

Board of Community Health  
Meeting  
January 14, 2021

**Members Present**

Norman Boyd  
Roger Folsom  
Mark Trail  
David Crews  
Russ Childers  
Russell Crutchfield  
Anthony Williamson

**Members Absent**

Kenneth Davis

The Board of Community Health held its meeting via WebEx teleconference. (An agenda and a List of Attendees are attached hereto and made an official part of these Minutes as Attachments #1 and #2). Chairman Norman Boyd presided and called the meeting to order at 10:31 a.m.

**Minutes**

The Minutes of the December 10, 2020 meeting were unanimously approved.

**Commissioner's Report**

Commissioner Berry thanked the Board, members of the public and staff for their participation via WebEx.

Commissioner Berry updated the Board on the following:

- Staff Augmentation
  - Continuous push for funding
- Hospital capacity is limited across the state.
- Governor Brian P. Kemp and Dr. Kathleen Toomey's guidance reminders:



Lynnette Rhodes, Executive Director, Medical Assistance Plans and Ronald Wakefield, Director of Developmental Disability Services, with the Department of Behavioral Health and Developmental Disabilities (DBHDD) jointly presented to the Board for final

adoption the Comprehensive Supports Waiver Program (COMP), Waiver Renewal; New Options Waiver Program (NOW), Waiver Amendment Public Notice.

Pending final adoption from the Board and approval from the Centers for Medicare and Medicaid Services (CMS), DCH proposed to amend the Comprehensive Supports Waiver (known as the COMP waiver) and the New Options Waiver (known as the NOW).

The COMP Waiver and the NOW programs provide community-based services to individuals with intellectual and/or developmental disabilities. Both are 1915 (c) Medicaid waivers which must be renewed every five years.

The COMP Waiver expires on April 1, 2021 and must be renewed. While the NOW will not expire on the same date, the waiver will be amended to incorporate all applicable changes.

DCH is proposing the following changes to the COMP Waiver and NOW Programs:

- Allow two services with low utilization to expire (COMP and NOW)
  - Community Guide Services
  - Natural Support Training
- Add one new service (COMP and NOW)
  - Assistive Technology
- Increase the rate of one service (COMP and NOW)
  - Interpreter Services
- Remove participant direction (self-direction) as a service model for two services (COMP and NOW)
  - Behavior Support
  - Supported Employment
- Set maximum daily authorization limits for two services when provided in Community Living settings (applies to COMP only)
  - Additional Staffing Services (basic and enhanced)
  - Skilled Nursing Services: Registered Nurse (RN) and Licensed Practical Nurse (LPN)

An opportunity for public comment was held on November 18, 2020 at 10:30 a.m., via WebEx. Written comments were accepted on or before December 14, 2020.

Oral comments received:

We received 25 oral comments from family members as well as friends and advocates of Comprehensive Supports Waiver and New Options Waiver program members. All of

the oral comments presented were in opposition to the proposed maximum caps to Skilled Nursing Services and Additional Staffing.

Written comments received:

We received 218 written comments all of which were in opposition to the proposed changes in the COMP Waiver Renewal Application. Approximately 126 were from distinct family households which included comments from parents of a waiver member as well as other family members. Comments were submitted by family members, friends of waiver participants and their families, advocates, providers, and one teacher.

Note: Written comments were submitted to DCH, DBHDD, individual staff and Board members; thus there may be some duplication.

Eight advocacy organizations submitted written comments either individually or in group submissions. The submissions from advocacy agencies pointed to concerns about:

- The proposed 16-hour cap to Skilled Nursing Services;
- The proposed 6-hour cap to Additional Staffing services in Community Living Support (CLS) settings;
- The elimination of CLS services as an option for people who require more than a total of 12 combined daily hours of (CLS) services and Additional Staffing services; and
- The revised definition of CLS services as follows:

“Community Living Support services is available for individuals who spend periods of time throughout the day with unpaid unsupervised supports and services.”

**Public Comments Specific to Each Proposed Change:**

**Allow to Expire**

Community Guide Services

DCH proposed to allow this service to expire due to low utilization. Community Guide Services provide assistance to waiver members in managing self-directed services and responsibilities.

Public Comment Summary:

- One family member opposed the elimination of Community Guide Service, stating that it had been most helpful as he learned how to navigate self-directing services.

DCH Response:

- Support Coordination and Fiscal Support Services agencies will provide the functions of Community Guide.

#### Natural Support Training

DCH proposed to allow this service to expire because of low utilization. The service can be alternatively provided through other available waiver services.

Public Comment Summary:

- There was one comment received from a family member living in a rural area of Georgia in opposition to eliminating this service.

DCH Response:

- Natural Support Training can be provided through other available waiver services including Nursing Services, Community Living Services and Behavior Support Services.

#### **Add a New Service:**

##### Assistive Technology

DCH proposed to add Assistive Technology as a new service to the COMP Waiver.

Public Comment Summary:

- There was one response in favor of adding Assistive Technology as a wavier service.

DCH Response:

- The Department appreciates the support and thanks the commenter for their response.

#### **Rate Increase:**

##### Interpreter Services

DCH proposed to increase the 15-minute unit rate for Interpreter Services from \$19.38 to \$23.35 per 15-minute unit. There is no expected fiscal impact.

Public Comment Summary:

- There was no public comment submitted for this proposed change.

DCH Response:

- The Department appreciates the support and thanks the commenter for their response.

The Board posed a question regarding the fiscal impact. Specifically, clarification on why there would not be a fiscal impact. DCH explained that the impact would be offset by the reduction in other services. DCH further explained that there is a maximum number of units that can be provided, and the maximum number of units has not changed despite the rate increase.

**Raise the eligibility age for waiver admission:**

DCH proposed to increase the minimum age of admission to age five from age three.

Public Comment Summary:

- One submission opposed the increase in minimum age at waiver admission from 3 years to 5 years.

DCH Response:

- The proposed change has no impact on current waiver members since there are no members under age five.

**Remove participant direction (self-direction) as a service model for two services:**

Behavior Supports Services

DCH proposed to remove the participant direction service delivery option for Behavior Supports Services.

Public Comment Summary:

- Four family members opposed the removal of self-direction as a service delivery option. One family member spoke to the challenges in locating enrolled providers in rural areas of Georgia.

DCH Response:

- The Operating Agency, DBHDD, is committed to assigning regional staff and support coordination to assist in locating behavior support providers in rural areas if the member or family experiences challenges.

The Board posed questions regarding ongoing assistance for members. DCH and DBHDD assured the Board they would be notified if we encountered any problems or if additional changes are made in this area.

### Supported Employment Services

DCH proposed to remove the participant direction service delivery option for this service.

Public Comment Summary:

- There was no public comment submitted for this proposed change.

### **Set maximum daily authorization for two services when provided in family or waiver member individual homes:**

#### Additional Staffing in Community Living Support Services (CLS) settings

Additional Staffing services are used to supplement staff hours when the waiver member needs exceed the maximum allowed units available through other waiver services. DCH proposes a daily maximum for Additional Staffing that can be rendered in a family or individual home to a maximum of 6 hours per day.

#### Skilled Nursing Services in Community Living Support Services (CLS) settings

Skilled nursing services are provided to meet the medical needs of individuals receiving COMP services. DCH proposes to add a 16-hour maximum authorization per day when Skilled Nursing Services are provided in a family or individual member home.

The public comment summary for these two changes were combined. Over 200 submissions expressed opposition to the reduction in maximum hourly caps. A sample of common concerns are listed below:

- Members were concerned that their freedom of choice of where they can live would be taken away.
- Members were concerned that they would be forced to relocate to a group home setting or obtain a roommate because of their intense and acute needs. Further, members were concerned that group home settings or roommate living was detrimental either to their own health or those they were living with.
- Members expressed concerns that they were not candidates for group home settings as the group homes for which they applied could not guarantee that their physical and safety needs could be met.
- Members expressed concerns that their families have little to no control in a Community Residential Alternative (CRA) or host home setting.
- Parents of members indicated that they were in their 80s or older and are no longer physically able to solely care for their children or siblings.

- Concerns were expressed that the most vulnerable people deserve to make life choices and to thrive in their own homes which is what the COMP Waiver was designed to accomplish.

DCH Response:

- DCH and DBHDD proposed the following exception criteria to the limits proposed for Additional Staffing and Skilled Nursing Services. The proposed exception criteria will respond to most if not all of the concerns submitted through public comment, particularly exception criteria #4. The proposed criteria are as follows:
  1. Waiver individual has an active criminal court order which requires specific staffing requirements beyond the scope of traditional CLS, Community Access Group (CAG), or CRA services.
  2. Waiver individual has transitioned from an ICF-ID or other institution within the past six months and clinically assessed transition needs necessitate additional staffing.
  3. Waiver individual is in the process of transitioning from a crisis home or other crisis setting and has an assessed need for additional staffing for whom a CRA placement is not available.
  4. Waiver individual has a documented history of being incapable of living with others due to challenging behavior(s) that present significant risk to him/herself or others, as validated by a DBHDD completed clinical assessment.

The Board posed several questions regarding the service limits.

1. Have the tools used for the assessment changed? DBHDD indicated that the tools used for the assessment have not changed.
2. Is there a reason why we incorporated service limits with exceptions instead of defining level of care and medical necessity criteria? DBHDD explained that based upon its review of current utilization, the agency would face significant challenges in sustaining the program if service limits were not instituted.
3. Will CMS allow exceptions? DCH explained that CMS provided guidance indicating that exceptions were permissible.
4. How will DCH proceed if CMS does not approve the proposed exceptions? Does CMS require DCH Board approval? DCH explained that CMS requires the agency to complete the Public Notice process.
5. What changes, if any, has DCH made in response to the public comments received? DCH acknowledged that our members will need a significant amount of time to transition in response to the proposed waiver changes. As a result, DCH has proposed a transition period of 24 months instead of 18 months, subject to CMS approval. DBHDD will designate a Utilization Manager to assist Regional Field Office staff in working with individuals

and/or guardians in transition planning. Individuals receiving more than six hours daily of Additional Staffing in their own or family-owned home will be assessed for the presence of exception criteria defined in the waiver application. Exception criteria assessments will be completed within six months of the renewal waiver approval to allow time for interviewing family or other knowledgeable historians about previous experience with congregate living arrangements, reviewing historical behavior assessments, functional or nursing assessments and other related information that can provide full understanding of exception criteria application. Additionally, shared community living supports is an available option. Shared community living supports allows two or three waiver members to share one staff person. This will allow a greater number of services as members are sharing staff.

The Board expressed concerns that Georgia could not force members into a more restrictive environment of care based upon financial or budgetary concerns. In response, DBHDD explained that there will be members who will be able to continue with their current living situation. DBHDD acknowledged that there will also be members who will be required to change their living situation and may be required to live in a group home setting or a host home. DBHDD further discussed the proposed transition period of potentially 24 months.

The Board asked if our approach is consistent with other states. DBHDD informed the board that the approach that Georgia is taking with respect to the proposed waiver changes is consistent with other states.

Mark Trail MADE a MOTION to “table” the Comprehensive Supports Waiver Program (COMP), Waiver Renewal; New Options Waiver Program (NOW), Waiver Amendment Public Notice **to allow the Department an opportunity to obtain additional guidance from CMS.** Russell Crutchfield SECONDED the MOTION. ON THE MOTION, the yeas were 7, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Comprehensive Supports Waiver Program (COMP), Waiver Renewal; New Options Waiver Program (NOW), Waiver Amendment Public Notice is attached hereto and made an official part of these minutes as Attachment #3).

### **New Business/Closing Comments**

On behalf of the Board, Chairman Boyd thanked the Department and others for the hard work done for the state of Georgia during this pandemic.

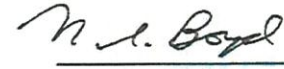
### **Adjournment**

There being no further business to be brought before the Board, Chairman Norman Boyd adjourned the meeting at 11:18 a.m.



THESE MINUTES ARE HEREBY APPROVED AND ADOPTED THIS THE 8<sup>th</sup> DAY OF April, 2021.

  
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Roger Folsom  
Vice-Chairman

  
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Norman Boyd  
Chairman

Official Attachments:

- #1 Agenda
- #2 List of Attendees
- #3 Comprehensive Supports Waiver Program (COMP), Waiver Renewal; New Options Waiver Program (NOW), Waiver Amendment Public Notice