



DOAA

Georgia Department
of Audits & Accounts

Greg S. Griffin
State Auditor

January 10, 2025

Honorable Imani Barnes
State Representative
507-B Coverdell Legislative Office Building
Atlanta, Georgia 30334

SUBJECT: Fiscal Note
House Bill (LC 52 0600)

Dear Representative Barnes:

This bill would require the Department of Public Health (DPH) to operate a three-year pilot program of a mobile health clinic providing postpartum care in counties with limited or no maternity care. The care provided would include physiological assessments, mental health evaluations, nutritional evaluations, and guidance on personal and newborn care. DPH would be required to submit a written report on the implementation and effectiveness of the pilot program.

As shown in **Table 1**, DPH presented information for two scenarios for a pilot program—one covering all 106 counties that meet the definition of a maternity desert and another that targets three public health districts with the greatest number of counties (35) without birthing facilities. In the second scenario, the mobile health clinic requirement would be met by having nurses travel to existing county health departments on a regular basis. This would leverage new nurse positions but use existing clinic resources.

As shown in the table, the annual costs would be approximately \$5.8 million for scenario one and \$1.7 million for scenario two; however, DCH officials stated that federal Medicaid funds would cover a portion of the costs for services delivered to Medicaid recipients. For each scenario, the table includes the costs to the state if all program clients have Medicaid coverage and if one-half of clients have Medicaid coverage.

Table 1: Total and State Costs under Two Scenarios

Category	Scenario 1: 106 Counties			Scenario 2: 35 Counties		
	Annual Cost	State Share – 50% Medicaid	State Share – 100% Medicaid	Annual Cost	State Share – 50% Medicaid	State Share – 100% Medicaid
Personnel	\$5,260,255	\$3,524,305	\$1,788,355	\$1,569,121	\$1,051,291	\$533,462
Travel	\$350,000	\$234,496	\$118,991	\$100,000	\$66,999	\$33,998
Program Evaluation	\$30,000	\$20,100	\$10,199	\$30,000	\$20,100	\$10,199
Information Technology	<u>\$131,734</u>	<u>\$88,260</u>	<u>\$44,786</u>	<u>\$38,107</u>	<u>\$25,531</u>	<u>\$12,955</u>
Total	\$5,771,989	\$3,867,160	\$1,962,332	\$1,737,228	\$1,163,921	\$590,614

Note: Numbers may not total due to rounding

1. The state FY blended FMAP of 66.0025% is used to calculate the federal and state share.

The costs associated with the two scenarios include the following:

- *Personnel* – For scenario one, DPH would require one program manager, 35 public health registered nurse (RN) 3 positions, and 13 case manager/navigator positions. For scenario two, the program manager would be required, but there would be only 10 RNs and three case manager/navigators.
- *Travel* – Costs include \$10,000 per RN position.
- *Program evaluation and reporting* – DPH will contract with an academic institution for the required evaluation and report.
- *Information technology* – Costs associated with Georgia Enterprise Technology Services for email and related expenses, leased tablets, and mobile phones.

Respectfully,



Greg S. Griffin
State Auditor



Richard Dunn, Director
Office of Planning and Budget

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