



C/O Easter Seals Capper Foundation, 3500 SW 10th Avenue, Topeka, KS 66604

The Alliance for Kansans with Developmental Disabilities

Written Testimony for the House Health and Human Services Committee

January 13, 2016, 1:30 PM

To: Daniel Hawkins, Chair
Members, House Health and Human Services Committee
From: Jon Zehnder for The Alliance for Kansans with Developmental Disabilities
Re: KanCare Waiver Integration

Thank you Mr. Chair and members of the Committee for allowing me to speak to you on behalf of The Alliance for Kansans with Developmental Disabilities (The Alliance). My name is Jon Zehnder, past president of The Alliance and the Director of Advocacy and Policy for Disability Supports of the Great Plains, Inc. I have worked in community services for people with intellectual and developmental disabilities for 30 years.

Currently in Kansas, most people with disabilities are served in the community rather than in more expensive and restrictive institutional settings. The funding for those services typically comes from a Medicaid Waiver (waives many of the regulations and restrictions of Medicaid funding institutional services) program called, “Home and Community Based Services (HCBS). Kansas has seven separate HCBS waivers: autism, frail/elderly, intellectual/developmental disability, physical disability, serious emotional disturbance, technology-assisted, and traumatic brain injury. KDADS and KDHE plan to combine or integrate these seven waivers into one (with two age related components—children and adults), commonly called “waiver integration.” This integration is likely considered by most providers as a neutral strategy relative to cost/benefit. There is the notion that there may be more or different services available to meet the individual person’s needs. The Alliance does have one major concern however. There has been discussion regarding the waiver integration creating savings which could be used to reduce the number of people on the various HCBS waiting lists. While this is admirable, there are factors to consider prior to moving ahead regarding reimbursements to providers.

However the reimbursements are computed under the new, integrated waiver, care must be taken to make sure that the new reimbursement methodologies do not create any cuts to HCBS providers.

I think it is important to make you aware that the HCBS-IDD (intellectual and developmental

disabilities) providers have not had any rate increases since 2007 and that was limited to one percent. Any savings derived from waiver integration effectively mean a cut to community based providers.

Currently, several of the seven current waivers offer either in-home or residential supports. There are considerable differences in rates and methods of reimbursement. It is likely reimbursement will be standardized in some fashion. In doing so, particular care must be taken to assure no providers suffer cuts in an already underfunded service. The shortened version of our request is, “Do No Harm.”

Thank you for your consideration.