

Board of Community Health
Meeting
June 14, 2012

Members Present

Ross Mason
Norman Boyd
Jack M. Chapman, M.D.
Clay Cox
Inman C. "Buddy" English, M.D
Hannah Heck
Jamie Pennington
William Wallace

Members Absent

Archer Rose

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). Chairman Ross Mason called the meeting to order at 10:32 a.m.

Minutes

The Minutes of the May 10, 2012 meeting were UNANIMOUSLY APPROVED and ADOPTED.

Chairman Mason recognized Dr. English for seven years of commitment to the Board of Community Health and thanked him for his service.

Committee Reports

Dr. English stated that the Nominating Committee met and after due deliberations recommends the following slate of officers for the DCH Board of Directors for FY13; Chairman, Ross Mason; Vice Chairman, Norm Boyd; Secretary, Jamie Pennington. The Chairman asked if there were other nominations. None were heard. Dr. Chapman MOVED that the nominations be closed. Ms. Pennington SECONDED the Motion. ON THE MOTION, the yeas were 8, nays 0 and the MOTION was UNANIMOUSLY APPROVED. Nominations were closed. Mr. Cox MADE a MOTION that the officers nominated for said position be elected. Ms. Heck SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0, and the officers for FY13 were elected.

Chairman Mason stated that the Policy Committee met and Dr Kelly Ahn, who established the first concierge Practice in the state of Georgia was the guest speaker, The discussion was about primary care physicians, wellness and prevention. The discussion transitioned into what the state can do to promote a holistic approach to medical care. Tom Emerick, Former head of Benefits Worldwide for Wal-Mart and current president of Emerick Consulting LLC., spoke about the challenge of average cost per patient for care.

Ms. Heck stated that the Care Management Committee met and received an update from the State Health Benefit Plan on trends for utilization of the emergency room by CIGNA and United Healthcare. Discussion was also had relative to innovative approaches in SHBP to incentivize wellness plans within the state. The Committee also received an update on CMO case and disease management and will continue to track the progress and how it impacts the state.

Report of the Commissioner

The Commissioner stated that there were several action items to bring before the Board today which fall into two categories, Health Facility Regulation and Medicaid. The item under Health Facility Regulation is an administrative simplification. DCH is always looking at ways to make it easier for the public to interact with the Department and this item will allow this interaction.

Mr. Brian Looby, Chief, Healthcare Facility Regulation presented the new Licensing and Enforcement Rule changes to allow payments electronically. Currently payments must be made by check or money order. This rule change will allow payments to be made by credit card through our website, making it more convenient for license holders and allow us to spend less time processing payments. Dr. Chapman MADE a MOTION to approve for initial adoption the Healthcare Facility Regulation Licensing and Enforcement Rule Change to Allow Payment s electronically. Mr. Boyd SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0 and the MOTION was UNANIMOUSLY APPROVED. (A copy of the Healthcare Facility Regulation Licensing and Enforcement Rule Change to Allow Payment s electronically is attached hereto and made an official part of these minutes as Attachment #3)

Mr. Wallace, having seen recent articles in the media related to personal care homes, asked for an update on the new law and rules crafted and passed by DCH on Personal Care Homes. Mr. Looby stated that the Department has doubled its legal staff and is pursuing more revocation action than in prior years. The Department drafted and successfully passed legislation that clarifies the law on elder abuse and requires Personal Care Homes to be licensed prior to beginning operation. The Commissioner commended Mr. Looby and his staff on the steps that had been taken to enhance durability to make sure the Personal Care Homes are safe for Georgia citizens.

The Commissioner offered a brief update on the Medicaid Redesign. He noted that DCH had recently issued a press release moving the timeline for decision on the redesign to the summer. He stated that since the Navigant report came out the Department has been working with three task forces, Children and Family, Providers and Aged, Blind and Disabled. The Department has received great input through the task forces. There is also a non-DCH workgroup for Mental Health and Substance Abuse that has been working with the Department.

Mr. Vince Harris, Chief Financial Officer presented a Medicaid Financial Report. The report reflected the top ten categories of service, total of claims paid, top ten fee for service hospital payments, along with care management organization payments. The charts also reflect the Medicaid enrollment and expenditures from 1996 thru 2019. Also reflected in the report, the preliminary amended FY 2013 budget request and the impact of the Affordable Care Act to the State of Georgia Medicaid program. Mr. Harris reported a projected Medicaid shortfall this year of \$95 million and \$308 million in FY13. (A copy of the Medicaid Financial Report is attached hereto and made an official part of these minutes as Attachment #4)

Mr. Mason indicated that he had been getting questions on the hospital fee statute and asked for an update. Mr. Harris stated that the state is entering the last year of the hospital fee and that it will have to be re-negotiated or remodeled. He further stated that the Georgia Hospital Association was taking the lead on the negotiations as well as the Office of Planning and Budget. The Department is working with both in modeling out a potential new hospital fee. Mr. Mason asked if in a future meeting there could be a discussion on where the State of Georgia stands in comparison to other states on matching federal funds. Mr. Cox asked how implementation of Affordable Care Act would impact the state? At this point the Supreme Court has not rendered a decision so an answer is not available. Mr. Mason asked what the projection of growth rate to state revenue would be? Mr. Harris stated that the growth rate for state revenue was 4% and Medicaid participation would be 5%.

Dr Jerry Dubberly presented Hospital Acquired Conditions Public Notice for final adoption. He stated that Medicare has held a long standing rule that Hospital Acquired

Conditions are not paid by Medicare. A public hearing was held and no response was received on the Public Notice. Ms. Pennington MADE a MOTION to approve for final adoption the Hospital Acquired Conditions Public Notice. Ms. Heck SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0 and the MOTION was UNANIMOUSLY APPROVED. (A copy of the Hospital Acquired Conditions Public Notice is attached hereto and made an official part of these minutes as Attachment #5)

Dr. Dubberly presented the Payments for Medicare Dually Eligible Beneficiaries Public Notice for Initial Adoption. He stated that dual eligibility is established when a patient is covered by Medicare and Medicaid. Medical bills would first be submitted to Medicare and then transferred to Medicaid for payment. The proposed change will analyze the difference that Medicare would pay as the primary insurance provider and arrive at a co-insurance payment for the patient. A public hearing was held and during the public comment period, four oral comments were provided and seven written comments were received. The comments voiced concerns that the current reimbursement rates were too low and that providers were forced to transport patients without determining if the service was deemed medically necessary also those rates had not been adjusted for ten years. In addition physicians asserted that they would be forced to subsidize the program and the population affected has higher health cost initially. The Department expressed appreciation for the input. Ms. Heck MADE a MOTION to approve for final adoption the Medicare Dually Eligible Beneficiaries Public Notice. Dr. English SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0 and the MOTION was UNANIMOUSLY APPROVED. (A copy of the Medicare Dually Eligible Beneficiaries Public Notice is attached hereto and made an official part of these minutes as Attachment #6)

Mr. Dubberly presented Community Based Alternative for Youth (CBAY) Public Notice. The CBAY program has operated as a demonstration waiver through a grant from the Centers of Medicare and Medicaid Services since 2009. The Demonstration is authorized under the Deficit Reduction Act of 2005 and has sunset provisions to enable continuance of the program for purposed of allowing Members served as of 9/30/12 to age out or graduate from the program. The CBAY program offers alternatives to treatment provided in Psychiatric Residential Treatment Center. The target population ranges in age from four to 21. CBAY focuses on an intensive, family driven care management service which coordinates behavioral health. Ms. Pennington MADE a MOTION to approve for initial adoption Community Based Alternative for Youth (CBAY) Public Notice. Mr. Boyd SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0 and the MOTION was UNANIMOUSLY APPROVED. (A copy of the

Community Based Alternative for Youth Public Notice is attached hereto and made an official part of these minutes as Attachment #7)


Mr. Dubberly presented the NOW and COMP Waiver rates as an outstanding item for the Board's consideration. Mr. Dubberly suggested as a result of the response to the Public Hearing, the rate package be returned to DBHDD for further review. Ms. Pennington MADE a MOTION to return the NOW and COMP Waiver rates to the Department of Behavioral Health and Developmental Disabilities for further consideration. Mr. Boyd SECONDED the MOTION. ON THE MOTION, the yeas were 8, nays 0 and the MOTION was UNANIMOUSLY APPROVED.

Adjournment

There being no further business to be brought before the board, Chairman Mason adjourned the meeting at 11:47 a.m.

THESE MINUTES ARE HEREBY APPROVED AND ADOPTED THIS THE 9th DAY OF August, 2012.


JAMIE PENNINGTON
Secretary



ROSS MASON
Chairman

Official Attachments:

- #1 List of Attendees**
- #2 Agenda**
- #3 Healthcare Facility Regulation Licensing and Enforcement Rule Changes**
- #4 Medicaid Financial Report**
- #5 Hospital Acquired Conditions Public Notice – final adoption**
- #6 Payments for Medicare Dually Eligible Beneficiaries Public Notice –final adoption**
- #7 Community Based Alternative for Youth Public Notice – initial adoption**