

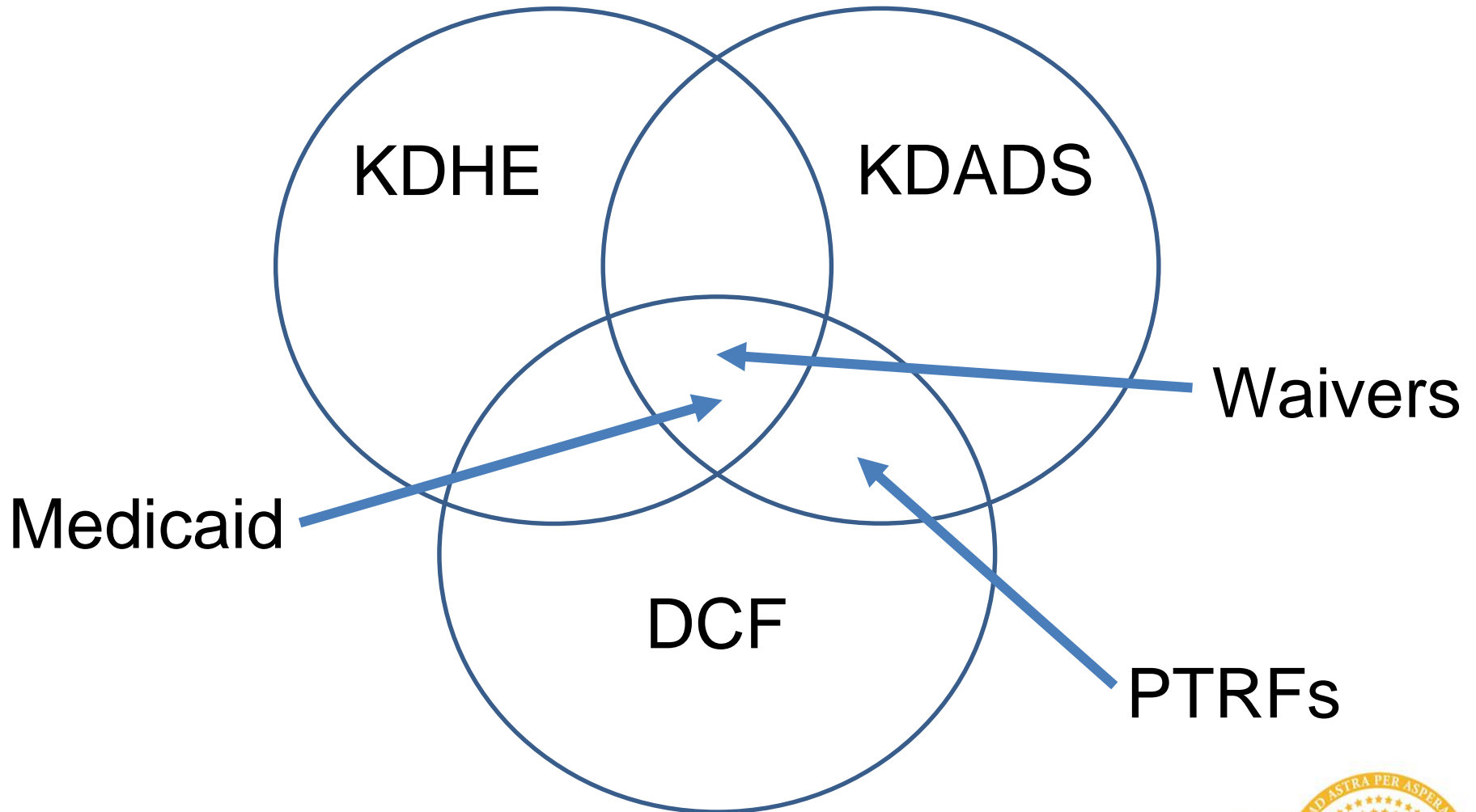


Senate Public Health and Welfare Committee

Roles of KDHE, KDADS and DCF in administering KanCare

February 28, 2018

KDHE/KDADS/DCF Shared Responsibilities



KDHE Roles in KanCare

KDHE, as the SSMA, is responsible for the administration and supervision of Kansas Medicaid programs. These responsibilities include, but are not limited to:

- Administration of programs
- Information management to support the programs
- Eligibility determinations
- Performance oversight
- Financial oversight

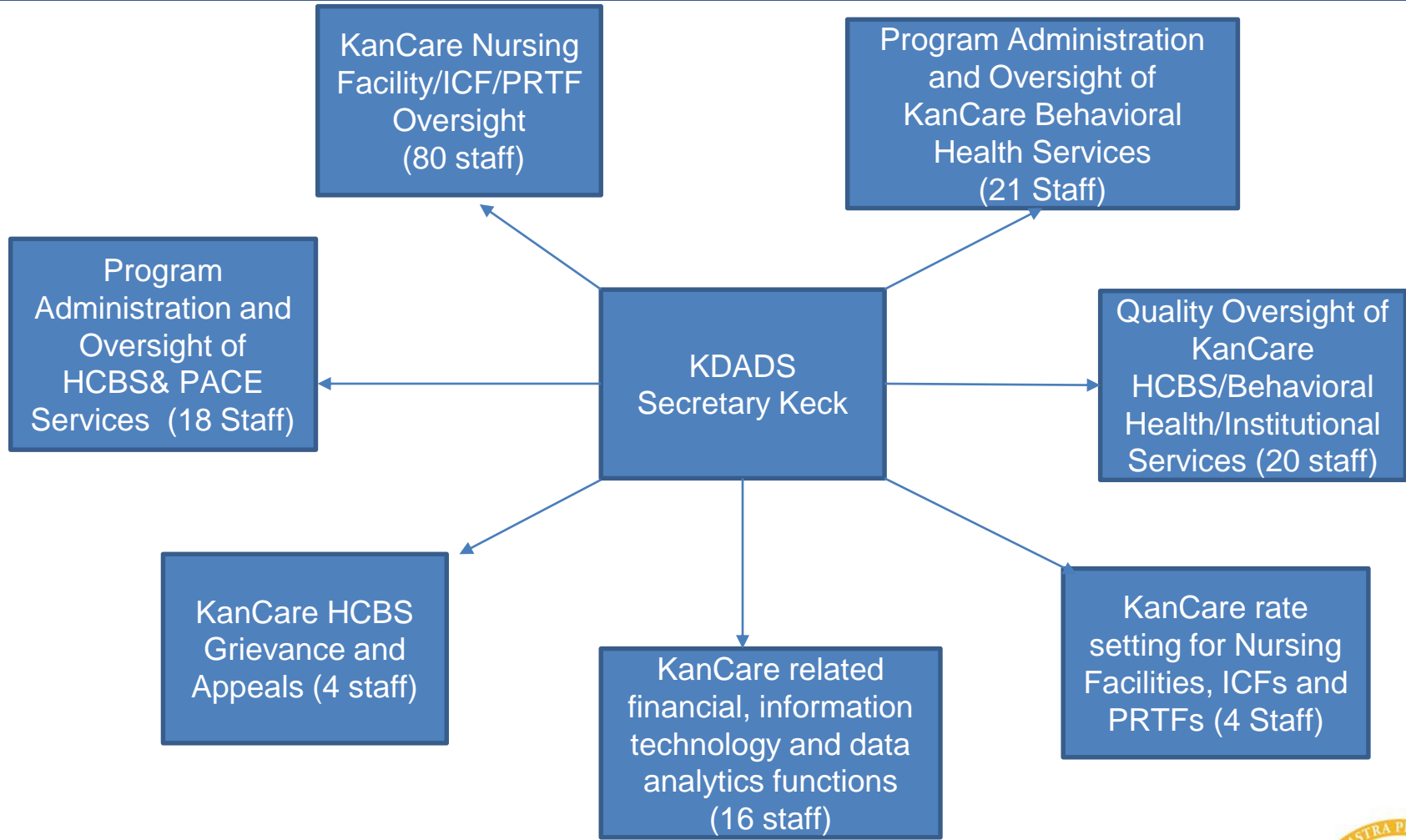
KDHE Roles in KanCare

- Through Managed Care Organizations (MCOs) KDHE pays for medically necessary services/services outlined in the State Plan including but not limited to HCBS and Behavioral Health Services
- KDHE oversees, monitors and defines medical services in the State Plan
- KDHE sets policies governing services and minimum rates
- KDHE licenses and regulate certain providers

KDHE Roles continued

- Provider enrollments and terminations for fee-for-service providers
- Managed care operations
- Responses to federal Medicaid oversight

KDADS KanCare Functions



KDADS responsibilities delegated by KDHE:

- Administration of services for Kansas Medicaid populations receiving Title XIX long-term care benefits, behavioral health benefits, and disability benefits.
- Includes Kansas Medicaid populations in institutions of mental disease, federally approved home-and community-based services waivers, federally approved long-term care and Behavioral Health state plan services and long-term care facilities.

KDADS operational roles in KanCare

- KDADS administers the seven 1915(c) HCBS Medicaid Waivers
- KDADS oversees, monitors and defines services under HCBS waivers
- KDADS manages the HCBS program waiting lists
- KDADS licenses and regulates HCBS IDD and Adult Care Home providers
- KDADS oversees and administers functional eligibility determination processes for HCBS waiver programs
- KDADS staffs and monitors complex cases for both HCBS waiver programs and Behavioral Health
- KDADS answers and triages consumers concerns around services and eligibility

KDADS operational roles in KanCare

- KDADS administers Behavioral Health State Plan services
- KDADS oversees, monitors and defines all Medicaid behavioral health services
- KDADS licenses and regulates in-patient treatment facilities for children and youth and community behavioral health services including psychiatric residential treatment facilities (PRTFs)

KDADS operational roles in KanCare

- KDADS sets Medicaid rates (floor) for nursing facilities, intermediate care facilities and PRTFs
- KDADS administers and oversees long-term care institutional State Plan services including Nursing Facility and ICF/MR
- KDADS licenses and regulates and certifies Nursing Facility and Adult Care Home Medicaid providers

KDADS Operational roles

- KDADS provides quality assurance for HCBS and BH programs
- KDADS provides background checks for adult care home employees, HCBS employees and KDHE's home health agencies

KDADS operational roles in KanCare

- KDADS oversees and administers the PACE program
- KDADS oversees and administers the functional eligibility determination processes for PACE

KDHE Interactions with DCF

- Division of Public Health
 - SNAP Program Collaboration
- Division of Health Care Finance
 - Medicaid for Foster Care Kids
- Division of the Environment
 - None

Foster Care Presumptive Eligibility

- Kansas children in foster care are deemed presumptively eligible for Medicaid.
- All children who are in the custody of DCF, Kansas Department of Corrections-Juvenile Services (KDOC-JS), or a Tribal Authority and removed from their home are eligible for Foster Care Medicaid.
- It is possible for children to be in the custody of DCF, KDOC-JS, or a Tribal Authority, and remain in their homes. *This population does not qualify for Foster Care Medicaid.*

Presumptive Eligibility continued

Two primary requirements of Foster Care Medicaid exist:

- The child must be in State or tribal custody,
- In an eligible out-of-home placement. If a child is in custody, but resides at home, he/she may qualify for other medical assistance programs administered by KDHE.

Foster Care Medicaid Services

- Vision
- Dental
- Pharmacy
- Transportation to and from medical care
- Medical: outpatient and inpatient
- Behavioral/mental health: outpatient and inpatient (including PRTFs, if medical necessity is met)
- HCBS: Serious Emotional Disturbance, Intellectual Developmental Disability, Technology Assistance, Physical Disability, and Traumatic Brain Injury waivers, if functional eligibility is met

Eligibility Discontinuation

- When a child returns home or ages out of foster care, his/her foster care Medicaid eligibility is discontinued.
- If the child returns home on or before the 15th of the month, the child's Medicaid closes at the end of that month.
- If the child returns home after the 15th of the month, Medicaid closes at the end of the following month.
- Should the child age out of custody or return home, it is necessary for an application to be submitted for medical assistance to the KanCare Clearinghouse to continue receiving Medicaid.