



**Weathering the Storm: The Impact of the Great
Recession on Long-Term Services and Supports**
State Profile: **NEW HAMPSHIRE**

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INTRODUCTION

Weathering the Storm: The Impact of the Great Recession on Long-Term Services and Supports is the most comprehensive analysis to date on the budget cuts to both Medicaid and non-Medicaid funded long-term services and supports (LTSS) in each state. It also illustrates state-by-state how LTSS are financed. In addition, this study provides a very early snapshot of the likelihood of states pursuing some of the LTSS provisions within the Affordable Care Act (ACA).

Weathering the Storm contains several components:

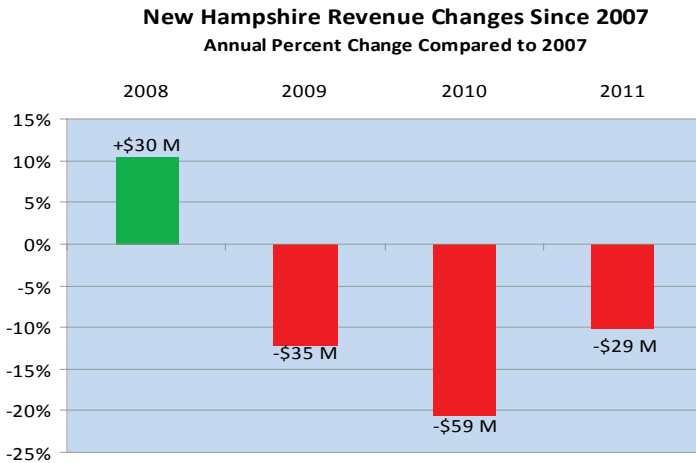
- The full report with an overview of findings and state-by-state tables;
- State profiles, which are 4 to 5 pages in length, for each state that participated in the study;
- An In Brief, which is a short synopsis; and
- A videotaped interview about the key findings.

Hard copies of *Weathering the Storm* are available free of charge. To order, please call the AARP Public Policy Institute at (202) 434-3890 or email jgasaway@aarp.org.

All of the components of *Weathering the Storm* are also available on the web and can be found at www.aarp.org/ppi, www.nasuad.org, and www.healthmanagement.com.

NEW HAMPSHIRE

TAX COLLECTIONS



Source: HMA analysis of state tax collection data from the National Association of State Budget Officers (NASBO), Spring Fiscal Survey of States, 2008 (for baseline 2007 data); Spring Fiscal Survey of States, 2009 (for 2008 data) and Spring Fiscal Survey of States, 2010 (for 2009 actual, 2010 estimated, and 2011 projected). Revenue represents the following taxes if collected by the state: **Personal Income, Corporate, and Sales**. Percent change and change in amount collected (in millions) represents the divergence between the state fiscal year noted and baseline SFY 2007.

ARRA FUNDING

IMPACT OF ARRA ENHANCED MEDICAID FMAP EXPIRATION

- Without the enhanced FMAP, some nursing facilities would have faced financial difficulty.

PREDICTED IMPACT OF THE EXPIRATION OF THE ARRA NUTRITION FUNDING

- No impact.

STATE UNIT ON AGING AND DISABILITY (NON-MEDICAID) SERVICES

STATE UNIT ON AGING NUMBER SERVED (UNDUPLICATED)

SFY 2009 (actual)	SFY 2010 (projected)	SFY 2011 (projected)	% Change SFY 2009–2011
108,351	110,000	112,000	3%

STATE UNIT ON AGING TOTAL EXPENDITURE REDUCTIONS – ACTION TAKEN

SFY 2009–2010	SFY 2010–2011
None	Don't Know

NEW HAMPSHIRE

STATE UNIT ON AGING SERVICE DEMAND AND EXPENDITURE CHANGES

Program	Change in Expenditures		Change in Service Requests
	SFY 2009–2010	SFY 2010–2011	SFY 2009–2010
Adult Foster Care	+	0	0
Adult Day Care	-	0	0
Adult Protective Services*	0	0	+
Assisted Living	0	0	+
Behavioral Supports	NA	NA	+
Case Management	-	-	
Chore	0	0	0
Community Transition	0	0	
Congregate Meals	0	0	+
Day Habilitation	NA	NA	DK
Disease Prevention/Health Promotion	-	0	0
Elder Abuse Prevention	0	0	DK
Environmental Modifications	+	0	
Equipment and Supplies	0	0	
Family Caregiver Support	0	0	+
Food Stamps/Supplemental Nutrition Assistance Program			+
Foreclosure Counseling	NA	NA	DK
Homemaker	0	0	+
Home-Delivered Meals	0	0	+
Housing Assistance	NA	NA	DK
Information and Referral	0	0	+
Legal Assistance Development	0	0	+
LIHEAP			+
Long-Term Care Ombudsman	0	0	0
Nutritional Supplements	NA	NA	
Occupational Therapy	NA	NA	
Personal Care/Assistance	-	0	+
Physical Therapy	NA	NA	
Recreational Therapy	NA	NA	
Residential Habilitation	NA	NA	
Respite	0	0	+
Senior Community Service Employment Program	NA	NA	DK
Senior Centers	NA	NA	DK
Speech Therapy	+	0	
State Adult Guardianship Program	+	0	+
State Pharmaceutical Assistance	NA	NA	
Supported Employment	NA	NA	DK
Supported Living	NA	NA	+
Transportation	0	0	+
+ Expenditure/demand increase	0	No change in expenditure/demand	DK Don't know
- Expenditure/demand decrease	NA	Program not administered by SUA	

* Since SFY 2009, the State Unit on Aging has received increased calls for Adult Protective Services, e.g., financial exploitation and neglect.



NEW HAMPSHIRE

STATE UNIT ON AGING NON-MEDICAID HCBS EXPENDITURES

SFY 2009 (actual)	SFY 2010 (projected)	SFY 2011 (appropriation)	% Change SFY 2009–2010
\$12,180,330	\$12,180,330	\$12,180,330	0%

MEDICAID LONG-TERM SERVICES & SUPPORTS

NUMBER OF BENEFICIARIES: WAIVERS & NURSING FACILITIES

Waiver Name	Avg. Daily Caseload			% Change
	SFY 2009	SFY 2010	SFY 2011 (planned)	SFY 2009–2010
Choices For Independence Program	2,920	2,931	2,958	0%
Nursing Facility Services	Avg. Daily Census		Expected Change 2011	
	2010			
NF Average Daily Census	4,357		No change	

- Slight and modest increase in the waiver census may be due to the economy and lack of providers; the state does not expect rapid growth.
- Nursing facility growth has leveled off for the last six to nine months, and the state expects this trend to continue with a 2.3 percent decrease in census in SFY 2010.

LTSS EXPENDITURES (FEDERAL AND STATE)

Service	SFY 2009	SFY 2010 (Estimate)	SFY 2011 (Appropriation)	% Change SFY 2009–2010
HCBS Waivers (For Older People and Adults with Physical Disabilities)	\$51,528,078	\$55,956,158	\$59,561,993	9%
Medicaid LTSS State Plan	\$21,655,256	\$18,090,269	\$18,757,237	-16%
Nursing Facility	\$257,347,452	\$270,574,168	\$251,061,335	5%

LTSS PROVIDER PAYMENT RATE CHANGES

Provider Type	SFY 2009–2010 % change	SFY 2010–2011 % change
Nursing Home		-2.3%
Home Health	-2%	
Personal Care Services	-2%	
HCBS Waiver Services	-2%	
+ Provider rate increase - Provider rate decrease 0 No change in provider rate		NA Not applicable

- The 15-minute billing unit for home health (registered nurse and aide) was changed to a per visit rate.
- Some providers reduced their availability for waiver service provision due to the rate reduction.



OPTIONS, OUTLOOK, AND PROMISING PRACTICES

The Medicaid agency and State Unit on Aging were asked about their intent to pursue options under health care reform, to provide their thoughts on the outlook for LTSS, and to share promising practices in their state. This section combines information from both agencies if both agencies responded.

See the Overview for descriptions of these provisions.

State's Intent to Pursue LTSS Provisions in the Affordable Care Act	Very Likely	Somewhat Likely	Not Likely	Don't Know
State Balancing Incentive Program				X
Community First Choice Option				X
Money Follows the Person Demonstration				
1. Apply for new program				
2. Apply for extension of existing program	X			
Medical/Health Home Initiative				
1. Agency applying for planning grant	X			
2. State plan amendment to establish medical/health home services				X
3. Apply to establish community health teams				X

STATE PRIORITIES: 18–24 MONTHS

- Implementing cost controls and monitoring services.
- Increasing demand for services following a drastic reduction in state workforce.

STATE ISSUES

- The state has seen a substantial increase in utilization of personal care services in SFY 2009 and 2010 that is not sustainable.
- New Hampshire will continue to streamline waiver eligibility and expand the consumer-directed program.
- The state will also continue to maintain open communication with stakeholders, providers, and consumers.

STATE PROMISING PRACTICES

- New Hampshire's Transitions in Caregiving, a consumer-directed program, received national recognition from the Council of State Governments Innovations Award.

The information in this profile represents information available to state officials at a point in time. Surveys were conducted from June through September 2010. New Hampshire's fiscal year begins July 1 and ends June 30.