

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop: S2-26-12
Baltimore, Maryland 21244-1850



November 1, 2016

Jeffrey A. Meyers
Commissioner
New Hampshire Department of Health and Human Services
1259 Pleasant Street
Concord, NH 03301-3857

Dear Mr. Meyers:

This letter is in response to New Hampshire's August 10, 2016 request to amend New Hampshire's Medicaid demonstration, entitled "New Hampshire Health Protection Program Premium Assistance" (Project Number 11-W-00298/1), under section 1115 of the Social Security Act (the Act). New Hampshire's demonstration has been successful in enrolling previously uninsured low-income individuals in the new Medicaid adult group, including an innovative premium assistance program with private Qualified Health Plans. The Centers for Medicare & Medicaid Services (CMS) is committed to working with you to continue this important progress, and to ensuring that any changes to New Hampshire's demonstration maintain or build on the important improvements New Hampshire has seen in access to coverage, access to care and financial security.

The state has requested that demonstration beneficiaries be charged an \$8 copay for the first non-emergent use of the emergency room (ER) and \$25 for each subsequent non-emergent ER visit. To the extent that New Hampshire amends its state plan to include coverage of non-emergent services provided in the ER, New Hampshire may then submit a waiver request that satisfies section 1916(f) of the Act to charge beneficiaries an \$8 copay for the first non-emergent use of the ER and \$25 for each subsequent use. CMS can approve such a waiver only if the request satisfies the requirements of sections 1916(f) and 1115 of the Social Security Act, including the requirement that the waiver promote the objectives of the Medicaid program.

Regarding the state's other requests, as you know, CMS reviews section 1115 demonstration applications and amendments to determine whether they are likely to further the objectives of the Medicaid program, including strengthening coverage or health outcomes for low-income individuals in the state or increasing access to providers. After reviewing New Hampshire's amendment request to determine whether it meets these standards, CMS is unable to approve the following requests, which could undermine access, efficiency, and quality of care provided to Medicaid beneficiaries and do not support the objectives of the Medicaid program: a work requirement, additional eligibility verification requirements, and a requirement for hospitals

providing care to demonstration beneficiaries to also provide medical services to beneficiaries of veteran's health programs.

New Hampshire has made significant recent commitments to improving payment and strengthening delivery systems for New Hampshire's Medicaid beneficiaries. CMS stands ready to continue to assist you as you continue in this important work. Thank you for your work to improve care for low-income New Hampshire citizens. If you have any questions, please contact your project officer, Ms. Jennifer Kostasich, at either 410-786-6810 or by email at Jennifer.Kostasich@cms.hhs.gov.

Sincerely,

/s/

Vikki Wachino
Director

cc: Richard McGreal, Associate Regional Administrator, CMS Boston Regional Office