LEGAL NOTICE

NEW HAMPSHIRE DEPARTMENT OF HEALTH AND HUMAN SERVICES

Mandatory Medicaid State Plan Coverage of Medication Assisted Treatment (MAT) under the Alternative Benefit Plan

5/31/22 public notice posted to:

https://www.dhhs.nh.gov/programs-services/medicaid/medicaid-state-plan-public-notices

Notice is hereby given that the New Hampshire (NH) Department of Health and Human Services (the Department) is proposing to amend the Title XIX State Plan to update the Medicaid Alternative Benefit Plan (ABP; this is for Medicaid's expansion group eligibility category, called Granite Advantage) in order to comply with requirements of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act (SUPPORT Act) that requires states to provide mandatory Medicaid coverage of certain drugs and biological products and related counseling services and behavioral therapy (referred to as Medication Assisted Treatment, or MAT) for the period beginning October 1, 2020 through September 30, 2025.

On January 12, 2021 the Department submitted an additional 1135 waiver to request flexibility in meeting the regulatory State Plan Amendment submission and public notice timelines due to NH's response to the COVID-19 pandemic, which delayed the Department's ability to submit a State Plan Amendment to fulfill the requirements outlined in section 1006(b) of the SUPPORT Act.

Effective October 1, 2020, the Department is clarifying that NH appropriately covers and pays MAT services, as required under the SUPPORT Act. NH provided coverage for these costs prior to the SUPPORT Act—no new items or services are being covered, and no payment methodologies are being changed; therefore, there is no federal or non-federal fiscal impact associated with this proposed State Plan clarification.

The State will assure compliance with 42 CFR 440.345 to provide full access to Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services for individuals in the expansion population who are under age 21 as required by law and regulation, and consistent with current state policy regarding the delivery of these services. Any EPSDT services not included in the Medicaid managed care plan benefit package will be provided through the State's fee-for-service Medicaid program. Other covered services will include medically necessary services as prior authorized, as well as other services required to be covered pursuant to state or federal law, regulation or policy. The State will describe the process to access these benefits in notices sent to all individuals receiving the ABP benefit package.

The State also assures compliance with the provisions of Section 5006 (e) of the American Recovery and Reinvestment Act of 2009 regarding certain protections for American Indian/Alaskan Native (AI/AN) populations. This includes sending notice to individuals who are AI/AN and informing them that they are exempt from co-payments if they are eligible for or have ever received services from an Indian Health Care Provider. Notice shall also include information about the continuing ability to receive care from Indian Health Care providers in or out of state and/or the managed care provider network.

Copies of draft State Plan pages will be available by June 3, 2022. Please contact Janine Corbett at (603) 271-9421, or via e-mail at janine.s.corbett@dhhs.nh.gov, to request copies. The amendments to the State Plan pages may undergo further revisions before and after submittal to the Centers for Medicare and Medicaid Services (CMS) based upon public comment or CMS feedback. Comments will be due by June 17, 2022 and should be e-mailed to janine.s.corbett@dhhs.nh.gov or mailed to the Department of Health and Human Services, Division of Medicaid Services, 129 Pleasant Street–Brown Building, Concord, NH 03301-3857, ATTN: Janine Corbett.