

MINUTES OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

The meeting was called to order by Chairperson Brenda Landwehr at 1:30 PM on Thursday, March 15, 2012 in Room 784 of the Docking State Office Building.

All members were present except:

- Representative Hermanson – Excused
- Representative Winn – Excused
- Representative Ward - Excused

Committee staff present:

- Norm Furse, Office of the Revisor of Statutes
- Katherine McBride, Office of the Revisor of Statutes
- Martha Dorsey, Kansas Legislative Research Department
- Jay Hall, Kansas Legislative Research Department
- Debbie Bartuccio, Committee Assistant

Conferees appearing before the Committee:

- Dr. Robert Moser, Secretary, Kansas Department of Health and Environment
([Attachment 1](#))
- Secretary Shawn Sullivan, Kansas Department on Aging ([Attachment 2](#))

Others in attendance:

See attached list.

HB 2457–MR/DD waiver programs; exemption from the managed care system

HB 2573–Enacting the KanCare accountability act

Chairperson Landwehr opened the hearing on the bill which was a continuation of the committee hearing on March 14, 2012.

Secretary Moser provided an overview on KanCare, Kansas Medicaid Integrated Care. He stated long-term increases in Medicaid spending are due to an increase in enrollment and spending per person. It is not “just the economy” - Kansas is in the middle of a sustained period of accelerated growth as baby boomers reach age of acquired disability.

Kansas Opportunities include:

- Reducing Health Care Fragmentation
- Integrated Whole-Person Care
- Preserving Independence or Creating a Path to Independence
- Alternative Access Models

Unless specifically noted, the individual remarks recorded herein have not been transcribed verbatim. Individual remarks as reported herein have not been submitted to the individuals appearing before the committee for editing or corrections.

CONTINUATION SHEET

Minutes of the HOUSE HEALTH AND HUMAN SERVICES Committee at 1:30 PM on Thursday, March 15, in Room 784 of the Docking State Office Building.

There will be 3 integrated care companies from which to choose to enroll with. Your KanCare company will:

- Improve your health and coordinate all aspects of your care.
- Be held accountable for improving your health, not for cutting services.
- Use established community partners, such as CDDOs, CMHCs, CILs and AAAs.
- Ensure provider quality.
- Educate you about your health, medications and preventative measures you can take.

Health homes will be created initially for individuals with a mental illness, diabetes or both. KanCare performance measures will include 1) physical health, 2) behavioral health, and 3) long-term care. ([Attachment 1](#))

Secretary Sullivan reviewed a document which covered KanCare frequently asked questions. ([Attachment 2](#))

Both Secretary Moser and Secretary Sullivan responded to questions from the committee. Secretary Moser stressed their commitment to the level of oversight and the measurement of outcomes to assure quality results. He encouraged feedback from all interested parties and will work to resolve issues as they are identified.

Chairperson Landwehr commented with the reduction of federal funding over the years, Kansas has been blessed with not having to cut people off from services. Waiting lists have sometimes increased but we have not had to cut people off from services. However, we're at the point that it appears something needs to change. She expressed confidence in the leadership of Dr. Moser at the Kansas Department of Health and Environment and encouraged providers to become partners by offering ideas and suggestions with the ultimate goal of providing quality services to the clients who need them. She also announced the creation of the Joint Oversight Committee on KanCare.

Chairperson Landwehr closed the hearing on the bill. The meeting was adjourned at 3:21 p.m.

No further meetings are scheduled.