



OFFICIAL RESPONSES TO VENDOR QUESTIONS
 RFP-2024-DLTSS-07-COUNT

No.	Section #	Question	Answer
1.	2.1.4.	Is there an opportunity for a capitation payment or cost per member per month (PMPM) by number of people served?	Please see RFP Section 2.1.4.
2.	General	a) How does the Department currently (or plan to) identify the dual eligible population that are at risk for institutional care? b) Is there a definition for those at risk of institutional care?	a) Dual eligibility is tracked in the Department's Medicaid Management Information System (MMIS) and the Department will work with the selected Vendor to identify this population. b) Those who are at risk of institutional care are individuals who meet (or will meet in the near future) nursing facility level of care, are living in the community, and need additional services/supports and/or coordination to remain in the community.
3.	General	How does the Department anticipate counties outreach to the individuals identified as at risk for institutional care?	The Department would like counties to propose strategies for outreach. Referral sources and partners such as the programs listed in RFP Subsection 2.1.1.5., would be areas for outreach.
4.	General	Does the Department anticipate that any services provided might be billed to Medicare and Medicaid?	Yes.
5.	General	Can the Department provide data on the number of currently dual-enrolled individuals by County?	Yes. As of 7/31/23, the number of dual-enrolled individuals by County was: Belknap: 860 / Carroll: 614 / Cheshire: 1,096 / Coos: 778 / Grafton: 959 / Hillsborough: 4,969 / Merrimack: 2,006 / Rockingham: 2,134 / Strafford: 1,379 / Sullivan: 622.
6.	General	Can the Department provide data to indicate how many dual-	Yes. As of 7/31/23, the number of dual-eligible

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		eligible individuals are currently enrolled in Choices for Independence (CFI) by County?	<p>individuals by County was:</p> <p>Belknap: 169 / Carroll: 92 / Cheshire: 145 / Coos: 106 / Grafton: 183 / Hillsborough: 892 / Merrimack: 352 / Rockingham: 403 / Strafford: 370 / Sullivan: 158.</p>
7.	General	Does the Department envision that this pilot program will include or exclude individuals currently enrolled in a CFI program?	This will be an option that individuals currently enrolled in the CFI program may participate in.
8.	General	What collaboration (if any) does the Department envision between the selected Vendor and CFI Vendors?	The Department would like counties to propose strategies for outreach. Referral sources and partners such as the programs listed in Subsection 2.1.1.5., would be areas for collaboration.
9.	General	What collaboration (if any) does the Department envision between the selected Vendor and the Money Follows the Person programming?	The Money Follows the Person (MFP) program is currently in the planning phase of its demonstration. The Department anticipates collaboration with the awarded county to fulfill its collective vision to improve and maintain an individual's health in the community. We will invite the awarded county to join the consultative group for MFP.
10.	General	What collaboration (if any) does the Department envision between the selected Vendor and NH Medicaid Managed Care Organizations?	Collaboration between the selected Vendor and NH Medicaid Managed Care Organizations will be determined.
11.	General	What collaboration (if any) does the Department envision between the selected Vendor and the Vendor selected to conduct a statewide feasibility study of programming that defers/delays institutional care for dual-eligible individuals released on 7/21/23? (RFP-2023-DLTSS-07-FEASI)	<p>The Department expects that the selected Vendor(s) for both this RFP and the RFP-2023-DLTSS-07-FEASI solicitation will collaborate.</p> <p>The Department will provide guidance to the selected Vendor.</p>
12.	General	What drives transition from home/community-based care to institutional care?	Some drivers include but are not limited to: individual choice, inability to access home and community based services in a timely manner, access to family caregivers, hospitalization or need for rehabilitation due to an acute

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13.	General	What measure(s) does the Department propose to use to measure deferral/delay of entry to institutional care?	episode, functional impairment, and dementia. The selected Vendor should propose measures to indicate deferment and delay of institutional care for individuals who are dually eligible for Medicare and Medicaid benefits.
14.	General	Could the selected Vendor serve clients with presumptive eligibility for Medicaid/CFI and/or non-dual eligible clients within the proposed model to ensure adequate population size for project implementation and evaluation?	Not at this time. The Department is required to submit a waiver request for Presumptive Eligibility by September 30, 2024, so it may not be fully operational during the term of this contract.