Marie Costello  
Acting Deputy Administrator and Director  
Center for Medicaid & CHIP Services (CMCS)  
7500 Security Blvd  
Baltimore, MD 21244

Dear Acting Deputy Administrator and Director Costello:

The State of Georgia, through the Department of Community Health (DCH), is pleased to submit the enclosed Initial Spending Plan Projection and Narrative to enhance, expand, and strengthen home and community based services (HCBS) under the Medicaid program using an estimated $586,376,003 million in additional funds associated with the increased Federal Medicaid Assistance Percentage (FMAP) pursuant to Section 9817 of the American Rescue Plan Act of 2021 (ARPA).

We are committed to optimizing available Medicaid funds for most effectively serving the needs of our communities. The increased FMAP will contribute to providing additional and improved services to members of the State’s Medicaid program. The enhanced funding will provide Georgia with the opportunity to design, gather input, and implement short-term activities to strengthen the HCBS system in response to the COVID-19 Public Health Emergency (PHE), as well as longer term strategies that enhance and expand the HCBS system and sustain effective programs and services.

Our priority over the past month has been to engage relevant stakeholders and seek their perspective on what they view as pressing needs. The State of Georgia is proud to have engaged critically important stakeholders to develop a comprehensive plan.

We also recognize the need to utilize the additional funds in a manner that is sustainable and leads to minimal disruption after the ARPA funds are exhausted. The proposed spending plan has been carefully crafted keeping this key constraint in mind.

As part of submitting this spending plan and narrative, the State of Georgia wishes to confirm the following assurances:

1. The State is using the federal funds attributable to the increased federal medical assistance percentage (FMAP) to supplement and not supplant existing State funds expended for Medicaid HCBS in effect as of April 1, 2021;
II. The State is using the State funds equivalent to the amount of federal funds attributable to the increased FMAP to implement or supplement the implementation of one or more activities to enhance, expand, or strengthen HCBS under the Medicaid program;

III. The State is not imposing stricter eligibility standards, methodologies, or procedures for HCBS programs and services than were in place on April 1, 2021;

IV. The State is preserving covered HCBS, including the services themselves and the amount, duration, and scope of those services, in effect as of April 1, 2021; and

V. The State is maintaining HCBS provider payments at a rate no less than those in place as of April 1, 2021.

Once approved, I will serve as the point of contact, to ensure that quarterly spending plans and narratives are provided along with any associated reporting. Should you have additional questions or concerns, I may be reached at (404) 656-7513 or via email at lrhodes@dch.ga.gov.

Sincerely,

Lynnette R. Rhodes
Executive Director, Medical Assistance Plans
Executive Summary

The March 2021 American Rescue Plan Act (ARPA) allows enhanced federal funding for State Medicaid spending on home and community-based services (HCBS). HCBS allows older adults and people with disabilities to live in their home or a home-like setting and remain integrated with the community. These programs serve a variety of targeted population groups, such as older adults, people with intellectual or developmental disabilities (I/DD), physical disabilities, and/or mental health needs. Section 9817 of the ARPA provides the State with a one-year, 10 percentage point increase in their federal medical assistance percentage (FMAP) for certain Medicaid HCBS expenditures. This 10-percentage point increase will apply only to HCBS expenditures provided between April 1, 2021 and March 31, 2022.

Over the past decade, the State of Georgia has made great strides in enhancing and improving Medicaid HCBS. Accomplishments include:

- DCH responded to the COVID-19 PHE through continuous evaluation of support needs for affected populations including older adults and individuals with I/DD
- Georgia is one of 33 states that continues to transition individuals from nursing facilities to HCBS through the Money Follows the Person program

The one-year increase in federal matching funds under section 9817 of the ARPA will result in new, time-limited funding which can be invested in HCBS services through March 2024. The extended time period for enhanced funding will provide Georgia with the opportunity to design, gather input, and implement short-term activities to strengthen the HCBS system in response to the COVID-19 Public Health Emergency (PHE), as well as longer term strategies that enhance and expand the HCBS system and sustain effective programs and services.

DCH conducted stakeholder engagement activities to identify key areas for enhancement and improvement in HCBS. The result was an understanding of four major focus areas for HCBS improvement:

1) Enhancement and expansion of the HCBS infrastructure;
2) Expansion of HCBS services which includes implementing new services and expanding the use of technology;
3) Strengthening HCBS services by engaging in workforce development and training, implementing enhanced provider payments, conducting a rate study for 1915(c) waivers; and
4) Targeted evaluations and studies to support 1915(c) waivers.

The Department of Community Health (DCH) evaluated the initial feedback and proposals received from internal and external stakeholders and utilized this information to develop this initial spending plan. The State will continue to review and evaluate stakeholder feedback to inform and guide quarterly spending plans moving forward.
Spending Plan Narrative

The State of Georgia is in a unique position to accelerate the expansion of HCBS. Over the past decade DCH has continued to promote community living over institutionalization, offering older adults and individuals with disabilities choice, control, and access to services that help them achieve independence, optimal health, and quality of life.

Currently, Georgia provides HCBS under the State plan as well as through 1915(c) waivers. Through consideration of the requests of internal and external stakeholders gathered during the months of June and July 2021, we have elected to make some targeted enhancements and expansions to HCBS. These expansions are designed to fill some of the identified gaps in care, increase availability of services, and improve existing services. Georgia indicated 8 initiatives over four strategic areas to invest the increased FMAP:

1) Enhancement and expansion of HCBS infrastructure

Georgia plans to maximize use of ARPA funds in two initiatives to enhance data and reporting.

<table>
<thead>
<tr>
<th>INITIATIVE #1:</th>
<th>Develop a Case Management Technology Platform for Medicaid HCBS (Including State Plan and Waivers)</th>
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<tr>
<td>Description:</td>
<td>Develop / procure an electronic platform to capture Medicaid HCBS case management activities for both state plan and waiver authorities. Funding would support implementation of the electronic platform, staff training on platform use, additional staff, and development of reporting and dashboard components that provide insight into trends and areas to target quality improvement activities.</td>
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| Fiscal: | Partner/Delegate Department(s): DCH  
Projected Budget: $8,297,652 |

INITIATIVE #2: Enhance the Critical Incident Management Process with Comprehensive Reporting and Dashboarding

<table>
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<tr>
<th>Description:</th>
<th>Enhance the current incident management process by developing standardized reporting templates and dashboards to further support the DCH efforts to identify trends and track performance. Funding would be used to:</th>
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• Assess feasibility of efforts to update / replace / integrate existing critical incident management processes with a robust, comprehensive data system and / or data warehouse that provides cross-population reporting capability to identify trends and track performance
• Develop requirements for update / replacement / integration of critical incident processes

Implement recommendations from assessment to enhance critical incident management processes

Fiscal: Partner/Delegate Department(s): DCH
Projected Budget: $700,000

2) Expand HCBS services

The State plans to use ARPA funds to expand existing HCBS services and develop new services as part of a long-term rebalancing strategy to shift long term services and supports towards HCBS.

<table>
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<tr>
<th>INITIATIVE #1:</th>
<th>Expand HCBS Services to include Behavioral Aides for children diagnosed with Autism.</th>
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<tr>
<td>Description:</td>
<td>Implement a new HCBS service that will provide Behavioral Aides in the home setting for members under age 21 who are diagnosed with Autism. Services may be rendered as a State Plan Service or through a 1915(c) waiver. Services must be accompanied by a physician’s order. The addition of Behavioral Aides as a new service will reduce the number of admissions and/or readmission to Psychiatric Residential Treatment Facilities and increase access to HCBS services.</td>
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| Fiscal:       | Partner/Delegate Department(s): DCH  
Projected Budget: $54,241,400 |

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<th>INITIATIVE #2:</th>
<th>Expand the Use of Technology to deliver HCBS</th>
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<tr>
<td>Description:</td>
<td>Incorporate telehealth visits as a permanent method for members to interact with health care professionals, case managers, and HCBS providers. Expand the use of assistive technology (AT) applications and devices to promote independence among HCBS recipients. Funds could be</td>
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used to develop/deliver assessments that identify technology solutions most suitable for individuals as well as vendor matching activities to support delivery of AT from reliable vendors.

Fiscal:

Partner/Delegate Department(s): DCH
Projected Budget: $205,972,127

3) Strengthen HCBS Services

The State plans to use ARPA funds to strengthen existing HCBS services by increasing rates, implementing specialized payments for HCBS agencies and providers, conducting a rate study for services provided in 1915(c) waivers, and engaging in workforce development and training.

| INITIATIVE #1: HCBS Provider Payment Rate Enhancements and Rate Study for 1915(c) Waivers. |
| Description: During the Public Health Emergency, Georgia experienced significant challenges in retaining a stable workforce and recruiting direct support professionals and home health workers. The impacts of COVID-19 were substantial which resulted in a significant reduction in the direct care workforce. Providing increased reimbursement rates and specialized payments such as hazard pay, shift differential pay, and one-time signing bonuses and/or retention bonuses will support competitive recruitment, assist in building, retaining and stabilizing the workforce, and reducing the existing workforce shortage. Enhanced reimbursement will encourage employees to remain with their agency or provider group which ensures access to critical HCBS services. Increased reimbursement rates and/or specialized payments will be provided for the following providers/services: |
| Independent Care Waiver Program 1915(c) HCBS services |
| Elderly and Disabled Waiver Program 1915(c) HCBS services |
| Crisis Stabilization Units (Temporary Payment Enhancements) |
| Crisis Service Centers/Temporary Observation Core services (Temporary Payment Enhancements) |
| Community Service Boards (Temporary Payment Enhancements) |
• Behavioral Health agencies providing services under the Medicaid rehab option (Temporary Payment Enhancements)
• IDD workforce 1915(c) HCBS services (Temporary Payment Enhancements)

To further strengthen HCBS services, ARPA funds will be utilized to perform a rate study related to Georgia’s current 1915(c) waivers. The study aims to enhance the overall quality of HCBS 1915(c) waiver services and will include market research and a national scan.

Fiscal: Partner/Delegate Department(s): DCH and DBHDD
Projected Budget: $285,636,824

**INITIATIVE #2: Workforce Development and Training**

**Description:** During the Public Health Emergency, Georgia experienced significant challenges in retaining a stable workforce and recruiting Certified Nursing Assistants. The impacts of COVID-19 were substantial which resulted in a significant reduction in the direct care workforce.

ARPA funding will be utilized to collaborate with Georgia’s Technical College System to strengthen the Certified Nursing Assistant (CNA) training program thereby expanding provider capacity. Certifying additional CNAs will reduce the workforce shortage which ensures that Georgia’s HCBS recipients will have access to services.

Additional HCBS training and workforce development programs will be developed to expand provider capacity, improve the quality of care and service delivery, and improve member satisfaction.

Fiscal: Partner/Delegate Department(s): DCH and DBHDD
Projected Budget: $27,028,000

**4) Implement targeted evaluations and studies to support regulatory compliance, state of the art benefit design, and rate setting activities**

The State intends to assess the current status of the direct service workforce and develop initiatives to enhance the current workforce based on assessment results.

**INITIATIVE #1** Assess Current State of HCBS Workforce Retention, Recruitment, and Development
| Description: | Conduct an assessment of current HCBS workforce strengths and opportunities for improvement with a focus on direct service provider retention, recruitment, and career development. Additionally, funds may be used to implement select recommendations developed as part of the assessment process. |
| Fiscal: | Partner/Delegate Department(s): DCH and DBHDD  
Projected Budget: $500,000 |

**INITIATIVE #2**  
**Supported Employment Pilot Program**

| Description: | Provide support to individuals on the planning list for supported employment to transition from school to Competitive Integrated Employment. |
| Fiscal: | Partner/Delegate Department(s): DBHDD  
Projected Budget: $4,000,000 |