

### STRATEGIC VISION & OPERATIONAL EFFICIENCIES (SVOE) Year 2 Quarter 3 Initiative Updates

April 2023

### **Executive Summary**

**SVOE:** Through Quarter 2 Year 2 of the SVOE contract, all four workstreams remain on-track with each initiative either entering or completing various phases of implementation.

- 1. Shorter-term Initiative Progress: (1) Critical Time Intervention (CTI) is transitioning in status from the strategic initiative list into program operations with a focus on refining the day-to-day management structure and establishing a recurring reporting framework and cadence, and most recently preparing contracts with the CMHCs for FY24. (2) The team continues to support implementation efforts related to the IMD Waiver demonstration with New Hampshire Hospital such as Length of Stay reporting and evaluating barriers to discharge.
- 2. Longer-term Initiative Progress: (3) The Developmental Disabilities (DD) Waiver Redesign initiative continues to focus on extensive preparations for the planned 7/1 Go-Live of Direct Bill, including internal operational and systems changes, and provider Medicaid enrollment, process, and policy updating. (4) The MES Modernization initiative continues working towards the System Integrator procurement and will continue advanced planning and requirements development for additional modules such as Provider Management.
- 3. Contract Renewal Extension SFY 24 and 25: The Department is working to outline continued scope of support related to these initiatives for SFY 24 and 25, which includes a strategy of shifting resources as appropriate from the shorter-term to longer-term initiatives; a request to exercise a contract renewal extension will be presented to G&C in May.



### Initiative Update – Overview (CTI)

#### Status

### Indicator

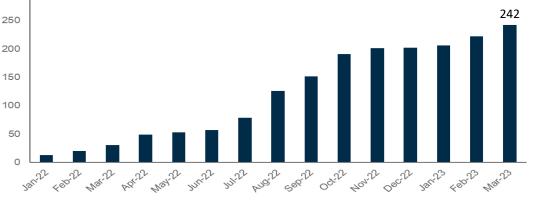
The team is focused on integrating CTI program management into steady-state operations.



#### Highlights

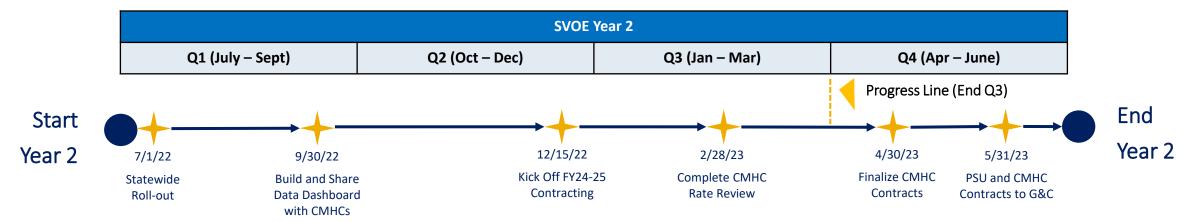
- Over 240 active clients as of the end of March 2023 (Q3), with referrals coming from all DRFs and NHH; 30 CTI graduates as of Q3.
- 2. Initial analysis of outcome-related data indicates program participation lowers likelihood of readmission by 45% and shortens length of stay upon readmission by 30%.
- 3. As the program stabilizes following its successful implementation, the team is shifting focus to establishing a streamlined analytics reporting package.

Current Priorities		
Capacity	Collaborate with CMHCs and DRFs to identify and solve for implementation challenges (i.e., workforce, fidelity, data, etc.).	
Operations	Recruit a full-time position to assist the program director with the day-to-day responsibilities of managing the program.	
Contracts	FY24-25 program budget and contracts drafted; anticipate timely CMHC review and execution before start of FY24.	
Performance Snapshot (Active Clients by Month)		
300		
250	242	





# Initiative Update – Timeline (CTI)



### Q3 Progress

- ✓ Completed FY24-25 CMHC rate review process
- ✓ Finalized FY24-25 CMHC contract drafts
- ✓ Identified early signs of program impact (readmissions; Length of Stay)
- ✓ Continued steady program growth (clients served = 242)



### Year-End Goals

- □ Establish "steady state" operational support and data collection
- Document requirements for recurring analytics related to operations and outcomes
- □ Complete FY24-25 contracting process





### Major milestones to-date completed

### Initiative Update – Overview (IMD)

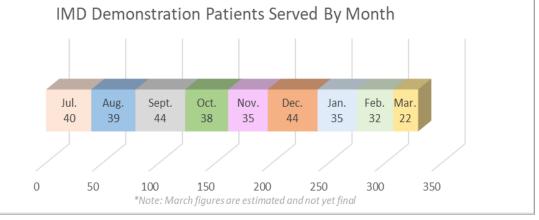
Status	Indicator
Demonstration implementation complete and long-term compliance activities underway; awaiting CMS approval of NH's submitted demonstration extension application.	

#### Highlights

- 300+ IMD demonstration patients received treatment at New Hampshire Hospital or Hampstead Hospital from July 1, 2022 – March 15, 2023.
- 2. NH received federal approval for demonstration amendment #3, the dental amendment, and implemented this authority on April 1, 2023.
- 3. Final SMI evaluation design and monitoring protocols have been submitted to CMS for approval.

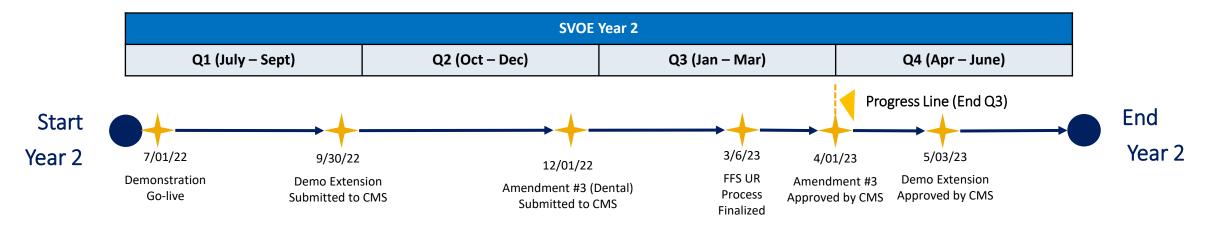
Current Priorities		
Extension	Secure terms for extension of five additional years (demonstration authority set to expire 6/30/23).	
Implementation	Continue building DHHS compliance infrastructure, including policies and procedures to codify processes.	
Community Reentry	Begin strategic planning discussions around state priorities for community reentry; prepare to negotiate terms of community reentry program with CMS.	

#### IMD Demonstration Patients Receiving Care at NHH and HH





# Initiative Update – Timeline (IMD)



### Q3 Progress

- ✓ Secured CMS Approval of Amendment #3 (Dental)
- ✓ Finalized New IMD FFS Utilization Review (UR) Process, Including Signed Policy and Procedure
- ✓ Submitted Revised Monitoring Protocols to CMS
- ✓ Submitted Revised SMI Evaluation Design to CMS

### Year-end Goals

- **Gamma** Receive CMS Approval for IMD Demonstration Extension
- Submit Final IMD Administrative Rule Outlining Provider Requirements for JLCAR Public Comment and Formal Adoption
- □ Secure CMS Approval of Monitoring Protocols & Evaluation Design
- Implement IMD Determination Policy and Procedures to Proactively Identify and Monitor All IMDs

### Major milestones to-date completed





# Initiative Update – Overview (DD Redesign)

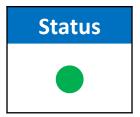
Status Overview		Status	
Stakeholder Engagement	<ul> <li>The Bureau of Developmental Services (BDS) has increased and changed stakeholder engagement. Since January, BDS has been meeting with area agencies (three times a month), providers (three times a month), and service coordinators (twice a month) to provide updates, training, and guidance on the CMS Compliance Initiatives Implementation. BDS has continued to host monthly work group sessions with the Advisory Committee, the Rates work group, and the Waiver work group. Additionally, BDS has met with stakeholders to review upcoming regulatory changes and explore stakeholder feedback to the proposed edits.</li> <li>BDS continues to support stakeholder engagement efforts by updating the website with meeting materials, notes, and recordings.</li> </ul>		
Quality and Capacity	<ul> <li>BDS continued to keep focused on supporting readiness for the July 1 compliance with the federal corrective action plans through multiple meetings with Area Agencies, service providers and service coordination agencies. Specifically, BDS:</li> <li>Hosted bi-weekly meetings with Service Coordinators to present on updates and changes related to 7/1/23 compliance.</li> <li>Hosted a monthly meeting with service providers to present updates and changes to their role and responsibilities related to 7/1/23 compliance. In addition, BDS hosts bi-weekly Provider Office Hours to respond to targeted, provider specific questions.</li> <li>Met bi-monthly with Area Agencies to support information sharing and readiness preparation for 7/1/23 compliance.</li> <li>Additionally, cross department teams continued outreach to all developmental services providers to support Medicaid enrollment application submission; approximately 86% of known providers have submitted an application.</li> </ul>		
Waiver Structure	BDS has drafted a waiver amendments for the In Home Supports Waiver, Developmental Disabilities Waiver, and Acquired Brain         Disorder Waiver focused on changes needed to support coming into compliance with the Corrective Action Plan - no services changes         were included. The amendment was released for public comment on April 4.         Additionally, BDS has continued work on a second planned amendment (est. Fall 2023) that will make updates to existing services, add         new available services, and include a new reimbursement rate methodology. During the Quarter, BDS has worked with stakeholders to         finalize draft services       to be included in the Developmental Disabilities Waiver.		
	Over the quarter, BDS has presented draft and proposed waiver changes to multiple stakeholder groups.	NEW HAMPSHI	





# Initiative Update – Overview (DD Redesign)

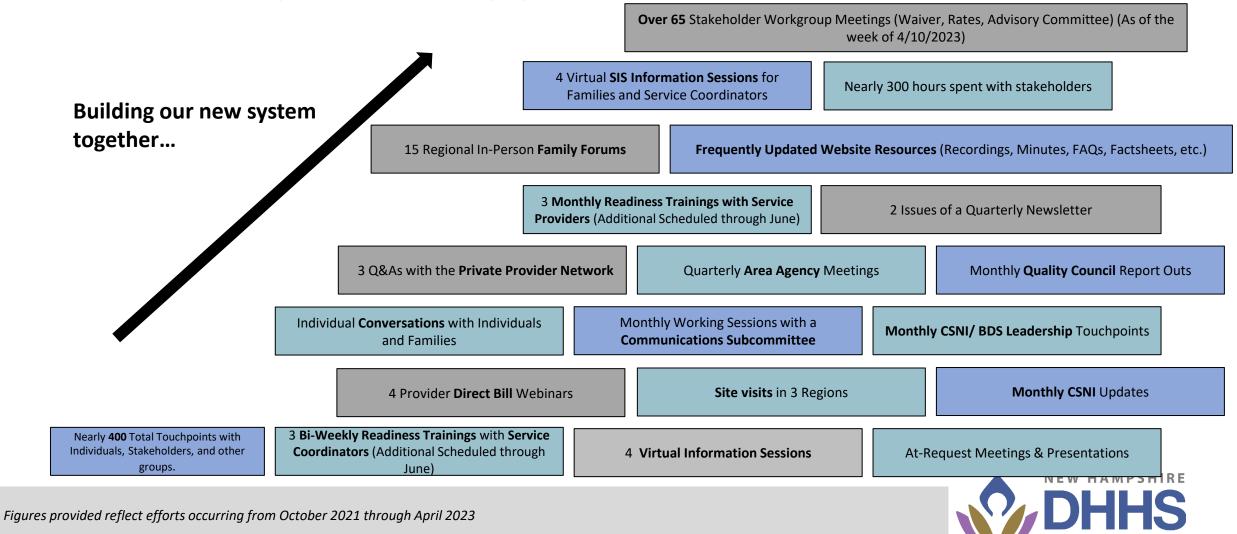
Status Overview		
Reimbursement Rates	<ul> <li>BDS and Meyers &amp; Stauffer (M&amp;S) finalized the rate to reimburse Area Agencies for the systemic, administrative functions they will perform post July 1; including intake and eligibility, service system oversight, and fiscal management services (self-directed supports).</li> <li>BDS submitted a formal request to CMS seeking approval for Medicaid Administrative Claiming for the Area Agency rate for federal match.</li> <li>BDS and M&amp;S reviewed cost data reported by service providers and began drafting an update rate methodology for rate development.</li> </ul>	
Intensive Treatment Services (ITS)	BDS continues meeting with Area Agencies and service providers to identify ability and interest in establishing additional in-state service capacity. BDS developed a project plan that will standardize ITS in NH, expand current provider capacity, recruit new providers to open homes in NH, and address macro issues impacting provision of quality services.	
Policy	BDS has initiated the rulemaking process by sharing He-M 505 and He-M 503 for informal feedback. A new provider rule, He-M 504, and He-M 522 will be shared for informal comment by May. Formal rulemaking will occur from May through August. Extensive stakeholder engagement on proposed rule changes and language has occurred.	





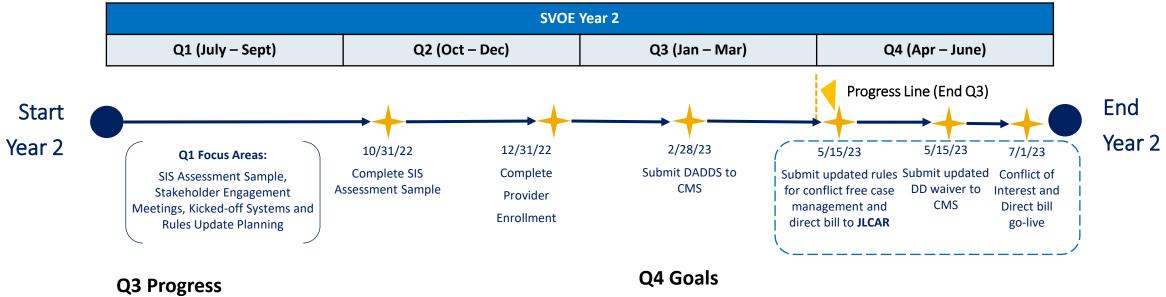
### **Stakeholder Engagement Summary**

# Our ongoing stakeholder engagement builds and reinforces the values that drive the DD Systems Change work. Our engagement includes...



HEALTH & HUMAN SERVICES

# Initiative Update – Timeline (DD Redesign)



- ✓ He-M 503 updates
- ✓ He-M 505 updates
- ✓ Enrollment & Eligibility, DAADS, and FMS rate developed
- ▷ Provider enrollment application submissions (86% approx.)
- ✓ Stakeholder Engagement and Planning for Direct Bill

- Finish planning for necessary system changes to support direct billing
- Finalize rule drafting
- ✓ Submit DAADS payment structure to CMS
- Operational process development
- ✓ Provider training to support 7/1 go-live





# Initiative Update – Overview (MES)

### **Status Overview**

#### **Electronic Visit Verification**

- 1. Recent Accomplishments: Design, Development, Implementation phase started 1/20/23.
- 2. Upcoming Focus: Finalize requirements, design and development. User Acceptance Testing to be completed by 7/7/2023.

#### Systems Integrator (SI)

- 1. Recent Accomplishments: RFP reviews continue with revisions being made as comments are received. Monthly progress report provided to CMS on 3/17/2023.
- 2. Upcoming Focus: Finalize the RFP review process. RFP scheduled to submit for CMS review in April 2023.

#### **Provider Management**

- 1. Recent Accomplishments: APD ready to be submitted. Detailed requirements specification is complete.
- 2. Upcoming Focus: APD scheduled to submit to CMS during Q4 of SFY2023. Draft Participating Addendum to be completed.

#### **Pharmacy Benefits Manager**

- 1. Recent Accomplishments: Project kickoff with PBM and Public Health staff held on 3/31/2023.
- 2. Upcoming Focus: Contracts unit to monitor the contract extension of the existing Magellan contract. Begin APD development on future PBM system.

#### **Program-Level**

- 1. Recent Accomplishments: Finalizing 1) completing staffing projections; and 2) developing mechanism of tracking and aggregating budgets and expenditures across projects.
- 2. Upcoming Focus: Complete both efforts. Team is also initiating a "Lessons Learned" effort to find ways to streamline the process.

