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.

STRENGTHENING THE REINVESTMENT OF A NECESSARY-WORKFORCE IN GEORGIA (STRONG) REVISED ELIGIBILITY

Pending Centers for Medicare and Medicaid Services (CMS) approval, the Department of Community Health (DCH) proposes a revision to the eligibility criteria for the Strengthening The Reinvestment Of a Necessary-workforce in Georgia (STRONG) state directed payment program, effective July 1, 2024. Eligible hospitals are currently defined as teaching hospitals with at least five resident full-time equivalents (FTEs) based on schedule E part A, lines 10, 11, and 16 in the Medicare cost reports, excluding teaching hospitals participating in Georgia Advancing Innovation to Deliver Equity (Tier 1). This change will create a two-tier structure, adding rural teaching hospitals with between 0.1 - 4.9 FTEs as reported on schedule E part A, lines 10, 11, and 16 in the Medicare cost reports (Tier 2).

A hospital will be considered a rural hospital if the hospital's county is not in a Metropolitan Statistical Area, as defined by the United States Office of Management and Budget, or is a county having a population of less than 50,000 according to the United States decennial census; provided, however, that for counties which contain a military base or installation, the military personnel and their dependents living in such county shall be excluded from the total population of that county.

The STRONG payments for the Tier 2 STRONG hospitals represent a 75% increase to hospital Medicaid managed care base payments, which is less than the difference between 100% of commercial reimbursement and Medicaid managed care base payments. Given the facilities participating in this program also participate in the GA Hospital Directed payment program (HDPP), the final increase under this preprint will be 24.45% for Inpatient claims and 55.82% for Outpatient claims, since the HDPP pays 50.55% for Inpatient claims and 19.18% increases for Outpatient claims. There is no change to the 200% increase to hospital Medicaid managed care base payments for Tier 1 STRONG hospitals.

Tier 2 Fiscal Impact

	State Funds	Federal Funds	Total Funds
SFY2025	\$4,529,523*	\$8,808,295	\$13,337,818

* Funded via intergovernmental transfer (IGT) and provider payments

This public notice is available for review at each county Division of Family and Children Services office. An opportunity for public comment will be held on **May 15, 2024 at 2:30 p.m., via Zoom audio**. There will be **no in-person** attendance at the Department of Community Health (DCH).

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

Join Zoom Meeting https://us02web.zoom.us/j/83494640625?pwd=a2FHNDE1aERsVjBVd2FMZ2JIa1BKZz09

Meeting ID: 834 9464 0625 Passcode: 751247

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Meeting ID: 834 9464 0625 Passcode: 751247

Individuals wishing to comment in writing on any of the proposed changes should do so on or before **May 22, 2024**, to the Board of Community Health, Post Office Box 1966, Atlanta, Georgia 30301-1966. You may also email comments to Danisha Williams, <u>danwilliams@dch.ga.gov</u> or fax to 404-651-6880.

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

If the proposed changes are presented to the Board for final action, relevant comments from written and public testimony will be provided to the Board. The Board expects to vote on the proposed changes at the Board meeting to be held on **June 13**, **2024** at 10:30 a.m. at the Department of Community Health unless withdrawn or withheld by the Department for further review.

NOTICE IS HEREBY GIVEN THIS 9th DAY OF MAY 2024 Russel Carlson, Commissioner