



Sedgwick County
Developmental Disability Organization

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TO: Senator Vicki Schmidt, Chair and Members of the Public Health and Welfare Committee
FR: Chad VonAhnen, Director
Sedgwick County Developmental Disability Organization
RE: KanCare and the Developmental Disability System

**Testimony on KanCare and the Developmental Disability System
Monday January 23, 2012**

Thank you, members of the committee, for the opportunity to provide this testimony. The Sedgwick County Developmental Disability Organization (SCDDO) is a CDDO managing a network of 53 community service providers. We would like to express concerns over the proposed KanCare managed care program, specifically on the issue of long-term supports and services for the developmentally disabled (DD).

KanCare may provide opportunities to increase the efficiency of medical care for people with developmental disabilities. We support the focus on competitive employment and the goal to increase opportunities for independence and integration for people in services. However, the impact of inclusion of long-term supports and services is something that still remains unclear. Other states, such as Texas, have studied the inclusion of developmental disability services in managed care and have decided to carve them out as there was no cost savings to be attained. We have been told the administration has evaluated other models on the implications of including DD long-term supports and services in managed care. However, we remain unclear on the details of the other models that have been evaluated and the evidence these models can be replicated in Kansas.

The proposed plan makes dramatic changes and adds complexity to a DD system that already has the characteristics of managed care. CDDOs provide the administration of the system, the role an MCO will play, for a minimal cost. Through the CDDO structure we have been able to maintain local management of developmental disability services and have kept the administration of peoples' services close to their home.

Families have expressed concerns and apprehension. They want reassurances that when they have questions about their services they can get them dealt with. Families on the waiting list want to know what this change means for them. Will their sons or daughters ever come off the waiting list when funding for their services is turned over to for-profit companies? There still is not a clear answer to how the waiting list will be funded.

Families have heard about the failed privatization of in-home care assessments in Missouri, a contract which lasted only three months. They have heard about Connecticut and Oklahoma discontinuing their Medicaid managed care programs entirely. Understandably, this creates worry for the care of their children. Their questions are not driven from resistance to change but rather their desire for the long-term well being of their children and assurance their needs will be met when a company's profits are on the line.

We are appreciative of the many opportunities to continue this discussion with the Lt. Governor and his staff as well as Secretary Sullivan and his staff but continue to be in disagreement. The National Association of State Directors of DD Services (NASDDDS) has a policy statement on managed care of services for those with developmental disabilities. As part of the statement, NASDDDS says the following:

However, the translation of managed care approaches to long-term developmental disabilities support systems is largely uncharted territory and, hence, extreme caution is warranted. There is no evidence that managed care models which have evolved in the health care field can be adapted successfully to the financing and delivery of long-term supports to people with developmental disabilities without significant modifications.

We have been told by the administration the desire is to keep the current DD system intact. If that is the case, then I cannot help but wonder why we would just not carve the long-term services of the DD system out of KanCare. Our most pressing questions continue to be, where is the evidence? Why the rush? And, why at all? I thank you for the opportunity to provide this testimony.