

Board of Community Health  
Meeting  
May 9, 2013

**Members Present**

Jamie Pennington  
William Wallace  
Jack Chapman  
Mimi Collins  
Clay Cox  
Rick Jackson

**Members Absent**

Norman Boyd  
Kiera von Besser  
Donna Moses

The Board of Community Health held its regularly scheduled meeting at the Department of Community Health, Fifth Floor Board Room, 2 Peachtree Street, N.W., Atlanta, Georgia. Commissioner David A. Cook was also present. (An agenda and a List of Attendees are attached hereto and made official parts of these Minutes as Attachments #1 and #2). Vice Chairman Bill Wallace presided and called the meeting to order at 10:35 a.m.

**Minutes**

The Minutes of the March 28, 2013 meeting were UNANIMOUSLY APPROVED.

**Committee Reports**

Vice Chairman Wallace called on Mr. Cox to give the report of the Audit Committee. Mr. Cox MADE a MOTION that the Department proceed with negotiations to retain the services of Metcalf Davis/Maulden and Jenkins to perform the Audit of the FY2013 Financial Statements. Dr. Chapman SECONDED the MOTION. ON THE MOTION, the yeas were 6 nays 0, and the MOTION was APPROVED.

Mr. Cox stated that the Committee has developed an update charter and would like to have the Board's approval. Mr. Cox MADE a MOTION to approve the Audit Committee Charter. Dr. Chapman SECONDED the MOTION. ON THE MOTION, the yeas were 6 nays 0, and the MOTION was APPROVED. (A copy of the Audit Committee Charter attached hereto and made an official part of these minutes as Attachments #3)

The Chairman called on Mr. Chapman to give the report of the Care Management Committee. Dr. Chapman stated that SHBP gave a presentation on the Wellness program and its success.

Chairman Wallace reported that Dennis White and Kelly Gonzalez presented information regarding Georgia's Health Information Network in the Policy Committee meeting.

Mr. Cox was excused from the Board meeting for travel.

### **Commissioner's Report**

Commissioner Cook stated that the Governor issued a proclamation declaring the week of May 6-10, 2013 as State Employees Recognition Week. The Commissioner asked the Board to join him in thanking the staff for their dedication and hard work at DCH.

The Chair called on Mr. Fulenwider to present Proposed Rule: Chapter 111-3-9 – Implementing the Hospital Medicaid Financial Program Act. Mr. Fulenwider stated that the department is proposing a new Chapter and accompanying rules in order to implement the requirements of the Hospital Medicaid Financing Program Act. Chapter 111-3-9 and accompanying Rules .01 through .04 establish a provider payment program for hospitals in a manner similar to the program enacted by the General Assembly in 2010 and is commonly referred to as the "Continuation Program".

The Georgia Hospital Medical Financing Program Advisory Committee met on March 20, 2013 and unanimously recommended this proposed Rule to the Board for its favorable adoption. Mr. Fulenwider stated that a Public Hearing was held on April 4, 2013. No one appeared to speak at the hearing and no written comments were received.

Dr. Chapman MADE a MOTION to approve for final adoption, the Proposed Rule: Chapter 111-3-9 – Implementing the Hospital Medicaid Financial Program Act. Ms. Collins SECONDED the MOTION. ON THE MOTION, the yeas were 5, nays 0, and the MOTION was APPROVED. (A copy of the Proposed Rule: Chapter 111-3-9 – Implementing the Hospital Medicaid Financial Program Act is attached hereto and made an official part of these minutes as Attachments #4)

Mr. Fulenwider presented Proposed Rule: Chapter 111-3-10 – Implementing the Hospital Medicaid Financial Program Act and explained that this chapter and rules establish a Provider Payment Program for subclass hospitals to obtain federal financial participation for medical assistance payments allowable under federal Upper Payment Limit methodology. The subclass of hospitals participating in this program is defined in

the proposed Rule as "Non-Governmental Hospitals". Revenues will be handled the same as in Chapter 111-3-9, as will any penalties assessed.

The Georgia Hospital Medical Financing Program Advisory Committee met on March 20, 2013 and unanimously recommended this proposed Rule to the Board for its favorable adoption. Mr. Fulenwider stated that a Public hearing was held on April 4, 2013. No one appeared to speak at the hearing and no written comments were received.

Dr. Chapman MADE a MOTION to approve for final adoption, the Proposed Rule: Chapter 111-3-10 – Implementing the Hospital Medicaid Financial Program Act. Ms. Collins SECONDED the MOTION. ON THE MOTION, the yeas were 5, nays 0, and the MOTION was APPROVED. (A copy of the Proposed Rule: Chapter 111-3-10 – Implementing the Hospital Medicaid Financial Program Act is attached hereto and made an official part of these minutes as Attachments #5)

The Chair recognized Dr. Dubberly, Chief, Medicaid Division to present the Inpatient and Outpatient Hospital Provider Fee Public Notice. Dr. Dubberly explained that the Hospital Medicaid Financing Program Act which was signed into law on February 13, 2013 by Governor Deal would allow continuance of the current program in order to preserve access to health care services and promote continued viability of Georgia's Medicaid program. The department is proposing to continue the program with an add-on payment rate of 11.88%. The payments will apply to Medicaid and PeachCare for Kids programs. Care Management Organizations are also required to pass through this increase in payment to providers for services.

The Hospital Medicaid Financing Program Advisory Committee has reviewed and unanimously recommended the Board's adoption of the proposed inpatient and outpatient hospital state plan amendment which continues the current hospital provider fee through June 30, 2017.

An opportunity for public comment was held with no response being received in writing or through the public hearing process.

Dr. Chapman MADE a MOTION to approve for final adoption, the Inpatient and Outpatient Hospital Provider Fee Public Notice. Ms. Pennington SECONDED the MOTION. ON THE MOTION, the yeas were 5, nays 0, and the MOTION was APPROVED. (A copy of the Inpatient and Outpatient Hospital Provider Fee Public Notice is attached hereto and made an official part of these minutes as Attachment #6)

Vice Chairman Wallace called on Mr. Looby to present Healthcare Facility Rule changes for: Disaster Preparedness, Drug Abuse Treatment Programs, Narcotic Treatment Programs, and Traumatic Brain Injury Facilities.

Mr. Looby explained that the changes for each of these rules were to repeal the rules under the existing chapters and reinstate them under Chapter 111-8 of the Official Code of Georgia Annotated. Also, to move the rules under the jurisdiction of the Department of Community Health rather than the Department of Human Resources, which has since been abolished.

Ms. Collins MADE a MOTION to approve for initial adoption, Healthcare Facility Regulation: Technical Amendments to Repeal and Replace Rules for: Disaster Preparedness, Drug Abuse Treatment Programs, Narcotic Treatment Programs, and Traumatic Brain Injury Facilities. Dr. Chapman SECONDED the MOTION. ON THE MOTION, the yeas were 5, nays 0, and the MOTION was APPROVED. (A copy of the Healthcare Facility Regulation: Technical Amendments to Repeal and Replace Rules for: Disaster Preparedness, Drug Abuse Treatment Programs, Narcotic Treatment Programs, and Traumatic Brain Injury Facilities is attached hereto and made an official part of these minutes as Attachments #7, 8, 9, & 10)

Commissioner Cook commended Mr. Looby and his team for their success on the GAMap2Care project and its selection in the 2013 State Technology Innovation Showcase. He further stated that GTA has submitted GAMap2Care to the National Association of State Chief Information Officers for its 2013 State IT Recognition Awards in the category of Digital Government: Government to Citizen.

Vice Chairman Wallace called on Tim Connell, Chief Financial Officer to present Federally Qualified Health Center and Rural Health Clinic rate Increase Public Notice. Mr. Connell explained that the federal government has criteria for primary care providers to qualify as FQHCs, hospital based RHCs or freestanding RHCs. By qualifying under the federal guidelines, these providers receive enhanced Medicare and Medicaid reimbursement. The federal Prospective Payment System locks FQHCs/RHCs enrolled in Medicaid prior to FY01 into a payment based on their cost in 1999-2000. These payments may no longer represent their cost. The Department of Community Health is proposing an alternative method for those providers that are paid less than the statewide average rate. This method would raise their reimbursement rate to the current Medicaid state average Prospective Payment System. These changes are called for in the recently enacted State Fiscal Year 2014 Appropriations Act and are subject to approval by the Centers for Medicare and Medicaid Services. An opportunity for public comment will be held on May 16, 2013 and comments will be submitted to the Board prior to the June Board meeting.

Dr. Chapman MADE a MOTION to approve for initial adoption, the Federally Qualified Health Center and Rural Health Clinic rate Increase Public Notice. Ms. Pennington SECONDED the MOTION. ON THE MOTION, the yeas were 5, nays 0, and the MOTION was APPROVED. (A copy of the Federally Qualified Health Center and Rural

Health Clinic rate Increase Public Notice is attached hereto and made an official part of these minutes as Attachment #11)

Vice Chairman Wallace called on Kallarin Richards, Legislative Liaison, to present the Legislative Update for the 2013 session of the General Assembly. Ms. Richards began by thanking the staff of DCH for their support during the legislative session. She further stated that this was the beginning of the two year term and there were close to 50 new members of the legislature. Due to that, a lot of focus was spent on educating the new members on the functions of DCH and the Medicaid program. The Department filed a bill this year initiated by our Office of Inspector General; HB 608, authored by Representative Penny Houston, requiring a national background check program for employees of long-term care facilities, which interface with the FBI's new "Rapback". No action was taken on that bill this year and it is available for passage in 2014. Ms. Richards stated that one of the biggest issues in healthcare this year was centered on the renewal of the Hospital Medicaid Financing Program. DCH has fully implemented this and we are awaiting approval from CMS. She further stated that, going forward, there are several study committees that the Department will monitor in the interim. (A copy of the 2013 Legislative Summary is attached hereto and made an official part of these minutes as Attachment #12)


The Vice Chairman called on Tim Connell, Chief Financial Officer to present an update on HB 132 and the Budget. Mr. Connell stated that HB 132, relating to State Board of Pharmacy and the State Board of Dentistry are being transferred administratively from the Secretary of State to the Department of Community Health. He further stated that the Department has met with representatives of each board and are continuing to work with each board to coordinate a smooth transition.


Mr. Connell thoroughly presented budgets for each Division within the Department and affirmed that the 2014 Fiscal Year is underfunded for costs projections in FY14, however, that is not unusual and the Department will be asking for additional funding in the amended FY14 budget. He further stated that the Department is anticipating a surplus in both the Medicaid and SHBP budgets for FY13. (A copy of the FY 2013 and FY 2014 Final Budgets is attached hereto and made an official part of these minutes as Attachment #13)

### **Adjournment**

There being no further business to be brought before the board, Vice Chairman Wallace adjourned the meeting at 11:30 a.m.

THESE MINUTES ARE HEREBY APPROVED AND ADOPTED THIS THE 13th DAY  
OF June, 2013.

  
Jamie Pennington  
Secretary

  
Norm Boyd  
Chairman

Official Attachments:

- #1 List of Attendees
- #2 Agenda
- #3 Audit Committee Charter
- #4 Chapter 111-3-9 Implementing the Hospital Medicaid Financial Program Act.
- #5 Chapter 111-3-10 Implementing the Hospital Medicaid Financial Program Act
- #6 Inpatient and Outpatient Hospital Provider Fee Public Notice
- #7 Chapter 111-8-16 Disaster Preparedness
- #8 Chapter 111-8-19 Drug Abuse Treatment Programs
- #9 Chapter 111-8-53 Narcotic Treatment Programs
- #10 Chapter 111-8-71 Traumatic Brain Injury Facilities
- #11 Federally Qualified Health Center and Rural Health Clinic rate Increase Public Notice
- #12 2013 Legislative Summary
- #13 FY 2013 and FY 2014 Final Budgets