



March 11, 2024

The Honorable Xavier Becerra
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DCH 20202

Mrs. Chiquita Brooks-LaSure
Administrator
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 20244

Mr. Daniel Tsai
Deputy Administrator and Director
Centers for Medicare & Medicaid Services
7500 Security Boulevard
Baltimore, MD 20244

**Re: *Planning for Healthy Babies (P4HB) 1115 Waiver, Project No.: 11-W-00249/4
Request to Amend the Planning for Healthy Babies Demonstration to Include Provisions
Allowing Legally Responsible Individuals (including legally responsible family
caregivers) to Provide Personal Care Services***

Dear Secretary Becerra:

Per section 1115(a) of the Social Security Act, the Secretary of Health and Human Services or the Centers for Medicare & Medicaid Services (CMS), operating under the Secretary's delegated authority, may authorize a state to conduct experimental, pilot, or demonstration projects, that are likely to assist in promoting the objectives of title XIX. On January 1, 2011, Georgia implemented its Planning for Healthy Babies (P4HB) 1115 demonstration which provides family planning and family planning-related services to eligible women ages 18 through 44, inter-pregnancy care services, including primary care and primary care case management, for eligible women who have delivered a very low birth weight baby (VLBW) and Resource Mother Outreach services. On August 29, 2019, CMS approved Georgia's request for a ten-year extension of its Planning for Healthy Babies (P4HB) demonstration waiver effective September 1, 2019 through December 31,



2029. The primary goal of the demonstration is to reduce Georgia’s low birth weight (LBW) and very low birth weight (VLBW) rates. As outlined in the special terms and conditions (STCs) of the demonstration, changes related to eligibility, enrollment, benefits, delivery systems, cost sharing, sources of non-federal share of funding, budget neutrality, and other comparable program elements must be submitted to CMS as amendments to the demonstration. Accordingly, the Georgia Department of Community Health (DCH) is requesting approval to amend its Planning for Healthy Babies (P4HB) 1115 demonstration (Project No.: 11-W-00249/4) to include provisions permitting legally responsible individuals (including legally responsible family caregivers) to be reimbursed for the provision of medically necessary personal care services to medically fragile children under age 21 enrolled in the Georgia Pediatric Program (GAPP).

Background:

The Planning for Healthy Babies (P4HB) 1115 demonstration was implemented on January 1, 2011, and is currently authorized through December 31, 2029. The Planning for Healthy Babies (P4HB) demonstration provides family planning and family planning-related services to uninsured women, ages 18 through 44, who are otherwise ineligible for Medicaid or the Children’s Health Insurance Program (CHIP). Eligible beneficiaries have family incomes at or below 211 percent of the federal poverty level (FPL) and includes women who are losing Medicaid pregnancy coverage at the conclusion of the 12-month postpartum coverage period. Additionally, the demonstration provides interpregnancy care (IPC) services to women, ages 18 through 44, with incomes at or below 211 percent of the FPL, who have delivered a very low birth weight (VLBW) baby (less than 1,500 grams or 3 pounds, 5 ounces) and Resource Mother Outreach services. Beneficiaries are eligible for interpregnancy services for two (2) years after the date of enrollment.

On March 13, 2020, the President of the United States issued a proclamation that the COVID-19 outbreak constituted a national public health emergency. Pursuant to section 1135(b) of the Social Security Act, the Secretary of Health and Human Services invoked his authority to waive or modify certain requirements of title XIX and XXI due to the consequences of the COVID-19 pandemic. These modifications helped to ensure states that sufficient health care items and services would be available for enrolled beneficiaries. States were given various options to assist in delivering the most effective care to their beneficiaries. Through the 1135 authority, DCH allowed certain nursing agencies and home care agencies delivering personal care services, through the Georgia Pediatric Program, to temporarily employ legally responsible individuals (including parents and legally responsible family caregivers) as direct service workers. The legally responsible individuals were reimbursed to provide personal care services to their children or individuals under age 21 for whom they were legally responsible.

As the public health emergency was scheduled to end on May 11, 2023, DCH was required to take additional steps to maintain this flexibility to address the ongoing unforeseen impacts of the COVID-19 public health emergency. CMS allowed states to continue certain flexibilities through its Section 1115(a) demonstration authority. On May 11, 2023, DCH submitted a request to amend the Planning for Healthy Babies (P4HB) 1115 demonstration to include provisions allowing parents



and legally responsible individuals (including legally responsible family caregivers) to be reimbursed for providing medically necessary personal care services to individuals under age 21 enrolled in the Georgia Pediatric Program (GAPP). CMS approved the request on July 6, 2023. The amendment was authorized from May 10, 2023 through November 11, 2023.

On November 9, 2023, CMS approved a temporary extension of the authority allowing DCH to reimburse legally responsible individuals (including legally responsible caregivers) for the provision of medically necessary personal care services rendered to medically fragile individuals under age 21 years of age, enrolled in the Georgia Pediatric Program (GAPP). The temporary extension expires on March 31, 2024. Therefore, DCH is seeking to amend the waiver to include these provisions on a permanent basis throughout the duration of the waiver.

If approved, this proposed amendment would assist in addressing the ongoing workforce shortages Georgia has experienced since the start of the COVID-19 pandemic. Specifically, allowing legally responsible individuals to be reimbursed for the provision of medically necessary personal care services will expand capacity in underserved areas and rural parts of Georgia without convenient and consistent access to direct care workers. Simultaneously, this provision will also assist in addressing unemployment and job insecurity for those caregivers who have been unable to obtain and/or maintain employment due to the complex medical needs of the member. If approved, this proposed amendment would help to ensure access to Georgia's most vulnerable population.

Notwithstanding the proposed amendment, the overall goals for the demonstration during the extension period will remain the same as proposed in the initial application but will also include improving access to healthcare by supporting the delivery of personal care services to medically fragile members under age 21 enrolled in the Georgia Pediatric Program (GAPP). Thus, upon receiving CMS approval, the goals of the program will be as follows:

- Reduce Georgia's low birth weight and very low birth weight rates.
- Reduce the number of unintended pregnancies in Georgia; and
- Reduce Georgia's Medicaid costs.
- *Improving access to healthcare by supporting the delivery of medically necessary personal care services (PCS) delivered to medically fragile children under age 21 enrolled in the Georgia Pediatric Program (GAPP).*

Public Notice Process:

Per the special terms and conditions of the Planning for Healthy Babies demonstration, all amendment requests must include an explanation of the public process used by the state. Such explanation must include a summary of any public feedback received and identification of how this feedback was addressed by the state in the final amendment request submitted to CMS.



DCH has fully complied with the requirements of 42 CFR 431.408 and 42 CFR 447.205. On December 14, 2023, DCH issued a public notice outlining its intent to amend the Planning for Healthy Babies 1115 Demonstration¹. A copy of the public notice is included as Attachment A. The public notice indicated that DCH would request approval from CMS to include provisions allowing DCH to reimburse legally responsible individuals (including legally responsible family caregivers) for the provision of medically necessary personal care services provided to members under age 21 enrolled in the Georgia Pediatric Program (GAPP). Additionally, the public notice indicated that the proposed amendment would not impact the current payment methodology for GAPP personal care support services. DCH announced its intent to move forward with the proposed amendment during its December 14, 2023 board meeting. A copy of the agenda for the December 14, 2023 board meeting is included as Attachment B. Immediately thereafter, the public notice was posted to DCH's website for public viewing and posted in all local DFCS offices².

An opportunity for public comment was held on December 18, 2023 at 1:00 p.m. and December 21, 2023 at 11:30 a.m. via Zoom. Written comments were due on or before January 16, 2024. There were no verbal comments received during the public hearings held on December 18, 2023 and December 21, 2023. DCH received fifty (50) written comments. All commenters were in full support of the proposed amendment. The commenters noted the following:

- There is a lack of providers and direct service workers to render personal care support. This change will allow legally responsible caregivers, many of whom are already trained, to render the needed support and serve in this role.
- Due to the complex medical needs of some members, it is difficult for the legally responsible caregiver to obtain employment. Thus, this flexibility will assist in providing additional family resources and support.
- This flexibility will allow Georgia's youth with medical and behavioral health challenges maintain access to personal care services and remain a vital part of the community.
- Allowing legally responsible family caregivers to render personal support services will serve as a lifeline to Georgia's families and result in a positive impact.
- This flexibility will provide additional support to those children who are currently on the waiting list for the New Options Waiver (NOW) and the Comprehensive Supports Waiver (COMP).
- Due to the lack of providers and direct service workers, it is difficult to find providers to render personal support to children with severe mental health needs. This flexibility will allow legally responsible caregivers to serve in this role.

¹ Prior to posting the public notice document, DCH requested an informal review of the public notice by CMS. CMS reviewed the public notice and confirmed that the public notice document met the requirements outlined in 59 Fed. Reg. 49249.

² All public notices may be viewed by selecting the following link: <https://dch.georgia.gov/meetings-notice/public-notice>.



Georgia appreciates all of the comments and feedback shared by its stakeholders. A summary of the public comments is included as Attachment C.

Detailed Description of the Amendment:

The special terms and conditions require a detailed description of the amendment, including impact on beneficiaries, with sufficient supporting documentation.

The proposed amendment will allow DCH to reimburse legally responsible individuals (including legally responsible family caregivers) for the provision of medically necessary personal care services rendered to children under age 21 enrolled in the Georgia Pediatric Program (GAPP) effective on or after April 1, 2024. This proposed amendment does not impact or alter the scope, eligibility group, or the duration of benefits. Additionally, this proposed amendment does not impact or alter the existing reimbursement methodology. This amendment merely seeks to expand the definition of direct service workers to include legally responsible individuals and caregivers. All personal care services must be deemed medically necessary and be reviewed through the standing prior authorization process.

The Georgia Pediatric Program (GAPP) is DCH’s in-home nursing program which serves medically fragile members under age 21 who require medically necessary skilled nursing services or personal care services. GAPP services are provided to Fee-For-Service beneficiaries and are approved and reimbursed through Georgia’s Title XIX Medicaid State Plan. Beneficiaries must require medically necessary nursing care and/or personal care services to be considered for the GAPP. Personal care support services are designed to address the activities of daily living and include, but are not limited to, feeding, bathing, dressing, toileting, assistance with personal hygiene, and assistance with mobility & ambulation. Only nursing agencies or home care agencies may enroll as providers. The nursing agencies and home care agencies provide the needed direct service workers for each member case. Per the existing policy, generally legally responsible parents and caregivers are prohibited from providing personal care support services³. This amendment, if approved, will result in a change to the existing policy.

In 2023, there were approximately 2,000 enrolled GAPP members. Of the 2,000 enrolled members, approximately 1,400 received personal care services or a combination of personal care services and skilled nursing services. This proposed amendment seeks to allow legally responsible individuals/caregivers to provide personal care services only.

Data Analysis:

The special terms and conditions require a data analysis which identifies the specific “with waiver” impact of the proposed amendment on the current budget neutrality expenditure limit. Such analysis

³ The Part II, Policies and Procedures manual for the Georgia Pediatric Program can be accessed by clicking the following link: www.mmis.georgia.gov. Upon reaching the landing page, select the “Provider” tab then “Provider Manuals.” The policy prohibiting the use of legally responsible caregivers was relaxed during the COVID-19 pandemic.



must include current total computable “with waiver” and “without waiver” status on both a summary and detailed level through the current approval period using the most recent actual expenditures, as well as summary and detailed projections of the change in the “with waiver” expenditure total because of the proposed amendment which isolates (by Eligibility Group) the impact of the amendment.

As this proposed amendment does not impact the scope of services, eligibility group, duration of benefits or the existing reimbursement methodology we do not anticipate an impact to the budget neutrality expenditure limit. We have included the most recent quarterly budget neutrality calculation for your review.

Demonstration Reporting, Quality and Evaluation Plans:

The special terms and conditions require updates to existing demonstration reporting, quality, and evaluation plans. This includes a description of how the evaluation design and annual progress reports will be modified to incorporate the amendment provisions, as well as the oversight, monitoring, and measurement of the provisions. In accordance with the special terms and conditions, DCH has revised its evaluation plan and reporting requirements to include specific verbiage related to the oversight, monitoring, and measurement of the provisions related to this amendment in Appendix B.

Implementation Timeline:

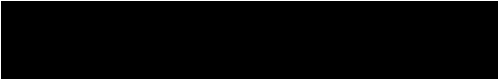
DCH is requesting an effective date of April 1, 2024.

Tribal Notification:

Georgia does not have any tribes. Thus, tribal notification is not required.

In closing, DCH is requesting approval to amend its Planning for Healthy Babies demonstration to allow legally responsible individuals (including legally responsible family caregivers) to provide medically necessary personal care services to children under age 21 enrolled in the GAPP. Should you have additional questions or concerns regarding DCH’s proposed amendment, I may be reached via email at lrhodes@dch.ga.gov or at (404) 656-7513.

Regards,



Lynnette R. Rhodes
Chief Health Policy Officer

- cc: Stuart Portman, Executive Director, MAP, DCH
- Brian Dowd, Deputy Executive Director, MAP, DCH
- Maxine Elliott, Deputy Executive Director, MAP, DCH
- Sharon K. Collins, RNC, PhD., GAPP Program Specialist, MAP, DCH

PUBLIC NOTICE

Planning for Healthy Babies (P4HB) Demonstration Amendment Proposal

The Georgia Department of Community Health (DCH) hereby notifies the public of its intent to submit a request to amend the Planning for Healthy Babies (P4HB) 1115 Demonstration to the Centers for Medicare and Medicaid Services (CMS). The proposed amendment seeks to include provisions allowing the state to reimburse legally responsible individuals (including legally responsible family caregivers) for the provision of medically necessary personal care services to children under age 21 enrolled in the Georgia Pediatric Program (GAPP) effective on or after April 1, 2024.

Pursuant to the procedures outlined in 59 Fed. Reg. 49249, DCH is required to give a 30-day public notice and comment period allowing interested parties to provide input on the proposed amendment to the Planning for Healthy Babies 1115 Demonstration. This notice provides details about the proposed amendment and serves to open the 30-day public comment period which closes on January 16, 2024.

P4HB Description, Goals, and Objectives

P4HB provides family planning and family planning-related services to eligible women ages 18 through 44 and inter-pregnancy care (IPC) services including primary care and primary care case management for eligible women who have delivered a very low birth weight baby¹.

The goal of this Demonstration is to reduce Georgia's low birth weight rate, to reduce the number of unintended pregnancies in Georgia, and to reduce Georgia's Medicaid costs by reducing the number of unintended pregnancies by women who otherwise would be eligible for Medicaid pregnancy-related services. Services will be delivered through the Georgia Families Care Management Organizations (CMOs).

The objective of this Demonstration is to assist the State of Georgia in reducing its low-birth-weight rates by providing preconception and inter-conception care that promotes birth spacing and appropriately timed pregnancies. P4HB members may have children enrolled in the Georgia Pediatric Program.

Background and Basis for Proposed Amended Provisions

The Georgia Pediatric Program (GAPP) is Medicaid's in-home nursing program designed to serve eligible members under age 21 who require medically necessary nursing care and/or personal care support services. GAPP services are approved through Georgia's Title XIX Medicaid State Plan. Since the program's implementation in 2002, nursing services and personal care support services have been rendered by enrolled provider agencies. Legally responsible parents and caregivers were prohibited from providing personal support services².

During the COVID-19 Public Health Emergency (PHE), DCH submitted a request to CMS to allow the state to reimburse legally responsible individuals (including legally responsible family caregivers)

¹ Georgia's P4HB Demonstration is effective through December 31, 2029.

² Section 1905(a) of the Social Security Act prohibits reimbursement of legally responsible caregivers.

for the provision of medically necessary personal support services to children under age 21 enrolled in the Georgia Pediatric Program (GAPP). This request was made to ensure the delivery of care to Georgia's most vulnerable population in light of the unforeseen circumstances resulting from the COVID-19 PHE. Pursuant to 42 CFR 431.416(g), DCH was exempt from conducting a state public notice and input process.

CMS approved the request and subsequently extended the authority through March 31, 2024 via the existing Planning for Healthy Babies 1115 Demonstration. Accordingly, legally responsible caregivers are able to be reimbursed, by enrolled GAPP providers, for the provision of medically necessary personal care services.

Due to the ongoing effects of the COVID-19 PHE, including the existing workforce shortage, DCH intends to seek approval from CMS to continue the flexibility allowing legally responsible persons to provide 1905(a)(24) personal care services to children under age 21 enrolled in the Georgia Pediatric Program (GAPP). DCH, its agent, or its provider organization will be required to make a reasonable assessment that the caregiver is capable of rendering the services. The requested amendment is limited to the provision of personal care services and does not include the provision of skilled nursing services.

This amendment will not impact the current payment methodology for GAPP personal care support services or GAPP program operations. The payment methodology will remain the same as outlined in the *Part II, Policies and Procedures for the Georgia Pediatric Program* manual. Should there be any changes in the methods and standards for setting payment rates, a public notice will be issued and an opportunity for public comment provided.

This amendment will not impact the objectives and goals of the Planning for Healthy Babies Demonstration.

Public Hearings and Public Input Procedure

This public notice is available for review at each county Division of Family and Children Services office.

There will be two opportunities for public comment **via Zoom audio**. There will be **no in-person** attendance at the Department of Community Health (DCH).

#1: December 18, 2023 at 1:00 p.m.

Join Zoom Meeting

<https://us02web.zoom.us/j/89512248150?pwd=MjZRTXE0OCtuU1V6cjA1VW10R3ZTUT09>

Meeting ID: 895 1224 8150

Passcode: 467933

+13017158592,,89512248150#,,,,*467933# US (Washington DC)

+13052241968,,89512248150#,,,,*467933# US

Meeting ID: 895 1224 8150

Passcode: 467933

#2: December 21, 2023 at 11:30 a.m.

Join Zoom Meeting

<https://us02web.zoom.us/j/84869936411?pwd=Y0N1a3VOdGZBempzU2xXMjl2UXNMUT09>

Meeting ID: 848 6993 6411

Passcode: 833908

+13052241968,,84869936411#,,,,*833908# US

+13092053325,,84869936411#,,,,*833908# US

Meeting ID: 848 6993 6411

Passcode: 833908

Individuals who are disabled and need assistance to participate during this meeting should call (404) 656-4479 at least three (3) business days prior to the scheduled public hearing to ensure any necessary accommodations can be provided.

Individuals wishing to comment in writing on any of the proposed changes should do so on or before **January 16, 2024**, to the Board of Community Health, Post Office Box 1966, Atlanta, Georgia 30301-1966. You may also email comments to Danisha Williams, danwilliams@dch.ga.gov or fax to 404-651-6880.

Comments submitted will be available for review by submitting a request via email to Danisha Williams, danwilliams@dch.ga.gov.

If the proposed changes are presented to the Board for final action, relevant comments from written and public testimony will be provided to the Board. The Board expects to vote on the proposed changes at the Board meeting to be held on **February 8, 2024** at 10:30 a.m. at the Department of Community Health unless withdrawn or withheld by the Department for further review.

NOTICE IS HEREBY GIVEN THIS 14th DAY OF DECEMBER 2023
Russel Carlson, Commissioner



AGENDA
BOARD OF COMMUNITY HEALTH
TELECONFERENCE

December 14, 2023 10:30 a.m.

This meeting was conducted via Zoom audio access only.
There was no in-person attendance at the Department of Community Health.

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| A. Call to Order | Norman Boyd, Chairman |
| B. Opening Comments | Norman Boyd, Chairman |
| C. Medical Assistance Plans, 1115 Demonstration Amendment: Planning for Healthy Babies (P4HB) Demonstration Amendment, Initial Adoption | Lynnette Rhodes, Chief Health Policy Officer and Executive Director, Medical Assistance Plans |
| D. Rules and Regulations for Health Planning, Certificate of Need, Subject 111-2-2, Initial Adoption | Brian Annino, Senior Attorney and Designee for Agency Decisions |
| E. Medical Assistance Plans, Policy Revision: Emergency Medical Services (EMS) Ambulance Treatment Without Transport Public Notice, Final Adoption | Lynnette Rhodes, Chief Health Policy Officer and Executive Director, Medical Assistance Plans |
| F. Medical Assistance Plans, State Plan Amendment: Federally Qualified Health Center (FQHC) Practitioner Expansion Public Notice, Final Adoption | Brian Dowd, Deputy Executive Director, Policy, Compliance and Operations, Medical Assistance Plans |
| G. Approval of Minutes <ul style="list-style-type: none">November 9, 2023 | Cynthia Rucker, Secretary |
| H. Commissioner's Report | Russel Carlson |
| I. New Business and Closing Comments | Norman Boyd, Chairman |
| J. Adjourn | Norman Boyd, Chairman |

Next Meeting
January 11, 2024 10:30 a.m.
Department of Community Health



Summary of Public Comment

Public Notice:	Department of Community Health, Division of Medical Assistance Plans, 1115 Demonstration Amendment: Planning for Healthy Babies (P4HB) Demonstration Amendment
Effective Date:	April 1, 2024; Pending final Board approval and Centers for Medicare and Medicaid Services (CMS) approval
Cost Impact:	Neutral
Requested Action:	Final Adoption

Background:

The Georgia Pediatric Program (GAPP) is Medicaid’s in-home nursing program designed to serve eligible members under age 21 who require medically necessary nursing care and/or personal care support services. GAPP services are approved through Georgia’s Title XIX Medicaid State Plan. Since the program’s implementation in 2002, nursing services and personal care support services have been rendered by enrolled provider agencies. Legally responsible parents and caregivers were prohibited from providing personal support services¹.

During the COVID-19 Public Health Emergency (PHE), DCH submitted a request to the Centers for Medicare and Medicaid Services (CMS) to allow the state to reimburse legally responsible individuals (including legally responsible caregivers) for the provision of medically necessary personal support services to children under age 21 enrolled in the GAPP. This request was made to ensure the delivery of care to Georgia’s most vulnerable population considering the unforeseen circumstances resulting from the COVID-19 PHE. Pursuant to 42 CFR 431.416(g), DCH was exempt from conducting a state public notice and input process.

CMS approved the request and subsequently extended the authority through March 31, 2024 via the existing Planning for Healthy Babies 1115 Demonstration. Accordingly, legally responsible

¹ Section 1905(a) of the Social Security Act prohibits reimbursement of legally responsible caregivers.



caregivers can be reimbursed, by enrolled GAPP providers, for the provision of medically necessary personal care services.

Due to the ongoing effects of the COVID-19 PHE, including the current workforce shortage, DCH intends to seek approval from CMS to continue the flexibility allowing legally responsible persons to provide personal care support services to children under age 21 enrolled in GAPP. DCH, its agent, or its provider organization will be required to make a reasonable assessment that the caregiver is capable of rendering the services. The requested amendment is limited to the provision of personal care services and does not include the provision of skilled nursing services.

This amendment will not impact the current payment methodology for GAPP personal care support services or GAPP program operations. The payment methodology will remain the same. This amendment will not impact the objectives and goals of the Planning for Healthy Babies Demonstration.

Public Comments:

An opportunity for public comment was held on December 18, 2023 at 1:00 p.m., and December 21, 2023 at 11:30 a.m. via Zoom. Written comments were due on or before January 16, 2024.

Oral comments received:

- None.

Written comments received:

- Abimbola Ajasa
- Eryn Austin
- Catalina Betancur
- Joseph Brannon
- Jennifer Burgess
- Derren Burlington
- Chris Cannon
- Tracy Connors
- Donna Crick
- Wendy Crumley
- Jamie Driskell
- Elizabeth Ellis
- Dr. Marion Landua-Figueroa, CCHW, AINS, AIS
- Amanda Francis
- Kristi Hales
- Christine Hanily



- Colleen Harrison
- Kelley Irvin
- Chelsea Lott
- Allison Lovinggood
- Katie McKoy
- Courtney M. McTaggart
- Kent McTaggart
- Mary M. McTaggart
- Mary McTaggart Yates
- Carolyn Mains
- Brittany Maynard
- Stephanie Meeker
- Brandee E. Menick
- Chelsie Nichole
- Jessica Pera
- Hazel Phillips
- Rita Rodriguez
- Lisa Sanford
- Ashley Scott
- Dipti Sheth
- Ojas Sheth
- Alyssa Singletary
- Candy Skinner
- Stahlman Family
- Laura Tate
- Katrina Tumlin
- Judy and Carole Veschi
- Rebecca Walker
- Sheleah Walker
- Michelle Waters
- Amanda Williams
- Michelle Wilson
- Harold and Lisa Wyatt
- Angela Yopp

The following summary of comments was received:

1. Commenters were in full support of the proposed amendment and noted that adopting this



authority serves as a lifeline to many families. Additionally, commenters expressed their interest in ongoing dialogue to ensure the youth of Georgia with medical challenges and behavioral health challenges are not invisible and remain a vital part of what makes Georgia a beautiful place to call home.

DCH Response: The Department thanks the commenters for their written comments and support.

DCH Recommendation:

Request for Final Adoption.

Appendix B

On March 11, 2024, Georgia submitted an amendment application to include permanent provisions permitting legally responsible individuals (including legally responsible family caregivers) to be reimbursed for the provision of medically necessary personal care services (PCS) to medically fragile children under age 21 enrolled in the Georgia Pediatric Program (GAPP). Below is the evaluation design and approach that will be utilized to determine the effectiveness of the new provisions.

Summary of Key Evaluation Question, Hypotheses, Measures, Data Sources & Analytic Approach by Demonstration Group				
Demonstration Goal #1: Improve access to healthcare by supporting the delivery of medically necessary personal care services (PCS) delivered to medically fragile children under age 21 and enrolled in the Georgia Pediatric Program (GAPP)				
Objective: Increase member satisfaction, ensure delivery of medically appropriate services in the community, and promote positive health and well-being outcomes for the target population.				
Hypotheses	Anticipated Measures	Data Sources	Analytic Approach	Treatment Control Group
The PCS amendment will maintain or increase the rate of children enrolled in GAPP being served in their own homes.	Number (and percent of total enrolled) who are receiving Personal Care Services.	Quarterly eligibility and enrollment data, and claims data.	Annual trend and analysis utilizing data pre and post this amendment.	Participants in the Georgia Pediatric Program receiving Personal Care Services.
The PCS amendment will yield improved member experience with care.	Utilization metrics.	Member surveys and/or focus groups	Review of member surveys	Participants in the Georgia Pediatric Program receiving Personal Care Services.

The following questions will be incorporated into a larger survey questionnaire utilized to determine customer satisfaction and the quality of services provided.

Georgia Pediatric Program (GAPP) Member Satisfaction Survey	
Question	Response Options
How did you learn about the Georgia Pediatric Program (GAPP)?	<ul style="list-style-type: none"> • Provider’s Office (PCP, Pediatrician, Hospital Staff, etc.) • State Medicaid Agency • Other (Community Event, Health Department, Advertisement, Friend, etc.)
Which services does the GAPP provide to your son or daughter?	<ul style="list-style-type: none"> • Skilled Nursing Services • Personal Care Services • Both
The GAPP has helped my child to function at his or her best?	<ul style="list-style-type: none"> • Strongly Agree • Agree • Neither Agree nor Disagree • Disagree

	<ul style="list-style-type: none"> • Strongly Disagree
Would you recommend the GAPP program to others?	<ul style="list-style-type: none"> • Yes • No
Legally Responsible Caregivers: <i>The following questions are for Legally Responsible family caregivers only.</i>	
Are you a legally responsible caregiver (including legally responsible family caregivers) approved to provide personal care services to your son or daughter?	<ul style="list-style-type: none"> • Yes • No
Did you have difficulty locating a provider before being approved to provide personal care services?	<ul style="list-style-type: none"> • Yes • No
Were you trained by your GAPP agency to provide personal care services?	<ul style="list-style-type: none"> • Yes • No
How many hours per week do you provide personal care services?	<ul style="list-style-type: none"> • Less than 40 hours per week • More than 40 hours per week
Has access to care improved since you began providing personal care services?	<ul style="list-style-type: none"> • Yes • No
Has your child's care improved since you began providing personal care services?	<ul style="list-style-type: none"> • Yes • No
Has your child's overall medical condition improved or remained the same since you began providing personal care services?	<ul style="list-style-type: none"> • Yes • No
Has your overall experience with the GAPP program improved since you began providing personal care services?	<ul style="list-style-type: none"> • Yes • No
If you answered yes or no, please provide an explanation.	<ul style="list-style-type: none"> • Narrative Statement to be Provided
How long have you provided personal care services through your GAPP agency?	<ul style="list-style-type: none"> • Less than six months • More than six months
Would you like to continue providing personal care services through your GAPP agency?	<ul style="list-style-type: none"> • Yes • No
If not, please provide an explanation.	<ul style="list-style-type: none"> • Narrative Statement to be Provided
How can we improve the GAPP program?	<ul style="list-style-type: none"> • Narrative Statement to be Provided

Evaluation design:

The timeframe for the evaluation of this component of the demonstration will begin one year after the date of CMS approval. DCH will utilize data pre and post this amendment.

Data Collection and Sources:

The data used in the proposed evaluation will include data collected both retrospectively and prospectively.

Survey Data:

In the proposed evaluation, survey data will be collected through a vendor chosen by DCH. Alternatively, the survey may be administered internally by DCH staff. DCH and the selected vendor will revise the survey tool as appropriate to maximize the response rate. Beneficiaries

will be provided open ended questions that allow an opportunity to provide recommendations for improvement.