New Hampshire Managed Care Program Features, as of 2015

Features	New Hampshire Medicaid Care Management	New Hampshire Health Protection Program Medicaid Care Management ABP
Program type	Comprehensive MCO	Comprehensive MCO
Statewide or region-specific?	Statewide	Statewide
Federal operating authority	1932(a)	1932(a),1937 Alt Benefit Plan
Program start date	12/01/2013	09/01/2014
Waiver expiration date (if applicable)		
If the program ended in 2015, indicate the end		
date		
Populations enrolled: Low-income adults not	Mandatory	
covered under ACA Section VIII (excludes pregnant women and people with disabilities)		
Populations enrolled: Low-income adults	Mandatory	Mandatory
covered under ACA Section VIII (excludes		
pregnant women and people with disabilities)		
Populations enrolled: Aged, Blind or Disabled Children or Adults	Mandatory	
Populations enrolled: Non-Disabled Children	Mandatory	
(excludes children in foster care or receiving		
adoption assistance) Populations enrolled: Individuals receiving		
Limited Benefits (excludes partial duals)		
Populations enrolled: Full Duals	Voluntary	
Populations enrolled: Partial Duals		
Populations enrolled: Children with Special Health Care Needs	Voluntary	
Populations enrolled: Native American/Alaskan Natives	Voluntary	Voluntary
Populations enrolled: Foster Care and Adoption Assistance Children	Voluntary	Exempt
Populations enrolled: Enrollment choice	60 days	60 days
period Populations enrolled: Enrollment broker	Maximus	Maximus
name (if applicable)	Waxiinus	Waximus
Populations enrolled: Notes on enrollment		
choice period	V.	V.
Benefits covered: Inpatient hospital physical health	X	Х
Benefits covered: Inpatient hospital behavioral	X	Х
health (MH and/or SUD)		
Benefits covered: Outpatient hospital physical	Х	X
health Benefits covered: Outpatient hospital	x	X
behavioral health (MH and/or SUD)	^	^
Benefits covered: Partial hospitalization	X	X
Benefits covered: Physician	X	X
Benefits covered: Nurse practitioner	X	X
Benefits covered: Rural health clinics and	x	X
FQHCs	^	
Benefits covered: Clinic services	X	Х

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Benefits covered: Lab and x-ray	X	X
Benefits covered: Prescription drugs and	Х	Х
prosthetic devices		
Benefits covered: EPSDT	X	X
Benefits covered: Case management	X	X
Benefits covered: Health home (SSA 1945)		
Benefits covered: Family planning	X	X
Benefits covered: Dental services (medical/surgical)		
,		
Benefits covered: Dental (preventative or corrective)		
Benefits covered: Home health agency	X	X
services		
Benefits covered: Personal care (state plan option)	X	
Benefits covered: HCBS waiver services		
Benefits covered: Private duty nursing	X	
Benefits covered: ICF-IDD		
Benefits covered: Nursing facility services		
Benefits covered: Hospice care	X	X
Benefits covered: Non-Emergency Medical Transportation	х	х
Benefits covered: Other (e.g., nurse midwife services, freestanding birth centers, podiatry, etc.)	Nurse midwife, non-nurse midwife, freestanding birth centers, podiatry, PT/OT/ST, ambulance, adult medical day care, DME, eyeglasses, methadone	Nurse midwife, non-nurse midwife, freestanding birth centers, podiatry, PT/OT/ST, ambulance, adult medical day care, DME, eyeglasses, chiropractic, full substance use disorder treatment
Quality assurance and improvement: HEDIS data required?	Yes	Yes
Quality assurance and improvement: CAHPS data required?	Yes	Yes
Quality assurance and improvement: Accreditation required?	Yes	Yes
Quality assurance and improvement: Accrediting organization	NCQA	NCQA
Quality assurance and improvement: EQRO contractor name (if applicable)	HSAG	HSAG
Performance incentives? Payment		
bonuses/differentials to reward plans		
Performance incentives? Preferential auto-		
enrollment to reward plans		
Performance incentives? Public reports comparing MCO performance on key metrics		
Performance incentives? Withholds tied to performance metrics		
Performance incentives? MCOs/PHPs		
required/encouraged to pay providers for		
value/quality outcomes using shared-risk or		
shared-savings methods		

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Provider Value-Based Purchasing: State pays provider-based entities (such as ACOs or PCMHs) directly for value/quality outcomes using shared-risk or shared-savings methods		
Participating plans and regions served: Plans in Program	New Hampshire Healthy Families; Well Sense	New Hampshire Healthy Families; Well Sense
Notes: Program notes	those in the expansion population who are self-declared as medically frail and opted to receive the standard plan.	People in the NH Health Protection Program who self-declare as medically frail are given the option of electing the ABP or standard Medicaid benefit. The program enrolls those in the expansion population that are not medically frail, and if they are medically frail, they elected to stay in the ABP.