Medical Care Advisory Committee (MCAC)
July 19, 2021

Minutes


Alternates: Gina Balkus, Amy Girouard, Heather Young

Members Excused: Lisa Adams, Leslie Aronson, Ellen Keith, Sarah Morrison, Bill Rider, Karen Rosenberg

DHHS: Henry Lipman, Alyssa Cohen, Brooke Belanger, Nancy Rollins, Katya Fox, Deb Sorli, Dr. Sarah Finne, Jane Hybsch, Dawn Landry, Leslie Melby, Rob Berry, John Poirier, Carol Early

Guests: Senator Ruth Ward, Lucy Hodder, Deb Fournier, Deodonne Bhattarai, Audrey Gerkin, Rich Sigel, Kelley Capuchino, David Donohue, Heidi Kroll, Cole Carter, Tammy Whalen,

ANNOUNCEMENTS:
August meeting rescheduled to August 16. The remainder of 2021 meetings will be held in Brown Auditorium with zoom option.

MCM open enrollment information was emailed to members and stakeholders.

Disability Determinations, Deb Sorli, Bureau Chief, Bureau of Family Assistance
The number of disability determinations has been going down. Numbers are expected to rise somewhat.
20 children’s applications are awaiting decisions – all are within the 90-day timeframe.
55% of children waiting are covered by another Medicaid program.
257 adult applications are awaiting decisions: Of those, 0-45 days – 115; 46-90 days – 74 days; 90+ days – 68
80% of adults waiting are covered by another Medicaid program.

The DD Unit has strengthened outreach; a case tech group is in place to work with clients. Applicants each receive an outreach call to review their application, confirm all providers are listed, assist with scheduling appointments, etc. When there are problems obtaining medical information, applicants are asked to assist. The greatest challenge is getting clients to understand why they must show up for exams. For questions, contact Deb Sorli.

REVIEW/APPROVAL:
June 14, 2021 minutes
Discussion: The multiple-trip transportation reimbursement form appears to be restricted to single trips. A recommendation was made to allow submission of multiple trips on one form.

Motion: Amend the minutes to reflect the discussion about the problem with the form. M/S/A.

Motion: Ask the Department to work with the MCOs and transportation brokers to ensure that the reimbursement forms accommodate multiple trips on one form. M/S/A

This will be brought to the MCO workgroup to develop an improved uniform form to be used by the MCOs.

Membership Committee: Election, Jonathan Routhier, Vice Chair

Motion: To elect Carolyn Virtue as Chair and Jonathan Routhier as Vice Chair to fill the upcoming two-year term. M/S/A. The MCAC voted in favor.

The committee will recruit for two open seats and meet prior to the August MCAC meeting. Paula Minnehan will fill Nancy Rollins’s vacated seat on the committee.
Agenda Items – August 16, 2021
LTC Commission update; HCBS ARP funding; HCBS FMAP plan, COVID vaccination outreach, supportive housing for individuals with disabilities,

DEPARTMENT UPDATES

DHHS Budget - HB 1 and HB 2 Implementation, Henry Lipman, Medicaid Director
- **Staffing reduction**: Eliminate 233 positions (vacant since 2018), a reduction of $22.6 million (Gen’l Funds)
- **Rate Setting**: Funding is budgeted for the 5% rate increase to skilled nursing facilities (SNF) and facilities providing intermediate care for the intellectually disabled. SNF and CFI/case management rate changes are in process. State plan amendments have been noticed. Effective 7/1/2021
- **Reporting**: DHHS to report quarterly on Medicaid spending to state leadership
- **County Cap**: The counties’ portion of the non-federal share for LTSS/HCBS services will be reduced by available 6.2% enhanced match during the PHE and in future enhancements that are not subject to restriction.
- **Technical language**: Extends provision that transfers do not require approval by the Fiscal Committee
- **Granite Advantage**: Amend RSA 126-AA:3,l(e)-(g), Health Care Trust Fund, to add revenue from the Medicaid Enhancement Tax (MET) to meet requirements of RSA 167:64; Funds recovered or returnable to the Fund that were originally spent on the cost of coverage of Granite Advantage.
- **Eligibility**: Changes to eligibility standards or benefits that might increase or decrease enrollment or increase expenditures require consultation with legislative HHS committees and approval by Fiscal Comm and G&C.
- **Revenues**: Any request to Fiscal Comm to increase federal funds due to miscalculation of or change in FMAP > $100,000 must explain if general funds were supplanted and why
- **Reproductive health facilities**: No state funds paid to reproductive health care facility for abortions except to comply w/federal requirements for participation in Medicaid.
- ** Appropriation**: $3.3 million to DHHS to streamline agency operations
- **Catastrophic aid payments and Graduate medical education**: Extends suspension of payments to hospitals another two years
- **Telemedicine**: Out-of-state health care providers using telehealth must be licensed or certified by NH
- **Licensure**: Governor’s executive orders (EOs) allowing out-of-state providers to practice in NH will be phased out. With the lifting of the EO, OPLC extended the emergency for out-of-state providers
- **Closed loop referral (CLR)**: No further expansion of the CLR system. Further utilization of CLR must be reviewed by the HHS Oversight Committee.
- **HCBS eligibility**: HCBS presumptive eligibility suspended through 6/30/2023
- **1915(c)**: Committee to study parity in reimbursement for 1915(c) waiver services
- **Lapses**: MCM, Waiver, and NF funds for biennium ending 6/30/21 will not lapse until 6/30/23. DHHS may accept and expend federal funds for the purpose of this section w/o prior approval of Fiscal Comm.
- **Home visiting program rulemaking**: Home visiting will be available to Medicaid eligible pregnant women, infants, and families with children up to age one, without restriction. DHHS to adopt rules.
- **Home visiting program expansion**: Appropriated funding limits to the first year of birth.
- **Adult Dental Benefit**: Funding was removed; enabling legislation remains. DHHS is working with legislators on options to move forward. Designated MCAC members will continue to meet with the workgroup.
- **Medicaid In & Out**: Ch.30:1, Laws of 2020 requiring DHHS to amend the income standard for "in and out" suspended for the biennium.
- **Medicaid to Schools (MTS)**: If MTS funds are insufficient, DHHS may accept and expend additional federal funds with Fiscal Committee approval.
IMD Waiver Amendment Updates, Henry Lipman, Medicaid Director
The Department is requesting CMS to amend the SUD waiver to waive the IMD exclusion for adults with serious mental illness (SMI/SME). This will provide additional federal funding. Ken Norton reported that residential programming has been approved. The crisis call center hub will be part of mental health centers’ expanded crisis 988 suicide prevention line to include mental health. There is state funding for community residential housing.

Public Health Emergency (PHE) Unwind Planning, Henry Lipman, Medicaid Director, Lucy Hodder, Deb Fournier, UNH Health Law & Policy
The PHE is expected to be extended. State Governors have been advised they will receive 60-day notice from the federal DHHS. UNH continues to support DHHS with small group meetings regarding beneficiaries’ supports. The website has been updated. Pink notices continue to be sent to beneficiaries for redeterminations. A larger stakeholder meeting will be held on ways to support beneficiaries, the notices they are receiving, and available resources. The message continues to be – look for the pink notice in the mail and help beneficiaries respond to notices in order to avoid a redetermination bottleneck later.

PHE Flexibilities, State of Emergency Flexibilities, Henry Lipman, Alyssa Cohen, Brooke Blanchard, Rob Berry
The following Executive Orders impact Medicaid:

- 2020-04 #8: temporary expansion of access to telehealth services. With the lifting of the NH state of emergency, 2020 legislation retains telehealth as an option.
- 2020-04 #15: temporary telehealth authorization for out of state medical providers. The Legislature supported expansion. Additional guidance on return to pre-Covid delivery services forthcoming
- Modification of licensing to deal with SUD prescribing, lifting of in-person requirement for MAT. With the lifting of NH’s state of emergency (this is not the same as the federal PHE), initial MAT consult must be in-person.
- 2020-04 #41: Medicaid coverage of COVID-19 testing group until the end of the federal PHE. 8,000 individuals are covered.
- 2020-04 #47 Expanding access to COVID-19 testing via licensed pharmacists. Pharmacists can initiate, order, administer and analyze COVID test kits.
- 2020-04 #59: Suspended MEAD premiums and signature requirements. Working on process to resume premiums.
- 2020-04, #73: Reactivation of the COVID-19 LTC Stabilization Program
- 2020-04 #80: Allow NH to submit disaster SPA to pay for vaccine administration. Under the American Rescue Plan, vaccines are covered for one year post-COVID for the COVID-19 testing group.

Carolyn Virtue has further clarified she is seeking information and clarification on the federal flexibilities from the Appendix K that have been withdrawn, and requested an update on how DHHS has complied with the December 2020 CMS guidance on evaluating flexibilities that are done so. She did not agree that the Department’s presentation on the impacts of the termination of Governor’s Executive Orders addressed that CMS Guidance. The Department will address the current status of all flexibilities in the Appendix K more directly at the next meeting. Henry Lipman explained that unlike the Appendix K that can go up to six months past the end of the PHE, the 1135 at most will end the day the PHE ends; 60 days’ notice for family members who provide personal care under the 1135 is likely if the federal notice anticipated is provided. DHHS is looking at other options on how to continue the program, and further address the issues with private duty nursing.
MCAC SUBCOMMITTEES, Carolyn Virtue, Chair

- He-E 801, CFI, Michelle Winchester: Looking forward to the filing of the rule, and to consider further changes.
- Telehealth Rule: The subcommittee will continue, as telehealth was not included for CFI services. Nancy Rollins will reach out to Wendi Aultman.
- Dental – Lisa DiMartino and Carolyn Virtue will continue to represent MCAC on the adult dental.
- Closed Loop Referral and Blanket Consent Subcommittee(s): met once.

Status: The HHS Oversight Committee has an aggressive schedule to address technical the issues of security and privacy, in order to file its report by Nov 1. It was suggested to follow the oversight committee’s work to see how the MCAC subcommittee can learn and connect.

Motion to Adjourn: M/S/A