



House Aging & Long Term Care Committee  
March 15, 2012

**TIME LINE OF CHANGES FOR RECEIVING SERVICES  
PROVIDED BY  
THE KANSAS HCBS/PD WAIVER**

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## TIME LINE OF CHANGES FOR RECEIVING SERVICES PROVIDED BY THE KANSAS HCBS/PD WAIVER

### 1. December 1, 2008

A policy change was made concerning services provided by the HCBS/PD Waiver.

- a. SRS activated a “service wait list” which established a waiting list for services provided by the PD Waiver.
- b. New customers could only receive services if they met the criteria for a “crisis exception.”
- c. At the end of 2008, 873 customers could not be funded for HCBS/PD Waiver Services.

### 2. March 2, 2009

Another change was made by SRS to the PD Waiver.

- a. SRS implemented a “rolling” waiting list.
- b. A customer could access services through:
  1. Crisis exception
  2. Transfer from other waiver programs
  3. Transfer from Work (Working Healthy)
  4. Reinstatement within 30 days.
- c. For every two persons who terminated waiver services, one person was placed into services (as adjusted for new additions already made in accordance with items 1 – 4).
- d. At the end of 2009, 2,185 customers could not be funded for HCBS/PD Waiver Services.

### 3. 2010 and 2011

No substantive changes were made to the PD Waiver in 2010 or 2011. At the end of 2011, 3,369 customers could not be funded for HCBS/PD Waiver Services.

### 4. 2012

As of March 1, 2012, 3,494 customers could not be funded for HCBS/PD Waiver Services. SRS has already begun to make changes to its PD Waiver. The administration believes that the implementation of several systemic changes would reduce the cost of services, improve efficiencies and allow more customers to be served. A few of these changes include:

- a. Creating Aging and Disability Resource Centers (ADRC) where persons with disabilities (FE, TBI and PD) resulting in a variety of needs can receive standardized functional assessments and comprehensive information. An RFP for ADRCs was posted in early February. Any entity that will serve as an ADRC will not be eligible to provide case management or services to clients.
  - b. Creating conflict-free functional assessment, case management, and provision of community services so that those who functionally assess customers to determine eligibility provide case management services, and provide other services are separate and distinct from one another. This will be implemented for the FE, PD and TBI waivers.
  - c. Beginning to work with stakeholders and agency staff immediately to plan and implement PD waiver standardization policy changes similar to the FE waiver policy changes made last fall.
  - d. Applying savings from systemic changes to provide community services for more customers from the PD Waiver.
5. The administration wants to provide both excellent and efficient services to Medicaid eligible customers. However, it also wants to avoid spending more money on the PD waiver without making the systemic changes necessary to prevent future inefficiencies. Nothing will be gained if additional funds are appropriated without doing all we can to protect program integrity.