

A close-up photograph of a person's hand holding a black and gold pen, poised to write on a document. The document features a bar chart with blue and red bars. In the background, another document with a line graph is visible. A white coffee cup is partially seen in the bottom left corner.

Georgia Department of Community Health

PCG and Wakely Response to
Statement of Need for Waiver
Consulting Services

May 29 2019

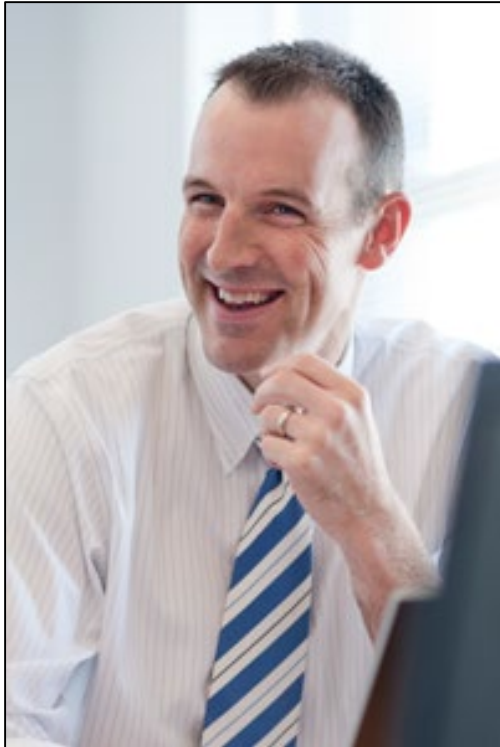


Agenda

1. Introductions of Team Members Present
2. Understanding of the Project
3. What We Offer for Georgia
4. Project Staffing
5. Project Approach
6. Next Steps
7. Questions and Answers

Introductions

Sean Huse



- Leader of PCG Health's Policy and Information Technology Center of Excellence.
- Over 20 years of Medicaid and Marketplace consulting leadership.
- Health finance and cost accounting expert.

Richard Albertoni



- Manager on PCG Health Policy Team
- Seasoned veteran of Medicaid and state health care innovation.
- Served on Wisconsin's Medicaid leadership team on several high profile projects.
- PCG's lead on state healthcare transformations ranging from Health Insurance Marketplace implementation, to Medicaid expansion, and Managed Care Implementation.

Lisa Lee



- Associate Manager for PCG Health Policy Team
- 23 years of experience with Kentucky State Government, including 16 years with the Cabinet for Health and Family Services.
- Expertise in Medicaid Expansion and implementation of the Affordable Care Act.
- Assisted with the implementation of the highly successful Kentucky Benefit Exchange, Kynect.

Alicia Holmes



- Senior Consultant for PCG Health Policy Team
- Experienced project manager for large scale, multi-agency reform efforts.
- Subject matter expertise to support state healthcare reform efforts, including Marketplace policy, operations and compliance.
- Expertise in strategy development and implementation planning for behavioral health, commercial health insurance, and Medicaid.

Chantal Stepney



- Senior Consultant for PCG Health
- Over 10 years of program management experience with the public sector
- Specializes in the Agile project management, Adaptive Project Framework approach
- Provided program oversight for ten PCG education projects in Georgia including the statewide School-Based Medicaid engagement.

Julie Peper



- Principal and Senior Consulting Actuary at Wakely
- Expertise in market stabilization and the impact of state-based reinsurance programs and other policy options
- Experienced in developing successful 1332 waivers across multiple states.
- Supported many states and health plans on the implementation of the Affordable Care Act and other state specific reform activities

Michael Cohen




- Senior Consultant, Policy Analytics at Wakely
- Supported over a dozen states on various health policy initiatives including 1115 waiver, 1332 waiver, and market stabilization efforts.
- Subject matter expert on various commercial insurance initiatives, including risk adjustment, health policy, program integrity, and insurance oversight activities.


Understanding of the Project

Patients First Act

Authorized 1115 waiver to expand Medicaid up to 100% FPL and implement Special Terms and Conditions without further legislative action.



Provides authority to submit one of more 1332 waivers and implement without further legislative action



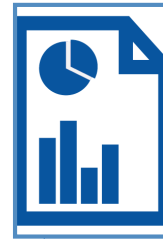
Builds on Georgia's past interest in considering a **uniquely Georgia solution** to expanding healthcare access.

Why PCG is the Right Fit

Broad experience with Medicaid and Marketplace operations will inform program design and assure successful program implementation



State healthcare reform leadership with emphasis on customized state innovations



Vision for aligning commercial markets and public sector coverage



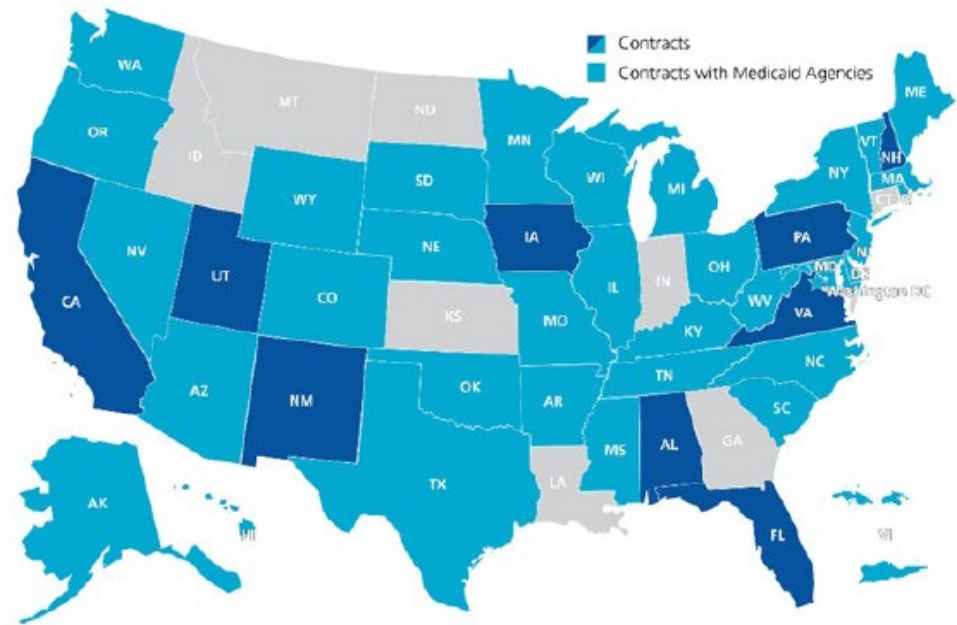
Access to CMS as a current trusted partner

Public sector healthcare strategy and management is what we were made to do.

What We Offer for Georgia

Unique Mix of Commercial Insurance and Medicaid Expertise

- ✓ QHP and Marketplace compliance experts
- ✓ Partners to 42 states for Medicaid finance, policy and operations work
- ✓ Advisors to CCIIO on 1332 waiver concepts and development



PCG was a key partner to Arkansas and New Hampshire, helping develop programs to serve Medicaid through private market options.

Market Leadership in 1332 Waivers

PCG is partnering with the market leader in 1332 waiver economic and actuarial analysis in Wakely Consulting.

Wakely is frequently hired to complete actuarially and economically sound health insurance market analyses, and has facilitated approval of three 1332 waivers.



Oregon



Wisconsin



Maryland

Experience with Current Guidance

Medicaid

January 11, 2018 State Medicaid Directors Letter on Community Engagement Opportunities

November 2017 medicaid.gov website updates listing new Medicaid program priorities

November 6, 2017 CMS Informational Bulletin on 1115 Waiver Process Improvements

March 14, 2017 Letter from Secretary Price and Administrator Verma to State Governors

Marketplace

November 29, 2018 State Relief and Empowerment Waiver Concepts

October 22, 2018 State Relief and Empowerment Waiver Guidance

In-Depth Understanding of Federal Priorities

PCG has drafted 3 community engagement 1115 waivers, and directly supports CCIO efforts to develop 1332 waiver technical assistance materials through the CMS Alliance to Modernize Healthcare (CAMH).



**CMS
ALLIANCE^{TO}
MODERNIZE
HEALTHCARE**

Medicaid Financing Expertise

Inter-
Governmental
Transfers

Certified Public
Expenditures

Provider
Assessments

Disproportionate
Share Hospital

Upper Payment
Limits

Documenting
Hospital
Uncompensated
Care

Vast and Recent 1115 Experience

1115 Waiver Experience								
Project	Concept Development	Waiver Drafting	Stakeholder Engagement	Budget Neutrality	CMS Negotiations	Special Terms and Conditions	Approval Status	Currently Engaged
South Carolina DHHS	✓	✓	✓	✓			Pending Approval	Yes
New York DSRIP Program				✓	✓	✓	Approved 4/14/2014	Yes
Mississippi DOM	✓	✓	✓	✓	✓		Pending Approval	No
Colorado DHCPF	✓		✓				Pending Submission	No
Wisconsin DHS	✓	✓	✓	✓	✓	✓	Approved 10/31/2018	No
Arkansas Insurance Department QHP Specialist	✓	✓	✓		✓		Approved 9/27/2013	No
New Hampshire DOI Plan Management Consultants	✓	✓	✓		✓		Approved 3/4/2015	No
Wisconsin Medicaid	✓		✓	✓	✓	✓	Approved 4/1/2009	No

Commercial Market Expertise

1332 and Commercial Insurance Market Studies Experience

State	Actuarial Certification	Economic Analysis	Market Studies	Status
Maryland	✓	✓	✓	Completed
Wisconsin	✓	✓		Approved
Oregon	✓	✓	✓	Approved
Washington			✓	Completed
Montana	✓	✓	✓	Draft Posted
Wyoming			✓	In progress
South Dakota			✓	In progress
Colorado			✓	Completed
Nevada	✓	✓	✓	Completed
Washington, DC			✓	Completed
Vermont			✓	In progress
Rhode Island	✓	✓	✓	Draft Posted
Connecticut			✓	Completed

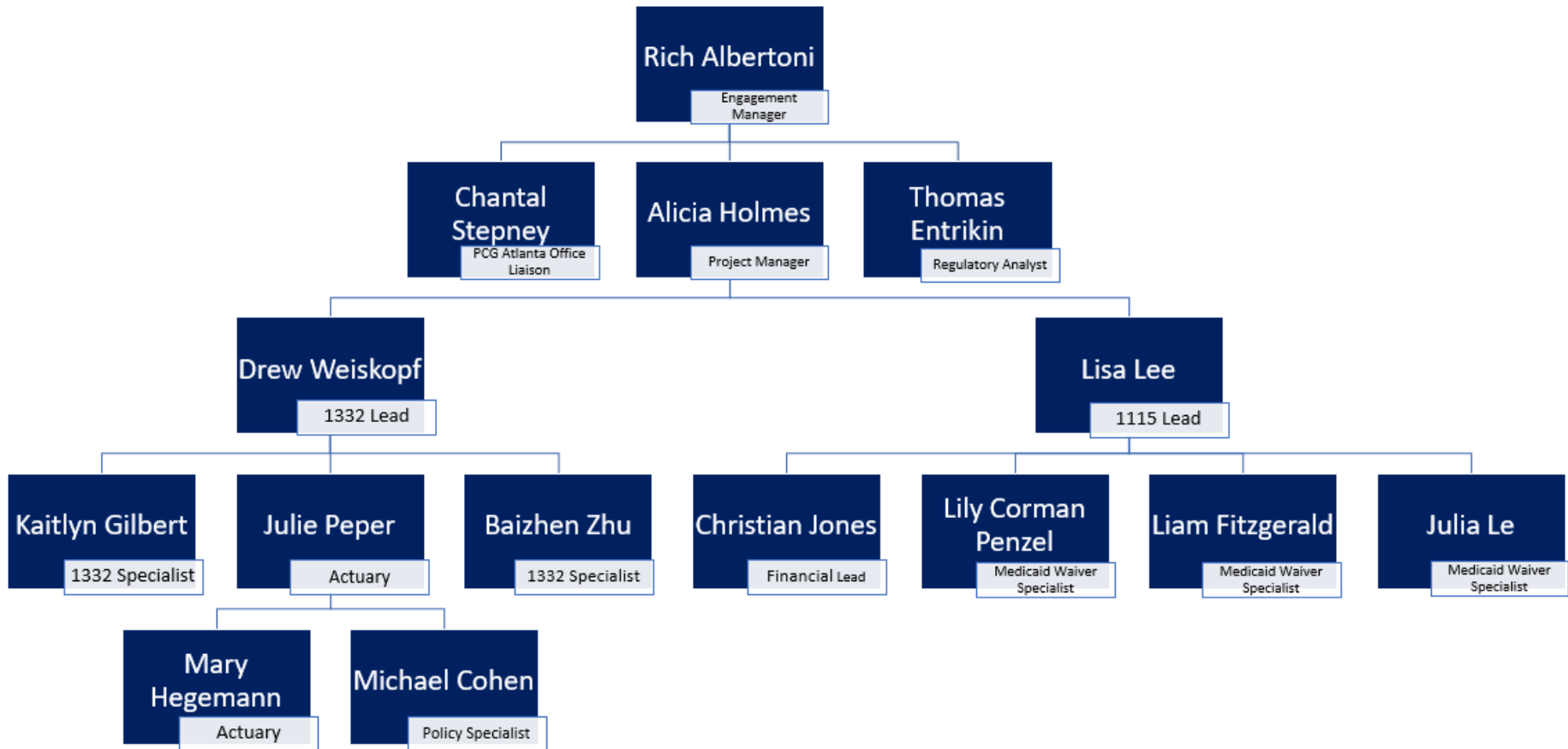
Project Staffing

Project Resources

Our core team stands ready to support DCH from project management to data analysis, policy development and regulatory expertise.



Project Team



Staff Experience

Staff Experience							
Key Staff	Medicaid Program Laws and Regulations	PPACA related Laws and Regulations	Private sector health insurance	Federal and state 1115 and 1332 approval processes	Existing healthcare delivery systems	Healthcare priorities of the President, HHS and CMS leadership	Experience engaging federal officials
Rich Albertoni	✓	✓	✓	✓	✓	✓	✓
Alicia Holmes	✓	✓	✓	✓	✓	✓	✓
Thomas Entrikin	✓	✓	✓	✓	✓	✓	✓
Drew Weiskopf	✓	✓	✓	✓	✓		
Lisa Lee	✓	✓		✓	✓		✓
Christian Jones	✓	✓	✓	✓	✓		✓
Julie Peper		✓	✓	✓	✓		✓
Michael Cohen		✓	✓	✓	✓	✓	✓
Mary Hegemann	✓	✓		✓	✓		✓

Project Team Locations

Key Staff	Role	Location
Rich Albertoni	Engagement Manager	Madison, WI
Alicia Holmes	Project Manager	Boston, MA
Chantal Stepney	PCG Atlanta Office Liaison	Atlanta, GA
Thomas Entrikin	Regulatory Analyst	Boston, MA
Drew Weiskopf	1332 Lead	Nashville, TN
Lisa Lee	1115 Lead	Frankfort, KY
Kaitlyn Gilbert	1332 Specialist	Nashville, TN
Julie Peper	Actuary	Denver, CO
Mary Hegemann	Actuary	Centennial, CO
Michael Cohen	Policy Specialist	Washington, DC
Baizhen Zhu	1332 Specialist	Boston, MA
Christian Jones	Budget Neutrality Lead	Denver, CO
Lily Corman Penzel	Medicaid Waiver Specialist	Boston, MA
Liam Fitzgerald	Medicaid Waiver Specialist	Boston, MA
Julia Le	Medicaid Waiver Specialist	Denver, CO

PCG in Georgia

Department of Behavioral Health and Developmental Disabilities

- Financial Management Services
- Mental Health Data Warehouse IV&V Project
- System Design and Funding Consultation Services

Department of Community Health

- Medicaid Enterprise Architecture (MITA) Project
- School Based Medicaid (CISS and ACE) Program Services

Department of Public Health

- Reimbursement Improvement in Public Health Departments



Georgia Local Education Agencies

- Virtual Total Learning Architecture (TLA)
- Data Management System Technology and Training Services
- Pepper™ Virtual Professional Learning Network Services

Department of Human Services

- Eligibility IV&V Project

Division of Family and Children Services

- TANF Maintenance of Effort (MOE) Services

Department of Juvenile Justice

- Title IV-E Funding Consultation

Project Approach

Background

CMS 1115 Waiver Priorities



Improve access to high-quality, person-centered services that produce positive health outcomes for individuals



Strengthen beneficiary engagement, including incentive structures that promote responsible decision-making



Promote efficiencies that ensure Medicaid's sustainability over the long term



Enhance alignment between Medicaid policies and commercial health insurance to facilitate smoother transition



Support strategies to address health determinants, improve mobility, independence, and quality of life among individuals



Advance innovative delivery system and payment models to strengthen provider capacity and drive greater value for Medicaid.

Partial Medicaid Expansion

Key Challenge: CMS has not approved a waiver that permits a state to access the enhanced Medicaid match rate if they do not expand up to 138% FPL.



Partial Medicaid Expansion Examples



Utah

- CMS did permit Utah to cap enrollment of its Medicaid expansion population under a waiver that expands the MAGI eligibility category to 100% FPL.
- The cap helps Utah manage to a budget at the State's standard FMAP rate.

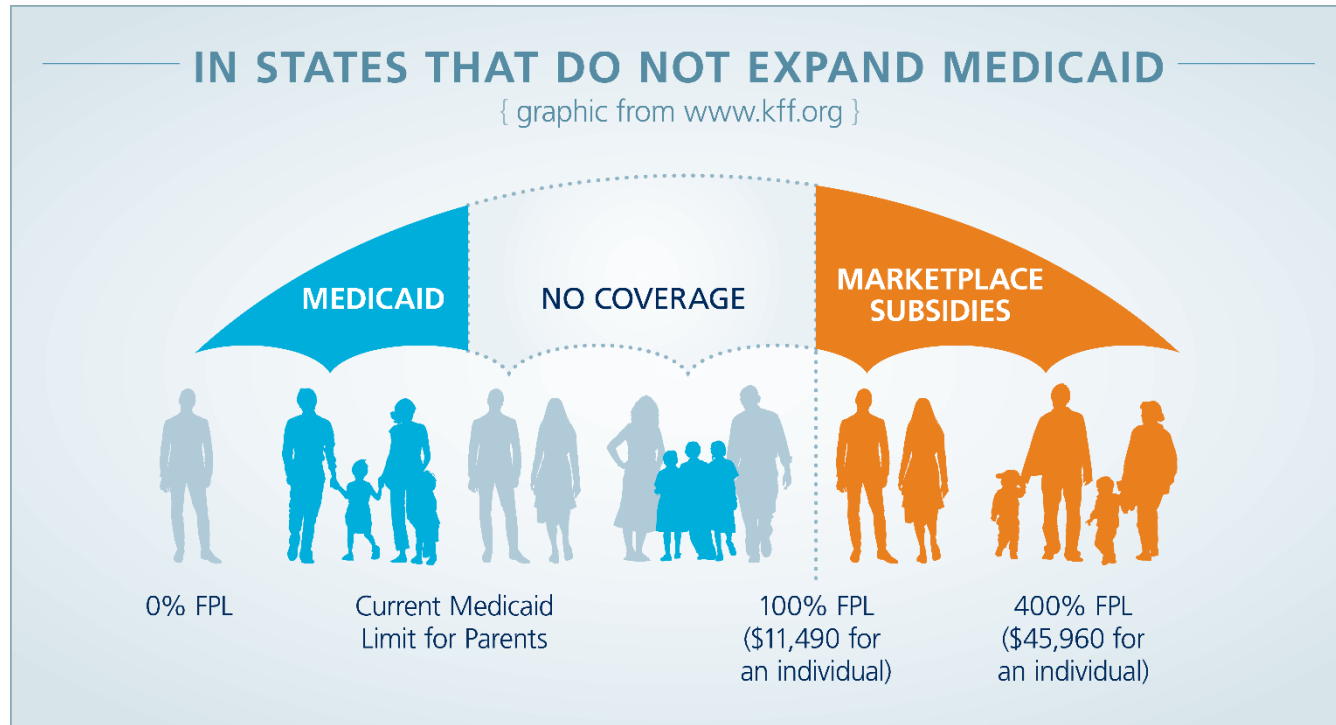


Wisconsin

- Wisconsin chose to expand up to 100% FPL and finance the cost of doing so at the standard state FMAP rate.
- State reinvested funds that had previously paid for coverage of non-disabled, non-elderly parents and caretakers up to 200% FPL

PCG's perception is that HHS leadership supports partial expansions to the extent they accomplish broader waiver goals but has not yet persuaded the Administration to approve them (as documented by the late Robert Pear in the *New York Times* July 30, 2018 edition).

Funding the Medicaid Coverage Gap



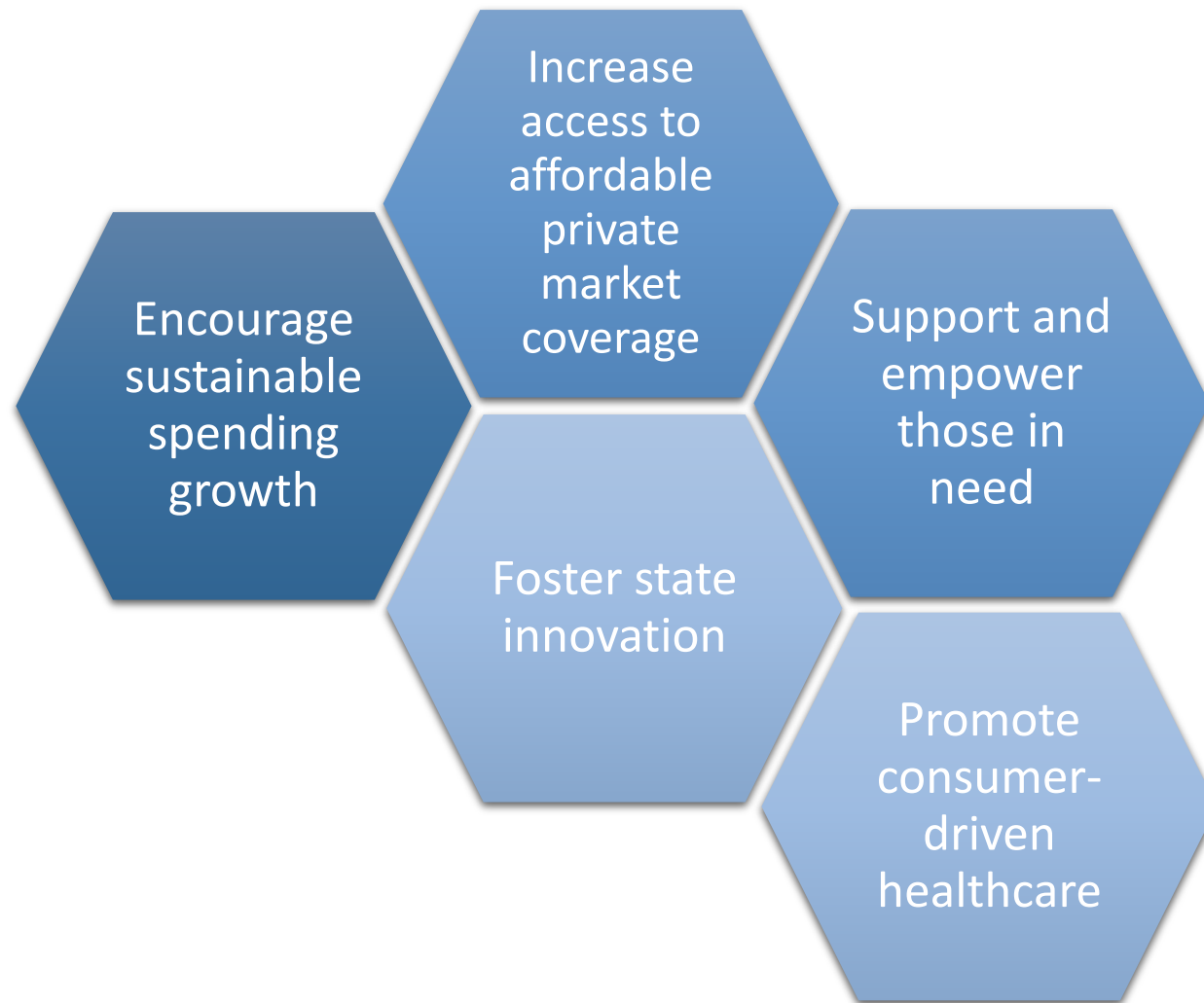
Partial expansion with limited investment of state general revenue funds is a ***healthcare finance problem.***

PCG's vast healthcare finance experience can help Georgia solve for this:

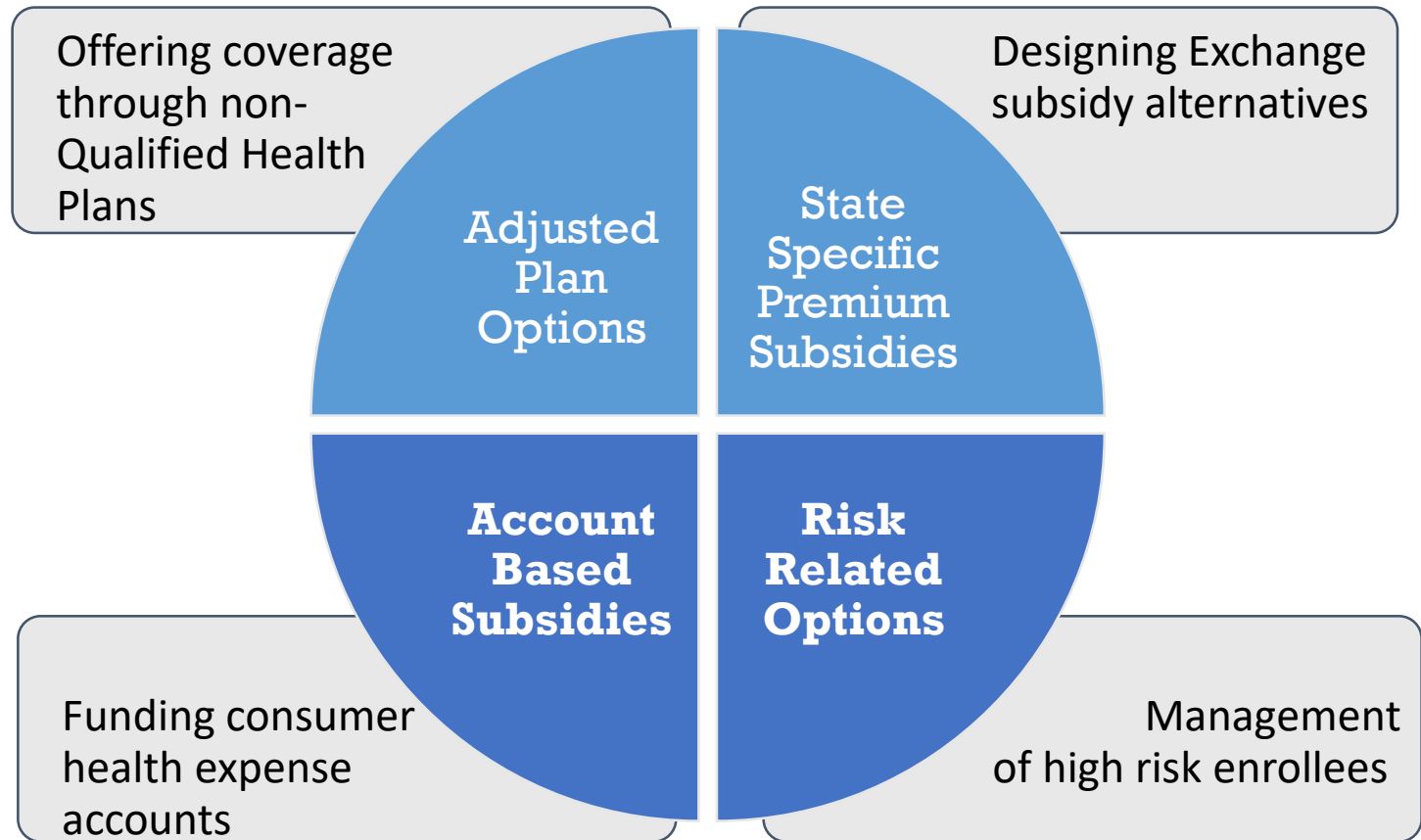
- ☐ Indigent Care Trust Fund
- ☐ Current county funds supporting Grady Hospital (Fulton & DeKalb Counties)
- ☐ UPL Payments



CMS 1332 Waiver Priorities



1332 Waiver Concepts



PCG brings access to CMS leadership as their trusted partner

Project Details

Project Summary

Phase 1

- Project Kickoff
- National Environment Scan Summary Report
- Georgia Environment Scan Summary Report

Phase 2

- Primary Stakeholder Engagement
- 1115 Waiver Options Report
- 1332 Waiver Options Report
- Combined Waiver Options Report

Phase 3

- Draft 1115/1332 Waiver Application
- Public Comment
- Waiver Application Submission
- Waiver Negotiations with CMS and US Treasury

National Environment Scan

SCOPE



Documentation

Create waiver templates based on federal requirements and guidance.



Research

1115 waivers: Approved waivers including key components, evaluation criteria, public comments, and impact.

1332 waivers: Approved waivers including key components, impact, and population factors:

- health status,
- insurance coverage,
- eligible but unenrolled populations,
- employment and social determinants.

KEY RESOURCES

- ☐ Extensive experience preparing waivers in other states
- ☐ Network of State contacts to gather additional details as needed
- ☐ Strong familiarity with MEPS, ACS, CDC and BLS data, as well as other data aggregators.

Georgia Environment Scan

SCOPE



People

Target population, including insurance status, condition prevalence data, income, employment, incarceration, education, available housing data, and social services data



Payers

Payer mix across public and private sectors, coverage issues, complaint and independent review organization data



Providers

Network adequacy across primary care, specialties and facility types, workforce shortage areas, telehealth and integration strategies.

KEY RESOURCES

- ☐ Experience conducting environmental scans for Medicaid, commercial insurance, and behavioral health
- ☐ Cross-sector payer expertise, including network adequacy reviews for the public and private sectors
- ☐ Strong familiarity with MEPS, ACS, CDC and BLS data, as well as other data aggregators.

Primary Stakeholder Engagement

SCOPE

Based on our previous experience in similar scopes of work, potential collaborators and stakeholders to include in this engagement include:

**State
Agencies**

**Health Care
Providers**

**Customer
Groups**

**Organization
Boards**

KEY RESOURCES

- ✓ Staff expertise in all forms of stakeholder engagement and communication
- ✓ Extensive experience with public comment administration and evaluation processes
- ✓ In depth understanding of the challenges faced by each stakeholder group during similar reform efforts

Draft Waiver Options

1115 Waiver

- Assess State Plan and determine options that may be implemented through SPA
- Develop 3 key concepts, including authorities, policy implications, projected enrollment and expenditures, service delivery capacity, and economic impact assessment.

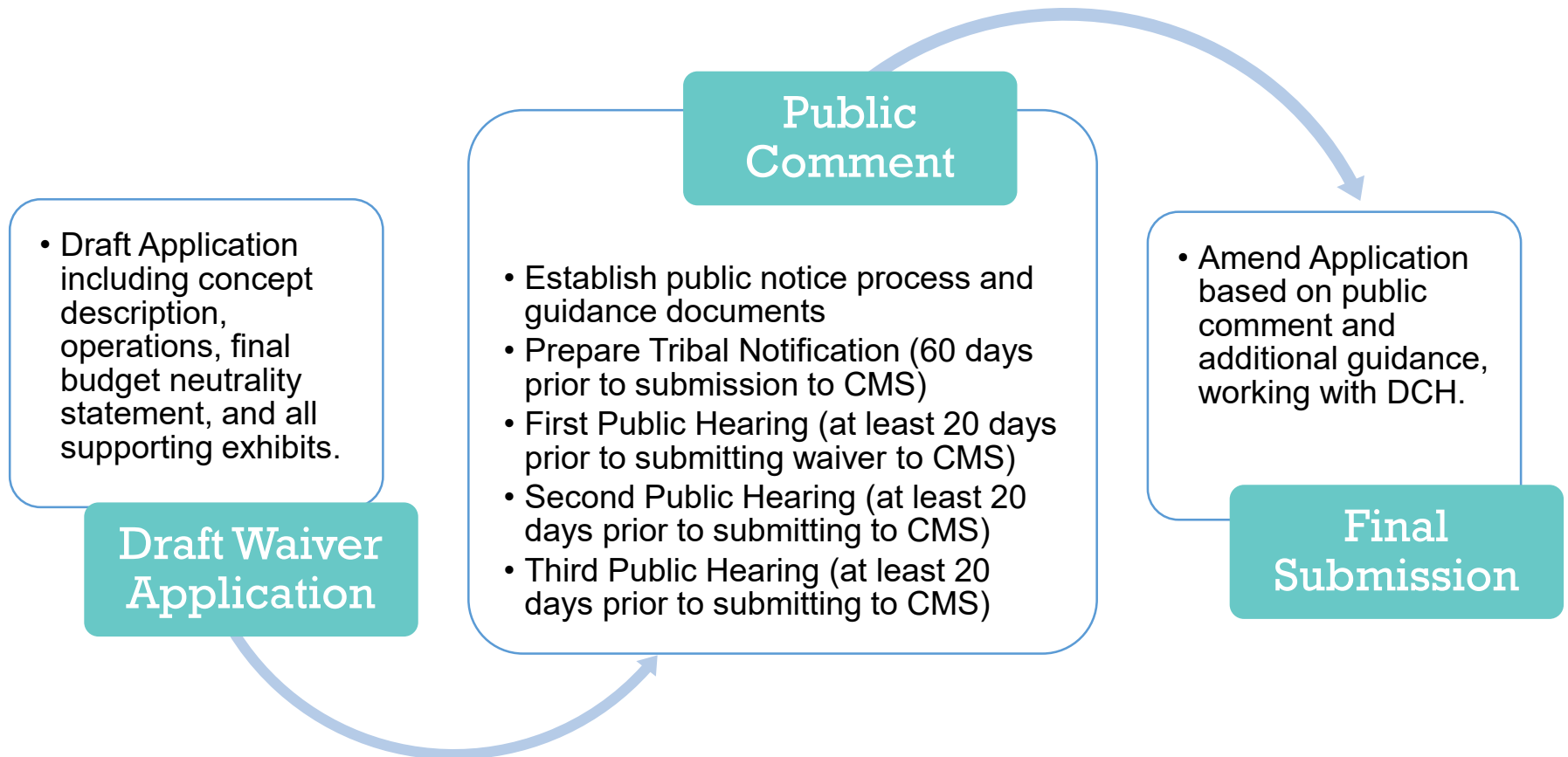
1332 Waiver

- Assess options and identify authorities, policy implications, projected enrollment, impact to premiums, risk profiles across commercial insurance markets.
- Provide overview of operational and information technology requirements, and governance recommendations.

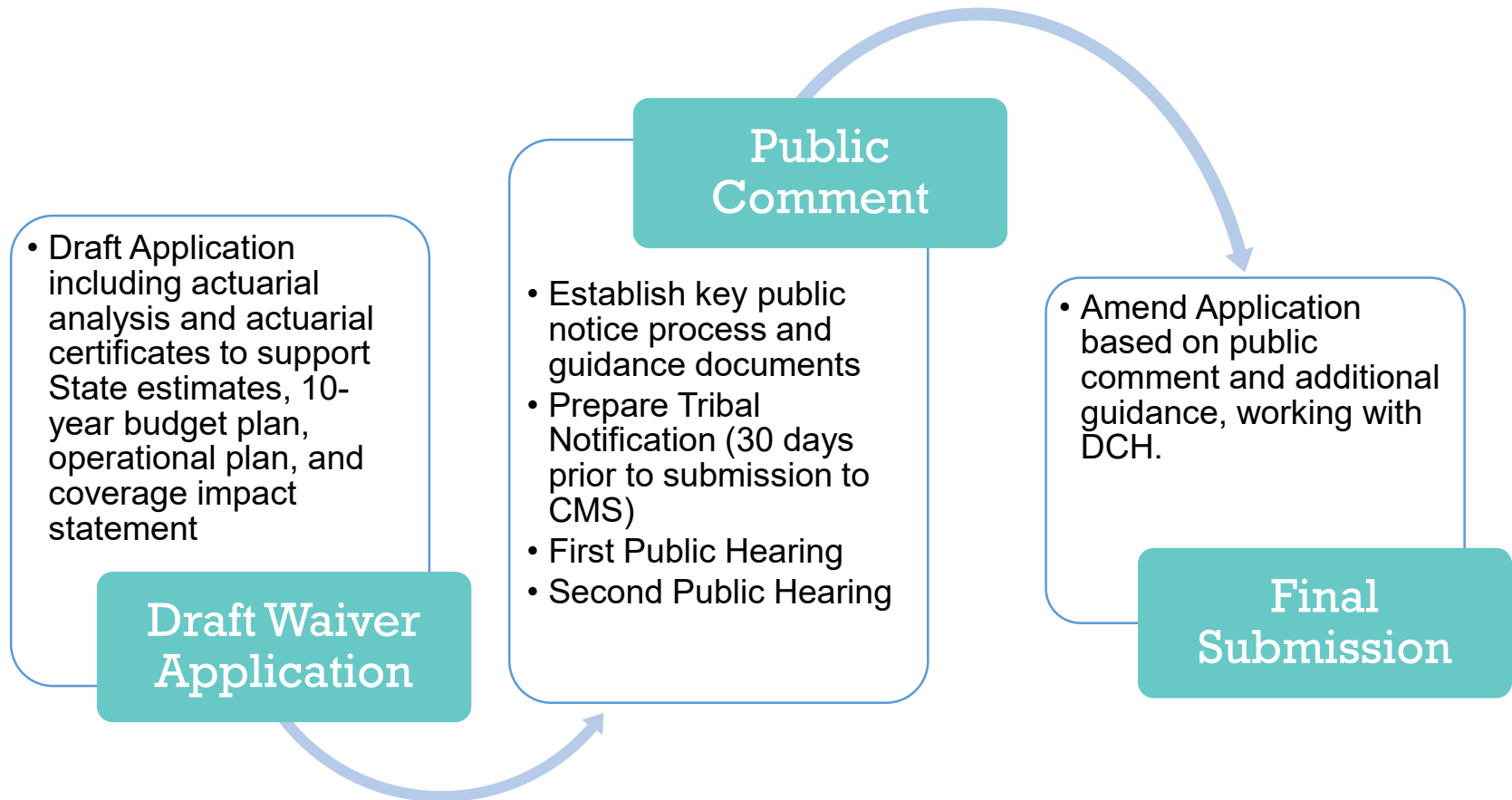
“Super” Waivers

Consider ways to coordinate 1115 and 1332 options as a “super waiver.” State coordination of 1115 and 1332 waivers has been anticipated by CMS and the Department of Treasury. Specific regulations have been developed to guide states interested in such coordination.

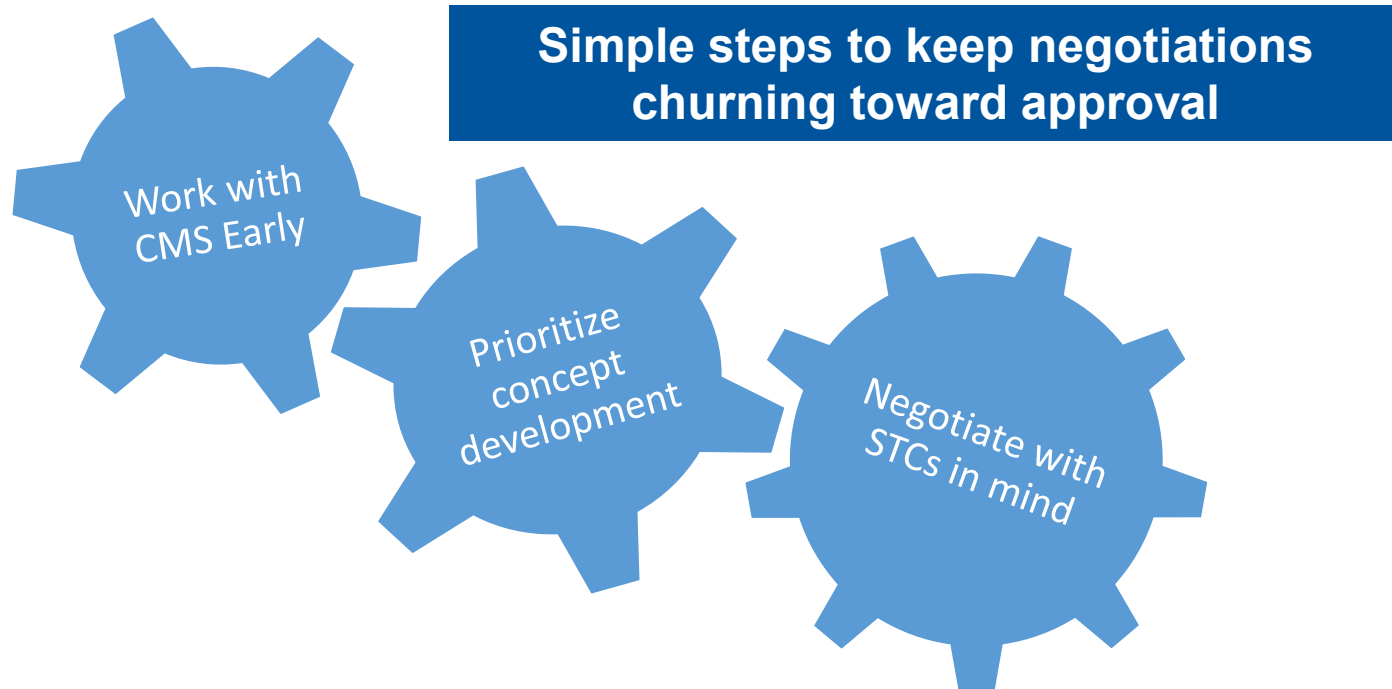
1115 Waiver Drafting Process



1332 Waiver Drafting Process



Waiver Negotiations

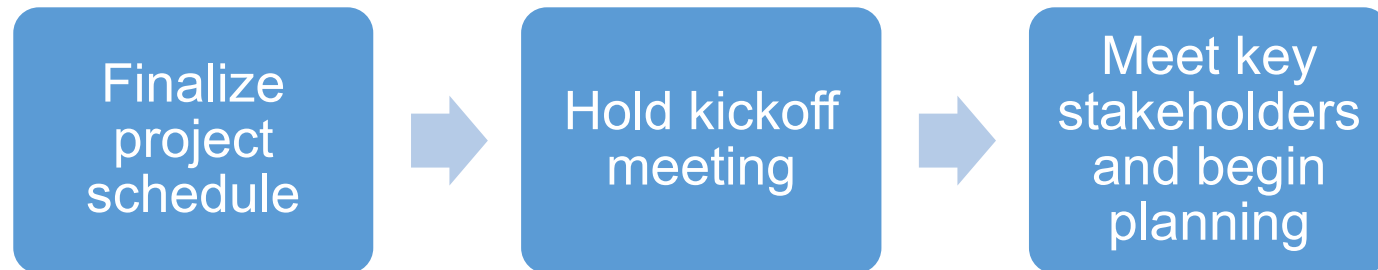


Project Timeline

Milestone/Deliverable	End Date
Project Kickoff and Initial Data Request	06/03/2019
National Environmental Scan Summary Report	06/21/2019
Georgia Environmental Scan Summary Report	06/28/2019
Primary Stakeholder Engagement	07/26/2019
1115 Waiver Option Report	08/16/2019
1332 Waiver Option Report	09/13/2019
Combined Waiver Options Report	09/30/2019
Draft 1115 Waiver Application	10/31/2019
Public Comment	12/02/2019
Draft 1332 Waiver Application	10/31/2019
Public Comment	12/02/2019
Final 1115 Waiver Application Submitted	12/31/2019
Final 1332 Waiver Application Submitted	12/31/2019
Support for Additional Information Requests and Negotiations	TBD

Next Steps

Immediately Ready to Start Work



We are confident our unique mix of Medicaid and commercial experience will provide a “Georgia Solution” that best meets the State needs and policy priorities.

Questions & Answers



www.publicconsultinggroup.com