



Lori A. Shibinette
Commissioner

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Chief Financial Officer

STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF FINANCE AND PROCUREMENT

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March 10, 2022

The Honorable Karen Umberger, Chairman
Fiscal Committee of the General Court and

His Excellency, Governor Christopher T. Sununu
and the Honorable Council
State House
Concord, NH 03301

REQUESTED ACTION

Pursuant to RSA 14:30-a, VI, Additional Revenues, authorize the Department of Health and Human Services to accept and expend additional federal revenue in the amount of \$12,880,945 effective upon approval by the Fiscal Committee and Governor and Council through June 30, 2023, and further authorize the allocation of these funds in the account below. 100% Federal Funds

05-95-93-930010-7016, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS:
DEVELOPMENTAL SVCS DIV, DIV OF DEVELOPMENTAL SVCS, ACQUIRED BRAIN DISORDER SERVICES

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-406739-16	Federal Funds	\$15,391,369	\$1,093,385	\$16,484,754
	General Fund	\$15,339,315	\$0	\$15,339,315
	Total Revenue	\$30,730,684	\$1,093,385	\$31,824,069
041-500801	Audit Set Aside	\$17,038	\$1,093	\$18,131
102-500731	Contracts for Prog Svcs	\$1,433,265	\$0	\$1,433,265
502-500891	Payments to Providers	\$29,280,381	\$1,092,292	\$30,372,673
	Total Expense	\$30,730,684	\$1,093,385	\$31,824,069

The Honorable Karen Umberger, Chairman
 Fiscal Committee of the General Court and
 His Excellency, Governor Christopher T. Sununu
 and the Honorable Council
 March 10, 2022
 Page 2 of 5

**05-95-93-930010-7100, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS:
 DEVELOPMENTAL SVCS DIV, DIV OF DEVELOPMENTAL SVCS, DEVELOPMENTAL SERVICES**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-403793-16	Federal Funds	\$197,871,106	\$11,663,005	\$209,534,111
	General Fund	\$199,013,198	\$0	\$199,013,198
	Total Revenue	\$396,884,304	\$11,663,005	\$408,547,309
041-500801	Audit Set Aside	\$209,349	\$11,663	\$221,012
102-500731	Contracts for Program Services	\$3,132,518	\$0	\$3,132,518
502-500891	Payments to Providers	\$393,542,437	\$11,651,342	\$405,193,779
	Total Expense	\$396,884,304	\$11,663,005	\$408,547,309

**05-95-93-930010-7110, HEALTH AND SOCIAL SERVICES, HEALTH AND HUMAN SVCS DEPT, HHS:
 DEVELOPMENTAL SVCS DIV, DIV OF DEVELOPMENTAL SVCS, CHILDREN IHS WAIVER**

CLASS OBJ	CLASS TITLE	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
000-404669-16	Federal Funds	\$6,001,041	\$124,555	\$6,125,596
	General Fund	\$5,619,545	\$0	\$5,619,545
	Total Revenue	\$11,620,586	\$124,555	\$11,745,141
041-500801	Audit Set Aside	\$5,922	\$125	\$6,047
502-500891	Payments to Providers	\$11,614,664	\$124,430	\$11,739,094
	Total Expense	\$11,620,586	\$124,555	\$11,745,141

EXPLANATION

The public health emergency for COVID-19 was declared by the Secretary of Health and Human Services on January 31, 2020. The current PHE was renewed on January 16, 2022 for an additional 90 days.

Section 6008(a) of the Families First Coronavirus Response Act (FFCRA) provides a temporary 6.2 percentage point increase to the Federal Medical Assistance Percentage (FMAP) under section 1905(b) of the Social Security Act effective beginning January 1, 2020 and is available for each calendar quarter during the public health emergency (PHE), through the end of the quarter in which the public health emergency including any extensions,

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Fiscal Committee of the General Court and
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and the Honorable Council
March 10, 2022
Page 3 of 5

ends. If this renewal remains in place for the full 90 day period, it would expire on April 16, 2022. Under current law, the additional 6.2 percent FMAP would remain in effect through the fourth quarter of state fiscal year 2022.

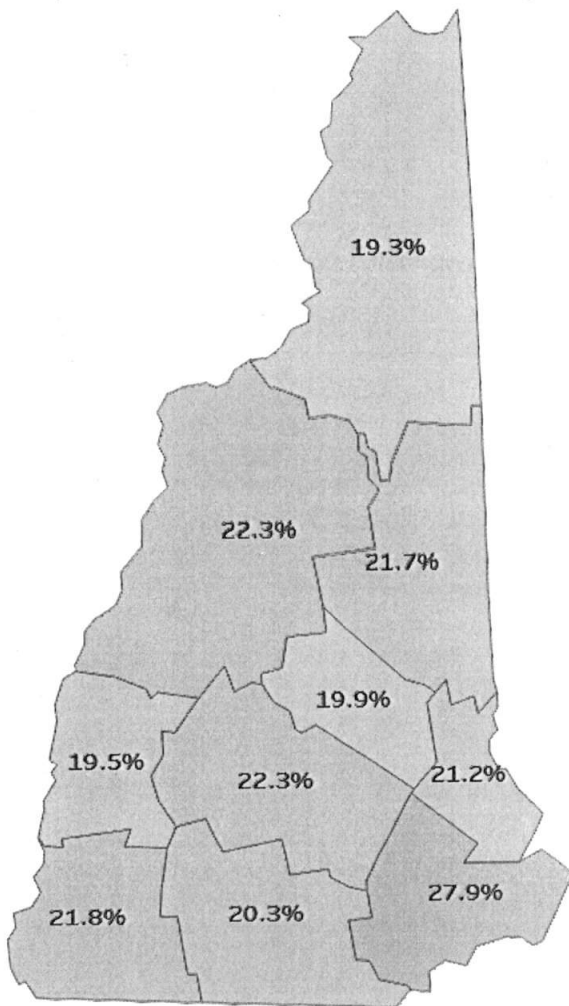
The Department is requesting to accept and expend the federal matching dollars to support anticipated costs of the increase in Medicaid caseload resulting from the COVID-19 pandemic. NH Medicaid caseload, including both Standard Medicaid and Granite Advantage Healthcare Program has increased by 58,474 or 33% for the period of March 16, 2020 through January 17, 2022. The Standard Medicaid program, for which this funding is requested, has increased by 24,096 or 19.1% for the period March 16, 2020 through January 17, 2022.

Medicaid caseloads have been directly impacted as a result of the COVID-19 pandemic and the continuous coverage requirement of the Families First Coronavirus Response Act, which requires states, as a condition of receiving an enhanced federal match for Medicaid (except for adult expansion) to suspend termination of eligibility for Medicaid except for members who die, move out of state, or request ending Medicaid coverage. The costs driven by the increase in caseloads have been funded by the increased 6.2% federal match.

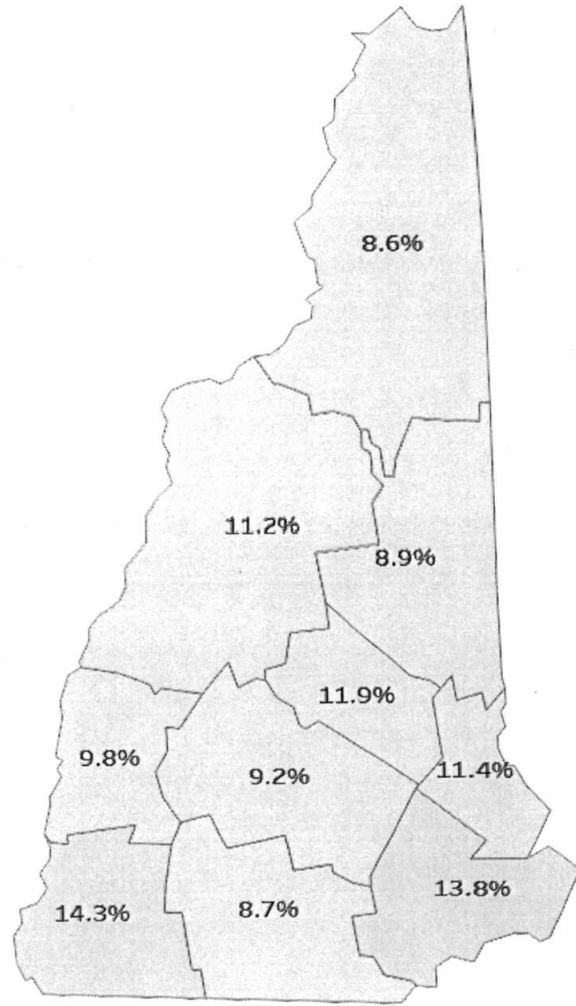
States will receive a sixty day advance notice of the end date of the PHE as promised to Governors by the Federal government. The most recent guidance from the Centers for Medicare & Medicaid Services (CMS) gives states up to 12 months to complete income eligibility redeterminations for its Medicaid members. The Department is diligently developing an unwind plan with the goal of ensuring that there are no gaps in medical coverage, whether that coverage is continued Medicaid or other sources of private or Marketplace coverage, and which is consistent with the budget in managing coverage transfer or disenrollment within a three to four month timeframe.

The map below shows the increase during the pandemic and is evident across all counties in the state.

Standard - Income Based



Standard - Disabled/Elderly/Foster Care

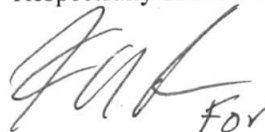


Pursuant to Chapter 91, Section 35 (Laws of 2021): "Department of Health and Human Services; Change in Federal Match Revenue. During the biennium ending June 30, 2023 any item submitted to the fiscal committee of the general court which increases a draw on federal funds, as a result of miscalculation of or change in the state's share of a federal match program in excess of \$100,000 in an accounting unit, shall include an explanation stating if any general funds have been supplanted, and if so, for what purpose those supplanted general funds will be

The Honorable Karen Umberger, Chairman
Fiscal Committee of the General Court and
His Excellency, Governor Christopher T. Sununu
and the Honorable Council
March 10, 2022
Page 5 of 5

used, and the amount of supplanted general funds anticipated to lapse.” For all of the accounting units included in this request, the general funds being supplanted are going to be used to support the programs due to the increased enrollment and the continuation of the public health emergency for which the federal funds were not previously budgeted. DHHS does not anticipate any of these funds to lapse.

Respectfully submitted,

A handwritten signature in dark ink, appearing to read 'Lori A. Shibinette', with a stylized flourish at the end.

Lori A. Shibinette
Commissioner