KanCare Request for Proposals

• State must ask for bids for new KanCare contracts with managed care organizations (MCOs)

• New contracts begin January 1, 2019

• Now – Explaining how your input was used to write the request for proposals (RFP) for new KanCare contracts
Conduct Renewal Public Meetings
May 2016 and June 2017

Post Request for Proposals (RFP)
November 2017

Responses due from Bidders
January 2018

State Reviews and Evaluates Proposals
January - March 2018

New MCO Contracts Awarded
June 2018

KanCare 2.0 begins
January 1, 2019
What We Talked About in June

- Value Based Purchasing
- Administrative streamlining
- Managed Care Organizations (MCOs) training
- MCO communications
Value Based Purchasing

You told us in June:

• You needed to know more about what VBP is and how it can work with non-traditional health care, like HCBS
• You want to be included in the definition of the measures of “value”
• You want VBP programs to be consistent across MCOs
• You want VBP programs to recognize geographic and provider size differences
• You want VBP programs to be voluntary
Value Based Purchasing—What’s New

Beginning January 1, 2019:

• More education will be provided about VBP to providers and other stakeholders
• Value based purchasing programs will be voluntary and payment will be in addition to FFS payment
• MCOs and the state will work with stakeholders to clearly define outcomes for VBP
• MCOs will be required to create a variety of VBP programs, tailored to geographic areas and different provider groups
Administrative Streamlining

You told us in June you wanted:

• Consistency in billing and claims payment

• Consistency across the MCOs in communication

• Streamlined credentialing processes

• Standardized documents that are passed back and forth between you and the MCOs
Administrative Streamlining – What’s New

Beginning January 1, 2019:

• Standardized provider application and enrollment process and all MCOs required to render credentialing decision within 60 days

• Increased standardization of MCO processes and documents

Currently happening and will continue:

• Jointly issued provider bulletins

• Updating state provider manuals to ensure accuracy and reduce duplicative information
MCO Training

You told us in June you wanted:

- Training specific to provider groups

- To be able to provide education about Kansas systems to the MCOs

- A combination of training methods – webinars, in-person, one-on-one

- Dedicated provider representatives throughout the state
MCO Training – What’s New

Beginning January 1, 2019:
• MCOs will provide in-person and web-based training at least annually to HCBS providers
• There will be dedicated provider representatives throughout the state for each MCO
• The state will ensure providers have the opportunity to educate MCOs prior to and during implementation

Currently happening and will continue:
• Ongoing provider billing training
• Quarterly in-person provider training
• Webinars available on various topics
MCO Communication

You told us in June:

• You prefer e-mail over faxed communications

• Communications should be consistent across the MCOs and the state

• You want to be able to easily contact a provider representative who knows your provider type

• MCO websites should be easier to navigate
MCO Communication – What’s New

Beginning January 1, 2019:
• MCOs required to hold provider forums twice each year
• MCOs must have provider representatives dedicated to behavioral health and LTSS, as well as a Provider Relations Director
• MCO websites will be easier for you to use

Currently happening and will continue:
• Jointly issued provider bulletins
• MCO provider advisory committees
Other Things You Told Us

• You are concerned about network capacity

• You want to expand substance use disorder treatment and mental health services

• We need to do more to integrate physical and behavioral health services
Other Changes Coming

Beginning January 1, 2019:
• New standards will be applied for network adequacy; opportunities for telehealth, including VBP programs focused on telehealth will occur
• MCOs will have VBP programs specific to integration of physical and behavioral health care
• More MCO positions specific to BH and LTSS

Next year:
• Convene a stakeholder group to assess need and make recommendations about behavioral and physical health codes to promote increased capacity and integration
Summary

With new KanCare contracts:
• VBP will be voluntary and will involve providers in selection of outcomes
• Streamlined credentialing; more consistency and standardization in MCO documents)
• More training from MCOs; more specific training; and dedicated provider representatives
• More user friendly websites and more opportunities to talk directly to MCOs
• New network adequacy standards and more effort to integrate physical and behavioral health
Questions?
Thank you!