Overview of the Kansas Department for Aging and Disability Services

Presented by:
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Kansas Department for Aging and Disability Services
• **Mission:** The Kansas Department for Aging and Disability Services mission is to foster an environment that promotes security, dignity and independence for all Kansans.

• **Vision:** The Kansas Department for Aging and Disability Services envisions a community that empowers Kansas older adults and persons with disabilities to make choices about their lives.
Organizational Structure

Department Commissions:

– Commission on Aging
– Community Services and Programs Commission
– Survey, Certification, and Credentialing Commission
– Financial and Information Services Commission
KanCare UPDATE
Proposed KanCare Savings

$50 million SGF in reforms and caseload savings between KDHE and KDADS

- KDADS caseloads:
  - In addition to a $3.9 million SGF reduction in current year caseload, KDADS caseloads estimates are projected to be reduced for FY16 and 17 based upon updated rate and population assumptions:
    - 2016 AF ($9,468,089)/2016 SGF ($4,055,651)
    - 2017 AF ($10,755,849)/2017 SGF ($4,642,000)
- Behavioral Health Screening Processes ($1.8 million)
- Other KDADS-specific reforms ($1.24 million)
Issues we are working on:

- Provider Claims
- Communication
- Department of Labor Rules and impact on HCBS waivers
- FMS
HCBS Waiver UPDATE
Waiver Programs

• Autism
• Frail Elderly
• Intellectual/Developmental Disabilities
• Physical Disabilities
• Serious Emotional Disturbance
• Technology Assisted
• Traumatic Brain Injury
Physically Disabled (PD) Waiver

- 5,318 on the HCBS PD Program as of December 31, 2014

- 2,523 currently on waiting list.

*Note: Services have been offered to individuals who have been on the waiting list from 2013 and earlier.*

- **WAITING LIST Management:**
  - ~600 individuals being assessed for functional/financial eligibility as of 12/31/14

  - Nearly 1,000 individuals placed on services in 2014, and nearly 1,000 removed from services for all reasons.

  - Current outstanding offers/eligibility assessments designed to reach the target of 6,092
Intellectual/Developmentally Disabled (I/DD) Waiver

• 8,708 consumers currently being served; 3,073 currently on waiting list.

WAITING LIST Management:
• “The “underserved” waiting list has been eliminated.

• Individuals who needed additional services immediately have been offered those services; individuals who had requested additional services sometime in the future will receive them when they are needed.

• – From September to December, 177 previously unserved waiting lists consumers were offered HCBS-IDD services.

• – Of those offers, (as of December 31, 2014)
  • 112 have accepted services
  • 17 have declined services or were not functionally/financially eligible
  • 42 have not responded and were sent a Notice of Appeal (NOA) with appeal rights
  • 6 had accepted crisis access or were receiving services

• – In 2014, 578 waiting list consumers have been placed on HCBS services.
Waiting List Reduction

• Governor’s Recommendation:
  
  – $3 million SGF/$6.8 million all funds for DD waiting list reduction in FY 16 and FY 17
    • Will provide services to 175 people currently on the waiting list
  
  – $1 million SGF/$2.3 million all funds for PD waiting list reduction in FY 16 and FY 17
    • Will provide services to 126 people currently on the waiting list
Behavioral Health Programs UPDATE
Behavioral Health

Rainbow Services Inc.

- A collaborative effort between Wyandot, Inc., Johnson County Mental Health Center, Heartland Regional Alcohol and Drug Assessment Center and the State of Kansas

- Funded through efficiencies found in the state hospital system. (Closing RMHF and moving beds to OSH)

- **KEY GOALS:**
  - To divert consumers from unnecessary and inappropriate use of state hospitals and jails
  - To establish and support alternative community programing that will decrease reliance on Osawatomie State Hospital (OSH) to provide for individuals who may not need inpatient hospitalization, but have no other resources to meet their needs.
  - To decrease admissions to OSH of individuals who could be stabilized in the community in 10 days or less by connecting these persons to services/resources in their home communities
  - To increase 24-hour community options for individuals with co-occurring mental health and substance use disorders

- Began in April, 2014
Behavioral Health

Summary of RSI Fiscal Impact:

- A reduction of 1388 beds days at OSH resulted in savings of approximately $649,264 compared to same time period in 2013 from RSI catchment area.

- To date, diverting an estimated 118 individuals from the state hospital has saved approximately $1,270,152.

- Diverting an estimated 571 individuals from local Emergency Rooms saved local hospitals approximately $1,505,727. (Estimated ER visit costs $2,637)

- 115 individuals diverted from jail.
Behavioral Health

OTHER INITIATIVES:

Service Provision as a result of Governors Mental Health Task Force

- **Replicate RSI type programs:**
  - $1,000,000 of one time money targeted to Community Mental Health Centers for potential uses such as crisis services or seed money for innovative programs.
  - (This money was awarded to ComCare-Region 2 for continuum of crisis intervention services. This will include things like short term crisis residential services, crisis detox, short term inpatient, and mobile crisis services.)

- **Community Engagement Project:** This data-driven initiative will help identify and support the most at-risk communities through the development and enhancement of community coalitions,
  - $140,000 to help support 9 high risk counties who have been identified and agreed to work with the State.
  - (Organizational process has begun in those communities and is expected to be complete by March, 2015.)

- **Community Grants:** $425,000 for Community Grants that will help keep individuals in the community and out of jails, prisons, and state hospitals.
New Initiatives:

- **Increase Transition Supports**: An additional $1 million proposed in FY 16-17 Governor’s budget to support the development of transitional housing options and other community supports for individuals coming out of the State Hospitals.

- **RSI sale proceeds for a revolving fund program**: Used to enhance community resources by providing interest-free loans to community organizations to cover startup costs that will allow for the provision of additional service options for adults with Severe Mental Illness (SMI) and/or co-occurring disorders.
Problem Gambling and Addictions Grant Fund

- Problem Gambling and Addictions Grant Fund (PGAF) receives 2 percent of state gaming revenues.
  - $1.3 million on problem gambling programs/task forces (FY15)
    - $382,000 spent on public awareness
  - $1.0 million on Substance Use Disorder grants/services (FY15)
  - $3.97 million for Addictions through Medicaid (FY15)

- FY16/FY17 budget dependent upon casino revenues, however no cuts are currently proposed.

- Increased emphasis on integration of all prevention and treatment programs within the Agency
September, 2014 - In response to the Governors Mental Health Task Force, Governor invested an additional $500,000 to help facilitate substance abuse treatment.

- Used for those who are at /or below 200% of the Federal poverty guidelines and would qualify for public funding or individuals who do not have access to insurance benefits.

  - This money helped to facilitate treatment for 714 individuals who had previously been waiting for treatment.

  - 278 persons remain on the waitlist with remaining funds of $56,210.75.
Aging Issues UPDATE
Aging Issues Update

• PACE Expansion update
• Nursing Facility Report Card
• ADRC RFI/RFP
• Hospital Discharge Survey
• Medicare/Health Care fraud prevention education
FY 2015 budget:
  ▪ Revised budget totals $1.545 billion, including $632.7 million from State General Fund (SGF)

FY 2016 budget:
  ▪ Proposed budget totals $1.573 billion, including $664.6 million from SGF.

FY 2017 budget:
  ▪ Proposed budget totals $1.578 billion, including $667.9 million from SGF.
Agency-Wide Highlights/Major Changes

• The switch of certain prevention and problem gambling positions from contracts to in-house state employees.

• Funds the 27th payroll period that will occur in FY 2017.

• Contains an agency-wide shrinkage rate of 5.2 percent.
**Budget**

**Administrative Cost Reductions in FY 16-17**

- Projected unspent Senior Care Act funds ($120,000)

- Current behavioral health contracts, including projected unspent funds and reissuing RFPs rather than automatically extending certain grants ($517,827)

- Administrative reduction to CDDO state contracts ($350,000)

- Reissuing RFPs rather than automatically extending certain HCBS contracts ($170,447)