Our vision is to serve Kansans in need with a transformed, fiscally sustainable Medicaid program that provides high-quality, holistic care and promotes personal responsibility.

**Medicaid managed care and LTSS for the ID/DD Community**

**December 18th, 2013**

*The Kansas Perspective*

Presented by:

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Kansas Consumer Ombudsman

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**KanCare Introduction**

- 380k, $3 billion in costs
- 6 HCBS waivers - 20k in HCBS, 10k in NFs, 400-500 in ICFs
- 5 of 6 waivers started in January 2013 in 3 MCOs
- Currently 8k on I/DD waiver with extensive waiting list
- I/DD waiver proposed to be included January 1st, 2014
I/DD Changes

- KanCare is Managed Care Light for I/DD; not massive sea change it has been made out to be
  - CDDOs continue role in eligibility and funding determination
  - TCMs do not change
  - Protections built in by contract and proviso re: providers, services, TCMs
- Benefits
  - More flexibility
  - Tandem team of TCM and MCO CCs
  - Set benchmarks through P4Ps of employment, BH/LTSS, PH/LTSS, Care Coordination; up to us all to get there
- Preferred I/DD vision
  - Continuum that includes employment, state funded family support services, support waivers, HCBS waiver, ICF/ I/DDs

Concerns at a Glance

Current Consumer concerns in KanCare:

- Eligibility (remains the top inquiry)
- Prior Authorizations and Denials
- Grievance/Appeals and State Fair Hearing
- Pharmacy and Durable Medical Equipment Issues
- Reductions in Plans of Care
- Status of Provider Networks
Case Data

- Each concern is unique and the Ombudsman has the resources to listen. Calls have ranged from 30 seconds to 2+ hours.
- Most interactions involve a critical incident and Members are directed to the Ombudsman by Stakeholder groups, CDDOs, CSPs and State or MCO staff.
- Resolutions involve collaboration and communication, often the Ombudsman directs a summary of the concern to multiple stakeholders and encourages consumer involvement in the resolution.
- Ombudsman is an additional resource. Consumers still may access advocacy organizations or formal protections provided by the MCO or State. Ombudsman can assist consumers in clarifying options or effective tools to resolve concerns.

Case Data and Resolutions

- 1,600+ Calls documented by category in Ombudsman Telephone Log (Voice messages only-average time to return calls-4 hrs.) Backup response by Assistant being developed.
- 8,000+ Incoming E-mails, 5,000+ Outgoing E-mails.
- Written documentation of response and resolution-data will be transferred to Ombudsman Log for analysis.
- Random survey of customer satisfaction (300+ sample) being conducted. Design and analysis performed by W.S.U. Center for Community Support and Research.
- Positive Feedback by Medicaid HCBS consumers, MCO Concern Resolution Staff, State HCBS Staff and Stakeholder groups.
Contact the Ombudsman

To contact the Office of the KanCare Ombudsman:

Call toll-free at 855-643-8180
or
KanCare.Ombudsman@kdads.ks.gov
or
james.bart@kdads.ks.gov

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