

PUBLIC NOTICE

Pursuant to 42 C.F.R. § 447.205, the Georgia Department of Community Health is required to give public notice of any significant proposed change in its methods and standards for setting payment rates for services.

Comprehensive Supports Waiver Program (COMP) Waiver Renewal; New Options Waiver Program (NOW) Waiver Amendment

Pending Centers for Medicare and Medicaid Services' (CMS) approval and effective for services provided on or after April 1, 2021 and subject to payment at fee for service rates, the Department proposes to modify and add services to the Comprehensive Supports Program (COMP) and the New Options Waiver Program (NOW):

This change is estimated to increase COMP and NOW Program expenditures for SFY 2021 and SFY 2022 as follows:

NOW SFY 2021 (April – June)				
Service	Proposed Rate	State Funds	Federal Funds	Total Funds
Assistive Technology	\$1 = 1 unit Proposed Maximum Units: Lifetime \$18,000 Annual \$1,194	\$46,095	\$93,715	\$139,810
Interpreter Services	\$23.35 / 15-minute unit Proposed Maximum Units: no change	No change	No change	No change
Community Guide		(\$126)	(\$256)	(\$382)
Natural Supports Training		(\$259)	(\$527)	(\$786)
Total Fiscal Impact		\$45,710	\$92,932	\$138,642

NOW SFY 2022				
Service	Proposed Rate	State Funds	Federal Funds	Total Funds
Assistive Technology	\$1 = 1 unit Proposed Maximum Units: Lifetime \$18,000 Annual \$1,194	\$185,169	\$376,462	\$561,631
Interpreter Services	\$23.35 / 15-minute unit Proposed Maximum Units: no change	No change	No change	No change
Community Guide		(\$504)	(\$1,024)	(\$1,528)
Natural Supports Training		(\$1,036)	(\$2,108)	(\$3,144)
Total Fiscal Impact		\$183,629	\$373,330	\$556,959

COMP SFY 2021 (April – June)				
Service	Proposed Rate	State Funds	Federal Funds	Total Funds
Assistive Technology	\$1 = 1 unit Proposed Maximum Units: Lifetime \$18,000 Annual \$1,194	\$86,281	\$175,415	\$261,696
Additional Staffing in Community Living Support Services (Basic and Enhanced)	No Rate Change: Basic CLS: \$4.67/ 15-min unit Enhanced CLS: \$5.01/15-min unit Proposed Maximum Units: 6 hour/day	(\$672,476)	(\$1,367,184)	(\$2,039,660)
Skilled Nursing Services in Community	No Rate Change: LPN: \$8.75/ 15 min unit	(\$361,022)	(\$733,979)	(\$1,095,001)

Living Support (RN and LPN)	RN: \$10.00/15- min unit Proposed Maximum Units: 16 hour/day			
Interpreter Services	\$23.35 / 15- minute unit Proposed Maximum Units: no change	No change	No change	No change
Community Guide		(\$2,633)	(\$5,353)	(\$7,986)
Natural Supports Training		(\$2,356)	(\$4,790)	(\$7,146)
Total Fiscal Impact		(\$952,206)	(\$1,935,891)	(\$2,888,097)

COMP SFY 2022				
Service	Proposed Rate	State Funds	Federal Funds	Total Funds
Assistive Technology	\$1 = 1 unit Proposed Maximum Units: Lifetime \$18,000 Annual \$1,194	\$344,337	\$700,058	\$1,044,395
Additional Staffing in Community Living Support Services (Basic and Enhanced)	No Rate Change: Basic CLS: \$4.67/ 15-min unit Enhanced CLS: \$5.01/15-min unit Proposed Maximum Units: 6 hour/day	(\$2,689,904)	(\$5,468,737)	(\$8,158,641)
Skilled Nursing Services in Community Living Support (RN and LPN)	No Rate Change: LPN: \$8.75/ 15 min unit RN: \$10.00/15- min unit	(\$1,444,086)	(\$2,935,914)	(\$4,380,000)

	Proposed Maximum Units: 16 hour/day			
Interpreter Services	\$23.35 / 15- minute unit Proposed Maximum Units: no change	No change	No change	No change
Community Guide		(\$10,531)	(\$21,410)	(\$31,941)
Natural Supports Training		(\$9,424)	(\$19,159)	(\$28,583)
Total Fiscal Impact		(\$3,809,608)	(\$7,745,162)	(\$11,554,770)

Background

The Comprehensive Supports Waiver (COMP) and New Options Waiver (NOW) Programs operate under the 1915c Medicaid Waiver authority which requires renewal every five years. The current approved COMP Waiver Program expires in 2021 and must be renewed by the Centers for Medicare and Medicaid Services (CMS) by April 1, 2021. While the NOW waiver will not expire on the same date, the waiver will be amended to incorporate all applicable changes for consistency. The change to maximum daily authorization does not apply to the NOW Program.

DCH proposes the following changes to the COMP 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/’;.,l[];
 -
- Set maximum daily authorization for two services when provided in Community Living settings (applies to COMP only)
 - Additional Staffing Services (basic and enhanced)
 - Skilled Nursing Services (RN and LPN)
- 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

Allow to Expire:

Community Guide Services

The Department of Community Health (DCH) proposes to allow this service to expire due to low utilization. Community Guide Services assist waiver members in managing self-directed services and responsibilities. Support Coordination and Fiscal Support Services agencies will provide the functions of Community Guide.

Natural Support Training

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

Add a New Service:

Assistive Technology

DCH proposes to add Assistive Technology as a new service to the COMP and NOW waivers. Assistive technology consists of any technology, whether acquired commercially, modified, or customized, that is used to maintain or improve functional capabilities of individuals with disabilities by providing an alternative method to perform a task.

Set maximum daily authorization for two services when provided in Community Living settings:

Additional Staffing in Community Living Support Services (CLS) settings

Additional Staffing services are used to supplement staff hours when 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 CLS setting to up to six hours per day. DCH proposes an eighteen-month transition plan to allow planning and transition to other available services.

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 per day when Skilled Nursing Services are provided in CLS settings DCH proposes an 18-month transition plan to allow planning and transition to other available services.

Rate Increase:

Interpreter Services

DCH proposes to increase the 15-minute unit rate for Interpreter Services from \$19.38 to \$23.35 per 15-minute unit. The annual maximum authorization will remain fixed at \$6,124. There is no expected fiscal impact.

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

Behavior Support Services

DCH proposes to remove the participant direction service delivery option for Behavior Support Services. Behavior Support Service requires specific professional licensure and/or certification for provider enrollment. In accordance with the Deficit Reduction Act (DRA) which requires the Medicaid agency to assure credentialing and verification of provider licensing. This service will be delivered by providers with validation as required.

Supported Employment Services

DCH proposes to remove the participant direction service delivery option for this service. Supported Employment Service providers require specialized training in employment options and the ability to customize an employment setting to meet waiver members' specific needs. Employment Services will be offered a choice of qualified Medicaid enrolled providers and continue authorized services.

This public notice is available for review at each county Division of Family and Children Services office. An opportunity for public comment will be held on **November 18, 2020 at 10:30 a.m., via WebEx audio**. There will be **no in-person** attendance at the Department of Community Health (DCH). Individuals who are disabled and need assistance to participate during this meeting should call (404) 656-4479 no later than 48 hours ahead of the scheduled public hearing to ensure any necessary accommodation can be provided.

Event number: 127 597 3366

Event password: Public

To join the online event

1. Copy the following link to a browser:

https://dchevents.webex.com/mw3300/mywebex/default.do?nomenu=true&siteurl=dchevents&service=6&rnd=0.5384751041512783&main_url=https%3A%2F%2Fdchevents.webex.com%2Fec3300%2Feventcenter%2Fevent%2FeventAction.do%3FtheAction%3Ddetail%26%26%26EMK%3D4832534b00000004d5fb005743d83a64337647d9c81ab99831abbbd21c5ecf7fb84cb0d111f4aace%26siteurl%3Ddchevents%26confViewID%3D176990639294020678%26encryptTicket%3DSDJTSwAAATI_kMz3YojNlpqNkNsEbpDWUFZ_JgCQEvWCL07eD1fA2%26

2. Click "Join Now".

Join the audio conference only:

Call-in toll number (US/Canada): 1-650-479-3207 Access code: 127 597 3366

Individuals wishing to comment in writing on any of the proposed changes should do so on or before **December 14, 2020**, to the Board of Community Health, Post Office Box 1966, Atlanta, Georgia 30301-1966. You may also email comments to Danisha Williams, danwilliams@dch.ga.gov or fax to 404-651-6880.

Comments submitted will be available for review by submitting a request via email to Danisha Williams, danwilliams@dch.ga.gov. Comments from written and public testimony will be provided to the Board of Community Health prior to the **January 14, 2021 Board** meeting. The Board will vote on the proposed changes at the Board meeting to be held at 10:30 a.m. at the Department of Community Health.

NOTICE IS HEREBY GIVEN THIS 12th DAY OF NOVEMBER, 2020

Frank W. Berry, Commissioner