

Approved: 1-19-99
Date

MINUTES OF THE SENATE COMMITTEE ON PUBLIC HEALTH AND WELFARE.

The meeting was called to order by Chairperson Sandy Praeger at 10:00 a.m. on January 13, 1999 in Room 526-S of the Capitol.

Committee staff present: Emalene Correll, Legislative Research Department
 Norman Furse, Revisor of Statutes
 JoAnn Bunten, Committee Secretary

Conferees appearing before the committee:

Ann Koci, Commissioner, Adult and Medical Services Commission, Kansas Department of Social and Rehabilitation Services

Others attending: See attached list

Introductions

The Chair welcomed back Committee members and staff to the first Committee meeting of the 1999 Legislative Session.

Update on HealthWave Implementation and Seamlessness

Ann Koci, Commissioner, Adult and Medical Services Commission of SRS, briefed the Committee on the implementation of HealthWave, the new Kansas Children's Health Insurance Program (CHIP) which became effective on January 1, 1999. HealthWave is designed to cover children who are under age 19, live in families with incomes under 200% of the federal poverty level, not eligible for Title XIX, and who have been uninsured for at least six months. Commissioner Koci pointed out that children of state employees who are eligible for state group health insurance benefits are not eligible for HealthWave under federal rules. She also called attention to a two-page, mail-in application that can be used to apply for either title XIX or HealthWave (Title XXI) benefits for children. Children enrolled in the HealthWave program have guaranteed eligibility for twelve months. Commissioner Koci also noted that Kansas is the only state conducting an entry survey on children enrolling in HealthWave. A form is attached to her written testimony. (Attachment 1)

MAXIMUS, the clearinghouse for HealthWave, is responsible for operating the toll-free telephone number, outreach and marketing of the program, processing applications, determining eligibility, processing premiums, enrolling eligible children in health plans and processing capitation payments. The overall goal of HealthWave is the seamless integration of Title XXI and Title XIX for children. SRS has made many policy and administrative changes and decisions to promote such seamless coverage for children, and efforts towards integration are underway. Commissioner Koci called the Committee's attention to several challenges in regard to the integration of Title XIX and Title XXI. In order to address those challenges, a HealthWave task force will be convened after program startup in January. The task force will be chaired by Susan Kannarr, HealthWave Implementation Director. Membership will include representatives from Title XXI and Title XIX benefit plans, providers, SRS agency staff, budget staff, consumers, federal officials and representatives from other state agencies. The goals of the task force will be to identify the specific challenges and ways to overcome them to achieve seamless integration all within the current budget.

During Committee discussion, Commissioner Koci noted that every effort will be made to provide health insurance coverage to the estimated 60,000 eligible children in Kansas. As of this date, there have been over 9,200 calls come in over the 1-800 phone line that went into effect on October 1, 1998. As of December 31st, over 4,100 applications have been received at the Clearinghouse, and on January 1, 1999, a total of 3,941 children enrolled in health plans through HealthWave from the three regions of the state.

Adjournment

The meeting was adjourned at 11:00 a.m.

The next meeting date is scheduled for January 14, 1999.

SENATE PUBLIC HEALTH AND WELFARE COMMITTEE
GUEST LIST

DATE: 1-13-99

NAME	REPRESENTING
Paul M. Klotz	Assoc. of CMHCs of KS, Inc.
Bonni Pennie	Families Together, Inc.
Sally Finney	Ks. Public Health Association
Joe L. Furd	Ks Dept of Health & Env.
Jennifer A. Wagner	Legislative Post Audit
Martha L. Cooper	Hispanic Affairs
Paul Johnson	PAAC
Greg Tugman	DOB
Kent Galley	McGill, Gaches & Assoc
Reid Pittman	Health Midwest
David Lehman	KADOC
Keith R. Landis	Am. Dental Assn CHRISTIAN SCIENCE COMMITTEE ON PUBLICATION FOR KANSAS
Harrie Ann Brown	KATP
Michelle Peterson	PPAG
Maggie Keating	Kansas Insurance Department
Robin Lehman	Ks Action for Children
Sister Therese Bangert	Ks. Catholic Conference
Mary Draper	KMS

SENATE PUBLIC HEALTH AND WELFARE COMMITTEE GUEST LIST

DATE: 1/13/99

NAME	REPRESENTING
Ron Herz	Columbia/HCA
Rebecca R	KCA & KANA
Sherry C Niel	KS Advocacy & Protective Services
Janie Torres	DD Council
Craig Kabele	KANSAS COUNCIL ON DD

**State of Kansas
Department of Social
& Rehabilitation Services**

Rochelle Chronister, Secretary
Janet Schalansky, Deputy
Secretary

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**Senate Public Health and Welfare Committee
January 13, 1999**

Testimony: Update on HealthWave Implementation and Seamlessness

**Adult and Medical Services Commission
Ann Koci, Commissioner
(785) 296-5217**

Senate Public Health & Welfare
Date: 1-13-99
Attachment No. 1

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**Kansas Department of Social and Rehabilitation Services
Rochelle Chronister, Secretary**

**Senate Public Health and Welfare Committee
Update on HealthWave Implementation and
Plan for Seamlessness**

January 13, 1999

HEALTHWAVE IMPLEMENTATION UPDATE

Madam Chair and members of the Committee, I am Ann Koci, Commissioner of Adult and Medical Services Commission in the Department of Social and Rehabilitation Services. Thank you for allowing me the opportunity to come here today and update you on the progress we have made in the implementation of Kansas' new Children's Health Insurance Program. As you are aware, health insurance coverage for children in the program began January 1, 1999. The program is designed to cover children who are under age 19; live in families with incomes under 200% of the federal poverty level (FPL); not eligible for Title XIX; and who have been uninsured for at least six months. Children of state employees who are eligible for state group health insurance benefits are not eligible for HealthWave under federal rules. A simplified, two-page, mail-in application can be used to apply for either title XIX or HealthWave (Title XXI) benefits for children. Children enrolled in the HealthWave program have guaranteed eligibility for twelve months (Note: the same is true for PrimeCare eligible children in Title XIX beginning January 1, 1999. PrimeCare eligible children are children in the Poverty Level Eligible (PLE) and Temporary Assistance for Families (TAF) populations and comprise a majority of the children in Title XIX.) The gross monthly income for a family at 200% of the FPL is under approximately \$1,809 for a family of 2; \$2,275 for a family of 3; \$2,742 for a family of 4. Cost sharing in the program is limited to a monthly premium of between \$10 and \$15 for families between 150% and 200% of the FPL.

The HealthWave Clearinghouse operated by MAXIMUS is up and running. The Clearinghouse is responsible for operating the toll-free phone line, outreach and marketing, processing applications, determining eligibility, processing premiums, enrolling eligible children in health plans and processing capitation payments. Here is some information about activities in the Clearinghouse:

- Applications for the program were available the first week of November. Spanish language applications were available at the end of November. Over 80,000 applications have been distributed across the state. In addition, MAXIMUS workers have been traveling around the state making presentations at various locations. Examples of organizations receiving applications and/or presentations are schools, Head Start facilities, local health departments, hospitals, Community Mental Health Centers, libraries, community centers, Parents as Teachers, day care associations, local clinics, legal services offices, community organizations, Tribal organizations, places of worship and local SRS offices.
- MAXIMUS is in the process of completing the hiring of Outreach Counselors who will be

outstationed in cities across the state including Wichita, Garden City, Liberal, Hays and others to be determined.

- Outreach materials available through the Clearinghouse include flyers, posters and a short video that can be continuously looped for showing in places such as waiting rooms and community locations. Radio ads began running in the Kansas City area in November and have moved westward into the Topeka, Wichita and Garden City areas. Smaller markets in the western and southeastern portion of the state will be covered. After all areas have been covered the process will be repeated.
- Since the 1-800 phone line went live on October 1, 1998, over 9,200 calls have been received requesting application materials or asking questions about the program. To date only seven calls have been abandoned (customer hangs up) and the calls are answered in an average of seven seconds. (Data as of January 3, 1999)
- Through the assistance of BC/BS, applications were sent to all Caring Program children and BC/BS sent follow-up letters encouraging the families to apply. Also, information was sent to all families with a child on Title XIX where there are older siblings who might be eligible for HealthWave.
- As of December 31st, over 4,100 applications have been received at the Clearinghouse with all but 15 arriving on or after the 12th of November. On November 12 nearly 300 applications were received and over the next 33 days an average of 125 applications arrived each day. Of the applications received, 90 were returned to the applicants because they were unsigned. Early experience is showing that families generally sign the application but many neglect to attach the proper income verification documents. Families not attaching proper documentation are notified by mail and by a phone call from an eligibility counselor. If response is not received promptly, a second follow-up letter is sent.
- On January 1, 1999, a total of 3,941 children enrolled in health plans through HealthWave. Region 1 has 1,438 enrollees, Region 2 has 1,444 enrollees and Region 3 has 1,059 enrollees. Almost every county has at least one child enrolled in HealthWave (102 out of 105 counties). Sedgwick county has the most children enrolled with 423 followed by Shawnee with 314 and Wyandotte with 292. Five counties including Sheridan, Rawlins, Osborne, Logan and Hamilton have one child enrolled. The three counties with no children enrolled are Wallace, Wichita and Greeley.
- The premium payment process is set to begin operation. Of the 3,941 children enrolled in HealthWave, slightly over 1,000 of them have some type of family premium due. (Note: the numbers of children eligible may include families with multiple children enrolled with only one premium due.) Families will receive a monthly premium notice with a detachable coupon at the bottom that they can return with their check or money order in the attached postage paid envelope. Premium payment status will be tracked and families who miss payments will be

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notified of their status and provided with a variety of payment options (monthly, quarterly, annually). Families will not be disenrolled during the twelve month guaranteed eligibility period due to non-payment of the required premium but will not be allowed to re-enroll for the next benefit period until all premiums are current.

The benefit package for HealthWave is an Early Periodic Screening Diagnosis and Treatment (EPSDT) equivalent which includes all medically necessary services such as doctor's visits, inpatient and outpatient hospital services, therapies, lab work, radiology, eye doctor checkups and glasses, transportation, prescription drugs, inpatient and outpatient behavioral health services (mental health and substance abuse) and dental services. The benefits are delivered through a capitated managed care system.

The three managed care organizations and their subcontractors have been very busy the past two months developing networks of providers to serve the children enrolled in HealthWave. Preliminary networks were due to SRS by November 30th. Initial review indicates that while coverage in some areas of the state is limited, there is statewide coverage for children. The health plans are continuing to recruit providers in order to ensure access for children. The following is some summary information regarding networks:

- Family Health Partners, the physical health contractor for region 1, has signed contracts with 270 primary care providers, 19 local health departments, 647 specialists 42 nurse practitioners and 34 hospitals. Family Health Partners indicates additional providers and hospitals in nearly all 22 counties (3 counties do not have hospitals) have signed letters of intent and they are negotiating final contracts.
 - Doral Dental, the dental subcontractor in region 1, has contracts with 28 providers at 23 locations in the region and along the border in Missouri. Doral is continuing to try and recruit additional providers within the region and in counties bordering the region (including Oklahoma) to improve the coverage.
- Horizon Health Plan has contracted with over 500 primary care physicians and nearly 900 specialists in regions 2 and 3. Horizon also indicates that they are continuing to work out contractual details with potential providers and recruiting additional providers.
 - Delta Dental, the dental subcontractor for regions 2 and 3, will be using their current network of providers.
- The Mental Health Consortium will be using the current Community Mental Health Center system supplemented by contracts with inpatient facilities and substance abuse service providers.

Under the terms of the contracts, the health plans are required to ensure consumer access to services. This access will be judged upon the types of providers enrolled by the plans and the geographic

distance of providers from the member's residence. Plans are required to ensure there is a primary care physician and a pharmacy within 30 miles of the member's residence. In addition, contractors are expected and encouraged to utilize local providers such as clinics and health departments. The contracts also include a variety of performance measures designed to assure that children in HealthWave receive quality services.

INTEGRATION OF TITLE XXI AND TITLE XIX

The overall goal of HealthWave is the seamless integration of Title XXI and Title XIX for children. In furtherance of this goal, the Department has made many policy and administrative changes and decisions to promote seamless coverage for children. Efforts towards integration which are currently underway are:

- ✓ A simplified, mail-in application for all potential enrollees in both Title XXI and Title XIX who are applying for children's medical benefits only;
- ✓ A streamlined eligibility determination process including elimination of the assets test, reduction in required verification and a standard income disregard for both programs;
- ✓ Expanded outreach efforts to all income eligible families including the use of existing community resources;
- ✓ Increased cooperation between all state agencies involved in children's initiatives and health care;
- ✓ Continuous guaranteed eligibility for 12 months for Title XIX PrimeCare eligibles (Temporary Assistance for Families (TAF) and Poverty Level Eligibles (PLE) children) and Title XXI children;
- ✓ One central application and processing point for those applying for children's medical benefits only;
- ✓ Stationing of SRS eligibility workers at the Clearinghouse to expedite Title XIX eligibility determinations;
- ✓ Equivalent Early Periodic Screening Diagnosis and Treatment (EPSDT) benefit packages in both programs;
- ✓ Continuity in provider networks to the extent possible. Information on Title XIX providers was made available to Title XXI contractors during the negotiation process;
- ✓ Use of existing community based locations for access to programs;
- ✓ Toll-free telephone line which can be used for information on both programs.

There are several challenges to the seamless integration of Title XIX and Title XXI. The following is a list of some of the largest challenges:

- ✓ Different federal requirements for the programs (e.g., reporting, quality studies, cost effectiveness, Child Support Enforcement referrals in Title XIX, etc.);
- ✓ Low reimbursement rates for Title XIX due to the manner in which cost-effectiveness must be measured, with higher rates available under Title XXI;
- ✓ State-wide capitated managed care health plan contracting for both programs;

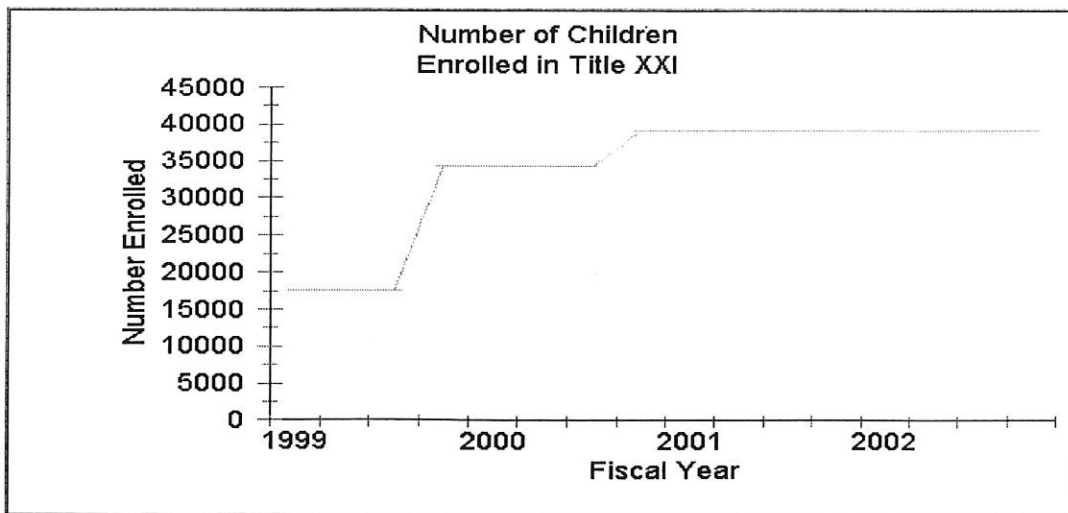
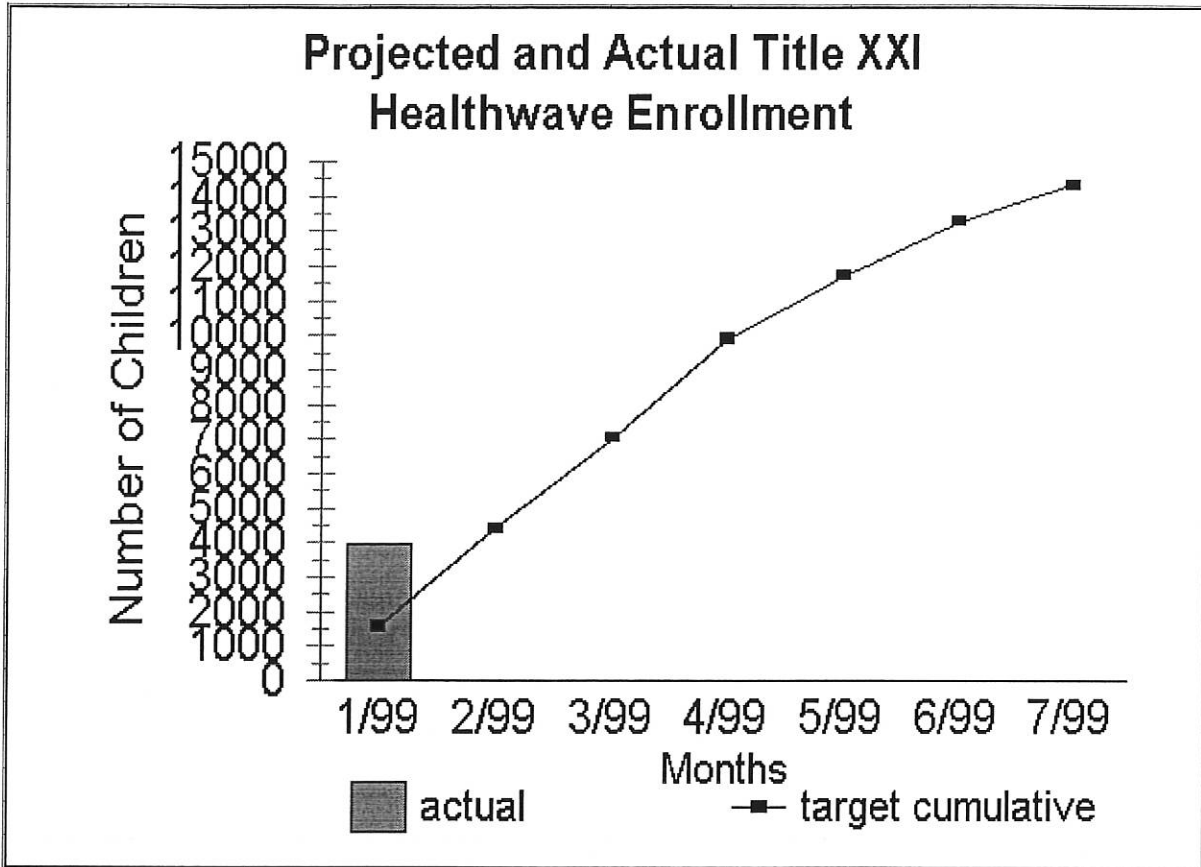
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- ✓ Federally mandated eligibility regulations for Title XIX which are not required under Title XXI;
- ✓ Management information systems timelines, processes and report coordination;
- ✓ Implementation of capitation under Title XIX for services such as dental and behavioral health (mental health and substance abuse) currently reimbursed on a fee-for-service basis;
- ✓ Assessment of the impact on existing systems for financing and delivery of behavioral health and dental services;
- ✓ Title XIX requirement for choice plans that is not a requirement in Title XXI.

In order to address these challenges, a HealthWave Taskforce will be convened after program start-up in January. The Taskforce will be chaired by Susan Kannarr, HealthWave Implementation Director. Membership will include representatives from Title XXI and Title XIX benefit plans, providers, SRS agency staff, budget staff, consumers, federal officials (if possible) and representatives from other state agencies. The goals of the Taskforce will be to identify the specific challenges and ways to overcome them to achieve seamless integration all within the current budget. In particular, the Taskforce will focus on developing additional capacity, contracting for XIX and XXI capitated managed care statewide, the behavioral health and dental systems and program rules. The Taskforce will make its report and recommendations by March 1999 to the SRS Executive Team. Staff from SRS and other entities represented on the Taskforce will prepare implementation steps including state plan changes, waiver requests and legislative requests. The Taskforce will be reconvened in April 1999 and will review the specific steps needed and any federal responses received. The Taskforce will then begin planning for the next phase of HealthWave with a scheduled implementation window of January 2000 to July 2000.

The Department is committed to identifying solutions to the challenges to integrating Title XIX and Title XXI. We believe integration is what is best for the families we serve. The solutions will require the collaboration of multiple entities including the executive branch, legislative branch, federal government, providers, insurance companies and consumers.

Thank you again for the opportunity to talk with you about the HealthWave program. I am available to answer any questions.



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HealthWave Child Health Survey

The *HealthWave* program is asking you to help us by answering the questions in this survey. We want to know how healthy your child or children are, and what kind of health services they have been getting in the past 6 months when they did not have health insurance. Your information is confidential and will help us to improve the services in the future. **Please complete a separate survey for each of your children in *HealthWave*. If you are in *HealthWave*, please complete one survey for yourself. Please mail the completed survey in the postage-paid envelope provided with this survey within 10 days.**

- In general, would you say that your child's health is:
 Excellent Very Good Good Fair Poor
- Compared with a year ago, would you say your child's health is now:
 Better About the same Worse
- During the past 12 months**, about how many days did your child miss school because of illness or injury?
 None 1-5 days 6-10 days More than 10 days
 Did not go to school
- During the past 6 months**, was there any time when your child **NEEDED BUT DID NOT GET** the following:
(check **ALL** that apply)
 Medical Care
 Dental Care
 Mental Health Care or Counseling
 Eye Care
 Prescription Medicine

 Received All the Care Needed
- All things considered, have you been satisfied or dissatisfied with the health care your child has received **during the past 6 months**?
 Very Satisfied Somewhat Satisfied Neither Satisfied Nor Dissatisfied
 Somewhat Dissatisfied Very Dissatisfied
- About how long has it been since your child last visited a doctor for a physical examination or well baby/child checkup?
 Less than 3 months Between 3-6 months Between 7-12 months
 Between 1-2 years More than 2 years Never

7. About how long has it been since your child last saw or talked to a dentist?
- 6 months or less More than 6 months, but not more than 1 year ago
- More than 1 year, but not more than 3 years ago More than 3 years
- Never

8. Is there a place that your child **usually** goes to when he/she is sick or you need advice about his/her health?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
<p>If Yes, what kind of a place is it? (please pick ONE)</p> <p><input type="checkbox"/> Doctor's office or private clinic <input type="checkbox"/> Hospital emergency room</p> <p><input type="checkbox"/> Hospital outpatient department <input type="checkbox"/> Local health department</p> <p><input type="checkbox"/> Community Mental Health Center (CMHC)</p> <p><input type="checkbox"/> Some other place</p>	
<p>Does your child usually see the same doctor/nurse/provider each time he/she goes there?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	

9. Not counting emergency room visits, how many visits did your child make to a doctor, clinic or local health department **during the past 6 months**?

None 1 2 3 4 5 More than 5 times

10. **During the past 6 months**, how many visits did your child make to a hospital emergency room?

None 1 2 3 4 5 More than 5 times

11. **During the past 6 months**, how many different times did your child stay in any hospital overnight or longer as a patient?

None 1 2 3 4 5 More than 5 times

12. Do you or anyone living in your home smoke cigarettes?

Yes No

13. At the present time, does your child have any health need that has not been met **because of no insurance**?

Yes No

Thank you for helping us!

HealthWave, P.O. Box 3599, Topeka, KS 66601-9738

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Cuestionario de Salud del Niño, Programa de *HealthWave*

El programa de *HealthWave* le está pidiendo su colaboración para contestar las preguntas de esta encuesta. Queremos saber qué tan saludable es o son sus hijos, y qué tipo de servicios de salud han recibido ellos en los pasados seis meses cuando no tenían aseguranza de salud. Su información es confidencial y nos ayudará a mejorar los servicios en el futuro. **Por favor complete un cuestionario por separado para cada uno de sus hijos en el programa de *HealthWave*. Si usted está en el programa de *HealthWave*, por favor complete un cuestionario por usted. Por favor regrese el cuestionario completo en el sobre pre-pagado que viene junto con esta encuesta dentro de los siguientes 10 días.**

1. En general, diría usted que la salud de su hijo es:
 Excelente Muy buena Buena Regular Mala
2. Comparado con **hace un año**, diría usted que actualmente la salud de su hijo es:
 Mejor Más o menos igual Peor
3. **Durante los pasados 12 meses**, ¿cuántos días de escuela perdió su hijo a causa de enfermedad o lesiones?
 Ninguno 1-5 días 6-10 días Más de 10 días No fue a la escuela
4. **Durante los pasados 6 meses**, hubo alguna ocasión en que su hijo **NECESITO PERO NO RECIBIO** alguno de los siguientes:
(Marque **TODOS** los que necesite)
 Cuidado Médico
 Cuidado Dental
 Servicios de Salud Mental u Orientación Psicológica
 Cuidado de la Vista
 Medicina Con Receta

 Recibió Todo el Cuidado que Necesitaba
5. Tomando todo en cuenta, ¿se encuentra usted satisfecho con el cuidado de salud que ha recibido su hijo **durante los pasados seis meses**?
 Muy satisfecho Algo satisfecho Indiferente
 Algo insatisfecho Muy insatisfecho
6. ¿Cuánto hace que su hijo fue al doctor la última vez para un examen físico o exámenes del niño sano (well baby/child checkup)?
 Menos de 3 meses Entre 3 y 6 meses Entre 7 y 12 meses
 Entre 1 y 2 años Más de 2 años Nunca

7. ¿Cuánto tiempo hace que llevó a su hijo con un dentista?
 Menos de 6 meses Más de 6 meses pero no más de un año
 Más de un año pero menos de 3 años Hace más de 3 años
 Nunca
8. ¿Existe algún lugar a donde lleve **regularmente** a su hijo cuando el/ella está enfermo o cuando usted necesita saber algo acerca de la salud de su hijo o hija?

<input type="checkbox"/> SI	<input type="checkbox"/> NO
Si es si, ¿qué tipo de lugar es? (Marque UNO) <input type="checkbox"/> Consultorio del doctor o clínica privada <input type="checkbox"/> Urgencias Hospital <input type="checkbox"/> Departamento de Salud <input type="checkbox"/> Medicina Externa del Hospital <input type="checkbox"/> Centro de Salud Mental <input type="checkbox"/> Otro lugar	
¿Su hijo regularmente va con el mismo doctor/enfermera/proveedor cada vez que va allí? <input type="checkbox"/> SI <input type="checkbox"/> NO	

9. Sin tomar en cuenta las visitas a la sala de urgencias (emergencias), ¿cuántas veces llevó a su hijo a consulta con el doctor, clínica o departamento de salud local **durante los últimos 6 meses?**
 Ninguna 1 2 3 4 5 Más de 5 veces
10. **Durante los pasados 6 meses**, ¿cuántas veces tuvo que llevar a su hijo a urgencias del hospital?
 Ninguna 1 2 3 4 5 Más de 5 veces
11. **Durante los pasados 6 meses**, ¿cuántas veces su hijo estuvo en el hospital internado por lo menos una noche o más como paciente?
 Ninguna 1 2 3 4 5 Más de 5 veces
12. ¿Alguna persona en su casa fuma cigarros?
 SI NO
13. Actualmente, ¿su hijo tiene algún problema de salud que no se le haya atendido **por no tener aseguranza?**
 SI NO

¡Gracias Por Ayudarnos!

HealthWave, P.O. Box 3599, Topeka, KS 66601-9738

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