

PUBLIC NOTICE

Pursuant to 42 C.F.R. § 447.205, the Georgia Department of Community Health is required to give public notice of any significant proposed change in its methods and standards for setting payment rates for services.

Georgia Hospice Program Payment Reform

The Georgia Hospice Program, an optional Medicaid State Plan service, provides palliative care to members who are certified to be terminally ill. The Centers for Medicare and Medicaid Services (CMS) has published the Final Rule and Policies for Medicare payment reform, and released new guidance related to hospice services that direct changes effective January 01, 2016. State Medicaid follows the Federal Medicare methodology, therefore the department must make conforming changes to provider payments. The policy changes include revisions for 1) coverage for Routine Home Care (RHC) Rates, and 2) a Service Intensity Add-On (SIA) Rate.

- 1) The FY2016 Medicare Hospice Final Rule replaces the single RHC per diem rate with two different RHC payment rates:
 - a. A higher payment rate for the first 60 episode days of hospice care. The episode day of hospice care includes all levels of care (i.e. Routine Home Care, Continuous Home Care, General Inpatient Care, and Inpatient Respite Care). The higher rate will begin as of January 1, 2016.
 - i. CMS calculates a patient's episode day count based on the total number of days the patient has been receiving hospice care separated by no more than a 60 day gap in hospice care, regardless of the level of care or whether those days were billable or not. The Medicare FY2016 hospice rates began October 01, 2015, and the calculation of episode days includes FY2016 hospice days that occurred prior to January 1, 2016.
 - ii. A 60 day gap in the hospice service days is required to reset the counter that determines if a patient is qualified for the first 1-60 episode day payment category.
 - b. A reduced payment rate for the 61 days and over of hospice service days.
- 2) The SIA payment will equal the Continuous Home Care (CHC) hourly payment rate, for a minimum of 15 minutes and up to 4 hours total per day. This payment change is budget neutral and paid for through a reduction in the RHC rate. Yearly fluctuations in the total size of the SIA add-on will impact the yearly RHC rates. The SIA payment is in addition to the per diem RHC rate when all of the following criteria are met:
 - a. The day is an RHC level of care day.
 - b. The day occurs during the last 7 days of the patient's life, and the patient is discharged expired.
 - c. Direct patient care is furnished by a Registered Nurse (RN) or Social Worker on that day.

- i. New G-codes will be used to identify RN versus LPN visits

Cost Impact: FY16: Total Funds: \$2,967,468

FY17: Total Funds: \$5,934,936

This public notice is available for review at each county Department of Family and Children Services office. An opportunity for public comment will be held on **December 14, 2015** at 10:30 a.m., at the Department of Community Health (2 Peachtree Street, N.W., Atlanta, Georgia 30303) in the 5th Floor Board Room. Individuals who are disabled and need assistance to participate during this meeting should call (404) 656-4479. Citizens wishing to comment in writing on any of the proposed changes should do so on or before **December 21, 2015** to the Board of Community Health, Post Office Box 38406, Atlanta, Georgia 30334.

Comments submitted will be available for review by the public at the Department of Community Health, Monday – Friday, 9:00 a.m. to 4:30 p.m., 6th Floor, 2 Peachtree Street, N.W., Atlanta, Georgia 30303. Comments from written and public testimony will be provided to the Board of Community Health prior to the **January 14, 2016** Board meeting. The Board will vote on the proposed changes at the Board meeting to be held at 10:30 a.m. at the Department of Community Health (2 Peachtree Street, N.W., Atlanta, Georgia 30303) in the 5th Floor Board Room.

NOTICE IS HEREBY GIVEN THIS 10th DAY OF DECEMBER, 2015

Clyde L. Reese, III, Esquire, Commissioner