

Medical Care Advisory Committee (MCAC)

April 10, 2023

Minutes

Members: Holly Stevens, Chair, Elinor Wozniakowski, Rhonda Siegel, Ellen McCahon, Lisabritt Solsky Stevens, Joan Fitzgerald, Vanessa Blais, Dawn McKinney, Michael Auerbach, Lisa Adams, Kristine Stoddard, Paula Minnehan, Ellen Keith, Karen Rosenberg, Carolyn Virtue

Alternates: Brooke Belanger, Kristen Schmidt, Deodonne Bhattarai, Kelley Capuchino, Cheryl Steinberg, Nichole VonDette, Gina Balkus, Jonathan Routhier, Isadora Rodriguez-Legendre, Amy Girouard

Excused: None

DHHS: Henry Lipman, Rob Berry, Krysten Finefrock, Jessica Gorton, Reuben Hampton, Jessica Gorton, Olivia May, Ann Landry, Laura Ringelberg, Jordan McCormick, Shirley Iacopino, Vernon Clough, Dawn Tierney, Deb Sorli, Jody Farwell, Sara Lacharite, Melinda Cox, Kerri Schroeder

Guests: Mary St Jacques, Debra Lang, Amy Pidhurney, Catrina Rantala, Joshua Gehling, Michael Miller, Deborah Fournier, Kristina Ickes, Josh Krintzman, Conor Saoirse Laing, Susan Paschell, Brooke Holton, Rachel Chumbley, Madeline Ullrich, Richard Sigel, Rob Hockmuth, Heidi Kroll, Kurt Strohmeyer, Lara McIntyre, Trina Loughery, Marissa Berg, Lindsey Magee, Lucy Hodder, Scott Workman, Janan, BIANH, GSIL, NH Care Collaborative, Home care, Hospice, PC Alliance, Terry @ NH Family Voices

Announcements

There were no announcements.

Review/Approval: February 13, 2023 Minutes

MCAC voted to approve the motion to table March 13, 2023 minutes approval until next month. The February 13, 2023 Minutes were approved.

Agenda Items – May

An update was requested on the 1915(i) Fast Forward waiver. It was also requested to repeat a legislative update.

Legislative Update – Rob Berry

- Discussed that the legislature had gone into crossover.
- Discussed that HB1 and HB2 had passed the House and that the Department will continue to be engaged in the process as the bills make their way through the Senate.
- Several bills the Department had been following were retained in committee and incorporated into HB 2 as part of the budget process. This included:
 - HB282 (Relative to Including Certain Children and Pregnant Women In Medicaid and The Children's Health Insurance Program.)
 - HB565 (Relative to Expanding Medicaid to Include Certain Postpartum Health Care Services)
- HB601 and SB 242 (Medicaid direct certification) were retained and tabled respectively.
- Competing bills relative to gender affirming care (HB368 and HB619) were both retained in committee.
- SB36 (Relative to Systems Of Care For Healthy Aging) was tabled
- SB86 (Relative to Health Care Workforce Development and Making Appropriations Therefor.) was tabled.
- SB127, Department requested legislation is scheduled for a hearing on 4/12.
- SB175 (Relative to Medicaid Coverage for Mothers) was tabled.

- SB263 (Granite Advantage Reauthorization) had a public hearing on 4/4 where there was great support for the bill.

HBCS Settings - Mary St Jacques, UNH IOD

Mary St. Jacques presented an overview of the final rule for HCBS settings and DHHS compliance.

- This was a federal law created in 2014, applicable to all settings providing services that are home and community based.
- There was a transition period to enter into compliance, including extensions in recognition of the Public Health Emergency.
- Each state submitted Statewide Transition Plans for a final deadline of compliance of March 17th, 2023.
- NH's approach included an advisory task force and waiver transition team to oversee the work and partner with CMS.
- Components of the Plan include a baseline status of compliance, regulatory review, goals, and monitoring systems.
- Key Expectations are:
 - Setting is integrated in and supports full access of individuals receiving Medicaid HCBS to the greater community, including:
 - Opportunities to seek employment and work in competitive integrated settings, • Engage in community life,
 - • Control personal resources, and
 - • Receive services in the community, to the same degree of access as individuals not receiving Medicaid Services
 - The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting. The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board.
 - Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint.
 - Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact.
 - Facilitates individual choice regarding services and supports, and who provides them.
 - Additional Expectations:
 - "The unit or dwelling is a specific physical place that can be owned, rented, or occupied under a legally enforceable agreement by the individual receiving services, and the individual has, at a minimum, the same responsibilities and protections from eviction that tenants have under the landlord/tenant law of the State, county, city, or other designated entity. For settings in which landlord tenant laws do not apply, the State must ensure that a lease, residency agreement or other form of written agreement will be in place for each HCBS participant, and that the document **provides protections** that address eviction processes and appeals comparable to those provided under the jurisdiction's landlord tenant law."
 - "Each individual has privacy in their sleeping or living unit:
 - Units have entrance doors lockable by the individual, with only appropriate staff having keys to doors
 - Individuals sharing units have a choice of roommates in that setting

- Individuals have the freedom to furnish and decorate their sleeping or living units within the lease or other agreement”
 - “Individuals have the freedom and support to control their own schedules and activities, and have access to food at any time”
 - “Individuals are able to have visitors of their choosing at any time”
 - “The setting is physically accessible to the individual”
- DHHS current focus area is the monitoring of settings for ongoing compliance.

Emergency Department Use by Patients in Acute Psychiatric Crisis - Rob Berry

In the last MCAC meeting, there was a requested agenda item related to addressing the issue of ED boarding for patients in acute psychiatric crisis.

At this time, the Department can share updated on two approvals made at the March 22nd Governor and Council:

- DHHS was authorized to award a grant agreement with Mary Hitchcock Memorial Hospital, Lebanon, NH, to increase behavioral health service capacity by adding five Designated Receiving Facility beds.
- DHHS was authorized to provide \$15 million to SolutionHealth toward its construction costs of a \$55 million to \$60 million consolidated behavioral health hospital in a yet-to-be identified location.

Further information is available in the minutes of the [March 22nd, 2023 Governor and Executive Council meeting](#).

Bureau of Developmental Services Administration: Rules He-M 505 & He-M 522 - Jessica Gorton, Bureau of Developmental Services

Jessica Gorton presented updates on rules He-M 505 and He-M 522 as a preview to upcoming changes to these rules. He-M 505 pertains to the establishment and operation of area agencies, largely driven by corrective action plans (CAP) that DHHS has with CMS. This proposed rule is to be released to external stakeholders for feedback. He-M 522 pertains to the eligibility determination processes. Both of these rules will undergo changes related to the corrective action plan that DHHS is under with CMS.

Public Health Emergency: Medicaid Coverage and Continuous Enrollment - Henry Lipman, Medicaid Director, Lucy Hodder and Deb Fournier, UNH Health Law & Policy

UNH provided an update on the transition process, including a review of what’s happening to people in the transition to date. Henry Lipman explained the protected population distribution and the monthly risk based distribution projections across the 12 month return to operations timeframe. Lipman explained that the program is doing better than anticipated based on successful redeterminations. Lipman also reviewed the changes in enrollment numbers for each eligibility category in Medicaid, noting that DHHS’s strategy was to focus on people who may be eligible for other types of coverage early in the transition period, while scheduling redeterminations for people in higher risk categories later in the summer and Fall.

March outcomes were reviewed, showing projected transitions and reasons for the transitions. Lipman noted that of the protected population who transitioned, 5% reopened within 30 days. Of those who were transitioned due to being not eligible in March, approximately 56% were referred to the Federally Facilitated Marketplace.

The UNH team reviewed the notices being sent to beneficiaries and reviewed the posters available on the DHHS website for beneficiaries. The UNH team provided detailed resources for transitioning beneficiaries to support their navigation to other health insurance coverage, and clarified open enrollment periods and what assistance is available for Medicaid, Medicare, Marketplace, Sponsored Insurance and TriCare/VA or other options.

Numbers were also provided for DHHS Customer Service and the health insurance Navigators: Contact the DHHS Customer Service Center toll-free at 1-844-ASK-DHHS (1-844-275-3447) and select option #3 or (603) 271-9700,(TDD: 1-800-735-2964) Navigators Connect with a Navigator by calling 1-877-211-6284 or 800-208-5164.

UNH and the DHHS team answered questions about the transition.

Adult Dental Benefit Update

Olivia May, Director of Medicaid Enterprise Development

The program launched successfully on April 1, 2023, after all needed approvals from CMS were secured. On the first day of the program, Northeast Delta Dental and DentaQuest facilitated mobile dental clinics serving members in Colebrook and Concord. The provider network has grown steadily in the final days leading up to April 1st and continues to be developed and grown with various recruitment strategies.

Disability Determinations

Kerri Schroeder, Bureau of Family Assistance

As of April 10, 2023: 33 children were pending of which 10 had Medicaid; 231 adults pending of which 180 had Medicaid, 38 at 90+ days, 31 awaiting nurse write-up or final sign-off, 6 pending medical records, 2 consultative exams scheduled, 3 HC-CSD case over 90 days.

Rules: Consent

- He-W 544 with amendments – Hospice Services
- He-W 802.04, He-W 804.01-804.3, He-W 816.01, He-W 832.01, He-W 858.03, He-W 885.01, He-W 890.01
 - He-W 802.04 categorically needy and medically needy medical assistance
 - He-W 804.01 case decisions
 - He-W 804.02 notice of decision (NOD)
 - He-W 804.03 advance notice period (ANP)
 - He-W 816.01 sponsored aliens who apply for medical assistance
 - He-W 832.01 parents and other caretaker relatives
 - He-W 858.03 adult category standard of need
 - He-W 885.01 quality control reviews of eligibility
 - He-W 890.01 reimbursement

There was no request to remove the rule from consent.

Adjourn. M/S/A