


Questions and Answers from NHCarePath Partners updated 12.1.16

	Question	Answer
1	Can NHCarePath Partners get an updated Comparison of NH Health Protection Program (NHHPP)?	Yes. There is an updated version being sent out as part of the packet and communication to training participants and to the NHCarePath Partner listserv. In addition DHHS will be posting it on the NHCarePath Website under the Partner Resources: Tools section.
2	Can staff get an example of a re-determination letter for both Managed Care Organization (MCO) and Premium Assistance Program (PAP)?	There are many different redetermination (rede) types i.e., face-to-face, mail-in, paper, electronic, passive, non-passive as well as category types i.e., Aid to the Permanently and Totally Disabled (APTD), Old Age Assistance (OAA), NHHPP, Medicaid for Pregnant Women (MCPW), Children’s Medicaid (CM), Children with Severe Disabilities (HC-CSD), expanded Medicaid (MA), Parent Caretaker (to many to list all). *The language in the rede letters are changing. New letters should be seen in the new year.
3	Can a redetermination be completed on NHEASY?	Redeterminations can be done through NH EASY if the individual 1) has an account and 2) if they are scheduled for an online rede. The review type is based on household circumstance and the category of medical assistance received. Some medical cases may have their eligibility automatically renewed, be required to participate in a face-to-face or be required to complete an on-line or mail-in redetermination.
4	Why Re-Calculate APTD Cash for a client who works who receives SSI?	Per federal Policy income is always re-verified at redetermination
5	Can we have something to give parents that have the contact information to reach the Premium Assistance Program? Who to Contact, Who can talk them through the process? Where to find information and application?	Contact Client Services Call Center 1-800-ask-DHHS.

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6	Please provide clarification on how a family could continue on NHHPP when on adult waived services, under what circumstances would this be allowed?	Currently NHHPP is for individuals who are not eligible for standard Medicaid. DHHS is currently in the process of reauthorizing waivers to accept NHHPP. DHHS will communicate with partners when this is approved by Centers for Medicare and Medicaid (CMS).
7	Why was NHHPP not listed as a “Group Exempt for Care Management” on that slide for exemptions?	Individuals that are not NHHPP choose a Qualified Health Plan (QHP). Individuals that are NHHPP-M choose an MCO and Alternative Benefit Plan or Standard Medicaid.
8	Is there a resource that can be provided and made available to partners on the Standard Medicaid Plan vs. the Alternative Benefit Plan?	Medically Frail NHHPP recipients who have special health care needs may indicate on their application, or when their medical condition changes, that they are medically frail. Once deemed medically frail, the member will be moved to one of Medicaid’s Managed Care Organizations (MCO) on the first of the following month. Medically frail members may choose to receive services under the Alternative Benefit Plan (ABP) or under the Standard Medicaid plan  .
9	When should the Developmental Disability/Acquired Brain Disorder (DD/ABD) Waiver screen be checked in New Heights?	When the individual applies for APTD or Aid to the Needy Blind (ANB) adult Medicaid
10	Can a resource be created that describes the steps and process for CM to APTD?	The client should apply before for the child turns 19 for APTD, if APTD cash is needed they can apply as early as 18.
11	Can anything be done to expedite the Choices for Independence (CFI) Waiver? How long does it take from the time they apply to getting services?	Length of application process includes several factors. The Consumer Guidebook for CFI as well as utilizing the Eligibility Coordinator (EC). Both of these resources can assist to ensure a smooth application process.
12	How do we get connected to communication/notification during the application process?	The Customer Service Center can provide you with information; also having a NH Easy account will allow you to view the status of the case.

	Question	Answer
13	<p>What is the application process for HCCSD? When does it end?</p>	<p>The client would need to apply for this by filling out an application (DCS suggests if through NH Easy writing in comments, applying for HC-CSD, if doing a paper application then the client would want to add a comment to the top of the application)</p> <ul style="list-style-type: none"> • They would be scheduled for an appointment, • Since this is HC-CSD for a child we do not need any of the parents information (resources or income of the parents), however what we will need is: <ul style="list-style-type: none"> ○ Something to prove address for the child (most of the time we use a parents license for proof of address) ○ The entire income of the child who is applying's income (including trust income, SSI, child support etc.) ○ Proof of any resources in the child's name (Trust, Stocks, Bonds, CDs, bank accounts etc.) ○ Child's information (Name, Date of birth and SS number if the child's birth certificate is available I would suggest bringing this with them to the appointment) • Forms that will be needed to be filled out (easier if done before the interview) <ul style="list-style-type: none"> ○ 968 (attached to this email) Children with Severe Disabilities Family Information Report ○ 900's medical release forms for each of the Dr., specialist, therapist and schools listed on the 968 ○ Most current IEP or 504 plans should be provided also.

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		<ul style="list-style-type: none"> • Once the interview is completed, and the family service specialist determine that the child meets the financial requirements for HC-CSD they will send the packet (968, 900's and IEP or 504 plan) to Disability Determination Unit (DDU) who will then make the decision based on whether the child meets the categorical requirements (meets the disability criteria) for HC-CSD. • Once a decision is determined the client will be sent a Notice of Decision (NOD). • HC-CSD if redeterminations are completed and changes are acted on, will end when the child turns 19.
14	When does children's Medicaid end and adult Medicaid begin?	<p>CM is up to the age of 19; Adult Medicaid can actually start at 18 for APTD MA, and age 19 for NHHPP.</p> <p>Children's Medicaid CM or Expanded Children's Medicaid ends automatically at the age of 19. If they are income or categorically eligible for another Medicaid program such as (NHHPP) and do not apply to be open for APTD and ANB MA the day of their 20th birthday, it will automatically switch over to this program.</p> <p>While they are pending APTD or ANB their children's Medicaid will remain open.</p>
15	Is there a checklist or guide for APTD in combination with DD/ABD Waiver?	<p>See Choices for Independence Consumer Booklet</p> <p>http://www.nhcarepath.dhhs.nh.gov/partner-resources/consumer-booklets.htm</p>
16	Where can we get a High-level overview of Food Stamps (FS)?	<p>Contact Karen Chartier, Training Administrator if you would like to schedule training or visit the DHHS website or NH EASY. Karen.chartier@dhhs.nh.gov</p>
17	Is there a tool that covers intersect across waivers?	<p>Yes, see updated Medicaid Long Term Services and Supports (LTSS) Waiver Compare Document on NHCarePath Website or connect with your Eligibility Coordinator if you have questions.</p>

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	Question	Answer
18	<p>Is there Medicaid for Employed Adults with Disabilities (MEAD) beyond the age 64 or at the age of 65?</p> <p>What if someone is on MEAD and they stop working and will be going back to work?</p>	<p>MEAD is up to the age 65, once a client turns 65 they will move over to OAA MA.</p> <p>If a MEAD recipient is involuntarily terminated or voluntarily quits with good cause and plans to return to work, MEAD will continue for 6 months beginning the day the individual becomes unemployed.</p>
19	<p>When should youth to adult apply for APTD?</p>	<p>If a child is open for HC-CSD I would suggest having them apply once they turn 18. Since we heard a lot of individuals during the open forum express concern that NHHPP is opening while pending for APTD and if APTD is applied for before the age of 19 they will continue with their waived services under HC-CSD without NHHPP opening.</p> <p>For individuals who will open NHHPP (19 or older) while pending for APTD You should make sure the client claims that they are medically frail and chooses the Standard Medicaid over Alternative Benefit plan.</p>
20	<p>What hospitals are trained on Presumptive Eligibility?</p>	<p>Most hospitals across the State are trained on PE. However, if there is staff turnover then the hospital needs to reach out to Karen Chartier to certify the new individual for PE.</p>
21	<p>What tools are available to preparing for an interview?</p>	<p>See Choices for Independence Consumer Booklet</p> <p>http://www.nhcarepath.dhhs.nh.gov/partner-resources/consumer-booklets.htm</p>
22	<p>Is there a cost of care for Children?</p>	<p>No</p>
23	<p>For youth to adult transition, when is a 5 year resources look back for Medicaid necessary? How is a special needs trust handled by DCS?</p>	<p>Client Services will determine if there is a need but most often it is when there is a special needs trust.</p> <p>A fact sheet on resource look back is being created by client services. When it is complete this will be added to the Q&A. (Targeted for December 2016)</p>

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24	<p>Do Non-Citizens Qualify to apply for Medicaid?</p>	<p>Qualified aliens may be eligible for benefits on either an unrestricted or time-limited basis, depending on type of qualified alien status or date of entry into the U.S.</p> <p>The following categories of qualified aliens are eligible without restriction, if all other eligibility criteria are met:</p> <ul style="list-style-type: none"> • Noncitizens who meet the military service criteria in Section 305.07; • Refugees, from date of entry into the U.S.; • Asylees, from date of INS action to grant asylum; • Cuban/Haitian Immigrants from date of entry into the U.S. with such status; • Amerasian Immigrants; and • Noncitizens whose deportation is being withheld, from the date of INS action to withhold deportation. <p>Exception: Certain American Indians are eligible for financial and/or medical assistance without restriction regardless of whether they are qualified aliens. See Section 305.09, <i>Eligibility for Certain Qualified Aliens</i></p> <p>Non-Citizens who are not Qualified Alien’s may be eligible for Emergency Medical.</p>
25	<p>Does ANB count the parent’s income? What is the Law?</p>	<p>A portion of the parent’s income and resources count for ANB cash for a child but not ANB Medical for a child. 615.01 SR 16-01, Deem income and resources from parent(s) to an Aid to the Needy Blind (ANB) applicant or recipient during the ANB cash eligibility and benefit allotment determination process, when the ANB applicant or recipient is:</p> <ul style="list-style-type: none"> • Under the age of 18; and • Living with parent or parents. <p>ANB parental deeming does not apply in the following instances:</p> <ul style="list-style-type: none"> • When determining eligibility for ANB medical assistance; or • If the parents identified for deeming in the ANB cash case are already receiving any category of Financial Assistance to Needy Families (FANF) or State Supplement

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	Question	Answer
		Program (SSP) cash assistance.
26	Can you be on a Waiver if covered in a Market Place insurance plan?	No, not at this time.
27	When is open enrollment for MCM?	Nov 1 st 2016 open enrollment begins. Individuals that have an MCO have until Dec 30 th 2016
28	What makes a youth to adult transitions APTD approval quicker?	For a child receiving HC-CSD, Transitioning to APTD adult Medicaid, it is most helpful to have the most recent IEP, and any IQ testing.
29	Is sending a trust to the FSS a good idea?	Yes. The Client Services staff needs to scan and complete a trust checklist before forwarding to the state office for review.

July 2016 Questions and Answers from NHCarePath Regional Partners 7.14.16

	Question	Answer
1	Can DCS provide Area Agencies with some customized training related to the programs, services, and processes that intersect between the two?	Yes. DHHS is currently soliciting feedback and input on this. Contact Wendi: wendi.aultman@dhhs.nh.gov if you have thoughts. DHHS is looking to have 1 day in September for this training. We will hold it twice, one in the AM and one in the PM so the attendance can be better and more flexible. It will be in Concord. Stay tuned for more information.
2	For Area Agency training presented by DCS, will the number of attendees from Area Agency's be limited? If so, to how many from each agency?	We anticipate that we would want to hold this in brown auditorium so the limit would be 100 -120 (comfortably). We can determine audience for the training as well. The thought would be Intake staff and case management/coordination staff.
3	Can CMHCs and AAs order scanning envelopes from Drew Craver (similar to requesting	Yes , he prefers to receive an email. You can by emailing DHHS Logistics. Contact Drew Craver. Drew's email is drew.craver@dhhs.state.nh.us . Provide Logistics with your name

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	consumer booklets)?	<p>what you are looking to order, the amount you need, and where and who it should be sent to. The order form will accompany this Q&A and is your guide to ordering a supply for your NHCarePath Regional Partner needs.</p> <p>NOTE: If you are sending items to the Central Scanning Unit, EVERY page must be clearly identified as to who it belongs to.</p>
4	Are copies of redetermination forms available somewhere	Yes, through Drew.
5	What are some real improvements/gains as a result of the enhancements to NHEASY and New Heights? Will this really cut down on wait time?	<p>This initiative is very important to DHHS. At the end June DCS completed provider training too many agency providers who will be doing assessments through NH Easy. There will be a few more held in July to pick up on some that didn't participate. We will be able to address this question with real data at the upcoming statewide meeting.</p> <p>We hope there will be evidence of reduced wait time and steps as a result of this role out. The MEA, Change of Status, corresponding paperwork and communication for LTC Medicaid (CFI/NF) will be "on-line", producing less manual steps and less paper.</p>
6	Can the group have a directory of the DCS Supervisors statewide?	Yes. This was provided a few weeks ago. DHHS will send again as a companion to this Q&A.
7	What is the training and orientation needed to raise the comfort level of DSC staff that has DD/ABD in their caseload?	DCS will be discussing this question with supervisors in an upcoming meeting so that they can begin to develop next steps. Thank you for asking this question.
8	How can we streamline the processes that are in place for those ABD/DD applicants who need a look back prior to being approved for funding for Waiver Services?	The DCS staff will include the current process in preparation of the AA customized training. DCS has also committed to following up with BDS staff who oversee a part of this process to insure they are doing all the steps needed for these cases.

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9	ServiceLink App for mobile devices: Where does the information on the app come from—is it 211?	<p>DHHS leases an Information and Referral System called Refer7. ServiceLink is required to use this system for tracking programmatic activity. In addition to contact activity the system has a public searchable database of Community Based LTSS and other human services and supports for public and private pay. The App is a new feature which allows information from our database to be made available and searchable.</p> <p>DHHS contracts with 211NH to be the Systems Administrator of the Refer7 system and oversee the information that is part of the searchable database.</p>
10	Are some of Estudio functions are being converted to NH Easy? What is happening and what is the status?	Uploading MEAs, supporting documents, Change of status forms are all being converted to web-based processes that feed directly into the New Heights system. NHEASY will be the platform for providers to assess, correspond, case manage, etc.
11	What are some strategies that can be put in place and how can we have a better understanding of the process and impact of applicants who are auto enrolled for NHHPP, apply for APTD which needed for Waiver services.	This subject will be address at the customized training in September.
12	There is a delay in eligibility for MH services under NHHPP Medically Frail option. Depending on day that person enrolls. There is a month's delay (sometimes 6 weeks) where CMHC provides services but doesn't receive reimbursement because insurance hasn't started. Is there some kind of gap coverage or other way that CMHC can be reimbursed for	Depending on the date their claim for medically frail in received and processes their status from NHHPP to MCM will be different. If you call the 888-ASKDHHS number you can claim medically frail while on the phone. If the change is requested by paper or in tandem with a rede or new application DCS processes it within time frames of all other changes which could cause a month to 6 weeks delay in the change being in effect.

	care provided?	
13	Should there be a place to indicate Military/Service status on the NHCarePath Partner Referral form?	DHHS will follow up on this. It is part of the level 1 Screen.

Past items that were communicated between DHHS and NHCarePath Regional Partners

Challenges/Opportunities

- Best practices to assist families in applying for APTD specific for the DD/ABD waiver **bringing forward for training in September**
 - DCS Generalists often manage caseloads with ABD/DD waiver participants included in them. There are times when these families and dd agencies are challenged with DSC staff that may not have the knowledge base to answer or assist with questions when road bumps come up. **bringing forward for training in September**
 - Cost of Care in cases that shouldn't have it is still an issue and creates a lot of administrative and updating work. **bringing forward for training in September**
 - Concord region identified that it would be beneficial for the AA to have some customized training from DCS that focuses on the DD/ABD/Children HIS programs. If it addressed Notices and different meanings for notices that would be good.
 - Operations: There are still many process challenges with ABD/DD Waiver applicants and their Medicaid status as it relates to Look back for Waiver eligibility and their APTD/NHHPP auto enrollment prior to DD/ABD Waiver. Wendi will be connecting with Division of client services and BDS to discuss this issue.
1. Initially we understood that the Level One Screening and the referral sheet would contain a release that the information could be shared. It appears that this has not happened to the extent that Mental Health agencies feel comfortable using. Is anything happening with this? What about with the concept of a shared data base?
 - a. It is not our intent to create a shared database across every CMHC, AA, and ServiceLink, the state for all NWD Functions. While not completely out of the question, this is not part of current discussions. There is a release as part

of the referral document giving the agency initiating the warm hand off the authority to share warm hand off information to the receiving agency. Liaisons can discuss this when they meet next week to respond completely to this question. CMHCs, AA, and ServiceLink's were part of the process of creating the document and authorization. If regional partners have more stringent processes above and beyond what the state requires, these processes should be discussed at your regional meetings so that you can all be on the same page about what is expected.

2. It was suggested that an "Eligibility Booklet" be produced so we know what a client would be eligible for. Has there been any thought in producing this?
 - a. DHHS is committed to continue improving and evolving the tools that exist so that they can be more helpful to partners exploring eligibility guidelines with their clients. There are currently lots of eligibility guideline tools available and that change often, I would like to explore the suggestion more to find out exactly what the group is suggesting so that I can determine if it is a need to create something new or improve something that currently exists.
 - b. DHHS is also committed to creating additional tools to meet new needs.
 - c. Please note that it is the vision of NWD and of the State that partners will explore the needs of individuals in terms of what is important to them and important for them in order to then identify what services and supports choices align with those needs.