



**Jeff Stone, MD, MBA, MHA, FAAFP
President 2019-2020**

November 27, 2019

The Honorable Brian Kemp
Governor – State of Georgia
203 Capitol Place SW
Atlanta, GA 30334

Dear Governor Kemp:

Re: Public Comment – Proposed 1115 Waiver

Background: Georgia Pathways – 1115 Proposal

Medicaid covers approximately 1.77 million in Georgia, which has not thus far expanded Medicaid to individuals with incomes up to 138 percent of the federal poverty level (FPL) under the Affordable Care Act (ACA). The State's proposed section 1115 waiver expands Medicaid to individuals with incomes up to 100 percent FPL (\$12,500/year) – with a 90 percent enhanced federal matching assistance percentage (FMAP) funded by the federal government. Individuals with incomes under 100 percent FPL who are not currently eligible for Medicaid would be subject to community engagement (work) requirements of 80 hours/month in order to receive coverage under this Medicaid expansion. Activities satisfying the community engagement requirements include the following:

- Full- or part-time employment
- On-the-job training/job readiness training
- Vo-tech education
- Higher education, including college/university

Individuals found not in compliance are suspended from Medicaid coverage and may re-join pending satisfaction of requirements for three months. Should an individual still not be in compliance after three months, they would be disenrolled. Individuals experiencing certain circumstances, including a birth/death of family member, serious hospitalization, temporary homelessness, or other events, would be allowed short-term exclusions from the community engagement requirements. Notably, individuals with disabilities, serious illness, or caregiver responsibilities would not be exempt from this requirement. Furthermore, individuals would have to report their employment status monthly; if in compliance for six consecutive months, they would become exempt from the reporting requirement and report only changes.

The proposed waiver would waive three months retroactive (prior quarter) coverage in the state. It would also introduce limited cost-sharing into individuals eligible for Georgia

Pathways with incomes greater than 50 percent FPL, including premiums not to exceed two percent of household income, which could be used to pay for co-payments. Combined, co-pays would not exceed three percent of a household's income.

It is expected that the waiver would expand coverage to 52,000 individuals

Comments:

On behalf of the 3,200 members of the Georgia Academy of Family Physicians and the 1,500,000 qualified uninsured patients we care for, we appreciate the opportunity to comment on your Medicaid innovation and expansion waiver plan.

The Georgia Academy of Family Physicians is the only medical society devoted solely to primary care. Nearly one in four of all office visits are made to general and family physicians. Today, family physicians provide the majority of care for America's underserved and rural populations. We believe that we are uniquely qualified to comment on this proposal.

We are supportive and encouraged by this first step to cover many poor Georgians who struggle with many social determinants of health as well as an ability to access and maintain health care coverage. We thank you for proposing to cover potentially an additional 52,000 Georgians and look forward to additional conversations to seek innovative Georgia-based solutions seeking avenues to cover additional Georgians in the future.

This current plan would seek to add these additional Georgians to the current Medicaid roles. For the coverage to increase access and improve health, these citizens must be able to find a medical home to care for them. We have a long-standing policy of encouraging all patients to seek an established relationship with a primary care physician.

For additional members of the Georgia Academy, and other primary care physicians to add additional patients to their patient panel – the payment must include the enhanced primary care codes that currently pay primary care physicians and obstetrical and gynecologists the codes up to 2018 Medicare rates. Currently these codes are paid at 2014 Medicare rates and we are asking policy leaders to consider raising that amount to 2018 Medicare rates. We believe strongly that keeping pace with Medicare payment allows many of us to care for additional patients that we typically care for at a loss.

Any proposed changes to Georgia's Medicaid program need to not create barriers to coverage and care by requiring enrollees to pay significantly higher premiums, deductibles, co-payments and other out-of-pocket costs for Medicaid enrollees compared to current federal and state requirements and/or by establishing time limits on eligibility. Studies show higher premiums and relatively small increases in cost-sharing creates barriers to coverage and access to care, especially for those with the lowest incomes:

Even relatively small levels of cost sharing in the range of \$1 to \$5 are associated with reduced use of care, including necessary services. Research also finds that cost sharing can result in unintended consequences, such as increased use of the emergency room, and that cost sharing negatively affects access to care and health outcomes. For example, studies

find that increases in cost sharing are associated with increased rates of uncontrolled hypertension and hypercholesterolemia and reduced treatment for children with asthma.

The Georgia Pathways Waiver should not reduce coverage of essential benefits, maternity care, substance use disorder treatment, mental health services, immunizations, and for children, services covered under the federal Early Periodic Screening, Diagnosis and Treatment 3 (EPSDT) program, which mandates basic preventive and therapeutic health services that are deemed medically appropriate and necessary for children.

Thank you for your review of our comments. We look forward to working with you to support our patients who have little to no current options for affordable health coverage.

Sincerely,

A handwritten signature in blue ink, appearing to read "Jeff Stone", with a stylized flourish at the end.

Jeff Stone, MD, MBA, MHA, FAAFP
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