STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES

STRATEGIC VISION & OPERATIONAL EFFICIENCIES
QUARTER 4 REPORT

July 2022

Executive Summary

1. **SVOE:** Through Quarter 4, Year 1 of the SVOE contract, all four workstreams remain on-track with the shorter-term initiatives having achieved July 1st implementation milestones.

2. **Shorter-term Initiative Progress:** (1) Critical Time Intervention (CTI) has launched across the state in partnership with all 10 CMHCs; focus remains on data collection and an eventual strategy for pursuing inclusion of the service within Medicaid. (2) The IMD Waiver amendment application has been approved by CMS with the authority in affect as of July 1st.

3. **Longer-term Initiative Progress:** (3) The Developmental Disabilities (DD) Waiver Redesign initiative is shifting focus from stakeholder engagement and planning exercises into execution; rate development, billing system changes, and participant assessment testing are examples of the various efforts underway in Year 2. (4) The MES Modernization initiative is working towards the System Integrator procurement and will continue advanced planning and requirements development for additional modules.

Initiative Goals and Objectives – Behavioral Health (CTI)

Summary: The primary strategic goal of CTI was to help alleviate the ED boarding crisis by providing patients with the community supports needed after discharge to reduce the likelihood of readmission over time. The tactical goals below outline how the program will achieve progress towards this effort by Year 2.

Summary of 2-Year Tactical Goals and Objectives	
Year 1 (FY22)	**Year 2 (FY23)**
Description Designed New Hampshire's CTI program; developed program's financial and operational model; staged initial pilot and began building the infrastructure for a broader launch.	Support a successful statewide launch that increases the number providers and improves access for beneficiaries; expand collection of performance data and conduct analyses to measure outcomes; prepare CMS application for Medicaid reimbursement.
Objectives ☑ Plan, Design, and Finance Program ☑ Launch Pilot (Limited to 4 CMHCs) ☑ Prepare Statewide Launch (10 CMHCs)	☐ Support Statewide Launch ☐ Perform CTI Outcome Analysis* ☐ Initiate Medicaid Reimbursement Strategy

*Outcome analysis will demonstrate if CTI is achieving one of its primary goals: reduce readmission rates for inpatient psychiatric treatment and help alleviate the ED boarding crisis.

Timeline – Behavioral Health (CTI)

Summary: The timeline below illustrates the anticipated focus for Years 2 and 3 of the initiative. Year 2 focuses on stabilizing program operations across all providers and conducting initial outcome analysis; Year 3 will focus primarily on securing Medicaid reimbursement to ensure long-term financial sustainability of the program

	Year 2 (FY23)				Year 3 (FY24)			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Operational Support	*Stand-up and stabilize statewide program operations* →							
Program Performance		*Structure and analyze CTI data to measure impact (i.e., readmission reductions)* →						
Medicaid Reimbursement				*Prepare application for Medicaid reimbursement; engage in ongoing dialogue with CMS to secure approval* →				

Year 2 (FY23) broken out in greater detail on next slide

Strategy Highlights
1. "All hands-on-deck" focused on operations for a successful statewide rollout in summer and fall of FY23.
2. Continue to analyze incoming data with the goal of increasing focus on demonstrating patient outcomes (once sufficient data is available).
3. Begin pursuing approval for Medicaid reimbursement with an increased focus on this area as data becomes more robust and the program matures.

Initiative Goals and Objectives – Behavioral Health (IMD Waiver)

Summary: The initial strategic goal of the IMD Waiver recommendation was to help alleviate the ED Boarding Crisis by (1) establishing the infrastructure and billing mechanism by which the State can reimburse inpatient psychiatric treatment for beneficiaries aged 21-64 through Medicaid and (2) increasing bed capacity within the State in partnership with private providers.

Summary of 2-Year Tactical Goals and Objectives		
Year 1 (FY22)	**Year 2 (FY23)**	
Description — Successfully managed the drafting and submission of the SMI Amendment to NH's 1115 SUD IMD Demonstration with an effective date of 7/1/22; **received CMS approval 6/2/22.**	Manage the process for extending the entire 1115 IMD Demonstration (SUD & SMI) and adding a SUD care coordination benefit for incarcerated members.	Support planning and engagement efforts with private providers in the development of additional inpatient bed capacity.
Objectives — ☑ Submitted complete amendment request ☑ Submitted SMI implementation plan ☑ Stood-up PMO to oversee implementation of 1115 IMD authority at NHH and Hampstead	❑ Support waiver operations related to SMI Amendment ❑ Manage the overall 1115 demonstration extension process with an effective date of 7/1/23	❑ Develop plan for engaging providers

Timeline – Behavioral Health (IMD Waiver)

Summary: Year 2 requires the team to operationalize the 1115 IMD Demonstration in parallel to extending the overall IMD demonstration (SUD & SMI); planning should also ramp-up around building-out additional IMD capacity, potentially extending execution efforts through FY24.

	Year 2 (FY23)				Year 3 (FY24)			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
Demonstration Extension	Usher the SMI SUD Waiver through extension approval							
Demonstration Operations	Ensure billing changes and reporting to CMS occur							
New IMD Capacity	Early engagement of potential provider partners – Focus shift to facilitating capacity build-out							

Strategy Highlights
1. Steering Committee is currently planning to complete a draft in July 2022 prior to posting for public comment in August / September 2022.
2. Treatment provided and billed for patients admitted 7/1/22 or later will comprise the first cycle of running through the new process (August or later).
3. Incorporating a third stream into the work plan around enhancing private provider capacity is a priority for Year 2.
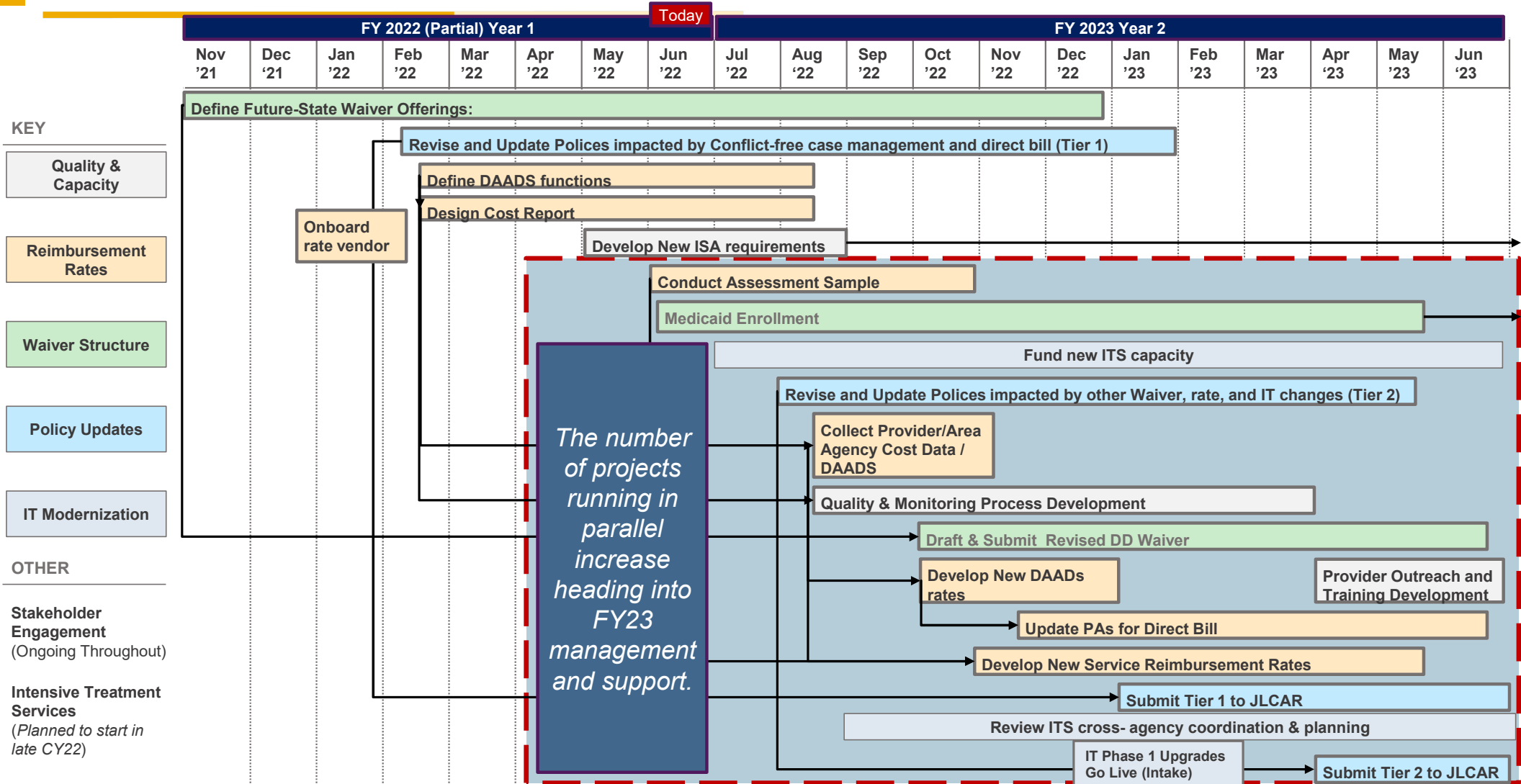
Initiative Goals and Objectives – DD Waiver Redesign

Summary: The strategic goal of the DD Waiver Redesign as an initial recommendation was to better align consumer needs, services, and costs, and to improve the processes and systems underlying that system; the tactical goals below demonstrate how the initiative will work towards that end in Year 2.

Summary of 2-Year Tactical Goals and Objectives		
	Year 1 (FY22)	**Year 2 (FY23)**
Description	Successfully launched the planning, design, and governance structures needed in place for system change, conducted intensive stakeholder engagement, and kicked-off execution efforts across all five work streams).	Current workplan calls for hitting key milestones across all five work streams; Year 2 marks a shift from planning and design into execution.
List	☑ Launched Work Groups ☑ Drafted Service Definitions ☑ Started Policy and Rule Changes ☑ Kicked-off Planning for Direct Bill ☑ Defining Requirements for IT system ☑ On-boarded Rate Vendor	☐Conduct Assessment Sampling Exercise ☐Advise on cost report data collection ☐Submit high priority rule revisions to JLCAR ☐Draft and Submit Waiver ☐Complete Initial Draft Rates ☐Finalize preparation for the implementation of Direct Bill

Timeline – DD Waiver Redesign – FY 22 (Partial) & FY 23

Initiative Goals and Objectives – MES Modernization

Summary: The goal of the Medicaid Enterprise Systems (MES) project is to replace the current Medicaid Management Information System (MMIS). The MES will adapt to changing policies, compliance requirements, and user needs and is certifiable by CMS. Years 1 and 2 of the SVOE contract period focus on the overall strategy and approach, planning activities for the first three modules (System Integrator, Provider Management, and Pharmacy Benefits Management), and the implementation of Electronic Visit Verification (EVV).

Summary of 2-Year Tactical Goals and Objectives		
	Year 1 (FY22)	**Year 2 (FY23)**
Description	Successfully stood-up the governance and strategy for system modernization; developed program procurement strategy; progressed with planning activities for two key modules.	Align the strategy for the system modernization with achievable timelines and milestones; complete remaining planning and procurement exercises for the first three modules.
Objectives	☑ Developed program governance and management framework (Smartsheet) ☑ Drafted procurement strategy (bundling) ☑ Completed SI and EVV APDs for submission ☑ Completed SI requirements development ☑ Kicked-off planning for Provider Mgmt. ☑ Kicked-off system architecture drafting ☑ Drafted Event Notification and CLR APDs*	☐ Baseline workplan to align with strategy ☐ Assist in developing a resourcing plan ☐ Complete and publish SI RFP ☐ Complete APD and Requirements for Provider Mgmt. ☐ Assist in writing APD for Pharmacy module ☐ Continue to assist EVV implementation

Advanced Planning Documents (APDs) are a critical document required by CMS to secure future Medicaid Match; the team undertook this exercise for Closed Loop Referral and Event Notification, each unrelated to the MMIS modernization, to assist the Department in providing resources to the MMIS work.

3-Year Timeline* – MES Modernization
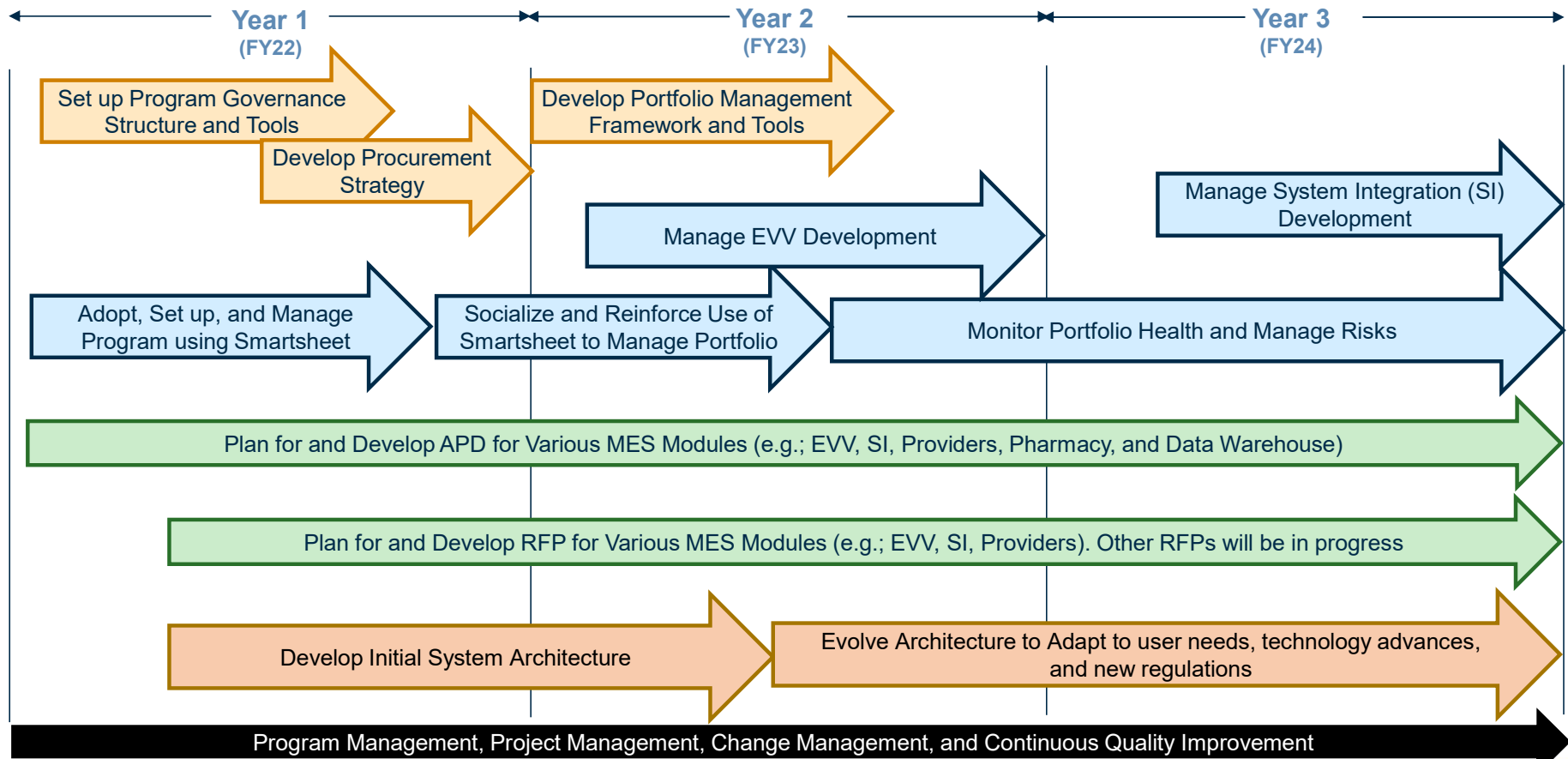
*Key on slide 12

Appendix

Key Tasks – MES Modernization

Strategy and Governance:

- Form Steering Committee and establish roles and responsibilities and operating procedures

- Develop program management and governance structure and tools

- Develop procurement strategy and timeline for the various MES modules

Program and Project Management:

- Set up the artifacts and processes needed to manage and track project health and risks

- Pioneer the use of Smartsheet to keep all project and portfolio planning artifacts and collaborated with the new PMO to socialize the use of the tool across divisions

- Manage the program and various module development projects such as EVV, System Integration (SI), and Provider Management

APD and RFP Development:

- Research applicable Advance Planning Documents (APD) opportunities for federal funding request

- Lead development of APDs through CMS approval

- Develop Request for Proposals (RFP) for various modules and manage the entire RFP process

Architecture and Standards:

- Develop documentation for "as-is" and "to-be" system architecture

- Evolve the system architecture that adapts to user needs, technology advances, and new regulations

State of New Hampshire
Department of Health and Human Services

DHHS Strategic Initiatives Contract

June 2021

DHHS Strategic Initiatives Contract

The Executive Council has requested a summation of what will be achieved in partnership with A&M as part of the Strategic Initiatives Contract.

1. A detailed description of the five initiatives, and the activities for which A&M will be responsible is contained in Exhibit B of the proposed contract between the Department and A&M.

2. As part of the contractor's project management responsibilities, A&M will develop workplans that outline milestones and timelines for each initiative; this task is already underway for the CTI and IMD initiative.

3. The Department has provided a chart depicting milestones and timelines within the 2-year scope for each initiative (see slides 3-4) which reflect current estimates; milestones and timelines are subject to change based on completion of workplans, and milestones reflect contributions from all necessary stakeholders, inclusive but not limited to or exclusively dependent upon, the A&M activities and responsibilities, as laid out in Exhibit B.

4. The June milestone list did not include timeline estimates for the MMIS modernization given that the budget had not yet been approved and significant planning exercises had not yet kicked-off. Additionally, the main tasks and workstreams around which we have oriented our initiative workplans may have changed since the pre-planning period in June, however, the overall progress we committed to has been achieved.

DHHS Strategic Initiatives Contract

DHHS Strategic Initiative Milestone Estimates

Initiative	Milestone	Year 1				Year 2			
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
1. CTI	Facilitate stakeholder engagement	X	X	X	X	X	X	X	X
	Develop initial CTI rollout strategy and budget	*On track to complete by 6/30/21*							
	Support CTI training and education for DHHS and providers	X	X	X	X	X			
	Advise on CTI governance at DHHS and between providers	X	X	X	X	X			
	Support the establishment and evaluation of CTI provider teams		X	X	X	X	X		
	Develop CTI data reporting infrastructure and analysis	X	X			X	X		
	Identify potential future funding strategies for CTI			X	X	X	X	X	X
	Support State CTI team with project management needs	X	X	X	X	X	X	X	X
	Assist with CTI program evaluation					X	X	X	X
2. IMD Waiver	Submit Draft Demonstration Waiver Application for Public Comment	*On track to complete by 6/30/21*							
	Submit Draft IMD Waiver Submission to CMS and Secure Approval	X	X	X	X	X	X		
	Support Waiver Implementation and Operationalization		X	X	X	X	X	X	X
	Assess MCO and HIT Readiness		X	X	X	X	X	X	X
	Support Quarterly Evaluation Reports					X	X	X	X
	Assist in Renewal / Expansion of dual SUD and SMI IMD waiver					X	X	X	X
	Implement Alternatives for psychiatric inpatient capacity (support)								X
3. DD Redesign *(continued on next page)*	Facilitate stakeholder engagement	X	X	X	X	X	X	X	X
	Establish Comprehensive Cross-Stream Workplan	X							
	Develop 1915(c) Waiver Application(s)		X	X	X	X			
	Submit final waiver application(s) to CMS and Secure Approval						X	X	X
	Assess waiver eligibility processes and reconcile with draft waiver application(s)			X					
	Review and Select Assessment Tool for Level of Need and Rate-Setting	X	X	X					
	Advise on the Procurement of a Rate Setting Vendor	X	X						
	Initiate Case Management Process Review				X	X	X		
	Review Individual Support Plan processes and inputs		X	X	X				

DHHS Strategic Initiatives Contract

Initiative Milestone Notes
1. Exhibit B of the proposed contract with A&M contains detailed activities outlining the support which A&M will provide in order to achieve the milestones above.
2. CTI and IMD workstreams have begun hitting initiative milestones during the current contract and will continue progress along established work plans.
3. Workstreams will reevaluate pre-established works (1 - 2) and establish workplans as necessary (3 - 5) as outlined in Exhibit B.

DHHS Strategic Initiative Milestone Estimates

Initiative	Milestone	Year 1				Year 2			
		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
3. DD Redesign *(cont.)*	Support Development of Grant Program for ITS Transition							X	X
	Finalize review / reconciliation of operations under new waiver and rate structures				X	X	X		
	Support the Redesign and Testing of Waiver Rates			X	X	X	X	X	
	Develop / Plan Implementation Strategy given established rates and waiver modifications							X	X
	Monitor and Finalize IT Requirements			X	X	X	X		
4. MMIS Modernization	Establish roadmap and workplan								
	Map As-Is and To-Be architecture								
	Develop a governance and PM Structure								
	Develop a procurement strategy								
	Draft/vet/issue series of RFP/APD per the roadmap, including CMS approval	*Quarterly milestones and timelines will be established during Y1 Q1*							
	Draft/test/refine metrics for project development and operations								
	Develop requirements for various MMIS modules								
	Establish/refine procedures for collecting metrics regarding project performance								
	Manage project risks and action items								
	Develop user training plan and artifacts								
5. Organizational Change Management	Conduct SWOT analysis & strategic planning	X							
	Review/refine organizational structure/functions to support transformation	X	X						
	Review/develop Key Performance Indicators (KPI)		X	X					
	Review leadership performance management protocols			X	X				
	Assess organizational change readiness and risk	X							
	Develop/implement change management plans		X	X	X	X	X	X	
	Collect and analyze change related feedback				X	X			
	Assess/manage change resistance					X	X		
	Evaluate change KPI, refine change strategy as needed							X	X