

Board of Community Health  
Meeting  
July 10, 2014

**Members Present**

Norman Boyd  
Bill Wallace  
Allana Cummings  
Jamie Pennington  
Donna Moses  
Clay Cox  
Kiera von Besser

**Members Absent**

Rick Jackson

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 Clyde L. Reese, III 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 Norm Boyd presided and called the meeting to order at 10:36 a.m.

**Minutes**

The Minutes of the June 12, 2014 meeting were unanimously approved.

**Opening Comments**

None to report

**Committee Reports**

There were no Committee Meetings held in July, 2014.

**Commissioner's Report**

Commissioner Reese thanked Mr. Boyd, members of the Board and attendees from the public and staff for their attendance today. You probably know that on July 1, we announced that we selected United Healthcare and Kaiser Permanente to join Blue Cross / Blue Shield of Georgia as vendors for the 2015 State Health Benefit Plan year. Blue Cross Blue Shield will exclusively administer our HRA offerings, Gold, Silver and Bronze. They will also offer a state wide open HMO product, along with Medicare Advantage. United Healthcare will offer a state wide open HMO along with Medicare

Advantage Plan and bring back the High Deductible Health Savings Plan. Kaiser Permanente will offer a fully insured closed model HMO in the 29 county metro areas. We think this will provide more choices to our members, more insurance options, and more vendors and also provide more choices to our providers throughout the state. We will be bringing to this board next month, at the regular August meeting, the proposed Plan Design and Rates for these companies to administer going forward. Commissioner Reese stated his commitment to get the Plan Design and Rates to the Board members in an expeditious manner to give ample time to review and be ready to consider them at the next meeting.

Commissioner Reese stated that he is pleased this morning to announce that we have chosen to move forward with Mr. Jeff Rickman as the permanent Chief of the State Health Benefit Plan. Commissioner Reese asked Jeff Rickman to stand and stated that Jeff is an attorney who has been working as Counsel to the Plan within the Department. Jeff has been working as Interim Chief since March 2014 and has done a very commendable job in getting us through this period of transition and to a period of continuity and stability within the Plan. Commissioner Reese thanked Jeff for agreeing to take on the role and believes that everyone will find Jeff very responsive and an intelligent leader of the State Health Benefit Plan.

Commissioner Reese stated that in August there are always two Board meetings. There will be the regularly scheduled meeting which will primarily deal with the Plan Design and Rates for the State Health Benefit Plan along with possibly a few other items for the second Thursday in August. Approximately two weeks later on the last Thursday of August, we will confirm a date and communicate it, there will be a special meeting to begin the budget cycle for the 2015 amended and 2016 budgets that will ultimately be approved by this board and then go to the Office of Planning and Budget, through the Governor's process and then back to the General Assembly for the 2015 session. Commissioner Reese concluded his report.

Chairman Boyd called on Jerry Dubberly to present.

Jerry Dubberly presented the proposed transition from using Qualified Income Trusts (QITs) to Adult Medically Needy (AMN) for nursing home and institutional hospice eligibility qualifications. Dr. Dubberly explained the purpose of the QIT as well as the AMN process is to permit those individuals with incomes over the Medicaid eligibility threshold to qualify for Medicaid by using that additional income to offset their Medicaid expenditures in an equal amount.

A public comment period was held which included a public hearing as well as an opportunity for written comments. No comments were heard at the public hearing. Three written comments were received. Comments were received from the Georgia

Council on Developmental Disabilities, the Office of State Long Term Care Ombudsman, and the Georgia Legal Services Program. The comments were in support of the transition. However, caution was expressed to ensure that an institutional bias was not created; members currently eligible do not have their eligibility negatively impacted; and waiver services are uninterrupted. Additionally, Georgia Legal Services Program did have a number of questions regarding the implementation of this transition that the Department is working to address.

Dr. Dubberly stated the department appreciated the support and questions received. He affirmed that the department also wants to ensure an institutional bias is not inadvertently created through this transition, and waiver members are allowed to continue with those services in an uninterrupted manner. However, the department has identified that it needs additional time to ensure the operational components of this transition are effectively communicated and executed. Therefore, a request was made of the Board to rescind this action.

Chairman Boyd asked a clarifying question as to whether this means the Department would abandon this transition all together or delay the implementation. Dr. Dubberly clarified that while he asked for the proposed action to be rescinded, the Department intends to bring this action back to the board at a future date once the outstanding issues are resolved.

Having no further questions, a motion was made by Jamie Pennington to approve the rescinding of this proposed action. The motion was seconded by Clay Cox. The Board voted unanimously to rescind the action.

### **New option Waiver (NOW) and Comprehensive Supports Waiver (COMP)**

Dr. Dubberly reminded the Board that this proposed action has three components: 1) a 1.5% rate increase for certain services; 2) the addition of a new service Behavioral Support Services; and 3) unbundling of Skilled Nursing Services from residential and community living support services.

Subsequent to the June Board meeting, an opportunity for public comment was given. There were three comments heard in the public hearing and two written comment received. The Georgia Council on Developmental Disabilities (GCDD) and the Georgia Association of Community Care Providers spoke in support of the 1.5% rate increase. A provider spoke neither in favor nor in opposition to the rate increase. Instead, the provider questioned the sufficiency of the public notice. An overview of those concerns was provided to the Board. The written comments were from the Georgia Council on Developmental Disabilities and the provider who spoke at the public hearing. Those written comments mirrored their verbal comments.

Dr. Dubberly expressed appreciation of the comments in support of the rate increase. He also acknowledged and addressed the concerns of the provider requesting additional information in the public notice.

### **Independent Care Waiver Program (ICWP)**

Next, Dr. Dubberly presented the proposed rate increase for the ICWP program. This proposed action included a 5% rate increase for Personal Support Services. The funding mechanism proposed for this rate increase is the use of Balancing Incentive Payment Program (BIPP) funds through the third quarter of SFY2016 with appropriated state funds being used thereafter.

An opportunity for public comment was held with four oral comments being heard at the public hearing and two written comments being received. All speakers spoke in favor of the rate increase. Two of the speakers had experience with the ICWP program as either a member or a parent of a member. Both appreciated the rate increase, but they spoke to the rates still being low and inconsistent with the rates of other waivers. These low rates cause issues with hiring and retaining quality workers. A speaker from The Georgia Council on Developmental Disabilities (GCDD) who identified herself as an ICWP recipient spoke in support of the 5% rate increase citing this as a “step in the right direction.” The speaker referenced the current rates are very low and that impedes her ability to find and keep qualified caregivers – especially in a rural area. One of the speakers thanked the department and the Office of Planning and Budget for the use of BIPP funds in this manner. That same speaker also requested greater consistency in the content of the public notices. The example was given that some notices contained the current and new rate while another only referenced the percentage increase. The written comments received mirrored the comments heard at the public hearing.

### **Elderly and Disabled Waiver Rate Increase and Incentive Program**

Finally, Dr. Dubberly presented the proposed rate increase and incentive program for the Elderly and Disabled Waiver program. This item included a 5% rate increase for selected services and the establishment of a provider quality incentive payment program for the enhanced case management component of the waiver. These actions are funded through a combination of BIPP funds and the use of appropriations by the general assembly.

During the public comment period, four oral comments were heard at the public hearing and three comments were received in writing. All written and oral comments received were in favor of the proposed actions.

## Request for Board Action

In conclusion and relevant to all waiver actions presented, Dr. Dubberly advised the Board of a new CMS rule effective March 17, 2014 that made changes to how and where services can be delivered as well as the waiver amendment and renewal process. This change only permits prospective changes in rate methodologies. Additionally, the new rule also requires an approved Home and Community Based Setting Transition Plan with any waiver amendment submitted to CMS on or after March 17, 2014. Dr. Dubberly explained that this transition plan is currently out for review, and cannot be submitted to the Centers for Medicare and Medicaid Services (CMS) until after it has been subject to public comment and the public comment incorporated into the plan. Further, CMS will not accept and approve the waiver amendment until the transition plan is submitted and approved.

Given the new rule, an implementation date of July 1, 2014 as called for in the proposed actions is not possible. Dr. Dubberly requested the Board's approval to rescind this proposed action with DCH intending to resubmit a revised public notice with a future effective date that more accurately reflects a more feasible effective date. Additionally, the Department also uses this time to review options available that may permit DCH to preserve the full state dollars allotted for this rate increase.

Chairman Boyd opened the floor for questions. Mr. Clay Cox asked Dr. Dubberly about the continued and sometimes changing requirements and additional requests CMS made of states and asked if the volume was increasing. Dr. Dubberly affirmed that DCH continues to work toward compliance with all CMS requests. He acknowledged that there have been a number of requests recently. Further, there have been clarifications that CMS has made which has caused some extra effort on the part of the State. Mr. Cox also asked if this means that providers do not know when they will see the increase that was appropriated. Dr. Dubberly affirmed that the exact date is not known at this time.

With no further questions, Chairman Boyd called for a motion. Jamie Pennington made the motion to approve rescinding these waiver actions. Donna Moses seconded the motion. The Board ~~unanimously~~ approved the motion *by a vote of six (6) ayes and one (1) abstention. Bill Wallace abstained.*

## New Business

None to report

## Adjournment

There being no further business to be brought before the Board, Chairman Boyd adjourned the meeting at 11:08 a.m.

THESE MINUTES ARE HEREBY APPROVED AND ADOPTED THIS THE 14th DAY OF August, 2014.

  
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Jamie Pennington  
Secretary

  
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Norm Boyd  
Chairman

Official Attachments:

- #1 List of Attendees
- #2 Agenda
- #3 Reinstatement of the Aged, Blind, and Disabled Nursing Home and Institutionalized Hospice Medically Needy Medicaid Coverage Program in the Medicaid State Plan Public Notice
- #4 New Options Waiver Program (NOW) Public Notice
- #5 Comprehensive Supports Waiver Program (COMP) Public Notice
- #6 Independent Care Waiver Program (ICWP) Public Notice
- #7 Elderly and Disabled Waiver (E&D) Rate Increase and Incentive Program Public Notice