



Care Management Committee Meeting



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February 9, 2023



Mission

We will provide Georgians with access to affordable, quality health care through effective planning, purchasing and oversight.

We are dedicated to A Healthy Georgia.

Agenda

- End of Continuous Enrollment Requirements
- Status of Public Health Emergency
- DCH Procurements and Initiatives
 - CMO
 - Pathways
 - PBM
 - MMIS

Enrollment Trends During the PHE



Current Enrollment*

Service Delivery System	Enrollment Totals*
Fee-For-Service	618,681
Managed Care	2,154,457
Total Enrollment	2,773,138

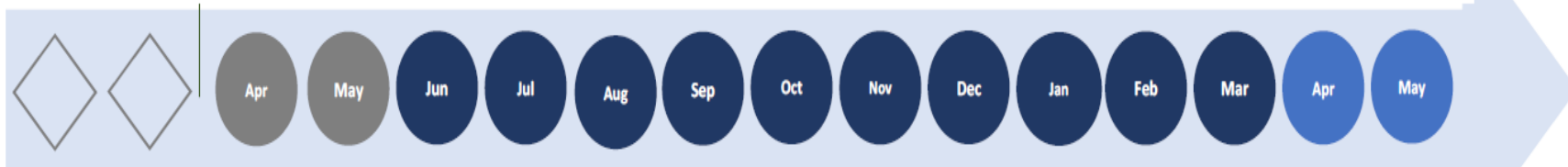
*As of December 31, 2022

End of Continuous Enrollment “Unwinding”

- Continuous enrollment requirements will end on **March 31, 2023**
- Beginning **April 1, 2023**, DCH/DFCS will begin the redetermination/renewal process
- Will align with SNAP and TANF
- Will **utilize the full 12-14 months allowed** to complete all redeterminations/renewals for all persons enrolled in Medicaid and CHIP

End of Continuous Enrollment “Unwinding”

Option C: State begins 12-month unwinding period in April 2023 (the month after the month in which the continuous enrollment requirement ends)



Month 1: Apr.
2023

Begin initiating
unwinding-
related
renewals

Month 12: Mar.
2024

Last month to
initiate unwinding-
related renewals

Month 14: May
2024

Last month to
complete all
unwinding-related
renewals

End of Continuous Enrollment “Unwinding”

- Approved 1902 (e)(14) Waivers:
 - Temporarily extends the timeframe permitted to take final administrative action on fair hearing requests
 - Permits the state to accept updated in-state member contact information from managed care plans
 - Permits the state to renew Medicaid eligibility for individuals who are receiving benefits under the Supplemental Nutritional Assistance Program (SNAP), despite the differences in household composition and income-counting rules.



End of Continuous Enrollment

- Approved 1902 (e)(14) Waivers continued:
 - Permits the state to renew Medicaid eligibility for individuals who are receiving benefits under the Temporary Assistance for Needy Families (TANF), despite the differences in household composition and income-counting rules.
 - Assume there has been no change in resources that are verified through the Asset Verification System (AVS) when no information is returned through the AVS or when the AVS call is not returned within a reasonable timeframe, and to complete an *ex parte* renewal process without any further verification of assets



End of Continuous Enrollment

- Approved 1902 (e)(14) Waivers continued:
 - Permits the state to accept updated in-state enrollee contact information the U.S. Postal Services (USPS) National Change of Address (NCOA) and USPS returned mail without additional confirmation from the individual
 - Complete *ex parte* renewals when no income data is returned from data sources for individuals who were previously enrolled or whose coverage was renewed based on a verified attestation of zero-dollar income;



End of Continuous Enrollment

- New reporting requirements beginning April 1, 2023
- Temporary FMAP increase will be gradually reduced and phased down beginning April 1, 2023, and will end on December 31, 2023.
- States must, over time, return to normal eligibility and enrollment operations

Big changes may be coming to your Medicaid coverage.

When the federal government ends the COVID public health emergency, Georgia, and all other states, will be required to check who is still eligible to receive Medicaid or PeachCare for Kids® coverage.

Take action to stay in charge of your coverage. Update your contact information today to receive important updates, resources, and alerts!



Staycovered.ga.gov

What is Medicaid redetermination?

Redetermination or renewal is the process that Georgia must follow to make sure all Medicaid members are still eligible for coverage. It involves collecting and verifying information, including income and contact details, as well as other requested information or documents related to determining eligibility based on your case.

What happens if I am no longer eligible for Medicaid?

If you are no longer eligible for Medicaid, you will be connected with other healthcare options. The first step is to update your contact information at gateway.ga.gov so that you can receive this important information.

What is the deadline to update my contact information?





GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

PUBLIC HEALTH EMERGENCY

Public Health Emergency

- White House released a statement indicating the intent to end the Public Health Emergency on **May 11, 2023**
- Waivers and Flexibilities will **automatically end**
- Requests to extend or permanently implement any waivers/flexibilities beyond the end of the PHE requires CMS approval

Public Health Emergency

- **What will change at the end of the PHE for providers?**
 - Provider Revalidation Requirements will Resume
 - Site Visits will Resume
 - All Prior Authorization Requirements will Resume
 - Application Fees will be Reinstated
 - Pre-Admission Screening and Annual Resident Review (PASRR) Level I and Level II Assessments will Resume
 - Provision of Services in Alternative Settings will End



PROCUREMENTS & INITIATIVES

Procurements and Initiatives

- Care Management Organization (CMO)
Georgia Families and Georgia Families 360°
- Pharmacy Benefit Manager
- Medicaid Management Information System (MMIS)
- Pathways to Coverage 1115 Waiver



Q&A

Contact Information

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