



## *2024 Legislative Session Agenda*

### **1. Behavioral Rate Study**

The Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) and the Department of Community Health (DCH) engaged Deloitte to conduct a rate study of community-based rehabilitation services beginning in 2022. The study aims to address the following items:

1. Address requirements set forth in Georgia Legislative Act No. 865, House Bill 911 to conduct a behavioral health rate study.
2. Meet CMS expectations related to rate study and methodology as defined in the Georgia Department of Community Health American Rescue Plan Act (ARPA) Initial Spending Plan Conditional Approval Memorandum, General Conditions.
3. Meet the obligation to the federal Medicaid authority for periodic service cost analysis for rate setting.

[The Georgia Community Behavioral Health Rehabilitation Services \(CBHRS\) Rate Methodology Report](#) was published with target rate comparisons on June 30, 2023.

***GACSB Position:*** Support - GACSB will monitor the rate study as it continues to move through the budget process and State Plan Amendment process with CMS. Additionally, work to prioritize funding allocations that allow for the increase in Medicaid rates, thus increasing the average wage of behavioral care professionals and staff.

### **2. IDD Waiver Rate Study**

The Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) engaged Burns & Associates, a division of Health Management Associates (HMA-Burns) to conduct a rate analysis for services provided through the New Options and Comprehensive Supports Waivers.

[Final Rate Models](#) were published on April 21, 2023.

***GACSB Position:*** Support - GACSB will work with DBHDD to advocate for support of the proposed rate increases and monitor the rate study results as it continues to move through the budget process and waiver amendment process with CMS. This includes support of an increase in the average hourly wage for Direct Support Professionals (DSPs).

### **3. Open Meetings Act regarding individual CSB Board Meetings**

As it stands currently, the National Public Health Emergency is no longer in force, effective May 11, 2023, allowing for the continuation of virtual meetings. Moreover, considering the issues concerning vaccine hesitancy and opposition, and the emergence of COVID-19 variants, this may serve as justification for continuing virtual and/or hybrid meetings. Furthermore, all but three CSBs serve multiple counties within their service area with a 16-county coverage area being the largest. The square mile radius is thus, expansive, for the majority of CSBs, which can be a travel barrier for board members.

**GACSB Position:** Support-GACSB will pursue legislative regulatory change.

#### **4. Certified Community Behavioral Health Clinics**

A Certified Community Behavioral Health Clinic model is designed to ensure access to coordinated comprehensive behavioral health care. CCBHCs are required to serve anyone who requests care for mental health or substance use, regardless of their ability to pay, place of residence, or age - including developmentally appropriate care for children and youth. CCBHCs must meet standards for the range of services they provide, and they are required to get people into care quickly. An important feature of the CCBHC model is that it requires crisis services that are available 24 hours a day, 7 days a week. CCBHCs are required to provide a comprehensive array of behavioral health services so that people who need care do not have to piece together the behavioral health support they need across multiple providers. In addition, CCBHCs must provide care coordination to help people navigate behavioral health care, physical health care, social services, and the other systems they are involved in.

**GACSB Position: Support-**GACSB will continue to partner with DBHDD, supporting the state's SAMHSA CCBHC Planning Grant and the 12 CSBs with CCBHC implementation grants. GACSB further supports the State Plan Amendment presented to the Georgia Department of Community Health Board of Directors on September 14, 2023. CCBHC's are proving to be the long-term lifeblood of maintaining the public safety net in the state.

#### **5. Medicaid Managed Care Re-Procurement**

As the Department of Community Health (DCH) considers the implementation of a competitive managed care procurement and transitioning Aged, Blind, and Disabled (ABD) population to managed care, GACSB and its members have developed recommendations based on the collective experience with the current managed care system in place since 2006. These recommendations were submitted in response to DCH's eRFI and have been shared with legislators and stakeholders across Georgia.

**GACSB Position:** Continue to advocate according to recommendations provided to DCH, legislators and other stakeholders found in the [GACSB Medicaid Redesign White Paper](#) and monitor DCH's RFP process,

#### **6. Workforce**

The workforce crisis has proven to be an issue in staffing, availability, recruitment, and retention, thus significantly impacting access to outpatient, community behavioral health crisis stabilization and inpatient care. Salaries across the network are well below the national average and low reimbursement rates are driving care away from Georgia's most in need population for behavioral health and intellectual/developmental disability services.

**GACSB Position:** GACSB will monitor developing results from BHRIC's Workforce Subcommittee.