

MCM Commission

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**NH Department of Health
and Human Services**



**October 8, 2015
Legislative Office Building
Concord, NH**

Agenda

- Follow-up from September Meeting
 - Step 2 Information Session Feedback
- Monthly Enrollment Update
 - MCM Step 1
 - NH HPP
- NH PAP Update
- Step 2 Update
- Waiver timeline/1915 (c) status
- Quarterly MCM Quality Reporting Plan
- Behavioral Health Network Update
- Q&A from Commission and Public

Follow-up

Feedback from Step 2 Information Sessions

- Prior Authorizations- Out of Network/Medical Necessity
 - Non-Emergent Transportation
 - Continuity of Care
 - Guardianship
- * Handout- Continuity of Care

Setting the Context

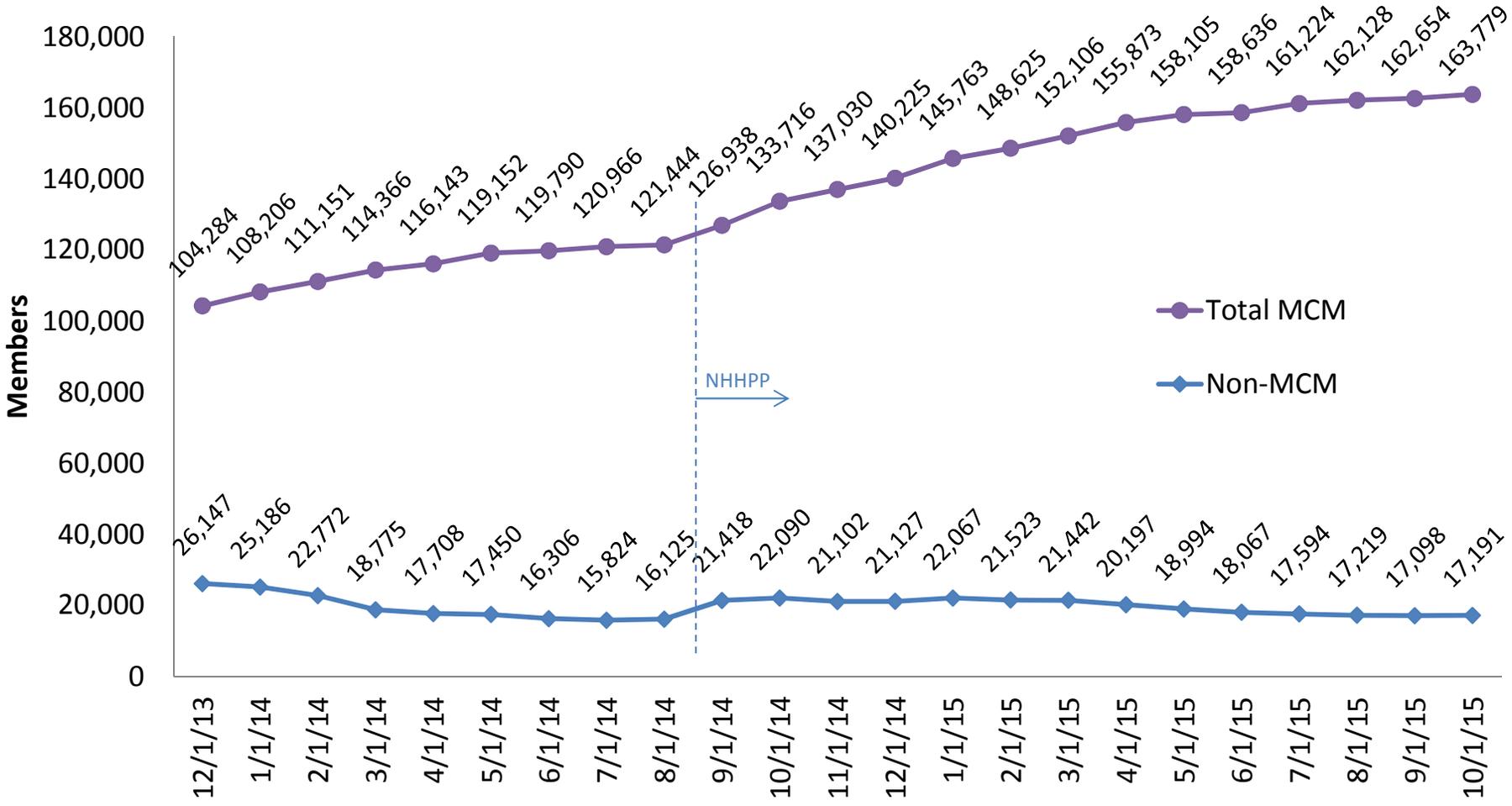
Care Management Program

December 1, 2013 –October 1, 2015

@ 23 Months

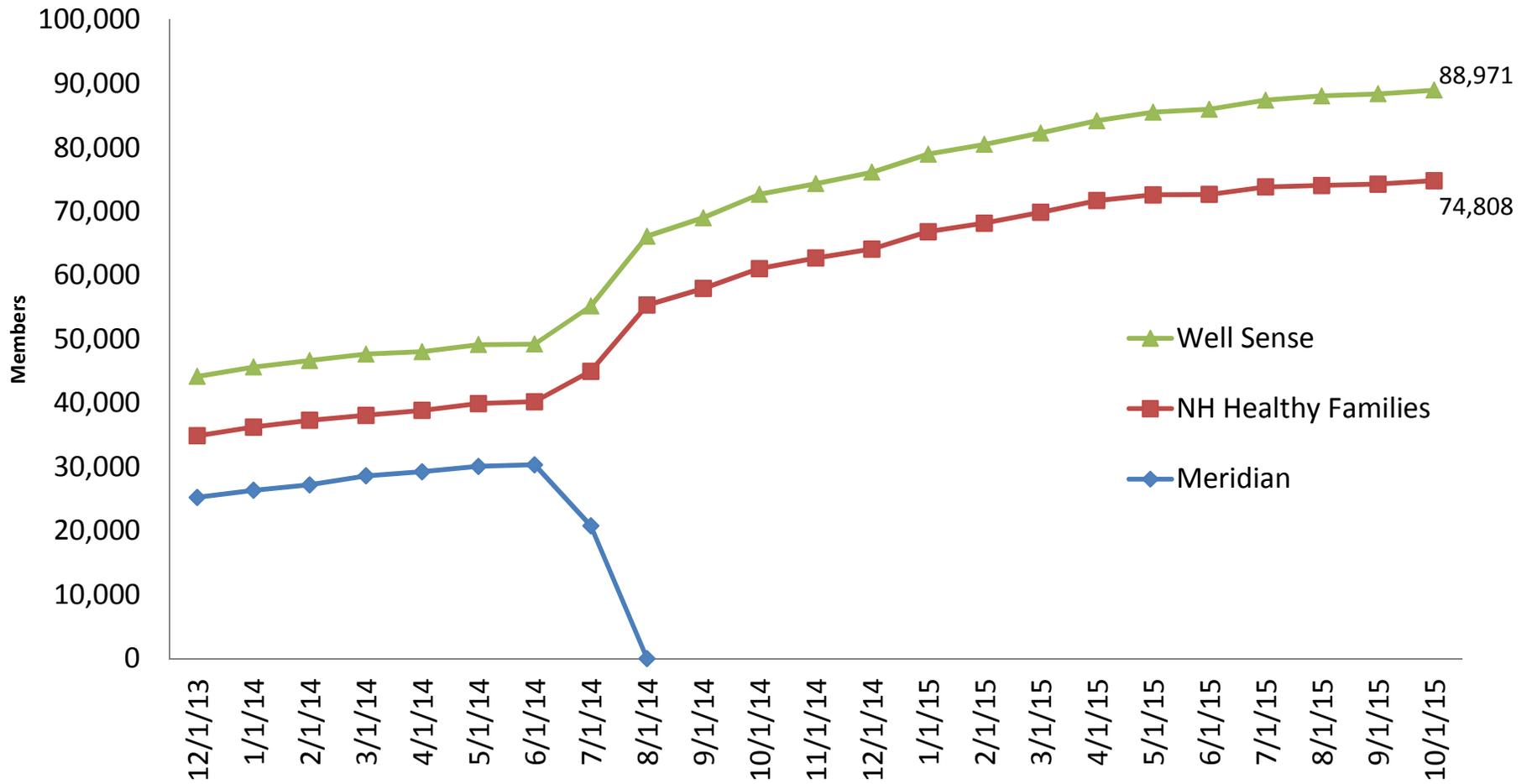


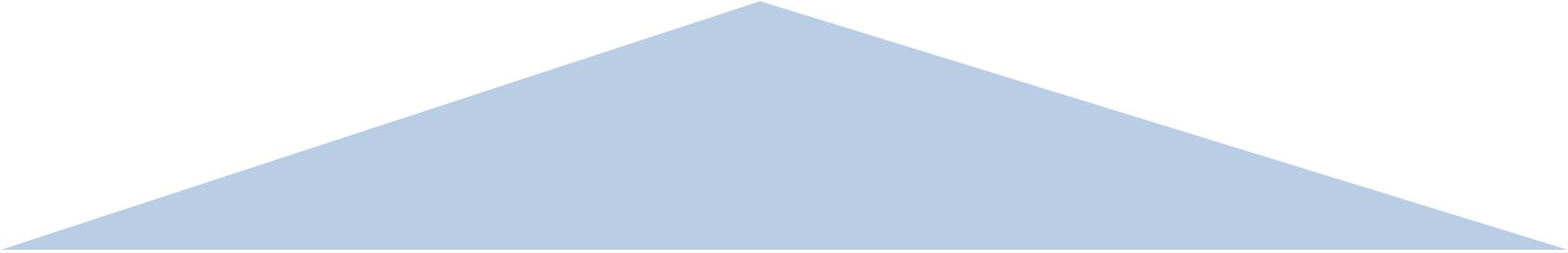
NH Medicaid Care Management Enrollment, 12/1/13 – 10/1/15



Note: Excludes members without full Medicaid benefits (Family Planning Only & Medicare Savings Plans)

NH Medicaid Care Management Enrollment by Plan, 12/1/13 – 10/1/15





NH Health Protection Program

NH HPP Update

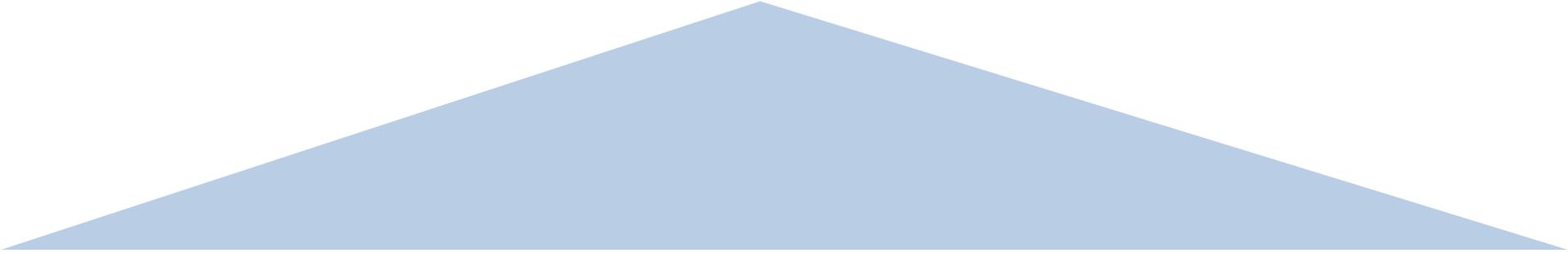
As of 9/4/15

- Total Recipients
 - 42,547
 - 21,209 are new to DHHS
 - 10,368 are new to NH HPP but have been clients in the past
- Benefit Plans
 - 39,798 are in the ABP (Alternative Benefit Plan)
 - 2,327 of Medically Frail are in the ABP
 - 422 of Medically Frail in standard Medicaid
- Care Management / HIPP
 - 260 Enrolled in HIPP
 - 0 are Potential HIPP
- Bridge
 - 21,018 are enrolled in WSHP
 - 18,231 are enrolled in NHHF
 - 3,038 are in Fee For Service/not yet enrolled in a plan

Premium Assistance Program (PAP) Update

- Heads Up letter went out beginning of October
- Enrollment begins 11/3/15
- Wellsense members that have not self selected are auto assigned
- NHHF members will be auto-assigned to Centene/Ambetter
- PAP Coverage begins 1/1/16

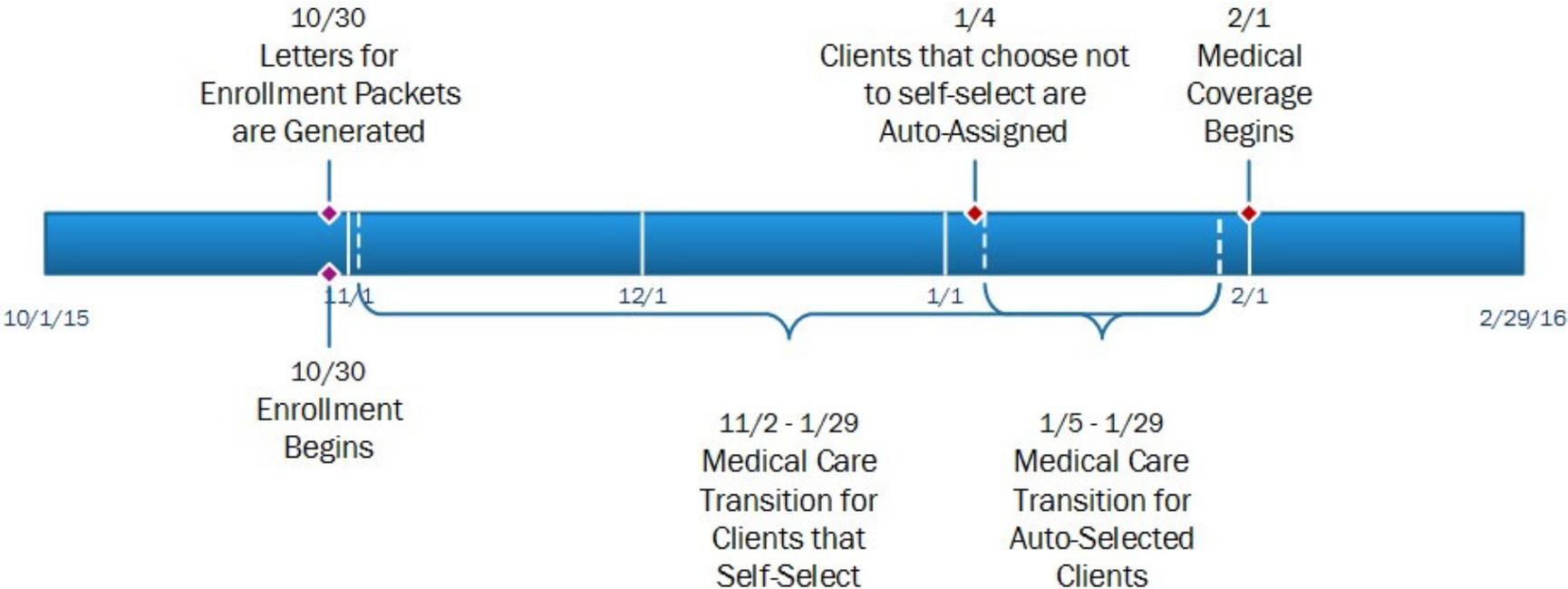
<http://www.dhhs.state.nh.us/ombp/pap/index.htm>



Step 2 Update

MCM Step 2 Phase 1 Timeline

Medical Services for Mandatory Populations



Quality Consumer Transition-- from Enrollment to Service Start

- Options Counseling
- Self-Selection of a Plan Prior to Auto-Enrollment
- Case Management Collaboration
- Transfer of Medical Claims Information to MCO
- Opportunity to Enroll in Care Coordination
- Enrollment Alignment with Premium Assistance Program (PAP)
- Guardianship & Authorized Representatives

MCO Readiness/Operational Review

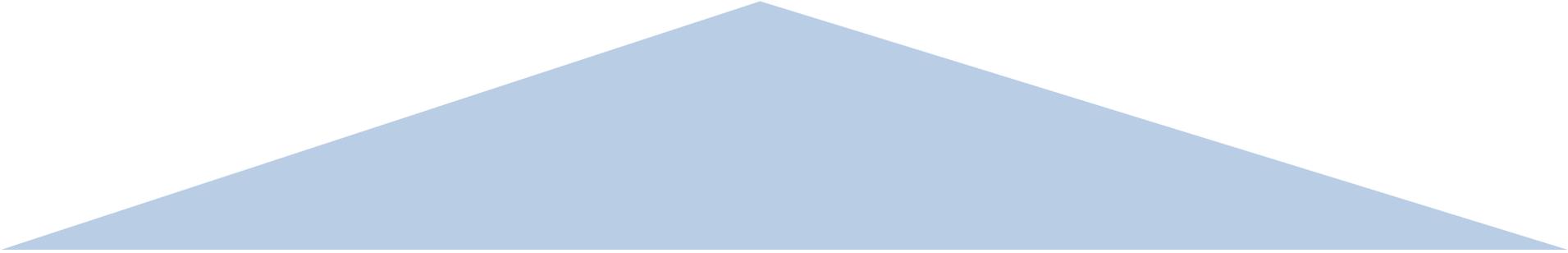
- May 2015
- October/November 2015

Continued evaluation of MCO ability to identify and manage needs of individuals with complex conditions and focus on MCOs' ability to manage "member facing" activities and care coordination.

Department Outreach and Readiness in Support of Customers with Complex Needs

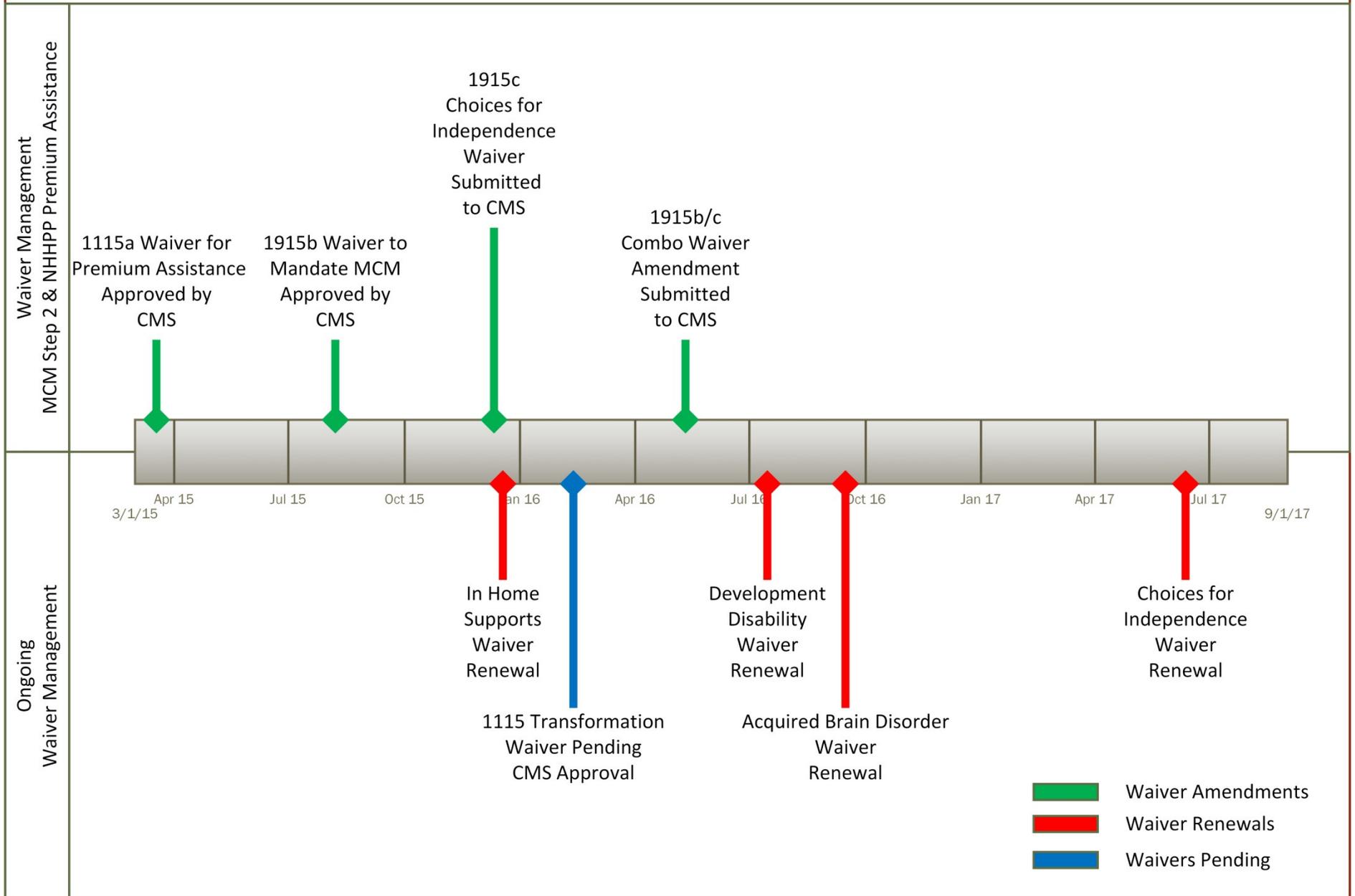
- High Touch Readiness Project
- Ongoing Education and Training

* Handouts- High Touch Readiness and Training and Education Plan



Waiver Update

NH DHHS Waiver Update October 2015



MCM Step 2 Waiver Management- Now

- Waivers need to be modified and approved by CMS to expand health plan services to include long term services and supports (LTSS).
- 1915(b) and CFI 1915 (c) must be modified and a “combo” 1915 (b) and 1915 (c) Waiver must be approved by CMS prior to expanding CFI/NF coverage in the case of the care management program
- The 1115 (a) Waiver for NH Premium Assistance Program was approved by CMS

Step 2 Waiver Management Ongoing

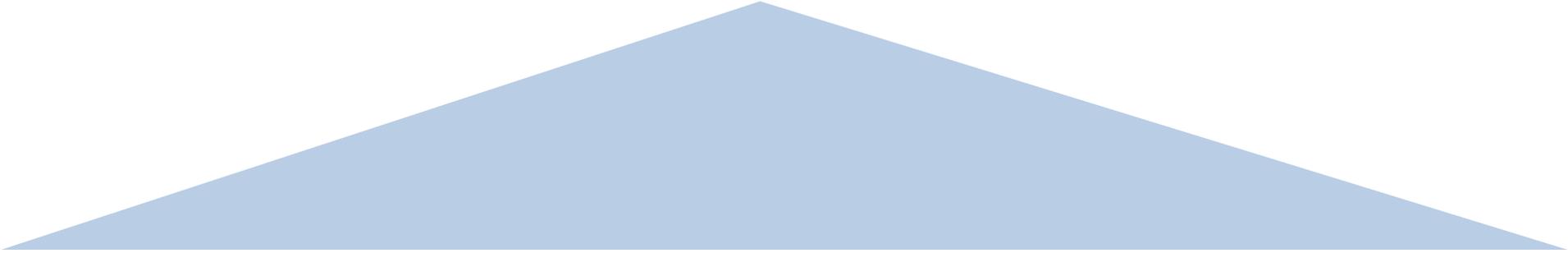
- Waiver renewals are due to CMS:
 - 12/31/15- In Home Supports (IHS) 1915 (c) Waiver
 - 8/31/16- Developmental Disabilities (DD) 1915 (c) Waiver
 - 10/31/16- Acquired Brain Disorder (ABD) 1915 (c) Waiver
 - 6/30/17- Choices For Independence (CFI) 1915 (c) Waiver

MCM Step 2 Waiver Management Future

- Once a date has been set for DD/ABD/IHS Waiver Services to be included in health plan services, the Department will consider and set dates for necessary Waiver amendments.
- The 1115 Transformation Waiver is pending CMS approval.

1915 (c) CFI Waiver Amendment

- Expands Health Plan Services to Include CFI Long Term Services & Supports (LTSS)
- Internal Review -- structure to ensure quality standards, consumer safeguards, and oversight
- Capacity Building -- LTSS Program Ombudsman, Participant Safeguards, Contract Management
- CMS Requirements for MLTSS -- emerging guidance -- approach not easily explained through waiver application
- Date TBD
- More details later in the presentation



Quality Reporting

Medicaid Quality Information System (MQIS)

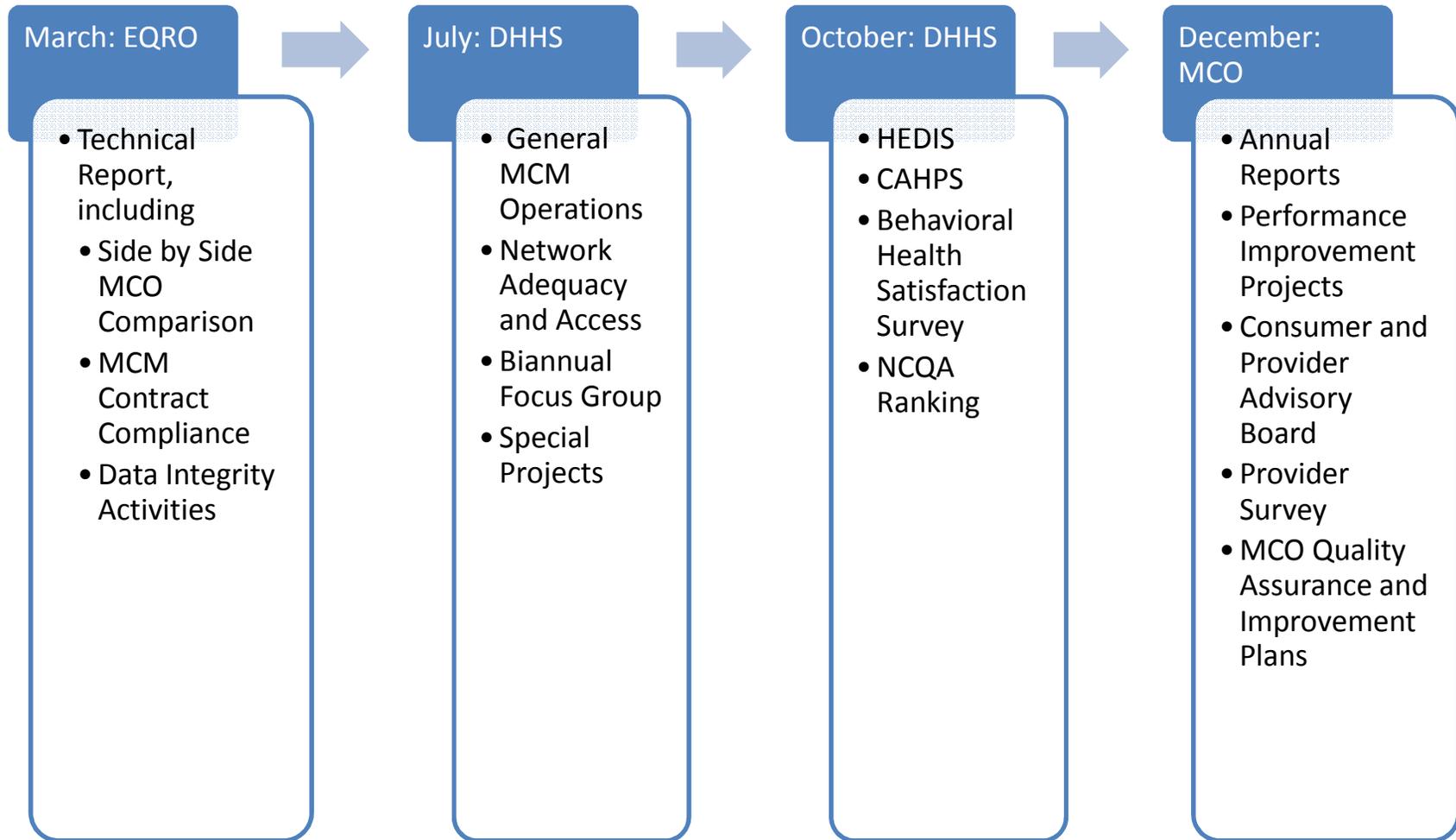
Medicaid Care Management Data is now available at:

<http://medicaidquality.nh.gov/>

For questions on how to use MQIS:

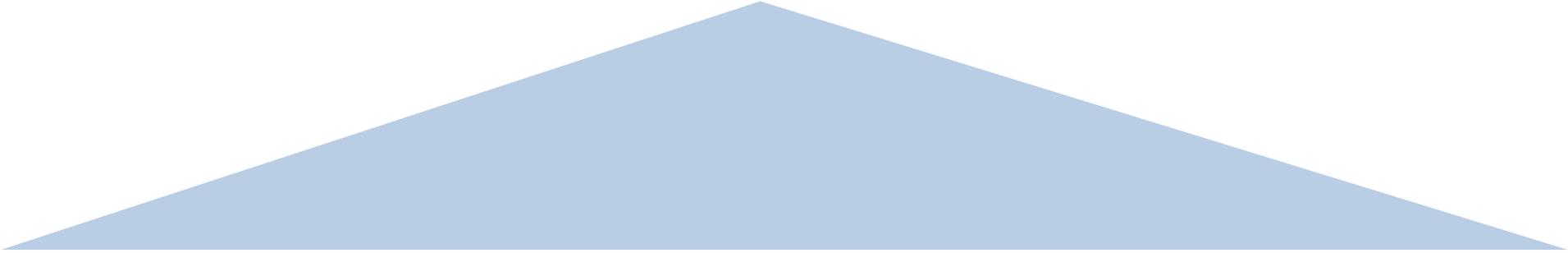
MedicaidQuality@dhhs.state.nh.us

Quarterly MCM Quality Reporting Plan



Behavioral Health Network Update

- DHHS is convening the parties on a weekly basis effective 9/10/15
- A proposed Memorandum of Understanding has been established that delineates a process for moving forward with a report due to Governor Hassan on November 1, 2015
- Focus is on the following issues:
 - Care Management Savings Rate
 - Enrollment Rate of Dual Eligibles
 - Commitment on CMHCs to stand up provisions of CMHA



Questions?