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November 25, 2019

Lavinia Luca
c/o Board of Community Health
P.O. Box 1966
Atlanta, GA 30301-1966

RE: Public Comment on Georgia Section 1115 Demonstration Waiver Application.

Dear Ms. Luca:

Thank you for the opportunity to comment on Georgia's Proposed Section 1115 Waiver. Georgia Legal Services Program is a non-profit law firm that represents low income Georgians in 154 of Georgia's 159 counties. We often represent clients in health related matters including Medicaid terminations and denials. Through our representation of clients, we become aware of glitches/problems in Gateway and backlogs in processing applications, reviews, and changes. These comments are based on the real life knowledge we have gained through representation of low income Georgians in health related cases.

Georgia is to be congratulated on taking this first step to provide some low income Georgians with access to health insurance. While we agree with many other organizations that Georgia does not go far enough by not fully expanding Medicaid as permitted under the Affordable Care Act, these comments will focus on those who may receive coverage, those who have been left out or overlooked and the substantial difficulty the State will have in managing the waiver.

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The Georgia Legal Services Program is a nonprofit corporation whose mission is to provide civil legal services for persons with low incomes, creating equal access to justice and opportunities out of poverty.

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The waiver proposes to cover adults age 19 to 64 with income between 35% and 100% of the federal poverty level. Those adults must participate in 80 hours of qualifying activities per month and report his/her compliance on a monthly basis for, at least, the first 6 months. The qualifying activities include community service, employment, job training, and higher education.

Parents with minor children must be provided quality childcare to be able to meet the required 80 hours of qualifying activities.

There is no mention of providing child care assistance to allow adults with minor children to fulfill the 80 hours of qualifying activities. Without childcare assistance, many low-income parents cannot afford to work. Someone working 80 hours per month at minimum wage would earn approximately \$580¹ before taxes are withheld. The average cost of childcare in Georgia is \$637 per month. <https://gears.org/news/cost-child-care-georgia/>. The average child care assistance, in Georgia, for a child under age one is \$498.33 per month. Appendix C CAPS Reimbursement Rates. Even if childcare assistance is available, the parent would still have to pay \$139 per month for childcare. If the parent was receiving job training, doing community service, or going to school s/he would not be able to pay for childcare.

There is no mention of two parent families where one parent works and the other stays home and takes care of the child(ren). Will the working parent's hours apply to both parents, allowing both to be eligible for Medicaid? Or will the State penalize a stay at home parent by denying him or her Medicaid coverage?

Georgia needs to consider how this waiver will impact families and minor children. If the waiver does not provide an exemption for parents with minor children, then it must address how those children will be cared for while the parent fulfills the required 80 hours of qualifying activity.

Adults with income between 0 and 35% of the Federal Poverty Level should be included in the waiver.

The waiver contemplates that only adults with income between 35% and 100% of the federal poverty level will be eligible for Medicaid. The waiver seems to believe that those with incomes below 35% of the federal poverty level are already eligible, but that is not true. Currently, adults without minor children are not eligible for Medicaid even if their income is below 35% of the federal poverty level.

Will adults without minor children who have income below 35% of the federal poverty level be eligible for Medicaid under this waiver?

¹ The income limit for Parent/Caretaker Medicaid in Georgia for a household of 2 is \$528, so this parent/caretaker would not be eligible for that class of assistance.

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Adults with unearned income below 100% of the Federal Poverty Level should be included in the waiver.

There is no mention of Georgians with unearned income in the waiver. There are two distinct groups of Georgians who could benefit from this waiver, if unearned income takes the place of the required 80 hours of qualifying activity. The first group is Georgians who have been approved for Social Security Disability Benefits, but are not eligible for Medicare for 24 months. These clients have often gone through a long, arduous process to receive disability benefits and clearly need medical care. Unfortunately, in Georgia, they must find a way to survive for two years before they can receive vital medical care. We had a client last year who was receiving SSI and Medicaid while his disability application was processed. This only happens for those who have a serious medical diagnosis and it is clear the person is disabled, but it still takes Social Security months to process. Once this client was approved for disability, he lost Medicaid. He could not qualify for a health insurance plan on the marketplace, because his income was too low. He had advanced liver disease and his prescriptions were over \$2000 a month. His elderly parents were going into debt trying to provide the medical care needed to keep their son alive during the Medicare waiting period.

The second is seniors who have been determined to be disabled by the Social Security Administration, but lost insured status and were approved for Supplemental Security Income (SSI) and Medicaid. When these disabled Georgians turn 62 years old, they are **required** to sign up for early retirement benefits. For many this results in increasing their monthly income by approximately \$50.00 per month making them over the SSI income limit. These Georgians lose Medicaid and will not be eligible for Medicare for three (3) years. They often have chronic health conditions such as diabetes, high blood pressure, pulmonary disease, and heart disease. Many will not survive three (3) years without access to regular health care.

We recently had a client in this situation – he turned 62, switched to early retirement benefits and lost his Medicaid. At the time, he was undergoing testing for cancer and his diagnosis was confirmed after he lost Medicaid. He died within 6 months. Would he have survived if his treatment had not been interrupted?

This waiver should include these vulnerable Georgians without requiring 80 hours of qualifying activity.

The waiver must create new, user-friendly ways for Georgians to report their 80 hours of qualifying activities.

Currently, Medicaid recipients have three ways to report information to DFCS and all of them have flaws that will make it difficult for new Medicaid recipients to report qualifying activities.

1. At local DFCS offices – there is often a long wait, which may be a barrier for those working or going to school. If you simply drop off information, there is no guarantee it

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will be processed timely. It has been our experience that documents our clients turn in at DFCS' offices are often lost/misplaced and only found once an appeal is filed.

2. By telephone – again there is often long wait times and during particularly busy times the automated system will tell the caller to call back and hang up. Furthermore, a verbal report is insufficient to meet the requirements of the waiver.
3. On-line through Gateway – this option is only available to those recipients who have access to a computer with internet service. Many low income Georgians do not have computers or internet access at home. Gateway was not developed to be compatible with smart phones, further limiting recipients ability to report qualifying hours. Many recipients have smart phones or have access to a smart phone; developing the ability to report qualifying hours via a smart phone would increase recipient's access.

The only option that is available outside of regular business hours is Gateway. Many eligible recipients will be working, going to school, or volunteering during those same hours. Access must be expanded to meet the needs of this group.

Georgia should offer the same exemptions from the 80 hours of qualifying activities as are available in the Supplemental Nutrition Assistance Program (SNAP).

Georgia already has an 80 hour per month work requirement in SNAP. It makes sense for the 80 hours of qualifying activities proposed in the Medicaid Waiver to substantially mirror SNAP rules since many low-income Georgians who will be eligible for Medicaid under this waiver also receive SNAP benefits.

Georgia recognizes and federal law requires the following exemptions from the work requirements for SNAP:²

1. Georgians over 50 years of age³;
2. Georgians who are physically or mentally unfit to work;
3. Georgians who are a parent or caretaker of a minor child under the age of 6 or an incapacitated person;
4. Georgians receiving unemployment insurance benefits;
5. Georgians who are regular participants of a drug or alcohol treatment or rehabilitation program; and
6. Georgians enrolled at least half time in any recognized school, training program, or institution of higher education.

The only exemption the current waiver addresses is the last one by providing that **full-time** enrollment in certain training and higher education meets the required 80 hours of qualifying

² ODIS § 3355 (2019); 7 C.F.R. § 273.7(b)(2019)

³ Federal law exempts those over age 60, but Georgia has chosen to exempt those over age 50.

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activity. In addition to requiring full-time enrollment, this waiver also limits the length of time one may attend vocational education.

Making the exemptions the same for both programs will simplify the process for both recipients and State caseworkers who must process the verifications.

The Division of Family and Children Services (DFCS) lacks the capacity to process the required monthly reporting.

Georgia recently announced that all State budgets must be reduced by 4% this year and 6% next year. <https://www.aic.com/news/state--regional-govt--politics/georgia-agencies-plans-reduce-budgets-heavy-job-pay-cuts/vmhurObe0IqUjdzDGCokrO/>. DFCS already has great difficulty in processing annual reviews for current Medicaid recipients. We often have clients whose review is not processed timely, resulting in the termination of Medicaid benefits. We personally know of a review that was submitted in May 2019 and a change submitted in June 2019 on Gateway – neither have been processed.

The inability to timely process applications has led to the Gateway system only being open for applications Monday through Friday from 8 a.m. to 4 p.m. This lack of access to Gateway limits working Georgians ability to apply for Medicaid. Gateway should be available 24/7 to allow a possible recipient to apply whenever s/he can get to a computer with internet access and sufficient time to complete an application.⁴

Given DFCS' inability to process applications and reviews for those currently eligible and the proposed budget cuts, it is not possible for DFCS to process monthly reporting by new recipients. DFCS already needs to hire and sufficiently train additional staff; the Medicaid program is a complicated program and it takes significant training for staff to correctly make decisions on eligibility. The Gateway system continues to have many glitches that result in benefits being terminated or denied incorrectly.

For this waiver to work, the State must be willing and able to invest significant resources in hiring and training staff.

We submit these comments based upon our experience in representing low-income clients outside of the metro Atlanta area with the hope that this waiver can help the most needy Georgians.

We appreciate your consideration of our comments and would be happy to provide any further information that may be useful to you as you finalize the waiver.

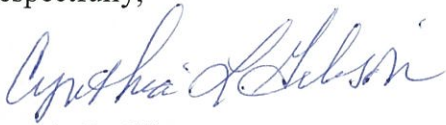
⁴ Completing a new Medicaid application on Gateway takes approximately 45 minutes.

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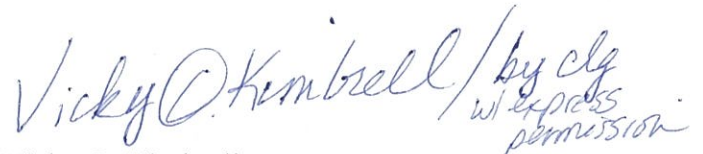
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Respectfully,



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