

February 9, 2018

**Testimony before Senate Ways and Means Committee
Opponent
Senate Bill 332**

Madame Chair and members of the committee.

I am Frank Clepper, President & CEO of Amerigroup Kansas, Inc. Amerigroup serves 130,000 Kansans through the KanCare program. Of those 130,000, over 2,700 are members with Intellectual or Developmental Disabilities (IDD). Amerigroup's program provides holistic, comprehensive care across the full-spectrum of health needs for all our members; and we do this by employing over 290 Kansans to serve their fellow Kansans.

Amerigroup is testifying in opposition to Senate Bill 332. We're proud, as a company, to be engaged in the Kansas Medicaid program. It is a program progressive in scope as a fully integrated care management model; one of only a few programs in the country that, by design, ensures that a Medicaid beneficiary's complete continuity of care – medical, behavioral, pharmacological, and Long Term Service and Supports – is central to ensuring the appropriate services and interventions are available to achieve the best outcomes for the beneficiary. To support this focus on improved outcomes, Amerigroup brings to bear the strength of dedicated staff of care management associates, robust healthcare delivery and outcome analytics, and depth of experience across the nation in serving Medicaid beneficiaries.

Amerigroup opposes this bill because we firmly believe that it will result in segregating and isolating a population of Medicaid beneficiaries, excluding them from the benefit of an integrated care model, and depriving them of this higher level of support in ensuring their care. Our focus, at Amerigroup, has and always will be on our members; ensuring they have the right services in the right amount to support better outcomes, as well as encouraging their continued independence and integration.

Amerigroup's success in improving the outcomes for these members is supported in fact not conjecture.

Year over year member satisfaction as measured by an independent, nationally recognized quality assurance organization that measures health plans national have consistently demonstrated strong member satisfaction in all key areas.

There is a universal increase in the number of members receiving IDD waivers services today compared to their entry into the KanCare program in 2014. Members receiving day services increased by 54%, residential services increased by 47%, self-directed PCS services increased by 57%, wellness monitoring increased by 60%, personal emergency response system increased by 69%, and supported employment services increased by 36%.

Additionally, we have improved service access significantly. Amerigroup: approved additional services for 202 members previously on the IDD underserved wait-list effectively eliminating the underserved wait-list; provided 32 members with assistive services, home modification directly based on need, rather

than previously when these services were only available if there were excess annual waiver allocation funds at the end of the year; provided 210 members with overnight respite services; provided 123 members with sleep cycle/enhanced care services; and eliminated the wait list for Extraordinary Funding for day and residential providers. These actions demonstrate an expansion of services that were not available or accessible prior to KanCare.

Additionally we have improved the overall program integrity, providing a higher level of oversight to a member's continuity of care and ensuring a conflict free assessment process to guarantee the needs of our IDD members are appropriately met. And we continue to religiously measure outcomes by tracking Healthcare Effectiveness Data and Information Set (HEDIS) scores which have – in measures primarily associated with IDD members – demonstrated year-over-year improvement. From 2014 to 2016 (the last full measurement year) an 8% increase in Comprehensive Diabetes Care, including a 15%, 14% and 27% improvement in HbA1c testing, retinal eye exams, and medical attention to nephropathy respectively, as well as a 3.5% increase in adolescent immunizations.

Lastly, Amerigroup's programs and processes are member-centric, clinically robust, and fully transparent. Our person centered support plan process includes a medical doctor's review of ALL plans prior to approval. We assign registered nurses to provide service coordination for medically complex members among our IDD members. And members are granted their full rights to due process through a robust Notice of Action process that notifies members of any adverse action related to an IDD service request decision and provides them full appeal rights by themselves or their designated representative.

In summary, Amerigroup opposes SB 332 – we do not believe this bill is in the best interests of the IDD community. We are concerned the bill will result in a reduction of access and available services that have been recognized as articulated above. This bill will effectively, once again, segregate our IDD members from the full and beneficial integrated care model that has delivered significant improvements to their overall care since their inclusion in the program in 2014.

Thank you for your time today.

Respectfully submitted,



Frank Clepper
President & CEO
Amerigroup Kansas, Inc.