






Who is covered in Georgia's Medicaid Program?

ELIGIBILITY GROUPS²

Fee-For-Service (FFS)	Managed Care Organizations (MCOs)
Dual Eligibles 	 Children (0-18 years)
Aged, Blind, Disabled Adults 	 Current and Former Foster Care Children
Intellectual and Developmental Disabilities 	 Parents and other Caretaker Relatives
	 Pregnant Women
	 Incarcerated Individuals*

* Only for those in the juvenile justice system.

Important News

2016 - Georgia lawmakers continue to look at alternative models for Medicaid expansion, specifically a variation of the premium assistance model, in which Medicaid funds are used to purchase insurance for Medicaid expansion members through the Exchange.³

2017 - Georgia state legislators introduce a resolution urging the governor to pursue an 1115 waiver to transition the state's Medicaid program to per-capita cap funding.

2020 - Georgia Medicaid submitted Section 1135 waivers in response to COVID-19.⁴

Do Medicaid health plans provide coverage?⁵

YES NO

- Amerigroup Community Care (Anthem)
- CareSource
- Peach State Health Plan (Centene)
- WellCare*

* No longer open for enrollment for new members.

Eligibility Criteria for Specific Populations as a Percentage of the Federal Poverty Level (FPL)¹

Children: 252% Seniors & People with Disabilities: 74%
 Parents: 35% Pregnant women: 225%

Percentage Breakdown of Georgia's Medicaid Population⁶

Adults: 17% Aged: 9% Children: 58%
 Individuals with Disabilities: 16%

SECTION 1115 WAIVER^{7, 8}

Georgia Planning for Healthy Babies provides a limited Medicaid benefit package for family planning to populations not covered under the Medicaid state plan. It aims to reduce the incidence of low birthweight and the number of unintended pregnancies, and increase child spacing intervals through effective contraception use.

Goals include:

- Reduce state Medicaid cost through the reduction of unintended pregnancies for women who qualify for Medicaid pregnancy-related services
- Increase access to interpregnancy care (IPC) for eligible women that have delivered very low birth weight babies (VLBW baby)

EFFECTIVE:
1/1/2011

APPROVAL:
10/31/2010

EXPIRATION:
12/31/2029

SECTION 1135 WAIVERS IN RESPONSE TO COVID-19⁴

In response to COVID-19, Georgia's approved Section 1135 Waiver enacts the following:

- Suspends Medicaid fee-for-service (FFS) prior authorization requirements
- Extends pre-existing authorizations for beneficiaries
- Suspends Pre-Admission Screening and Annual Review (PASRR) Level I and Level II Assessments for 30 days
- Delays scheduling for Medicaid fair hearings if necessary
- Permits out-of-state providers
- Authorizes facilities to be entirely reimbursed for services provided by an unlicensed facility

Section 1135(b)(1)(B): CMS approved a waiver which temporarily permits payment for 1905 (a) personal care services provided by a legally responsible individual, given that the provider is determined to be capable of providing such services by the state of Georgia. The section 1135(b)(1) (B) waiver is effective March 1, 2020 and will expire with the end of the public health emergency.

How is Georgia meeting the needs of Medicaid enrollees?

Value-Based Healthcare Initiatives

The Georgia Academy of Family Physicians (GAFFP) took the lead to establish a Person-Centered Medical Home (PCMH) University in 2010 to help transform Georgia family physician practices into nationally recognized NCQA medical homes, increase primary care compensation for improving health, and reduce health care costs. Program initiatives include:⁹

- Free access to online networking and education for family medicine practices.
- Payment for emailing patients.
- Establish a clinical data system.
- Offer same-day appointments.

The Georgia Healthy Homes and Lead Poisoning Prevention Program (GHHLPPP) is focused on eliminating childhood lead poisoning in Georgia through the following efforts:¹⁰

- Develop and implement a strategic plan for the state to reduce or eliminate housing related health hazards and to promote housing that is healthy, safe, affordable, and accessible.
- Build a consortium of strategic partners to address unsafe and/or unhealthy housing conditions caused by housing based hazards by leveraging resources and seeking sustainability in funding.
- Assure that follow-up care and interventions are provided for vulnerable populations who are identified with housing related health issues.

The state of Georgia lacks a state-wide program and strategy to enhance the use of value-based payment.

Georgia requires MCOs to take part in a state-directed value-based payment (VBP) initiative and to establish VBP strategy according to state guidelines.¹¹

There is no requirement in Georgia for MCOs to identify targets specific to APM payments and Georgia does not provide incentives or penalties in regards to APM requirements.¹²

Family Planning¹³

Georgia's family planning waiver, Planning for Healthy Babies (P4HB), aims to reduce the number of low birth weight and very low birth weight births within Georgia. Services covered include annual physical exams, pap smears, contraceptives, family planning counseling, inter-pregnancy care services. Women are eligible if they are 18 to 44 years old and meet monthly family income limits or if they have given birth to a baby who weighed under 3 pounds, 5 ounces.



Women's Health

Breast and cervical cancer treatment covered through Women's Health Medicaid.

In 2019, Georgia passed legislative/regulatory action for postpartum coverage to extend past 60 days postpartum.¹⁴

The Georgia state maternal mortality review committee (MMRC) published a recommendation to provide coverage past 60 days postpartum.¹⁵

Centering Georgia aims to improve maternal and infant health outcomes in Georgia through partnerships with the March of Dimes and the United Way of Greater Atlanta. The Anthem Foundation, the philanthropic arm of Anthem and the parent organization of Amerigroup, awarded \$1.5 million to March of Dimes that allows for group prenatal care provision to women in Georgia. Amerigroup Foundation awarded an additional \$10,668 to March of Dimes to support CenteringPregnancy programs in the Southwest Public Health District.¹⁶



Behavioral Health¹⁷

Covered behavioral health services include:

- Home health care services.
- Crisis stabilization.
- Elective inpatient admissions.
- Community mental health services.
- Electroconvulsive Therapy (ECT).
- Alcohol and substance abuse admissions.
- Drug therapies covered: methadone, naloxone, naltrexone, acamprosate, disulfiram.



Oral Health¹⁸

The following dental services are covered for enrollees under the age of 21:

- Two exams per year
- Two cleanings per year
- 2 fluoride treatments per year
- 1 filling per tooth
- 1 bitewing x-ray per year
- Simple tooth extractions
- Dentures every 3 years (repairs are covered twice a year)
- 1 full mouth radiograph every three years
- Oral surgery
- Medically necessary orthodontic treatment

Enrollees under 21 must also have a primary care dentist.

For enrollees ages 21 and over, only emergency dental services are covered.

How is Georgia meeting the needs of Medicaid enrollees?

Child and Adolescent Health¹⁹

Georgia Families 360° SM is a managed care program for children and adolescents in foster care, children and adolescents utilizing adoption assistance, and select adolescents in the juvenile justice system. Amerigroup Community Care is the sole provider of Georgia Families 360° SM.

Program Objectives:

- Increase access to physical and behavioral healthcare services covered through the Medicaid program
- Increase continuity of care, especially for children and adolescents entering and exiting the foster care system, through the establishment of medical and dental homes
- Foster enhanced care coordination and physical and behavioral health oversight to improve health outcomes through Regional Care Coordination Teams

Children with Special Health Care Needs

Medicaid covers **54%** of children with special health care needs in Georgia.¹

The Katie Beckett Medicaid Program provides benefits to select children 18 years old or younger who are qualified as disabled individuals under §1614 of the Social Security Act and who live at home. The program does not take family income into account as an eligibility criteria for select children who are disabled.²⁰

Long-Term Services and Supports (LTSS)

Georgia Money Follows the Person (Ga MFP):²¹

Ga MFP is intended for Medicaid enrollees in inpatient facilities who possess physical, intellectual and developmental disabilities, are children or adolescents with mental illness, or are elderly. The program aims to relocate these beneficiaries so that they may receive healthcare services from their homes.

Georgia Long-Term Care Partnership:²²

The Long-Term Care Partnership Program creates a partnership between Medicaid and private long-term care insurers to offer long-term care insurance to Georgia enrollees. Partnership policies vary in the services they provide and the costs of insurance.



Cost-Sharing²⁴

Children under the age of 6 are not charged premiums for services and children have a \$0 copay for emergency department use.

The maximum premium families with incomes at 151% of the FPL can be charged is \$16, while families with incomes at 201% of the FPL may be charged a maximum premium of \$58.

Children have a \$0 copay for emergency department use.

Enrollees may be charged up to a \$1 copay for generic drug prescriptions for children.



Social Determinants of Health (SDOH)²³

To address the role of social determinants of health, Georgia requires Medicaid enrollees to be screened for social needs, and for providers to provide referrals to appropriate social services to address such needs. Georgia has also established a policy initiative to support the employment of community and non-traditional health workers.

Current state contracts with MCOs require the establishment of social determinants of health policies.

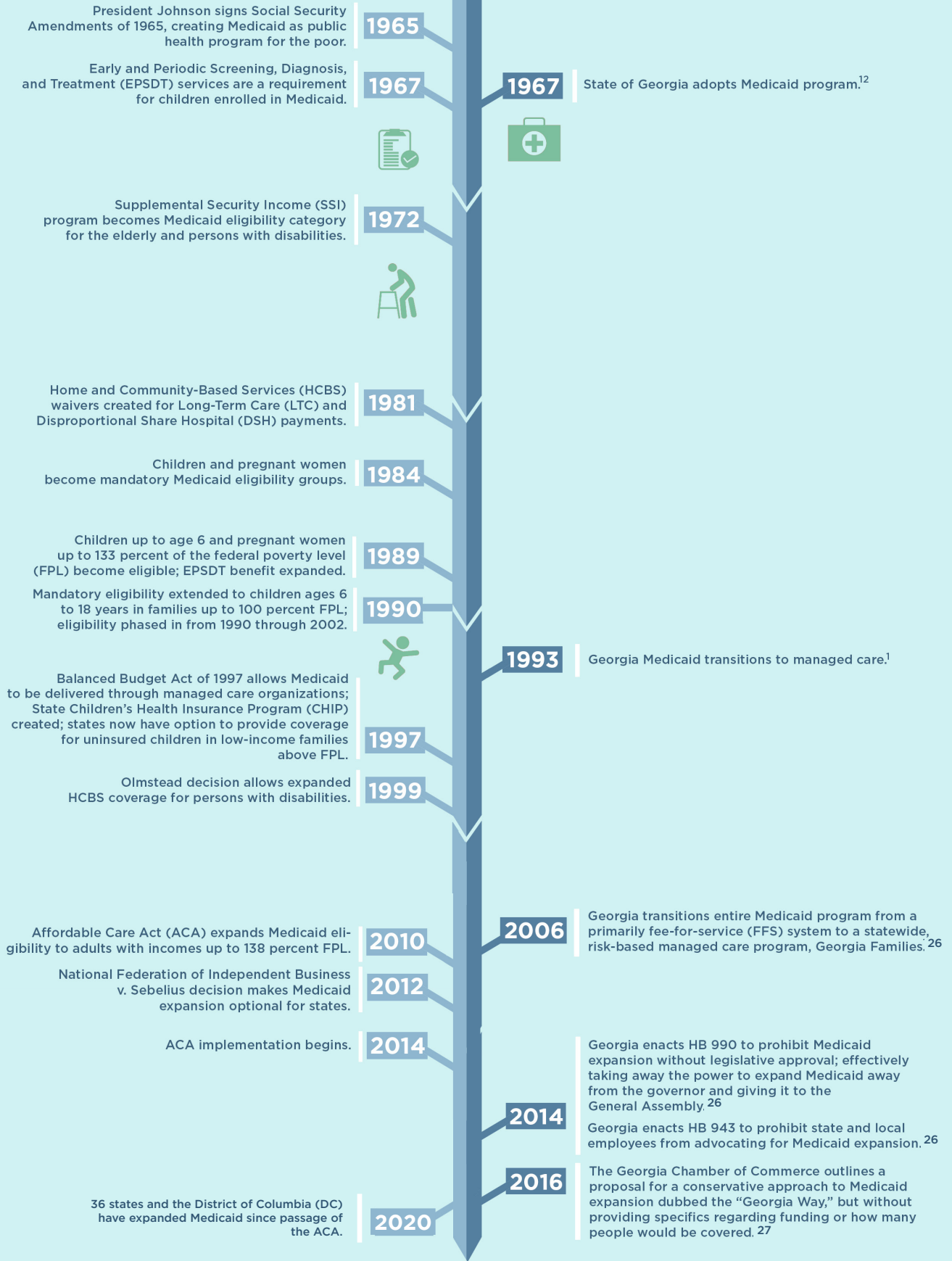




Timeline

Federal

Georgia



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www.MedicaidInnovation.org

For a complete list of sources, please contact the Institute for Medicaid Innovation at Info@MedicaidInnovation.org

