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Testimony for the Robert G. Bethell Joint Committee on Home and Community Based Services and KanCare Oversight

Chair Hawkins and members of the Committee,

Thank you for your attention to recent cuts in the state’s KanCare reimbursement rate and its ongoing administrative challenges. Kansas Action for Children (KAC) shares your concern that these factors may make it more difficult for Kansas children to receive KanCare services. Ensuring our youngest Kansans receive medical care prepares them to excel in school, grow up healthy, and succeed in the workforce. We encourage the Committee to take the following steps to ensure all Kansas children receive the regular health care they need:

Collect data on the adequacy of the KanCare network. Meaningful health care coverage must allow patients to find a provider who will accept their insurance. We request that the Committee seek the following data from the Kansas Department of Health and Environment and the MCOs:

- The number of medical providers enrolled in the KanCare network, by county;
- The number of dentists enrolled in the KanCare provider network, by county;
- The number of KanCare patients seen by a provider in the past year (if available); and,
- Whether KanCare contracting providers are accepting new patients (if available).

Seek alternatives to the Governor’s 4 percent reduction in KanCare reimbursement rates. Low KanCare reimbursement rates already limit which providers accept KanCare. Further reducing provider reimbursement may dissuade more providers from serving patients with KanCare insurance. This may make it more difficult or even impossible for children insured by KanCare to find a medical or dental provider, even as new federal guidelines direct states to ensure adequate provider networks for managed-care Medicaid programs.

Maintain a commitment to encourage the prompt resolution of the backlog in KanCare applications. Resolving this issue would ensure that all Kansans, including pregnant mothers and infants, receive timely and critical health care coverage. Pregnant mothers who lack early, regular prenatal care experience increased risk of complications like preterm births and low birthweight. Infants
need routine health care in the first months of life to receive recommended on-time immunizations, screenings, and early interventions for development and sensory delays. We encourage this committee to seek confirmation that pregnant mothers and infants are receiving the timely medical coverage that is essential for healthy development, and to request information about steps taken to ensure that this problem does not occur again in the future.

Adequate health care in a child’s early years — whether measured in health, educational achievement, or economic success — creates life-long benefits. To realize these long-term payoffs, please ensure that the KanCare system can meet the needs of Kansas children. KAC is happy to answer any questions or provide any assistance that would be helpful as you seek to resolve KanCare’s existing challenges.