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State/Territory Name: NH

State Plan Amendment (SPA) #: 21-0053

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
233 North Michigan Ave., Suite 600
Chicago, Illinois 60601



Financial Management Group

March 9, 2022

Lori Shibinette, Commissioner
Department of Health and Human Services
129 Pleasant Street
Concord, NH 03301

RE: New Hampshire State Plan Amendment (SPA) Transmittal Number 21-0053

Dear Commissioner Shibinette:

We have reviewed the proposed New Hampshire State Plan Amendment (SPA) to Attachment 4.19-B submitted under TN-21-0053, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on December 21st, 2021. This plan clarifies the language regarding hospice services rates.

Based upon the information provided by the State, we have approved the amendment with an effective date of October 1st, 2021. We are enclosing the approved CMS-179 and a copy of the new state plan page.

Please note that our approval relates only to the requested change in payment methodology and that the resultant rates and related expenditures are consistent with section 1902(a)(30)(A) of the Act. CMS may still have questions on the funding structure in determining it's consistent with sections 1902(a)(2), 1903(a), and 1903(w) of the Act as implemented by 42 CFR §433.54. Approval of the subject SPA does not relieve the state of its responsibility to comply with federal laws and regulations, and to ensure that claims for federal funding are consistent with all applicable requirements. On April 2, 2021, CMS issued a letter on the New Hampshire Granite Advantage Health Care Trust Fund, in companion to the approval of New Hampshire's Medicaid managed care state directed payment preprints. The letter requested additional information to allow CMS to further review the state's sources of non-federal share financing of the Medicaid adult expansion population. The result of that review may also be applicable to the expenditures related to the payments authorized in this SPA.


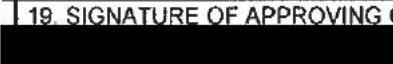
If you have any additional questions or need further assistance, please contact Jerica Bennett at 1-410-786-1167 or jerica.bennett@cms.hhs.gov.

Sincerely,

A solid black rectangular box redacting the signature of Todd McMillion.

Todd McMillion
Director
Division of Reimbursement Review

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER <u>2 1 — 0 0 5 3</u>	2. STATE <u>NH</u>
	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE October 1, 2021	
5. FEDERAL STATUTE/REGULATION CITATION 1905(o), 1905(a)(28), 42 CFR Part 447	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY <u>2021</u> \$ <u>0</u> b FFY <u>2022</u> \$ <u>0</u>	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19B, Page 6 (TN 21-0053)	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.19B, Page 6 (TN 21-0022)	
9. SUBJECT OF AMENDMENT Hospice Services Rate Clarification		
10. GOVERNOR'S REVIEW (Check One) <input type="radio"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="radio"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="radio"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL <input checked="" type="radio"/> OTHER, AS SPECIFIED:		
11. SIGNATURE OF STATE AGENCY OFFICIAL 	15. RETURN TO Janine Corbett Division of Medicaid Services/Brown Building Department of Health and Human Services 129 Pleasant Street Concord, NH 03301	
12. TYPED NAME Ann H. Landry		
13. TITLE Associate Commissioner		
14. DATE SUBMITTED <u>12-21-2021</u>		
FOR CMS USE ONLY		
16. DATE RECEIVED <u>12/21/21</u>	17. DATE APPROVED <u>3/9/2022</u>	
PLAN APPROVED - ONE COPY ATTACHED		
18. EFFECTIVE DATE OF APPROVED MATERIAL <u>10/01/21</u>	19. SIGNATURE OF APPROVING OFFICIAL 	
20. TYPED NAME OF APPROVING OFFICIAL Todd McMillion	21. TITLE OF APPROVING OFFICIAL Director, Division of Reimbursement Review	
22. REMARKS		

PAYMENT RATES FOR ALL TYPES OF CARE OTHER THAN INPATIENT
HOSPITAL, SKILLED NURSING, OR INTERMEDIATE NURSING CARE SERVICES

25. Hospice Services: Payment for hospice services is made at a per diem rate in accordance with Medicare regulations at 42 CFR 418, Subpart G. Hospice payments for inpatient care are limited and paid in accordance with Medicare regulations at 42 CFR 418.302(f). Acquired Immunodeficiency Syndrome (AIDS) cases are included in the limitation calculation. The state does not apply the optional cap limitation on payments. The agency's rates were set on January 1, 2021 and are effective for services provided on or after that date. No provider shall bill or charge the department more than the provider's usual and customary charge. The fee schedule, which is applicable to all public and private providers of hospice services, follows the Medicare fee schedule and is updated concurrent with Medicare updates. Effective January 1, 2021, the Medicare rates were increased 3.1% to arrive at the Medicaid rates. The rate in effect beginning January 1, 2021, will remain in place until the Medicare rate surpasses it, or, there are further legislative changes regarding Medicaid Rates. The Medicare fee schedule can be accessed on the Medicare hospice website at:

<https://www.medicaid.gov/medicaid/benefits/hospice-benefits/hospice-payments/index.html>

Note: When it is stated that "rates were set as of," this indicates the most recent date rates were changed on one or more codes for the type of service/practitioner in question. It is not meant to imply that all of the codes pertaining to the type of service/practitioner in question were changed or reviewed.

TN No: 21-0053
Supersedes
TN No: 21-0022

Approval Date 3/9/2022

Effective Date: 10/01/2021