

Board of Community Health
Meeting
December 20, 2019

Members Present

Norman Boyd
Allana Cummings
Roger Folsom
Anthony Williamson
Mark Trail
David Crews
Russell Crutchfield
Kenneth Davis

Members Absent

Russ Childers

The Board of Community Health held a special called meeting at the Department of Community Health (DCH), 5th Floor Board Room, 2 Peachtree Street, N.W., Atlanta, Georgia. (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 1:30 p.m.

Minutes

None to approve.

Opening Comments

None to report.

Committee Reports

None to report.

Commissioner's Report

None to report.

Blake Fulenwider, Chief Health Policy Officer presented to the Board for final adoption the Georgia Pathways to Coverage 1115 Waiver Public Notice.

Pending CMS approval, the Georgia Pathways to Coverage five-year demonstration waiver would be effective July 1, 2021.

The projected total cost of the Demonstration is an estimated \$1,254,922,413. The

Department of Community Health (DCH) intends to request 90 percent Federal Medical Assistance Percentage (FMAP) for expenditures under the Demonstration Waiver. He further noted that the existing Demonstration application does not include a budget cap.

Opportunities for Public Comment were held at six geographically-diverse locations across the state from November 7, 2019 through November 22, 2019. Dates and locations were identified as follows:

- Savannah, Georgia November 7, 2019
- Macon, Georgia November 13, 2019
- Bainbridge, Georgia November 14, 2019
- Gainesville, Georgia November 18, 2019
- Rome, Georgia November 21, 2019
- Kennesaw, Georgia November 22, 2019

A total of 126 individuals attended the six hearings; forty-two (42) individuals provided oral testimony. Individuals testified on behalf of themselves as citizens of Georgia and on behalf of the following organizations:

- Step Up Savannah
- Georgia Legal Services
- Georgia Council on Substance Abuse
- Georgians for a Healthy Future
- Middle Georgia Medical Society
- J's Place Recovery
- Georgia Primary Care Association
- Northeast Georgia Health System
- National Multiple Sclerosis Society
- Georgia Interfaith Public Policy Center
- Mercy Care
- Georgia Mountains Health Services
- Planned Parenthood Southeast
- Community Catalyst
- Georgia Society of Clinical Oncology
- Georgia Budget and Policy Institute
- Georgia Advocacy Office
- National Alliance on Mental Illness
- New Georgia Project
- Recovery Bartow
- American Lung Association

In addition, 827 written comments were received. Written comments are aggregated with oral comments and address five broad topic areas:

- Program Goals
- Eligibility Criteria
- Benefits
- Premiums and Copayments
- Other

Mr. Fulenwider provided an overview of each topic area beginning with Program Goals. Many commenters encouraged the Department to expand Medicaid coverage up to 138% of the Federal Poverty Level (FPL) as prescribed by the Affordable Care Act (ACA). Mr. Fulenwider clarified that the authorizing legislation under the Patients First Act does not permit expansion of eligibility criteria up to 138% FPL. He further described the program design under the Georgia Access 1332 Waiver to address coverage for Georgians between 100 – 138% FPL who may be eligible for subsidized coverage. Mr. Fulenwider also confirmed the state is seeking 90% FMAP for benefits under the Georgia Pathways to Coverage Waiver.

Mr. Fulenwider then addressed comments related to eligibility criteria proposed under the Demonstration Waiver. Commenters raised concerns regarding the work and employment-related qualifying activity requirement, noting that some populations may face challenges in meeting such requirements. Some commenters expressed full support of proposed eligibility criteria. Mr. Fulenwider responded that the intent of the Demonstration Waiver is to work in conjunction with the Georgia Access 1332 Demonstration Waiver and that the goal is to increase, not decrease, access to Medicaid for eligible Georgians. He clarified that the Department is proposing a change to the Waiver application based upon public feedback: Eligible Georgians who meet the 80 hour per month qualifying activity requirement through part time work and part time education would maintain eligibility so long as the cumulative 80 hour per month requirement is met.

Next, Mr. Fulenwider addressed concerns regarding benefits. He noted that commenters raised concern with the proposal to waive Non-Emergency Medical Transportation (NEMT), retroactive eligibility and presumptive eligibility. Other commenters asked the state to consider addition of new benefits not included in the Medicaid State Plan. Other commenters suggested that the benefit package available under the Health Insurance Premium Payment (HIPP) program may be too restrictive. Mr. Fulenwider responded that the goal of the Georgia Pathways to Coverage Demonstration is to align benefits more closely to what is typically available in the commercial market; the proposed benefit package is a key policy component of the proposed Demonstration Waiver.

With respect to premiums and copayments, Mr. Fulenwider noted concerns raised by commenters that Georgia Pathways to Coverage participants may not be able to afford

paying monthly premiums or other cost-sharing obligations, thus causing individuals to lose coverage. He noted other concerns raised regarding the enhanced copayment required for non-emergency use of the Emergency Room. Mr. Fulenwider responded by noting that proposed premium and cost-sharing obligations are consistent with federal regulations that allow financial responsibility of individuals up to 5% of household income, and that other Georgia Medicaid programs also have cost-sharing requirements. He further clarified that no cost-sharing is required for appropriate utilization of the Emergency Room, and for non-emergency encounters, cost-sharing could be reimbursed through the member's Healthy Rewards Account. Furthermore, under federal law, a copayment may not be a *requirement* in order to access services in an Emergency Department.

Lastly, Mr. Fulenwider addressed other concerns raised by commenters. He noted that some commenters stated the administrative burden for individuals and the state, in terms of verification of compliance with Georgia Pathways requirements, would be burdensome. Further, some commenters asked the state to include Grady Health System's "Healthy Georgia Solution" within the Demonstration. He noted other concerns raised by existing Medicaid beneficiaries that access to providers could be negatively impacted through increased enrollment in Georgia Medicaid, as well as those who are concerned about the high rate of uninsured children in the state. He noted other comments raising concern about maintenance of Mental health parity. Mr. Fulenwider also acknowledged several other comments that are not relevant to the Georgia Pathways to Coverage Demonstration, as well as other concerns that do not concern the Demonstration proposal but are rather operational considerations for future implementation activities.

Mr. Fulenwider responded by noting that qualifying activities proposed in the Demonstration Waiver largely mirror the Temporary Assistance for Needy Families (TANF) program through the Department of Family and Children Services. He further noted administrative efficiencies in doing so as technology currently exists to facilitate operations of the program. He further noted multiple avenues that will be available to Georgia Pathways participants to meet qualifying activity reporting requirements.

Regarding the Grady Health System's "Healthy Georgia Solution," Mr. Fulenwider acknowledged Grady for their extensive work in developing the proposal. He noted that state wideeness is a key consideration for the Georgia Pathways Demonstration; therefore, the Grady proposal has not been incorporated into the Demonstration.

Regarding benefits, Mr. Fulenwider noted that covered services mirror the existing Medicaid State Plan for Georgia Pathways participants with the exception of NEMT. The state is seeking to align covered benefits to what is widely available to commercial consumers in the market, therefore, NEMT services are not included as a covered

benefit. With regard to Mental health parity, Mr. Fulenwider noted that all state Medicaid programs are required to comply with federal Mental health parity rules and the Georgia Pathways Demonstration would therefore be required to maintain mental health parity.

With regard to access and coverage of existing populations, Mr. Fulenwider stated the Department monitors provider GeoAccess measures on an ongoing basis and requires corrective action when deficiencies are identified. With respect to uninsured Children, he further clarified that Medicaid and PeachCare for Kids (CHIP) remains available to eligible children and youth up to age 19; the Georgia Pathways program does not impact any existing category of eligibility in the current program. With respect to operational challenges some commenters raised, Mr. Fulenwider stated the Department's appreciation for these considerations and will take them into account during implementation and ongoing operation of the Georgia Pathways Demonstration Waiver.

Mr. Fulenwider concluded by highlighting two areas where the draft Demonstration Waiver has been amended to reflect public comments received. First, the Department removed all references to Transitional Medical Assistance (TMA) from the Demonstration application. TMA is not impacted by the proposal. He also noted that the Department has changed qualifying activities to include eligible program participants who meet 80 hours per month of activity through a combination of work and education.

Mr. Trail asked if the state is confident that 90% federal match will be granted by the federal government.

Mr. Fulenwider noted the decision made regarding the State of Utah's Waiver application; however, the Demonstration is seeking 90% federal match. He further noted that fiscal projections contained within the proposed Waiver are conservatively based upon receiving traditional Federal Medical Assistance Percentage (FMAP).

Mr. Trail further asked whether individuals undergoing treatment for mental illness or substance use would meet qualifying activities requirements in order to maintain eligibility. Mr. Fulenwider noted that under the proposal, mental health treatment or treatment for Substance Use Disorder is not a qualifying activity. Mr. Trail encouraged the Department to consider allowing such treatment to serve as a qualifying activity going forward.

Mr. Fulenwider respectfully asked for the Board's favorable consideration of final adoption.

Mark Trail MADE a MOTION to approve for final adoption the 1115 Demonstration Waiver Public Notice. Kenneth Davis SECONDED the MOTION. ON THE MOTION, the

yeas were 8, nays 0, abstained 0, and the MOTION was APPROVED. (A copy of the 1115 Demonstration Waiver Public Notice is attached hereto and made an official part of these minutes as Attachment #3).

Lisa A. Walker, CFO presented to the Board for initial adoption the Graduate Medical Education (GME) Add-on Payments for Community Service Boards (CSBs) Public Notice.

Pending Centers for Medicare and Medicaid Services (CMS) approval and effective for services effective on or after July 1, 2019, the Department proposes to include a per claim GME add-on payment to each paid claim to Community Service Boards (CSBs) with GME programs that are accredited by the Accreditation Council for Graduate Medical Education (ACGME). The total annual payment of each eligible CSB GME payment will be calculated as follows:

- (1) Determine the percentage of the CSB claims attributable to Medicaid in the previous fiscal year.
- (2) Multiply the percentage of the CSB claims attributable to Medicaid by the total GME annual expenses for the current fiscal year.
- (3) Divide the last four state fiscal years average CSB annual Medicaid claim count into the GME expenses reimbursable by Medicaid.
- (4) This payment is the per claim GME add-on payment.

This is estimated to increase expenditures in state fiscal year (SFY) 2020 by \$711,734 total funds (\$232,168 state funds).

An opportunity for public comment will be held on January 2, 2020 at 10:30 a.m., at the Department of Community Health, 2 Peachtree Street, N.W., Atlanta, Georgia 30303 in the 5th Floor Board Room. Written comments will be accepted on or before January 9, 2020.

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

Russell Crutchfield MADE a MOTION to approve for initial adoption the Graduate Medical Education (GME) Add-on Payments for Community Service Boards (CSBs) Public Notice. Roger Folsom SECONDED the MOTION. ON THE MOTION, the yeas were 7, nays 0, abstained 1, and the MOTION was APPROVED. (A copy of the

Graduate Medical Education (GME) Add-on Payments for Community Service Boards (CSBs) Public Notice is attached hereto and made an official part of these minutes as Attachment #4).

New Business/Closing Comments

Chairman Boyd and Commissioner Berry publicly thanked Mr. Fulenwider and his and his team for their work on the 1115 Demonstration Waiver.

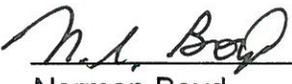
Adjournment

There being no further business to be brought before the Board, Chairman Norman Boyd adjourned the meeting at 2:10 p.m.

THESE MINUTES ARE HEREBY APPROVED AND ADOPTED THIS THE 20th DAY OF December, 2019.



Allana Cummings
Secretary



Norman Boyd
Chairman

Official Attachments:

- #1 Agenda
- #2 List of Attendees
- #3 Georgia Pathways to Coverage 1115 Demonstration Waiver Public Notice
- #4 Graduate Medical Education (GME) Add-on Payments for Community Service Boards (CSBs) Public Notice