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**STATE OF NEW HAMPSHIRE**  
**DEPARTMENT OF HEALTH AND HUMAN SERVICES**  
***DIVISION OF FINANCE AND PROCUREMENT***

Lori A. Weaver  
Interim Commissioner

Nathan D. White  
Chief Financial Officer

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January 23, 2023

The Honorable Ken Weyler, Chairman  
Fiscal Committee of the General Court and

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

**REQUESTED ACTION**

Pursuant to RSA 14:30-a, VI, authorize the Department of Health and Human Services to accept and expend additional federal revenue in the amount of \$51,508,288 effective upon approval by the Fiscal Committee and Governor and Council through June 30, 2023, and further authorize the allocation of these funds in the accounts below. 100% Federal Funds.

**05-95-47-470010-7051, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF HHS  
 DIVISION OF MEDICAID SERVICES, OFC OF MEDICAID SERVICES, CHILD HEALTH INSURANCE  
 PROGRAM**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-403978-16	Federal Funds	\$66,506,549	\$3,136,486	\$69,643,035
007-407145-44	Agency Income Drug Rebates	\$1,111,072		\$1,111,072
	General Fund	\$33,055,076		\$33,055,076
<b>Total Revenue</b>		<b>\$100,672,697</b>	<b>\$3,136,486</b>	<b>\$103,809,183</b>
041-500801	Audit Set Aside	\$93,198	\$3,133	\$96,331
101-500729	Medical Payments to Providers	\$100,579,499	\$3,133,353	\$103,712,852
<b>Total Expense</b>		<b>\$100,672,697</b>	<b>\$3,136,486</b>	<b>\$103,809,183</b>

**05-95-47-470010-7207, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF HHS  
 DIVISION OF MEDICAID SERVICES, OFC OF MEDICAID SERVICES, MEDICAID TO SCHOOLS PROGRAM**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-403978-16	Federal Funds	\$17,230,027	\$480,805	\$17,710,832
	General Fund	\$0		\$0
<b>Total Revenue</b>		<b>\$17,230,027</b>	<b>\$480,805</b>	<b>\$17,710,832</b>
041-500801	Audit Set Aside	\$32,198	\$480	\$32,678
511-500351	Medical Payments to Providers	\$17,197,829	\$480,325	\$17,678,154
<b>Total Expense</b>		<b>\$17,230,027</b>	<b>\$480,805</b>	<b>\$17,710,832</b>

**05-95-47-470010-7937, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF HHS  
 DIVISION OF MEDICAID SERVICES: OFC OF MEDICAID SERVICES, MEDICAID ADMINISTRATION**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-403978-16	Federal Funds	\$44,714,978	\$1,562,393	\$46,277,371
	General Fund	\$8,504,674		\$8,504,674
<b>Total Revenue</b>		<b>\$53,219,652</b>	<b>\$1,562,393</b>	<b>\$54,782,045</b>
010-500100	Personal Services - Perm Classified	\$2,031,346	\$0	\$2,031,346
012-500128	Personal Services - Unclassified	\$610,561	\$0	\$610,561
018-500106	Overtime	\$7,500	\$0	\$7,500
020-500200	Current Expenses	\$70,669	\$0	\$70,669
026-500251	Organizational Dues	\$13,350	\$0	\$13,350
030-500300	Equipment New/Replacement	\$4,000	\$0	\$4,000
039-500188	Telecommunications	\$16,850	\$0	\$16,850
040-500800	Indirect Costs	\$920,882	\$0	\$920,882
041-500801	Audit Set Aside	\$39,619	\$1,561	\$41,180
042-500620	Additional Fringe benefits	\$110,378	\$0	\$110,378
049-500294	Transfer to other State Agencies	\$33,002,206	\$1,560,832	\$34,563,038
050-500109	Personal Services Temp/Appoin	\$160,319	\$0	\$160,319
059-500117	Temp Full time	\$136,544	\$0	\$136,544
060-500602	Health Insurance Benefit - Perm	\$1,311,929	\$0	\$1,311,929
066-500543	Employee Training	\$1,000	\$0	\$1,000
070-500704	In-State Travel	\$1,500	\$0	\$1,500
101-500729	Medical Payments to Providers	\$364,616	\$0	\$364,616
102-500731	Contracts for Program Services	\$14,416,383	\$0	\$14,416,383
<b>Total Expense</b>		<b>\$53,219,652</b>	<b>\$1,562,393</b>	<b>\$54,782,045</b>

**05-95-47-470010-7948, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT OF HHS  
 HHS: DIVISION OF MEDICAID SERVICES, OFC OF MEDICAID SERVICES, MEDICAID CARE MANAGEMENT**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-403978-16	Federal Funds	\$443,772,453	\$22,814,805	\$466,587,258
001-403187-16	Refugee Medical	(\$146,439)		(\$146,439)
005-402201-04	Agency Income: Medicaid Enhancement - Local	\$131,587,419		\$131,587,419
007-407145-44	Agency Income Drug Rebates	\$30,600,000		\$30,600,000
009-406848-44	Agency Income MEAD	\$168,378		\$168,378
009-405615-12	Agency - MCO Liquid Damages	\$1,478,958		\$1,478,958
	General Fund	\$239,904,174		\$239,904,174
<b>Total Revenue</b>		<b>\$847,364,943</b>	<b>\$22,814,805</b>	<b>\$870,179,748</b>
041-500801	Audit Set Aside	\$438,070	\$22,791	\$460,861
101-500729	Medical Payments to Providers	\$788,467,869	\$21,135,018	\$809,602,887
535-500376	Out of Home Placements	\$36,973,410	\$1,092,351	\$38,065,761
563-500915	Community Based Services	\$21,485,594	\$564,645	\$22,050,239
<b>Total Expense</b>		<b>\$847,364,943</b>	<b>\$22,814,805</b>	<b>\$870,179,748</b>

**05-95-48-482010-2152, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS: ELDERLY & ADULT SVCS DIV, WAIVER AND NURSING FACILITIES, WAIVER/NF PMTS-COUNTY PARTIC**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-404362-16	Federal Funds	\$174,421,059	\$7,854,397	\$182,275,456
005-403011-18	Private Local Funds	\$126,176,684		\$126,176,684
	General Fund	\$37,013,693		\$37,013,693
<b>Total Revenue</b>		<b>\$337,611,436</b>	<b>\$7,854,397</b>	<b>\$345,465,833</b>
041-500801	Audit Set Aside	\$175,603	\$7,847	\$183,450
502-500891	Payments to Providers	\$3,011,457		\$3,011,457
504-500893	Nursing Home Payments	\$244,092,475	\$5,621,916	\$249,714,391
505-500894	Mid Level Care Expenses	\$14,421,591	\$357,412	\$14,779,003
506-500895	Home Support Waiver Services	\$67,001,648	\$1,669,792	\$68,671,440
529-500370	Home Health Care Waiver Services	\$8,908,662	\$197,430	\$9,106,092
<b>Total Expense</b>		<b>\$337,611,436</b>	<b>\$7,854,397</b>	<b>\$345,465,833</b>

**05-95-48-482010-2154, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS: ELDERLY & ADULT SVCS DIV, WAIVER AND NURSING FACILITIES, NURSING SERVICES**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-404362-16	Federal Funds	\$5,251,124	\$164,663	\$5,415,787
	General Fund	\$4,966,861	\$0	\$4,966,861
<b>Total Revenue</b>		<b>\$10,217,985</b>	<b>\$164,663</b>	<b>\$10,382,648</b>
041-500801	Audit Set Aside	\$12,637	\$164	\$12,801
101-500729	Medical Payments to Providers	\$4,648,007	\$62,501	\$4,710,508
504-500893	Nursing Home Payments	\$1		\$1
509-500897	Home Health Care Waiver Services	\$5,557,340	\$101,998	\$5,659,338
<b>Total Expense</b>		<b>\$10,217,985</b>	<b>\$164,663</b>	<b>\$10,382,648</b>

**05-95-48-482010-2157, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS: ELDERLY & ADULT SVCS DIV, WAIVER AND NURSING FACILITIES, MQIP PAYMENTS**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-404362-16	Federal Funds	\$55,907,739	\$1,947,914	\$57,855,653
007-402241-30	Agency Income	\$51,936,070		\$51,936,070
<b>Total Revenue</b>		<b>\$107,843,809</b>	<b>\$1,947,914</b>	<b>\$109,791,723</b>
041-500801	Audit Set Aside	\$64,414	\$1,946	\$66,360
516-500358	Medicaid Quality incentive	\$107,779,395	\$1,945,968	\$109,725,363
<b>Total Expense</b>		<b>\$107,843,809</b>	<b>\$1,947,914</b>	<b>\$109,791,723</b>

**05-95-92-920010-7155, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS:  
 BEHAVIORAL HEALTH DIV, DIV BEHAVIORAL HLTH OPERATIONS, MEDICAID PAYMENTS NHH & GH**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-404663-16	Federal Funds	\$8,876,657	\$254,969	\$9,131,626
	General Fund	\$0		\$0
<b>Total Revenue</b>		<b>\$8,876,657</b>	<b>\$254,969</b>	<b>\$9,131,626</b>
041-500801	Audit Set Aside	\$8,868	\$255	\$9,123
510-500898	Medicaid to Institutions	\$8,867,789	\$254,714	\$9,122,503
<b>Total Expense</b>		<b>\$8,876,657</b>	<b>\$254,969</b>	<b>\$9,131,626</b>

**05-95-93-930010-7014, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS:  
 DEVELOPMENTAL SVCS DIV, DIV OF DEVELOPMENTAL SVCS, EARLY INTERVENTION**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-406738-16	Federal Funds	\$5,738,385	\$158,253	\$5,896,638
	General Fund	\$8,310,716	\$0	\$8,310,716
<b>Total Revenue</b>		<b>\$14,049,101</b>	<b>\$158,253</b>	<b>\$14,207,354</b>
041-500801	Audit Set Aside	\$4,229	\$158	\$4,387
102-500731	Contracts for Program Services	\$2,896,998		\$2,896,998
502-500891	Payments to Providers	\$11,147,874	\$158,095	\$11,305,969
<b>Total Expense</b>		<b>\$14,049,101</b>	<b>\$158,253</b>	<b>\$14,207,354</b>

**05-95-93-930010-7016, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS:  
 DEVELOPMENTAL SVCS DIV, DIV OF DEVELOPMENTAL SVCS, ACQUIRED BRAIN DISORDER SERVICES**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-406739-16	Federal Funds	\$15,878,147	\$865,840	\$16,743,987
	General Fund	\$16,544,310	\$0	\$16,544,310
<b>Total Revenue</b>		<b>\$32,422,457</b>	<b>\$865,840</b>	<b>\$33,288,297</b>
041-500801	Audit Set Aside	\$17,151	\$865	\$18,016
102-500731	Contracts for Program Services	\$1,751,909		\$1,751,909
502-500891	Payments to Providers	\$30,653,397	\$864,975	\$31,518,372
<b>Total Expense</b>		<b>\$32,422,457</b>	<b>\$865,840</b>	<b>\$33,288,297</b>

**05-95-93-930010-7100, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT,  
 HHS: DEVELOPMENTAL SVCS DIV, DIV OF DEVELOPMENTAL SVCS, DEVELOPMENTAL SERVICES**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-403793-16	Federal Funds	\$215,068,373	\$12,065,857	\$227,134,230
	General Fund	\$218,687,782	\$0	\$218,687,782
<b>Total Revenue</b>		<b>\$433,756,155</b>	<b>\$12,065,857</b>	<b>\$445,822,012</b>
041-500801	Audit Set Aside	\$218,440	\$12,054	\$230,494
102-500731	Contracts for Program Services	\$5,444,187		\$5,444,187
502-500891	Payments to Providers	\$428,093,528	\$12,053,803	\$440,147,331
<b>Total Expense</b>		<b>\$433,756,155</b>	<b>\$12,065,857</b>	<b>\$445,822,012</b>

**05-95-93-930010-7110, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT,  
 HHS: DEVELOPMENTAL SVCS DIV, DIV OF DEVELOPMENTAL SVCS, CHILDREN IHS WAIVER**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-404669-16	Federal Funds	\$8,216,828	\$201,906	\$8,418,734
	General Fund	\$7,679,752	\$0	\$7,679,752
<b>Total Revenue</b>		<b>\$15,896,580</b>	<b>\$201,906</b>	<b>\$16,098,486</b>
041-500801	Audit Set Aside	\$7,921	\$202	\$8,123
502-500891	Payments to Providers	\$15,888,659	\$201,704	\$16,090,363
<b>Total Expense</b>		<b>\$15,896,580</b>	<b>\$201,906</b>	<b>\$16,098,486</b>

**EXPLANATION**

Section 6008(a) of the Families First Coronavirus Response Act (FFCRA) provides a temporary 6.2 percentage point increase to the Federal Medical Assistance Percentage (FMAP) under section 1905(b) of the Social Security Act effective beginning January 1, 2020. If this renewal remains in place for the full 90 day period, the PHE would expire on April 11, 2023.

The Public Health Emergency (PHE) was renewed for another 90 days on January 11, 2023. On December 23, 2022, the Consolidated Appropriations Act, omnibus spending bill was signed into law. The law among other matters decouples the continuous enrollment requirement (CER) from the PHE and terminates this provision as of March 31, 2023. Beginning April 1, 2023 States can resume Medicaid disenrollment. States would be eligible for phase-down of the enhanced FMAP (6.2 percentage points through March 2023; 5 percentage points through June 2023; 2.5 percentage points through September 2023; and 1.5 percentage points through December 2023) if they comply with certain rules. States cannot restrict eligibility standards, methodologies, and procedures and states cannot increase premiums as required in FFCRA. Further, states must also comply with federal rules about conducting renewals. Lastly, states are required to maintain up to date contact information, and attempt to contact enrollees prior to disenrollment.

The Department is requesting to accept and expend the federal matching dollars to support anticipated costs of the increase in Medicaid caseload resulting from the COVID-19 pandemic. NH Medicaid caseload, including both Standard Medicaid and Granite Advantage Healthcare Program has increased by 71,034 or 40% for the period of March 16, 2020 through January 2, 2023. The Standard Medicaid

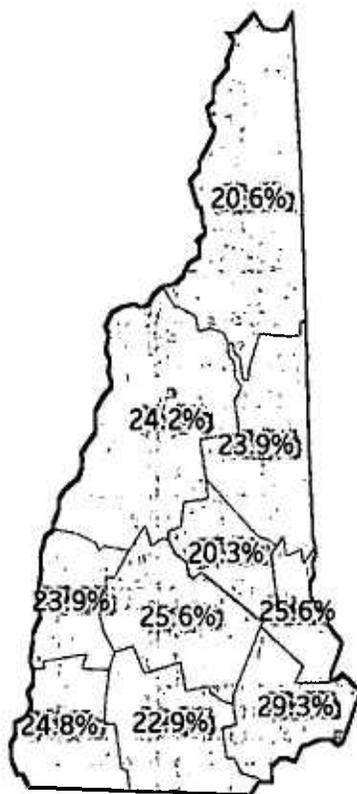
program, for which this funding is requested, has increased by 27,665 or 21.9% for the period March 16, 2020 through January 2, 2023.

Medicaid caseloads have been directly impacted as a result of the COVID-19 pandemic and the continuous coverage requirement of the FFCRA, which requires states, as a condition of receiving an enhanced federal match for Medicaid (except for adult expansion) to suspend termination of eligibility for Medicaid except for members who die, move out of state, or request ending Medicaid coverage. The costs driven by the increase in caseloads have been funded by the increased 6.2% federal match.

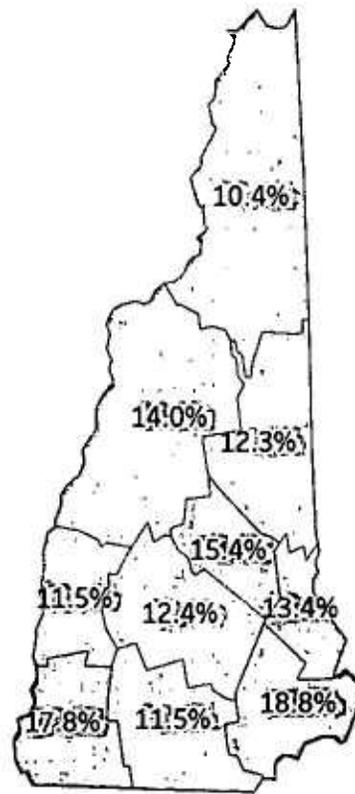
The most recent guidance from the Centers for Medicare & Medicaid Services (CMS) gives states up to 12 months to complete income eligibility redeterminations for its Medicaid members. The Department is diligently developing an unwind plan with the goal of ensuring that there are no gaps in medical coverage, whether that coverage is continued Medicaid or other sources of private or Marketplace coverage, and which is consistent with the budget in managing coverage transfer or disenrollment within a three-to-four-month timeframe.

The map below shows the increase during the pandemic and is evident across all counties in the state.

Standard - Income Based



Standard - Disabled/Elderly/Foster Care



The Honorable Ken Weyler, Chairman  
His Excellency, Governor Christopher T. Sununu  
January 23, 2023  
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Pursuant to Chapter 91, Section 35 (Laws of 2021): "Department of Health and Human Services; Change in Federal Match Revenue. During the biennium ending June 30, 2023 any item submitted to the fiscal committee of the general court which increases a draw on federal funds, as a result of miscalculation of or change in the state's share of a federal match program in excess of \$100,000 in an accounting unit, shall include an explanation stating if any general funds have been supplanted, and if so, for what purpose those supplanted general funds will be used, and the amount of supplanted general funds anticipated to lapse." For all of the accounting units included in this request, the general funds being supplanted are going to be used to support the programs due to the increased enrollment and the continuation of the public health emergency for which the federal funds were not previously budgeted. DHHS does not anticipate any of these funds to lapse.

Respectfully Submitted,



Lori A. Weaver  
Interim Commissioner