

From: Jana Leigh Thomas, State of Georgia
To: Jenny Babcock, CMS; Johanna Barraza-Cannon, CMS
Date: 8/22/03 4:42PM
Subject: SPA #7 (formerly my #6)

I am attaching the revised pages as an addition to Georgia's SPA #7. This addition includes the full schedule of SPAs and effective dates (Section 1.4) and the specific activities we did related to public notice for this SPA (section 9.9.2)

<<See below.>>

In response to the questions in the series of emails yesterday,

* Section 4.4 of the original submission of this SPA reflects an update in Medicaid's administrative processes for adding Medicaid-eligible children identified through the SCHIP screening process. The update is not a change in the policies or procedures PeachCare for Kids implements to identify or refer children who are potentially eligible for Medicaid. This section was included in the amendment as an update to a stated process.

* Number of member impacted by this SPA is estimated to be 142,000.

* The increase in premium is estimated to generate an additional \$3,749,900.

* Only children ages 6 and older pay a premium. This amendment does not impact children ages 0-5, for whom no cost-sharing is required.

* All children ages 6 and older pay a premium, the rate of the premium payment is contingent on income.

* Why Georgia is increasing premiums? PeachCare for Kids has not increased premiums from our initial rates set in 1998. With projections of Georgia expending all allocated federal funds in FFY 05 and state budget issues, an increase in premiums was passed by the General Assembly in an attempt to manage limited resources and delay the need to employ more drastic cost savings initiatives, like restricting eligibility or instituting enrollment caps.

Please let me know if you have any questions about the information provided.

jana leigh thomas
peachcare for kids

1.877.427.3224
peachcare.org

Section 1. General Description and Purpose of the State Child Health Plans and State Child Health Plan Requirements (Section 2101)

1.1 The state will use funds provided under Title XXI primarily for (Check appropriate box) (42 CFR 457.70):

1.1.1 Obtaining coverage that meets the requirements for a separate child health program (Section 2103); OR

1.1.2. Providing expanded benefits under the State's Medicaid plan (Title XIX); OR

1.1.3. A combination of both of the above.

1.2 Please provide an assurance that expenditures for child health assistance will not be claimed prior to the time that the State has legislative authority to operate the State plan or plan amendment as approved by CMS. (42 CFR 457.40(d))

1.3 Please provide an assurance that the state complies with all applicable civil rights requirements, including title VI of the Civil Rights Act of 1964, title II of the Americans with Disabilities Act of 1990, section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, 45 CFR part 80, part 84, and part 91, and 28 CFR part 35. (42CFR 457.130)

1.4 Please provide the effective (date costs begin to be incurred) and implementation (date services begin to be provided) dates for this plan or plan amendment (42 CFR 457.65):

Effective date: September 1, 1998

Implementation date: November 1, 1998

State Plan Amendment #1 (Reinstatement policy)

Submitted: January 6, 2000

Approved: April 20, 2000

Effective: October 1, 1999

State Plan Amendment #2: (Clarification of Renewal Process)

Submitted: January 31, 2001

Approved: June 1, 2001

Effective: July 1, 2001

State Plan Amendment #3: (Increase eligibility to 235% FPL)

Submitted: February 6, 2001

Approved: June 1, 2001

Effective: July 1, 2000

Amendment 4: (Change in enrollment process to cover the month of application)

Submitted: June 15, 2001

Approved: August 31, 2001

Effective: April 1, 2001

Amendment 5: (Exempt families spending in excess of 5% of income on private coverage from the crowd-out waiting period)

Submitted: September 28, 2001

Approved: February 11, 2002

Effective: October 1, 2001

Amendment 6: (Compliance Amendment)

Submitted: July 30, 2002

Approved: January 17, 2003

Effective: August 1, 2002

Amendment 7: (Cost-sharing increase)

Submitted: July 3, 2003

Approved: Pending

Effective: July 1, 2003

9.9.1 Describe the process used by the state to ensure interaction with Indian Tribes and organizations in the state on the development and implementation of the procedures required in 42 CFR 457.125. (Section 2107(c)) (42CFR 457.120(c))

There are no nationally recognized American Indian tribes or organizations in the state of Georgia. PeachCare for Kids, however, does not charge cost-sharing to enrolled members who are members of federally-recognized American Indian or Alaskan Native tribes.

9.9.2 For an amendment relating to eligibility or benefits (including cost sharing and enrollment procedures), please describe how and when prior public notice was provided as required in 457.65(b) through (d).

In general, the eligibility and benefits for PeachCare for Kids are established in legislation. Any changes would go through the legislative process.

For the increase in premiums to \$10 per member per month with household maximums of \$15 for families at or below 150% of the federal poverty level and \$20 for families 151% of the federal poverty level and above, the premiums were determined by the General Assembly during the 2003 legislative session. Additionally, as the premium increase took effect on July 1, 2003 for coverage in September, PeachCare for Kids notified each impacted family in June by mail of the change. Families who had not paid the full premium amount which was due on July 1, 2003 were also sent up to two notices that the premium payment had not been received, including information that the premium payments had increased and notification of their premium rate.