

**Governor's Commission on Medicaid Care Management  
Releases Report and New Gubernatorial Recommendation  
Press Release**

**For Immediate Release**

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**Governor's Commission on Medicaid Care Management  
Commends DHHS for Preparation to Launch Medicaid Care Management on December 1;  
Commission Also Recommends  
a Reporting System to Ensure Quality, Satisfaction and Efficiency**

**Concord, NH** –On Thursday, November 7, 2013, The Governor's Commission on Medicaid Care Management (MCM) released a report with findings and recommendations to Governor Maggie Hassan. The Commission, which was established by executive order of the Governor in April of this year to review and recommend best practices in implementing New Hampshire's Medicaid Care Management program, found that the preparations by the New Hampshire Department of Health and Human Services (DHHS) and the three private companies that will manage the Medicaid program were thorough and thoughtful. The report commended DHHS for its "diligence and skill in preparing for the implementation of Medicaid Care Management" and acknowledged that implementing MCM is a complex and challenging process.

In order to ensure that major problems are identified and rapidly remediated when MCM is implemented, the Commission recommended that the Governor request a series of public reports from DHHS. The recommended reports cover key areas of concern, including enrollment status, enrollee satisfaction and provider concerns. The Commission's rationale in recommending these reports includes provisions for independent third-party review and transparent public consideration of all reporting to further ensure diligence throughout the MCM implementation process. The rationale also includes the need to build a shared understanding and commitment to success among all stakeholders in New Hampshire.

In response to the report, Governor Hassan thanked the Commission and DHHS for its ongoing work. "The Commission, through their process and expertise, has asked the right questions regarding planning, broadening the networks, quality of care and protection of benefit dollars," stated Governor Hassan. She noted that every sector – both in government and in our personal lives – is undergoing extraordinary change toward a vision of better and more accessible healthcare and that the Commission and DHHS are working closely with Managed Care Organizations, providers and the public to identify and manage any disruptions caused by change.

In a cover letter to the Governor, Mary Vallier-Kaplan, chair of the Commission, noted that the recommended public reports are, "designed to promote continuous improvement of quality, enrollee and provider satisfaction and operational effectiveness in the MCM program for Medicaid recipients, providers and taxpayers."

Among the chief findings of this report, the Commission cites the critical management processes of network adequacy, the enrollment process and the care management quality strategy as having been, "thorough and thoughtful and each reflect approaches that address the major areas of concern in managed care models."

Vallier-Kaplan summarized the findings of this report: “Medicaid Care Management represents a landmark change in the way that health-related services are delivered to our most vulnerable populations. After eight months of careful and thorough review, the Commission believes that DHHS has taken appropriate measures in launching Step 1 of Medicaid Care Management.”

According to Vallier-Kaplan, the Commission and DHHS will continue to evaluate implementation of MCM through a series of independent evaluations and public consideration to ensure that enrollees have access to quality care, that provider networks run smoothly and that taxpayer dollars are well managed in accordance with the laws of New Hampshire.

“The Commission also recognizes that ensuring quality, efficiency and prudent use of taxpayer dollars in one of New Hampshire’s largest state-funded programs requires continual verification and quality improvement through reporting, comprehensive independent evaluations and public review,” stated Vallier-Kaplan.

The Commission has met monthly since April of this year, focusing on critically reviewing the implementation plan, building stakeholder knowledge and readiness, and identifying critical areas that need to be addressed to ensure the smoothest and most effective transition possible. The Commission placed priority on addressing urgent tasks related to implementation of Step 1 on December 1, 2013. Those tasks included review of network formation, enrollment processes, consumer protection, safety net provider stability, and operating performance and efficiency. To that end, The Commission has listened to 24 hours of testimony from 16 experts, taken hundreds of comments and questions from the public and reviewed dozens of documents.

“Significant progress is being made in implementing the Legislative mandate for Medicaid Managed Care,” noted Commission Vice Chair, Donald L. Shumway. “Our Commission and DHHS are listening to many voices across all spectrums to ensure that New Hampshire moves forward responsibly and with a long-term vision for the stability of this program and the well-being of our most vulnerable citizens.”

With Step 1 going live on December 1, 2013, the Commission will also focus on the availability of high quality patient-centered medical homes, best provisions in behavioral health and assuring patients’ rights and protections. The Commission has also begun review of Step 2, which applies to long-term supports and services. In addition to hearing independent evaluations, the Commission will continue to hear expert testimony and public comments at its monthly meetings.

In addition to the recommendations included in this report, the Commission earlier recommended by unanimous vote that Medicaid expansion, as permitted under the Affordable Care Act, be implemented in New Hampshire.

“We have a significant opportunity to improve the quality of care for thousands of our citizens,” said Governor Maggie Hassan. “We want to strengthen health care in New Hampshire and bring the best coordination of care, efficiency, value and support to all of our people. The Commission is working with all stakeholders to achieve a high level of quality and to set standards to ensure that New Hampshire’s managed care program is successful.”

“The Commission’s findings represent a uniquely New Hampshire approach toward implementing Medicaid Managed Care,” continued Hassan. “With extensive input from DHHS, Managed Care Organizations, providers and the public, this body of work represents a comprehensive approach toward ensuring the effectiveness, efficiency and quality of care in one of our largest and most important safety-net programs.”

Vallier-Kaplan added, “The success of Step 1 is founded in a process of review, inquiry and accountability that includes open, non-partisan communication among all stakeholders. The lessons we are learning through this transparent process will be applied to the planning and implementation of Step 2. Our goal is to ensure a well-implemented and successful Medicaid Care Management program that produces the best possible results for the citizens of New Hampshire.”

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### **About Medicaid Managed Care**

The Medicaid Care Management program, as enacted in 2011, is intended to improve the value, quality and efficiency of services provided through Medicaid, stimulate innovation and generate savings for New Hampshire. The program is to be implemented in three phases (Steps) through contracts entered into between the Department of Health and Human Services and three Managed Care Organizations (MCOs) who are responsible for providing management of health care services to members enrolled in the New Hampshire Medicaid Program.

### **About the Governor’s Commission on Medicaid Care Management**

The Governor’s Commission on Medicaid Care Management was formed by executive order of the Governor in April of this year to review and advise the Governor on the implementation of an efficient, fair and high-quality Medicaid care management system. The commission meets monthly, including forums across the state with members of the public. The first meeting was held on May 3, 2013.

The commission brings together members of the public with expertise in managed care and payment reform models of care, Medicaid public policy, elderly affairs, children's health, public health, mental health, developmental disabilities and adult health care services. Mary Vallier-Kaplan, former vice president of the New Hampshire Endowment for Health, chairs the panel and Donald Shumway, former commissioner of the Department of Health and Human Services and president and CEO of Crotched Mountain Rehabilitation Center, serves as vice-chair. The Commission's members are Thomas Bunnell, policy consultant for NH Voices for Health; Sue Fox, project director at the UNH Institute on Disability and a parent of a child with developmental disabilities; Wendy Gladstone, MD, a pediatrician at Dartmouth-Hitchcock Medical Center's Child Advocacy and Protection Program; Yvonne Goldsberry, Ph.D, MPH, vice president of Population Health and Clinical Integration at Cheshire Medical Center/ Dartmouth-Hitchcock- Keene; Catherine McDowell, founder of Coos Family Health and now running McDowell Project Management; Douglas McNutt, Associate State Director for Advocacy, AARP NH; Gustavo Moral, President of Independent Services Network; Kenneth Norton, executive director of NAMI New Hampshire; and Jo Porter, MPH, deputy director of the NH Institute for Health Policy and Practice.