Public Notice and Comment Period
KanCare Extension

The Kansas Department of Health and Environment (KDHE) is offering additional opportunities to attend public hearings regarding the State’s proposed one-year extension of the KanCare program and to provide comments about the extension request application.

Public comment – timing and process
This public comment period has been extended to run from June 8 until July 10, 2017. Comments will be accepted until July 10, and the State intends to submit the extension request no later than August 31, 2017.

Information about the KanCare extension request is available for public review on the KanCare website. A summary is also available at the link, along with documented comments from public comment meetings held in March 2017. For individuals without access to the internet, copies of the summary application and public comment document may be obtained by calling 785-296-4753 or writing KanCare Renewal, c/o Becky Ross, KDHE-DHCF, 900 SW Jackson, LSOB - 9th Floor, Topeka, Kansas, 66612. Such requests must be made before July 10, 2017. Copies of the extension application will be located in Topeka at the reception desk for KDHE-DHCF, 900 SW Jackson, LSOB - 9th Floor and KDADS, New England Building, 503 S Kansas Avenue.

Written comments about the KanCare extension request may be sent:
- Email: kdhe.kancarerenewal@ks.gov
- Regular mail: KanCare Renewal, c/o Becky Ross, KDHE-DHCF, 900 SW Jackson, LSOB - 9th Floor, Topeka, Kansas, 66612

Public hearings – when and where
Additional public hearings about the KanCare extension will be held in Kansas as follows. All meetings are from 1:30-3:00 p.m. All meetings are ADA accessible.

<table>
<thead>
<tr>
<th>Date</th>
<th>Venue Details</th>
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<tbody>
<tr>
<td>Thursday</td>
<td>University of Kansas Edwards Campus, Best Conference Center, 12604 Quivira Road, Overland Park</td>
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<tr>
<td>July 6, 2017</td>
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<tr>
<td>Friday</td>
<td>WSU Hughes Metroplex, Room 180, 5015 East 29th Street North, Wichita (Enter the north door at the southeast corner.)</td>
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<tr>
<td>July 7, 2017</td>
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<tr>
<td>Monday</td>
<td>Conference call: 1-877-400-9499 Access code: 134 228 8045</td>
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<tr>
<td>July 10, 2017</td>
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continued

Language accommodations
If you need language accommodations, such as a sign language interpreter or large print or braille, please contact Dawn Goertzen at 785-291-3461 or dawn.goertzen@ks.gov. Please make your request by June 5, 2017.

KanCare – summary of program and renewal information
KanCare is the program through which the State of Kansas administers Medicaid. After a long period of study, the State determined that contracting with multiple managed care organizations (MCOs) would result in the provision of more efficient and effective health care services to the populations covered by Medicaid and Children’s Health Insurance Program (CHIP) in Kansas and would ensure coordination of care and integration of physical and behavioral health services with each other and with Home and Community Based Services (HCBS).

On August 6, 2012, the State of Kansas submitted a Medicaid Section 1115 demonstration proposal, entitled KanCare, to the Centers for Medicare & Medicaid Services (CMS), a division of the U.S. Department of Health and Human Services. CMS approved that proposal on December 27, 2012, effective from January 1, 2013, through December 31, 2017. The State is now preparing to submit an application to extend the KanCare program for one year, effective from January 1 through December 31, 2018.

KanCare is operating concurrently with the state’s section 1915(c) HCBS waivers. Together with the 1115 demonstration, those seven waivers provide the authority necessary for the State to require enrollment of almost all Kansas Medicaid beneficiaries (including the aged, disabled, and some dual-eligibles) into a managed care delivery system to receive state plan and waiver services. KanCare also includes a safety net care pool to support certain hospitals that incur uncompensated care costs for Medicaid beneficiaries and the uninsured and to provide incentives to hospitals for programs that result in delivery system reforms that enhance access to health care and improve the quality of care.

The KanCare demonstration program:
- Maintains Medicaid state plan eligibility
- Maintains Medicaid state plan benefits
- Allows the State to require eligible individuals to enroll in MCOs to receive covered benefits through such MCOs, including individuals on HCBS waivers, except American Indian/Alaska Natives, who are presumptively enrolled in KanCare but have the option of affirmatively opting out of managed care
Public Notice and Comment Period
KanCare Extension continued

- Provides benefits, including long-term services and supports (LTSS) and HCBS, via managed care
- Creates a safety net care pool to support hospitals that provide uncompensated care to Medicaid beneficiaries and the uninsured

The KanCare demonstration assists the State in its goals to:

- Provide integration and coordination of care across the whole spectrum of health including physical health, behavioral health, and LTSS/HCBS
- Improve the quality of care Kansas Medicaid beneficiaries receive through integrated care coordination and financial incentives paid for performance (quality and outcomes)
- Control Medicaid costs by emphasizing health, wellness, prevention, and early detection as well as integration and coordination of care
- Establish long-lasting reforms that sustain the improvements in quality of health and wellness for Kansas Medicaid beneficiaries as well as provide a model for other states that are reforming their programs for Medicaid payment and delivery systems

The one-year extension of KanCare is designed to continue the program as it is currently structured, including:

- Eligible members covered: No change is anticipated in any eligibility group.
- Benefits covered and cost-sharing requirements: No change is planned as part of the extension.
- Annual enrollment and re-enrollment of members: No change is planned as part of the extension.
- Annual aggregate expenditures: No change to funding and payment methodology is planned as part of the extension.
- Waiver and expenditure authorities: No change is planned.
- Hypothesis and evaluation parameters for the program: No change is planned, will expect to see ongoing improvements within the more mature program. Related expectations will be reflected in contractual and program policy content.

Information about the KanCare extension process and related documents will be maintained and kept throughout the public comment and review process, during which CMS is reviewing and acting upon the State’s extension request. This information will be available on the KanCare Renewal page of the KanCare website. In addition, once the request to extend the KanCare program is submitted to CMS, it will be posted by CMS on the State Waivers List page of the CMS website for viewing and commenting.