

KANSAS OPTOMETRIC ASSOCIATION

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Joint Committee on Home and Community Based Services and KanCare Oversight

November 25, 2013

I am Gary Robbins, Executive Director of the Kansas Optometric Association. Thank you for the opportunity to make a few remarks to the Joint Committee.

Change is always difficult and there have been a few bumps in the road with the transition to managed care, but as we approach the end of the first year of KanCare, several things have become apparent to me. The first is that all three managed care organizations have been willing to listen to our concerns and openly discuss our differences. We have enjoyed positive and constructive dialogue by concentrating on quality patient care. We have experienced a few problems with Amerigroup and their vision subcontractor Ocular Benefits, but the issues that were identified were quickly resolved thanks to CEO Laura Hopkins. Optometrists have also experienced ongoing challenges in working with OptiCare, the vision subcontractor for both Sunflower and United. Through this process, we have been impressed by the willingness of Sunflower CEO Jean Rumbaugh and both United Plan President Tim Spilker and COO David Rossi to meet with us, along with their medical directors and OptiCare CEO Dr. David Lavelly. We have overcome differences and made significant progress by listening to each other and putting the best interests of patients first.

Also apparent through this first year are the tremendous efforts of Kari Bruffett and the Kansas Department of Health and Environment in implementing managed care, which has been remarkable in this extremely complex process.

Through the hard work of these thoughtful people, KanCare members will continue to receive a complete preventative eye exam. These exams may identify previously undiagnosed medical conditions ranging from high blood pressure to brain tumors; glaucoma to diabetes; heart disease to stroke risk. The MCOs and their representatives have seen that the benefit in finding and treating these conditions provides cost savings to the State of Kansas and improves healthcare outcomes for KanCare members. The MCOs have agreed to help us improve continuity of care by providing case managers to assist patients who may be struggling with the treatment plan for a new chronic disease diagnosis. In working with the MCOs to show that these exams provide much more than vision correction, optometrists will be voluntarily providing diagnoses that are evaluated for or found during the comprehensive eye exam to better identify care being provided to the KanCare member. In the future, this will allow the MCOs to provide more quality of care data to the Joint Committee, showing the benefits of preventative care.

This attitude of cooperation by the MCOs, KDHE, and the Kansas Optometric Association has allowed for ongoing quality of care, access and cost savings policies that have a potential to benefit all involved. On a personal note, I appreciate the patience of all three MCOs and KDHE for working with me on some contentious issues.



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American Optometric Association

Robert G. (Bob) Bethell Joint Committee on
HCBS & KanCare Oversight
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