

Board of Community Health
Meeting
May 12, 2022

Members Present

Norman Boyd
Roger Folsom
Russell Crutchfield
David Crews
Anthony Williamson
Nelva Lee
Cynthia Rucker
Kenneth Davis (delayed)

Members Absent

The Board of Community Health held its meeting via Zoom 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 10:30 a.m.

Minutes

The Minutes of the March 10, 2022 meeting were unanimously approved.

Opening Comments

Committee appointment by Chairman Boyd: David Crews, Audit Committee Chairman. Mr. Crews accepted.

Care Management Meeting

Anthony Williamson, Care Management Committee Chairman provided the following updates:

- Public Health Emergency (PHE) unwinding
- Care Management Organization (CMO) procurement update
- Value based purchasing
- CMO Performance Analysis Dashboard Georgia Families 360

Commissioner's Report

Commissioner Noggle thanked the Board, members of the public and staff for their participation via Zoom.

The following updates were provided to the Board:

- Working diligently to analyze bills that passed out of the legislative session, in addition to things that might be included in the budget.
- Six of the seven agenda items being presented today are contingent on final approval of the budget.
- We anticipate additional items from either legislative, budget or other projects will result in two Board meetings in June.
- Efforts to initiate a new set of directed payment programs:
 - Advance Innovation to Deliver Equity (AIDE) was considered earlier this spring by the Board and has been submitted to CMS for their consideration.
 - This Board will ultimately provide significant new Medicaid funding to our hospitals and providers across the state with a specific emphasis and benefit to our rural hospitals. Directed Payments for Private Hospitals (DPP) program renewals have been submitted.
 - In early June will bring Georgia STRONG, which is a program that will benefit our teaching hospitals.
 - Additionally, an extension of that public hospital directed payment program to include our private hospitals and then some other rule and language changes related to our Disproportionate Share Hospital (DSH) methodology.
- Working on a new upper payment limit program (UPL) for our ambulance providers.
- Managed care re-procurement:
 - Moving beyond our initial early analysis and conversation.
 - Anticipating issuing a request for information (RFI), at the very end of May or early June.
 - Interested parties, potential bidders, advocacy organizations and others will have an opportunity to provide input.
 - We will also be reaching out to have some specific stakeholder engagement conversations and inviting others, inclusive of our sister agencies to engage in a dialogue with us about what's working and what's not working.
- Public health emergency (PHE):
 - CMS issued guidance this week reaffirming its commitment to give 60 days' notice before they terminate the PHE, currently slated to end July 15.
 - We will take the steps necessary in conjunction with the Department of Human Services (DHS) and the Division of Family and Children Services (DFCS), which handles the eligibility redetermination for our Medicaid members.
 - There will be a very large communication effort to our members encouraging them to update their contact information in a timely manner.
- On April 21, 2022, Governor Brian P. Kemp issued an executive order creating the Healthcare Workforce Commission, an important effort and initiative.
 - The order states the Commissioner of the Department of Community Health will serve as the Chair, so I look forward to that opportunity.

- The additional 14 members will be appointed to the Commission in the coming weeks.
- Will work with the Georgia Board of Healthcare Workforce and the Office of Healthcare Strategy and Coordination.
- By December, tasks and specific tangible recommendations will be developed to lead to an improvement in our workforce pipeline, including retention and the resilience of our current workforce.
- Recent staff engagement opportunities:
 - In April, approximately, 20 to 25 staff joined me for Georgia State University (GSU) Cares Day volunteering at the Atlanta Community Food Bank.
 - During the first week in May, we celebrated Public Employee Recognition Week.
Special kudos to our human resources and communications teams for organizing so many events that week.
 - 49 DCH staff members and their friends and family joined me and participated in a fundraiser run-walk event that supported the Grady Health Foundation.

We received an award for the largest team in addition to raising just over \$5,200.
- Recognition for employees' years of service milestones.

Lynnette Rhodes, Executive Director, Medical Assistance Plans presented to the Board for initial adoption the Medical Assistance Plans, State Plan Amendment: Eliminate attestation and reimburse all eligible providers at enhanced rates Public Notice.

Pending enactment of HB 911, and approval by the Centers for Medicare and Medicaid Services (CMS), the Department of Community Health (DCH) proposed to eliminate the attestation requirements and reimburse all eligible providers at the enhanced rates for claims with dates of service beginning July 1, 2022, and after.

As background, the Affordable Care Act (ACA) allowed enhanced rates for physicians with a primary specialty designation of family medicine, general internal medicine, or pediatric medicine during calendar years 2013 and 2014. The enhanced rates were effective for dates of service beginning January 1, 2013, through December 31, 2014, and applied to both Fee-for-Service (FFS) and managed care.

The codes that were eligible for the enhanced rates included 99201- 99499 to the extent the codes were covered under the state plan. Subspecialists within the three primary care categories were also eligible for the enhanced rates as well as non-physician practitioners such as physician extenders or mid-levels (physician assistants, nurse practitioners, and nurse midwives) if they practiced under the supervision of an eligible physician.

In order to receive the enhanced rates, physicians and physician extenders were required to attest that they met the requirements outlined under the ACA. Physicians

were required to attest that they were Board certified in the designated specialties and subspecialties. Alternatively, physicians who were not Board certified attested to having at least 60 percent of all codes billed by the physician, for the previous calendar year, for Evaluation and Management (E&M) Codes and vaccine administration codes. New providers who were not Board certified could attest that they had an expectation that at least 60 percent of their codes billed during the calendar year of enrollment would be for E&M codes and/or vaccine administration codes.

The enhanced rates under the ACA ended on December 31, 2014. Subsequently, the Department was appropriated funds to continue the enhanced rates and additional rate increases for three consecutive fiscal years. The rate increases were implemented through appropriations in HB 76 (SFY2016), HB 751 (SFY2017) and HB44 (SFY2018). The enhanced rates were only allowed for those providers who previously attested under the ACA and for providers who were newly licensed and new to Georgia Medicaid as of January 1, 2015.

Effective July 1, 2022, the Department is eliminating the attestation requirements and is increasing the reimbursement rates of all currently enrolled eligible providers, that failed to attest, and that fall within the eligible specialty and subspecialty designations. This applies to physicians and physician extenders. Newly enrolled providers that fall within the specialty and subspecialty designations will also receive the enhanced rates.

Program	State Funds	Federal Funds	Total Funds
Aged, Blind, and Disabled (ABD)	\$18,894,899	\$39,743,937	\$58,638,836
Low Income Medicaid (LIM)	\$61,911,571	\$120,288,460	\$182,200,031
Peachcare for Kids (PCK)	\$2,864,224	\$9,175,390	\$12,039,614
Total	\$83,670,694	\$169,207,787	\$252,878,481

An opportunity for public comment will be held on May 17, 2022 at 11:30 a.m. via Zoom. Written comments are due on or before May 24, 2022.

Ms. Rhodes respectfully asked for the Board’s favorable consideration of initial adoption.

Cynthia Rucker MADE a MOTION to approve for initial adoption the Medical Assistance Plans, State Plan Amendment: Eliminate attestation and reimburse all eligible providers at enhanced rates Public Notice. Russell Crutchfield SECONDED the MOTION. ON THE MOTION, the yeas were 7, nays 0, abstained 1 (Kenneth Davis), and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, State Plan Amendment: Medical Assistance Plans, State Plan Amendment: Eliminate attestation and reimburse all eligible providers at enhanced rates Public Notice is attached hereto and made an official part of these minutes as Attachment #3).

Kim Morris, Director of Reimbursement, Financial Management Division presented to the Board for initial adoption the Medical Assistance Plans, Increase Rate for Select Obstetrics and Gynecology (OBGYN) Codes Public Notice.

Pending enactment of HB 911 and Centers for Medicare and Medicaid Services approval, a rate increase for select Obstetrics and Gynecology (OBGYN) codes to 2020 Medicare reimbursement rates effective July 1, 2022. This rate increase in Obstetrics and Gynecology (OBGYN) codes will enhance the changes presented by Ms. Rhodes related to physician enhanced rates.

Included in the briefing document and public notice is a listing of the select codes and the corresponding rate increases.

	State Fund	Federal Fund	Total Fund
SFY 2023	\$787,277	\$1,656,165	\$2,443,442

An opportunity for public comment will be held on May 16, 2022 at 1:00 p.m. via Zoom. Written comments are due on or before May 23, 2022.

Ms. Morris respectfully asked for the Board's favorable consideration of initial adoption.

Roger Folsom MADE a MOTION to approve for initial adoption the Medical Assistance Plans, Increase Rate for Select Obstetrics and Gynecology (OBGYN) Codes Public Notice. David Crews SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, Increase Rate for Select Obstetrics and Gynecology (OBGYN) Codes Public Notice is attached hereto and made an official part of these minutes as Attachment #4).

Kim Morris, Director of Reimbursement, Financial Management Division presented to the Board for initial adoption the Medical Assistance Plans, State Plan Amendment: Nursing Home Mechanical Ventilator Care Program Public Notice.

Pending enactment of HB 911 and Centers for Medicare and Medicaid Services approval, an increase in the mechanical ventilator per diem from \$589.62 per day to \$707.54 per day effective July 1, 2022.

In FY 2010, the Department established a specialized, cost-based, reimbursement rate to pay qualified nursing facilities for the specialized care of ventilator-dependent residents.

	State Funds	Federal Funds	Total Funds
SFY 2023	\$1,696,660	\$3,327,503	\$5,024,163

Ms. Morris received a question from Board member, Russell Crutchfield. Mr. Crutchfield asked if the rate increase covers COVID 19 patients on ventilators.

Response: Yes, the rate increase covers all patients on a ventilator residing in a nursing home, if a COVID 19 patient is in a nursing home and on a ventilator, they would be covered.

An opportunity for public comment will be held on May 18, 2022 at 11:00 a.m. via Zoom. Written comments are due on or before May 25, 2022.

Ms. Morris respectfully asked for the Board's favorable consideration of initial adoption.

Nelva Lee MADE a MOTION to approve for initial adoption the Medical Assistance Plans, State Plan Amendment: Nursing Home Mechanical Ventilator Care Program Public Notice. Cynthia Rucker SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, State Plan Amendment: Nursing Home Mechanical Ventilator Care Program Public Notice is attached hereto and made an official part of these minutes as Attachment #5).

Kim Morris, Director of Reimbursement, Financial Management Division presented to the Board for initial adoption the Medical Assistance Plans, Increase Rate for Long-Term Acute Care (LTAC) Hospitals and Inpatient Rehabilitation Facilities Public Notice.

Pending enactment of HB 911 and Centers for Medicare and Medicaid Services approval, a ten percent (10%) increase to Long-Term Acute Care Hospitals (LTAC) and Inpatient Rehabilitation Facilities (IFR) reimbursement rates effective July 1, 2022.

Included in the briefing document and public notice is a list of Long-Term Acute Care Hospitals (LTAC) and Inpatient Rehabilitation Facilities (IFR) and the corresponding increased rates by hospital and facility.

	State Funds	Federal Funds	Total Funds
SFY 2023	\$1,438,651	\$3,026,436	\$4,465,087

An opportunity for public comment will be held on May 18, 2022 at 1:00 p.m. via Zoom. Written comments are due on or before May 25, 2022.

Ms. Morris respectfully asked for the Board's favorable consideration of initial adoption.

Russell Crutchfield MADE a MOTION to approve for initial adoption the Medical Assistance Plans, Increase Rate for Long-Term Acute Care (LTAC) Hospitals and Inpatient Rehabilitation Facilities Public Notice. Roger Folsom SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, Increase Rate for Long-Term Acute Care (LTAC) Hospitals and Inpatient Rehabilitation Facilities Public Notice is attached hereto and made an official part of these minutes as Attachment #6).

Kim Morris, Director of Reimbursement, Financial Management Division presented to the Board for initial adoption the Medical Assistance Plans, Increase Rate for Dental Extraction Codes and Specific Restorative Codes Public Notice.

Pending enactment of HB 911 and Medicare and Medicaid Services approval, a ten (10%) percent rate increase for two dental extraction codes and a seven (7%) percent rate increase for seventeen specific dental restorative codes effective July 1, 2022.

Included in the briefing document and public notice is a listing of the select dental codes and the corresponding rate increases.

SFY 2023	State Funds	Federal Funds	Total Funds
Aged, Blind and Disabled (ABD)	\$208,186	\$437,953	\$646,139
Low Income Medicaid (LIM)	\$921,790	\$1,939,135	\$2,860,925
PeachCare (PCK)	\$108,417	\$228,073	\$336,490

An opportunity for public comment will be held on May 19, 2022 at 1:00 p.m. via Zoom. Written comments are due on or before May 26, 2022.

Ms. Morris respectfully asked for the Board's favorable consideration of initial adoption.

David Crews MADE a MOTION to approve for initial adoption the Medical Assistance Plans, Increase Rate for Dental Extraction Codes and Specific Restorative Codes Public Notice. Nelva Lee SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, Increase Rate for Dental Extraction Codes and Specific Restorative Codes Public Notice is attached hereto and made an official part of these minutes as Attachment #7).

Brian Dowd, Deputy Executive Director, Medical Assistance Plans Division presented to the Board for initial adoption the Medical Assistance Plans, Behavioral Support Services-Service Establishment Public Notice.

Pending enactment of HB 911, and approval by the Centers for Medicare and Medicaid Services (CMS), the Department of Community Health (DCH) is proposing effective July 1, 2022 to establish a new service known as Behavioral Support Services for children and youth under age 21.

Behavioral Support Services will be a stand-alone service within GAPP as well as a key service included in a larger package of services under development by DCH that will encompass Therapeutic Services for children and youth.

Behavioral Support Services are one-to-one, face-to-face, behavior management intervention and stabilization services in home or community settings designed to teach and reinforce behavioral goals through training and direct support. Behavioral Support Services are designed for children and youth who meet serious emotional disturbance, autism spectrum disorder, traumatic brain injury and/or other developmental criteria with behavioral symptoms. Services will be authorized according to medical necessity criteria via prior authorization.

Behavioral Support Services are provided by a trained and supervised behavioral aide. The aides work with the member, family members, caregivers, teachers and other key individuals that are part of a member’s life in order to meet plan of care treatment goals.

The rate of reimbursement is funded in accordance with the DCH American Rescue Plan of 2021 (ARP) and supported ongoing by State appropriations with enactment of HB 911.

Proposed July 1, 2022 rates are \$6.63 per 15 minute unit provided under billing code S9122 U1.

SFY 2023			
Program	State Funds (ARP)	Federal Funds	Total Funds
Aged, Blind and Disabled (ABD) Medicaid	\$17,079,021	\$35,924,381	\$53,003,402

An opportunity for public comment will be held on May 19, 2022 at 11:00 a.m. via Zoom. Written comments are due on or before May 26, 2022.

Mr. Dowd respectfully asked for the Board’s favorable consideration of initial adoption.

Cynthia Rucker MADE a MOTION to approve for initial adoption the Medical Assistance Plans, Behavioral Support Services-Service Establishment Public Notice. Russell

Crutchfield SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, Behavioral Support Services-Service Establishment Public Notice is attached hereto and made an official part of these minutes as Attachment #8).

Brian Dowd, Deputy Executive Director, Medical Assistance Plans Division presented to the Board for initial adoption the Medical Assistance Plans, Georgia Pediatric Program (GAPP) Rate Increase Public Notice.

Pending DCH Board approval, the Department of Community Health (DCH) is proposing an increase in rates of reimbursement for pediatric in-home skilled nursing covered by GAPP. The increase in rates of reimbursement is funded in accordance with the DCH American Rescue Plan of 2021 (ARP) and supported ongoing by State appropriations with enactment of HB 911 effective July 1, 2022.

DCH proposed to increase the rate of reimbursement for registered nurses and Licensed Practical Nurses within GAPP by 10%. Code S9123 for RNs would increase from \$10.63 per 15-minute unit to \$11.69 per 15-minute unit. Code S9124 for LPNs would increase from \$9.31 per 15-minute unit to \$10.24 per 15-minute unit.

SFY 2023			
Program	State Funds (ARP)	Federal Funds	Total Funds
Aged, Blind and Disabled (ABD) Medicaid	\$2,841,144	\$5,732,011	\$8,573,155

An opportunity for public comment will be held on May 20, 2022 at 10:30 a.m. via Zoom. Written comments are due on or before May 27, 2022.

Mr. Dowd respectfully asked for the Board's favorable consideration of initial adoption.

Roger Folsom MADE a MOTION to approve for initial adoption the Medical Assistance Plans, Georgia Pediatric Program (GAPP) Rate Increase Public Notice. David Crews SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, Georgia Pediatric Program (GAPP) Rate Increase Public Notice is attached hereto and made an official part of these minutes as Attachment #9).

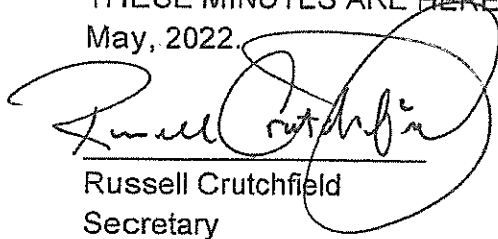
New Business/Closing Comments

Chairman Norman Boyd publicly recognized former Board member Russ Childers' years of service on the Board of Community Health and shared a recognition from Governor Brian P. Kemp's office.

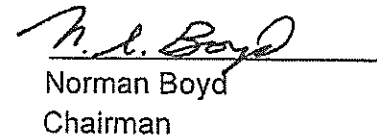
Adjournment

There being no further business to be brought before the Board, Chairman Norman Boyd adjourned the meeting at 11:12 a.m.

THESE MINUTES ARE HEREBY APPROVED AND ADOPTED THIS THE 12th DAY OF May, 2022.



Russell Crutchfield
Secretary



Norman Boyd
Chairman

Official Attachments:

- #1 Agenda
- #2 List of Attendees
- #3 Medical Assistance Plans, State Plan Amendment: Eliminate attestation and reimburse all eligible providers at enhanced rates Public Notice
- #4 Medical Assistance Plans, Increase Rate for Select Obstetrics and Gynecology (OBGYN) Codes Public Notice
- #5 Medical Assistance Plans, State Plan Amendment: Nursing Home Mechanical Ventilator Care Program Public Notice
- #6 Medical Assistance Plans, Increase Rate for Long-Term Acute Care (LTAC) Hospitals and Inpatient Rehabilitation Facilities Public Notice
- #7 Medical Assistance Plans, Increase Rate for Dental Extraction Codes and Specific Restorative Codes Public Notice
- #8 Medical Assistance Plans, Behavioral Support Services-Service Establishment Public Notice
- #9 Medical Assistance Plans, Georgia Pediatric Program (GAPP) Rate Increase Public Notice