



GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

Medical Care Advisory Committee



Lynnette R. Rhodes
Executive Director
Medical Assistance Plans Division

Date: 8/18/2021



Mission:

The mission of the Department of Community Health is to provide access to affordable, quality health care to Georgians through effective planning, purchasing, and oversight.



Purpose:

Shaping the future of A Healthy Georgia by improving access and ensuring quality to strengthen the communities we serve.



Agenda Topics

GA Waiver Updates

CMO Procurement Update

Public Health Emergency Update

CMO Merger (PSHP/WellCare) Update

HCBS Initial Spending Plan

Pathways to Coverage 1115 Waiver

- Waiver currently in a pending status
- Implementation delayed until the end of the calendar year
 - *Notice sent to CMS on July 27, 2021*
 - *Engaging CMS to find a mutually agreeable path forward*



Postpartum Extension 1115 Waiver

- Implemented July 1, 2021
- Continuing to work with CMS on deliverables
- CMOs currently providing extended services



Georgia Families & Georgia Families 360 Procurement

Strategy and RFP Development

- Onboard a consultant;
- Comprehensive statewide and national environmental analysis to identify best practices, innovations, and designs that should be considered for inclusion;
- Stakeholder engagement;
- RFP development



Federal Public Health Emergency

➤ **COVID-19 Vaccine-Third Dose**

- Reimbursement Rate \$40
- System modifications in progress
- Notice to Providers and Members

➤ **Staffing for Hospitals**

➤ **CMS Guidance: *Resuming Normal Operations***

- *Extension of time for states to complete pending eligibility and enrollment actions to up to 12 months after the month in which the PHE ends*



Federal Public Health Emergency

- States to resume timely processing of applications four months after the month in which the PHE ends;
- States must complete an additional redetermination prior to taking an adverse action;
- Members/Beneficiaries must have a reasonable time in which to respond to notices ;
- Hearing rights must be provided;
- States are required to take steps to transition beneficiaries determined ineligible after the PHE ends to other insurance affordability programs; and
- States should end any flexibilities that are no longer needed



WellCare/Peach State Integration

- Merger/Integration completed on May 1, 2021
- Current Enrollment Totals:

Total CMO Enrollment (8/1/2021)	1,816,192
Amerigroup	497,816
CareSource	373,400
Peach State Health Plan	944,976



HCBS Initial Spending Plan

- Section 9817 of the American Rescue Plan Act (ARPA) provided states additional funding to enhance, expand, and strengthen home and community-based services (HCBS) under the Medicaid program
- Initial Spending Plan submitted on July 12, 2021
- Pending CMS approval
- Initiatives:
 - *Develop a case management technology platform for Medicaid HCBS*
 - *Enhance the Critical Incident Management Process with Comprehensive Reporting and Dashboarding*



- *Expand HCBS Services to include Behavior Aides for Children Diagnosed with Autism*
- *Expand the use of technology to deliver HCBS*
- *HCBS provider payment rate enhancements and rate study for 1915(c) waivers*
- *Workforce development and training*
- *Assess current status of HCBS workforce retention, recruitment, and development*
- *Supported Employment Pilot Program*



Questions & Answers

Q&A Session

