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Chairman Suellentrop and members of the Senate Committee on Public Health and Welfare, thank you for the opportunity to appear on behalf of the KanCare Advocates Network (KAN). KAN is a coalition of nearly 40 organizations and individuals. Together, we advocate on behalf of the 400,000 Kansans who depend upon the Kansas Medicaid program, KanCare, and its seven HCBS waiver programs for their health care and long-term supports and services.

KAN opposes SB 122 for multiple reasons. Over the past six years, we have seen Managed Care Organizations (MCOs) have struggled with building network community and provider capacity, both of which are critical for addressing the needs of foster children and their families. The children served by this system and particularly the ones that are higher needs require community supports. This bill does not include performance indicators that overlap with child welfare measures such as child safety, well-being, permanency, placement with relatives or family-like settings.

The bill is silent as to the intersection between this “carve out” and the Medicaid waivers. Which MCO serves children with a disability that makes him/her eligible for waiver services and is in foster care?

Children in foster care often move in and out of the system. This “churn” of changing insurance companies several times a year would be difficult for anyone to manage, but particularly tough and unsettling for children and families in crisis. This has the potential for disruption of services for children who need continuity and consistency,

The challenges within the foster care system have been well-documented but this proposal has not been vetted among providers, families and policy makers. More study and discussion is needed to determine if this is the right path toward addressing those challenges.

Thank you for the opportunity to testify today and for your continued oversight of the KanCare program.

Sean Gatewood, KAN co-administrator