

**Minutes of the MCO implementation Workgroup: January 14, 2013:
Reviewed and approved on 2/11/2013**

Attending: Gail Howard, Laura Hopkins, Dale Stiffler, Kevin Miller, Mary Heath, Mike Pitts, Scott Hines, Nan Kartsonis, Jean Rumbaugh, Tom Walker, Angela Brooks, Julie Figgs, Christiane Swartz

1. Waiver update:
 - a. KDHE received approval from CMS regarding the 1115 waiver application. Approvals were also received for amendments to all 1915(c) waivers. The amendments for the 1915(c) waivers were to bring them in line with KanCare requirements.
 - b. The Special Terms and Conditions (STCs) under which the 1115 waiver will be operating can be found on the KanCare website. Requests have been made to prepare an Executive Summary of the STCs, but the document is too detailed to provide such a summary.
2. Implementation activities
 - a. The State continues to meet by telephone weekly with CMS post implementation.
 - b. Another set of educational tours will begin on February 18. These meetings will primarily be member focused and nursing facility focused.
 - c. The KanCare website continues to be updated with additional information on a regular basis.
 - d. Stakeholder calls continue to occur at 9:00 daily. These calls will continue through January. The calls have had good attendance – approximately 100-150 persons have been calling in for information or to bring up issues with implementation. General questions and answers from the calls are being documented and posted on the KanCare website.
 - e. There has been some confusion on how MCO assignments were made. Claims data was mined and matches were made between members and whether providers were signed up with MCOs in this order: nursing facility, primary care physician, other providers. Whenever possible, family members were placed with the same MCO.
 - f. Members can change plans until April 4, 2013 but can change primary care physicians at any time.
 - g. Geo-access information is being updated and will be posted on the KanCare site soon.
3. MCO reports
 - a. Amerigroup: Has had a very busy past several weeks. They have fielded over 12,000 calls since January 1 through Friday, January 11. There are some days with very high call volume. Pharmacy claims, HCBS claims, and EVV claims are being processed currently. They are continuing to add providers to their network daily. Lots of outreach to Members on the 1915(c) waivers is occurring. 1800 outbound calls have been made to this population and 150

home visits have occurred. Lots of contact with SED waiver and Autism waiver participants has occurred.

- b. United: Has also experienced a large volume of calls since January 1 due to the mailings to Members. They are also processing a large volume of claims. They are watching denials closely to assure that they are legitimate denials. Started paying claims last Tuesday. Case managers are calling long term services Members and other high risk Members and scheduling in-home visits.
 - c. Sunflower: They have fielded approximately 15,000 calls from Members and providers. Members are calling to change PCPs or learn more about their benefits. Lots of effort has continued to go into building the provider network. Pharmacy claims are being processed at the point of sale. Issues are being addressed quickly.
4. A concern was raised that HCBS providers may not be receiving payment for services. All three MCOs stated that remittance is occurring with HCBS providers.
 5. Another issue was raised that MCO identifiers are not being listed on EVV claims. Providers are having to look up the MCOs in KMAP. Christiane said she would research the issue.
 6. The KanCare advisory group recently recommended merging the four external workgroups into two. No decision has been made reading that recommendation at this time.
 7. Next meeting is scheduled for February 11, call only from 11:00-12:00.

To join the call, please dial the toll free number and enter the conference code.

Toll-free dial-in number: (866) 620-7326

Conference code: 1041258531