NH is trending about 10% higher than the national vaccination rate. 68% of total NH eligible (age 12+) population has received one or more doses. Initiatives are in place to vaccinate children. Vaccines administered has dropped off since April. State-run sites close June 30 with transition to > 450 health sites.

Pfizer is approved for ages 12+; Moderna and J&J approved for 18+. All are in clinical trials for children. Work continues on vaccine equity, with NH committed to working with communities. Re: data collection, the vaccine system was designed to vaccinate the population quickly, not to collect all data such as underlying conditions.

Medicaid Coverage During PHE and Redeterminations, Henry Lipman, Medicaid Director, Lucy Hodder, Deb Fournier, UNH Institute for Health Policy & Practice

DHHS has been planning for the end of the PHE since last July to ensure that those who qualify remain on Medicaid. UNH is assisting with outreach.

The FFCRA¹ provides a 6.2 percentage point increase in federal match of certain Medicaid spending for NH to meet its “maintenance of eligibility” obligation including keeping beneficiaries enrolled until the end of the PHE; not adopting more stringent eligibility criteria; and moving beneficiaries to appropriate eligibility categories. The federal PHE is likely to end 12/2021, although we won’t know definitively until (federal) HHS informs the states. Enrollment has risen by 24% over 2019 with 65,000 individuals in the protected category.

¹ Federal First Coronavirus Response Act

Action Plan: Notify beneficiaries to keep records up to date; continue to process applications and redeterminations (redes); support passive redes; passively enroll members; notify members of rede status; engage assisters. Focus on outreach to high risk and vulnerable populations (such as those with overdue redes, pending ineligible, spenddown, Granite Advantage age 65, COVID testing group).

1915(i) Supportive Housing New State Plan/Waiver Proposal, Melissa Hatfield, Bureau Chief, Housing Supports, Stephanie Dahlberg

The 1915(i) state plan HCBS benefit will support individuals with disabilities in securing and maintaining permanent housing. Housing stability is a key component of the social determinants of health. The goal is to help secure safe, affordable and stable housing. Will start with a pilot to serve 50 individuals, partnering with CMHCs experienced in housing supports.

1. Transition services: assist individuals to plan for, find, and move to their homes.
2. Sustaining services: assist individuals to maintain living in their own home in the community.
3. Housing consultation services. Plan person-centered services.

Implementation of American Rescue Plan (ARP): Additional Support for Medicaid Home and Community-Based Services (HCBS) during PHE, Henry Lipman, Medicaid Director

See CMS policy guidance: <https://www.medicaid.gov/federal-policy-guidance/downloads/smd21003.pdf>

The ARP provides a temporary 10 percentage point increase in the state's federal match from April 2021 to March 2022 for certain HCBS services that enhance, expand, or strengthen HCBS and increase access to HCBS (listed in Appendix B of the guidance). It's estimated that NH would receive over \$40 million.

Membership Committee, Jonathan Routhier, Vice Chair

Nomination of the slate for Chair and Vice Chair. Carolyn Virtue and Jonathan Routhier are willing to continue in these seats.

M/S/A

The vote on members will be held at the July meeting. The committee is in the process of recruiting for Mel Spierer's vacancy.

He-E 801, CFI, Michelle Winchester

The Subcommittee members continue to review the rule. Members will respond to the initial proposal as individual MCAC and Subcommittee members. The Subcommittee may provide a formal response and recommendation to the full committee when the final rule is published.

Adjourn: M/S/A