

Promoting empowerment and Independence.

Madame Chairperson and Committee,

Thank you for the opportunity to speak with you today. My name is Kathy Lobb, and I work for the Self Advocate Coalition of Kansas. I have a disability. I am very concerned about our state moving to Managed Care for our Medicaid services. Before you approve of this drastic change I hope that you will ask- and will be able to answer- many important questions about handing our second largest state budget item to out of state for-profit companies.

I don't know if Managed Care is a good thing or a bad thing. I am told that it is a good thing because it saves money. It may save money, but at what cost? Does this mean that I have less choice in the services I receive? Does this mean I have less access to the services I need?

Why is the state moving so fast? No other state in the Union has moved so fast in adopting Managed Care. Managed Care has always been phased in over a period of time. If Managed Care is not implemented right, it will not only destroy the economic future of Kansas, but it will destroy lives of vulnerable people. People like me.

Why isn't the state offering the contract to businesses in Kansas? I'm a taxpayer. I want my tax dollars to support Kansas businesses. I want my tax dollars to stay in Kansas. Our state's recent experience with Boeing should show us that these companies do not have any loyalties to Kansas and our people.

Why haven't other states allowed Managed Care to oversee developmental disability services? Kansas uses less than 3% of the DD Budget to administer services. Where will these companies find their profit? Other states have carved out DD services from Managed Care. Why hasn't Kansas?

I hope you think about these questions and others people will raise before you approve Managed Care in Kansas.

Thank you,

Kathy Lobb,

Legislative Liaison, Self Advocate Coalition of Kansas

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2518 Ridge Court Rm 236 Lawrence, KS 66046

The Alliance for Kansans with Developmental Disabilities

Written Testimony for the Senate Public Health and Welfare Committee

January 19, 2012, 1:30 PM

To: Senator Vicki Schmidt, Chairperson

Members, Senate Public Health and Welfare Committee

From: Richard Shank, Governmental Affairs for The Alliance for Kansans with Developmental

Disabilities

Re: "KanCare" Managed Care for People with Intellectual and Developmental Disabilities

Thank you Senator Schmidt and members of the Committee for allowing me to speak to you on behalf of The Alliance for Kansans with Developmental Disabilities. We ask that you consider exempting long-term care services to people with developmental disabilities (DD) from the proposed KanCare overhaul of Medicaid. Over the years, community based services have been available to our State's most vulnerable citizens. During these years, community providers and the State of Kansas have worked together so well that these services are regarded as some of the best in the country. And as you have already heard, these services now cost less per person served than they did in 1993.

Managed Care Organizations (MCOs), interested in participating in KanCare have already stated that they will only save and/or make money on managing the State's community based long-term care to people with DD through improving medical care. In that every person in services already has a physician, MCOs can still economize on the medical care of those people by managing their medical cases, but not their long-term care. There does not appear therefore, to be a valid reason to take an exemplary community based program and change its administration if there is no perceivable benefit to any party.

If community based services to people with DD are not exempted from inclusion in the new KanCare system and that system experiences something that was not intended in the contracts with the State, the potential for harm to the recipients could be significant.

In Kansas, community based long-term care to those with DD is one of the most well run, collaborative systems in the country. If there are no cost savings or programmatic benefits to the Medicaid system to include DD services in KanCare, exempting those services from managed care makes sense. For this reason, we respectfully recommend this committee carefully consider recommending a "carve out" of long-term care for people with DD from the KanCare system.

Thank you for your willingness to extend this committee's hearings and consider all the added testimony for what could be one of the most important issues of this legislative session.