Public Notice

Planning for Healthy Babies (P4HB) Demonstration Extension Proposal

Pursuant to 42 CFR 431.408, the Georgia Department of Community Health (DCH) is required to give a 30 day public notice and comment period and conduct two (2) public hearings related to the State’s plan to comply with Section 1115(a) of the Social Security Act (the Act) and 42 USC §1315(a) for demonstration projects. DCH hereby notifies the public via this Public Notice and electronic mailing list that it intends to submit a Demonstration Extension Proposal to the Centers for Medicare and Medicaid Services (CMS) for the Planning for Healthy Babies Program (P4HB).

The objective of this Demonstration Extension Proposal 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. The goal of this extension is to continue efforts to reduce Georgia’s low birth weight rate from 9.5% to 8.6% within three (3) years of implementation of the extension. Services will be delivered through the Georgia Families Care Management Organizations (CMOs).

27,180 women are projected to be served during the first year of the P4HB extension with an estimated cost of $13,284,266 for family planning only services; $864,000 for interpregnancy care (IPC) services; and $155,170 for Resource Mothers Outreach only services; with a total of $14,303,436 for Year 1 of the extension. Total federal costs for Year 1 of the extension are estimated to be $12,866,753 and total state costs for Year 1 are estimated to be $1,436,683. In addition to funds supporting the delivery of clinical services and supplies, DCH is requesting approval for $150,000 per year to support outreach activities designed to increase enrollment into the P4HB. These funds are being requested at the 50% match rate.

Eligibility requirements for P4HB differ slightly for the three levels of service offered within the program. All participants must be 18 through 44 year of age with incomes at or below 200% 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 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 baby (VLBW). P4HB also offers Resource Mothers Outreach only services to women 18 through 44 years of age who are able to bear children, have incomes at or below 200% of the FPL, 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.

1. 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. There are no co-payments required for family planning services.

2. 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.

3. 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.

4. 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 Outreach, and Resource Mothers Outreach will assist nurse case managers to achieve defined health improvement goals.

P4HB will continue to be evaluated using a quasi-experimental design to test for changes pre and post P4HB in the following performance measures: total family planning visits, use of contraceptive services and supplies, use of ICP services (primary care and outreach) by women with a VLBW delivery, average interpregnancy intervals, teen and repeat teen births, rate of low birth weight (LBW) and VLBW deliveries among the Medicaid population with comparisons to the statewide rates for LBW and VLBW deliveries, and rate of infant mortality among the Medicaid population with a comparison to the statewide rate for infant mortality.

A key hypothesis for P4HB is that the above mentioned changes will be sufficient to lower the number of overall Medicaid paid pregnancies, deliveries, births, and costs, such that the State and federal government would ultimately realize a net cost savings despite increased spending on family planning and interpregnancy care related services. The budget neutrality document for the first year of P4HB suggests this hypothesis is true.

The following waivers and expenditure authorities are requested for the Demonstration Extension Proposal. These are the same waiver and expenditure authorities as those approved in the current P4HB.

- Expenditure authority of Section 1115(a)(2) of the Act: Expenditures made by Georgia, which are not otherwise included as expenditures under Section 1903 of the Act shall, for the period of this P4HB, be regarded as expenditures under the State's Title XIX plan. All requirements of the Medicaid statute will be applicable to such expenditure authorities (including adherence to income and eligibility system verification requirements under Section 1137(d) of the Act), except those specified below as not applicable to these expenditure authorities.
• P4HB Population 1: Expenditures for extending family planning and family planning-related services provided to:
  o Uninsured women, ages 18 through 44, losing Medicaid pregnancy coverage at the conclusion of 60 days postpartum, and who are not otherwise eligible for Medicaid or CHIP; and
  o Uninsured women, ages 18 through 44, who have family income at or below 200 percent of FPL, and who are not otherwise eligible for Medicaid or CHIP.

• P4HB Population 2: Expenditures for extending family planning, family planning-related, and IPC services to women, ages 18 through 44, who deliver a VLBW baby on or after January 1, 2011, with family income at or below 200 percent of the FPL, and who are not otherwise eligible for Medicaid or CHIP. IPC services will be available for 2 years after enrollment.

• P4HB Services 1: Expenditures for extending Resource Mothers Outreach services to women, ages 18 through 44, who deliver a VLBW baby on or after January 1, 2011, with family income at or below 200 percent of the FPL, who are eligible for Medicaid.

• All Medicaid requirements apply, except the following:
  o Methods of Administration: Transportation- Section 1902(a)(4) insofar as it incorporates 42 CFR 431.53 to the extent necessary, to enable the State to not assure transportation to and from providers for P4HB Population 1.
  o Eligibility- Section 1902(a)(10)(A): To the extent necessary to allow Georgia to not provide medical assistance for P4HB Populations 1 and 2 until the individual has been enrolled in a managed care organization.
  o Amount, Duration, and Scope of Services (Comparability) Section 1902(a)(10)(8): To the extent necessary to allow the State to offer P4HB Population 1 a benefit package consisting only of family planning and family planning-related services and P4HB Population 2 a benefit consisting only of family planning, family planning related services, and IPC services.
  o Freedom of Choice Section 1902(a)(23): To the extent necessary to enable the State to limit freedom of choice of provider for P4HB Populations 1 and 2. Individuals may be auto-enrolled into the care management organization they were enrolled in at the time of the delivery of their VLBW baby.
  o Retroactive Eligibility Section 1902(a)(34): To the extent necessary to enable the State to not provide medical assistance to P4HB Populations 1 and 2 for any time prior to when an application for the P4HB is made.
  o Early and Periodic Screening, Diagnostic, and Treatment Section 1902(a)(43)(A) (EPSDT): To the extent necessary to enable the State to not furnish or arrange for all EPSDT services to P4HB Populations 1 and 2.

Opportunities for public comment will be held on August 4, 2014, at 10:30 am, at the Department of Community Health (2 Peachtree Street, N.W., Atlanta, Georgia 30303) in the 5th
Floor Board Room. A second opportunity for public comment will be held August 7, 2014, at
11:30 am, at the State Office of Rural Health (502 South 7th Street, Cordele, Georgia 31015).

Individuals who are disabled and need assistance to participate during these meetings should call
(404) 656-4479.

The public hearing will also be available via web conference on August 4, 2014 at 10:30 am.

1. To join the event go to:

   https://dchevents.webex.com/dchevents/onstage/g.php?d=666730069&t=a&EA=lshekell%40dch
   .ga.gov&ET=636e955681dcf16674a571080a3368b8&ETR=4f117bf16e35259a54b1ec557d35c
   bb&RT=MjMxMQ==&p

2. Click “join now”

To join the teleconference only
US Toll 1-650-479-3207

Access Code: 666730069

This event does not require a password.

Citizens wishing to comment in writing on the proposal should do so before September 3, 2014,
to the Department of Community Health, 2 Peachtree Street, NW, 36th Floor, Attention: Dr.
Janice Carson, Atlanta, Georgia 30303. Comments may also be submitted via fax to (404) 651-
6880 or via email at P4HB@dch.ga.gov.

A copy of the Planning for Healthy Babies Demonstration Extension Proposal is available on
DCH’s website at the following link:

https://dch.georgia.gov/sites/dch.georgia.gov/files/Section%201115%20Demonstration%20Reap-
plication%20concept%20paper%202014.pdf

Comments submitted will be available for review by the public at the Department of Community
Health, Monday – Friday 9:00am to 4:30pm in Room 4074, 2 Peachtree Street, N.W., Atlanta,
Georgia 30303-3141.

NOTICE IS HEREBY GIVEN THIS 1st Day of August, 2014
Clyde L. Reese III, Esq., Commissioner

4