



National Alliance on Mental Illness

NAMI New Hampshire

August 6, 2014

Secretary Sylvia Mathews Burwell, US Department of Health and Human Services
Marilyn Tavenner, CMS Administrator
Centers for Medicare and Medicaid Services
7500 Security Boulevard
Mail Stop S2-26-12
Baltimore, Maryland 21244-1850

Dear Secretary Burwell and Ms. Tavenner,

On behalf of NAMI NH, the NH chapter of the National Alliance on Mental Illness, I would like to offer our strong support for the Building Capacity for Transformation Section 1115 Demonstration Waiver the Department of Health and Human Services (DHHS) has drafted to submit to the Centers for Medicare and Medicaid Services (CMS).

Our overarching comments about the plan are that we firmly believe the specific plans laid out in the draft waiver and their whole-person approach and focus on integrating physical health with mental illness/wellness, substance use disorders, and oral health will result in a reduction of inpatient admissions, emergency department visits and other economically and socially costly services. The integrated approach taken in the waiver will focus both on improving the delivery of health care services to individuals as well as make needed improvements and reforms across New Hampshire's health care delivery systems. These improvements will promote recovery for individuals with mental illness and/or substance use disorders.

There is much in this plan to like and without restating the whole plan a few key areas we would like to specifically mention include:

- Implementation of evidenced-based programs contained in NH's "Ten Year Mental Health Plan" as well as the settlement agreement with the US Department of Justice; including expanding Assertive Community Teams, mobile crisis response and crisis/respite beds;
- Services for Serious Emotionally Disturbed children under the System of Care/Fast Forward Program including Wraparound team meeting participation, respite care, flexible spending, mobile crisis response, and wraparound facilitation;
- Identification and focus on workforce development programs particularly those focused on substance abuse treatment disorders and for Emergency Department Personnel;
- Expanding capacity for inpatient treatment of mental illness by local general hospitals;
- Recognition of the data indicating people with severe mental illness die up to 25 years earlier than the general population and that a more integrated approach to care can help decrease this statistic, specifically by encouraging pilot programs for Patient Centered Medical Homes, Health Homes and Telehealth;

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- Expanding and strengthening the Substance Use Disorder provider network as NH begins to offer substance use treatment benefits to Medicaid recipients and specifically considering pilot programs focusing on co-occurring disorders;
- Expanding the In Shape program – to make it available for children and individuals with developmental delays;
- Promoting increased availability for inpatient mental health treatment at regional/local hospitals as well as group homes and other residential programs for people with mental illness;
- With increased needs for mental health and substance use disorders among the elderly population, expansion statewide of the Referral, Education Assistance and Prevention Program;
- Development of a Quality Assurance and Improvement system that focuses on client level outcome tools and measures; and
- NAMI NH also recognizes and supports the importance of tobacco cessation and oral health as key parts of this waiver.

There are a few areas we would like to comment on and/or offer suggestions for consideration for incorporating into the plan:

- One area of concern the proposal does not cover, which has recently come to light, is regarding building capacity for and implementation of substance use disorders in the Institutions for Mental Disorders exclusion rule. The IMD exclusion has the potential to seriously limit the availability of residential substance use treatment programs in the state. It also promotes segregated treatment for mental illness and substance use disorders at a time when there is wide recognition of the numbers of people with co-occurring disorders, and that an integrated treatment approach improves outcomes and effectiveness for those with co-occurring disorders.

NAMI NH commends the NH Department of Health and Human services for crafting an 1115 waiver plan that complements key initiatives underway in New Hampshire including Medicaid Managed Care, the proposed State Innovation Model (SIM), the NH Children's Behavioral Health Plan, Addressing the Critical Mental Health Needs of New Hampshire's Citizens (Ten Year Mental Health Plan), Community Mental Health Agreement, as well as expanded health coverage in the state under the NH Health Protection Program. It is our belief is that if approved, this plan will greatly improve the health and behavioral health service delivery system in New Hampshire.

Please feel free to contact me if you have any questions regarding NAMI NH's comments.

Sincerely,



Kenneth Norton, LICSW
Executive Director