## SENATE BILL No. 228

## By Committee on Ways and Means

3-14

AN ACT enacting the Kansas medicaid reform act; relating to requirements for services and supports provided under the Kansas program of medical assistance; requiring legislative approval prior to certain changes to the Kansas program of medical assistance.

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Be it enacted by the Legislature of the State of Kansas:

- Section 1. (a) This section shall be known and may be cited as the Kansas medicaid reform act.
- (b) This section provides minimum standards for services and supports provided under the Kansas program of medical assistance, including the state medicaid plan and any home and community based services waivers administered thereunder.
- (c) As used in this section, terms and phrases mean the same as defined in title XIX of the federal social security act, 42 U.S.C. § 1396 et seq., any federal rules and regulations promulgated thereunder and any United States department of health and human services policies and guidance related thereto, as such terms are defined on February 1, 2017.
- (d) All services provided under the Kansas program of medical assistance shall:
- (1) Address the immediate and ongoing needs of program enrollees, including, but not limited to, the following populations: Non-elderly adults; seniors; individuals with physical, intellectual or developmental disabilities; individuals with traumatic brain injuries, mental illnesses or substance abuse disorders; and individuals with other severe, chronic disabilities;
- (2) be designed and implemented to ensure that state medicaid services help individuals attain and retain the capacity for independence and self-care and to promote person-centered planning, consumer choice and self-direction of services;
- (3) provide supports and services, including medical and mental health services, that are sufficient in amount, duration and scope to reasonably achieve the purpose of such supports and services as determined by a participating physician, service provider or other healthcare professional licensed by the state of Kansas;
- (4) ensure that methodologies, procedures, service limitations, protections or eligibility standards under the Kansas program of medical

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assistance or any home and community based services waiver administered thereunder are not more restrictive than any methodology, procedure, service limitation or eligibility standard in effect on February 1, 2017;

- (5) provide supports and services, including medical and mental health services, that are no less in amount, duration or scope than supports and services that are available to any other similarly situated enrollee under the Kansas program of medical assistance;
- (6) provide comprehensive preventive, acute and chronic care supports and services, including medical and mental health services, for individuals aged 0 to 21 years who are eligible for state medicaid services, including supports and services that are necessary to correct or ameliorate physical or mental conditions as listed in 42 U.S.C. § 1396a, as such section exists on February 1, 2017, and as ordered by a participating physician, service provider or other healthcare professional licensed by the state of Kansas; and
  - (7) where possible, utilize:
- (A) Community based services in order to promote coordination of such services;
- (B) programs and standards that facilitate necessary and appropriate services in the most integrated setting appropriate to the needs of the individual; and
- (C) for supports and services, including medical and mental health services, provided for children aged 0 to 18 years, programs that focus on family, parental or legal guardian participation in all aspects of planning and delivering such services in order to enable children to remain at home with families or legal guardians where possible.
- (e) (1) The process to apply for supports and services, including medical and mental health services, under the Kansas program of medical assistance or any home and community based services waivers administered thereunder shall be available to all residents of Kansas or such residents' parents or legal guardians, where appropriate. Any individual applying for such supports and services who requires assistance to complete the application process shall be furnished such assistance with reasonable promptness.
- (2) The department of health and environment and the Kansas department for aging and disability services shall use reasonable standards to determine eligibility for supports and services under the Kansas program of medical assistance and the extent of such supports and services to be provided to an individual. Such standards shall not be more restrictive than those standards in effect on February 1, 2017.
- (3) When supports and services, including medical and mental health services, that are covered by the Kansas program of medical assistance or

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any home and community based services waivers administered thereunder are ordered by a participating physician, service provider or other healthcare professional licensed by the state of Kansas, eligibility shall not be denied or reduced in amount, duration or scope to an otherwise eligible individual solely because of the individual's diagnosis, type of illness or condition.

- (4) When a claim for supports or services, including medical or mental health services, under the Kansas program of medical assistance or any home and community based services waivers administered thereunder is denied or not acted upon with reasonable promptness, including making an eligibility determination, individuals with such claims shall be provided a fair hearing before a hearing officer, including a hearing before the office of administrative hearings.
- (f) (1) The Kansas program of medical assistance is subject to oversight and appropriations by the Kansas legislature. Any proposed changes to the state medicaid plan or any waivers related thereto shall be submitted to the senate standing committee on ways and means, the house standing committee on appropriations and the Robert G. (Bob) Bethell joint committee on home and community based services and KanCare oversight, including: Eligibility, structure, scope, funding, services or administration; policies and procedures relating to operation or implementation; and any applications, submission data and relevant information submitted to the federal centers for medicare and medicaid services related to any such change.
- (2) No state agency shall make or implement any changes to the structure, scope, funding, services or administration of the Kansas program of medical assistance, any home and community based services waivers administered thereunder or any other waivers related thereto without express prior authorization by an act of the Kansas legislature.
- (g) The secretary of health and environment and the secretary for aging and disability services shall adopt rules and regulations as may be necessary to implement, administer and enforce this section.
- Sec. 2. This act shall take effect and be in force from and after its publication in the Kansas register.