

Board of Community Health  
Meeting  
October 12, 2023

**Members Present**

Norman Boyd  
Roger Folsom  
Russell Crutchfield  
David Crews  
Anthony Williamson  
Nelva Lee  
Cynthia Rucker  
Shane Mobley  
Robert Cowles

**Members Absent**

The Board of Community Health held its meeting via Zoom teleconference. (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 14, 2023 meeting were unanimously approved.

**Opening Comments**

None to report.

**Committee Reports**

None to report.

**Commissioner's Report**

Commissioner Carlson thanked the Board, members of the public, and staff for their participation via Zoom.

The following updates were provided to the Board:

- Our team, in collaboration with colleagues at the Department of Administrative Services (DOAS), released the long-awaited request for proposals (RFP) for the next round of Medicaid managed care contracts.

In addition to being the state's largest procurement, we feel it's the state's largest health policy document, and we're very proud of the work and would like to thank

the clinical, legal, and procurement team members for the countless hours they put into this effort.

In addition to the bidder's conference held on September 20<sup>th</sup>, there will be numerous question and answer sessions in October, and we will begin evaluating these proposals.

- Our team continues to spend time with both the Centers for Medicare and Medicaid Services (CMS) and our state partners on Medicaid redetermination across all states and territories to improve the process and experience for our Georgia families. This is an evolving process that includes continuous systems and policy changes, but we continue to seek and respond to public input.
- I want to congratulate our finance and policy teams on the approval of several directed payment programs (DPPs) that were approved by CMS. Hopefully, this is a resource that will continue to serve hospitals and other providers as they continue to move forward with their mission.
- State Health Benefit Plan (SHBP): Thanks to Louis Amis and his team for their preparation with open enrollment and the numerous public meetings throughout the state, and virtual fairs.
- The legislative session is practically upon us, and in the weeks ahead, our team will have presented to the House and Senate on topics ranging from certificate of need (CON), rural healthcare in our state, and numerous financing and policy options.

We're very grateful for our partnership with the legislature and want to continue open dialogue on new ideas moving forward.

- Four items will be presented to the Board for final adoption, some of which pertain to the priorities that the Governor and legislature have placed upon us, behavioral health and an opportunity to pursue new options for the public and improve existing options.
- Recognition for employees' years of service milestones.

Brian Dowd, Deputy Executive Director, Policy, Compliance and Operations, Medical Assistance Plans presented to the Board for final adoption the Medical Assistance Plans, State Plan Amendment: Psychiatric Residential Treatment Facilities (PRTF) Rate Methodology Change Public Notice.

Pending Centers for Medicaid and Medicare Services (CMS) and Board approval, the Department of Community Health (DCH) proposed to adjust Fee-for-Service rates for PRTFs, effective September 15, 2023.

Rates for all PRTFs will be adjusted to seventy-five percent (75%) of the 2023 Medicare Inpatient Facility Rates. The rate methodology change will be for both the base rate and the rate for children with a co-occurring diagnosis of autism.

Mr. Dowd explained that at the September Board meeting it was erroneously presented that the rate methodology was based on the 2022 Medicare Inpatient Facility rates rather than the 2023 Medicare Inpatient Facility rates. This error was corrected via a revised public notice prior to the public hearing. The rates by facility and overall cost impact presented in the notice were not affected by the reporting year error.

An opportunity for public comment was held on September 20, 2023 at 11:00 a.m. via Zoom. Written comments were due on or before September 27, 2023. No oral comments were received. One written comment was received from the following:

- Keri Conley, General Counsel and Executive Vice President from the Georgia Hospital Association wrote to support the change in rate methodology.

The Department thanks Ms. Conley and GHA for their written comments and support.

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

Shane Mobley MADE a MOTION to approve the Medical Assistance Plans, State Plan Amendment: Psychiatric Residential Treatment Facilities (PRTF) Rate Methodology Change Public Notice. Nelva Lee SECONDED the MOTION. ON THE MOTION, the yeas were 9, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, State Plan Amendment: Psychiatric Residential Treatment Facilities (PRTF) Rate Methodology Change Public Notice is attached hereto and made an official part of these minutes as Attachment #3).

Brian Dowd, Deputy Executive Director, Policy, Compliance and Operations, Medical Assistance Plans presented to the Board for final adoption the Medical Assistance Plans, Biomarker Testing Coverage Public Notice.

Pending Board approval, DCH proposed to update the Medicaid and Peachcare for Kids coverage package to allow for biomarker testing as medically necessary, effective September 15, 2023.

Mr. Dowd noted that biomarker testing means the analysis of a patient's tissue, blood, or other biospecimen for the presence of an indicator of normal biological processes, pathogenic processes, or pharmacologic responses to a specific therapeutic intervention.

Such terms include but are not limited to gene mutations, protein expression, known gene-drug interactions for medications, and characteristics of genes. DCH will initially open Current Procedural Terminology (CPT) codes 0037U, 0239U, 0172U, and 0345U for coverage but will consider other codes as presented.

Mr. Dowd noted that all biomarker testing codes will be open at eighty percent (80%) of the third quarter 2023 Clinical Diagnostic Laboratory Fee Schedule.

An opportunity for public comment was held on September 21, 2023 at 12:30 p.m. via Zoom. Written comments were due on or before September 28, 2023. No oral comments were received. Written comments were received from the following:

- Christina Ozelis, Director of Nursing Services, Peachtree Wellness Solutions
- Anthony Hall, Owner, Ascension Psychiatric Services
- Dr. Raushanah Hud-Aleem, Double Board-Certified Adult, Child, and Adolescent Psychiatrist
- Candace Lewis, Physician Assistant, Village Medical
- Ivan Chatterley, Associate Regional Account Manager, Myriad Genetics
- Lisa Rudolph-Watson M.D., Medical Director, Georgia Pines Community Service Board
- Brennen Comeaux, Clinical Director, Beal Wellness

Mr. Dowd stated that all commenters thanked the Board and DCH for coverage of Biomarker Testing. Six of the seven commenters noted coverage of GeneSight 0345U specifically and the benefits related to mental health treatment.

The Department thanks the commenters for their written comments and support.

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

Roger Folsom MADE a MOTION to approve the Medical Assistance Plans, Biomarker Testing Coverage Public Notice. Cynthia Rucker SECONDED the MOTION. ON THE MOTION, the yeas were 9, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, Biomarker Testing Coverage Public Notice is attached hereto and made an official part of these minutes as Attachment #4).

Lynnette Rhodes, Executive Director, Medical Assistance Plans presented to the Board for final adoption the Medical Assistance Plans, State Plan Amendment: Certified Community Behavioral Health Center (CCBHC) Public Notice.

Pending approval Centers for Medicare and Medicaid Services (CMS) approval, the Department of Community Health (DCH) proposed to establish Certified Community Behavioral Health Center (CCBHC) services effective July 1, 2024. CCBHCs will provide a comprehensive and integrated package of mental health and substance use disorder treatment services and supports.

The CCBHC model will reimburse previously individually billed outpatient behavioral health services as a daily per diem. CCBHC providers will be required to be certified by the Department of Behavioral Health and Developmental Disabilities (DBHDD). The state will reimburse CCBHC providers on bundled payment basis using a provider specific daily payment rate.

CCBHCs will receive payment for each day that services are rendered. Payment is limited to one payment per day, per CCBHC, per member. Thus, if a member receives multiple services in a day, reimbursement will be limited to one single per diem per day. Initial rates will be developed based upon provider specific cost report data from State Fiscal Year 2022. The state will review CCBHC costs and expenses annually using the CCBHC cost report. The cost impact of CCBHC services is neutral.

An opportunity for public comment was held on September 20, 2023 at 12:30 p.m. via Zoom. Written comments were due on or before September 27, 2023. No oral comments were received. Written comments were received from the following:

- Keri F. Conley, General Counsel & Executive Vice President, Health Care Policy, Georgia Hospital Association
- Tamara L. Conlin, Chief Executive Officer, Advantage Behavioral Health Systems
- Denise N. Forbes, Chief Executive Officer, Community Service Board of Middle Georgia
- Marcus Garner, Chief Executive Officer, Athens Neighborhood Health Center
- Robyn Garrett, Executive Director, Georgia Association of Community Service Boards
- Dana P. Glass, Executive Director, Aspire Behavioral Health & Developmental Disability Services, Albany Area Community Service Board
- Jennifer Henderson, Program Director, Brightpaths
- Tiffany Henderson, Chief Executive Officer, Unison Behavioral Health
- Jennifer S. Hibbard, Chief Executive Officer, View Point Health
- Sally Kimel-Sheppard, Executive Director, Envision Athens, Inc
- Fisher Lee, Education & Outreach Coordinator, Southern Healthcare Collaboration, Inc., HealthHIE Community Center
- Knicole Lee, Chief Executive Officer, Southern Healthcare Collaboration, Inc., HealthHIE Community Center
- Lindsay McCoy, Director of Pharmacy, Village Drug Shop at Advantage
- Janis Mangum, Sheriff, Jackson County Sheriff's Office
- Heather Roesner, Chief Executive Officer, Bridge Health
- Jason Smith, Chief Operating Officer, Piedmont Athens Regional Medical Center

All commenters were in full support of the proposed change as it will increase access to quality behavioral healthcare for the citizens of Georgia and enhance the services and supports needed for community behavioral health services sufficient to meet the needs of our communities.

The Department thanked the commenters for their written comments and their support.

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

Cynthia Rucker MADE a MOTION to approve the Medical Assistance Plans, State Plan Amendment: Certified Community Behavioral Health Center (CCBHC) Public Notice. Russell Crutchfield SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0, abstained 1 (Crews), and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, State Plan Amendment: Certified Community Behavioral Health Center (CCBHC) Public Notice is attached hereto and made an official part of these minutes as Attachment #5).

Brian Lipton, Director of Strategic Finance presented to the Board for final adoption the Medical Assistance Plans, State Plan Amendment: Georgia Medicaid Inpatient Prospective Payment System (IPPS): Rebase to All Patient Refined (APR) Diagnostic Related Grouper (DRG) Public Notice.

Pending Centers for Medicare and Medicaid Services (CMS) and Board approval, the Department of Community Health (DCH) proposed to change the grouper from TRICARE DRG to APR DRG, effective January 1, 2024.

The cost impact is budget neutral resulting in no additional federal or state dollars. While there is no overall budget increase, there may be a fiscal impact to individual hospitals. To mitigate the fiscal impact to individual hospitals, DCH will include a stop gain/stop loss factor.

The DRG weights used in the base rate calculation will change in accordance with the new grouper. APR DRG is applicable to all patient populations, including obstetrics, newborns, and pediatrics. TRICARE DRG was developed for the Department of Defense (DOD) and adapted for Medicare and Medicaid hospital reimbursement. Currently, Georgia is the only state still reimbursing hospitals using TRICARE DRG grouper.

The hospital's state-wide base rate will change from \$5,310.99 to \$5,985.86. The state-wide base rate was last updated in 2019. The formulas for the hospital base rate payment will remain the same: Base Rate Payment= DRG Weight X Hospital Specific Base rate.

The Department will continue to include the four components that can change the state-wide base rate to the hospital specific base rate.

1. Pediatric specialty hospitals – these hospitals receive an add-on of \$3,400 per admission.
2. Medicaid Inpatient Utilization Rate (MUIR) – add-on for hospitals whose Medicaid utilization is 11% or higher, the add on is a tiered schedule from 2% to 10%.
3. Inpatient Medical Education (updated annually)- add-on for hospitals with graduate medical education programs.

4. Stop Gain/Stop Loss – mitigates the impact of the IPPS rate update on an individual hospital.

An opportunity for public comment was held on September 18, 2023 at 1:00 p.m. via Zoom. Written comments were due on or before September 25, 2023. No oral comments were received. One written comment was received from the following:

- Carie Summers, Chief Financial Officer and Executive Vice President, Georgia Hospital Association. Ms. Summers appreciates the Department's ongoing transparency and collaboration with Georgia Hospital Association to prepare hospitals for the transition from Tricare DRG to APR DRG and is supportive of the department's application of an individual hospital stop-loss.

The Department thanks Ms. Summers for her written comments and support.

Mr. Lipton respectfully asked for the Board's favorable consideration of final adoption.

Nelva Lee MADE a MOTION to approve the Medical Assistance Plans, State Plan Amendment: Georgia Medicaid Inpatient Prospective Payment System (IPPS): Rebase to All Patient Refined (APR) Diagnostic Related Grouper (DRG) Public Notice. Roger Folsom SECONDED the MOTION. ON THE MOTION, the yeas were 9, nays 0, abstained 0, and the MOTION was APPROVED.

(A copy of the Medical Assistance Plans, State Plan Amendment: Georgia Medicaid Inpatient Prospective Payment System (IPPS): Rebase to All Patient Refined (APR) Diagnostic Related Grouper (DRG) Public Notice is attached hereto and made an official part of these minutes as Attachment #6).

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

Chairman Boyd thanked staff for their hard work and providing materials to the Board in advance of the meeting.

Commissioner Carlson thanked stakeholders and constituents for their feedback and participation in the public notice comment process.

#### **Adjournment**

There being no further business to be brought before the Board, Chairman Norman Boyd adjourned the meeting at 10:58 a.m.

THESE MINUTES ARE HEREBY APPROVED AND ADOPTED THIS THE 12<sup>th</sup> DAY OF October, 2023.

*Cynthia Rucker*

Cynthia Rucker  
Secretary

*N. A. Boyd*

Norman Boyd  
Chairman

Official Attachments:

- #1 Agenda
- #2 List of Attendees
- #3 Medical Assistance Plans, State Plan Amendment: Psychiatric Residential Treatment Facilities (PRTF) Rate Methodology Change Public Notice
- #4 Medical Assistance Plans, Biomarker Testing Coverage Public Notice
- #5 Medical Assistance Plans, State Plan Amendment: Certified Community Behavioral Health Center (CCBHC) Public Notice
- #6 Medical Assistance Plans, State Plan Amendment: Georgia Medicaid Inpatient Prospective Payment System (IPPS): Rebase to All Patient Refined (APR) Diagnostic Related Grouper (DRG) Public Notice