



Lori A. Shabinette
Commissioner

Henry D. Lipman
Director

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF MEDICAID SERVICES

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February 3, 2021

The Honorable Ken Weyler, Chairman
Fiscal Committee of the General Court
State House
Concord, NH 03301

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
State House
Concord, NH 03301

REQUESTED ACTION

Pursuant to the provisions of RSA 14:30-a, VI, authorize the Department of Health and Human Services, Division of Medicaid Services to accept and expend federal funds in the amount of \$375,000 from the Centers for Medicare and Medicaid Services to fund the Maternal Opioid Misuse Model, effective upon Fiscal Committee and Governor and Council approval through June 30, 2021, and further authorize the funds to be allocated as follows. Grant Funds awarded for periods after SFY 2021 will be included in future operating budgets. 100% Federal Funds.

05-95-47-470010-1371, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF
HHS: OFF. OF MEDICAID & BUS. POLICY, MATERNAL OPIOID MISUSE MODEL

CLASS/OBJECT	CLASS TITLE	Current Modified Budget	Increase (Decrease)	Revised Modified Budget
000-40756	Federal Funds	\$749,238	\$375,000	\$1,124,238
Total Revenue		\$749,238	\$375,000	\$1,124,238
020-500200	Current Expense	\$250	\$120	\$370
037-500173	Technology-Hardware	\$1,316	\$0	\$1,316
038-500175	Technology-Software	\$0	\$0	\$0
039-500188	Telecommunications	\$443	\$28	\$471

05-95-47-470010-1371, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF
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 SFY 2021 Continued

CLASS/OBJECT	CLASS TITLE	Current Modified Budget	Increase (Decrease)	Revised Modified Budget
041-500801	Audit Fund Set Aside	\$749	\$375	\$1,124
05-500117	Temporary Full Time	\$45,981	\$27,778	\$73,759
060-500601	Benefits	\$23,958	\$15,007	\$38,965
070-500704	In State Travel Reimbursement	\$880	\$161	\$1,041
080-500714	Out State Travel Reimbursement	\$1,984	\$0	\$1,984
102-500731	Contracts for Program Services	\$673,677	\$331,531	\$1,005,208
Total Expense		\$749,238	\$375,000	\$1,124,238

EXPLANATION

The Maternal Opioid Misuse (MOM) Model funding from the Centers for Medicare and Medicaid Services provides an opportunity to test whether payments that support evidence-based, coordinated care delivery for pregnant and postpartum women with opioid use disorder and their infants can reduce Medicaid and Children's Health Insurance Program (CHIP) expenditures, and improve the quality of care for this population of Medicaid and CHIP beneficiaries. Department of Health and Human Services, Division of Medicaid Services staff will administer oversight of the grant. The Department of Health and Human Services is collaborating with Elliot Health System as the Prime Sub-Recipient to implement the MOM Model to create a multi-sector intervention and robust care coordination system, to improve health outcomes for the Model's beneficiaries.

Women who use substances during pregnancy are at greater risk of complications, both short term and long term, as are their infants. Utilizing MOM Model funding, the New Hampshire Department of Health and Human Services and Prime Sub-Recipient Elliot Health System will lead efforts to create and pilot an improved and highly coordinated system of care for pregnant women with Opioid Use Disorder to provide a range of prevention and treatment services specific to the needs of women and the health of their babies. These efforts will leverage New Hampshire's Integrated Delivery Network (IDN), which brings together providers across the care delivery system to improve integration of physical and behavioral health care, and will better coordinate other initiatives (e.g., Plan of Safe Care models) to accomplish its goals.

New Hampshire's MOM Model implementation will create coordinated interventions across key hospital, primary care systems, and supportive services to fill gaps in care and to effect achievable outcomes and cost savings to the Medicaid program by reducing health impacts to the mother and child resulting from substance exposure. The MOM Model service area is the Greater Manchester Region. This region is uniquely suited to implement the MOM Model due to its experience at the opioid epidemic epi-center and its long and successful history of provider and community collaboration. The State is considering several models, and will use the planning period to finalize our approach. All models are designed to improve access and care coordination for pregnant and postpartum women with Opioid Use Disorder in the Greater Manchester Region, and will be considered for replication across the state.

Funding received through the MOM Model will complement existing efforts to prevent and address Opioid Use Disorder for pregnant and postpartum women and their infants. The goals for the MOM Model are three fold:

1. Support pregnant and postpartum Medicaid beneficiaries seeking Opioid Use Disorder treatment by leveraging existing integrated networks of care to:
 - a. Implement data sharing across organizations to increase care coordination; and
 - b. Improve engagement of pregnant women with Opioid Use Disorder in prenatal care, postpartum care, and treatment for OUD through multiple support mechanisms.
2. Coordinate interventions across New Hampshire's Department of Health and Human Services, Elliot Health System, and other partners to improve health outcomes for the mom and baby and decrease costs to Medicaid.
3. Test interventions and best practices to determine which, if replicated across New Hampshire, would best address the needs of this vulnerable population.

Funds are budgeted as follows:

Class 020- Current Expenses- will be used for general office supplies.

Class 037- Technology- Hardware- To purchase a laptop computer.

Class 038- Technology- Software- To purchase computer software.

Class 039- Telecommunications- will be used for cell phone costs.

Class 041- Audit Fund Set Aside.

Class 059- Temporary Full Time- To fully fund the full-time temporary Administrator I, LG 27, Position #9T2994 that was created when the grant was originally accepted through June 30, 2021.

Class 060- Benefits- To fully fund benefit expenses for the position just described through June 30, 2021.

Class 070- In State Travel Reimbursement- Local travel to attend meetings and project activities.

Class 080- Out of State Travel Reimbursement- Out of state travel for meetings.

Class 102- Contracts for Program Services- Contract payments to providers.

Geographic area served: Greater Manchester area

Source of Funds: These funds are 100% Federal Funds from the United States Department of Health and Human Services Centers for Medicare and Medicaid Services, Maternal Opioid Misuse Model, Catalog of Federal Domestic Assistance (CFDA) #93.687.

In the event that these Federal Funds become no longer available, General Funds will not be requested to support his program.

The Honorable Ken Weyler, Chairman
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February 3, 2021
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Respectfully submitted,



For
Lori A. Shibinette
Commissioner

*The Department of Health and Human Services' Mission is to join communities and families
in providing opportunities for citizens to achieve health and independence.*



Recipient Information	
1. Recipient Name	New Hampshire Dept of Health and Human Services 129 Pleasant St Public Health Services Concord, NH 03301-3852 [NO DATA]
2. Congressional District of Recipient	02
3. Payment System Identifier (ID)	1026000618A1
4. Employer Identification Number (EIN)	026000618
5. Data Universal Numbering System (DUNS)	011040545
6. Recipient's Unique Entity Identifier	
7. Project Director or Principal Investigator	Alyssa Cohen Business Administrator IV alyssa.cohen@dhhs.nh.gov 603-271-9691
8. Authorized Official	Alyssa Cohen Business Administrator IV alyssa.cohen@dhhs.nh.gov 603-271-9691
Federal Agency Information Office of Acquisitions and Grants Management	
9. Awarding Agency Contact Information	Mrs. Monica Anderson Grants Management Specialist Monica.Anderson@cms.hhs.gov 410-786-2988
10. Program Official Contact Information	Ms. Karin Bleeg Health Insurance Specialist karin.bleeg@cms.hhs.gov (410) 786-5937

Federal Award Information	
11. Award Number	2A2CMS331772-02-00
12. Unique Federal Award Identification Number (FAIN)	2A2CMS331772
13. Statutory Authority	Section 1115A of the Social Security Act (added by section 3021 of the Patient Protection and Affordable Care Act)
14. Federal Award Project Title	State of New Hampshire Maternal Opioid Misuse Model
15. Assistance Listing Number	93.687
16. Assistance Listing Program Title	Maternal Opioid Misuse Model
17. Award Action Type	Non-Competing Continuation
18. Is the Award R&D?	No

Summary Federal Award Financial Information	
19. Budget Period Start Date	01/01/2021 - End Date 12/31/2021
20. Total Amount of Federal Funds Obligated by this Action	\$750,000.00
20a. Direct Cost Amount	\$750,000.00
20b. Indirect Cost Amount	\$0.00
21. Authorized Carryover	\$0.00
22. Offset	\$0.00
23. Total Amount of Federal Funds Obligated this budget period	\$0.00
24. Total Approved Cost Sharing or Matching, where applicable	\$0.00
25. Total Federal and Non-Federal Approved this Budget Period	\$750,000.00
26. Project Period Start Date	01/01/2020 - End Date 12/31/2024
27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period	\$1,500,000.00

28. Authorized Treatment of Program Income	ADDITIONAL COSTS
29. Grants Management Officer - Signature	Mr. Gabriel Nah

30. Remarks

See Remarks (continuation)



Recipient Information
Recipient Name New Hampshire Dept of Health and Human Services 129 Pleasant St Public Health Services Concord, NH 03301-3852 [NO DATA]
Congressional District of Recipient 02
Payment Account Number and Type 1026000618A1
Employer Identification Number (EIN) Data 026000618
Universal Numbering System (DUNS) 011040545
Recipient's Unique Entity Identifier Not Available

31. Assistance Type Cooperative Agreement
32. Type of Award Other

33. Approved Budget (Excludes Direct Assistance)	
I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$55,556.00
b. Fringe Benefits	\$30,014.00
c. Total Personnel Costs	\$85,570.00
d. Equipment	\$0.00
e. Supplies	\$295.00
f. Travel	\$324.00
g. Construction	\$0.00
h. Other	\$750.00
i. Contractual	\$663,061.00
j. TOTAL DIRECT COSTS	\$750,000.00
k. INDIRECT COSTS	\$0.00
l. TOTAL APPROVED BUDGET	\$750,000.00
m. Federal Share	\$750,000.00
n. Non-Federal Share	\$0.00

34. Accounting Classification Codes					
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
1-5991544	2A2331772A	2A2	4158	\$750,000.00	75-X-0522