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## **Approach: Medical Frailty New Hampshire Premium Assistance Program**

The following approach to medical frailty will be used in New Hampshire's Premium Assistance Program.

### **Medical Frailty Notice Prior to and During Open Enrollment**

- DHHS will notify all new applicants and all individuals who are currently enrolled in the NHPP and who are transitioning to the Premium Assistance program:
  - about the option to identify as medically frail at any time including at initial application, during the coverage year, and at the time of their annual Medicaid eligibility renewal
  - about the right to choose between the Alternative Benefit Plan (ABP) and Medicaid State Plan Services
  - about the differences in the benefits between the ABP and the Medicaid State Plan Services
  - that if someone identifies as medically frail, they are not permitted to enter or remain in the Premium Assistance Program
  - that self-attestation alone will be sufficient to identify them as medically frail
  - how enrollees can identify themselves to DHHS as medically frail at any time throughout the coverage year, after application
- The information sent to enrollees about the options and exemptions related to the medically frail will be also posted online on a webpage specific to the Premium Assistance Program.

### **Medical Frailty Identification at Initial Application**

- DHHS asks all new applicants who qualify for the alternative benefit plan whether they wish to identify as medically frail at the point of application for Medicaid. These questions are:
  - Do you have a physical, mental or emotional condition that causes limitations in daily activities?
  - Do you reside in a medical facility or nursing home?
- DHHS will notify any enrollee who identifies as medically frail at application about the right to choose between the Medicaid managed care administered Alternative Benefit Plan (ABP) and managed care administered Medicaid State Plan Services.
- The notice will also include information about the differences in the benefits between the ABP and the Medicaid State Plan Services and direction about how the enrollee can select the appropriate benefit plan.

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- The notice will include information that if someone identifies as medically frail, they are not permitted to be in or remain in the Premium Assistance Program.

### Medical Frailty Identification Mid Coverage Year

- PAP enrollees can identify as medically frail at any time during the coverage year.
- Enrollees will be able to notify DHHS through its online platform, NH EASY, or by phone, or mail that they wish to identify as medically frail.
  - Enrollees who identify as medically frail mid coverage year will be disenrolled by the QHP by the first of the following

### Medical Frailty Options Counseling Referral by QHP Carriers

- If a PAP enrollee requests benefits that are not covered by direct or wrapped benefits in the PAP, but which are covered through other portions of New Hampshire's Medicaid program, the QHP Carrier may inform DHHS of the potential need for options counseling for that enrollee.
- The Carrier will be able to inform DHHS of these requests by contacting designated staff at DHHS Client Services who will be designated to receive medical frailty referrals from QHP carriers.
- DHHS will contact the identified enrollees by phone or mail and offer benefits options counseling as appropriate.

### Addressing Health Improvements Among the Medically Frail During the Coverage Year

- Individuals who have previously identified as medically frail may inform DHHS they have had an improvement in health status and are no longer medically frail at any time in the coverage year.
- These individuals will be transitioned to QHP coverage effective January 1 of the *following* coverage year.
- Individuals who are no longer medically frail will receive the ABP through Medicaid Care Management until QHP coverage becomes effective.