

**NEW HAMPSHIRE
MEDICAL CARE ADVISORY COMMITTEE**

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August 8, 2014

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

Submitted via: Medicaid.gov

**Re: New Hampshire's *Building Capacity for Transformation* Section 1115
Demonstration Waiver Application**

Dear Secretary Burwell and Administrator Tavenner:

Thank you for the opportunity to comment on New Hampshire's Section 1115 Medicaid Demonstration Waiver application, entitled Building Capacity for Transformation.

This letter is being submitted on behalf of New Hampshire's Medicaid Medical Care Advisory Committee (MCAC). Established by federal regulation, the MCAC is an appointed multi-stakeholder group of consumer, provider, and advocate members that meets regularly with NH Department of Health and Human Services (Department) leaders.

Pursuant to federal regulation, the Department's Medicaid Director provides the MCAC with the opportunity to review and provide input into proposed Medicaid policy changes for New Hampshire. This letter reflects our direct input, suggestions, and concerns.

The MCAC strongly supports New Hampshire's proposed Building Capacity for Transformation Waiver Application, and urges your approval. The proposed waiver advances innovative, sensible, and cost-effective approaches to Medicaid reform that would promote vital service delivery to vulnerable populations and make needed improvements across delivery systems in our state.

The proposed waiver plan elements focus on the whole person, address key service and workforce gaps, promote needed care integration / coordination, and realign incentives in ways that improve health outcomes. The plan elements also are expressly designed to result in reduced inpatient hospital admissions, emergency department visits, neonatal intensive care stays, and other costly health services, with associated prevention of human suffering.

The multi-dimensional *Community Reform Pool* components provide timely opportunity for New Hampshire to expand vital capacity for providing services to those with mental health and/or substance use disorder needs and for improving health care delivery and care coordination, especially for individuals with co-occurring disorders.

Support for key components of the *Ten Year Mental Health Plan and Settlement Agreement with the US Department of Justice* will provide people who have severe

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mental illness with robust community alternatives and evidence-based services that reduce or eliminate the need for hospitalization – cost-effective measures that lead to recovery and/or the ability of people with severe mental illness to live successful and fulfilling lives in the community.

Enhancing and sustaining key components of the *FAST Forward program* will help to ensure the availability of the best-practice array of services required for children and youth with serious emotional disturbances to have successful outcomes.

Smart investment in *Behavioral Workforce Development* to address substance use disorder and provide capacity for other behavioral health services is a pivotal and timely health systems and human need in New Hampshire. The proposed grant initiative will promote improved access to and quality of behavioral health services care, while offering incentives for the provider community to create customized training programs that attract and stabilize needed workforce.

Extending the *InSHAPE Health Promotion Program* to new individuals (developmentally disabled persons and children and youth with serious emotional disturbances) via additional providers, and including a tobacco cessation component in the program, offers a dramatically successful, best practice prevention and wellness initiative, already described in mental health circles as life-changing, to a broader population of participants.

Establishing an *Oral Health Pilot Program* for pregnant women and mothers with children up to the age of five is a compelling and cost-effective opportunity for our state. Studies have shown that basic oral health services for pregnant women reduce adverse pregnancy outcomes, including pre-term and low birth-weight babies, while also reducing the transmission of dental disease from mothers to children. The public health benefit to mothers and children, and cost-savings to Medicaid (avoiding the expense not just of dental caries but of neo-natal intensive care for affected children), resulting from this proposed oral health demonstration is groundbreaking.

All that said, we do have two concerns to share relative to this waiver application. First, because of the critical importance of coordinated, patient-centered primary and preventive care in our state, we echo the cautions articulated by the New Hampshire office of Bi-State Primary Care Association about preserving the Federally Qualified Health Center (FQHC) encounter rate in the context of this waiver (while respectfully noting that there is nothing in the pending waiver application that proposes otherwise).

Second, in light of the compelling need for a full range of mental health and substance use disorder services in New Hampshire, we share New Future's and NAMI-NH's expressed concerns about the Institutions for Mental Disorders (IMD) exclusion in federal Medicaid law, and believe that the framework merits thoughtful review by Congress and/or CMS.

Thank you for the opportunity to submit these comments on our State's Building Capacity for Transformation Section 1115 Demonstration Waiver Application. New Hampshire's MCAC is pleased to work with you and with the Department on efforts to ensure its approval and successful implementation.

Sincerely,



Douglas McNutt, Chair 
NH Medical Care Advisory Committee