

To: Chair Erickson  
Vice Chair: Senator Murphy  
Ranking Minority: Sen Holscher

From: Eileen M. Doran, Executive Director TARC

Re: COGE Hearing on HB 2240 and KDADS Proposed IDD Systems Change

Honorable Chair and Distinguished Members of the Committee:

My name is Eileen Doran, and I am the Executive Director of TARC in Topeka. For over 70 years, TARC has provided services for individuals with I/DD that enable them to achieve their goals and thrive in their community. TARC Services include day habilitation services, employment services, and case management. TARC is also the early intervention services provider and county designated CDDO for Shawnee County.

Thank you for the opportunity to provide testimony on the critical issues currently facing providers in the Home and Community-Based Services (HCBS) system and why HB 2240 has become critically necessary. I offer this testimony as someone who has provided advocacy in this field, in several states, for over 40 years. What I have learned in those 40 years is that a collaborative approach to any change provides the surest path to success; the KDADS path in this process has lacked transparency and collaboration and the result has been fear and distrust by families, individuals in services, and providers such as TARC.

KDADS has proposed not one but six major changes to the IDD system without prior input from the providers who are expected to implement the changes, or the families and individuals whose lives will be dramatically impacted by these changes. The attempt to change “Everything, Everywhere, All at Once,” while a clever title for a Hollywood movie, has been confusing and chaotic at best, and at

times the chaos created has felt intentional. Any one change required meaningful collaboration and planning to ensure “buy in” from stakeholders which would lead to long term success.

Each of the proposed changes will have dramatic impacts on our system and the people we serve.

The initial pace of the proposed number of changes overwhelmed providers and families alike.

While KDADS has now agreed to slow the pace of some proposed changes, it has moved forward on others without awaiting the recommendations of the many workgroups that have now been formed.

A good example is the TCM/ CDDO Conflict of Interest workgroup established by KDADS in collaboration with Interhab members **after** HB 2240 received approval in the House. We held our first meeting last week, but KDADS has not paused its plan to move forward with the recommendations of its out-of-state consultant, PCG. Pursuant to PCG’s recommendations, KDADS will offer grants expending millions of dollars by June 2025 before the stakeholder workgroups have had the opportunity to explore options which comply with CMS guidelines while minimizing disruption to families, services, and the staff currently employed by agencies such as ours.

TARC offers TCM services to over 185 children and adults. While only one-third of these receive their day and employment services through TARC, all individuals would be forced to change their TCM services. Many of these 185 individuals impacted have been in TARC Case Management since the inception of the service. The Shawnee County TCM affiliate network is already thinly stretched. We have had two TCM providers close in the last few years and others (all independent case management agencies) who are currently under Corrective Action Plans and unable to accept referrals.

As a provider of Day Habilitation and Employment Services in Shawnee County (the first provider in the county), TARC has evolved and adapted to system changes for over 70 years. The proposed system changes, with seven “new” service definitions, have been almost impossible to comprehend. Even KDADS has struggled to consistently describe what is intended in the new service definitions. How do they expect families and individuals in service to understand the impact on their lives when the interpretations change weekly? At first, we were told that all day services must be delivered in the community, creating a “program without walls.” Like many other providers, we serve individuals with significant medical needs in addition to other challenges. When KDADS wrote the definitions, it was as though they forgot the population who was receiving services. We have many individuals with feeding tubes, a few on oxygen, and over thirty who are non-ambulatory and require 2:1 staffing for bathroom support. Even if the community provided access for all these individuals, and most clearly it does not, the cost of safely delivering these services entirely away from the agency space would easily double. Make no mistake, most individuals in services already spend many hours of their day integrating into the community, in activities *they* choose, and TARC fully supports, encourages, and facilitates this community integration.

Another example is the course taken regarding prevocational services. KDADS initially proposed a limitation on how long individuals could receive prevocational services in a work center setting. The limit was two six-month periods within a 24-month period and the 12-month total was to be a lifetime cap. TARC has over one hundred individuals who participate in pre-vocational work training for at least part of their day. Many of these individuals work part-time in competitive community jobs as well as the work center. Some of the individuals have received employment training for over 35 years through TARC. Because of significant outcry from guardians and family members, **and** the

intervention of the legislature, KDADS has stated they are reconsidering these time limits on work center services. However, their proposed service definitions, most recently distributed just last week in a newsletter to stakeholders, have not changed. If KDADS is sincere that it is their intention to retract and reconsider the proposed service definitions, why have they not done so by now? Kansans with I/DD, their families that support them, and the providers who have served them for decades deserve to have their voices heard in this process.