



**NEW HAMPSHIRE**  
HEALTH PROTECTION PROGRAM

**Newly Enrolled Medicaid  
Providers in the NHHPP**

*August 14, 2014*

*Office of Medicaid Business and Policy, NH DHHS*

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# Presentation Overview

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- ① **What is the NH Health Protection Program?**
- ② **The HIPP Program**
- ③ **The Bridge Program**
- ④ **Client Eligibility for NHHPP**
- ⑤ **Checking Eligibility in MMIS**
- ⑥ **Benefits under the NHHPP**
- ⑦ **New Hampshire Healthy Families**
- ⑧ **Well Sense Health Plan**
- ⑨ **Question and Answer Session**



# What is the NH Health Protection Program?

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A federally-funded, locally-managed health care program that **expands coverage** to low-income New Hampshire residents.

*An estimated **50,000 residents** will apply.*



**NEW HAMPSHIRE**  
HEALTH PROTECTION PROGRAM



# Basic Program Features

1

**The Health Insurance Premium Program (HIPP)** is for those who have access to coverage through an employer.

*Program will pay client's share of insurance costs.*

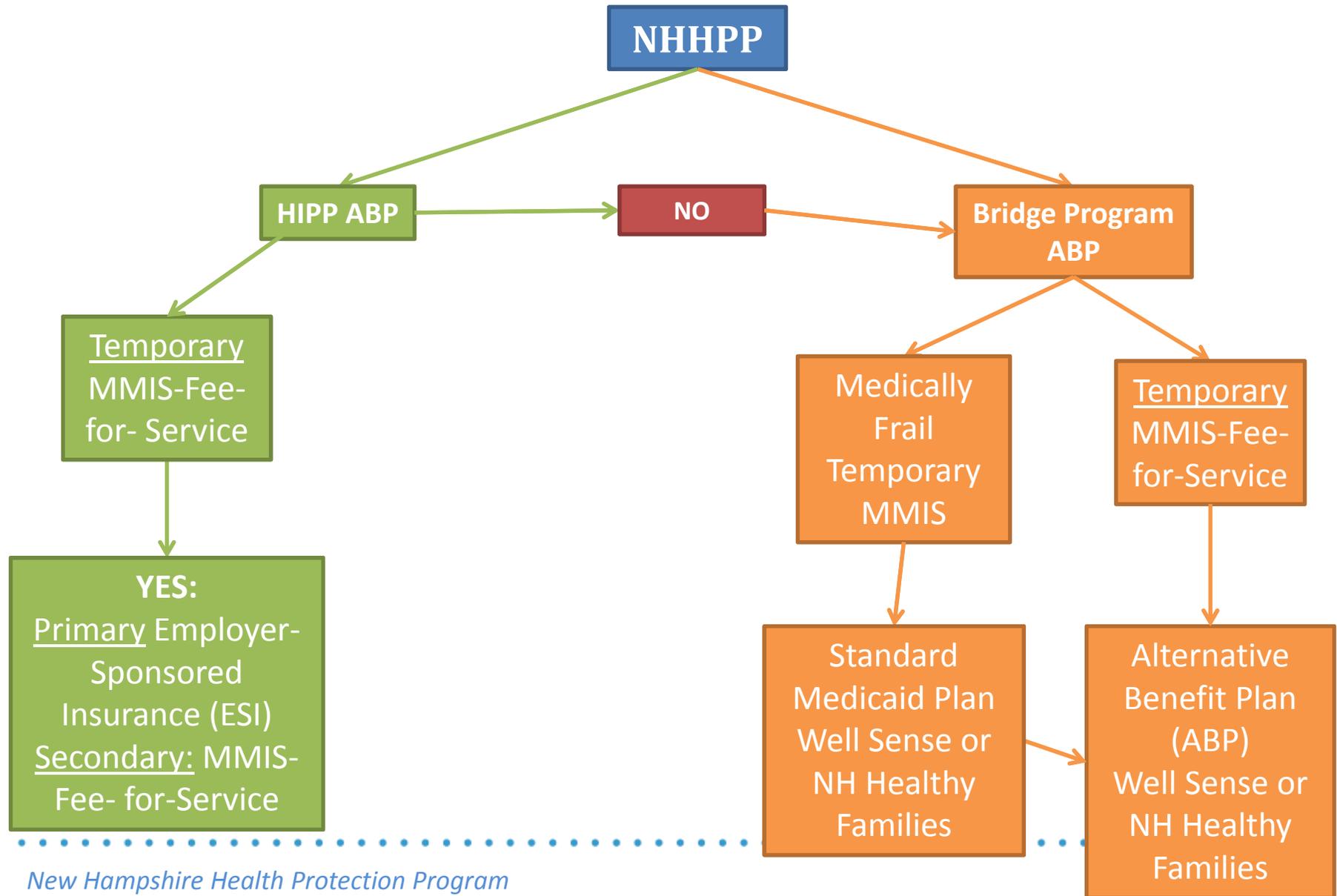
2

**The Bridge Program** is for those who do not have coverage available through an employer.

*Clients receive services through one of the two Managed Care Organizations (MCOs) already under contract with DHHS: New Hampshire Healthy Families and Well Sense Health Plan*



# Basic Program Features





# Health Insurance Premium Payment (HIPP)

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## ❖ What is HIPP?

HIPP is a program which pays a NHHPP member's premiums and cost sharing of employer sponsored insurance (ESI).

## ❖ How does someone qualify for HIPP?

- Must be NHHPP eligible
- Must have access to (ESI), either as an employee or family member of an employee.
- ESI must be cost effective. **If not cost effective, individual will go to Bridge Program.**

*HIPP is a **mandatory** program for those in NHHPP who have direct access to ESI as an employee.*

## ❖ Is Medically Frail treated differently for HIPP?

- If a Medically frail person has access to ESI and the ESI is determined to be cost effective, then the person must be in the HIPP program.



## ***Medically Frail* under NHHPP**

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- ▶ **One self attests to *Medically Frail* condition on application; no MD evaluation is required.**
- ▶ ***Medically Frail* have the option to choose the Standard Medicaid Benefit Plan or the Alternative Benefit Plan.**
- ▶ **No chiropractic or SUD benefit if *Medically Frail* select Standard Medicaid Benefit Plan.**
- ▶ ***Medically Frail*, regardless of their benefit plan, must choose a health plan.**



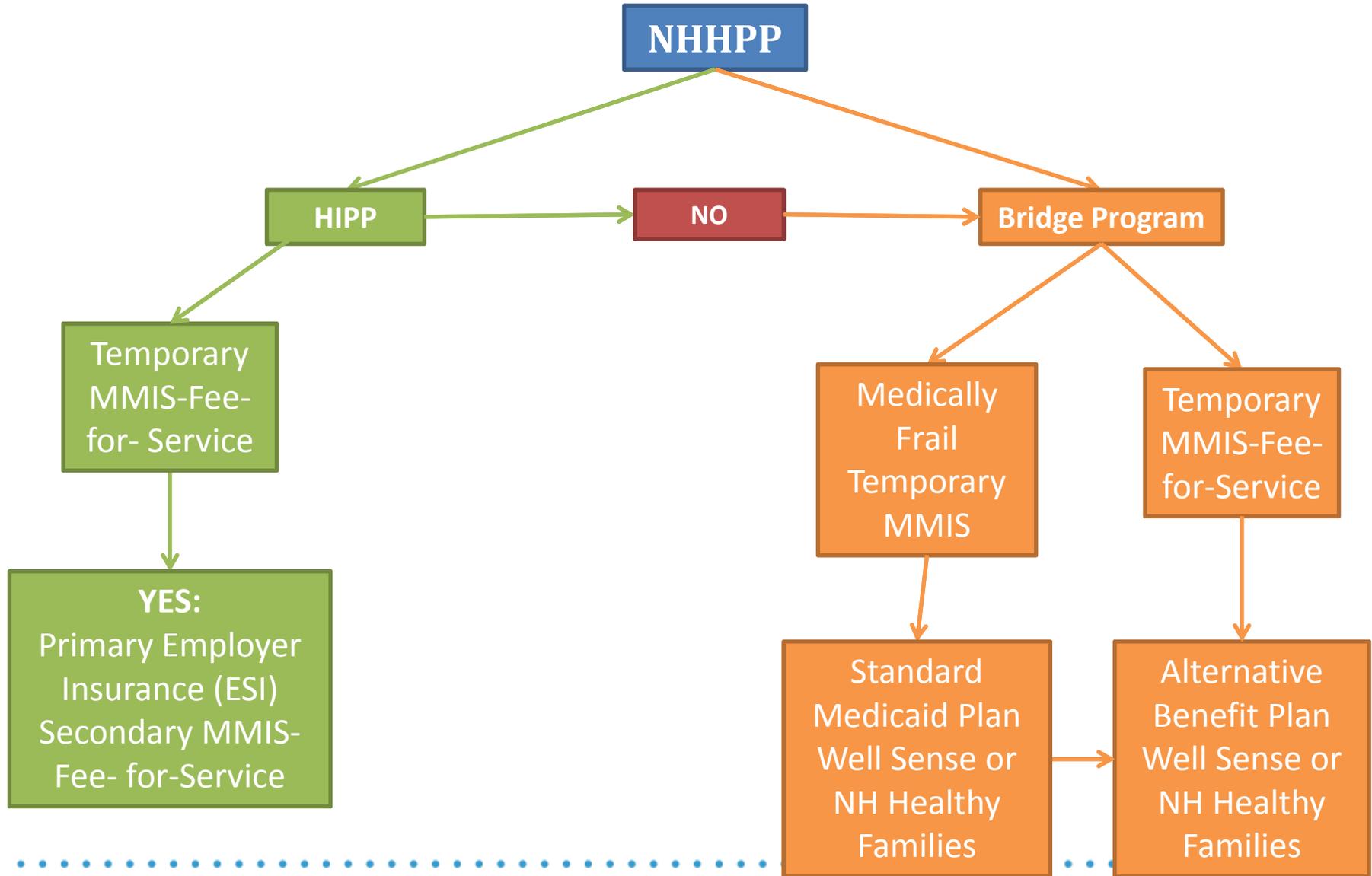
# HIPP Fee Schedule

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- ▶ Reimbursement works the same way it does under current Medicaid HIPP—TPL Program. NH Medicaid will pay the lesser of 1) the patient responsibility amount (deductible, copay and coinsurance), or 2) the difference between the amount paid by the primary payer and the Medicaid allowed amount.
- ▶ Treat your client like anyone else who presents with a *primary* insurance card and a Medicaid card (*secondary* insurance).
- ▶ HIPP recipients **always** have Medicaid Fee-for-Service as their secondary - they do not go into one of the Health Plans.



# Basic Program Features





# The Bridge Program: Care Management

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- ▶ **Mandatory** enrollment in one of two MCOs.
- ▶ Client chooses a Managed Care Organization (MCO) within 60 days from eligibility determination or denial of HIPPP:
  - ❖ If a client does not choose within 60 days they will be auto-assigned an MCO.
  - ❖ During selection period, individual is in MMIS-Fee-for-Service.
- ▶ Coverage in the MCO starts on the **1<sup>st</sup> day** of the first month *after* selection.
- ▶ Client has 90 days to change MCO.



## Fee Schedule under Bridge Program

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- ▶ Most services for Bridge participants in one of the Health Plans will be reimbursed at rates which are at/close to the Medicare rate (unless existing Medicaid rate is already higher.)
- ▶ DHHS issued Fee Schedules within MCO contracts - **MCOs must reimburse according to these Fee Schedules.**
- ▶ Fee schedule is posted on the MMIS website:  
<https://nhmmis.nh.gov/portals/wps/portal/DocumentsandForms>



## Fee Schedule under Bridge Program (cont.)

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- ▶ **Only the Health Plans** can pay providers these enhanced rates for services in the Alternative Benefit Package.
- ▶ While client is in Standard Medicaid, reimbursement rates will remain the same as today's Medicaid **Fee-for-Service** rates.
- ▶ Providers will be reimbursed at current Medicaid rate for Medically Frail who choose the Standard Medicaid benefit package.



# Program Timeline

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## — Summer 2014 —

- ▶ **July 1** – Applications acceptance began
- ▶ **Aug. 15** – Coverage begins; enrolled as Fee-for-Service
- ▶ **Sept. 1** – 1<sup>st</sup> potential day of Care Management coverage



# Eligibility NH Health Protection Program

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- **Adults age 19 to 65**
  - **Who are not:**
    - *Pregnant*
    - *Entitled to/enrolled in Medicare Part A or B*
    - *Otherwise eligible/enrolled in coverage under State's Medicaid plan*
  - Resources are excluded.
  - Applicants self-attest to income and other criteria (e.g., pregnancy, medically frail and residency).



# Eligibility NH Health Protection Program

**Household income is at or below the following levels:**

Household Size	If Your Household Income Is This Amount or Less Each MONTH	OR	If Your Household Income Is This Amount or Less Each YEAR
1	\$1,342		\$16,105
2	\$1,809		\$21,707
3	\$2,276		\$27,310
4	\$2,743		\$32,913

*For each additional household member, add \$450 per month or \$5,400 per year, up to a household size of 8 people.*



## Providers Checking Eligibility in MMIS

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To confirm a client's enrollment in the NHHPP Alternative Benefit Plan(ABP) and a Health Plan, NH Medicaid providers use the following methods:

- ▶ 1. Online through the Xerox MMIS Health Enterprise Portal: [nhmmis.nh.gov](http://nhmmis.nh.gov)
- ▶ 2. Electronic 270/271 enrollment transactions
- ▶ 3. Automated Voice Response
- ▶ 4. Contact the Xerox NH Provider Relations Unit at 603-223-4774 or 866-291-1674. Providers need their 7-digit Medicaid number to access Call Center.

# NH MMIS Health Enterprise nhmmis.nh.gov

**New Hampshire MMIS Health Enterprise Portal** Aug 11, 2014  
[Skip Navigation](#) | [Contact Us](#) | [Help](#) | [Search](#)

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**Welcome**  
Welcome to the Xerox Government Solutions Health Enterprise Portal. This system supports all of your State Medicaid and Decision Support needs.  
**NH MMIS has established a maintenance window from 12:01 A.M. to 4:00 A.M. every Sunday to apply scheduled system upgrades. During the maintenance window, the system may not be accessible.**

**Provider Registration**  
For providers to obtain a user name and password to use the Health Enterprise portal, they must be a current provider for Medicaid. For trading partners to obtain a username and password, they must be a current Trading Partner with a trading partner ID. To begin the registration process, they must have their enrollment form ready.  
[Register](#)

**Quick Links**  
[Information Topics A-Z](#)  
[Find a Health Care Provider](#)  
[Benefits Overview](#)  
[Enrollment](#)  
[Documents and Forms](#)  
[Report Fraud & Abuse](#)  
[Department of Health and Human Services](#)

**Sign In**  
Log into the system based upon your role:  
[Providers](#)  
[Members](#)  
[Internal Users](#)

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## Providers Checking Eligibility in MMIS

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- ▶ Under **Eligibility Status**, The NH Medicaid MMIS system will display eligibility type as Medicaid, and will give date span.
- ▶ Providers need to look at **Benefit Plan** listed to confirm coverage in NHHPP and a health plan.
- ▶ For those *medically frail* members enrolled in the Standard Medicaid Plan, the providers will see the plan as Medicaid Benefit Plan.



# Checking Eligibility/Enrollment in MMIS

- ▶ **Member enrolled only in Alternative Benefit Plan. Under Plan Description, System displays Alternative Benefit NHHP.**

Benefit Plan

Plan Description	Plan From	Plan To	MCO	Phone
Alternative Benefit Plan NHHP	07/01/2014	07/23/2014		

- ▶ **Member enrolled in Medicaid ending 6/30/14 and Alternative Benefit Plan starting 7/1. System displays Medicaid Benefit Plan and Alternative Benefit.**

Benefit Plan

Plan Description	Plan From	Plan To	MCO	Phone
Alternative Benefit Plan NHHP	07/01/2014	07/23/2014		
Medicaid Benefit Plan	06/01/2014	06/30/2014		

1 - 2 of 2

- ▶ **Medically Frail Member has chosen the ABP as their Benefit Plan and has Well Sense Health Plan starting 7/1/14. System displays Alternative Benefit Plan NHHP & Well Sense Health Plan.**

Benefit Plan

Plan Description	Plan From	Plan To	MCO	Phone
Well Sense Health Plan	07/01/2014	07/23/2014	BMC Health Plan	877-957-1300
Alternative Benefit Plan NHHP	07/01/2014	07/23/2014		

1 - 2 of 2



# NH Medicaid and NHHPP ID Card

State of  
New Hampshire

Department of Health  
and Human Services



Jane Z. Doe

5555555551

This New Hampshire Medicaid ID card should be used to verify  
the cardholder's eligibility for services.

Authorized  
Signature:

For Questions:

Medicaid Clients Call 1-800-852-3345, X4344 (in state only) or

1-603-271-4344

TDD Access Call: 1-800-735-2964

Medicaid Providers Call: 1-866-291-1674

If found, please drop in U.S. mailbox. Return postage guaranteed:

Xerox State Healthcare, LLC, PO Box 2090, Concord, NH 03302-2090 NH-100



## Benefits under NHHPP—Alternative Benefit Plan

**Alternative Benefit Plan  
(ABP)**

**=**

**Standard Medicaid**

(excluding waivers  
and long-term care)

**+**



- Chiropractic
- EPSDT for members between ages 19-21
- SUD Benefits phased in over next year

### **Benefits *Not* Included In ABP**

- Adult Day Health Services for members 21 and older
- Private Duty Nursing for members 21 and older
- Personal Care Attendant services for members 21 and older



# Substance Use Disorder Benefit

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## Implementation/Phase-In

### SUD Benefits / Services Available at Start up (8/15)

- ▶ Outpatient services / Crisis Intervention
- ▶ Opioid Treatment Program (Methadone)
- ▶ Medically Managed withdrawal management (hospital in-patient)

### At Six Months:

- ▶ Prenatal Services
- ▶ Screening, brief Intervention, referral to Tx (SBIRT)
- ▶ Medication assisted treatment services
- ▶ Intensive & Partial Hospitalization Outpatient Services
- ▶ Residential treatment services

### At One Year:

- ▶ Withdrawal Management (ambulatory / Med. Monitored inpatient)
- ▶ Recovery support services /Recovery Monitoring (case Management)



## SUD Benefit (cont.)

### Service Providers at Start Up (8/15)

- ▶ Opioid Treatment Program (Methadone)
  - ❖ Certified opioid treatment programs
- ▶ Medically Managed withdrawal management (hospital in-patient)
  - ❖ Acute care and psychiatric hospitals
- ▶ Outpatient services / Crisis Intervention
  - ❖ MLADCs licensed by the NH Board of Licensing for Alcohol and Other Drug Use Professionals;
  - ❖ Psychotherapists licensed by the NH Board of Mental Health Practice or the NH Board of Psychologists;
  - ❖ Physicians and APRNs;
  - ❖ Outpatient and comprehensive SUD programs, opioid treatment programs, community mental health centers, and community health centers
    - MLADCs, Psychotherapists, Physicians and APRNs
    - LADCs under MLADC supervision
    - Others under supervision of as defined by He-W 513



# Chiropractic Benefit—ABP-NHHPP

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- ▶ **Please refer to handout for complete list of Procedure Codes covered under Alternative Benefit Plan under NHHPP.**
  
- ▶ **Covered Services:**
  - ❖ X-rays
  - ❖ Physiological Therapeutic Services
  - ❖ Chiropractic Manipulation of the Spine
  
- ▶ **Evaluations are part of the manipulation codes and can not be billed separately.**



## Service Limits in the Alternative Benefit Plan (ABP)

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ABP must follow guidance in the ACA and its [Essential Health Benefit \(EHB\) Benchmark Plans](#)

### Service Limits:

- ▶ Chiropractic services: 12-visit yearly limit on any combination of the 4 manipulation codes. The therapies have a yearly limit of 80 fifteen-minute units.
- ▶ No limit on SUD Services.



# NH Medicaid-MMIS Contact Information

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- ▶ **Contact NH Medicaid-MMIS with questions regarding:**
  - **Enrollment**
  - **Application Status**
  - **Claims Submissions**
  
- ▶ **For Enrolled Providers: Call Provider Relations Unit at 1-866-291-1674**
  
- ▶ **E-Mail: [NHProviderRelations@xerox.com](mailto:NHProviderRelations@xerox.com)**



# How to enroll as a NH Medicaid Provider

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- ▶ Go to [nhmmis.nh.gov](http://nhmmis.nh.gov) and click on *Enrollment* in the Quick Links box to begin your application.
- ▶ For answers to your questions on the enrollment process:
  - ❖ Call Kathy Jaques at MMIS-Xerox: 603-223-3079
  - ❖ Send an email to [Kathy.Jaques@Xerox.com](mailto:Kathy.Jaques@Xerox.com)



# Next Steps for NH Medicaid Providers?

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## Enroll with:

- ▶ New Hampshire Healthy Families
- ▶ Well Sense Health Plan.

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**Thank you.**



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