

# KanCare Consumer and Specialized Issues Workgroup

## Meeting Minutes

June 30, 2014 10:00am To Noon

Wichita DCF Office, 230 E. William, Wichita KS - Room 3080

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### **Those in attendance:**

Russell Nittler, Aldona Carney, Jae Bennett, Sean Gatewood, Joe Ewert, Barb Conant, Kerri Bacon, Keith Derks, Darcie Darbie, Steve Gallagher, Steve Gieber

### **Those attending by telephone:**

Greg Wintle, Kristi Berning, Hal Schultz, Debbie Copper, Christopher Beurman, John Kahl, Stephanie Sander, Ed Nicholas, Hal Schultz, Sue Zupancic, Bill Gale, Karri Fiszt, Nicolette Marino, Kayla Paloe, Tamela Carter, Ann Perman

### **Crisis Exception Rules:**

*Joe Ewert, KDADS*

Greg Wintel from KDADS stated that he could not speak to the PD side for Crisis Exception Rules, and then offered the information relevant to the DD side. Through questions and discussion, clarification of: 2 main criteria, process for applying for Crisis Exception, KDADS team and their process of notification, a basic timeframe for services getting started, noting variables that could take more time, and the yearly review.

Stephanie brought up domestic violence as a crisis exception, commenting that it is on the PD waiver, and believes it should be on the DD waiver. Domestic Violence is a different crime.

Greg said he would take that to his leadership.

Aldona voiced concerns over Crisis applications being accepted but not acted on. Greg assured that KDADS are going forward and reviewing on a daily basis.

Greg and Russell are confident that the Crisis Exception Rule process is the same for the PD with ADRC as the assessor; however, Greg will get with the PD side, confirm, and get back with Russell on his findings.

### **HCBS Final Rule**

*Joe Ewert, KDADS*

Joe began by giving an overview of the handout for the CMS new rule regarding the qualities that a HCBS facility must meet to be defined as a Home and Community Based Setting. The characteristics are not out of line with what the State had expected with many being items that are already required by the State of Kansas.

Safety concerns that might cause ineligibility were raised. Risk Assessments and the Rights Restrictions Process documents are part of the consumers Plan of Care. Also how this could transfer over to a group setting. Joe stating that the CMS mentions the individuals' service plan frequently and believes CMS would have a hard time implementing the new rule without it.

It is a point of assurance for all that is needed.

Conversation about a stakeholder's task force revealed that no one is aware of one. A participant said it was mentioned at a Kansas City meeting. Joe suggested getting in touch with those in control of that meeting to find possible clarification. Another participant thought the idea is good across the HCBS population not just DD.

Greg noted that KDADS has had in person and conference call meetings. Once the information is compiled and they hear from CMS they will have more public comment sessions. On the DD side, they are looking on setting up focus

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groups related to the comment sessions. As more information is available from CMS there will be additional rounds of public meetings and calls.

Russell noted that on the KDADS website there is a link for the final rule. On the last page of the hand out there is a list of contacts to get concerns to KDADS on the Final Rule.

## **Eligibility Reviews/KEES Update**

*Russell Nittler, KDHE*

Russell offered the information concerning the new KEES system that will replace KAECSSES. This will be a shared program between DCF and KDHE that currently will determine financial eligibility and in the future functionality eligibility. There is no set 'go live' date with October being a possibility.

Differences in applying for eligibility between the programs were discussed. Once fully integrated, KEES will be mostly electronic submissions with paper applications still available for those that need them.

The review process will be streamlined to 3 points of contact with the consumer: Pre-populated form, Passive review, and Super passive. There are aspects that are still in the test phase to see what bucket the KEES system will send information to and how that will determine the flow to a pre-populated or passive bucket. Prediction is a lot of the reviews will go either to pre-populated or passive bucket.

Aldona expressed that the paperwork a parent gets is very confusing and to simplify the process would be awesome. Russell stated that is what we are hoping to accomplish.

## **MAGI Rules Update**

*Russell Nittler, KDHE*

Russell provided a hand out on the policy changes brought about through the AHCA concerning the MAGI and NON-MAGI populations. This topic was covered in the last meeting but now we have it in writing. It is the new way the State will look at the income and who's included when determining eligibility. The State needs to make sure they are doing their eligibility somewhat the same as the Federal Gov't.

NON-MAGI population eligibility rules will stay the same.

MAGI changes included the way a person files their taxes, who can file/apply, self-employment income for the adult and elderly disabled, residence rules, income standards (Caretaker, Poverty Level, and CHIP), CHIP Crowd-out FPL and penalty, foster care age out, and the ways of verifying of income.

Child support is no longer considered income.

## **4<sup>th</sup> Quarter CMS Report**

*Russell Nittler, KDHE*

Russell spoke about the handout provided which guides through website navigation to get to the quarterly CMS reports for those that wish to review them. There was no further discussion on this topic.

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## **KanCare Executive Summary**

*Russell Nittler, KDHE*

Russell, referring to the Executive Summary handout, would get with Liz concerning: defining 'Others', combining all HCBS Services into one group, and creating a separate chart taking all HCBS Services divided by waiver.

Customer Service Report: Aldona related her experience calling Sunflower which could be the reason their 'Call Abandonment Rate' was significantly higher.

2014 Denied Claims-Total Year to Date by MCO: Requests for an additional column that can show out of denied claims how many were eventually paid. Also what is the industry standard? Suggestions of a task force group within each MCO to remedy the high denial rate in some services.

Value Added Services & In Lieu of Services: Request for chart of which services were dropped.

Russell noted that they would need to budget more time for charts per meeting.

## **Report from MCO Consumer Councils**

*KanCare MCOs*

Sunflower: Debbie feels they are getting a core base of members. Their meeting was held in Lenexa with a conference line available and the plan is to move the meetings around the state. Recruitment of additional members includes contacting other departments. Asking for names and have done phone contact. Some assistance from NAMI and they send requests out to their members. Other topics were; I/DD implementation, autistic waiver, and the experiences when members would call into Member Services. No set date for the next meeting but it will be within the next quarter.

United: Chris said they have had one meeting so far this year with the topics of providing Health Homes information and feedback for the appeals and grievance process, making the latter easier and more understandable for their members. Update the member handbook by simplifying the language.

The next meeting will be July 30<sup>th</sup> in Olatha. Will have webex, conference call, and will provide transportation if needed.

Amerigroup: Keith reported the meeting on June 19<sup>th</sup> was in Overland Park. Topics included Member education, member satisfaction survey, and opened up to Q & As.

Most concerns were individual. Focus was on transportation by Access to Care. If it is possible to get the same driver, there would be less behavior issues. Next meeting in 3<sup>rd</sup> quarter with no date set.

Hal and Sean offered to put the word out about Consumer Councils for all MCOs.

## **Dental Provider Update**

*Russell Nittler, KDHE*

Russell: We wanted to hear about what they are doing to get more dental providers to sign up.

Amerigroup: Kerri, We are working with dental vendor SION to outreach to new providers, looking at printing an updated network development plan, and adding some providers through geo access. Reviewing the need to add

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providers by specialty. Survey will be going out to providers to get a better understanding of what services they do provide for complex cases

United: Chris noted that United mirrors Amerigroup Dental Provider Update

Sunflower: Debbie reported that as of August 1<sup>st</sup>, Sunflower will be using SION network and will be very much in line with United and Amerigroup. Sunflower verified 2 dental cleanings for adults per year.

Amerigroup and United July 1<sup>st</sup>, Sunflower, August 1<sup>st</sup>: Gracemed will start treating members in their office and perform sedation services in their office.

Darcie (Sunflower) has implemented a pathways program to educate dental providers on how to work with I/DD members. Barb noted the Dental Association would know if there is an Association of Dental Business Managers to get the contacts to arrange for education.

Discussion followed about age, KanBe healthy, Value Added services, noting that maintaining the teeth would keep the members healthier in the long run. John pointed out getting the service was not an issue; it was that Medicaid does not pay for it. He also brought up finding/establishing foundations to contribute to pay for those costs.

## **KanCare Ombudsperson Report**

*Kerrie Bacon, KDADS*

Kerri Bacon began by summarizing the 1<sup>st</sup> quarter Ombudsman Report.

Joe offers to throw a larger net to help her find a Volunteer Coordinator.

July 1<sup>st</sup> using the new tracker will input new data: 2<sup>nd</sup> quarter much like 1<sup>st</sup> quarter with 3<sup>rd</sup> quarter will be more robust including data by waiver.

## **Future Meetings**

September 30, 2014, possible location: Ottawa, KS

December 12, 2014

The meeting was then adjourned.

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