PUBLIC NOTICE

Pursuant to 42 C.F.R. § 447.205, the Georgia Department of Community Health is required to give public notice of any significant proposed change in its methods and standards for setting payment rates for services.

Georgia Hospice Program and Pediatric Concurrent Care

The Georgia Hospice Program, an optional Medicaid State Plan service, provides palliative care to members who are certified to be terminally ill. Regulatory changes by the Centers for Medicare and Medicaid Services (CMS) have created the need to amend the State Plan for hospice services. These changes include: 1) coverage for pediatric curative care concurrent to hospice services, 2) the elimination of certain diagnoses that warrant hospice benefits, and 3) the requirement of a physician face-to-face encounter for recertification.

1) The Affordable Care Act requires states that provide the optional hospice benefit to allow children who are terminally ill to continue to receive curative services. Prior to this change, any member who elected the hospice benefit was required to forego any further curative treatment. The DCH proposed change allows children under age 21 to continue to receive curative treatment concurrently with non-duplicative hospice services. This policy was effective beginning March 23, 2010.

CMS recently released new guidance related to hospice services that direct changes in numbers 2 and 3 below.

2) Any diagnoses considered Symptoms, Signs, or Ill-Defined Conditions will no longer be viable for use as the primary justification for hospice certification. This includes diagnoses such as Adult Failure to Thrive and Non-Specific Abnormal Finding. Such diagnoses will still be allowable as secondary diagnoses. The effective date for Medicaid policy is July 1, 2013. Denials of claims listing any of these as the primary diagnosis will begin effective October 1, 2014.

This change is expected to reduce annual Medicaid expenditures by (\$1,747,819) in SFY 2015.

3) Hospice recertification (physician attestation that member remains terminally ill and meets hospice eligibility criteria) after the first two election periods will require the physician to evaluate the member's status based on an in-person, face-to-face assessment. The effective date for Medicaid policy is November 1, 2013.

This change is projected to reduce hospice utilization by (\$895,327) annually in SFY 2015.

The total projected impact of these changes is: (\$2,643,146) (Total) / (\$910,301) (State Funds)

Additionally, a modification to the State Plan is required to reflect revised hospice payment rate methodology and wage index as set forth in the American Recovery and Reinvestment Act and published in the Federal Register on August 8, 2008. The methodology was adopted and has been

utilized to set rates since the October 1, 2009 effective date. This modification updates the State Plan to reflect the new methodology accordingly.

This public notice is available for review at each county Department of Family and Children Services office. An opportunity for public comment will be held on **October 24, 2013, 9:00 a.m.** at the Department of Community Health (2 Peachtree Street, N.W., Atlanta, Georgia 30303) in the 40th Floor Board Room. Individuals who are disabled and need assistance to participate during this meeting should call (404) 656-4479. Citizens wishing to comment in writing on any of the proposed changes should do so on or before **October 28, 2013**, to the Board of Community Health, Post Office Box 1966, Atlanta, Georgia 30303.

Community Health, Monday – Friday, 9:00 a.m. to 4:30 p.m., in Room 4074, 2 Peachtree Street, N.W., Atlanta, Georgia 30303. Comments from written and public testimony will be provided to the Board of Community Health prior to the **November 14, 2013,** Board meeting. The Board will vote on the proposed changes at the Board meeting to be held at 10:30 a.m. at the Department of Community Health (2 Peachtree Street, N.W., Atlanta, Georgia 30303) in the 5th Floor Board Room.

NOTICE IS HEREBY GIVEN THIS 10th DAY OF OCTOBER, 2013 Clyde L. Reese III, Esq., Commissioner