

Georgia Seeks New Medicaid Changes in Response to COVID-19

On March 28, 2020, the Georgia Department of Community Health submitted four plans to the federal government allowing the state to make temporary changes to Medicaid and PeachCare in response to the COVID-19 pandemic.¹ Georgia submitted a Section 1135 waiver, which has been approved, a Section 1115(a) waiver and two Appendix K plans. These plans focus on temporarily removing regulatory barriers for current Medicaid and PeachCare enrollees and health care providers who participate in the programs.

These waivers do not extend coverage to any new groups or help ease enrollment as more people become eligible. This leaves out the hundreds of thousands of uninsured Georgians who do not currently qualify for Medicaid, including adults without dependents or those with dependents who make above the income threshold, \$7,000 a year for a family of three. The 1115(a) waiver program only includes current Medicaid and PeachCare enrollees. New enrollees would be able to get coverage but without some of the waiver protections, such as no co-payments or premiums. Expanding Medicaid would allow the state to fully maximize the new flexibilities the agency is seeking through these waivers.

Plan	Target Population	Key Changes
Section 1135 Waiver Medicaid and PeachCare	Health care providers	<p>This waiver allows states to temporarily reduce health care delivery regulations during an emergency. These waivers are only available when the President declares an emergency and the Secretary of Health and Human Services declares a public health emergency. As of April 1, 2020, 40 states received approval for these waivers for COVID-19. Georgia's plan will:</p> <ul style="list-style-type: none"> • Suspend requirements for fee-for-service providers to get authorization prior to delivering services. • Suspend pre-admission screening and annual review for residents of long-term care facilities for 30 days. Nurse aides in these facilities will be able to work for 7 months without completing training. • Give enrollees more time to request fair hearings if coverage is denied or discontinued without notice. • Waive requirements for providers seeking to enroll in Medicaid, such as waiving the application fee, streamlining provider enrollment, allowing payments to out-of-state providers and allowing providers to provide services in alternative settings like temporary shelters. • Allow hospice evaluations and home health assessments to be performed through telehealth. • Allow telemedicine supervision for those receiving opioid treatment to self-administer medications.

Plan	Target Population	Key Changes
<p>Section 1115(a) Medicaid and PeachCare</p>	<p>Low-income adults, children and people with disabilities currently eligible for coverage</p>	<p>This emergency 1115 waiver allows states to test new approaches for Medicaid and the Children’s Health Insurance Program. Georgia’s plan would start retroactively on March 1, 2020 and end 60 days after the federal emergency declaration ends. Current Medicaid and PeachCare enrollees and people enrolled in or eligible for Planning for Healthy Babies are eligible. The state expects this project to include 2.1 million Georgians and cost \$130 million. Under the proposal:</p> <ul style="list-style-type: none"> • Benefits provided would not change, including COVID-19-related services like telehealth and hospital services. • Enrollees would not have to pay copayments or premiums or be required to renew their coverage. • People applying for long-term care services and supports through Medicaid would be able to self-attest their income and assets, allowing for quicker enrollment. • Hospital presumptive eligibility, which allows hospitals to enroll patients, would be expanded to include people with disabilities and people over age 65. Hospice agencies and nursing facilities would be allowed to determine presumptive eligibility. • The state would receive federal Medicaid matching funds to make interim payments to some hospitals and long-term care facilities and expedites approval of additional payments to providers.
<p>Appendix K (Elderly and Disabled Waiver & Independent Care Waiver Program)</p> <p>Appendix K (New Options Waiver, or NOW, & Comprehensive Supports Waiver Program, or COMP)</p>	<p>People with disabilities and elderly people currently eligible for these programs</p>	<p>Appendix K allows states to make temporary changes to their Medicaid 1915(c) home and community-based services waivers. The Elderly and Disabled waiver provides about 26,000 older adults and people with disabilities support to live in their own homes. The Independent Care Waiver Program serves about 1,400 people with disabilities or traumatic brain injury who qualify for nursing facility care. NOW and COMP help about 13,600 Georgians with disabilities receive services and supports in their homes and communities. Both of the state’s Appendix K plans would last from March 1, 2020 to February 28, 2021. The plans would not add new services or target groups but would maintain capacity by:</p> <ul style="list-style-type: none"> • Allowing for services to be provided in settings such as shelters and hotels, but room and board payments are not included in the rates. • Allowing payments to family member caregivers to deliver services for their family member. • Reducing restrictions on providers such as postponing training requirements and certification reviews. • Temporarily increasing rates for licensed practical nurses and case management services. • For NOW and COMP, temporarily remove annual caps on respite services, community support services and costs of specialized medical supplies. • Allow retainer payments to help maintain capacity during and after the emergency.

Endnotes

¹ Georgia Department of Community Health. (2020, March 28). Medicaid and PeachCare for Kids providers and members; Sections 1135 and 1115(a), Appendix K Plans Submitted to CMS. <https://dch.georgia.gov/announcement/2020-03-28/medicaid-and-peachcare-kidsr-providers-and-members-sections-1135-and-1115a>