

Brown County Developmental Services, Inc.

"Expanding Horizons for People With Intellectual Disabilities"

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Testimony of Brown County Developmental Services, Inc. in support of SB 332 – February 6, 2018

Brown County Developmental Services, Inc. (BCDS), located in Hiawatha, KS, is a small agency providing long term services and supports to 40 adults with intellectual and or developmental disabilities (I/DD). **BCDS has been in existence since 1968** making this our **50th year in operation**. BCDS was started as the Brown County Day Care Center by a group of parents of children or adult children with I/DD that banded together to provide day care for their family members, since at that time there was no special education or other services available. Nine of those original twenty children still receive services through BCDS and are now in their 70's. **This is a great example of provision of long term services and supports (LTSS).**

So for 50 years, BCDS has helped parents "care" for their disabled family member during the day. A sheltered workshop and community employment were necessary for people with intellectual disabilities since their disability **could not be cured by medical care**. **Residential** Services began in **1984** with a group home and now all people with res services live in their own apartments with staff help. **So for 34 years** we have been responsible for **both long term day and residential services** if requested. BCDS also takes responsibility for the health care of people in residential services, and if requested, for folks just in day services. This means **taking people to doctors, dentists, optometrists, and specialists**. Case managers (CM) have tracked all health issues such as seizure disorders, diabetes, mental illness, etc. They monitored medications, making sure appropriate meds were prescribed and unnecessary meds were discontinued. They oversaw that mammograms, prostate checks, colonoscopies, and all other suggested health checks happened for the people in residential services.

Long term care at BCDS means services provided from **age 18 until the person's death**. This also means family members have peace of mind knowing that BCDS will make sure their relative with I/DD will have help to live safely, happily, and healthily, even after they are gone. **Long term care** services are **NOT medical** in nature and thus **do not fit with a "managed care" model** through large for-profit insurance companies who refer to people with I/DD as "patients" and day and res services as "visits".

In **2014, when KanCare began**, service providers like BCDS were skeptical. We couldn't imagine how strangers could be assigned to assist our clients better than those of us who've been doing it for so many years. **Family members were promised** better physical health such as comprehensive diabetes care on the medical side and also increased competitive employment on the long term care side. MCO's also promised "value added services" such as assistance with adaptive equipment, access to psychiatrists specializing in dual diagnosis (this included a team flying in from out of state during crisis situations), a care coordinator to attend doctor appointments or find them jobs. These were **empty promises**.

The **reality** is the **care coordinators** are required to do a **face to face visit twice a year** with people assigned to them. They also attend meetings when clients aren't present so they can fill in the blanks on their

insurance form templates. They **ask the case managers** if the person has had a mammogram, colonoscopy, etc. They **ask how many hours of community employment** they have and **where they live**, but don't go see where they live. **CC's are simply MCO data entry staff** who aren't given access to the health information that **should** be available to them from the MCO paying for it. They have to depend on the service provider staff to do their job for them in terms of health care and long term services. They have no knowledge of where a person with Down Syndrome could work and live for the rest of their life, and yet the MCO's promised Kansas to provide this. **Why would Kansas pay for this?**

In the beginning of KanCare, everything the care coordinators were supposed to do related to medical, because that's what the MCO's knew how to do for "patients". More recently they were also assigned to write a "person centered care plan", which was to be about the **long term care services paid for by the MCO**. If BCDS case managers get copies of these long term care plans, they are always inaccurate. PCCP's for one MCO are known for starting out with the name of a client, switching by the second page to a different client's guardian/family member, by the third page listing as preferred activities something the client has never done or a preferred food such as calamari which they've never even tasted. It is obvious that they write plans on top of other plans, failing to delete the prior client's information. They are paid very large salaries to write an inaccurate PCCP when the case manager has written an accurate PCSP. **Why would Kansas pay for duplicate services?**

In conclusion, **Long Term Services and Supports for individuals with intellectual disabilities should be carved OUT of KanCare**. Any parent/guardian will tell you that they don't know their relative's care coordinator, don't know what their purpose is, and prefer to work with the case manager and service provider of their choice, who knows their relative and their needs.

Thank you for your consideration, I hope this information will positively impact your decision to support and move SB 332 out of committee.

Linda Lock, Executive Director
Brown County Developmental Services, Inc.