



**Committee on Aging and
Long-Term Care
*HB 2424***

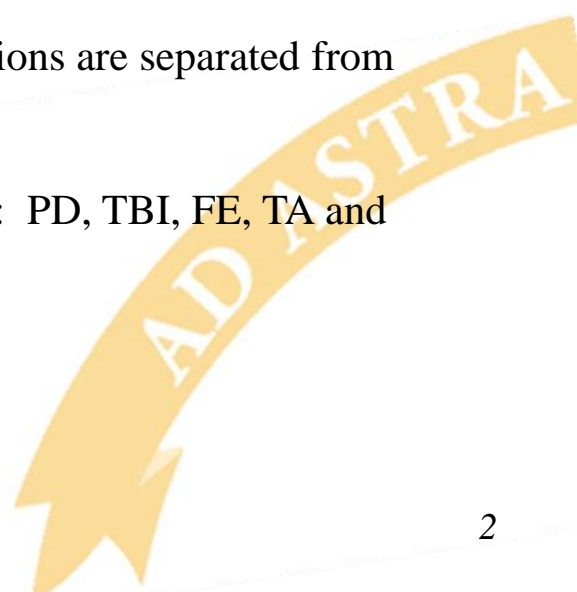
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House Bill 2424

Current HCBS Waivers

- PD & TBI & Autism: Same entity can perform functional eligibility, case management and service provision
- DD: CDDOs can perform all three functions, under separate statutory authority
- SED: CMHCs can perform all three functions, under separate statutory and clinical authority
- TA: By SRS policy, eligibility and case management functions are separated from service provision.
- FE: By KDOA policy, eligibility and case management functions are separated from service provision.

Our interpretation is that HB 2424 would affect the following waivers: PD, TBI, FE, TA and Autism (conforming to current practice for FE and TA waivers).



Medicaid Reform Initiatives

The Administration's intention through Medicaid reform initiatives is as follows:

1. Conflict-free eligibility process for PD, TBI, FE, TA & Autism waivers
 - Functional eligibility screens are “carved-out” of the KanCare RFP
 - Advent of Aging and Disability Resource Connections (ADRCs) to complete functional eligibility determinations and also “options counseling” to help a consumer determine which KanCare/PACE option is best for them
 - RFP for ADRCs to go on-line in February 2012
 - Any entity serving as an ADRC will not be eligible to participate in a KanCare provider network
 - This meets the CMS intention for conflict-free eligibility
2. Conflict-free case management process for PD, TBI, FE, TA & Autism waivers
 - CMS definition of conflict-free process is inserted into KanCare RFP
 - An entity can provide case management and service provision, but not for the same consumer
3. We support the concepts of HB2424 and believe they will play an important part of our broader Medicaid reform efforts