

Bethell Joint Committee on HCBS and KanCare Oversight**April 20, 2022****Lou Ann Kibbee, Systems Advocacy Manager**

Thank you Chair and committee members for allowing me to present my written testimony to you. My name is Lou Ann Kibbee and I am the Systems Advocacy Manager for Southeast Kansas Independent Living (SKIL) Resource Center. SKIL is a Center for Independent Living that advocates for the rights of, and provides services to, thousands of people of all ages with all types of disabilities annually across the State of Kansas. We fight for justice and equality with and for them, to have the same opportunities as other people do. Opportunities to live in our homes, receive the supports and services needed, receive an equal education leading to a productive and fulfilling vocation, develop relationships and families as desired, get involved in our communities, and partake in recreation and hobbies as we choose. We are driven by a philosophy of consumer choice, in that we have the freedom to make decisions and choices about our lives, as well as having the dignity of risk.

MCO Contracts Extension

SKIL has great concern about the possibility of the MCO Contracts being extended without going through the Request For Proposal and procurement process. The KanCare program is not "running smooth" or without problems. Problems that have been and will continue to affect recipients if the MCO Contract extension is approved. Some of these issues that affect real people with disabilities in our state are:

- 1) Approval process for Assistive Services/Durable Medical Equipment/Home Modifications are not responsive and timely. Each MCO uses a different process of which is not clear for individuals and advocates. It is a long process that is denied regularly.
- 2) Numerous issues due to the Care Coordination and service provision by the MCOs, including an inherent conflict of interest as for profit companies in determining plans of care and then getting paid for the services. They also have no incentive in helping individuals find direct support workers because unworked hours provide more profit to the company.
- 3) The current system has a significant lack of community based service providers across the state, especially rural areas, that impacts individuals needing the services to assure they can live in the community of choice and assures their health and safety there.

4) An official structure that supports transitioning individuals out of nursing homes or institutional settings is nonexistent. Consequently, the three MCOs each have developed their own process none of which has been very efficient or successful in supporting individuals through transitioning.

5) KanCare made significant promises beneficiaries, providers, advocates, and the state. Quality assurance, accountability, and transparency have not been forthcoming. Advocates have continuously testified that not only have promises not kept, health and safety issues have heightened in some situations.

Additional issues to the ones listed above must be addressed to improve services for individuals on HCBS to live healthy and safely in their communities. Extending the MCO contracts for any period without going through procurement will not get us moving toward this point. SKIL asks that the MCO contracts not be extended without the procurement process.

Workforce Wages & Parity

We all know there is a dire shortage of Direct Support Workers (DSWs) across our country. This did not start with the pandemic but has certainly worsened as a result. I have personally used Personal Care Attendants for 45 years since acquiring a spinal cord injury while a teenager. I realized about six years ago that hiring a worker was becoming more difficult and living in rural Kansas did not help. Although hiring was becoming more difficult, I was able to hire someone to help me. I did come to realization that I had to gradually begin paying a higher wage through the years. After leaving Medicaid almost 30 years ago, it became my responsibility and decision to set my workers' wages. I have not been able to pay what I think is needed but have paid a little higher than most of the HCBS waiver programs. I was able to keep at least one worker hired until October of 2020. Hiring workers has become extremely difficult. My husband quit his job to be able to provide me with the personal care needs I have since that time. This has been the first time since right after I was injured in 1976 that I have had to rely on family members completely for my care. And this is actually the longest I have gone with having a family member provide my care. I spent eight months in hospitals after my injury then three months at home with my mother assisting me. Eleven months after my injury I moved across the state to attend college toward my career goals. Because my husband and I have ties to rural Kansas we will soon be moving to a smaller community closer to kids and grandkids as we get closer to retirement. I hope to be able to hire a part time worker that wants to work local and not travel to work like so many in smaller communities do. Although I have not received HCBS services for almost 30 years and private pay for my workers, I think my personal story is an example of the struggle that individuals with disabilities and seniors who need assistance to stay in our homes are going through. My husband quit a job that he had done for almost 35 years. He has fortunately found other employment who are flexible because they know he assists me with my needs. But him providing my care and working longer days' wears on him also.

My situation is not unique from others on HCBS except that my workers are not paid through KanCare and many do not have others to step in to help or they have other responsibilities in their lives. There must be changes to incentivize people to become Direct Support Workers.

One time recruitment or bonus helps but it is far from the solution. Wages must be increased for Direct Support Workers across the waivers but it needs to be wage parity across the waivers. It should not matter what waiver someone is on to determine how much a DSW will be paid. Everyone wants good committed DSWs who will provide the services needed for individuals on all HCBS waivers to be safe and healthy in their homes and communities regardless of the waiver. Equity of wages across the waivers must be a priority as no one populations needs are more important than others. SKIL has long advocated for increased wages for all workers. SKIL asks that you support this effort.

Public Health Emergency Wind Down

SKIL wants to voice our great concern over what will happen when the Public Health Emergency winds down. KanCare renewals have been put on hold during the pandemic. Although this has been helpful at a time when individuals have their focus elsewhere. The time is NOW to start planning and taking action on steps that will not end in a disaster when the PHE ends. Part of that disaster will be the renewal process system being bogged down by the immense numbers of renewals and documentation. The unknown numbers of individuals on KanCare needing to update contact information. KDHE and KDADS need to work with stakeholders and providers to make this a smoother transition. We have great concern that individuals will get dumped off of KanCare for reasons that are resolvable.

Money Follows the Person

Money Follows the Person (MFP) is a program that assists with transitioning individuals out of nursing homes and institutions if they choose. Kansas was one of the first states to receive Federal funding to fund an MFP in Kansas in 2007. Our state already had a state funded program that had been run for a few years. The Federal program funds sunset in 2017 for our state. As I stated earlier the nursing home transitions that the MCOs are supposed to be providing are inadequate and unsuccessful in meeting individual's needs. Recently the Centers for Medicare & Medicaid Services (CMS) announced it will offer more than \$110 million to expand access to home and community-based services (HCBS) through Medicaid's Money Follows the Person (MFP) program. The new Notice of Funding Opportunity (NOFO) makes individual awards of up to \$5 million available for more than 20 states and territories not currently participating in MFP. These funds will support initial planning and implementation to get the state programs off the ground, which would ensure more people with Medicaid can receive high-quality, cost-effective, person-centered services in a setting they choose. SKIL has been advocating for years to get Money Follows the Person program going again in Kansas. There are many individuals who would like to move back into the community in their own home. This program would provide assistance for this to happen. The new funding above would provide Kansas the funds to develop and implement the program for today's needs.

Thank you for allowing me to testify today! I am happy to take questions at any time.

Lou Ann Kibbee

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