January 13, 2015

TO: Representative Dan Hawkins, Chair and Honorable Members

House Committee on Health and Human Services

FR: Tom Laing, Executive Director, InterHab

We appreciate the committee's consideration of the State's integrated waiver proposal to be the new model for the provision of all home and community based services.

We encourage your committee to engage this topic thoroughly and develop strong assurances that the major challenges facing the IDD community are not forgotten while we embark on yet another massive system change.

Like KanCare, the proposed integrated waiver is first and foremost a significant change NOT in the quantity and quality of services, but in the administration of services.

Like KanCare, the integrated waiver will result in a dramatic overhaul of all HCBS programs, in ways that impact everyone who relies on HCBS and their families as well.

As you consider and advise the administration on whether or not to go forward with the integrated waiver approach, we ask that numerous long-standing issues be at the front of that conversation:

Reimbursement rates:

Ron Pasmore and Patti Knauff have submitted written testimony generally concerned with the State's long overdue need to adjust reimbursement rates, with Ms. Knauff's testimony specifically targeting the impact on our ability to recruit and retain quality staff, when we are so far beyond in basic rate adjustments to enable us to remain viable players in the competition to employ a satisfactory workforce for our services. The integrated waiver should not be advanced unless basic workforce needs are first addressed. **Our State cannot honestly claim that we care for the needs of vulnerable Kansans if sufficient resources are not appropriated to hire, train and employ a workforce committed to quality care**.

Employment of persons with disabilities:

Before moving to the integrated waiver approach, the State should finish its promises to invest millions of dollars in system change training and technical assistance for employment activities. As we enter 2016, the funds earmarked for the plan called "End Dependence" are still not at work. And in this most recent year, **15 million Federal dollars earmarked for employment of persons with disabilities was returned to the Federal government**, despite that the legislature had appropriated sufficient funds to match those dollars. **We strongly urge the Legislature to get to the bottom of that deeply concerning loss of funding.**

State management of existing programs:

In many areas, State management issues persist. The KDADS data system is a prime example. KAMIS as it is known continues to underperform. This has raised significant questions and issues relating to the management of **waiting lists** for the waiver programs, which have not been significantly reduced.

We remain deeply concerned that the underfinancing of state management staffing has made KDADS work increasingly difficult, which raises questions as to whether management capacity exists at KDADS to oversee yet another re-design and implementation of the HCBS program. Administrative understaffing is an invitation for significant program failures and controversy, from which no one benefits.

Rather than advancing into the integrated waiver, and the many months of turmoil that is likely to create, we ask the Legislature to encourage the administration to move forward collaboratively with all stakeholders to assure that positive opportunities for programmatic improvements exist, including:

Health homes for persons with IDD are the most broadly supported innovations offered in tandem with managed care. This approach is the one true long term cost containment innovation for the IDD community, and **we encourage the Legislature to move to support the development of a robust "health home" pilot for persons with IDD**.

Shared living programs are affordable and are often ideal for certain persons with IDD who may not thrive in other settings. This program has been brought to a standstill, and service providers offering this model are in statutory and regulatory limbo. **We support and pledge to assist State attempts to take administrative steps that are needed to get a better handle on this program. However, we encourage this topic to receive a legislative hearing in January, and if a statutory change is needed, that such remedy be timely drafted and adopted**.

SUMMARY:

The sustainability of community IDD services requires not another massive system change, but a renewed commitment to adequate funding, consistent management, and collaborative efforts to improve current programs and embrace prudent innovation. Where are we in these regards?

We appreciate the constructive and ongoing communications among the State and its stakeholders, but we want these communications focused on the needs of those who are served by the community IDD system.

Focusing on the persons' served, rather than on administrative system change, has always been the strength of the Kansas model, and we need you to help lead forward to that ideal.