

**MINUTES OF THE
BOARD OF COMMUNITY HEALTH MEETING
March 11, 2010**

Members Present

Richard Holmes, Chairman
Ross Mason, Vice Chairman
Norman Boyd
Dr. Inman C. "Buddy" English
Hannah Heck
Sidney Kirschner
Archer Rose

The Board of Community Health held its regularly scheduled monthly meeting at the Department of Community Health, Fifth Floor Board Room, 2 Peachtree Street, N.W., Atlanta, Georgia. Dr. Rhonda Medows, Commissioner, was present also. (An agenda and a List of Attendees are attached hereto and made official parts of these Minutes as Attachments #1 and #2). Chairman Holmes called the meeting to order at 10:34 a.m.

Election of Board Secretary

Mr. Holmes asked the Board to consider electing the new Secretary of the Board. Mr. Kirschner MADE a MOTION to nominate Archer Rose as Secretary. Ms. Heck SECONDED the MOTION. Chairman Holmes called for votes; votes were taken. The MOTION was UNANIMOUSLY APPROVED.

Minutes

The Minutes of the February 11, 2010 meeting were UNANIMOUSLY APPROVED and ADOPTED.

Committee Reports

Hannah Heck, Chairperson of the Care Management Committee, reported that the focus of the meeting was on disease management activities in Fee-for-Service Medicaid. The Department is undertaking a full review of the Georgia Enhanced Care (GEC) program and will prepare a new procurement in FY 2011. The Georgia Medicaid Management Program (GAMMP) contract will terminate in April 2010. Many of those members who were in GAMMP will be placed in the GEC program. Also, the Committee received an update on CMO enrollment data and the quality based auto-assignment project.

Commissioner's Comments

Dr. Rhonda Medows, Commissioner of DCH, stated that the biggest issues facing the Department are those being addressed during this Legislative Session. She said the Department will be able to more adequately give the Board a status report on the budget and legislation that will impact the Department and healthcare in general after Crossover Day which is March 25. Dr. Medows gave a brief update on some of the divisions. The Public Health Division is continuing its efforts to remind citizens to follow up with the second booster of the H1N1 vaccine for children and encourage people of all ages to get the H1N1 vaccine since the flu is still present. The Emergency Preparedness and Response Division is continuing its efforts to help with medical transport for Haitian earthquake victims. The Medicaid and PeachCare for Kids program status remains the same with a lot of effort being put into providing information, data and analysis and vetting ideas to the General Assembly. The State Health Benefit Plan is in the process of planning for the next Open Enrollment period.

Department Updates

Mr. Doug Colburn, Chief, Healthcare Facility Regulation Division, first discussed Rule 111-8-25, Enforcement of Licensing Requirements. In December the Board approved the rules for initial adoption to be released for public comment. The proposed rules combine and restate the enforcement of licensing requirements already in place in Rules 290-1-6 and 290-5-44 into one new chapter of rules 111-8-25 applicable to all facilities and providers licensed by the Department of Community Health Healthcare Facility Regulation Division. There are two new provisions: adding to the definition of facility which clarifies that the facility must be physically located in Georgia to be licensed in Georgia and requiring a facility or provider to make information regarding the patients/residents available to the Department in a usable format. The Department conducted a public hearing on January 24 but did not receive any oral comments. The Department received one written comment that was generally in support of the proposed rules. Mr. Mason MADE a MOTION to approve for final adoption Rule 111-8-25. Ms. Heck SECONDED the MOTION. Chairman Holmes called for votes; votes were taken. The MOTION was UNANIMOUSLY APPROVED. (A copy of Rule 111-8-25 is attached hereto and made an official part of these Minutes as Attachment # 3).

Mr. Colburn presented Rule 111-8-68, Residential Mental Health Facilities for Children and Youth. The proposed rules repeal Chapter 290-4-4 and reconstitute them in Rule 111-8-68. Also the proposed rules change the language used to describe serious injuries that facilities must report to the Department to be consistent with Medicaid requirements for these facilities. The proposed rules would also remove the

requirement that the Department approve training curriculum used by the facility for emergency safety and intervention. The rules will continue to require that the facility use nationally recognized evidence based programs and use certified individuals to perform training in those programs. Mr. Kirschner MADE a MOTION to approve for initial adoption Rule 111-8-68 to be published for public comment. Mr. Rose SECONDED the MOTION. Chairman Holmes called for votes; votes were taken. The MOTION was UNANIMOUSLY APPROVED. (A copy of Rule 111-8-68 is attached hereto and made an official part of these MINUTES as Attachment # 4).

Dr. Jerry Dubberly, Chief, Medical Assistance Plans, presented the Hospital Inpatient and Outpatient Upper Payment Limits Public Notice for initial adoption. The public notice calls for technical adjustments made on or after March 12, 2010. The purpose of these changes is largely to bring the Department back in line with recommended Centers for Medicare and Medicaid Services (CMS) methodology for setting Upper Payment Limits (UPL). Dr. Dubberly said when the Department moved to managed care, DCH moved away from using actual experience to estimated experience. The use of estimated experience resulted in a need for an arduous back-end reconciliation process with the federal government. The technical adjustment proposed today would eliminate the back-end reconciliation process and use the actual experience. The UPL program is funded solely through Intergovernmental Transfers (IGTs) made by public hospitals and eligible hospital authorities. As such, there would be no impact to the state budget. Dr. Dubberly stated to the Board that technical adjustments described in the public notice would not change the methodology of using the higher Medicaid or established Medicare rates in the establishment of the UPL. He said this will result in a much more streamlined process and will have other positive impact to providers such as the elimination of unnecessary delay in the distribution of UPL payments. A public hearing will be held on March 29. The Board UNANIMOUSLY APPROVED for initial adoption the Hospital Inpatient and Outpatient Upper Payment Limits Public Notice to be published for public comment. (A copy of the Hospital Inpatient and Outpatient Upper Payment Limits Public Notice is attached hereto and made an official part of these MINUTES as Attachment # 5).

Adjournment

There being no further business to be brought before the Board, Chairman Holmes adjourned the meeting at 10:49 a.m.

THESE MINUTES ARE HEREBY APPROVED AND ADOPTED THIS THE _____ DAY OF _____, 2010.

RICHARD L. HOLMES
Chairman

ARCHER R. ROSE
Secretary

Official Attachments:

- #1 List of Attendees
- #2 Agenda
- #3 Rule 111-8-25
- #4 Rule 111-8-68
- #5 Hospital Inpatient and Outpatient UPL Public Notice