



January 25, 2022

Honorable Chairman Mark Pearson
House Health and Human Services and Elderly Affairs Committee
Legislate Office Building Room 205
North Main Street
Concord, NH 03301

Re: NAMI New Hampshire's support of HB 1526-FN

Dear Chairman and Members of the Committee:

Thank you for the opportunity to testify today. My name is Holly Stevens, and I am the Director of Public Policy at NAMI New Hampshire, the National Alliance on Mental Illness. NAMI NH is a non-profit, non-partisan, grassroots organization whose mission is to improve the lives of all people impacted by mental illness and suicide through support, education and advocacy. On behalf of NAMI NH, I am here today to speak in favor of HB 1526-FN, relative to income eligibility for in and out medical assistance.

When a person meets all Medicaid eligibility requirements for one of the Medicaid programs, but is over the income limit, he or she can receive partial coverage through the In and Out Medicaid program. Every month (or every six months depending on which time duration a person chooses) there is an amount that each person must incur in medical bills that reduces their net income to \$591. After they have spent enough to reach a net monthly income of \$591, Medicaid benefits are turned on for the remainder of the month. Because many of these people simply cannot survive on \$591 per month, either individuals go without necessary medical services or providers, many of them safety net providers, don't get paid for the services that are provided.

Year over year, due to inflation, the costs of all goods and services increase. Yet, the spend down threshold in NH's Medicaid In and Out program has remained stagnant. Per the bill's fiscal note, as of last October there were 6,073 Granite Staters subject to this income spend down simply to receive their necessary medical care. The fiscal note goes on to state that if HB 1526-FN were to pass, 998 of these individuals would be able to qualify for one of the other Medicaid programs without a spend down. While it may seem like a small number, for those 998 people this would make a huge difference in their lives, not only financially, but administratively as well. They would no longer have to send medical bills to DHHS to prove they had spent down to the threshold of \$591. For the remaining 5,075 people, it would mean a few extra dollars for food, gas, or rent. Under HB 1526-FN, for a household of one, the threshold would increase to \$901 and for a household of two, the threshold would increase to \$1,047. According to the 2021 New Hampshire Residential Rental Cost Survey Report, the median rent for a two-bedroom apartment in New Hampshire is \$1,498, well more than the income threshold that this bill would establish.

Not only is the Medicaid In and Out program difficult for beneficiaries, it also creates administrative burdens for both providers and the state. DHHS has to process and keep track of medical bills for each person on the program, and providers have no way of knowing when a patient's Medicaid

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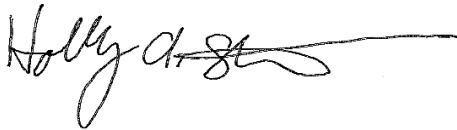
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benefit has been turned back on, without checking daily. Increasing the income limit would reduce the number of people on the program, thus leading to less administrative burden and cost to the state and its many providers who serve these patients.

For these reasons, NAMI NH strongly supports HB 1526-FN and urges the committee vote ought to pass.

Please do not hesitate to contact me if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Holly A. Stevens", with a long horizontal flourish extending to the right.

Holly A. Stevens, Esq.