

HCBS WAIVER AUTHORITY CHANGE

AUGUST 2023

Waiver Amendment Changes			
#	Sender		KDADS Response
1	Nick Wood, Interhab	<p>August 5th, 2023</p> <p>Amy Gadjia KDHE – Division of Health Care Finance 900 SW Jackson, Room 900-N Topeka Kansas 66612</p> <p>Re: Via electronic submission at KanCareRenewal@ks.gov Kansas Department of Health and Environment – Division of Health Care Finance Re: Request for Comments – Submission of new 1915(b) waiver. For more than 50 years, InterHab has been working to improve the lives of Kansans with intellectual and developmental disabilities (IDD) as an association of community-based disability support providers. We support the move to a different authority. The budget-neutrality policy in the Demonstration had a significant negative impact on our state’s ability to launch and sustain much needed innovations, including investments in populations, providers, and services that had long suffered from disinvestment well before KanCare launched. When Kansas embarked upon implementation of the §1115 waiver, we were told that system gaps like the IDD Waiver waiting list, lack of Behavioral Health services for individuals with IDD, and difficulty accessing services like Supported Employment, Assistive Technology, and EPSDT services for children and youth under 21 (etc.) were areas of our service system that would all see significant improvement. Instead, KanCare made the barriers to receiving these services worse than they were before KanCare began.</p> <p>KanCare Service Model</p> <p>The new managed care waiver should support Community-based care management. Community-based care management is an alternative to</p>	<p>Thanked advocate for comment submission.</p>
		<p>For the future next steps in the shift to a new authority, we hope to see issues with Accountability and Transparency specifically addressed in proposals. We think that significant improvements to the service development model and data integration are possible. Data interoperability, better use of shared data, and value-based purchasing initiatives with community-based provider organizations that could be enabled by a new managed care arrangement, can result in more cost-effective programs that demonstrate real improvements in outcomes and positive impacts on the lives of Kansans with IDD.</p>	