



Kansas Advocates  
for  
Better Care

# Making Elder Care Better Since 1975

Founded in 1975 as *Kansans for Improvement of Nursing Homes* by concerned citizens like you.

February 13, 2013

Chairman Crum, and members of the House Committee on Health and Human Services:

Thank you for the opportunity to comment on HB 2025 establishing a statutory process for the legislative oversight of KanCare. I am Mitzi McFatrach, executive director of Kansas Advocates for Better Care (KABC). KABC is a not-for-profit organization, beholden to no commercial interests and is supported almost entirely by donations from citizens who support our mission of improving the quality of care in all long-term settings. KABC was among a handful of non-profit consumer advocacy groups which worked to win passage of the landmark Nursing Home Reform Act of 1987.

KABC supports the establishment of legislative oversight of the KanCare program and provisions proposed under HB 2025. Creating a legislative review of the KanCare managed care program by Kansas legislators is critical to gauging the program's effectiveness. Legislative oversight provides an important check and balance for tax payers, citizens, consumers, the state agencies administering KanCare and managed care organizations. Kansas policy can provide active oversight of the outcomes and the impact of KanCare on the State's budget and on the people served through KanCare. The current advisory council, or any advisory council, lacks oversight authority that it might exercise over this program or on behalf of citizens.

KABC believes legislative oversight is particularly important because KanCare's first year outcomes primarily set and measure administrative processes, not meaningful health outcomes for seniors. Measures that track business activity do not measure the health outcomes of elders and vulnerable adults. Only one metric, reducing resident falls, relates directly to health of adults in adult care homes. It is our hope that legislative oversight will encourage the tangible health outcomes for residents and the metrics to measure, such as tracking actual nurse staffing levels in nursing homes from payroll data and regular maintenance dental coverage for frail adults.

While we support the creation of legislative oversight through a standing joint committee, as proposed in HB 2025, we would recommend amending the bill to specifically include members of House Health and Human Services Committee and the Senate Committee on Public Health. Again, we believe it is essential for KanCare's effectiveness to be measured on its impact on the people served as well as in budgetary terms.

We agree with the Kansas Health Consumer Coalition (KHCC) recommendation to add specific language requiring a comparison and review of caseload data based on persons served among the information reported by the State. This caseload information should be included in the items specified under Sec. 1(e)(2). Currently, the bill calls for expenditure and budget data only. The list of data to be reported to the committee should also include a side-by-side comparison of

persons served in each of the programs for both pre- and post-KanCare implementation, in addition to the budget information as set out in the current version of HB 2025.

Similarly, we support adding both caseload and expenditure data related to long term care facilities to the items delineated under Sec. 1(e)(2). Historically, the HCBS Oversight Committee did not provide oversight for long term care in all settings, specifically, adult care facilities such as nursing homes and assisted living facilities. In the recent past that data was reported to the Kansas Health Policy Authority (KHPA). After the KHPA was disbanded, the reporting of that data has been made only to legislative budget committees. With KanCare's heavy emphasis on home and community based services, it is critical that the program's impact on residents of adult care homes also be among the information measured and reviewed by the oversight committee.

KABC also supports adding language regarding the meeting of the joint committee with a frequency of once per month during the legislative session and in each quarter outside of the legislative session. An annual reporting schedule provides only enough time for basic reporting by State agencies with little time for consumer or industry input or an opportunity for timely legislative follow-up. Given the breadth and scope of KanCare on both consumers and the State's budget, we support directing the committee to meet at least quarterly.

Thank you for the opportunity to express our support for HB 2025 and to offer recommendations that strengthen the oversight process. Legislative and public oversight of KanCare is a singularly critical protection for frail elders who rely on Medicaid for their long term supports and health care. Oversight by policy-makers must be in place for seniors, both residents of nursing homes and those who are still living at home.

On behalf of Kansas Advocates for Better Care members and volunteers,  
Mitzi E. McFatrach, Executive Director