



**KanCare Update**  
**House Committee on Children and Seniors**  
**January 17, 2013**

**Kari Bruffett, KDHE-DHCF**  
**Secretary Sullivan, KDADS**

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**KanCare and Children**  
**Kari Bruffett**

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# HealthWave is now KanCare

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- More than half of KanCare members are children and youth, most of whom were enrolled in KanCare's managed care predecessor, HealthWave, which was for Children's Health Insurance Program (CHIP) and Medicaid children and families.
- Approximately 40 percent of births in Kansas are covered by Medicaid.
- KanCare brings a new level of care coordination and integration to this population.

# For Children: What Stays the Same

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- **Eligibility and application process**
- **Current services**
- **Medicaid ID number**
- **Eligibility review date**
- **KAN Be Healthy benefits for children**
- **School-based services**

# What is Covered?

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**KanCare includes:**

- **Doctors appointments and hospital visits**
- **Treatment for mental illness and substance use disorders**
- **Prescription drugs**
- **Nursing facility care and in home help**
- **Transportation**
- **Dental and vision care**
- **DD waiver services and targeted case management for people with DD (*will not be included KanCare until 2014*)**

# Value Added Benefits

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**Amerigroup** – *Taking Care of Baby and Me*® prenatal and postnatal program with health resources, coaching, a special self-care book and more debit card credits.

**Sunflower** – *Start Smart for Your Baby* – This program gives support and education for moms, babies, and families. Includes Smart Start home visits for new mothers, baby showers for pregnant mothers, and birthday programs for children.

**UnitedHealthcare** – *Baby blocks* is a program to help those that are pregnant and uses online tools so new moms can track their appointments. If they go to all of their appointments they can earn gifts for themselves or their baby.

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**KanCare and Seniors  
Sec. Shawn Sullivan**

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# Long-Term Service and Supports (LTSS) Transition/Protections

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- **Transition protections include all Nursing Facilities being considered participating providers for all MCOs in Year 1.**
- **Other Long-Term Services and Supports protections include:**
  - ✓ **Education opportunities for beneficiaries and providers**
  - ✓ **Stakeholder engagement**
  - ✓ **MCO accountability to the State**
  - ✓ **Ongoing completion of functional assessments**
  - ✓ **Continuation of plans of care**
  - ✓ **State oversight of plans of care**
  - ✓ **Ride-alongs with state staff**



# Long-Term Service and Supports (LTSS) Transition/Protections

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- ✓ Rights of grievance and appeals
- ✓ Right to a State fair hearing
- ✓ KanCare Consumer Ombudsman
- ✓ Eligibility is determined by the State or contractors for the State, not by the MCOs
- ✓ Quality assessment and performance improvement
- ✓ I/DD waiver delay and pilots
- ✓ Front-end billing (FEB) solution
- ✓ Inclusion of current 1915(c) waiver structures and protections
- ✓ IT testing



**Improved Outcomes  
from KanCare**



# Improved Outcomes

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Improved outcomes is one of the main focuses of the contracts with KanCare plans.

- Less reliance on nursing homes and other live-in settings
- Fewer hospital visits
- Better care for ongoing illnesses
- Improving access to health services

# Pay- for- Performance Measures

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## Physical Health Measures

Comprehensive Diabetes Care (HEDIS Measure)

Well-child Visits in the First 15 Months of Life (HEDIS Measure)

Preterm Births (Join Commission National Quality Measures)

Annual Monitoring for Patients on Persistent Medications (HEDIS Measure)

Follow-up After Hospitalization for Mental Illness (HEDIS Measure)

# Pay- for- Performance Measures

## Behavioral Health, LTC, and HCBS Waivers

Increased Competitive Employment: An increased number of people with developmental or physical disabilities, or with significant mental health treatment needs, will gain and maintain competitive employment.

- **National Outcome Measures (NOMs):**

- The NOMs for people receiving Substance Use Disorder services will meet or exceed the benchmark in at least 4 of these 5 areas: Living Arrangements; Number of Arrests; Drug and Alcohol Use; Attendance at Self-Help Meetings; and Employment Status.

- The NOMs for people with SPMI or SED receiving mental health services will meet or exceed the benchmark in at least 4 of these 5 areas: Adult Access to Services; Youth Access to Services; Homeless SPMI; Youth School Attendance; and Youth Living in a Family Home.

- **Decreased Utilization of Inpatient Services:** A decreased number of people with mental health treatment needs will utilize inpatient psychiatric services, including state psychiatric facilities and private inpatient mental health services.
- **Improved Life Expectancy:** The life expectancy for people with disabilities will improve.
- **Increased Integration of Care:** The rate of integration of physical, behavioral (both mental health and substance use disorder), long term care and HCBS waiver services will increase

# Pay- for- Performance Measures

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## Long-Term Care

- ***Nursing Facility Claim Denials:*** The MCO will meet or exceed the benchmark for denial of nursing facility claims.
- ***Fall Risk Management:*** The number of people at risk of falling (i.e., who had a fall, had problems with balance and walking, or were identified as at risk for a fall) will be seen by a practitioner and receive fall risk intervention.
- ***Decreased Hospital Admission After Nursing Facility Discharge:*** The percentage of members discharged from a nursing facility who had a hospital admission within 30 days will decrease.
- ***Decreased Nursing Facility Days of Care:*** The number of nursing facility days used by eligible beneficiaries will decrease.
- ***Increased use of PEAK (Promoting Excellent Alternatives in Kansas)-Certified Days of Care:*** The percentage of nursing facility days paid for services in PEAK-certified person centered care homes will increase.

# Performance Measures

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## Physical Health

- Total Eligibles who received preventative dental services
- Total Eligibles who received dental treatment services

## Prevention Measures

- Diabetes short-term complication admission rate
- Diabetes long-term complication admission rate
- COPD or asthma in older adults admission rate
- Hypertension admission rate
- CHF admission rate
- Dehydration admission rate
- Bacterial pneumonia admission rate
- Urinary tract infection admission rate
- Angina without procedure admission rate
- Uncontrolled diabetes admission rate
- Angina without procedure admission rate

# Performance Measures

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## HCBS Frail Elderly

- Number of providers available in service areas
- Percent of participants whose record contains a Customer Choice form indicating choice of community based services
- Percent of participants whose record contains a Customer Choice form indicating their choice to self-direct services
- Percent of waiver participants who report knowing how to prevent, protect from , and report abuse neglect and exploitation
- 5% improvement in Member satisfaction rate from satisfaction survey



# Performance Measures

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## Nursing Facilities

- Total number of sample residents vs. the total number of sample residents reporting being placed in a home of their choice.
  - Benchmark- 95% of nursing facility residents report being placed in a nursing facility of their choice.
- Claims received and coded in accordance with the reimbursement methodology specified in the approved State plan vs. claims paid for in accordance with the reimbursement methodology specified in the approved State plan.
  - Benchmark- 100% of claims paid are in accordance with the reimbursement methodology specified in the State plan.
- Number of nursing facility claims received that are not denied or suspended vs. number of nursing facility claims not denied or suspended but paid within 14 days.
  - Benchmark- 90% of clean nursing facility claims (claims that do not trigger an edit for denial or suspension) are processed within 14 days.
  - Benchmark- 99.5% of clean nursing facility claims (claims that do not trigger an edit for denial or suspension) are processed with 21 days.

# Performance Measures

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## Nursing Facilities

- Total sample number of nursing facility residents receiving services between October and April vs. number of sample residents with documented flu vaccinations or declination of vaccination.
  - Benchmark- 100% of nursing facility residents are given access to annual flu shots.
- Total number of nursing facility discharges vs. total number of nursing facility discharges that also are readmitted to a hospital within 30 days.
- Customer Satisfaction Survey
  - Benchmark- 5% improvement in Member satisfaction rate among elderly Members
- The percentage of members who had a fall, had problems with balance and walking, or were identified as at risk for a fall during the measurement period, who were seen by a practitioner during the measurement period and who received fall risk intervention from their current practitioner.
- The percentage of Members discharged from a NF who had a hospital admission within 30 days.

