HB 1 Footnotes

05-095-092-920510-33850000 - Bureau of Drug & Alcohol Services — Drug Forfeiture Fund

Org note to be added: "Funds received in BDAS Drug Forfeiture shall be continually appropriated and shall not lapse until June 30, 2023"

05-095-092-921010-20530000 - Bureau for Children's Behavioral Health - System of Care

Class 102 Contracts for Program Services

Class note to be added: "This appropriation shall not lapse until June 30, 2023"

05-095-047-470010-79390000 – State Phase Down

Class 503 "F. This appropriation shall not lapse until June 30, 2023"

HB 2 Language

Relative to Direct and Indirect Medical Graduate Education Payments.

Description:

Requiring the commissioner of the department of health and human services to submit a Medicaid state plan amendment to repeal direct and indirect graduate medical education payments to hospitals.

"Department of Health and Human Services; Repeal of Direct and Indirect Graduate Medical Education Payments. The commissioner of the department of health and human services shall submit a Title XIX Medicaid state plan amendment to the federal Centers for Medicare and Medicaid Services to repeal the provision of direct and indirect graduate medical education payments to hospitals. Upon approval of the state plan amendment, and as of the effective date of the state plan amendment, any obligations for payment of direct and indirect graduate medical education shall be terminated."

NOTE: Included in HB 2 (2019) as introduced. Ultimately, HB 4 (2019) reverted to prior boiler language suspending direct graduate medical education payments to hospital for the biennium ending June 30, 2020.

Relative to Social Services Block Grant and Eliminating Unnecessary Rulemaking Requirement.

Description:

Related to HB 2 section 23 as passed by the House (also included in Governor's budget) relative to Services Block Grant Program to eliminate unnecessary rulemaking each budget cycle regarding the SSA cost of living adjustment (COLA).

"New Paragraph; Administrative Procedures Act; Exemptions. Amend RSA 541-A:21 by inserting after paragraph III-a the following new paragraph:

III-b. Rules adopted relative to the cost of living adjustment in social security benefits contained within the Social Services Block Grant program shall be exempt from the provisions of 541-A:5 through RSA 541-A:14 provided that recipients receive proper notice that the income level has been adjusted."

NOTE: New language similar to department requested language enacted in HB 4 (2019) to eliminate unnecessary rule making requirements for Medicaid rate of reimbursement methodology for nursing facilities (See RSA 541-A:21, III-a; Chapter 346:217 Laws of 2019).

Extending the Prospective Repeal relative to the Waitlist for Community Mental Health Services.

Description:

Boiler language from prior budget trailer bills and was included in the Governor's budget. This language extends the prospective repeal relative to the waitlist for community mental health services to July 1, 2023. See <u>HB 191</u> (2011) relative to community mental health system – based on recommendations of the office of legislative budget assistant's 2010 performance audit report of the New Hampshire community mental health system.

"Prospective Repeal Regarding Eligibility for Services Extended. Amend 2011, 209:6, I, as amended by 2013, 140:1, I, as amended by 2015, 276:41, I, as amended by 2017,

156:85, I, as amended by 2019, 346:61, I, to read as follows: I. Section 5 of this act shall take effect July 1, [2021] 2023"

Adult Dental Benefit under the state Medicaid program.

Description:

The following language relates to an adult dental benefit for Medicaid recipients, makes an appropriation of \$1.46 million in general funds for SFY 2023, and authorizes the department to accept matching federal funds without prior approval of the fiscal committee of the general court (see related tabled SB 150).

"1 Statement of Purpose. To improve overall health, promote savings in the state's Medicaid managed care program, and prevent future health conditions caused by oral health problems, and based on the recommendation of the working group convened pursuant to 2019, 346:225, the general court hereby determines that it is in the best interest of the state of New Hampshire to extend dental benefits under the Medicaid managed care program to individuals 21 years of age and over. 2 New Paragraph; Medicaid Managed Care Program; Dental Benefits. Amend RSA 126-A:5 by inserting after paragraph XIX the following new paragraph: XIX-a.(a)(1) The commissioner shall pursue contracting options to administer the state's Medicaid dental program with the goals of improving access to dental care for Medicaid populations, improving health outcomes for Medicaid enrollees, expanding the provider network, increasing provider capacity, and retaining innovative programs that improve access and care through a value-based care model.

- (2) The commissioner shall issue a request for information to assist in selecting the administrative model for the state's Medicaid dental program. Such model shall be either a model administered by a dental managed care organization or a model administered by the state's current medical managed care organizations. The commissioner shall obtain the requested information from both the current medical managed care organizations and any interested dental managed care organization. The administrative model selected shall demonstrate the greatest ability to satisfy the state's need for value, quality, efficiency, innovation, and savings. The request for information shall be released no later than November 1, **2021**. The request for information shall address improving health outcomes, expanding the provider network, increasing capacity of providers, integrating a value-based care model, and exploring innovative programs for children and adults.
- (3) If the model administered by a dental managed care organization is selected, the commissioner shall issue a 2-year request for proposals, with 2 optional one

year extensions, to enter into contracts with the vendor that demonstrates the greatest ability to satisfy the state's need for value, quality, efficiency, innovation, and savings. The state plan amendment shall be submitted to the Centers for Medicare and Medicaid Services (CMS) within the quarter of the program effective date. Implementation of a procured contract shall begin January 1, 2023 for the adult benefit. The department, in consultation with oral health stakeholders, will determine the value of implementation of the pediatric dental benefit in a valuebased benefit plan. Implementation of the pediatric benefit will occur on a date that follows the successful implementation of the adult dental benefit. The commissioner shall establish a capitated rate for the appropriate model for the contract that is full risk to the vendor. In contracting for a dental managed care model and the various rate cells, the department shall ensure no reduction in the quality of care of services provided to enrollees in the managed care model and shall exercise all due diligence to maintain or increase the quality of care provided. The department shall seek, with the review of the fiscal committee of the general court, all necessary and appropriate state plan amendments and waivers to implement the provisions of this paragraph. The program shall not commence operation until such state plan amendments or waivers have been approved by CMS. All necessary state plan amendments and waivers shall be submitted within the quarter of the program effective date.

- (4) The commissioner shall adopt rules, pursuant to RSA 541-A, if necessary, to implement the provisions of this paragraph.
- (b) Any vendor awarded a contract pursuant to this paragraph shall provide the required dental services to children with an implementation date to be determined by the department after the successful implementation of the adult benefit and the following dental services to individuals 21 years of age and over, reimbursed under the United States Social Security Act, Title XIX, or successors to it:
- (1) Preventive dental services including examinations, necessary x-rays or other imaging, prophylaxis, topical fluoride, oral hygiene instruction, behavior management and smoking cessation counseling, and other services as determined by the commissioner.
- (2) Restorative treatment to restore tooth form and function.
- (3) Periodontal treatment and oral and maxillofacial surgery to relieve pain, eliminate infection, or prevent imminent tooth loss.
- (4) Removable prosthodontics to replace missing teeth subject to medical necessity.

(c) In this paragraph, "dental managed care organization" means any dental care organization, dental service organization, health insurer, or other entity licensed under Title XXXVII, that provides, directly or by contract, dental care services covered under this paragraph rendered by licensed providers and that meets the requirements of Title XIX or Title XI of the federal Social Security Act.

3 Department of Health and Human Services; Appropriation. The sum of \$1,460,000 for the fiscal year ending June 30, 2023 is hereby appropriated to the department of health and human services for the purposes of developing and implementing the adult dental benefit required in RSA 126-A:5, XIX-a. The governor is authorized to draw a warrant for said sums out of any money in the treasury not otherwise appropriated. Notwithstanding RSA 14:30-a, VI, in addition to the amounts appropriated in this section, the department of health and human services may accept and expend any matching federal funds available for the purposes of this section without prior approval of the fiscal committee of the general court.

4 Effective Date. This act shall take effect upon its passage."

Home Visiting Programs.

Description:

The following language authorizes the department to receive \$1.5 million in general funds for SFY 2022 and \$1.5 million in general funds for SFY 2023 and that the department is authorized to accept matching federal funds without prior approval of the fiscal committee of the general court to effectuate the requirements of RSA 167:68-a.

"Department of Health and Human Services; Appropriation. The sums of \$1,500,000 for the fiscal year ending June 30, 2022 and \$1,500,000 for the fiscal year ending June 30, 2023 are hereby appropriated to the department of health and human services for the purposes of making home visiting programs available to all Medicaid eligible children and pregnant women as required by RSA 167:68-a. The governor is authorized to draw a warrant for said sums out of any money in the treasury not otherwise appropriated. Notwithstanding RSA 14:30-a, VI, in addition to the amounts appropriated in this section, the department of health and human services may accept and expend any matching federal funds available for the purposes of this section without prior approval of the fiscal committee of the general court."

In and Out Medical Assistance.

Description:

The following language establishes that the department shall receive \$2.7 million in general funds for SFY 2022 and \$5.4 million in general funds for SFY 2023 and that the department is authorized to accept matching federal funds without prior approval of the fiscal committee of the general court to amend the income eligibility standard for "in and out medical assistance" defined in section 625 of the department's medical assistance manual.

"Department of Health and Human Services; Appropriation. The sums of \$2,700,000 for the fiscal year ending June 30, 2023 are hereby appropriated to the department of health and human services for the purposes of amending the income eligibility standard for "in and out medical assistance." The governor is authorized to draw a warrant for said sums out of any money in the treasury not otherwise appropriated. Notwithstanding RSA 14:30-a, VI, in addition to the amounts appropriated in this section, the department of health and human services may accept and expend any matching federal funds available for the purposes of this section without prior approval of the fiscal committee of the general court."

Suspend Presumptive Eligibility.

Description:

The following language continues the suspension of RSA 151-E:18 regarding presumptive eligibility for LTC home and community based services from HB 4, Chapter 346:69 Laws of 2019.

"Eligibility for Home and Community-Based Services; Suspension. RSA 151-E:18, regarding presumptive eligibility for home and community based services, shall be suspended for the biennium ending June 30, 2023."

Reproductive Health Facilities.

Description:

"Department of Health and Human Services; Appropriation. The sums of \$400,000 for the fiscal year ending June 30, 2022 are hereby appropriated to the department of health and human services for the purposes of funding the Family Planning program. The governor is authorized to draw a warrant for said sums out of any money in the treasury not otherwise appropriated. Notwithstanding RSA 14:30-a, VI, in addition to the amounts appropriated in this section, the department of health and human services may accept and expend any matching federal funds available for the purposes of this section without prior approval of the fiscal committee of the general court."

Alvarez and Marsal Recommendations.

Description:

"35 Appropriation; Department of Health and Human Services. There is hereby appropriated to the department of health and human services the sum of \$10,260,000, for the biennium ending June 30, 2023, for the purpose of implementing certain recommendations, from a financial review conducted by Alvarez & Marsal, to streamline certain agency operations resulting in greater efficiencies and accountability, and involving certain transformation projects over a 4-year period. Additionally, the department may accept and expend any applicable federal funds, and any gifts, grants, or donations that may be available for the purposes of this section. This appropriation shall not lapse until June 30, 2023. The governor is authorized to draw a warrant for said sum out of any money in the treasury not otherwise appropriated.