# 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.

## Eliminate Attestation and Reimburse All Eligible Providers at Enhanced Rates

Pending enactment of HB 911, and approval by the Centers for Medicare and Medicaid Services (CMS), the Department of Community Health (DCH) proposes 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.

**Background:**

Section 1202 of the Patient Protection and 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 and managed care. The reimbursement rates mirrored the Medicare rates in effect during those calendar years. The codes identified in the final rule included 99201- 99499 to the extent these 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 with professional responsibility for the provision of care.

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 by the American Board of Medical Specialties (ABMS), the American Board of Physician Specialties (ABPS), or the American Osteopathic Association (AOA). Alternatively, physicians who were not Board certified (including those who were Board-eligible but not certified) attested to having at least 60 percent of all codes billed by the physician, for the previous calendar year, for the E&M codes and vaccine administration codes specified in the final rule. New providers who were not board certified could attest that 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.

Providers could attest by submitting an attestation form through the Georgia Medicaid Management Information System (GAMMIS) web portal or by submitting a paper application. Providers who were eligible to receive the enhanced rates but failed to attest during calendar years 2013 and 2014, did not receive the enhanced rates.

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.

In the interest of equity, 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.

The projected cost impact of removing the attestation requirements for SFY2023 and reimbursing all eligible providers at enhanced rates is as follows:

| 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** |

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 **May 17, 2022, at 11:30 a.m., via Zoom 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 at least three (3) business days prior to the scheduled public hearing to ensure any necessary accommodations can be provided.

Join Zoom Meeting

https://us02web.zoom.us/j/84990866275?pwd=akxIK0N3Zko2R2dEdm91RmRpSW1tdz09

Meeting ID: 849 9086 6275
Passcode: Open
One tap mobile
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+13017158592,,84990866275# US (Washington DC)

Dial by your location
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+1 301 715 8592 US (Washington DC)
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+1 669 900 9128 US (San Jose)
+1 253 215 8782 US (Tacoma)
+1 346 248 7799 US (Houston)

Meeting ID: 849 9086 6275

Individuals wishing to comment in writing on any of the proposed changes should do so on or before **May 24, 2022**, 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 **June 27, 2022,** 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 MAY 2022**
**Caylee Noggle, Commissioner**