

Board of Community Health  
Meeting  
October 11, 2018

**Members Present**

Norman Boyd  
Allana Cummings  
Russell Crutchfield  
Russ Childers  
Anthony Williamson  
Kenneth Davis  
Mark Trail

**Members Absent**

Roger Folsom

The Board of Community Health held its regularly scheduled meeting at the Department of Community Health (DCH), 5<sup>th</sup> 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 10:30 a.m.

**Minutes**

The Minutes of the September 7, 2018 and September 13, 2018 meetings were unanimously approved.

**Opening Comments**

None to report.

**Committee Reports**

None to report.

**Commissioner's Report**

Commissioner Berry thanked the Board, members of the public and staff for their attendance.

Commissioner Berry updated the Board on the following:

- Formal request to the Board to hold the December 13, 2018 Board meeting off-site at Mercer University.
- Rachel King, Patsy Whaley and Blake Fulenwider presented at the Study Committee meetings.

- Recognized Kate Pfirman, Deputy Commissioner for her Administrative Simplification work to help reduce the administrative burden for providers.

### **Updates:**

#### **Legislative-**

- **Brandy Sylvan, Office of Public Affairs (OPA)**
  - Provided an update on the agency's involvement in legislative study committee meetings over the past few months in advance of the 2019 legislative session. DCH Staff have presented to several study committees, including the House Rural Development Council, Senate Study Committee on Certificate of Need, Senate Study Committee on Excessive and Duplicative Regulatory Oversight of Community Based Intellectual and Developmental Services, and the House Study Committee on the Workforce Shortage and Crisis in Home and Community Based Settings.

#### **Hurricane Michael-**

- **Melanie Simon, Healthcare Facility Regulation (HFR)**
  - Thanked the Board and Commissioner Berry for adopting changes to the Disaster Preparedness Rules in November of last year. These changes exempted CMS-certified facilities from complying with state rules. This allows facilities to update emergency plans at any time and to focus on following one set of regulations.
  - The primary role of HFRD during actual disaster events is to serve as a resource to the Department of Public Health (DPH), the Georgia Emergency Management Agency (GEMA), the Centers for Medicare and Medicaid Services (CMS), and other state or federal agencies, to assist the response effort. To this end, HFRD staff participate in daily calls with DPH's healthcare preparedness team to provide any data, staffing resources or assistance that may be needed to keep patients, residents and facility staff safe during and after the disaster.
  - HFRD reports daily to CMS on any storm impact on Georgia healthcare facilities. This includes evacuation, sheltering in place, damage to the facility, or patient injury or death that occurs because of the storm. This allows CMS to make decisions about waivers or policy changes that may be needed in our state for Medicaid and Medicare beneficiaries.
  - Emergency preparedness is a year-round effort for HFRD. One of our most important roles is to inspect facilities and verify their compliance with emergency preparedness requirements. When we cite noncompliance with these important requirements, the facility is given the opportunity to submit a plan of correction to be in compliance. We work on this process throughout the year so that when these events strike, hopefully healthcare facilities are better equipped to keep patients and residents safe.

- **Blake Fulenwider, Medicaid**
  - Georgia Medicaid stands ready to assist the Healthcare Facility Regulation Division (HFRD) in the event evacuation assistance becomes necessary as well as the Centers for Medicare and Medicaid Services (CMS) and neighboring states in the event Georgia needs to assist with temporary relocation of their residents. Medicaid and its primary vendors, including the Care Management Organizations (CMOs), DXC Technology and Non-Emergency Transportation (NEMT) Brokers are operating normally and have fully implemented their hurricane emergency plans. NEMT Brokers are readied for any needed assistance in the impacted area primarily focused in Southwest Georgia. Right from the Start (RSM) eligibility staff who are not impeded by roadway issues and/or power outages at offices, and as able, are reporting accordingly. The RSM office in Alma, the South Hub, has power restored and is in normal operation.
- **Jeff Rickman, State Health Benefit Plan (SHBP)**
  - CVS had lifted its limitations on refills for affected areas and was providing courier services to help deliver medication to impacted areas. The Third-Party Administrators (TPAs) were implementing emergency procedures and were not discharging members in impacted areas. Mr. Rickman noted that SHBP would continue monitoring the situation as it develops.

Rachel L. King, Executive Director, Office of Health Planning presented to the Board for final adoption the Amendment to Certificate of Need Rule 111-2-2-.01, Definitions Rule Change.

This amendment was proposed pursuant to the passage of HB769 in the 2018 General Assembly. The amendment included revisions to the definitions for rural and urban counties and the addition of a definition for a micro-hospital.

An opportunity for public comment was held on August 28, 2018 at 10:00 a.m. at the Department of Community Health (2 Peachtree Street, N.W., Atlanta, Georgia 30303) in the 5<sup>th</sup> Floor Board Room. Written comments were accepted on or before August 30, 2018. No comments were received.

Ms. King respectfully asked for the Board's favorable consideration of final adoption.

Allana Cummings MADE a MOTION to approve for final adoption the Amendment to Certificate of Need Rule 111-2-2-.01, Definitions Rule Change. Mark Trail SECONDED the MOTION. ON THE MOTION, the yeas were 7, nays 0, abstained 0, and the MOTION was APPROVED. (A copy of the Amendment to Certificate of Need Rule 111-2-2-.01, Definitions Rule Change is attached hereto and made an official part of these minutes as Attachment #3).

Rachel L. King, Executive Director, Office of Health Planning presented to the Board for final adoption the Department of Community Health, Amendment to Certificate of Need Exemptions from Review., Chapter § 111-2-2-.03 Rule Change.

This amendment was proposed pursuant to the passage of HB769 in the 2018 General Assembly. The amendment included an exemption for the purchase of a hospital facility in one county by a hospital in a contiguous county where the purchased hospital will be operated as a micro-hospital. Also included was an exemption for the relocation of a micro-hospital within a single county.

An opportunity for public comment was held on August 28, 2018 at 10:30 a.m. at the Department of Community Health (2 Peachtree Street, N.W., Atlanta, Georgia 30303) in the 5<sup>th</sup> Floor Board Room. Written comments were accepted on or before August 30, 2018. No comments were received.

Ms. King respectfully asked for the Board's favorable consideration of final adoption.

Russell Crutchfield MADE a MOTION to approve for final adoption the Department of Community Health, Amendment to Certificate of Need Exemptions from Review., Chapter § 111-2-2-.03 Rule Change. Russ Childers SECONDED the MOTION. ON THE MOTION, the yeas were 7, nays 0, abstained 0, and the MOTION was APPROVED. (A copy of the Department of Community Health, Amendment to Certificate of Need Exemptions from Review., Chapter § 111-2-2-.03 Rule Change is attached hereto and made an official part of these minutes as Attachment #4).

Brian Dowd, Assistant Chief, Policy and Provider Services presented to the Board for initial adoption the Medical Assistance Plans, State Plan Amendment: Psychiatric Residential Treatment Facilities Rate (PRTF) Increase Public Notice.

Effective January 1, 2019, pending final Board approval and CMS approval, the Department proposes the following two parts rate increase: 1) a per diem rate increase for existing facilities, and 2) an established per diem rate for children with a co-occurring diagnosis of autism. PRTF rates are based on facility cost reports submitted to DCH.

**Part 1 – A per diem rate increase for existing facilities:**

This proposal includes an adjustment in facility per diem rates based on the 2017 cost report. This proposal increases the per diem cost ceiling by \$37.00, from \$370.00 to \$407.00.



Per diem rates by facility are as follows:

<b>Psychiatric Residential Treatment Facility</b>	<b>Current Rate</b>	<b>Proposed Rate</b>	<b>Billing Code</b>
Coastal Harbor Treatment Center	\$311.18	\$351.62	T2048
Devereux Advanced Behavioral Health	\$349.67	\$407.00	T2048
Hillside, Inc.	\$370.00	\$407.00	T2048
Laurel Heights Hospital	\$365.24	\$363.57	T2048
Lighthouse Care Center of Augusta	\$318.14	\$318.14	T2048
Youth Villages Inner Harbour	\$370.00	\$407.00	T2048

The Georgia Legislature funds the State match for PRTF services in the Fee-for-Service program in the budget allocation to the Department of Behavioral Health and Developmental Disabilities (DBHDD). This funding is being utilized to support Part 1 of the PRTF rate increases.

**Part 2** – A new billing modifier and per diem rate for children with a co-occurring diagnosis of autism:

This proposal includes a new modifier for billing code T2048 for children with a co-occurring diagnosis of autism. The proposed PRTF per diem rate for claims with this modifier is \$440.00 for all facilities. The Georgia Legislature funded this rate increase for PRTFs in the DCH budget.

The projected cost impact of these PRTF rate adjustments with a January 1, 2019 effective date is as follows:

<b>SFY 2019</b>				
<b>Bill Code Description</b>	<b>Agency Impact</b>	<b>State Funds</b>	<b>Federal Funds</b>	<b>Total Funds</b>
Per Diem Rate Increase	DBHDD	\$133,098	\$277,950	\$411,048
Per Diem Rate Increase with co-occurring diagnosis of autism	DCH	\$45,648	\$95,328	\$140,976

<b>SFY 2020</b>				
<b>Bill Code Description</b>	<b>Agency Impact</b>	<b>State Funds</b>	<b>Federal Funds</b>	<b>Total Funds</b>
Per Diem Rate Increase	DBHDD	\$268,990	\$533,106	\$822,096
Per Diem Rate Increase with co-occurring diagnosis of autism	DCH	\$124,544	\$256,091	\$380,635

An opportunity for public comment will be held on October 18, 2018 at 10:00 a.m. at the Department of Community Health (2 Peachtree Street, N.W., Atlanta, Georgia 30303) in the 5<sup>th</sup> Floor Board Room. Written comments will be accepted on or before October 25, 2018.

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

Mark Trail MADE a MOTION to approve for initial adoption the Medical Assistance Plans, State Plan Amendment: Psychiatric Residential Treatment Facilities Rate Increase Public Notice. Kenneth Davis SECONDED the MOTION. ON THE MOTION, the yeas were 7, nays 0, abstained 0, and the MOTION was APPROVED. (A copy of the Medical Assistance Plans, State Plan Amendment: Psychiatric Residential Treatment Facilities Rate Increase Public Notice is attached hereto and made an official part of these minutes as Attachment #5).

Heather Bond, Assistant Chief, Regulatory Services and Compliance presented to the Board for initial adoption the Medical Assistance Plans, Waiver Renewal: Planning for Healthy Babies Public Notice.

Effective for dates of service on or after April 1, 2019, and pending Final Board approval and CMS approval, the Department proposes to renew the P4HB waiver for a 10-year period.

The Planning for Healthy Babies (P4HB) program is a Social Security Act Section 1115 Demonstration Waiver. Section 1115 gives the Secretary of Health and Human Services authority to approve experimental, pilot, or demonstration projects that are found by the Secretary to be likely to assist in promoting the objectives of the Medicaid program. The purpose of these demonstrations, which give states additional flexibility to design and improve their programs, is to demonstrate and evaluate state-specific policy approaches to better serving Medicaid populations.

To better serve Georgia's Medicaid's population, Department of Community Health (DCH), Medical Assistance Plans developed the P4HB Demonstration Waiver.

P4HB provides family planning and family planning-related services to eligible women ages 18 through 44 and inter-pregnancy care services including primary care and primary care case management for eligible women who have delivered a very low birth weight baby.

The goal of this Demonstration Extension Proposal is to continue efforts to reduce Georgia's low birth weight rate, to reduce the number of unintended pregnancies in Georgia, and to reduce Georgia's Medicaid costs by reducing the number of unintended pregnancies by women who otherwise would be eligible for Medicaid pregnancy-related

services. Services will be delivered through the Georgia Families Care Management Organizations (CMOs).

The objective of this Demonstration is to assist the State of Georgia in reducing its low birth weight rates by providing preconception and inter-conception care that promotes birth spacing and appropriately timed pregnancies.

Eligibility requirements for P4HB differ slightly for the three levels of service offered within the program. There is no cost-sharing required to receive any of these levels of service.

All participants must be 18 through 44 years of age with incomes at or below 211% of the current federal poverty level (FPL) and be able to bear children. Women seeking family planning and family planning related services only must meet these requirements and must also be otherwise uninsured. Women seeking Inter-pregnancy care (IPC) services in addition to the family planning and family planning related services must meet all of the above requirements and must have delivered a very low birth weight (VLBW) baby. P4HB also offers Resource Mothers Outreach only services to women 18 through 44 years of age who are able to bear children, have delivered a VLBW baby, and eligible for Medicaid services.

The following benefits are currently available under P4HB and will continue to be available upon program extension:

Family planning services and supplies described in section 1905(a)(4)(C) of the Act are reimbursable at the 90 percent matching rate, including: approved methods of contraception, sexually transmitted infection testing, Pap test, pelvic exams, drugs, supplies, devices related to women's health services, contraceptive management, patient education, and counseling. Family planning-related services are reimbursable at the State's Federal Medical Assistance Percentage (FMAP) rate.

Participants ages 19 and 20 will be eligible to receive the Hepatitis B, tetanus-diphtheria (Td), and combined tetanus, diphtheria, and pertussis (Tdap) vaccinations. Participants who are 18 years old are eligible to receive immunizations at no cost via the Vaccines for Children (VFC) Program. These services are reimbursable at the State's FMAP rate.

Women who are enrolled in the IPC component of the P4HB are also eligible for primary care referrals to other social service and health care providers as medically indicated, 5 office/outpatient visits, management and treatment of chronic diseases, substance use disorder treatment (detoxification and intensive outpatient rehabilitation) (referral required), case management/ Resource Mothers Outreach, limited dental, prescription drugs (non-family planning), and non-emergency medical transportation. These services are reimbursable at the State's FMAP rate.



Women serviced under the IPC and Resource Mothers Outreach components of the P4HB will have access to Resource Mothers Outreach. The CMOs will employ or contract with Resource Mothers and the Resource Mothers will assist nurse case managers to achieve defined health improvement goals.

This public notice and the demonstration waiver application is available for review at each county Division of Family and Children Services office.

An opportunity for public comment will be held on October 18, 2018 at 10:30 a.m. at the Department of Community Health (2 Peachtree Street, N.W., Atlanta, Georgia 30303) in the 5<sup>th</sup> Floor Board Room and October 26, 2018 8:00 a.m. - 2:00 p.m. at the Center for Rural Prosperity, The Georgia Chamber Tifton Office (1001 Love Avenue Tifton, Georgia 31794). Written comments will be accepted on or before November 13, 2018 to the Board of Community Health, Post Office Box 1966, Atlanta, Georgia 30301-1966.

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

Mark Trail MADE a MOTION to approve for initial adoption the Medical Assistance Plans, Waiver Renewal: Planning for Healthy Babies Public Notice. Russ Childers SECONDED the MOTION. ON THE MOTION, the yeas were 7, nays 0, abstained 0, and the MOTION was APPROVED. (A copy of the Medical Assistance Plans, Waiver Renewal: Planning for Healthy Babies Public Notice is attached hereto and made an official part of these minutes as Attachment #6).

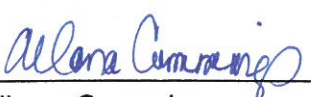
#### **New Business/Closing Comments**

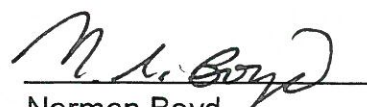
None to report.

#### **Adjournment**

There being no further business to be brought before the Board, Chairman Norman Boyd adjourned the meeting at 11:15 a.m.

THESE MINUTES ARE HEREBY APPROVED AND ADOPTED THIS THE 11th DAY OF October, 2018.

  
Allana Cummings  
Secretary

  
Norman Boyd  
Chairman



Official Attachments:

- #1 Agenda
- #2 List of Attendees
- #3 Certificate of Need Rule 111-2-2-.01, Definitions Rule Change
- #4 Certificate of Need Exemptions from Review., Chapter § 111-2-2-.03 Rule Change
- #5 Medical Assistance Plans, State Plan Amendment: Psychiatric Residential Treatment Facilities Rate Increase Public Notice
- #6 Medical Assistance Plans, Waiver Renewal: Planning for Healthy Babies Public Notice