



D·B·H·D·D

Georgia Department
of Behavioral Health
& Developmental
Disabilities

BE D·B·H·D·D

BE COMPASSIONATE

BE PREPARED

BE RESPECTFUL

BE PROFESSIONAL

BE CARING

BE EXCEPTIONAL

BE INSPIRED

BE ENGAGED

BE ACCOUNTABLE

BE INFORMED

BE FLEXIBLE

BE HOPEFUL

BE CONNECTED

BE D·B·H·D·D

Meeting:	DBHDD IDD Provider Meetings
Dates/Locations:	Nov 12th -UGA Tifton Campus Conf Center - 15 R D C Rd, Tifton, GA 31794
	Nov 13th -Anderson Conference Center - 5171 Eisenhower Pkwy. Ste. D, Macon, GA 31206
	Nov 14th - Douglasville Conference Center - 6700 Church St, Douglasville, GA 30134

Topic	Time	Presenter
Opening Welcome	9:00 am- 9:20am	Ron Wakefield, Division Director, DBHDD
Understanding the HCBS Settings Rule	9:20am- 9:50am	Shandria Beasley, HCBS Waiver Supervisor/ NOW/COMP Lead, DCH
The Settings Rule / Best Practices / Mitigating Risk	9:50am- 10:20am	Robert Bell, Director – Community Services, DBHDD Nancy Overs-Ikard, GA Project Director, Qlarant
NOW & COMP Waiver Rate Increase Update New Service Updates	10:20am- 10:50am	Ronald Singleton, Budget Manager, DBHDD
Supported Employment News and Notes	10:50am- 11:00am	Christine Gudgin, Supported Employment Manager, DBHDD
OHW Policy Update and Information for Independent Reviewer Visits OHW Provider Announcements	11:00am- 11:30am	Shannon Smith, Director – OHW Nursing Services, DBHDD Karen Cawthorn, OHW Project Manager, Office of Health and Wellness, DBHDD
Regional Field Office Breakouts	11:30am- 12:00pm	Lead by relevant Regional Field Office
All Audience Provider Q/A	12:00pm- 12:30pm	All DBHDD staff – responding to written questions from audience



D·B·H·D·D

Georgia Department
of Behavioral Health
& Developmental
Disabilities

Opening Welcome & Updates
Ron Wakefield,
IDD Division Director
DBHDD

UNDERSTANDING THE HCBS SETTINGS RULE

Shandria Beasley

NOW/COMP Supervisor
Medical Assistance Plans/DCH

Date:11/12/2025





GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

Our Purpose

Shaping the future of *A Healthy Georgia* by improving access and ensuring quality to strengthen the communities we serve.

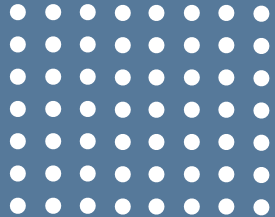




Overview of the HCBS Settings Rule



**GEORGIA DEPARTMENT
OF COMMUNITY HEALTH**





- **Definition and Purpose of the HCBS Settings Rule**
 - Established by Centers for Medicare & Medicaid Services (CMS)
 - Implemented and Monitored by DCH
- **Key Objectives of the Rule**
 - Full access to the benefits of community living
 - Provided services in the most integrated settings
 - Avoid isolation
 - Promote involvement and integration
 - Engagement in community life
 - Control personal resources
 - Receive services with same access as non-Medicaid HCBS citizens

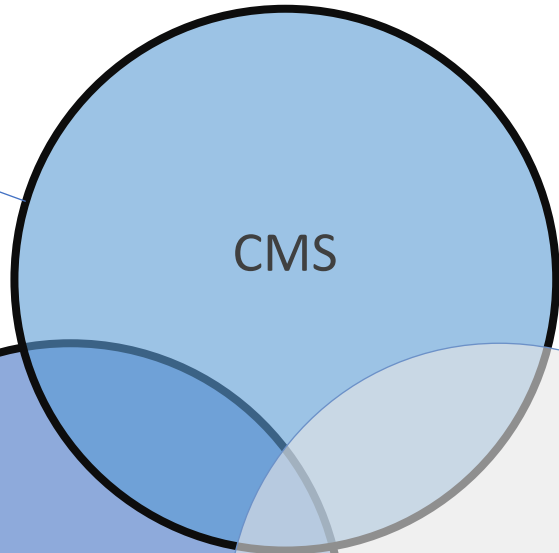




REGULATORY AND POLICY DRIVERS

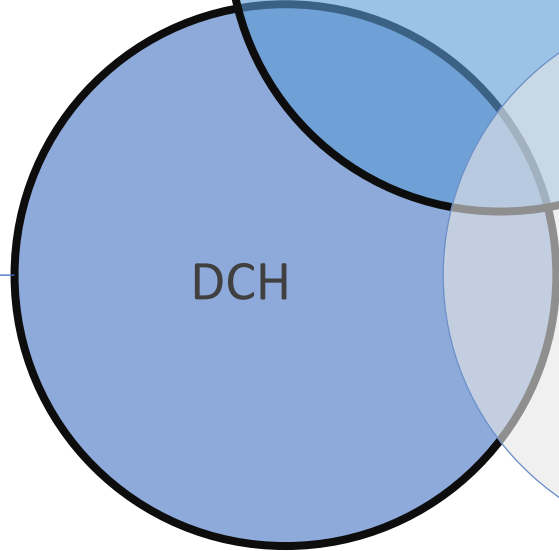


FEDERAL REGULATIONS
42 CFR s 441.301
HCBS Requirements
Full Community Integration

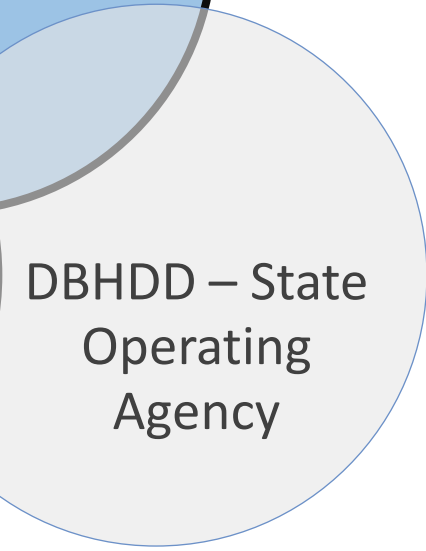


CMS

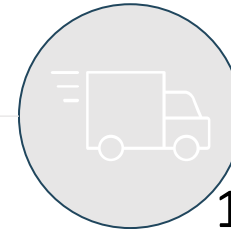
STATE MEDICAID
AGENCY
Sole Oversight
Responsibility
All Waiver Programs
STP Implementation
Policies & Guidance
Final Settings Rule



DCH



DBHDD – State
Operating
Agency



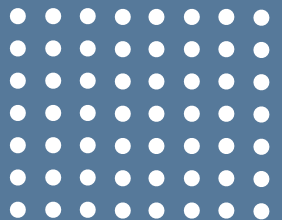
100% COMPLIANCE
ACROSS ALL HCBS
SETTINGS WITHIN ALL
MEDICAID HCBS
WAIVER PROGRAMS



Key Components HCBS Settings Rule



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OF COMMUNITY HEALTH**



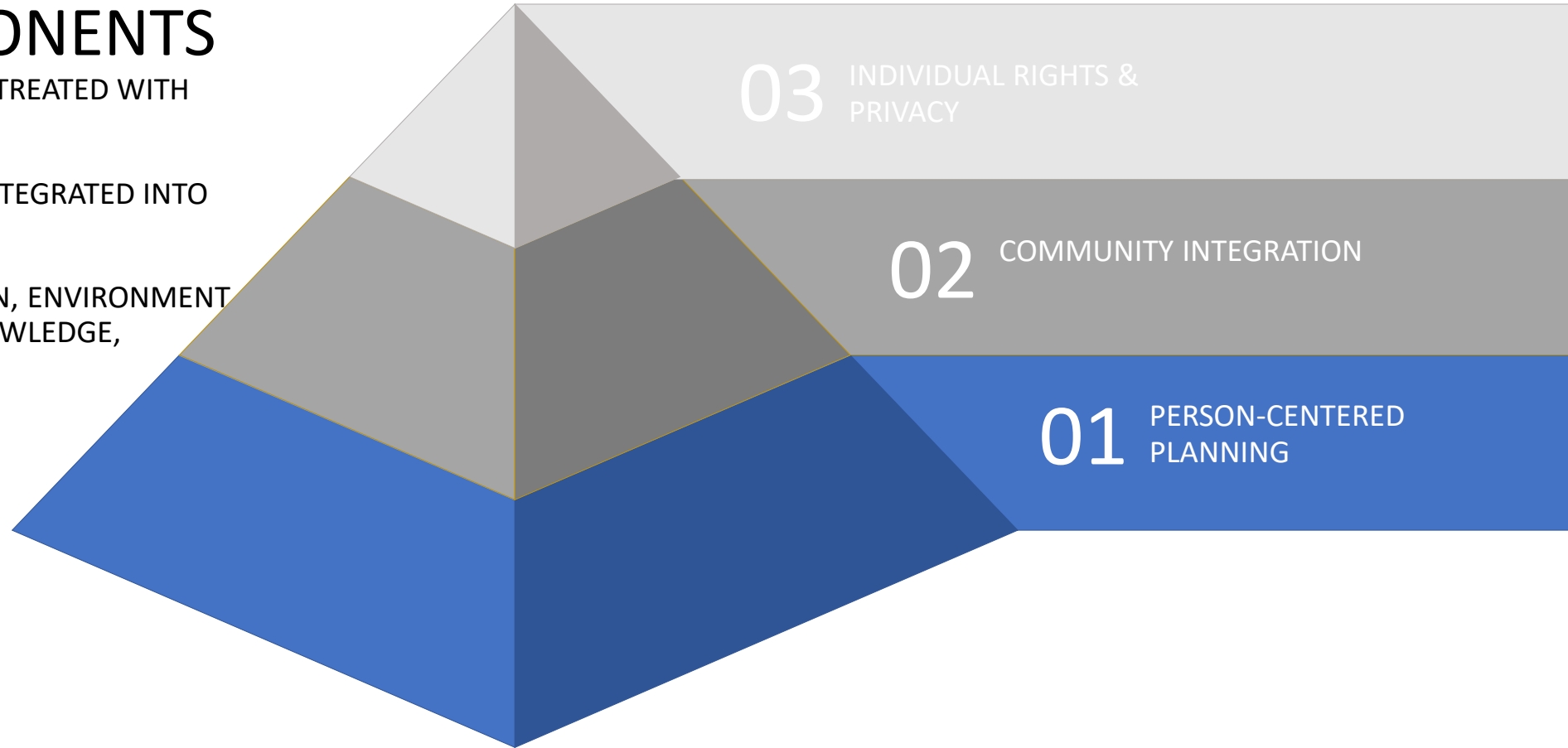


3 MAIN COMPONENTS

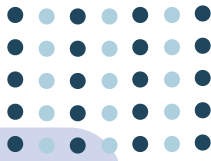
INDIVIDUALS RECEIVING HCBS – TREATED WITH DIGNITY AND EQUALITY

EACH COMPONENTS MUST BE INTEGRATED INTO EACH SERVICE SETTING

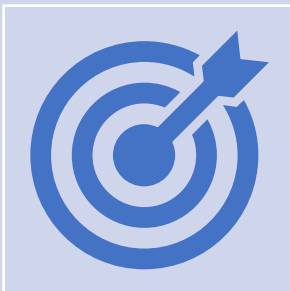
COMPLIANCE – DOCUMENTATION, ENVIRONMENT ACCESS, STAFF AWARENESS, KNOWLEDGE, TRAINING, MEMBER EXPERIENCE



COMPLIANCE IS MANDATORY



Definition and Importance



Steps for Implementing Person-Centered Planning

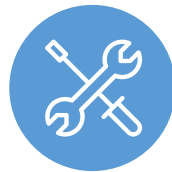


A COORDINATED EFFORT



CASE MANAGERS

- ISP Development and Updates
- Initial Assessment
- Care Plan reflects Individuals Needs, Goals and Preferences



CARE COORDINATORS

- Facilitate Communication and Collaboration
- Ensure Consistency and Quality of Services



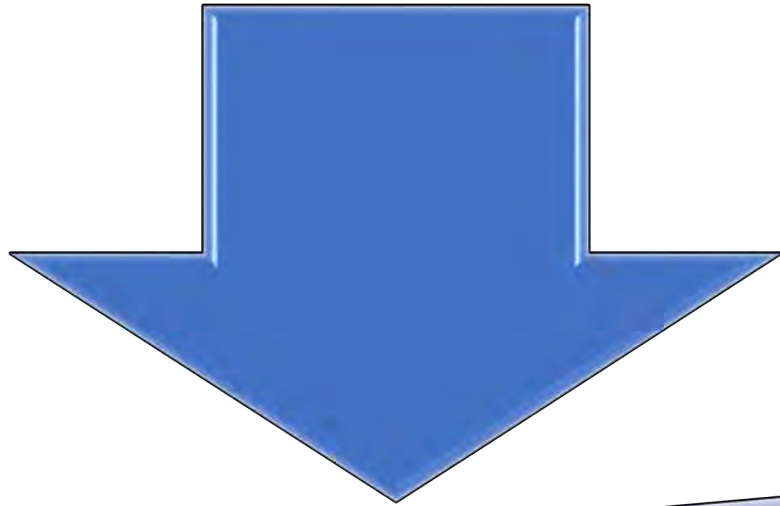
PROVIDERS

- Delivering Services
- Environment meets HCBS Standards

HCBS SETTINGS RULE



COMPLIANCE = A COORDINATED EFFORT



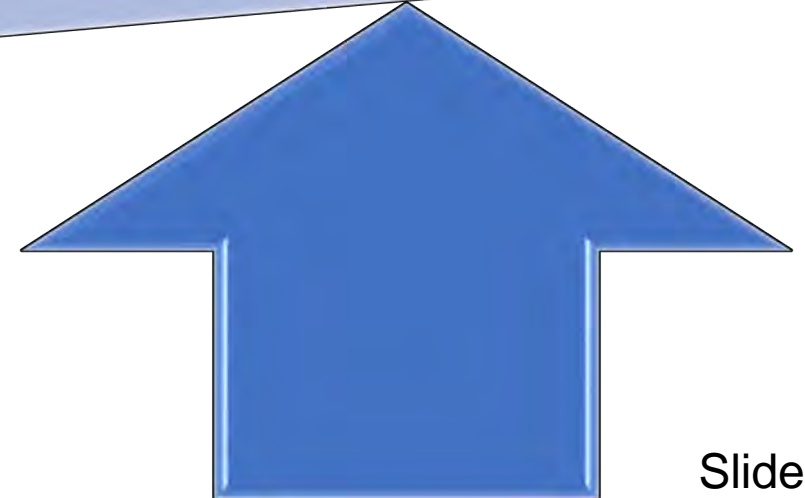
INDIVIDUAL'S GOALS, CHOICES & PREFERENCES

- EXPLORED
- EVALUATED
- UPDATED

DOCUMENTED IN ISP



ACCESS TO SERVICES
 TRANSPORTATION TO ACTIVITIES
 REGULAR EVALUATIONS AND UPDATES – ISP
 ISP REFLECTS EVOLVING NEEDS & PREFERENCES
 PLAN INCLUDES GOALS

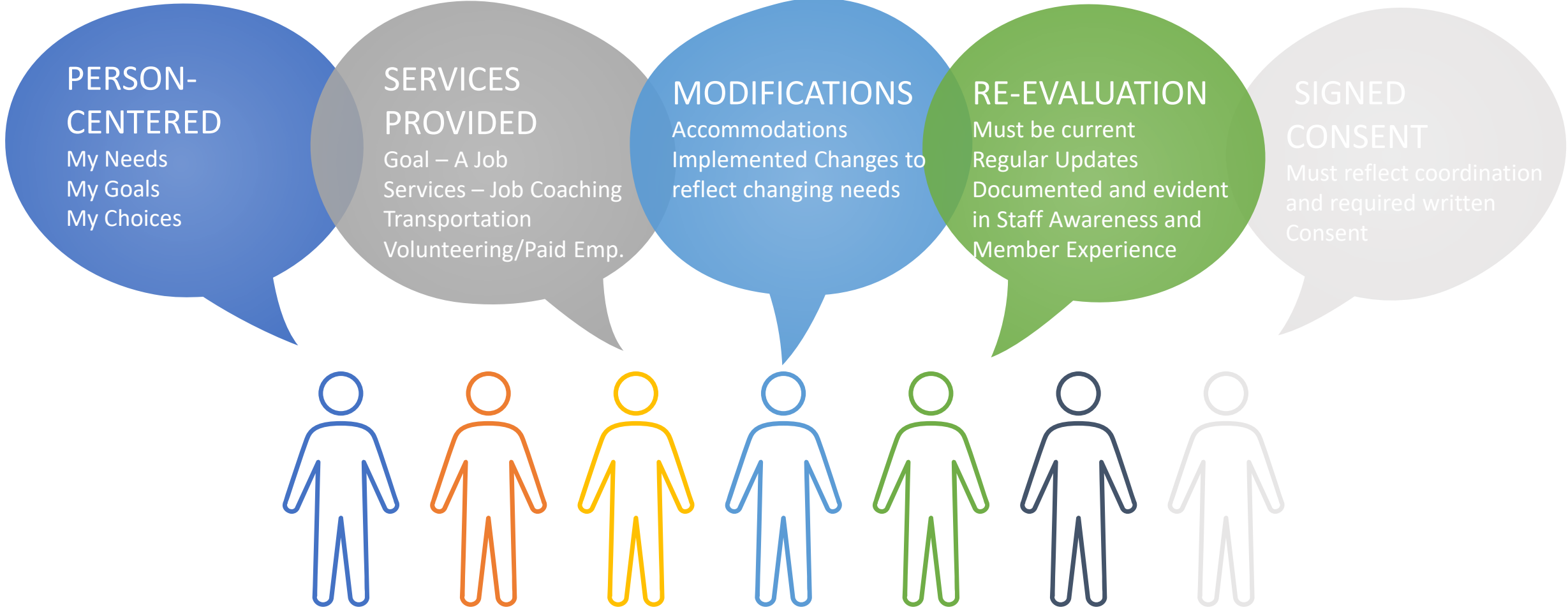




MAINTAINING A COMPLIANT CARE PLAN



A DOCUMENTED COORDINATED EFFORT BY ALL





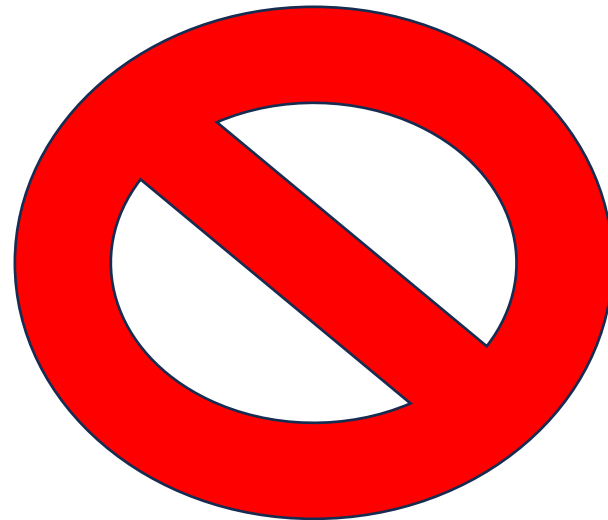
- Assessment of needs and preferences
- Specific goals and outcomes
- Detailed service provisions
- Regular reviews and updates



- Real life examples of compliance
- Best practices from successful providers
 - Encouraging Community Integration
 - Enhancing Privacy and Personalization
 - Supporting Autonomy and Choice
 - Promoting Employment and Volunteering
 - Facilitating Personal Relationships



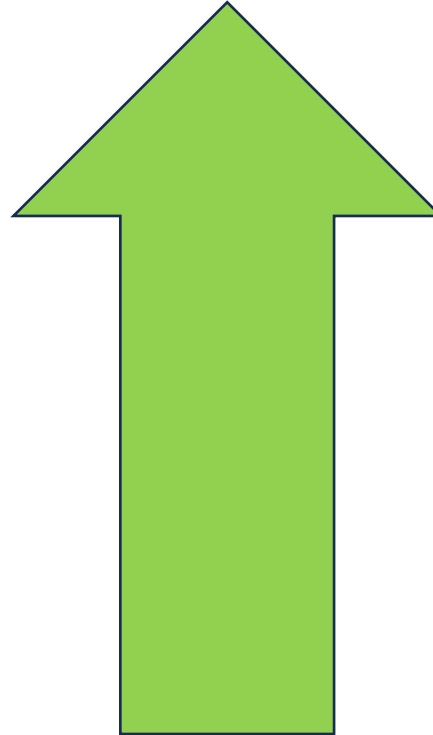
- Non-Compliance Example 1: **Outdated care plan**
- Non-Compliance Example 2: **Inadequate documentation**
- Non-Compliance Example 3: **Restricting access to food**
- Non-Compliance Example 4: **Lack of privacy in personal care**





Remediation Strategies

- Remediation Example 1: Ensuring access to food at all times
- Remediation Example 2: Providing private spaces for personal care





- Overview of individual rights under the HCBS Settings Rule
- Privacy requirements
- Frequently Asked Questions (FAQs)





Q1: Can we restrict access to food for individuals with IDD to manage their dietary needs?

Q2: Are we allowed to lock the doors to individual rooms for safety reasons?

Q3: How do we handle situations where an individual wants to choose their roommate?

Q4: Can we implement a curfew for individuals in our residential setting?



- Q5: What should we do if an individual with IDD requests privacy during personal care activities?
- Q6: How can we support individuals in making informed choices about their services and supports?
- Q7: Can we modify the additional conditions for certain individuals based on assessed needs?
- Q8: What measures should we take to ensure privacy in shared living units.
- Q9: How should we handle situations where individuals want to date and have their date/ visit their bedrooms?



- Specific requirements for residential settings
 1. Legally enforceable agreement/lease
 2. Privacy and Security
 3. Personalization of Living Space
 4. Access and Control
 5. Visitation Rights
- Examples and best practices
 - Establish clear policies
 - Involve individuals in decisions
 - Regular reviews and updates





- Requirements for non-residential settings
- Best practices for community access and inclusion





- Requirements for Community Integration
 - Same Opportunities to participate in community life as others
 - Access to Employment
 - Access to Education
 - Access to Recreational/Social Activities
- Examples of integrated settings
 - Workplaces
 - Community Centers
 - Social Clubs





- Ensuring dignity and respect in service delivery
- Avoiding coercion and restraint





- Managing personal finances
- Ensuring access to personal funds



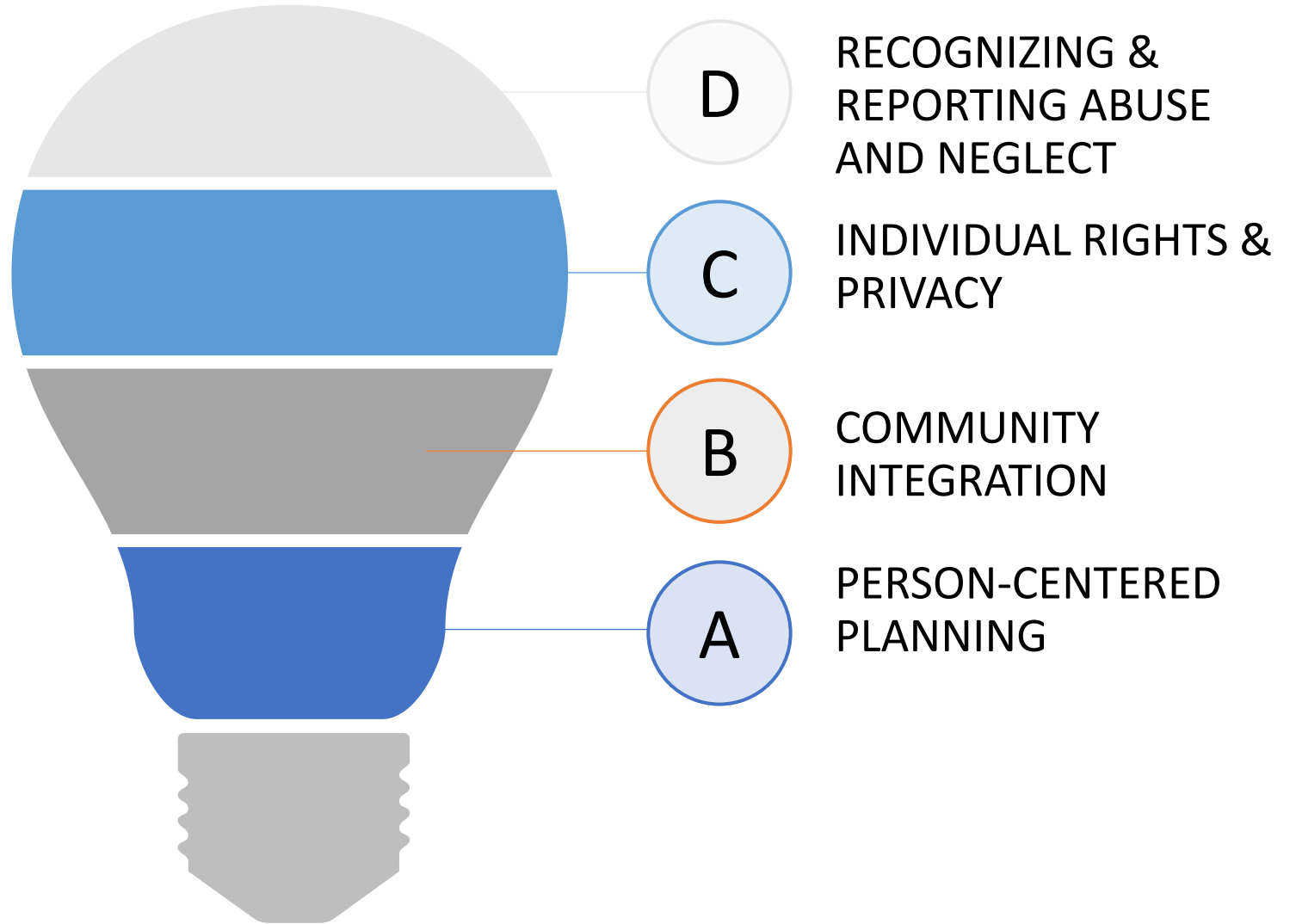


TRAINING REQUIREMENTS - PROVIDERS



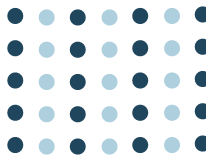
Training must be conducted regularly, at least annually, when changes to regulation and policy need to be operationalized.

Providers must maintain accurate and current documentation of all required training policies, training schedules and completed trainings.





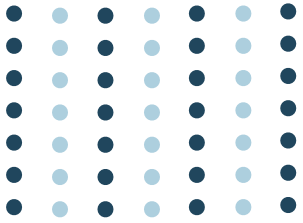
- Monitoring mechanisms for compliance
 - Regular audits and reviews
 - Provider self-assessments
 - Desktop reviews
 - On-Site Visits
 - Member surveys
- Consequences of non-compliance
 - Penalties
 - Loss of Funding
 - Disenrollment



Georgia Department of Community Health (DCH) is rolling out an assessment to ensure that Home and Community-Based Services (HCBS) providers are adhering to Person-Centered Planning principles across various service settings. This assessment will cover a

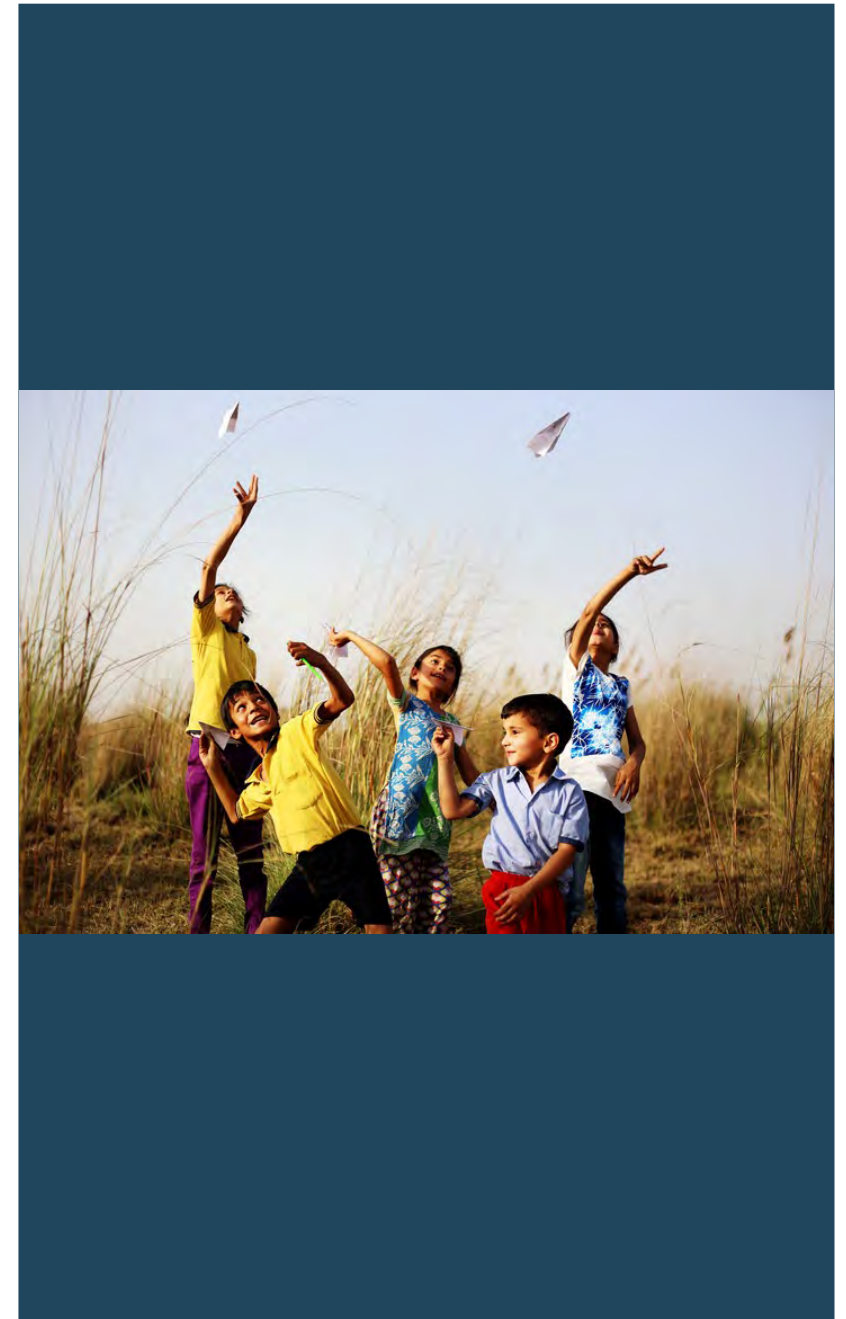
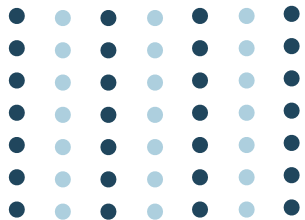
range of services, including:

- Adult Day Health
- Alternative Living Services
- Community Access Group
- Community Residential Alternative
 - Pre-Vocational Services
- Supported Employment Group
- Out-of-Home Respite Care Services



GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

THANK YOU!
QUESTIONS /
COMMENTS?



IDD Provider Meeting

The Settings Rule/Best Practices

BE D·B·H·D·D

Georgia Department of Behavioral Health & Developmental Disabilities

Robert Bell
**Director of Community
Services**

November 2024



"Easy access to high-quality care that leads to a life of independence and recovery for the people we serve."

~DBHDD Vision

Introduction

What is the HCBS Settings Rule?

DBHDD and the Division of IDD are committed to the HCBS Settings Rule, which is a set of regulations that aim to ensure that people with disabilities receive the care and support they need in the most integrated setting possible. This means that they should be able to live and receive services in their own homes or communities, rather than in institutions.

What does HCBS Settings Rule mean?

The rule requires states to offer a wider range of settings and services, including non-disability-specific settings, and to develop person-centered plans (ISPs) that reflect the individual's preferences and goals. It also requires states to assess provider-owned and -operated settings to ensure they comply with the rule's requirements.

Why are we doing this?

- The goal of the HCBS Settings Rule is to promote greater independence, choice, and inclusion for people with disabilities. It is important and required that our network of providers understand and implement the HCBS Settings Rule because of those reasons, plus it is the right thing to do.
- By ensuring that people have access to a wider range of settings and services, and by empowering them to make decisions about their own care, the rule helps to improve their quality of life and well-being.

Why is the Settings Rule important for people with disabilities?

The HCBS Settings Rule is a significant step forward for people with disabilities because it prioritizes their right to live in the most integrated setting possible. Here are reasons why it's important:

Community Integration

- Person-Centered Support
- Increased Independence and Choice
- Improved Quality of Life
- Protection of Rights



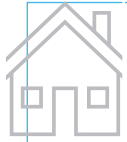
Home & Community Based Service (HCBS): Person-Centered Supports



Marion Olivier, MSW – Vice President of Operations / Qlarant

Menorca Collazo – Director of Training and Communication / Qlarant

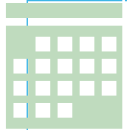
The HCBS Settings Rule Puts Choice at the Heart of CMS Expectations



Where to live



With whom to live



What to do during the day



When to eat



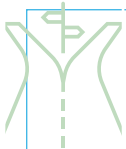
Who to include in the planning meeting



With whom to associate



Who provides services and supports



Whether to self-direct



HCBS Settings Rule...Individuals are

- Integrated in and supported to access the greater community
- Provided opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources
- Received services in the community with the same degree of access as individuals not receiving Medicaid home and community-based services



HCBS Settings Rule...

- Allow full access to the greater community
- Is chosen by the individual from among residential and day options that include generic settings
- Respects the individual's option to choose a private unit in a residential setting
- Ensures right to privacy, dignity and respect, and freedom from coercion and restraint
- Optimizes autonomy and independence in making life choices
- Facilitates choice of services and who provides them



Provider-Owned or Controlled Residential Settings

Additional Requirements! Individuals must have*:

- Lease or legally enforceable agreement to protect from eviction
- Privacy in their unit including entrances lockable by the individual (staff have keys as needed)
- Choice of roommates
- Freedom to furnish and decorate their unit
- Control of their schedule and activities
- Access to food at any time
- Visitors at any time
- Physical accessibility

*Deviations from this rule (except accessibility) must be supported by a specific assessed need and justified in the person-centered service plan.

What strategies can you use to promote a person-centered culture



National Center for Advancing Person-Centered Policies and Practices (NCAPPS) Team Definition of Person-Centered Approach



- Georgia promotes a person-centered approach in the delivery of services to individuals and families that is based on:
 - Holistic approach that acknowledges the individual and their loved ones to be the experts in their own lives; that centers on the individuals/family; that explicitly includes their strengths, interests, values, assets, and challenges; and that is trauma-informed and culturally aware and competent.
 - Flexible and collaborative plans of care that explicitly define roles of all members of the support team; that allow for multiple pathways for success; and that account for and mitigate challenges.
 - Intentional conversations and actions that support individuals/families on their journey toward life goals; that encourage them to dream and explore possible futures; and that build their resilience.
 - System of care that aligns services to ensure the individual has maximum access to the benefits of living in the community and that facilitates the individual achieving his/her desired outcomes.

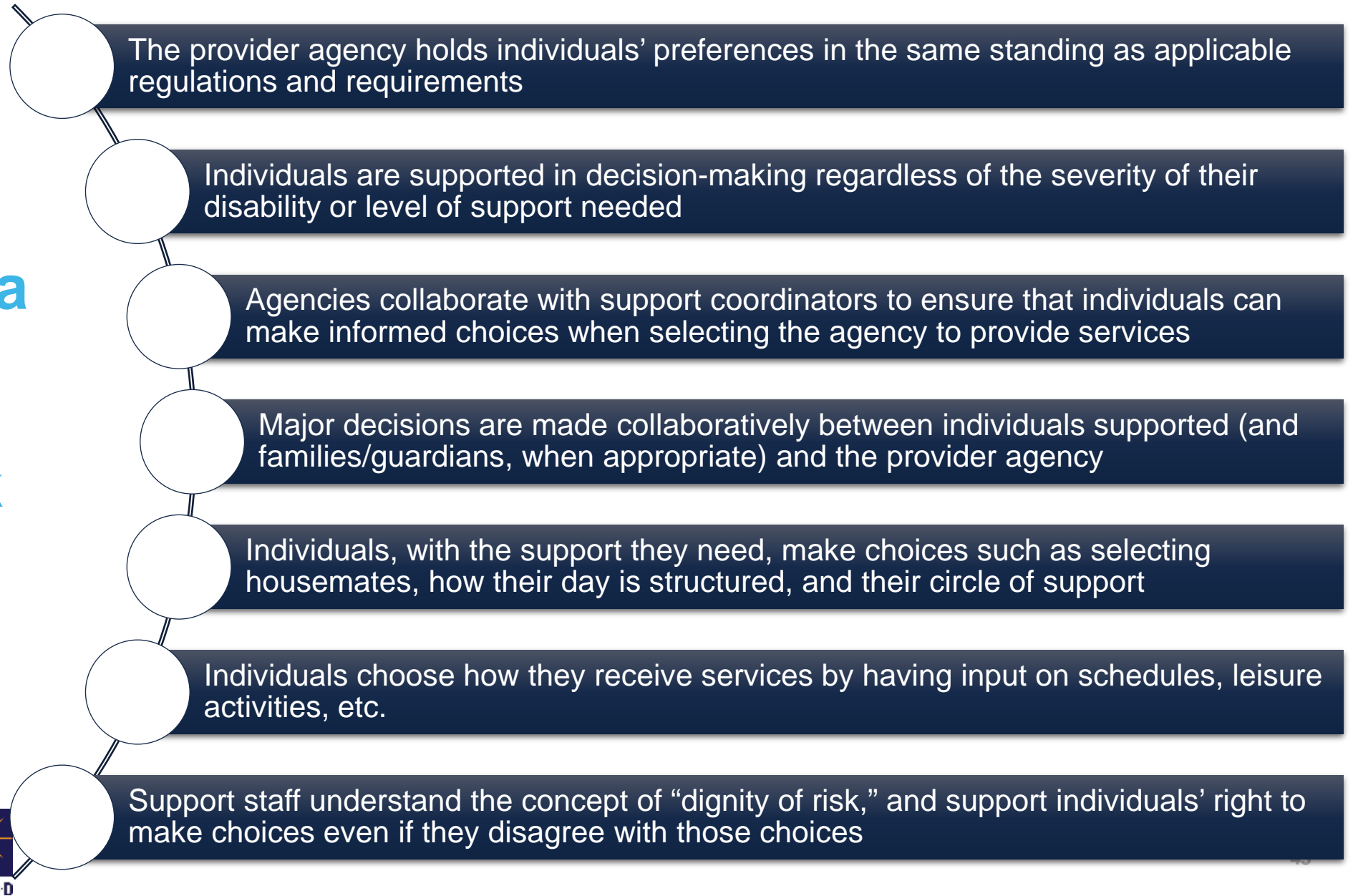
How To Support a Person-Centered Culture

- Identify multiple ways that participants can exercise self-determination in everyday as well as important life decisions including:
 - Where to live
 - Who to live with
 - Who gets hired
 - Home furnishings and décor
 - Menus, food choices, and mealtimes
 - Activities and leisure options
 - Individual or group schedules



* J. Keilson, V. Bradley, J. Petner-Arrey, & J. Lawrence. *Human Services Provider Agency Toolkit for Self-Determination*. National Center for Advancing Person-Centered Policies and Practices.

What Would a Person-Centered Culture Look Like?



A Person-Centered Culture Exists When DSPs are Supported As Well

- DSPs need to know that the organization supports them to take initiative and rewards them for embracing person-centered practices
- Providers can create a learning community among staff so that they can share experiences, lessons, and challenges
- The health and well-being of DSPs should be encouraged through stress reduction exercises, nutrition counseling, and other initiatives
- Staff should be involved in providing feedback to agency administrators regarding what is working and what needs to change



HCBS Settings Rule Also Lays Out Best Practices for Person-Centered Planning

The planning process...

- Is driven by the individual
- Includes people chosen by the individual
- Describes employment and self-directing options

The planning meeting...

- Takes place in a location convenient to the individual
- Is conducted in plain language and materials are accessible

The ISP...

- Takes into account cultural considerations
- Includes goals important to the individual
- Provides necessary information and support to assist the individual to direct the process

Training Focused on the Practical Application of Person-Centered Principles



Georgia Collaborative ASO Webinar Series

It has been said...."You have achieved a person-centered culture when a person new to your home or classroom would have difficulty determining who is supported there from who works there." To support the development of that culture....we are offering courses.

- Putting person-centered practices into action...
 - During Meal times
 - Supporting Adult Dressing Skills
 - Exploring the Community
 - Developing Social Roles
 - Increasing Engagement and Participation

Other courses that support implementing person-centered practices:

- Power Over vs Power With
- Observation Techniques to Evaluate Person-Centered Practices
- Day to Day Person-Centered Supports – What Every New DSP Needs to Know

NOW & COMP Rate Increase Update & Upcoming Services Implementation

BE D·B·H·D·D

Georgia Department of Behavioral Health & Developmental Disabilities

Ron Singleton

DD Budget Manager

Division of Intellectual & Developmental Disabilities

November 2024



DBHDD Special Bulletin: October 30, 2024

A MESSAGE FROM OUR PARTNERS AT DCH

Department of Community Health NOW/COMP Provider Banner Message

Per the Georgia Department of Community Health (DCH) banner message dated 7/23/2024, DCH announced the approval of the amendments to the New Options Waiver (NOW) and Comprehensive Supports (COMP) waiver programs. The approved amendments increased rates for NOW/COMP are effective 7/1/2024.



For Provider Relations inquiries,
Please contact us at
DBHDD.Provider@dbhdd.ga.gov

DCH Provider (Banner) Message: October 30, 2024

<https://mmis.georgia.gov>

Provider Information > Provider Messages

Home | Contact Information | Member Information | **Provider Information** | Provider Enrollment | Nurse Aide/Medication Aide | EDI | Pharmacy | HFRD
*Home Provider Notices Provider Manuals **Provider Messages** Fee Schedules Forms for Providers Reports for Public Access FAQ for Providers*
Web Portal Training Provider Education

★GAMMIS:Provider Messages <- Bookmarkable Link 🌟 Click here for help and information about bookmarks

User Information ? ⌵

Banner Messages

This page provides easy access to public banner messages. To access all banner messages, leave the search fields blank and click the search button.

Messages Search Panel Top ? ⬆

Keyword
Year
Provider Type
Records 20

Click Here

Subject: NOW/COMP 7/1/2024 Rate Increase – GAMMIS UPDATES COMPLETE

NOW & COMP Rate Increase

Implementation Update

DCH System Update – GAMMIS Web Portal – Part 1

GAMMIS – Georgia Medicaid Management Information System

Every approved Medicaid provider number for the NOW and COMP has an associated Fee Schedule (Rate Table) within the Medicaid system. The Fee Schedule (Rate Table) contains the billable procedure codes, applicable modifiers, associated rates, the category of service (rate type) and an effective and end date.



Procedure	Modifier	Rate	Rate Type	Effective Date	End Date
T2033	U1	UP	681 - COS 681	07/01/2024	12/31/2299
T2033	U1	UP	681 - COS 681	07/01/2022	06/30/2024

Fee Schedule - **Community Residential Alternative – Category 1 – 3 Person**

DCH System Update – GAMMIS Web Portal – Part 2

The Medicaid system has several service audits that are in place to ensure compliance with authorized and/or annualized waiver service limitations. Each impacted audit will need to be adjusted by DCH such as the example below.

Community Living Support - COMP				
Audit Error Code 6116 - COMMUNITY LIVING SUPPORTS SVCS MAX UNITS (AMOUNT) REACHED				
Rule	Effective/End Dates	Money Limit	Time Unit	DBHDD Note
5000111	03/01/2017 - 02/28/2021	\$0	Member Rolling Birthday Period	Pandemic Maximum
5000222	03/01/2021 - 06/30/2021	\$0	Member Rolling Birthday Period	2% Increase - March 1, 2021
5000333	07/01/2021 - 06/30/2022	\$0	Member Rolling Birthday Period	2% Increase - July 1, 2021
5000444	07/01/2022 - 06/30/2024	\$60,436.53	Member Rolling Birthday Period	2% Increase - July 1, 2022
5000555	07/01/2024 - 12/31/2299	\$83,520.00	Member Rolling Birthday Period	Rate Study Increase - July 1, 2024

IDD Connects System Update (PA) – Carelon – Part 3

For the upcoming implementation, Carelon will split the existing PA service line. The original service line will remain in place and will have an end date, one day prior, to the rate increase effective date. The new line will start on the rate increase effective date.

PRE-UPDATE					
Service Name	Units	St		Rate	Line Number
CRA - Category 1 - 3 Person	344	1		\$210.32	1

POST-UPDATE					
Service Name	Units	St		Rate	Line Number
CRA - Category 1 - 3 Person	181	1		\$210.32	1
CRA - Category 1 - 3 Person	163	7		\$294.16	2





Note: The service line updates will be visible in the GAMMIS web portal including the rates. Carelon will use paid claims and/or unique percent based on a date range to determine the number of units to remain on the original line. The balance of the authorized units will be placed on the new line.

IDD Connects System Update (ISP) – Carelon – Part 4

Carelon will make IDD Connects updates in two areas of the system which includes the ISP Service Summary.



Note: Service rates are not visible to viewers. However, the rates are updated within the system and includes an increase the annual maximums (dollars) for selected services as noted in Appendix 'A' part III the NOW & COMP policy manuals.

PA Transmission – IDD Connect to GAMMIS

Carelon will transmit (send) the updated prior authorizations to Medicaid (GAMMIS) for processing.

The Medicaid system currently accepts a limited number of prior authorizations each day for processing (5,000). Nearly 20,000 prior authorizations currently exists. Prior authorization processing occurs Monday-Friday.



Claims Reprocessing – DCH & Gainwell

Upon approval of the prior authorizations within the Medicaid system, DCH will be notified. Shortly after, all paid claims for the impacted services with an effective date July 1, 2024, or after will be reprocessed systematically by DCH. No actions will be needed from the approved billing providers.

Below is an example of a July 1, 2024, claim for Community Residential Alternative Services (Category 1 – 3 Person). The original paid amount of the claim, based on one unit (day), was \$210.32. The claim will be reprocessed based on a rate of \$294.16 per unit (day). Providers will receive the difference of the paid amounts as shown below.

ORIGINAL CLAIM	
Service Name	
Community Residential Alternative - Category 1	

Units Paid	Service Date	Amount Paid
1	07/01/2024	\$210.32

REPROCESSED CLAIM	
Service Name	
Community Residential Alternative - Category 1	

Units Paid	Service Date	Amount Paid
1	07/01/2024	\$294.16

Difference	
	\$83.84

Guidance and Troubleshooting for Billing & Claims

If you have any questions regarding the billing process or experience billing difficulties with NOW and/or COMP services, please be sure to reach out to your Gainwell Representative for assistance. Information and guidance for contact information can be found at:

<https://www.mmis.georgia.gov>



Gainwell Technologies is the fiscal agent for Georgia Medicaid and PeachCare for Kids®.

NOW & COMP Rate Increase

New Services Implementation

New Services and Features Coming in 2025!

Increased rates for individuals in need of Deaf and Hard of Hearing Services.

- Community Living Support
- Respite – 15 Minute (In Home)
- Community Access (Group & Individual)
- Prevocational
- Supported Employment
 - Supported Employment Individual – Job Developer
 - Supported Employment Individual – Job Coach
 - Supported Employment Group
- Community Residential Alternative
 - Group Home (3 & 4 Beds)

New Services and Features Coming in 2025!

Tier/Category format for Community Access Group Services.

Crosswalk of Assessment Levels to Rate Categories		
Level	Group Home Rate Category	Community Access Group Rate Categories
1	Category 1	Category 1
2	Category 2	Category 2
3.1	Category 3	Category 3
3.2		
4		
5	Category 4	Category 4
6		
7		

New Services and Features Coming in 2025!

Three new Community Residential Alternative models designed to serve individuals with complex care needs who are currently unable to be supported by traditional CRA models.

- **Specialized Transitional – Community Residential Alternative**
- **Behavior Focused – Community Residential Alternative**
- **Intensive – Community Residential Alternative**

New Services and Features Coming in 2025!

Training and additional information such as policies, rates and procedure/billing codes coming soon!



Community Residential Alternative

344 Limit Reset

Community Residential Alternative – Waiver Policy

www.mmis.georgia.gov

Comprehensive Supports Waiver Program (COMP) Part III, Chapter 2300

Reimbursement Rates

- Chapter 2300, Section 2308
- Appendix A

Comprehensive Supports Waiver Program – Policy

Part III, Chapter 2300, Section 2308

Basis for Reimbursement

C. The annual maximum number of CRA daily units is 344 daily per year.

E. Rates for Community Residential Alternative - Group Home and Host Home include an absence factor that adds a premium to the daily rate (based on a 365-day year). Thus, rates represent annualized annual reimbursement over 344 billing days.

COMP and NOW Waiver Programs – Policy

Part II, Chapter 1100, Section 1102

Individualized Service Planning and Implementation

1102.1. ...Annual ISP meetings will use the individual's date of birth as a guide to annual review.

MEDICAID	Community Residential Alternative				AUDIT
	EOB CODE: 6727 - PROCEDURES CANNOT EXCEED 344 UNITS PER YEAR				
	Rule	Effective/End Dates	Unit Limit	Time Unit	
	5000000	03/01/2017 - 12/31/2299	344	Member Rolling Birthday Period	

Note: EOB – Explanation of Benefit

Community Residential Alternative – 344 Limit Reset

344 Limit Reset Demonstration

(Homes Operated by Two Different Provider Agencies)

Provider - ABC



344 Units/Days Billed

Resident Moved to a New
Provider Agency

Provider - XYZ



21 Billable Units/Days

Community Residential Alternative – Absence Factor

“Rates for Community Residential Alternative – Group Home and Host Home include an **absence factor** that adds a premium to the daily rate (based on a 365-day year). Thus, rates represent annualized annual reimbursement over 344 billing days”.

COMP - Part III, Chapter 2300, Section 2308, Letter ‘E’

Community Residential Alternative – Absence Factor

<https://www.healthmanagement.com/burns-reports/georgia-waiver-rates/>

NOW and COMP Waiver Rate Study

Final Rate Models

prepared for Georgia Department of Behavioral Health and Developmental Disabilities

Community Residential Alternative - Group Home, 3 Beds

	Category 1	Category 2	Category 3	Category 4
Levels	1	2	3,4	5,6,7
Unit of Service	Day	Day	Day	Day
Total Cost per Member per Week	\$1,940.70	\$2,132.61	\$2,522.26	\$3,345.16
Rate per Day	\$277.24	\$304.66	\$360.32	\$477.88
Rate per Day at 344 Days per Year	\$294.16	\$323.26	\$382.32	\$507.05

Community Residential Alternative – Absence Factor

Absence Factor in Action!

Category 4	Without the Absence Factor			
Days per Year	Days Absent	Billable Days	Daily Rate	Annual Total
365	0	365	\$477.88	\$174,425.20
	5	360	\$477.88	\$172,036.80
	10	355	\$477.88	\$169,647.40
	21	344	\$477.88	\$164,390.72

Category 4	With the Absence Factor			
Days per Year	Days Absent	Billable Days	Daily Rate	Annual Total
365	0	344	\$507.05	\$174,425.20
	5	344	\$507.05	\$174,425.20
	10	344	\$507.05	\$174,425.20
	21	344	\$507.05	\$174,425.20

Adult Therapy Services

Occupational and Physical Therapy

Adult Therapy Services – Final Rate Models

<https://www.healthmanagement.com/burns-reports/georgia-waiver-rates/>

**NOW and COMP Waiver Rate Study
Final Rate Models
prepared for Georgia Department of Behavioral Health and Developmental Disabilities
Comparison of Current Permanent and Appendix K Rates to Final Rates**

Service	Unit	Current Perm. Rate	App. K Rate	Final Rate	Notes
---------	------	--------------------	-------------	------------	-------

Therapy Services





Therapy Services-Occupational Therapy	15 Min.			\$30.23	Current multitude of codes would be consolidated under a single code (or code for each discipline) at the highest current rate
Therapy Services-Physical Therapy	15 Min.		varies	\$30.23	
Therapy Services-Speech Language Therapy	15 Min.			\$30.23	

Service	Current Limits	Final Service Limits
---------	----------------	----------------------

Adult Therapies	\$5,400 per year in combination	\$10,800 per year
-----------------	---------------------------------	-------------------

Adult Therapy Services – OT & PT Consolidation

Adult Physical & Adult Occupational Services

PROCEDURE CODE	UNIT RATE	DETAILED SERVICE DESCRIPTION		CONSOLIDATION OF CODES	PROCEDURE CODE (TRADITIONAL)	PROCEDURE CODE (SELF-DIRECTED)	UNIT RATE
97161-GP	\$74.27	Physical Therapy - Evaluations		Physical Therapy	97110-U1	97110-U1-UC	\$30.23
97162-GP	\$74.27						
97163-GP	\$74.27						
97164-GP	\$50.49						
97112-GO	\$28.99	Physical Therapy - Services		Occupational Therapy	97530-GO-U1	97530-GO-U1-UC	\$30.23
97110	\$27.75						
97165	\$71.98	Occupational Therapy - Evaluations		Occupational Therapy	97530-GO-U1	97530-GO-U1-UC	\$30.23
97166	\$71.98						
97167	\$71.98						
97168	\$47.55						
97530-GO	\$30.23	Occupational Therapy - Services		Occupational Therapy	97530-GO-U1	97530-GO-U1-UC	\$30.23
97760-GO	\$29.33						
97761-GO	\$26.75						
97533-GO	\$26.19						
97763-GO	\$24.56						

Note: Per CMS Rule (Medically Unlikely Edit) Speech Language Therapy Will Not Be Consolidated

Adult Therapy Services – OT & PT Consolidation

The implementation for the consolidation of Adult Physical & Adult Occupational Therapy will begin on January 1, 2025, during the Individual Service Plan renewal meetings.

All NOW and COMP Individual Service Plans and Prior Authorizations for Adult Physical & Adult Occupational Therapy will be consolidated by December 31, 2025.

All recipients of these services are currently eligible for increases up to the annual maximum of \$10,500 upon clinical approval.

HCBS Provider Survey

Secure Web Portal: Accessing Messages

Medicaid Web Portal: Provider Contract Status

<https://mmis.georgia.gov>

Step 1: Enter 'Provider ID'

Home | Contact Information | Member Information | Provider Information | **Provider Enrollment** | Nurse Aide/Medication Aide | EDI | Pharmacy | HFRD Account

*Home Enrollment Application Status Enrollment Wizard **Provider Contract Status** EFT Agreement Enrollment Forms Enrollment Template Manager*

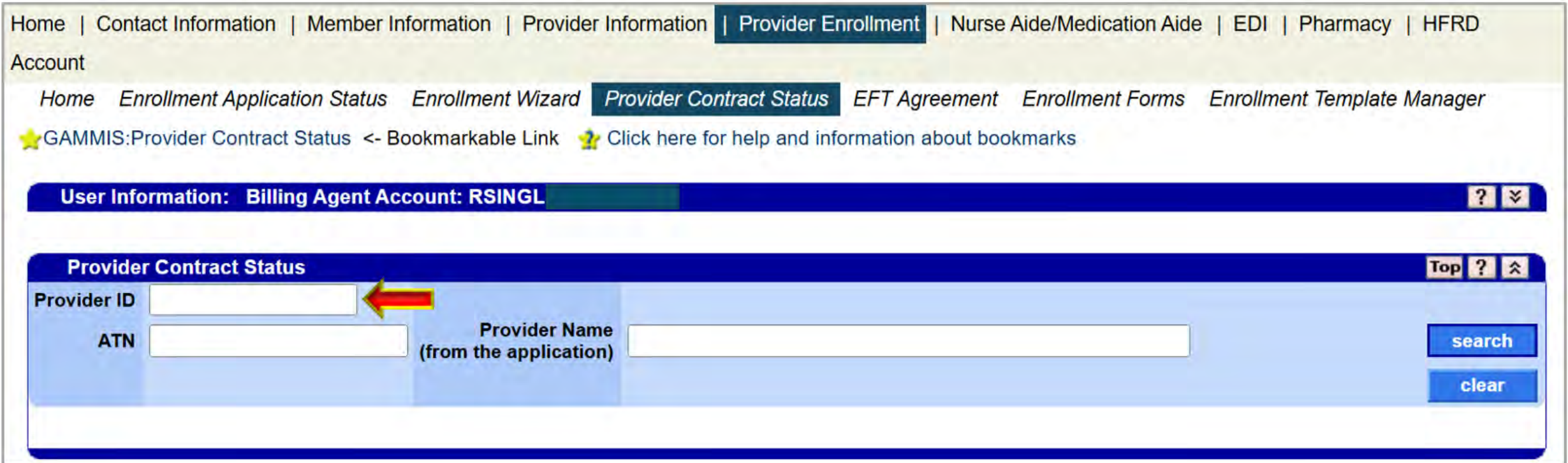
★GAMMIS:Provider Contract Status <- Bookmarkable Link 🌟 Click here for help and information about bookmarks

User Information: Billing Agent Account: RSINGL [redacted] [?] [v]

Provider Contract Status [Top] [?] [^]

Provider ID	<input type="text"/>		
ATN	<input type="text"/>	Provider Name (from the application)	<input type="text"/>

[search] [clear]



Medicaid Web Portal: Provider Contract Status

<https://mmis.georgia.gov>

Step 2: Click on the 'rows returned' item

Home | Contact Information | Member Information | Provider Information | **Provider Enrollment** | Nurse Aide/Medication Aide | EDI | Pharmacy | HFRD Account

[Home](#) [Enrollment Application Status](#) [Enrollment Wizard](#) **[Provider Contract Status](#)** [EFT Agreement](#) [Enrollment Forms](#) [Enrollment Template Manager](#)

★ [GAMMIS:Provider Contract Status](#) <- Bookmarkable Link [Click here for help and information about bookmarks](#)

User Information: Billing Agent Account: RSINGL ? ▾

Provider Contract Status Top ? ⬆

Provider ID

ATN

Provider Name (from the application)

(1 rows returned)

Provider REF ID	Provider Type	Name	Address	City	State	Zip	Zip + 4
REF	Home and Community Based Svc	GEORGIA REGIONAL HOSPITAL	3073 PANTHERSVILLE RD	DECATUR	GA	30034	3828

Medicaid Web Portal: Provider Contract Status

<https://mmis.georgia.gov>

Provider Contract Status Information: **Email Address Missing**

Home | Contact Information | Member Information | Provider Information | **Provider Enrollment** | Nurse Aide/Medication Aide | EDI | Pharmacy | HFRD Account

Home Enrollment Application Status Enrollment Wizard **Provider Contract Status** EFT Agreement Enrollment Forms Enrollment Template Manager

User Information: Billing Agent Account: RSINGL ?

Provider Contract Status Information ?

Name	GEORGIA REGIONAL HOSPITAL	Address 1	3073 PANTHERSVILLE RD
Provider Reference ID	REF	Address 2	
Provider Type	HOME AND COMMUNITY BASED SVC	City, State	DECATUR, GA
Email Address		Zip	30034-3828
Phone Number	(404) 243-2100	Fax Number	

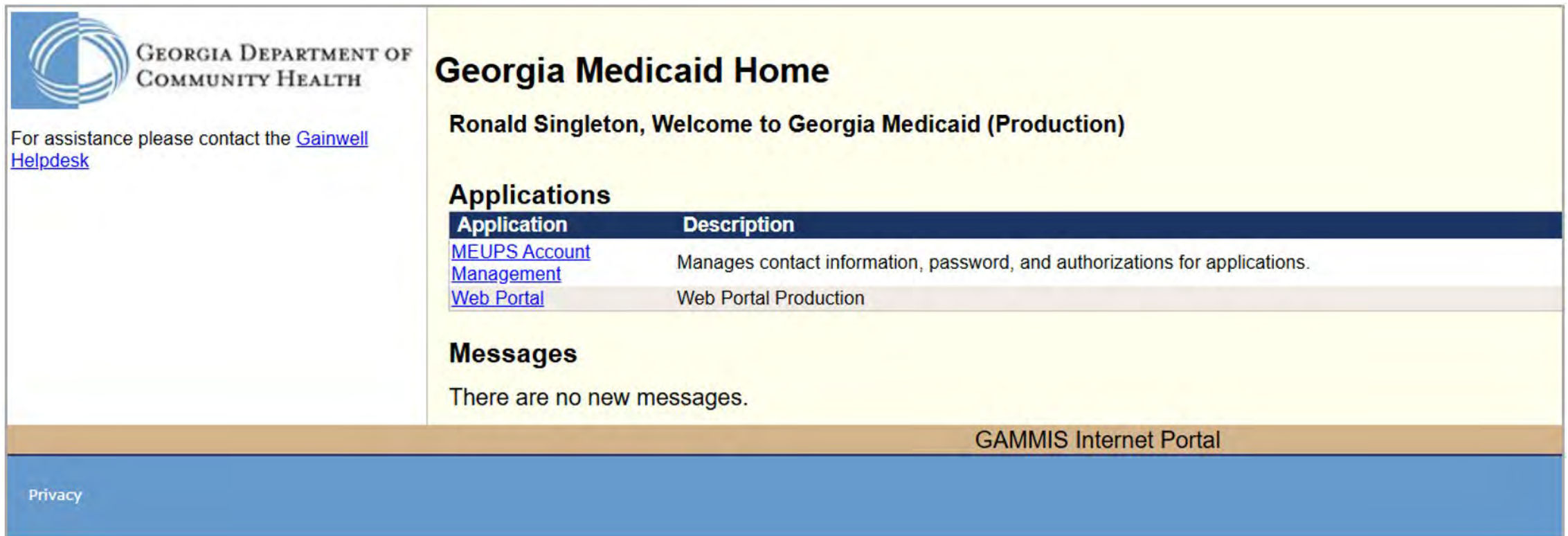
Contracts


Contract	Status	Status Reason Code	Effective Date
681 - CHSS/COMP	ACTIVE		11/01/2008

Medicaid Web Portal: Secure Access

<https://mmis.georgia.gov>

Step 1: Click on the [Web Portal](#) link



 **GEORGIA DEPARTMENT OF
COMMUNITY HEALTH**

For assistance please contact the [Gainwell Helpdesk](#)

Georgia Medicaid Home

Ronald Singleton, Welcome to Georgia Medicaid (Production)

Applications

Application	Description
MEUPS Account Management	Manages contact information, password, and authorizations for applications.
Web Portal	Web Portal Production

Messages

There are no new messages.

GAMMIS Internet Portal

[Privacy](#)


Medicaid Web Portal: Secure Access


<https://mmis.georgia.gov>



Option 1: Click on applicable row in the 'rows returned' section

Home | Contact Information | Member Information | Provider Information | Provider Enrollment | Nurse Aide/Medication Aide | EDI | Pharmacy | HFRD

Account



Home Messages **Switch User** 

★GAMMIS:Switch User <- Bookmarkable Link  Click here for help and information about bookmarks


User Information: Billing Agent Account: RSINGL  

Switch User or Switch Trading Partner Panel

To begin acting as a particular provider or trading partner, use the Switch Provider or Switch Trading Partner panel below.
Once a selection has been made and confirmed, additional menu items will be displayed based on the roles delegated to you.

Switch Provider  

Provider ID Address
Name City
Provider Type Zip
Action Needed



(1 rows returned)

National Provider ID	Medicaid Provider ID	Reference Provider ID	Provider Type	Name	Address	City	State	Zip	Zip + 4	Action Needed
			Home and Community Based Svc	GEORGIA REGIONAL HOSPITAL	3073 PANTHERSVILLE RD	DECATUR	GA	30034	3828	Y

Select row above to switch to the desired provider.

Medicaid Web Portal: Secure Access

<https://mmis.georgia.gov>

Option 2: Click on **'Messages'** in the **'Account'** submenu

The screenshot shows the top navigation bar of the Medicaid Web Portal. The 'Account' submenu is expanded, showing 'Home', 'Messages', and 'Switch User'. A red arrow points from the 'Messages' link to the messages section below. The messages section is titled 'Messages' and contains a table of messages. A red arrow points to the first message in the table, which is titled 'INTRODUCTION 00 : HCBS Assessment Required'.

Home | Contact Information | Member Information | Provider Information | Provider Enrollment | Nurse Aide/Medication Aide | EDI | Pharmacy | HFRD

Account

Home Messages Switch User

Actions Needed

Notification Date	Description
10/31/2024	TASK IN MESSAGE "00 : HCBS ASSESSMENT REQUIRED" REQUESTED ON 10/31/2024 AT 4:40:04 AM [HCBS001

Provider Recredential/Revalidation Required for Service Location

Messages

Category	Subject	Sent Date	Effective Date	End Date	Remove
INTRODUCTION	00 : HCBS Assessment Required	10/31/2024	10/31/2024	11/20/2024	<input type="checkbox"/>
PROVIDER ALERT	July 1 2024 Rate Increase for Community Behavioral	10/30/2024	10/30/2024	12/31/2299	<input type="checkbox"/>
PROVIDER ALERT	NOW/COMP 7/1/2024 Rate Increase - GAMMIS UPDATES C	10/30/2024	10/30/2024	12/31/2299	<input type="checkbox"/>
PROVIDER ALERT	HCBS Settings Rule Assessment	10/25/2024	10/25/2024	12/31/2299	<input type="checkbox"/>
PROVIDER ALERT	Update to Autism Spectrum Disorder Manual	10/25/2024	10/25/2024	12/31/2299	<input type="checkbox"/>
PROVIDER ALERT	Georgia Medicaid Fall Fair - Thursday, October 31,	10/23/2024	10/23/2024	12/31/2299	<input type="checkbox"/>
PROVIDER ALERT	Georgia Medicaid Fall Fair - Thursday, October 31,	10/16/2024	10/16/2024	12/31/2299	<input type="checkbox"/>
PROVIDER ALERT	Georgia Medicaid Fall Fair - Thursday, October 31,	10/09/2024	10/09/2024	12/31/2299	<input type="checkbox"/>
PROVIDER ALERT	Georgia Medicaid Fall Fair - Thursday, October 31,	10/01/2024	10/01/2024	12/31/2299	<input type="checkbox"/>
PROVIDER ALERT	Important Update Regarding Blood Pressure Monitor	10/01/2024	10/01/2024	12/31/2299	<input type="checkbox"/>

1 2 3 ... Next >

Deselect All Save Select All

Medicaid Web Portal: Secure Access

<https://mmis.georgia.gov>

Step 3: Click on applicable "...HCBS Assessment Required" row

The screenshot shows a message window with a blue header. The header contains the text "Message" and a question mark icon. Below the header, the message details are listed: "Category INTRODUCTION" and "Subject 00 : HCBS Assessment Required". The main body of the message contains a list item: "00 : HCBS Assessment Required". To the left of this list item is a white box containing the following text: "Provider ID: 00", "GEORGIA REGIONAL HOSPITAL", "3073 PANTHERSVILLE RD", and "DECATUR, GA 30034-3828". To the right of the list item is a yellow button with the text "00 HCBS Compliance Assessment Link". A large red arrow points from the list item down to the button. At the bottom of the message window, there is a line of text: "This is a request for you to fill out an assessment for provider service location 00".

Message

Category INTRODUCTION

Subject 00 : HCBS Assessment Required

00 : HCBS Assessment Required

Provider ID: 00

GEORGIA REGIONAL HOSPITAL
3073 PANTHERSVILLE RD
DECATUR, GA 30034-3828

00 HCBS Compliance Assessment Link

This is a request for you to fill out an assessment for provider service location 00

Medicaid Web Portal & Survey: Technical Support

Medicaid Web Portal Support (Gainwell): <https://mmis.georgia.gov>



HCBS Survey Support (DCH): HCBSTransition@dch.ga.gov



Thank You!

Ronald.Singleton@dbhdd.ga.gov



Supported Employment News & Notes

Christine Gudgin

Supported Employment Manager

Office of Community Services

Division of Intellectual and
Developmental Disabilities

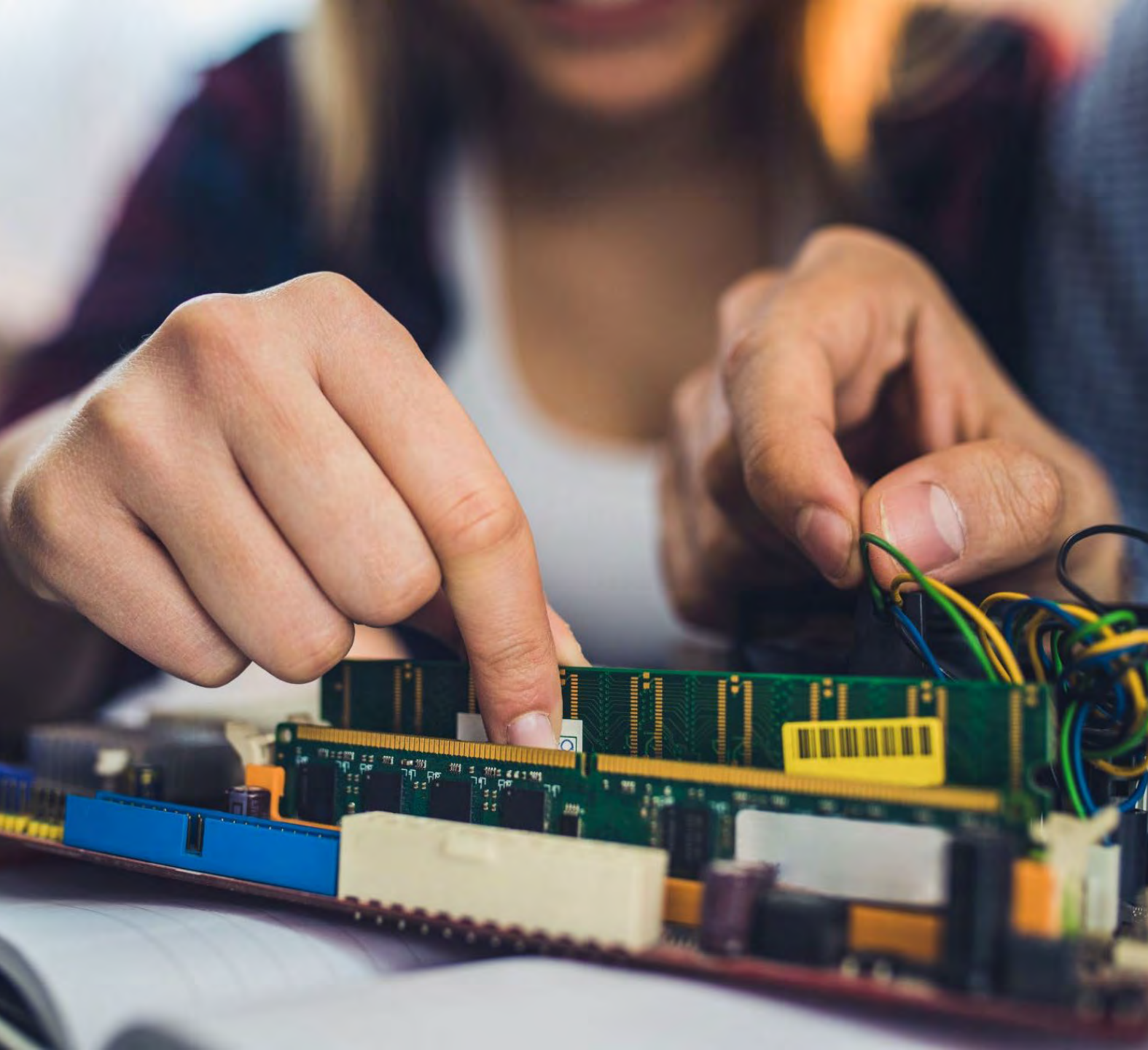


D·B·H·D·D

Georgia
Department of
Behavioral Health
& Developmental
Disabilities



**Supported Employment Services
As of January 1, 2025**



Supported Employment has four distinct categories:

- **Individual Job Development**
- **Individual Job Coaching**
- **Job Maintenance**
- **Group**

SE Individual Job Development

- Activities needed to obtain paid work by individuals, including job location, prospective employer outreach, assistance with resume development, and job interview preparation, as well as services and supports that assist individuals in achieving self-employment through the establishment of a business.
- **Job Development services can only be authorized when not available through the Georgia Vocational Rehabilitation Agency (GVRA).**





SE Individual Job Coaching

- Services consist of activities needed to sustain paid work by individuals, including supervision, training, and services and supports that assist individuals in achieving self-employment through the operation of a business.
- This service is distinguished from Job Maintenance in that individuals authorized for Job Coaching typically require more direct, face-to-face support on an ongoing basis.

Supported Employment Job Maintenance

- Consist of activities needed to sustain paid work by individuals, including supervision, training, and services and supports that assist individuals in achieving self-employment through the operation of a business, including helping the individual identifying the supports that are necessary for the individual to operate a business and providing ongoing assistance, counseling and guidance once the business has been launched. These services do not include the supervisory activities rendered as a normal part of the business setting.
- Individuals authorized for Job Maintenance activities typically require occasional support and generally do not need support for every hour they work. To be authorized for Job Maintenance, an individual must work at least 60 hours per month.

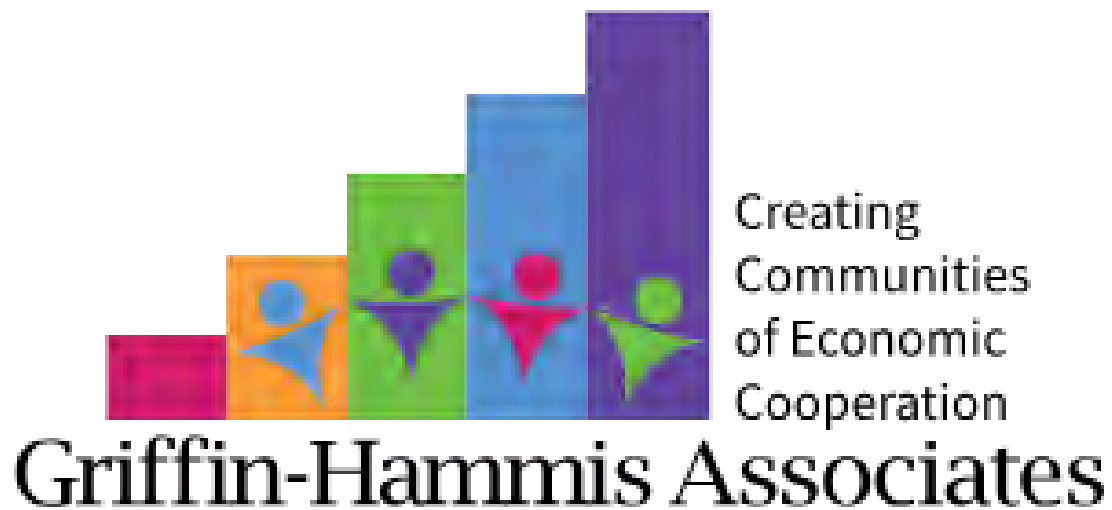




Supported Employment Group

- Services are provided to groups of individuals, with a staff to individual ratio of one to two or more. The staff to individual ratio for Supported Employment Group services cannot exceed one (1) to ten (10). Ratio billing is in accordance with actual support ratios of Employment Specialist to individuals.
- Service expectations are the same for SE Individual Job Coaching and Supported Employment Group, the only differences are in support ratios and transportation.
- Contract work in which the provider passes funds through to individuals for payment is **not** SEG, but Pre-Vocational Services.

Supported Self-Employment Provider Training



- **Online Certified Business and Technical Assistance Consultant (CBTAC)**
- CBTAC is a proprietary training and consultative system developed and implemented by GHA to address the needs of state Vocational Rehabilitation (VR) and other disability agencies as they increase their use of self-employment and microenterprise to meet the needs of their customers.
- The twelve-week online training course covers all critical aspect of business research and design, including: Discovery and Business Concept Identification; Market Research; Funding and Financing; Public Benefits Analysis; Marketing and Operations; and Business Plan Development.
- CBTAC is an all-inclusive approach to business development based on the extensive international experience of GHA. The methods taught and detailed in extensive materials and examples address strategies and supports used by individuals with physical, psychiatric, developmental, sensory, and other disabilities.
- The Vocational Rehabilitation agencies in both Florida and Texas currently require providers of self-employment services to earn and maintain the CBTAC certification.
- [*https://www.griffinhammis.com/self-employment-online-training/](https://www.griffinhammis.com/self-employment-online-training/)

DBHDD is funding...

The retooling of the provider CBTAC training to be Georgia specific.

Rolling CBTAC training cohorts will start with a goal of 120 employment specialists being certified.

Ten self-employment mentorship opportunities available for provider/individual combinations.

Mentorship Criteria

Ten individuals who are on the planning list between the ages of 18-26 who wish to start their own business. (Can be currently working)

The ten Employment Specialists who are currently supporting the individuals on their employment path.

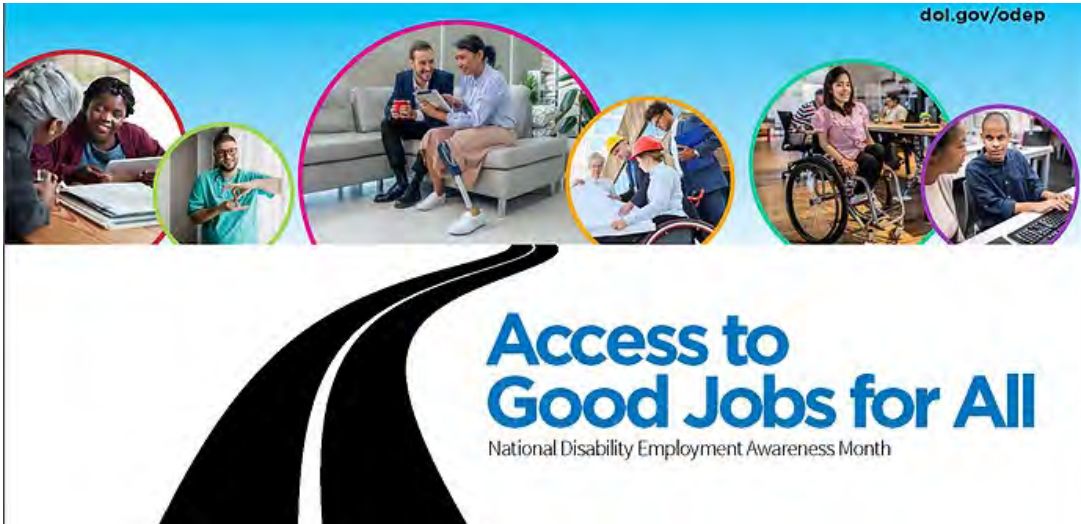
This cohort will be included in the first CBTAC training session to start sometime in December. The first session will have between 30-40 Employment Specialists.

NDEAM Award Winners!



- **Employment Advocate of the Year Award: Stacey Valrie Peace**
- **Employment Agency of the Year Award: Woodright Industries**
- **Employment Specialist of the Year Award: Kailey Bagwell**
- **System Navigator of the Year Award: Cassandra Lenior**
- **Large Employer (100 + employees): Effingham County Board of Commissioners**
- **Smaller Employer: Fur's Gonna Fly**
- **Legacy Award: Howard Stroud**

NDEAM Award Winners!



- **Region 1 Employee of the Year: Doug Reynolds**
- **Region 2 Employee of the Year: Kristy Brown**
- **Region 3 Employee of the Year: Erik Phillipeck**
- **Region 4 Employee of the Year: Barry “Chris” Franks**
- **Region 5 Employee of the Year: Klaudia Byra**
- **Region 6 Employee of the Year: Stephanie Bray**

OHW Updates

Shannon Smith, RN, MS

Director, Office of Health and Wellness

Karen Cawthon, Project Manager

Office of Health & Wellness, Division of Disabilities




D·B·H·D·D

Georgia
Department of
Behavioral Health
& Developmental
Disabilities

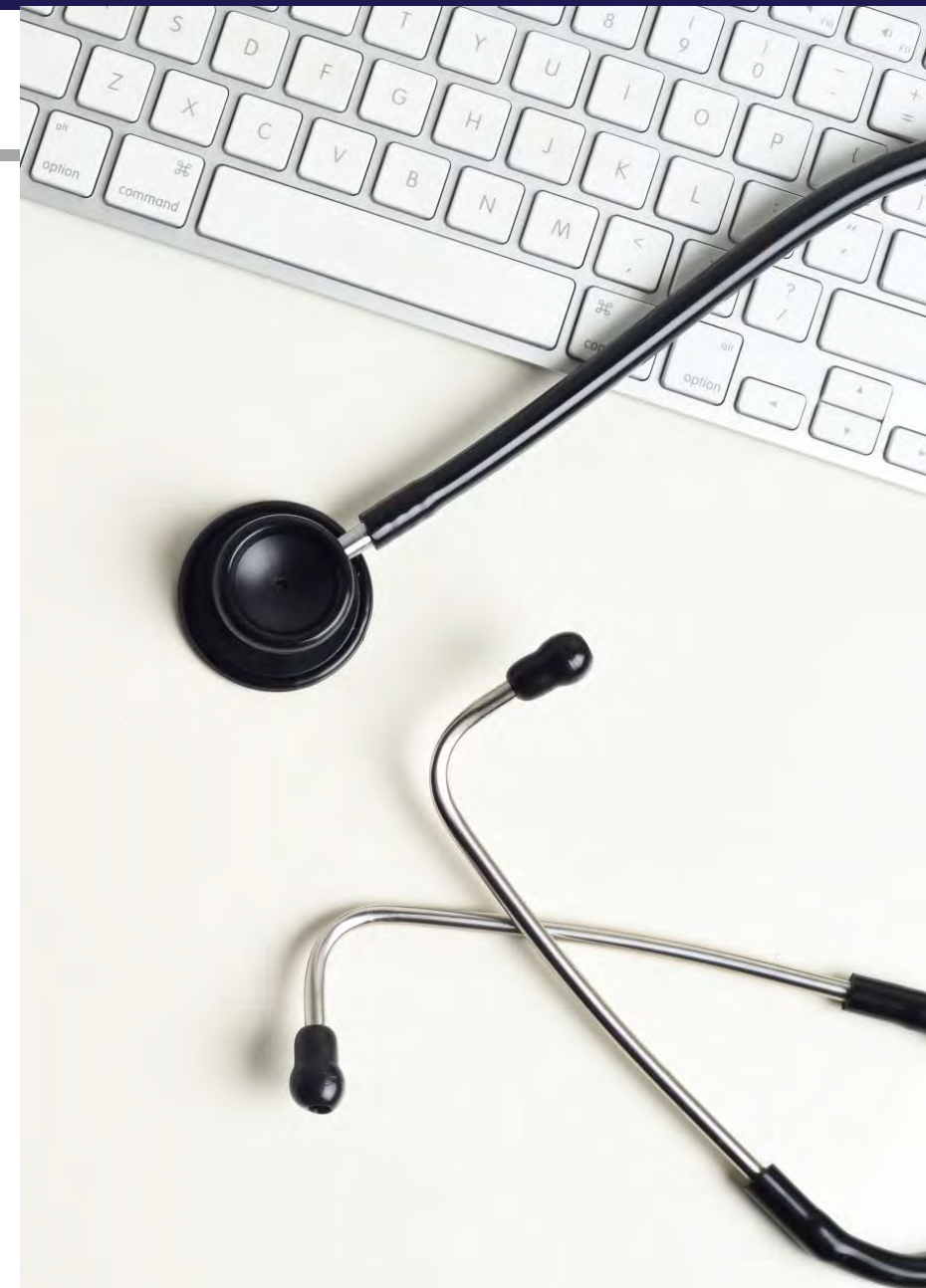
Independent Reviewer Site Reviews

Extension Agreement Overview

- On May 18, 2016, the State of Georgia and the United States Department of Justice (DOJ) agreed to an Extension of Settlement Agreement modifying the original terms of the 2010 Americans with Disabilities Act Settlement.
 - The extension agreement represents an acknowledgement by the DOJ of the state's compliance with the majority of provisions in the original ADA settlement agreement.
- 
- A large orange triangle is positioned in the bottom right corner of the slide, pointing towards the top right.

Independent Reviewer

- Both Parties selected Elizabeth Jones to serve as an Independent Reviewer to assess the State's compliance with the terms of the Settlement Agreement and for the Extension Settlement Agreement.
- In order to determine compliance with the Agreement, the Independent Reviewer shall have full access to persons, employees, residences, facilities, buildings, programs, services, documents, records, and materials that are necessary to assess the State's compliance and/or implementation efforts with the Agreement.
- The independent Reviewer shall conduct the factual investigation and verification of data and documentation necessary to determine whether the State is in compliance with the terms of the Agreement.



Independent Reviewer's Expectations for Site Visits:



Staff *who know the person best* should be present to answer questions during these site visits.



Provider nursing staff (if applicable) would also be a great resource during these site visits.



The independent reviewer may reach out to the provider nurse and/or support coordinator following the visit to follow up on any questions they may have.



There will be documentation provided to the independent reviewers prior to the visits that will include incident reports, investigations, etc.

Requested Documentation that will be reviewed in the homes:

Current Documentation for the following if applicable:

1. ISP
2. IDD Connects Individual 360
3. HRST
4. DBHDD Clinical Assessments and/or Evaluations from Nurses, Behavior Specialists, and/or Social Workers
5. Healthcare Plans- also training roster for completed trainings
6. Risk Mitigation Documents- also training roster for completed trainings
7. Provider LPN/RN, Behavior Specialists, etc. documentation
8. Consent for Psychotropic Medications
9. Schedule of MD appointments- including Physical Exam and Dentist Exam within last 12 months
10. Documentation of therapies assessments and/or adaptive equipment

Monitoring Questionnaire

- The Independent Reviewer has stated DBHDD can share a blank copy of the Monitoring Questionnaire prior to scheduled visits with Providers.
- The Independent Reviewer completes the Monitoring Questionnaire with the individual, family, provider staff, ISC/SC, Nursing staff, etc. as applicable.

Office of Health & Wellness Provider Announcements



Curriculum in IDD Healthcare Course Located in Relias

A red circular button with a white border and a white shadow, containing the text "Register NOW!" in white, bold, sans-serif font. The text is arranged with "Register" on the top line and "NOW!" on the bottom line, both slightly angled.

ATTENTION RN AND LPN PROVIDER STAFF:

- **All New Provider RNs and LPNs are required to complete Curriculum in IDD Healthcare at a minimum of six (6) hours of CEUs as orientation training. Applies to Providers approved 1/1/24 forward.**
- **All RNs/LPNs who were hired prior to January 1, 2024, are required to take Curriculums in IDD Healthcare on or prior to December 31, 2024.**

Requirements were published in DBHDD Provider Manual Update Effective 4/1/24 located on Page 24, 13. d. as part of Continuing Education. No cost for this course. CME and CEU credits are available.

Please send an email to martha.thweatt@dbhdd.ga.gov for instructions on accessing the course.

DBHDD Relias

To access the Relias Library - Email a request to:

Relias.admin@dbhdd.ga.gov

You will need to assign a Training Contact. They will be the main contact of the library and will receive the permissions to make/edit users, assign training, etc.

Have access issues or questions?

Email: Relias.admin@dbhdd.ga.gov

HRST BOOKMARKING PERSON SERVED RECORDS

User opens record for person & clicks on silhouette icon at the top left of page

The screenshot shows the HRST interface for a person's record. At the top is a navigation bar with links: Dashboard, Messages, New, Persons Served, Minnie Mouse (selected), Providers, Users, Nursing, Reports, and Help. Below this is a breadcrumb trail: PERSONS SERVED > PERSON DETAILS FOR MINNIE MOUSE. The main heading is "Person Details for Minnie Mouse" with a person silhouette icon. A green notification bar states "Minnie Mouse has been added to your bookmarks". Below the notification are several sections: "No photo uploaded yet." with a "Manage Photo" button; "Healthcare Level" with a gauge showing a score of 5 out of 6; "Allergies"; "Annual Update Status" with a calendar icon; and "Last Change Info" with a person and clock icon. At the bottom, there are two rows of green buttons for navigation: About Me, My Contacts, Diagnoses, Medications, Vaccinations, Ratings, Support Team, Health Tracker, Case Management, Nursing, Person Centered Description, Health Passport, and One Page Description.

Dashboard Messages New Persons Served Minnie Mouse Providers Users Nursing Reports Help

PERSONS SERVED > PERSON DETAILS FOR MINNIE MOUSE

Person Details for Minnie Mouse

Minnie Mouse has been added to your bookmarks

No photo uploaded yet. [Manage Photo](#)

Healthcare Level 5 Allergies Annual Update Status Last Change Info

About Me My Contacts Diagnoses Medications Vaccinations Ratings Support Team

Health Tracker Case Management Nursing Person Centered Description Health Passport

One Page Description

HRST BOOKMARKING PERSON SERVED RECORDS

There are two options to use to navigate to your bookmark list:

- 1. My Bookmarked Records*
- 2. Bookmarked Records Toggle*

The screenshot shows the 'Persons Served' page with a navigation menu. The 'My Bookmarked Records' option is highlighted with a red box. Below the filters, the 'Bookmarked Records' toggle is turned on.

Last Name	First Name	HCL	Age	Gender	Region	Status	Waiver	Plan List	DOB	County
1	CONSU...	TEST	None	125	Region 1	Active				Bartow
2	Lincoln	Abraham	4	41	Female	Region 4	Active	NOW	May	Echols

The screenshot shows the 'Persons Served' page with the 'Bookmarked Records' toggle highlighted in a red box. The toggle is currently turned off.

NEW Enteral Nutrition Training Course

This course is about supporting individuals with enteral tube feeding and nutrition.

**Presented By: Cyndi Berenguer,
OHW ICST Registered Dietitian/Nutritionist &
Bobbie Davidson, OHW RN Consultant**

**To request 2024 Training Information please email Karen Cawthon:
karen.cawthon@dbhdd.ga.gov**

Dangerous Mealtime Practices Train The Trainer

Focused on how people swallow and what happens when someone has challenges with swallowing safely

**Presented By: Cyndi Berenguer,
OHW ICST Registered Dietitian/Nutritionist**

**To request In Person Train-the Trainer Course presented by DBHDD ICST Registered Dietician/Nutritionist please email Karen Cawthon:
karen.cawthon@dbhdd.ga.gov**



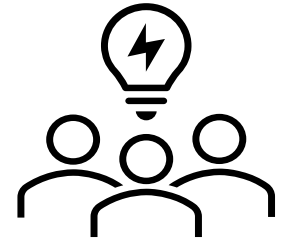
NEW eLearn Courses in 2025

Office Of Health and Wellness is working in collaboration with IntellectAbility to build 6 new training courses for Providers and Support Coordination to be available in Relias which include:

- **The Dangerous Dozen: Essential Mealtime Practices for Case Managers**
- **Special Diets and Meal Planning for IDD Provider Agency Staff**
- **Proper Maintenance of Specialized Medical Equipment**
- **Best Practices For Communicating and Understanding People with IDD**
- **Recognizing and Responding to Signs of Pain in People with IDD**
- **Polypharmacy Dynamics in People with IDD**

Regional Break Outs

**Regional “Break Out”
Sessions will be led by your
local RSA followed by general
Q&A. Listen for the breakout
room location of your
designated Regional Field
Office**



General Session Q/A





BE **D·B·H·D·D**

Georgia Department of Behavioral Health & Developmental Disabilities



D·B·H·D·D