

**Specialized HealthCare and Network Issues Workgroup  
Team Meeting**

<b>Objective</b>	<ul style="list-style-type: none"> <li>To receive updates on KanCare implementation</li> <li>To discuss KanCare education efforts</li> </ul>		
<b>Date</b>	Monday, December 3, 2012		
<b>Time</b>	1:30 – 3:30 PM		
<b>Location</b>	<b>Landon State Office Building, Room 106</b> <b>Dial-In: 866-620-7326</b> <b>Conference code (for participants): 6915845857</b>		
<b>Attendees</b>	Amanda Reichard, Amy Campbell, Becky Ross, Dave Halferty, Effie Swanson, Elizabeth Schmidt, Gary Robbins, Kevin Crowley, Lora Key, Sheldon Weisgrau, Tim Cunningham, Walt Hill, Monica Arter, Winnie Toler, Stephanie Wilson, Dana Poole		
<b>Item Number</b>	<b>Agenda Items</b>	<b>Action/Assignment</b>	<b>Owner/Presenter</b>
1	Review agenda	Becky noted that the meeting will end at 3 p.m. due to a call with CMS. The grievance and appeals discussion will be moved to last in case the group does not have time for this item.	Becky
2	Provider manual update	Nearly all manuals are finished. The Sunflower FMS manual is still in progress. United will send a new vision provider manual due to switching subcontractors. Scion dental provider manuals are still in progress. KDADS will wrap up the behavioral health manual for Sunflower soon. Gary Robbins noted that it is difficult to keep up with latest version. Becky told the group that Roxana Alexander at KDHE is the official contact for the manuals.	Becky
3	Enrollment meetings update	Becky noted that we just finished the enrollment tour but will hold an additional round in late January or February while consumers are still in their 90-day choice period. Effie provided a handout that displayed the participation at the enrollment tour meetings and stakeholder webinars the State held in November.	Effie
4	Grievances and appeals in KanCare	Attachment D includes the standards the State has defined for grievances and appeals. There are also stringent federal regulations that the State and MCOs must follow. Monica from Sunflower noted that there are multiple ways for a member to submit a grievance to Sunflower. All grievances will go to a member advocate and grievance coordinator. That person or the care manager will investigate the issue and a resolution will be sent to the member, and all is documented in the system for reporting. Grievances are routed according to topic as needed to separate departments for response and resolution. Dana from Amerigroup introduced Christian who is an expert in this area for Amerigroup. Christian noted that when a grievance is	Becky and MCO representatives

		received it is recorded in the system and routed to the appropriate department for review, including a medical director when needed. After a decision is made, it is documented electronically in the system and a response is sent to the member in a letter, with the provider included as necessary.	
5	Update on 1115 waiver	Becky and Dave noted that the State is discussing lengthening the period of time for reviewing plans of care. The State finished amending all 1915 (c) waivers (except I/DD waiver) to incorporate revisions required by CMS for KanCare. All amendments are posted on the KanCare website, and will be entered into the CMS system on Wednesday with a deadline for approval by CMS on Friday. We are currently in discussions of standard terms and conditions for the 1115 with CMS. There is a new section on the KanCare website called "readiness activities" which includes a number of activities we have completed for CMS. The page includes links for the 1915 amendments, returned mail process, the outreach and communication plan, call center coordination, enrollment verification, and network adequacy. Amy Campbell asked for clarification on what exactly is changing in the waivers. Becky and Dave noted that nothing is changing in the waivers other than to reference and incorporate the managed care structure.	Becky and Dave
6	Proposed KanCare Ombudsman	Dave noted that the state has created a new position called the KanCare ombudsman. This person will be housed at KDADS and report directly to the Secretary. The ombudsman will largely help persons who have not been in managed care before, but also anyone who is in KanCare. The ombudsman will also report to the Legislature and provide updates to them on the program. The State discussed the proposed plan with CMS last week, and the primary issue was getting the infrastructure in place before January 1. Amy asked how this will work functionally, and Becky explained that the ombudsman will help members navigate the MCOs' grievance processes, the State's process, and help them understand their rights.	Dave
7	Next steps	Becky will send an appointment for the next round of meetings in January, February, and March. Becky will send the revised Attachment D and federal regulations for review, and the group will continue our discussion on grievances and appeals at the next meeting.	All

		We will discuss transportation at the next meeting. The group would like to see information on the State's previous network and who the MCOs have contracted.	
<b>Notes</b>	<p>The work group also discussed questions and concerns regarding the provider directories and training opportunities for providers.</p> <p>Dave noted that educational opportunities can be posted to the KanCare website if the State is involved in the meeting.</p>		
<b>Next Meeting</b>	<p><b>January 7, 2012</b>  <b>1:30 – 3:30</b>  <b>Location to be determined</b></p>		