

# AGING STRATEGIC ALIGNMENT PROJECT

## State Profile for

# KANSAS

## Home- and Community-based Services for Older Adults and Adults with Physical Disabilities

### Background

- Kansas's 60+ population was 501,329 in 2008 (17.9% of the state's total population), with 8% below the federal poverty level.<sup>1</sup>
- The 60+ population is projected to be 713,518 in 2025 (24.4% of the state's total population).<sup>2</sup>
- About 22.3% of all households in 2007 had one or more persons age 65 years and older, and 39.9% of persons age 65 years and older had a disability.<sup>3</sup>
- Of the 316,411 Medicaid beneficiaries in the state in 2003, 8.9% were aged, 15.3% were blind and disabled, 17.5% were Dual Eligible, and 6.2% were HCBS waiver beneficiaries.<sup>4</sup>
- Medicaid expenditures for institutional long-term care were 46.6% of total long-term-care expenditures, compared to 53.4% for HCBS in fiscal year 2007.<sup>5</sup>

#### Abbreviations

AAA	Area Agency on Aging
ADL	Activities of Daily Living
AoA	Administration on Aging
CMS	Centers for Medicare and Medicaid Services
HCBS	Home- and Community-based Services
IADL	Instrumental Activities of Daily Living
MRDD	Mental Retardation and Developmental Disabilities
OAA	Older Americans Act
PACE	Program of All-inclusive Care for the Elderly
SUA	State Unit on Aging

<sup>1</sup> Department of Health and Human Services, Administration on Aging. (2009). *AGing Integrated Database (AGID): American Community Survey (ACS) demographic data 2004-2007 and state-level population estimates data 2000-2008* [Data files]. Available from <http://198.136.163.234/default.asp>

<sup>2</sup> Department of Health and Human Services, Administration on Aging. (2009). *AGing statistics: Projected future growth of the Older population; By state: 2005-2030; Aged 60 and above* [Data files]. Available from [http://www.aoa.gov/AoARoot/Aging\\_Statistics/future\\_growth/future\\_growth.aspx](http://www.aoa.gov/AoARoot/Aging_Statistics/future_growth/future_growth.aspx).

<sup>3</sup> Reimbursement and Research Department, American Health Care Association. (2006, August 29). *The state long-term health care sector 2005: Characteristics, utilization, and government funding*. Washington, DC: Author.

<sup>4</sup> U.S. Census Bureau, 2007 American Community Survey, United States and States. *Percent of households with one or more people 65 years and over (R1104) and Percent of people 65 years and over with a disability (R1803)*.

<sup>5</sup> Burwell, B., Sredl, K., & Eiken, S. (2008, September 26). *Medicaid long term care expenditures FY 2007*. Eagan, MN: Thomson Reuters.

## Government Structure to Manage HCBS

- **SUA:** Kansas Department on Aging (KDOA).  
www.agingkansas.org
- **State Medicaid Agency:** Kansas Health Policy Authority (KHPA).  
www.khpa.ks.gov
- Kansas does not have a consolidated agency for long-term-care programs. KDOA provides all long-term-care programs for the aged and for individuals residing in nursing homes. KDOA has responsibility for those with physical disabilities who reside in a nursing home, while the Kansas Department of Social and Rehabilitation Services has responsibility for those with physical disabilities who are on a waiver.
- The director of Kansas's SUA reports to the Governor.
- Kansas has 11 Area Agencies on Aging.

## Single Point of Entry (SPE)/Aging and Disability Resource Center (ADRC)

- Kansas has an ADRC, but it is not yet statewide.
- In addition to serving older adults, Kansas' ADRC also serves those with physical disabilities.
- Existing AAAs and Centers for Independent Living (CIL) serve as ADRC pilot sites. Staff of these agencies collaborate to streamline access to services.
- Kansas has pilot ADRC sites in both a rural and an urban area. Working with the AAAs and CILs, Kansas is investigating different software packages to develop a virtual resource center. Once this is online, all AAAs and CILs across the state will be able to access information about resources.

## Assessment Process

### Medicaid

- For Medicaid applicants, in determining functional eligibility for nursing home pre-admission, Kansas requires an in-person assessment by someone other than

nursing home staff. The assessment is conducted by the Kansas Department on Aging, AAA or hospital staff.

### Non-Medicaid

- For non-Medicaid applicants in Kansas, nursing home pre-admission assessment is performed by someone other than nursing home staff. The assessment is done in person for all consumers by the Kansas Department on Aging, AAA or hospital staff.
- If someone calls an AAA expressing a desire to enter a nursing home, the AAA does the pre-admission care assessment and the Preadmission Screening and Resident Review (PASRR). Hospitals have volunteered to do the care assessment for applicants who are hospitalized. Assessment data from the AAAs and hospitals are entered into a management information system used by the state agency to provide official notification of functional eligibility. This is the same process used for any type of payment and applies to all applicants, regardless of Medicaid eligibility.

## State Medicaid Plan

- Kansas provides HCBS through the state Medicaid plan.
- Refer to Table 1 for specific services provided.
- The state Medicaid agency (KHPA) provides direction as to what is available under the state plan. The SUA is responsible for case management, PACE and nursing home programs through the state plan. The SUA also prepares and submits plan amendments to KHPA.
- **PACE:** Kansas has two existing PACE sites. One serves Wichita and Sedgwick County with 275 slots; the other serves Topeka, Shawnee County, and six surrounding counties with 75 slots.

## Medicaid Waivers

- Kansas has two waivers that provide HCBS to older adults and/or adults with physical disabilities. These are: HCBS-Frail Elderly and Physically Disabled.

- **HCBS-Frail Elderly:** This program serves those who are nursing home-eligible and those with Alzheimer's disease, dementia, and related conditions. Per new CMS guidelines and regulations, any applicant who meets the qualifications can enroll in the program that best suits him or her, based on financial and functional eligibility. The Kansas Department on Aging contracts with case management entities to complete the assessments. The asset limit for an individual is \$2,000; the income limit is \$727. The asset limit for a couple to qualify for this program is \$3,000. Case management is not available under this waiver, but could be provided as targeted case management under the state Medicaid plan. Attendant care services can be consumer-directed, which includes consumer responsibility for hiring, training, firing and monitoring time sheets. A payroll agent processes time sheets and submits them to the information management system for payment. The 12 hours a day of attendant care can be combined with other services for 24-hour care. There are no other caps.
  - **Physically Disabled:** While this waiver serves those age 16-65, current participants are offered a choice six months before their 65<sup>th</sup> birthday to continue receiving waiver services. A uniform assessment instrument is used to assess functional eligibility (i.e., ADL and IADL functioning). Although there may be presumptive eligibility (or presumptive disability), there is also a determination using Social Security standards. It is possible to have Social Security disability but not qualify for this waiver, however. Local and regional offices of the Department of Social and Rehabilitation Services conduct the Medicaid eligibility assessment, as Medicaid eligibility is another criterion for participation. The income limit is \$727 and the asset limit is \$2,000 for an individual; for a married couple, the asset limit is \$3,000. Case management is provided through the state Medicaid plan (not through the waiver). Targeted case managers work for the CILs and home health agencies are enrolled as providers. A list of agency choices is provided for case management services. If the consumer wishes, the case manager can assume the responsibility for hiring, training and firing personal care attendants, including agency aides. The consumer can also choose to receive home-delivered meals and targeted case management.
  - Refer to Table 2 for an overview of selected HCBS programs. Table 1 shows the types of services offered under each program.
- ## CMS-funded Programs and Grants
- Kansas has one CMS-funded program that serves older adults and/or adults with physical disabilities. It is the Money Follows the Person demonstration grant.
  - **Money Follows the Person Demonstration (MFP):** This program serves persons with MRDD, those with physical disabilities, frail elderly, and those with traumatic brain injury. Applicants must express interest in going back to the community, have been on Medicaid for at least 30 days prior to their application, and reside in a nursing facility for six months or more. Income and asset limits are the same as those for state Medicaid eligibility. The asset limit for an individual is \$2,000; the income limit is \$727. The asset limit for a couple to qualify for this program is \$3,000. Case management is provided through the state Medicaid plan. Potential referrals to the program have been identified through the Minimum Data Set (MDS) for nursing home resident assessment and care screening, focusing on Section Q (Discharge Potential and Overall Status), as well as through the Kansas Department on Aging and AAAs. Services mirror the 1915c waiver services for the frail elderly.
  - Refer to Table 2 for an overview of selected HCBS programs. Table 1 shows the types of services offered.
- ## State-funded HCBS Programs
- Kansas has one state-funded HCBS program that serves older adults and/or adults with physical disabilities. It is Senior Care Act (SCA).
  - **Senior Care Act:** This program is geared toward applicants who are at risk of entering a nursing home and not financially eligible for Medicaid. It requires the same functional level-of-care need as the HCBS-Frail Elderly waiver. The program has a sliding fee scale based on income and assets, ranging from zero if an applicant is at the federal poverty level, to 100% of

the cost of services. An AAA case manager completes the financial and functional assessment. Attendant care services can be self-directed as described under HCBS-Frail Elderly above; case management is optional. Services are based on the consumer's needs with a maximum monthly expenditure of \$1,445.

- Refer to Table 2 for an overview of selected HCBS programs. Table 1 shows the types of services offered.

### Locally Funded HCBS Programs

- Kansas uses local funds for HCBS for older adults age 60 or older. Some AAAs receive county funds; if so, they receive \$2 from the state for every \$1 they receive from the county. Some counties have local levies for aging services. Local funding for HCBS totals approximately \$2 million.

### OAA-funded Programs and Grants

- Refer to Table 1 for services provided through Title III of the OAA.
- Kansas does not use cost-sharing mechanisms or sliding fee scales in the delivery of Title III services.
- Kansas does not have any other OAA-funded programs or grants that serve older adults and/or adults with physical disabilities.

### Social Service Block Grants (SSBG) and Community Service Block Grants (CSBG) for HCBS

- Kansas uses SSBG to provide HCBS for older adults age 60 or older.
- About \$4.5 million is used in the Senior Care Act program to supplement state money.
- Kansas does not use CSBG to provide HCBS for older adults and/or adults with physical disabilities.

### Consumer Direction

- Kansas offers consumer-directed options. The HCBS programs in the state that offer consumer direction are HCBS-Frail Elderly, Physically Disabled Waiver, and Senior Care Act.
- Those permitted to provide services under consumer direction in Kansas are: provider agencies, adult children of the consumer, other family, and friends. All must be at least 18 years old. A spouse or legal guardian cannot be a provider.
- Kansas uses multiple fiscal intermediaries in connection with consumer direction.

### Managed Care

- Kansas does not have HCBS programs run by managed care health plans.

### Major Accomplishments and Initiatives

- Oral health services have recently been added to the HCBS-Frail Elderly and Physical Disabled waivers; as a result, AoA highlighted Kansas as a program champion on its website. These were previously covered under the state Medicaid plan only for emergencies.
- Expedited Service Delivery was recently begun. If an applicant appears to be Medicaid-eligible after a simple assessment, he or she can become an HCBS participant while waiting up to 45 days for a financial determination from the Department of Social and Rehabilitation Services. Billings are processed through the HCBS-Frail Elderly waiver if the participant is then found to be Medicaid-eligible; otherwise, service providers are paid with state funds allocated by the legislature.
- CMS approval has been received to start a Comprehensive Support Service to help those with cognitive impairment remain safely in the community, rather than enter a nursing home. They may receive up to 12 hours of home supervision a day.

**Table 1: Types of Home- and Community-based Services Provided Under Kansas’s Programs for Older Adults and Adults with Physical Disabilities**

Types of Services	Program Type / Funding Source					
	Medicaid Waivers		CMS-funded Programs and Grants	State-funded Programs		
	HCBS-Frail Elderly	Physically Disabled	Money Follows the Person Demonstration	Senior Care Act	State Medicaid Plan	OAA Title III
Adult Day Care / Adult Day Health	X		X			X
Assisted Living						
Caregiver Services / Respite / Education				X		X
Case Management / Care Coordination			X	X	X	X
Chore / Homemaking	X	X	X	X		X
Companion Services / Socialization Activities	X		X			
Employment						
Equipment / Supplies / Modifications / Assistive Technology	X	X	X	X	X	X
Health Promotion Activities	X					X
Home Health / Personal Care	X	X	X	X		X
Information / Assistance / Referral						X
Legal Assistance / Financial Advice						X
Medical / Dental / Medication Care	X	X	X	X		X
Mental and Behavioral Health Services						
Nursing	X					
Nutrition / Meals		X				X
Personal Supports for Community Living / Transitioning			X			
Rehabilitation / Therapy					X	
Residential Services						
Transportation		X				X
Other/Unspecified HCBS			X			

Table 2: Selected HCBS Programs for Older Adults and Adults with Physical Disabilities in Kansas

Program Type / Funding Source	Program Name	Ages Served	Nursing Home Level of Care Required	Entity Responsible for Functional Assessment	Entity Responsible for Financial Assessment	Entity Responsible for Case Management	Waiting List (Number)	Consumer Direction Option
Medicaid Waivers	HCBS-Frail Elderly	65+	Yes	Case Management Entity	State agency: Social and Rehabilitation Services	Targeted case management through state Medicaid plan, not through waiver	No	Yes
	Physically Disabled	16-65	Yes	Targeted case managers	State agency: Social and Rehabilitation Services	Targeted case management through state Medicaid plan, not through waiver	Yes (10)	Yes
CMS-funded Programs and Grants	Money Follows the Person Demonstration	21+	Yes	Case Management Entity	State agency: Social and Rehabilitation Services	Targeted case management through state Medicaid plan, not through waiver	No	Yes
State-funded Programs	Senior Care Act	60+	Yes	Area Agency on Aging	Area Agency on Aging	Area Agency on Aging	Yes (495)	Yes