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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**

Opening Welcome & Updates from
Ron Wakefield, Division Director IDD,
DBHDD

Office of Waiver Services-Updates

Ashleigh Caseman

Director of Waiver Services

Office of Waiver Services

May 11, 2023



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Public Health Emergency- Unwinding

- National Public Health Emergency (PHE) is anticipated to end on May 11, 2023. This announcement aligns with the administration's previous commitments to give at least 60 days' notice prior to the termination of the PHE.
- Please note that the Appendix K allowances are aligned with the federal PHE. Importantly, the flexibilities and enhancements which are supported by the Appendix K for the NOW and COMP Medicaid Waiver programs **will remain in effect for up to 6 months after the end of PHE (November 11, 2023).**



Public Health Emergency- Unwinding

Maintaining Post PHE

- Appropriation rate increases (5% FY22 and 2% FY23)
- Telehealth for specific services
 - Adult Therapies (OT, PT, SLP)
 - Nutrition
 - Interpreter Services
 - Behavior Support Services (limited scope)
 - Supported Employment Services (limited scope)

Allowed to Expire Post PHE

- Appendix K rate increases that are not tied to state appropriation
- Telehealth for RN and Support Coordination
- Family Caregiver Hire (with exception of extenuating circumstances)
- Staffing pattern and training flexibilities
- Additional items as distinguished in Appendix K

All policy allowances that will be made permanent after Appendix K's expiration are being included in the relevant DBHDD and DCH provider manuals

Recent Policy Updates

Recruitment and Application to Become a Provider of Developmental Disability Services, 02-701 Updated May 5, 2023

Criminal History Record Check for DBHDD Network Provider Applicants, 04-104, Updated May 1, 2023

NOW and COMP Waivers for Community Developmental Disability Services, 02-1202, Updated March 1, 2023

DBHDD Abbreviations and Acronyms, 04-112, Updated March 28, 2023

Upcoming: On May 11, 2023 the IDD COVID policy attachments- including Operational Guidelines for the Appendix K will be relocating to Provider Manuals for Community Developmental Disability Providers, 02-1201

All policies can be reviewed at <https://gadbhdd.policystat.com/>

COMP & NOW Waivers– Updates

COMP:

- COMP amendment includes 5% and 2% increases sent to CMS on April 14th for review.

NOW:

- NOW renewal approved by DCH board for final adoption on July 18, 2022
- Goal to align with approved COMP changes where possible
- NOW renewal Submitted to CMS by DCH on August 2, 2022
- UPDATE: Several NOW renewal provisions were removed from NOW application as part of ARPA MOE requirements
- CURRENT STATUS: Pending CMS Approval
- Note: the NOW renewal includes same permanent telehealth options as COMP renewal and the 5% and 2% Rate Increase from FY22 and FY23 state appropriations in preparation for unwinding the Appendix K

American Rescue Plan Act- Initiatives Update

CCBHC

Transitional Aged Youth

Intensive Family Support Services

Planning List-Supported Employment Pilot

Workforce Workgroup

Temporary Rate Enhancements

Rate Study

State of the Workforce Survey 2022

Latonya Williams

Waiver Operations Analyst,
Office of Waiver Services



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NCI-DD State of the Workforce Survey 2022

What is the National Core Indicators®-IDD (NCI®-IDD) State of the Workforce Survey?

- This survey is formerly known as the Staff Stability Survey. The NCI-IDD State of the Workforce Survey began April 24th for eligible Providers who employed Direct Support Professionals (DSPs) during the 2022 calendar year.
- This survey gathers information about employees providing direct “hands on” services and supports to adults, often referred to as Direct Support Professionals (DSPs).
- The data will help DBHDD, state policy-makers, and advocates learn how to improve the quality and stability of the DSP workforce in our state.

NCI-DD State of the Workforce Survey 2022

The survey will ask about the status of your agency's DSP workforce employed between January 1, 2022 and December 31, 2022. Provider agencies should have received emails with a unique link to the survey. The survey deadline is **June 30, 2023**.

The survey will ask about:

Demographics (region, county, city)

Length of DSP employment

Number of DSPs employed

Vacant positions

Wages

Benefits

Recruitment & Retention strategies

Aspects of COVID-19

NCI-DD State of the Workforce Survey 2022

- 1 Survey links are unique to the Provider contact's email address and cannot be forwarded to another individual. The survey should be completed by your Human Resources or Payroll offices and reflect Direct Support Professionals who were on payroll during any period between January 1 – December 31, 2022.
- 2 Once you click on the survey link, you will have the opportunity to download a PDF of the survey tool for reference only. Surveys will not be accepted or counted if they are not entered into the online system. You can access the survey as many times as necessary to add responses, edit responses or complete the survey later (due June 30, 2023).
- 3 Survey due date is June 30th. For any and all survey questions, please contact Latonya Williams latonya.e.williams@dbhdd.ga.gov

Office of Field Operations

Allen Morgan, M.A.

Director, Office of IDD Field
Operations



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Additional Staffing Current

Requests for renewals of additional staffing **MUST** be submitted unless the need for AS is no longer present.

The necessity of continued additional staffing **MUST** be discussed at ISP meetings. If continued AS is believed to be needed, the request should be in at or near the time of the ISP meeting.

Requests that are sent after a gap in approved AS will be considered Initial Requests, not renewals. This does not apply to timely requests that are under review at DBHDD.

Additional Staffing

The Office of Field Operations has requested that Support Coordinators make it clear to ISP participants that the absence of a timely request by the provider will result in an Adverse Action Letter and potential reduction in services.

Adverse Action Letters are sent to individuals and/or guardians with emailed copy to the responsible provider. The letter will explain that the Adverse Action process is due to the failure of the provider to submit required information.

Additional Staffing

We are aware that providers who must rely on external behavior support providers to produce behavioral data occasionally run into issues obtaining data; please contact the Regional Field Office and ask for assistance from the Behavior Support team if this occurs.

Recorded training on Additional Staffing submission and other topics is available at:

<https://dbhdd.georgia.gov/provider-toolkit-0>

Immediate and Critical approvals

- ❑ These are 90-day approvals and requests for Additional Staffing must be sent by day 45 with available data.
- ❑ The Adverse Action information on the previous slide applies to providers who do not submit requests to continue these authorizations.
- ❑ If the need is temporary, an ISP version change with all required signatures is sufficient to return to the previous service level.

A Future With Many Fewer AS Submissions

The IDD Rate Study reviewed the explosion of AS requests in the last few years

Analysis revealed that most individuals receiving Additional Staffing were assigned to Tier 4

A Future with Appropriate Staffing without AS request

The coming Tier 4 rates are designed to INCLUDE funding for the staff levels that currently require Additional Staffing requests.

Detail of this change will be discussed as we move toward the new rates.

Simplifying interactions with Carelon

- ❑ Delays in processing requests to add services or locations may come from many sources, but a few steps completely within your control may reduce processing time.
 - Review required documents and the expiration dates of those documents prior to submission.
 - Insurance documents, business licenses or professional licenses that are near expiration should be updated prior to submission when possible.
 - If that is not possible, forward the new documents when you receive them

Simplifying interactions with Carelon

- ❑ You may be asked for additional or updated information while an application is being processed.

- ❑ Problems arise when emailed requests are missed or ignored
 - Solve this by creating a dedicated email address or folder for emails from Carelon
 - Search: [How to create folders with rules in outlook \(gmail, yahoo, etc.\)](#)

- ❑ Delays can occur when responses are sent to the incorrect email address at Carelon
 - Read requests carefully and check the email address on the response.
 - Auto-complete may insert a previously used email that is incorrect.

Pre-Vocational Services Reminder

The PRE in Pre-vocational means before, prior to, and in front of just as it does in front of other words.

- In our usage it means generally limited to one year.
- Consistent with that meaning, approval of more than one year of PRE-vocational service is unlikely.
- Supported employment and community access may be appropriate services based on progress or lack thereof in pre-vocational services.

A Few Things That Have Not Changed

❑ **Host Home providers must have a written and updated back up plan.**

- Review these plans at least annually and confirm that the plan remains viable. This includes that back-up support person and the location:
 - The mother or other relative of a host home provider may have been an excellent back up several years ago. That may no longer be the case.
 - Having an individual move to an alternate placement with stairs may have been a good option before the individual began having issues with ambulation.
- Requesting respite is not a back-up plan unless you as a provider can guarantee availability within the agency.

A Few Things That Have Not Changed

- ❑ In the unfortunate event that you must stop supporting an individual, 30 day-notices must be sent to the RSA, I&E Manager, and Support Coordination. If the region is not notified, there is no notice.
- ❑ We appreciate your patience when it is challenging to identify a new provider. Regions will work with you to review what can be done to keep a person in place or to provide additional supports while the new provider is found.

Thank You for Continuing to Change Lives

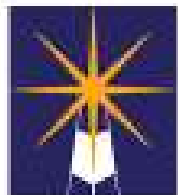
I spend so much time trying to get information out that I may not always say how vital you all are to DBHDD, to individuals and families, and to Georgia.

5% & 2% Payment Rate Increases State-Funded CRA

Ron Singleton, IDD Division Budget Manager

Division of Developmental Disabilities

May 11, 2023



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Today's Topics

- **5% Rate Increase Update**
 - \$1.00 Unit Rate Services Claims Adjustments
 - Recoupment: Adjustment Updates
- **2% Rate Increase Update**
 - Prior Authorization (PA) Approvals by Medicaid
 - Medicaid Fee Schedule (Rate Table) Adjustments
 - Medicaid Claims Reprocessing
- **Community Residential Alternative: State Funded Services**
 - ISP & PA Development

5% Rate Increase Update

Unit Rate: \$1.00

As stated in a previous Provider Meeting, NOW and COMP claims with a unit rate of \$1.00 would be reprocessed differently than claims for services with various unit rates. These claims, with a unit rate of \$1.00, are for the following services:

- Behavioral Support Services Level 1 & Level 2 (Self-Directed Only)
- Community Living Support (Self-Directed Only)
- Community Access Group & Individual (Self-Directed Only)
- Community Guide (Self-Directed Only)
- Individual Directed Goods and Services (Self-Directed Only)
- Natural Support Training (Self-Directed Only)
- Respite – 15 Minutes, In Home & Out of Home (Self-Directed Only)
- Specialized Medical Equipment (Traditional & Self-Directed)
- Specialized Medical Supplies (Traditional & Self-Directed)
- Supported Employment Group & Individual (Self-Directed Only)
- Transportation (Traditional and Self-Directed)
- Vehicle Adaption (Traditional and Self-Directed)

5% Rate Increase Update

Unit Rate: \$1.00 (Continued)

Claims with various rates were reprocessed by the Department of Community Health (DCH). Claims billed for services with a unit rate of \$1.00 will be **adjusted**, not **voided and rebilled** by providers. These are claims with dates of services from July 1, 2021, to June 30, 2022.

This is **not** a mandatory request but an option for those providers who choose to do so. Beginning on a specific date, DCH will temporarily lift the standard 6 months billing window as well as the 90-day adjustment window to allow for the claims to be **adjusted**, not **voided and rebilled**. Each claim chosen can be adjusted up to an additional 5% of the previous paid claim.

For all goods that are \$1=1 unit, providers may only adjust claims when the cost of the good purchased exceeded the allowed amount or the amount paid. In the event the cost of the good was more than the amount paid, claims can be adjusted to allow up to a 5% increase provided the adjustment does exceed the actual cost of the good.

5% Rate Increase Update

Unit Rate: \$1.00 (Continued)

The figure below provides an example of original paid claims for multiple services and the adjusted number of units and amount for each with the 5% increase.

Figure #1

Service Name	Service Date	Units Allowed	Allowed Amount	Adjusted Units	Adjusted Amount
Specialized Medical Supplies	9/15/2021	100	\$100.00	105	\$105.00

Service Name	Service Date	Units Allowed	Allowed Amount	Adjusted Units	Adjusted Amount
Transportation - Self-Directed	10/16/2021	250	\$250.00	262.5	\$262.50

In the Specialized Medicaid Supplies example above, you were originally allowed \$100.00 for an item with an actual cost of \$103.00. The claim would be adjusted for a reimbursement of \$103.00. If the actual cost of the item was \$107.00, the claim would be adjusted for a reimbursement of \$105.00.

5% Rate Increase Update

Unit Rate: \$1.00 (Continued)

The figure below displays a paid claim where there are multiple detail lines. Specialized Medical Supplies, billed at a rate of \$1.00, is eligible for the adjustment while Community Access Group with a rate of \$3.58 is not eligible for this process. Only the Specialized Medical Supplies line should be adjusted.

Figure #2

Service Name	Service Date	Units Allowed	Allowed Amount	Adjusted Units	Adjusted Amount
Specialized Medical Supplies	11/10/2021	200	\$200.00	210	\$210.00
Community Access Group	11/10/2021	100	\$358.00	N/A	N/A

DCH will post a banner message with the date in which this process can begin. They will also provide the amount of time in which providers will have to complete adjustments. DBHDD will also provide a bulletin to with details related to this process.

5% Rate Increase Update

Recoupment Adjustments

The DCH 5% claims reprocess that occurred on February 10, 2023, resulted in a recoupment or partial payment for several providers. Providers who had questions regarding this process were asked to contact Maya Carter (DCH) at mcarter@dch.ga.gov.

The inquiries that were submitted are being addressed but due to the high volume of cases, there are several that are still pending. Please contact DCH for an update if you have not received one previously. DBHDD is working with DCH to assist with resolving issues related to recoupments or partial payments.

While some cases may result in a reimbursement of the 5% increase, there are those that will not. These details will be provided in a response to inquiries made.

2% Rate Increase Update: NOW and COMP Waiver

The 2% provider rate increase from the FY23 Appropriations Bill [HB-911] is near completion. There are several key items that are needed to implement the rates. They include:

- Update Prior Authorizations in IDD Connects with the 2% Rate Increase
- Update the GAMMIS/Medicaid System Fee Schedule (Rate Table)
- Transmit Prior Authorizations to the GAMMIS/Medicaid System for Approval

The final process will be the reprocessing of claims by DCH with dates of services from July 1, 2022. Specific dates will be provided after each billing cycle has occurred. Several cycles will be needed due to the volume of claims.

2% Rate Increase Update: State Funded Services

The 2% provider rate increase from the FY23 Appropriations Bill [HB-911] has been completed for State Funded Services. Please be sure review the Prior Authorizations to ensure accuracy. For any discrepancies, please contact the State Support Coordinator for assistance.

Please enter your charges (claims) based on the rates reflecting the 2% increase.

For claims with dates of service from July 1, 2022, will be reprocessed by the Georgia Collaborative ASO (Carelton Behavioral Health).

Troubleshooting for Billing & Claims

If you 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>

For questions and assistance regarding State Funded billing and claims, please contact **The Georgia Collaborative ASO Custom Service** line below:

Monday-Friday,
8:00am-5:00pm ET

P: 855.606.2725

For general questions about the recent rate increases, please contact the DBHDD Provider Issue Management System (PIMS) at:

[Provider Issue Management System \(PIMS\)](#)

State Funded
Community Residential Alternative
Individual Service Plans & Prior Authorizations

State Funded Community Residential Alternative Services

Key Points to Know

- One rate for State Funded Group Homes (GH) & Host Homes (HH) (\$166.61).
- Tiers/Categories (GH & HH) and home capacity (GH) do not apply to State Funded Community Residential Alternative.
- The annual maximum number of units is 344 daily per year.
- Enter the current effective rate (charge) for full reimbursement.

Charge Amount (\$)	Units
\$166.61	1

State Funded Community Residential Alternative Services

ISP Development

An ISP can be approved with Community Residential Alternative for a Group Home setting, a Host Home setting or both if the individual moves from one setting to another during the ISP year.

Service Summary **2 Options** [Refresh](#) [Download](#) [Print](#)

Status: Modified Date: Date Completed:

	Service Description	Approved	Detailed Service Description
1	<input type="checkbox"/> Community Residential Alternative	<input type="checkbox"/>	Community Residential Alternative - State Funded
2	<input type="checkbox"/> Community Residential Alternative	<input type="checkbox"/>	Community Residential Alternative - Host Home - State f

Group Home (points to row 1)

Host Home (points to row 2)

Minimum FTF Visit Frequency:

State Funded Community Residential Alternative Services

Prior Authorization Development

Figure A – State Funded Group Home Service Line

Figure B – State Funded Group Home and Host Home Service Lines

A	Service Code ↕	Detailed Service Description ↕	Procedure Code	Units ↕	Start Date	End Date
	CS0	Community Residential Alternative - State Funded	T2033-HW	344	04/29/2023 📅	04/12/2024 📅

B	Service Code ↕	Detailed Service Description ↕	Procedure Code	Units ↕	Start Date	End Date
	CS0	Community Residential Alternative - State Funded	T2033-HW	100	09/01/2023 📅	12/09/2023 📅
	CS1	Community Residential Alternative - Host Home - State Funded	T2017-HW	244	12/10/2023 📅	08/31/2024 📅

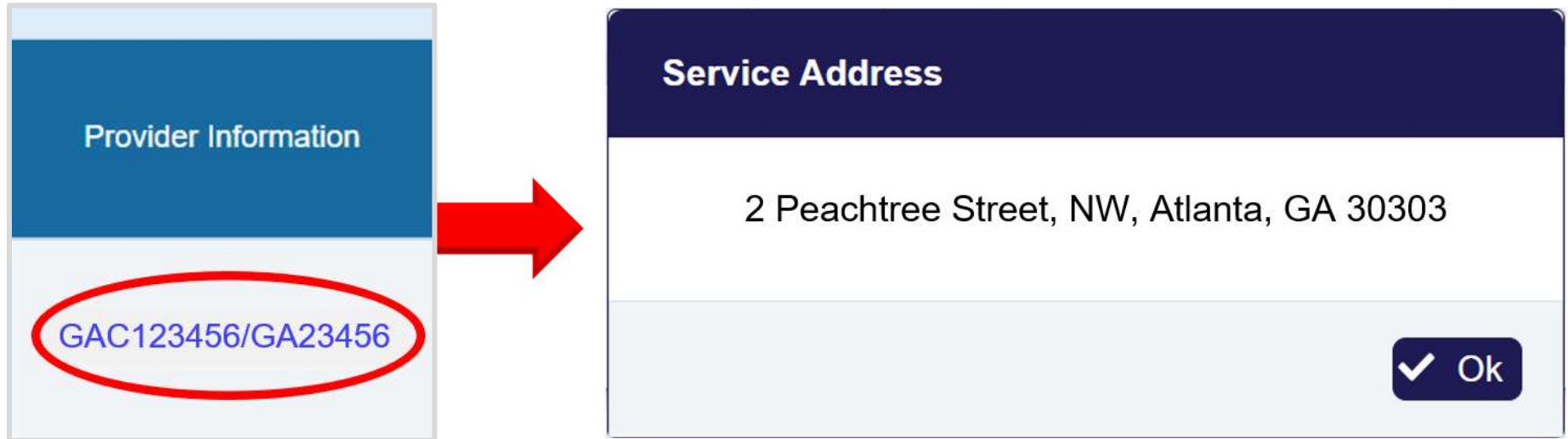
Prior Authorization Service Lines: Provider Identification Numbers

Provider Information: Waiver and State Funded Services

1. **Georgia Collaborative Provider Number:** A unique six-digit number with a three-letter contract prefix (e.g. GAC123456) assigned by the Collaborative.
 - This is the primary number used by the Collaborative in identifying providers in the DBHDD network.
 - This number is also required for submitting authorizations via ProviderConnect or through the batch process.
2. **Vendor Number:** Identifies where services are or were rendered. A provider may have multiple vendor locations and each vendor location is given a five-digit number preceded by two (2) letters. (e.g. GA23456).

Prior Authorization Service Lines: Provider Identification Numbers

Provider Information: Waiver and State Funded Services



The Service Address is associated with the Vendor Number.

Covid Incident Reporting and Fingerprinting Updates for All Providers

Jennifer Rybak, MA, HLB
Director, Office of Incident
Management and Compliance

Melissa Jeffers, RN, BSN
Manager, Information Data Unit

Keisha Davis, LMSW, MBA
Manager, Incident Management



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PHE Related Allowance Changes



Public Health Emergency Ending May 11th

- In response to the federal announcement that the COVID-19 Public Health Emergency (PHE) declaration will end on May 11, 2023, there are updates to Covid incident reporting via Image and fingerprint-based background check requirements.

COVID Reporting Update

- Effective May 11th, 2023, COVID related incident types will no longer be reportable in Image
- Providers should continue to report all other incidents per Policy 04-106, Reporting Deaths and Other Incidents in Community Services which may include impacts from COVID related illnesses as covered in other incident types (ex. deaths, ER visits, hospitalizations, etc.).

PHE Ending Background Check Update

- By **July 10, 2023**, all employees hired using an attestation during the PHE are required to have a fingerprint-based background check.

Transition to Fieldprint



Fieldprint Transition for Background Checks

- The GBI has transitioned from Gemalto to Fieldprint as of May 1, 2023
- If you had an account in Gemalto, you must contact Fieldprint via email at gacustomerservice@myfieldprint.com. You need your agency ORI number when contacting them
- If you did not have a Gemalto account, you can create a Fieldprint account by going to [Fieldprint \(fieldprintgeorgia.com/businesses\)](https://fieldprintgeorgia.com/businesses) and clicking Create an Account
- If you had a Gemalto account and you created a new Fieldprint account without emailing Fieldprint, you will end up with two ORI numbers – this will need to be resolved by contacting gacustomerservice@myfieldprint.com

Fieldprint Transition (continued)

- Applicants must create a scheduling site account at [Fieldprint \(fieldprintgeorgia.com/businesses\)](https://fieldprintgeorgia.com/businesses) and register themselves for fingerprints
- Providers who pay for background checks must give the applicant the correct FP reason code which ends with "ContCareTreat" or 37-1-28 (2) for DBHDD Contractors Providing Care and Treatment
- If an incorrect FP reason code is used, the registration will be declined, and the applicant will need to register again

Fieldprint Transition (continued)

- Providers must email the signed Registration Form and Cover Sheet to dbhdd.reg@dbhdd.ga.gov so that we can verify the information is correct prior to fingerprinting otherwise the applicant could be turned away from being fingerprinted at the site and delay the process
- DBHDD staff will review and approve registrations
- After the registration has been approved, the Applicant will receive an email from Fieldprint informing them that their registration was approved, and the applicant will need to schedule an appointment to be fingerprinted

Fieldprint Transition (continued)

- The Applicant will need to log back into [Fieldprint](#) and schedule a fingerprint appointment
- The Applicant should take the Appointment Number and photo ID with them to the fingerprint site at the scheduled appointment date/time

Note: Applicants can no longer request a copy of their background check per Fieldprint.

Fieldprint Transition (continued)

- For questions regarding Fieldprint, access to Fieldprint, billing, and getting applicants fingerprinted, etc. please contact Fieldprint Customer Service: gacustomerservice@myfieldprint.com or 844-886-0164
- For questions related to DBHDD's background check process or eligibility in CHRIS, please contact: dbhdd-crs@dbhdd.ga.gov or melissa.jeffers@dbhdd.ga.gov

Reminder - DCH vs. DBHDD Background Check

- DBHDD accepts background checks done via DCH for:
 - Private Home Care
 - Personal Care Home
 - Owners of CLA
- DBHDD maintains responsibility for all other services to include applicants who:
 - Are considered as final selectee in positions of direct care, treatment, custodial responsibilities for individuals served and
 - Are considered as final selectee in positions involving direct access to funds belonging to individuals

Resources

- Resources are available on the DBHDD website, [Background Policy & GAPS Information page](https://dbhdd.georgia.gov/be-connected/background-policy-gaps-information) (*https://dbhdd.georgia.gov/be-connected/background-policy-gaps-information*)
- Additional information and training videos for Fieldprint can be found on the [GCIC Blog Site](http://gicweb.gbi.state.ga.us/ncja/index.php) (*http://gicweb.gbi.state.ga.us/ncja/index.php*) by selecting [GAPS/Fieldprint](#)

Contacts

Registration forms:
dbhdd.reg@dbhdd.ga.gov

Incident Reporting:
dbhddincidents@dbhdd.ga.gov

CHRIS questions:
dbhdd-crs@dbhdd.ga.gov

Image Issues:
Image.App@dbhdd.ga.gov

Melissa Jeffers:
Melissa.Jeffers@dbhdd.ga.gov

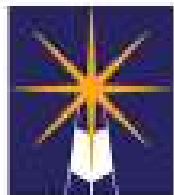
Keisha Blackwell:
Keisha.Blackwell@dbhdd.ga.gov

Medicaid Redetermination

Robert Bell

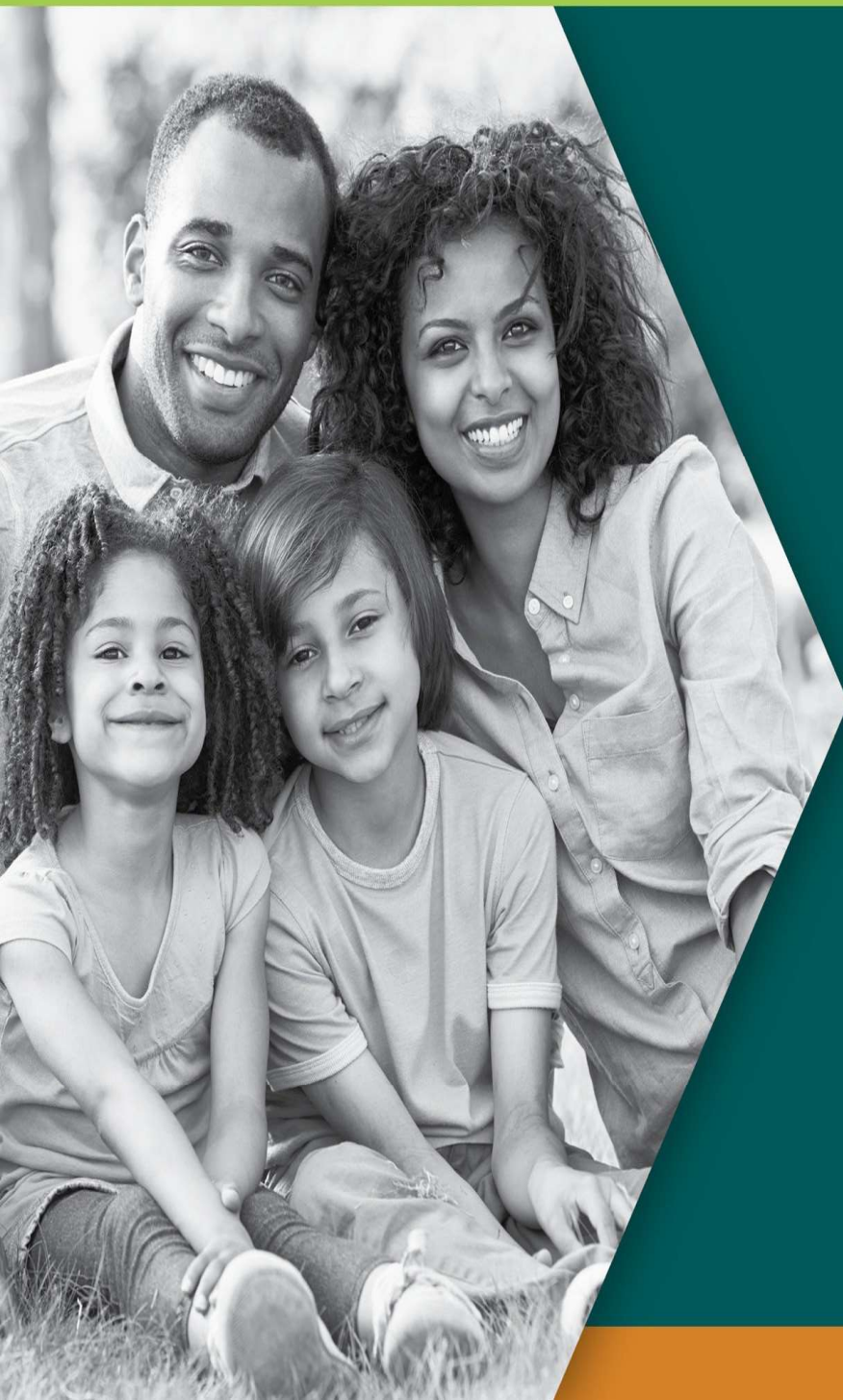
Director of Community Services
Division of Developmental Disabilities

May 11, 2023



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**Georgia Department
of Human Services**



**GEORGIA DEPARTMENT of
COMMUNITY HEALTH**

Plan for Medicaid Redetermination

February 2023



**Stay Informed.
Stay Covered.**

Federal Guidance

- Guidance has evolved at [Medicaid.gov](https://www.Medicaid.gov) for how states should conduct Medicaid redeterminations, address workforce and technology challenges, notify individuals that their coverage may end, and offer opportunities for supplying more information or appealing a decision.
- Currently, states will have a 14-month window from April 1, 2023 to conduct redeterminations. In Georgia, the Department of Community Health and Department of Human Services will jointly reevaluate **roughly 2.7 million** individuals for Medicaid eligibility.
- Georgia must complete all Medicaid redeterminations, pending eligibility actions, disenrollments, and appeals by May 31, 2024.

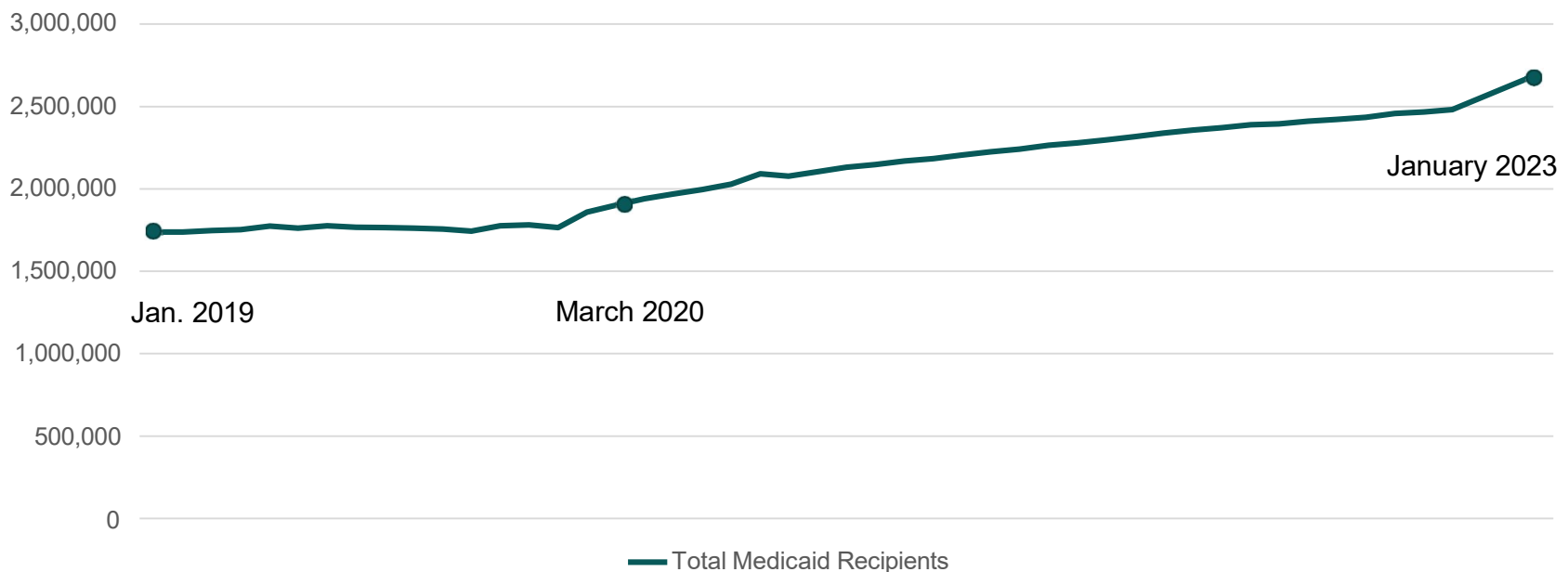
PHE Unwinding

- Due to changes in federal law throughout the COVID-19 pandemic, Medicaid members received continuous coverage, even if their eligibility status changed.* Once redetermination begins, the federal government will reinstate the requirement for all states to check Medicaid eligibility for all current members.
- Redetermination is the process that states, including Georgia, must follow to make sure current Medicaid members are still eligible for coverage. It involves collecting and verifying information, including income and contact details, as well as other requested information or documents related to determining eligibility based on a member's case.
- If a Medicaid member is still eligible, their coverage will be renewed. Individuals who are no longer eligible for Medicaid may qualify for other coverage options.

* Exceptions were for individuals who moved out of state or voluntarily terminated enrollment.

Plan for Medicaid Redetermination

- The below chart indicates total Medicaid members in Georgia from January 2019 to January 2023. Total Medicaid members have steadily increased since the beginning of the federal PHE in March 2020.



*March 2020 and prior application data was as of COB 4/20/2020 and beginning with April 2020, all monthly application data is as of cob on the last day of the reporting month.

Preparing for Medicaid Redetermination

Moving through Winter, Georgia plans to advance preparations for Medicaid redetermination, beginning April 1, 2023. The goal is to minimize the number of current Medicaid members who take no action and have Medicaid benefits terminated with no alternate healthcare insurance coverage in place.

Winter 2022 – Spring 2023

- Encouraging Medicaid members to update their contact information.
- Informing current Medicaid members about what to expect and how to submit the necessary documentation for redetermination of their Medicaid benefits after a multi-year hiatus of this process.
- “Arming the messengers,” i.e., the other audiences who have access to or communicate with current Medicaid beneficiaries and can help share important information.

*Plans are subject to change based on federal guidance and state strategies.

Communications Strategy

Communications related to unwinding continuous Medicaid coverage will occur in two phases.

Phase 1:

Update Contact Information

- Phase 1 leveraged the time before redetermination deadlines begin. The primary goal was to capture updated contact information for members to ensure timely notification for redetermination.



Phase 2:

Redetermination

- Phase 2 will begin on April 1, 2023 when Georgia begins Medicaid redetermination. Efforts will focus on education and guidance so qualified members can avoid coverage gaps.

Phase 1: Update Contact Information

- In Phase 1, DHS focused on increasing the number of emails and updated, accurate contact information for its Medicaid members in advance of redetermination.

Key Message

- Stay in charge of your Medicaid coverage. Please update your contact info to receive updates, resources and assistance.

Phase 1: Update Contact Information Communication Strategy

- In Phase 1, DHS leveraged various communications channels to reach Medicaid members in Georgia via spokescharacter George A. Peach.

Digital Marketing

Found the fastest, most frictionless methods to capture contact info via a mobile-first strategy

- Launched Website
- Developed 'always-on' organic social media

Paid Traditional Media

Used traditional, paid media channels to reinforce urgency and capture contact information

- Activated billboards, television, radio, newspaper ads and cash jackets

Paid Digital Media

Leveraged digital channels to strategically target members with campaign messages

- Advertised on Facebook/Instagram, Twitter, YouTube, Google AdWords, Google Display Network

Communications

Engaged partners to help disseminate campaign messages to members

- Developed toolkit to reach healthcare providers, advocacy groups

Phase 2: Redetermination

- Once redetermination begins, Georgia will have a 14-month window within which to assess Medicaid eligibility for all 2.7 million members.
- To fairly and smoothly process such a large population, DHS has taken a specific approach to align renewals, level, and extend periods of eligibility for the longest periods possible while keeping level caseloads that are manageable for staff DHS.
- DHS will determine batches of members and notify them by U.S. mail or email with instructions for what they need to do to maintain coverage.
- This batching approach will be carried out over the 14-month period, starting within several weeks of redetermination beginning, until all Medicaid members have been notified of their personalized next steps.
- Starting April 17, 2023, Medicaid members will be assigned a specific redetermination date that can be found in Gateway.

*The redetermination process does not guarantee any person's eligibility for Medicaid or other available coverage.

Phase 2: Messaging Authorized Representatives

- Anyone assisting a Medicaid member with their Medicaid benefits needs to become an authorized representative, including providers, hospitals, family members or friends.
- **For members:** To add an authorized representative to your case, please fill and submit Form 5459 to allow another individual family member, friend, advocate or provider to provide continuous assistance with Medicaid benefits. This process only needs to be completed once.
- **For third parties:** To receive official approval to legally assist a Medicaid member, you must fill out and submit Form 5459. Your request will be processed and documented in the Gateway system, allowing you to provide continuous assistance to a Medicaid member, including taking part in benefit reviews and receiving reports and notifications.

*The redetermination process does not guarantee any person's eligibility for Medicaid or other available coverage.

Ga. DHS - Medicaid Unwinding
<https://dhs.georgia.gov/medicaid-unwinding>

🏠 > Medicaid Unwinding

Medicaid Unwinding
Medicaid Unwinding Press Releases
Medicaid Unwinding Speaker Request

Medicaid Unwinding

Medicaid Redetermination Has Started

On April 1, 2023, the state of Georgia must redetermine eligibility for all people who currently receive Medicaid or PeachCare for Kids® coverage.

We have created a website - staycovered.ga.gov - that will be regularly updated with important news and resources.

Background

In response to the COVID-19 pandemic, the U.S. Congress passed the Families First Coronavirus Response Act (FFCRA) in March 2020. Under the FFCRA, Georgia Medicaid members have been eligible for continuous coverage during the federal public health emergency (PHE).

And DCH has
created a website

staycovered.ga.gov



[Medicaid Members](#)

[Family & Friends](#)

[Partners & Providers](#)

[Resources](#)

[FAQ](#)



Get Help with Medicaid Redetermination

Here are resources to help Georgia's Medicaid and PeachCare for Kids® members and communities prepare for eligibility checks beginning in April 2023 through May 2024.

Be ready – take charge of your family's Medicaid and PeachCare for Kids® coverage. Visit [Gateway](#) to update your contact information. Stay informed. Stay Covered.

[Visit Gateway →](#)



Georgia Medicaid "Stay Informed. Stay Covered." Claw Machine Commercial (English)

GA DHS



DBHDD Expectations for Providers Working With Participants Who Are Deaf

**Robert Bell, Director of Community
Support, DBHDD**

**Kelly Sterling, Director of Deaf Services,
DBHDD**

May 11, 2023



D·B·H·D·D

Georgia
Department of
Behavioral Health
& Developmental
Disabilities

Office of Deaf Services & Division of Intellectual/Developmental Disabilities

- Deaf Participants who communicate in sign language did not have equivalent access to services as their hearing peers.
- Communication Assessments to identify the communication preference of the participants and to identify provider supports needed.
- Working to provide participants reasonable access to information presented at the ISP meetings
- Working to support staff in their ability to communicate with deaf participants at the same level they can communicate with hearing participants

Providers Hiring ASL Fluent Staff

- Director Wakefield Memorandum of October 2020:
- Hiring staff who can sign or hiring Deaf Staff
- Individual Service Planning instruction provided in manner consistent with communication access needs
- Environmental accommodations in provider settings

GCDHH ASL Training Contract

- Georgia Center of the Deaf and Hard of Hearing is the approved trainer
- Requires Providers to sign a Memorandum of Understanding (MOU)
- Expects providers to identify the staff who are assigned to work directly with the individual
- SLPI only for those who are assigned to work directly with the individual

ASL Fluent Group Homes

- Residential Provider setting that will have staff who are able to fluently communicate with sign language using IDD Participants who have hearing loss
- The option to visit and choice to move into these settings will be provided to Deaf/IDD class members who are receiving DBHDD IDD services
- Deaf/IDD Participants will have an opportunity to reside with peers who share their language preference

DBHDD Contact Points

Division of IDD-Director
Community Supports

Robert Bell

Robert.bell@dbhdd.ga.gov

404-561-4483

Division of BH

Director Office of Deaf
Services

Kelly Sterling

Kelly.sterling@dbhdd.ga.gov

470-451-5321

OHW Updates

Dr. Dana Scott, DNP, RN

Director Office of Health
& Wellness, Division of
Disabilities



D·B·H·D·D

Georgia
Department of
Behavioral Health
& Developmental
Disabilities

Heightened Risk/Role in Statewide Clinical Oversight



Who Qualifies for Statewide Clinical Oversight?

- I. Health-Related:
 - A. An increase in HRST score
 - B. Known Emergency Room Visit or Hospitalization
 - C. Recurring Serious Illness without Resolution
 - D. Diagnosis with an episode of:
 - 1. Aspiration
 - 2. Seizures
 - 3. Bowel Obstruction
 - 4. Dehydration
 - 5. Gastro-Esophageal Reflux Disease (GERD)
 - E. Unmet need for medical equipment or healthcare consultation
 - F. Allegation of Neglect/Abuse

Criteria of Statewide Clinical Oversight: Qualifiers

II. Behavioral:

- A. Material Changes in Behavior (Crisis Respite Admissions)
- B. A Behavioral Incident with Intervention by Law Enforcement
- C. Functional Decline
- D. Cognitive Decline

III. Environmental:

- A. Threat of Discharge from a Residential Provider
- B. Actual Discharge from a Residential Provider
- C. Change in Residence
- D. Change in Staff Training

Criteria of Statewide Clinical Oversight: Qualifiers

III. Environmental:

E. Suitability Concern

F. Accessibility Issues that Relate to the Health or Safety of the Individual including:

1. Loss of Involved Family Member
2. Loss of Natural Supports
3. Discharge from a Day Provider

IV. Other: Confirmed Identification of any factor above by a

A. Provider

B. Support Coordinator

C. Family Member

D. Advocate

Active Pathways of Statewide Clinical Oversight:

Active:

E-mail Notifications from the following Mailbox:
Statewide.ClinicalOversight@dbhdd.ga.gov

This line is available to those without internet access:

Phone: 1-833-206-7960

*Note: Communicated information will be sent to the SCO mailbox.
Follow-Up will occur within 24 business hours.*

Passive Pathways of Statewide Clinical Oversight:

- Communication to the following:
 - Central Office
 - Regional Field Offices
 - Office of Health & Wellness
 - Intensive Support Coordinators
 - Support Coordinators
- Incident Reports
- Investigations
- Collateral Information resulting from Mortality Reviews
- Mobile Crisis Services

Office of Health & Wellness Provider Training Announcements



HRST Advanced Rater In-app Training

Existing Raters

Any Rater who has an Online Rater Training completion date before May 16, 2022 must complete the HRST In-App Advanced Rater Course by May 16, 2023. There are still over 2,000 Raters that need to complete course to maintain HRST Rater Role. Click on Training Cap in HRST and navigate to My Assigned Courses to complete.

Send questions to gasupport@replacingrisk.com



**Health Risk Screening Tool (HRST):
One Day Training for Clinical Reviewers Webinar
TRAINING PREREQUISITE:**

ALL attendees planning to attend this training must successfully complete BOTH the HRST Online Rater Training and in-app Advanced Rater Training, and have an IDD Connect Account Username.

Next Clinical Reviewer Training is June 6, 2023

In-App Clinical Reviewer Training for Georgia HRST Users

What is In-app Clinical Reviewer Training?

IntellectAbility has converted the current webinar-based Clinical Reviewer Training into an in-app eLearn course.

The new in-app Clinical Reviewer training and Scoring Summary will go live on August 15, 2023.

What criteria must a nurse meet to take the new in-app Clinical Reviewer Training?

GA nurses eligible to be trained as a Clinical Reviewer must meet the following criteria:

- **successfully complete HRST Online Rater Training.**
- **successfully complete HRST Advanced Rater Training.**
- **be an RN.**
- **have an active nurse license at the time the training is requested.**

Dangerous Mealtime Practices

OHW & the ICST Nutritionist updated Dangerous Mealtime Practices

Focused on how people swallow

What happens with challenges of swallowing safely

To request 2023 In Person Train-the Trainer Course presented by DBHDD ICST Registered Dietician/Nutritionist please email Karen Cawthon: karen.cawthon@dbhdd.ga.gov

988

SUICIDE
& CRISIS
LIFELINE

GEORGIA

DBHDD Crisis System



D·B·H·D·D

BE D·B·H·D·D

Dawn Peel LPC CPCS
Director, Office of Crisis Coordination



WHAT IS
9-8-8?

9-8-8 is a direct, national three-digit line that will connect individuals with suicide prevention and mental health crisis resources.

Since July 2022, 9-8-8 calls in Georgia have been answered by the Georgia Crisis and Access Line (GCAL), 24 hours a day, 7 days a week, 365 days a year.

Right now, in Georgia, anyone experiencing a suicidal crisis or emotional distress should **call GCAL at 1-800-715-4225** or **download the My GCAL app**, available on both iOS and Android devices, to access GCAL via text and chat.

GCAL is available 24 hours a day, 7 days a week.



Some of 9-8-8's key features include:

- Connect a person with immediate and ongoing resources
- Promote cost efficiency
- Reduce impact on safety resources
- Help end stigma of seeking care

9-8-8 Suicide & Crisis Lifeline Overview

The 9-8-8 law requires Georgia to enhance the current system's ability to respond to those experiencing a behavioral health crisis by providing:



Someone to talk to

- Available 24/7 for calls, text and chat
- Peer-run warm lines offering callers emotional support, staffed by individuals who are in recovery themselves



Someone to respond

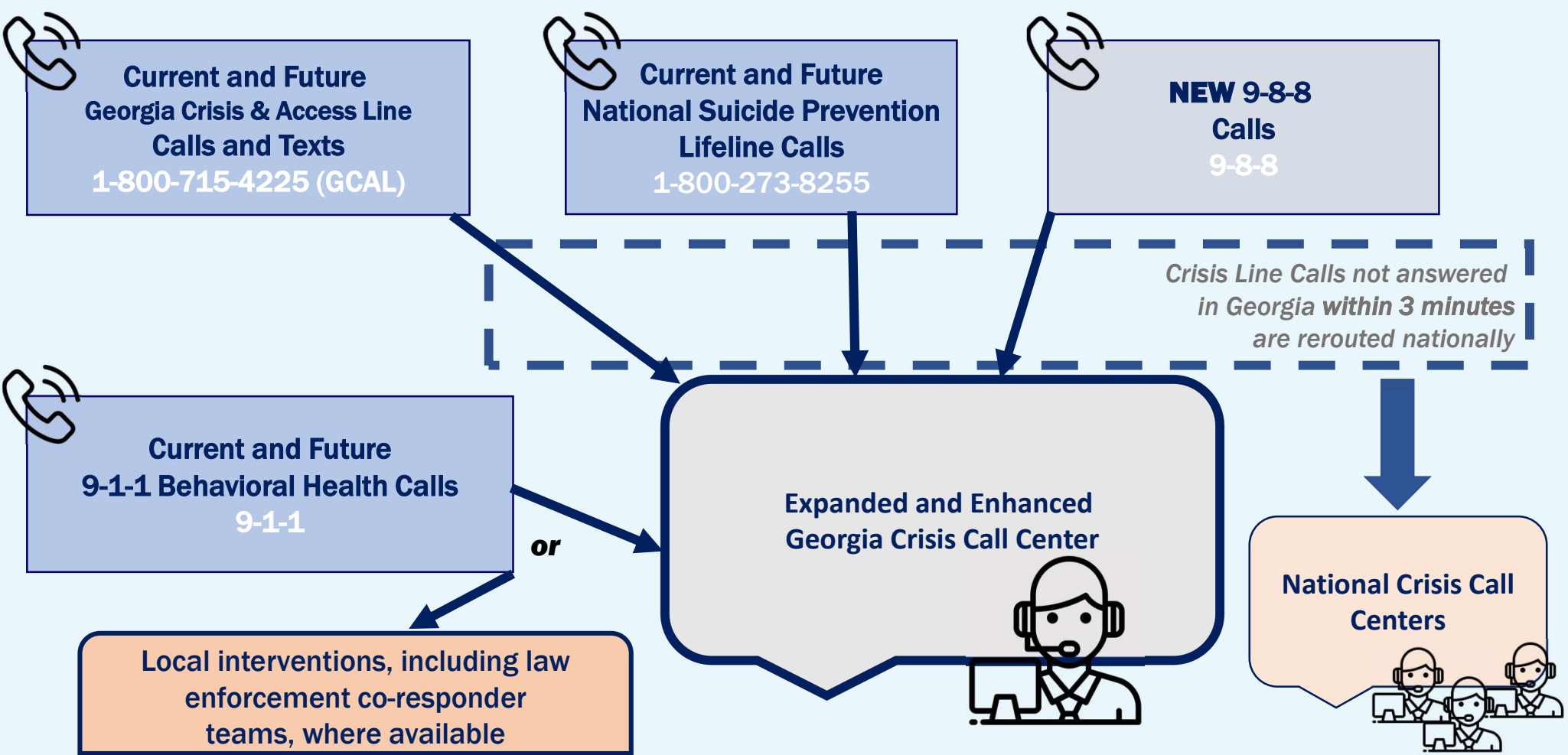
- Mobile crisis available statewide
- Coordinate with 9-1-1/EMS as appropriate
- Outpatient community provider response



A safe place for help

- Crisis stabilization units
- Crisis service center
- Peer wellness respite
- Detox and Substance Use Disorder (SUD) treatment
- Inpatient beds
- Outpatient crisis

Someone to Call: Multiple Pathways to Help





Someone To Call



Georgia Crisis
& Access Line

1-800-715-4225

mygcal.com



Someone To Respond

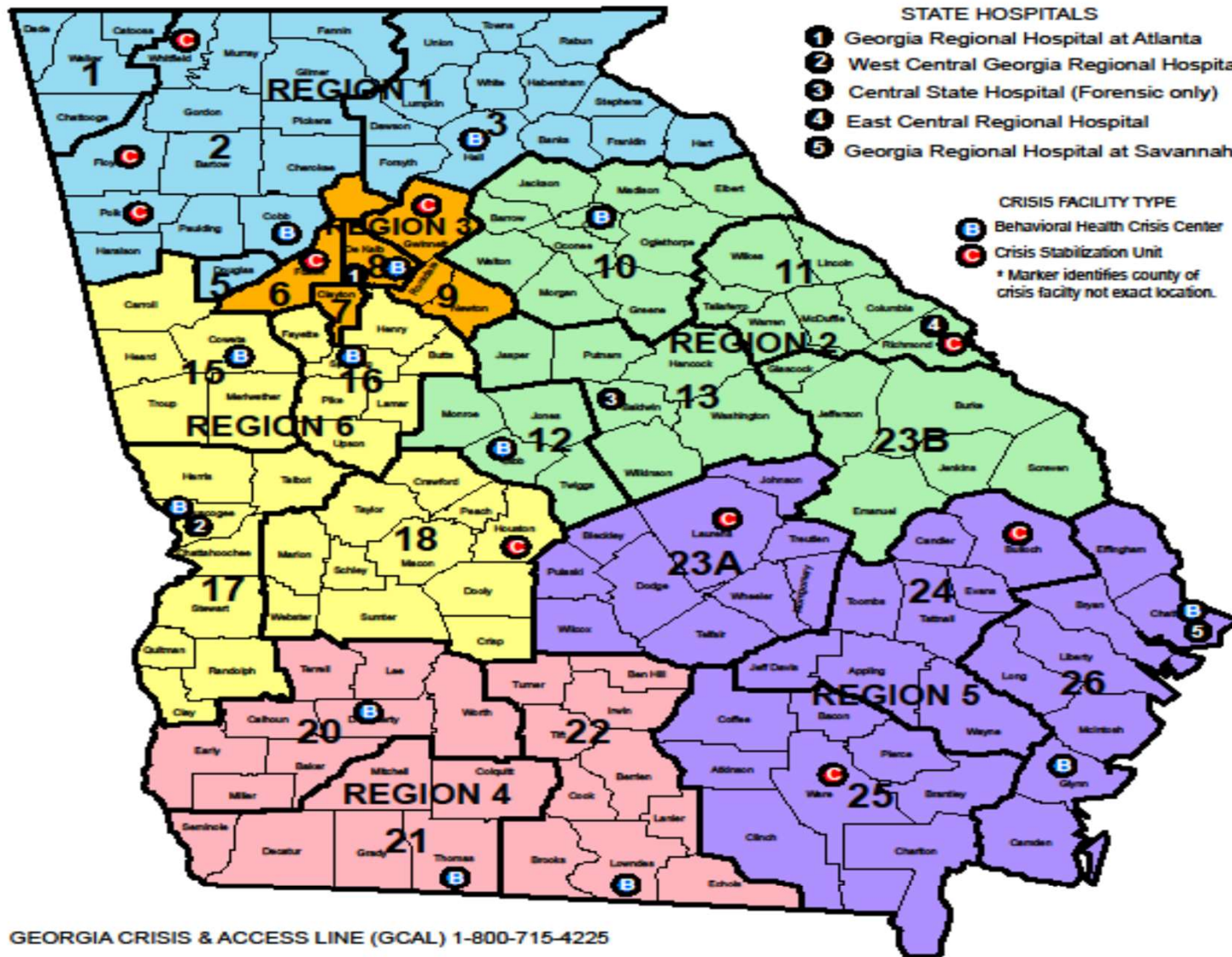
Mobile Crisis Response Services

- Mobile Crisis Response Services
 - Mobile crisis response services provide assessment and crisis intervention by mobile clinicians who respond to individuals at their residences, social service agencies, emergency rooms, and other locations in the community using the least intrusive intervention while minimizing involvement of law enforcement, emergency rooms or inpatient facilities.
 - Services are provided 24 hours per day, 7 days per week.
 - Mobile Crisis Response Services are available in all counties in Georgia.
 - Behavioral Health Link is the Mobile Crisis provider in Regions 2, 3, 5, and 6. Benchmark Human services is the Mobile Crisis provider in Regions 1 and 4.
 - Mobile Crisis Response Services are accessed through the Georgia Crisis and Access Line (GCAL)
 - 800-715-4225



A Safe Place for Help

Georgia Department of Behavioral Health & Developmental Disabilities
Adult Crisis Beds (BHCC's & CSU's)
Effective July 1, 2022



GEORGIA CRISIS & ACCESS LINE (GCAL) 1-800-715-4225

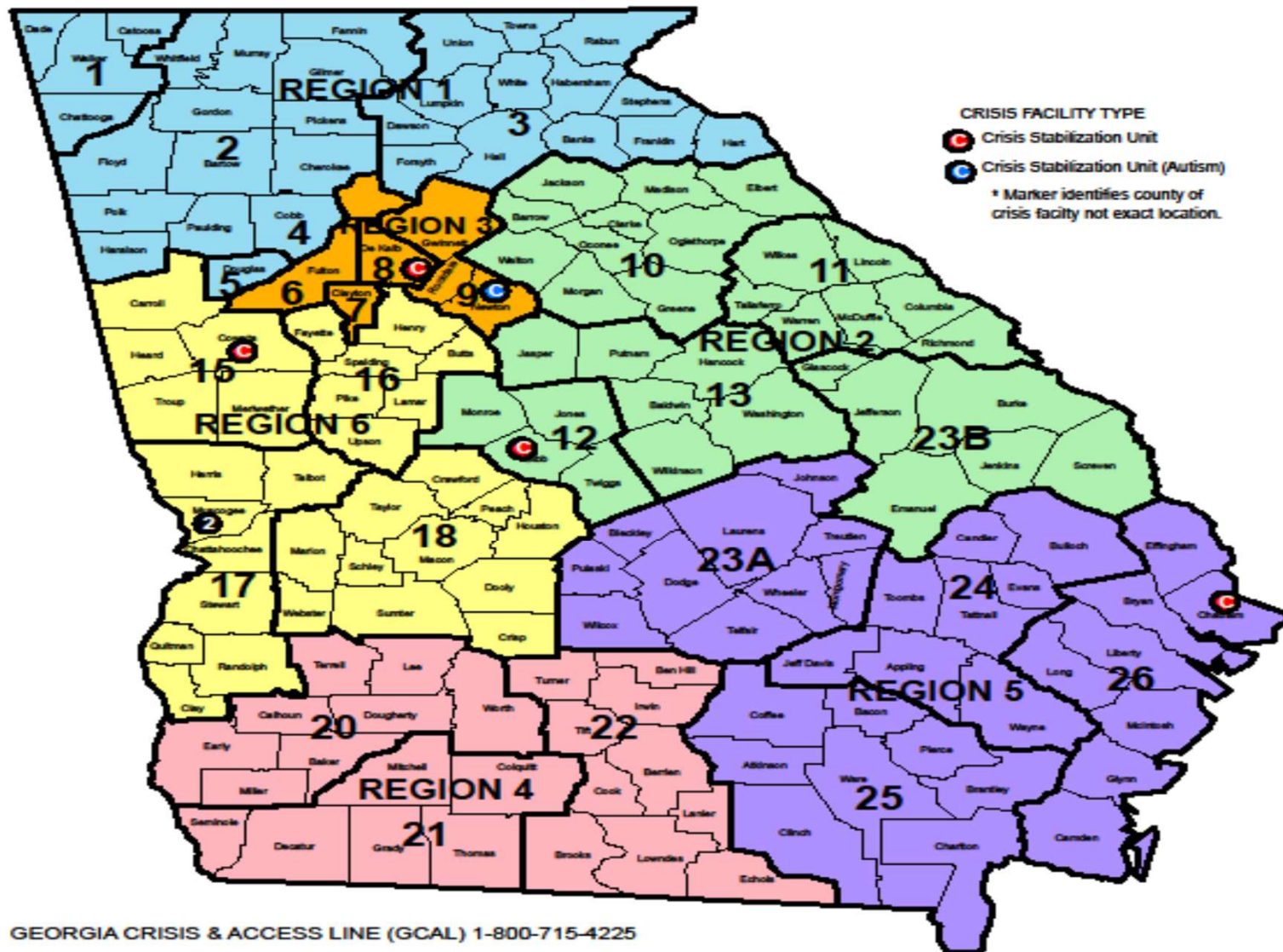
Provider Name (BHCC/CSU Location - City). If a service area has no facility then there is no city listed.



DBHDD

- | | | |
|--|---|---|
| 1 - Lookout Mountain CSB | 9 - View Point Health (Lawrenceville) | 18 - Middle Flint Behavioral Healthcare (Warner Robins) |
| 2 - Highland Rivers CSB (Dalton) | 10 - Advantage Behavioral Health Systems (Athens) | 20 - Aspire BHDD Services (Albany) |
| 2 - Highland Rivers CSB (Rome) | 11 - Serenity Behavioral Health (Augusta) | 21 - Georgia Pines Community Services (Thomasville) |
| 2 - Highland Rivers CSB (Cedartown) | 12 - River Edge Behavioral Health Center (Macon) | 22 - Legacy Behavioral Health (Valdosta) |
| 2 - Highland Rivers CSB (Marietta) | 13 - Oconee Community Service Board | 23A/B - CSB of Middle Georgia (Dublin) |
| 3 - Avita Community Partners (Gainesville) | 15 - Pathways Center (Newman) | 24 - Pineland Area CSB (Statesboro) |
| 5 - Douglas County CSB | 16 - McIntosh Trail CSB (Griffin) | 25 - Unison Behavioral Health (Waycross) |
| 6 - Grady Hospital (Atlanta) | 17 - New Horizons Community Service Board | 26 - Gateway CSB (Savannah) |
| 7 - Clayton County CSB | 18 - St. Francis Hospital - Bradley Center (Columbus) | 26 - Gateway CSB (Brunswick) |
| 8 - DeKalb CSB (Decatur) | | |

Georgia Department of Behavioral Health & Developmental Disabilities C&A Crisis Beds (CSU's) Effective July 1, 2022



GEORGIA CRISIS & ACCESS LINE (GCAL) 1-800-715-4225

Provider Name (CSU Location - City). If a service area has no facility then there is no city listed.



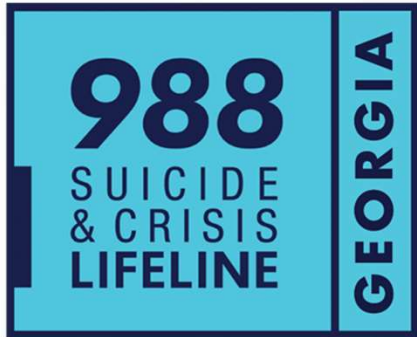
DBHDD

- | | | |
|--|---|--|
| <ul style="list-style-type: none"> 1 - Lookout Mountain Community Service Board 2 - Highland Rivers Community Service Board 3 - Avita Community Partners 5 - Douglas County Community Service Board 6 - Fulton County 7 - Clayton County Community Service Board 8 - DeKalb Community Service Board 9 - ViewPoint Health (Decatur) | <ul style="list-style-type: none"> 9 - View Point Health - Autism CSU (Conyers) 10 - Advantage Behavioral Health Systems 11 - Serenity Behavioral Health 12 - River Edge Behavioral Health Center (Macon) 13 - Oconee Community Service Board 15 - Pathways Center (Greenville) 16 - McIntosh Trail Community Service Board 17 - New Horizons Community Service Board | <ul style="list-style-type: none"> 18 - Middle Flint Behavioral Healthcare 20 - Aspire BHDD Services 21 - Georgia Pines Community Services 22 - Legacy Behavioral Health 23A/B - CSB of Middle Georgia 24 - Pineland Area Community Service Board 25 - Unison Behavioral Health 26 - Gateway Community Service Board |
|--|---|--|



- **More Information**
 - **FAQs**
 - **Webinars and Slides**
 - **Ask Questions**
-

988ga.org
questions@988ga.org



**FAQs, One-Sheets, Logos,
Recorded Webinars,
Assets:
988ga.org**

**Contact Us:
questions@988.org**



For Georgia Residents and
Visitors

[Learn More](#)



For Behavioral Health Providers

[Learn More](#)



For Law Enforcement

[Learn More](#)



For 911 Centers

[Learn More](#)



For Schools and Universities

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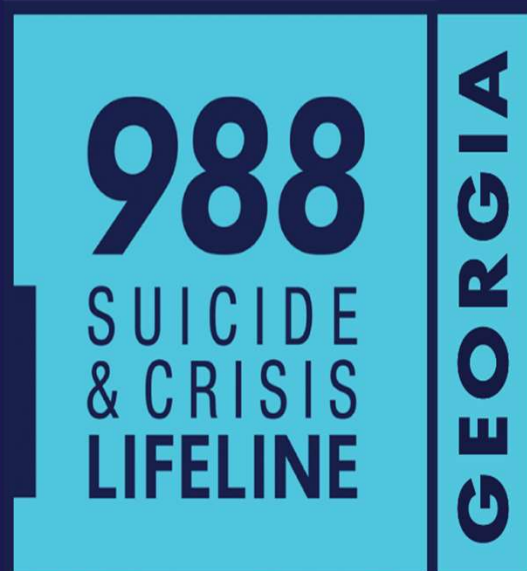
For Medical Providers

[Learn More](#)

Regional Resources – Developmental Disabilities



Region 1	Region 2	Region 3
<p>1230 Bald Ridge Marina Road Suite #800 Cumming, Georgia 30041 Phone: (678) 947-2818 Toll Free: (877) 217-4462 Fax: (678) 947-2817</p>	<p>3405 Mike Padgett Hwy Building #3 Augusta, Georgia 30906 Phone: (706) 792-7733 Toll Free: (877) 551-4897 Fax: (706)792-7740</p>	<p>3073 Panthersville Road Building #10 Decatur, Georgia 30034 Phone: (404) 244-5050 Fax: (404) 244-5056</p>
<p><u>Regional Services Administrator</u></p>	<p><u>Regional Services Administrator</u></p>	<p><u>Regional Services Administrator</u></p>
<p>Elise Beumer Elise.Beumer@dbhdd.ga.gov (770) 781-6928 Office (404) 596-3744 iPhone</p>	<p>Carol Love Carol.Love@dbhdd.ga.gov (706) 792-7695 Office (912) 276-4111 iPhone</p>	<p>Vivia Black Vivia.Black@dbhdd.ga.gov (404) 244-5059 Office (404) 472-8725 iPhone</p>
Region 4	Region 5	Region 6
<p>400 S Pinetree Boulevard Thomasville, Georgia 31792 Phone: (229) 225-5099 Toll Free: (877) 683-8557 Fax: (229) 227-2918</p>	<p>1915 Eisenhower Drive Building #7 Savannah, Georgia 31406 Phone: (912) 303-1649 Fax: 912-303-1681</p>	<p>3000 Schatulga Road Building #4 Columbus, Georgia 31907 Phone: (706) 565-7835 Fax: (706) 565-3565</p>
<p><u>Regional Services Administrator</u></p>	<p><u>Regional Services Administrator</u></p>	<p><u>Regional Services Administrator</u></p>
<p>Tim Hester Timothy.Hester@dbhdd.ga.gov (229) 227-2412 Office (404) 783-4447 iPhone</p>	<p>Ramona Pullin Ramona.Pullin@dbhdd.ga.gov (912) 303-1656 Office (912) 675-1702 iPhone</p>	<p>Valona Baldwin Valona.Baldwin@dbhdd.ga.gov (706) 565-3692 Office (706) 987-9929 iPhone</p>



Dawn Peel, LPC CPCS

*Director, Office of Crisis
Coordination*

404-210-4161

Dawn.peel@dbhdd.ga.gov

Upcoming Provider Meetings



August 15th 9am- 2pm

UGA Tifton Campus Conf Center - 15 R D C Rd, Tifton, GA 31794

August 16th 9am-2pm

Anderson Conference Center - 5171 Eisenhower Pkwy suite D, Macon, GA 31206

August 17th 9am-2pm

Douglasville Conference Center - 6700 Church St, Douglasville, GA 30134

Registration forthcoming

Please note there is no virtual option for the provider meetings. Provider attendance is mandatory per our Letter of Agreement



BE D·B·H·D·D

Georgia Department of Behavioral Health & Developmental Disabilities



D·B·H·D·D

Q & A

BE HERE

