

Holly Benson
Sunflower State Health Plan

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Good morning, Madame Chairman and members. My name is Holly Benson, and I am with Sunflower State Health Plan. I am honored to be here today to provide you an update on our implementation progress with KanCare.

For those of you who may not know, Sunflower is part of Centene Corporation, which is headquartered in St. Louis, and while Sunflower may be new in Kansas, Centene is not. Our sister company Cenpatico has been serving the mental health needs of HealthWave kids since 2005. Beyond Kansas, Centene is currently serving Medicaid beneficiaries in 18 states. In each of those states we have established a local presence because we believe health care is best delivered locally. We are committed to providing fully-integrated care to all of our members, and we believe in holding ourselves accountable for improving health outcomes for our members.

We are excited about doing business with the state of Kansas and about serving Kansans. Even before we were awarded our contract with the state, we were traveling the state identifying Kansas leaders to serve on our Board of Directors and on our advisory committees, including our Provider Advisory Committee, our Member Advisory Committee, our Community Advisory Committee and more. Our advance team executed Letters of Intent with providers across the state to lay the foundation for having a strong network, and we began establishing relationships that would ensure we are meeting the needs of the Kansans who depend on KanCare.

Since signing the contract with the state, we have been actively engaged in building our plan, and today I'd like to update you on our staffing, our contracting, services, our operations and our progress in ensuring we're ready for January 1.

Staffing: We have been steadily building our leadership team. In addition, because of the significant care coordination needs of our potential members, we have been interviewing case managers across the state to ensure that we can reach members in their communities. We want relationships with our members and with our providers, and we can only do that by being in the communities we serve. We have also been working with the staff at KDADS to ensure that there is a smooth transition for members whose case managers may become part of our team.

Contracting: It was made clear to us that one of your priorities is to improve beneficiaries' access to care. KDHE and KDADS have asked us to offer contracts to every provider who currently serves Medicaid beneficiaries and to work to expand access to care. Once the state approved our contract templates, we began circulating them to providers across the state. In order to provide additional information to providers, we have also secured permission from the state to share a draft of our provider manual. Every day we are getting signed contracts in the mail, and our contracting team is across the state every day meeting with providers to enlist them in our network. The state expects us to have

achieved 90% of network adequacy by October 12, and we are optimistic that we will have a strong network in place by then.

Services: As part of our contract with the state, we are not only expected to cover existing services but also offer value-added services. We have developed additional benefits to offer to members ranging from dental services for adults to respite care for families who care for individuals with developmental disabilities, from enhanced services for pregnant and new moms to the CentAccount which rewards members who engage in healthy behaviors.

Operation: Because we are part of the Centene Corporation, we have expertise in IT operations, claims payment, medical management and more. Our teams have been in Kansas meeting with the state and with provider groups to ensure we capture the Kansas-specific variations. We have worked in partnership with the other MCOs and the state to identify ways we can simplify and reduce the administrative burden for providers. We want to make it easy to do business with us.

Plan readiness: I know that you all want to ensure that this major initiative is a success and that KDHE and KDADS are holding us accountable for delivering quality services within the budget they predicted. Your agency leaders have been meeting with us at least once a week to give us assignments, to share information with us and to answer our questions. They have requested regular submission of information, and each of the plans is going through several rounds of readiness reviews where they get to review our business models. In these reviews, they are evaluating our contracting efforts, our policies and procedures, our medical management strategies, our claims payment processes and more. I am sure there will be some challenges as we go live in January, but your agencies are doing everything they can to make sure that we deliver on the promise of KanCare.

Outreach efforts. You have probably heard of the agencies' efforts to provide provider and member education. We have traveled with them to cities across the state on several educational tours to provide information to your constituents. The meetings have been well-attended, and the questions have been thoughtful. Everyone wants to make sure they are ready for the changes ahead. And there are more tours to come. In addition, we have been working in partnership with a number of associations, including KMS, KHA, KHCA, LeadingAge, KAMU and more on webinars to provide their members with an opportunity to get their questions answered. These have been a valuable opportunity for us and for the provider community.

We are making steady progress towards the January 1 launch of KanCare. You all have placed a great deal of confidence in us and our ability not only to serve Kansans who depend on Medicaid but also to save your constituents' money. We have appreciated the efforts of your agencies to work with us in partnership to ensure a smooth transition for members and providers. Thank you both for the opportunity to present to you today and for the opportunity to serve Kansans.