



MEDICAL ASSISTANCE PLAN

Medical Care Advisory Committee Meeting

Wednesday, February 16, 2022

Remote Meeting

2 Peachtree Street

Atlanta, Georgia 30303

Minutes

- Greetings and welcome were given to all attending participants at the start of the meeting at 11:00 am.
- Agenda was approved and adopted.
- Minutes from the 4th quarter meeting held on November 17, 2021, were approved by members
- Executive Director Medical Assistance Plan Report

Lynnette Rhodes, DCH Executive Director, reported on the below reports:

- *Legislative Update:* The legislative session has started for 2022. We are reviewing proposed legislation that may impact the department benefits structure as well as any procedural changes or day-to-day operations.
 - House Bill 1013 – Mental Health Bill – the goal for this bill is to clearly define how we handle mental services in Georgia. It focuses on substance use disorder, alcohol treatment and mental health services. Its looking at the Medicaid program overall in terms of how we can focus on mental health parity. This has been an area of concern for a few years. The HB1013 is being revised so we will look at the final version and then give our feedback.
 - House Bill 1351 – A pharmacy carve out bill – The purpose of this bill is to carve out pharmacy from the CMO contracts and to have one single PBL that will perform all pharmacy related services. We will be meeting internally and reviewing that bill then giving feedback and recommendations. We will also be outlining any concerns.
 - House Bill 1276 – This bill focuses on reporting out on various statistics between the managed care entities and the department. We are looking at how to determine what length will be required.
 - Another House Bill speaks to extending the period for prior authorization for one (1) year for person with chronic conditions. DCH had internal discussions regarding any potential impact with pros or cons of going to one (1) year for persons with chronic conditions. We will continue to review the proposed legislation and report out.

- *Georgia Waiver Updates:*
 - *Pathways 1115 Waiver* – This waiver extends coverage to persons that otherwise were not eligible for Medicaid between the ages of 19 – 64 years old whose income was up to 100% FPL. This work has been placed on hold. We received notification from CMS that they were willing to approve the waiver without the qualifying activities of being a component. Based upon that, the state of Georgia has filed a lawsuit against the Biden administration.
 - *Postpartum 1115 Waiver* – We extended postpartum services for an additional four (4) months which now equates to six (6) months of coverage after the mother delivers. There are provisions under the ARPA that will allow states to transition to 12 months of postpartum services under Title 19 State Plan. We are considering next steps. Funding is emanate so we must wait until budget is finalized before publicizing.

- *Public Health Emergency (PHE):* In January, CMS extended the Public Health Emergency for another 90 days. This means that all waivers and various flexibilities CMS put in place will remain in place at least thru April 16th. CMS has instructed that they will give 60 days advance notice before the end of the PHE.

CMS outlined three (3) options in terms of how to help to prepare for the end of the PHE. The emphasis was on reviewing all our existing flexibilities and waivers and determining whether we want to:

1. Let those waivers and flexibilities expire at the end of the PHE;
2. Temporarily extend the waivers up to one (1) year;
3. Keep in place indefinitely.

Another thing that came up during talks with CMS is telehealth. Telehealth has been expanded significantly since the start of the PHE. We did include provisions in our Disaster Relief SPA regarding the expansion of telehealth services. There is no plan to reverse all the flexibilities that were put in place in respect to telehealth. We will keep them in place. We will have to make some minor changes with regards to HIPAA private standards and certain areas we want to look at to see if telehealth is appropriate.

- *Lactation Consultants:* We are preparing to add an additional practitioner type that being lactation consultants. We are preparing and developing the policy and working with CMS. In the near future the desire is to be able to enroll new practitioner as a practitioner type lactation consultant. They will be able to provide those services in various settings.

- GF 360° CMO Performance Dashboard Demonstration

- Since Georgia's inception of utilizing managed care organizations to provide care delivery to our beneficiaries, there has been an expectation from CMS to adhere to certain requirements. One of those is the publication of an

annual technical report that looks at the performance of CMOs. We strive to make it user friendly, more conducive for public viewing and public facing. We developed out our first visualization tool and dashboard that went live last Summer. Looking at the performance of our CMO for our Georgia Family population, the dashboard presentation was given containing the GF 360° population from a contractual relationship with Amerigroup. The Quality Performance Dashboard for GF 360° was presented reflecting the evaluation performance levels and to provide an objective comparative review of the CMOs quality of care outcomes and performance measure rates.

We hope to go live in the next quarter it is still going thru the review process. Our plans are to move forward, over a period of time, with additional dashboards in terms of our CHIP population and Peachcare for Kids.

- Announcements/Information

- Next MCAC meeting May 18, 2022 (Location TBD)

Adjournment at 11:48 am