

State of Kansas Progress Summary on Spending Plan for Implementing Section 9817 of the American Rescue Plan Act

July 17, 2023 updated 09/25/2023

Background

On March 11, 2021, President Biden signed into law the American Rescue Plan Act (ARPA). Section 9817 provides enhanced federal funding for Medicaid Home and Community Based Services (HCBS) through a one-year 10 percent increase to the share of state Medicaid spending contributed by the federal government. This one-year increase in federal matching funds will result in new, time-limited dollars that can be strategically invested in HCBS services in the state of Kansas through March 31, 2025.

As a condition of drawing the enhanced federal matching funds, Kansas is providing the following assurances to the Centers for Medicare & Medicaid Services (CMS):

- Kansas will use the federal funds attributable to the increased federal medical assistance percentage (FMAP) to supplement, and not supplant, existing state funds expended for Medicaid Home and Community Based Services (HCBS) in effect as of April 1, 2021.
- Kansas will use the state funds equivalent to the amount of federal funds attributable to the increased FMAP to implement or supplement the implementation of one or more activities to enhance, expand, or strengthen HCBS under the Medicaid program.
- Kansas will not impose stricter eligibility standards, methodologies, or procedures for HCBS programs and services than were in place on April 1, 2021.
- Kansas will preserve covered HCBS, including the services themselves and the amount, duration, and scope of those services, in effect as of April 1, 2021.
- Kansas will maintain HCBS provider payments at a rate no less than those in place as of April 1, 2021.

Progress Summary

This progress summary describes the status of each project contained in the initial spending plan for the state of Kansas as administered by two state agencies: the Kansas Department of Health and Environment (KDHE), and the Kansas Department for Aging and Disability Services (KDADS). KDHE is the single state Medicaid agency. KDADS administers the state's 1915(c) HCBS waivers and oversees the state's PACE programs. Please note any initiative with an asterisk (*) indicates a request for approval for an increase. Also note there is a section added to request approval for new initiatives.

1. **Workforce.** Recruiting and retaining a qualified workforce is important in every industry, but it is critical to the independence and well-being of individuals receiving Home and Community Based Services. Retention incentives and recruitment bonuses, as well as robust training opportunities aim to bring direct service workers into the field. Further, exploration of a direct service worker Career Ladder can help build a pipeline for future workforce needs.

The proposed workforce-related projects are targeted at providers delivering services that are listed in Appendix B of the State Medicaid Director Letter (SMDL) which will then, in turn, benefit the individuals who are receiving Home and Community Based Services through the Kansas 1915c waivers. The proposed initiatives will target the recruitment, retention, and training of providers of direct, hands-on personal care services, albeit agency-directed or self-directed, through the 1915c waivers. Kansas does not offer personal care services through its State Plan, only through the 1915c waivers, therefore, the proposals meet the requirements of Appendix B of the SMDL. Workforce shortages are a significant concern that Kansas aims to address with these initiatives to ensure a qualified workforce is available to HCBS waiver participants.

Workforce Retention Bonus Program	\$ 51,000,000
Training Grants	\$ 2,009,797
Study & Design Career Ladder *	\$ 5,000,000
Total Workforce Initiatives	\$ 55,928,141

April 2022 Workforce Initiatives Progress Update:

KDADS launched a Workforce Recruitment and Retention Bonus Initiative on March 28, 2022. The Initiative aims to provide bonus pay to direct service workers and their immediate supervisors that are delivering critical HCBS services to both self-directed and agency directed participants. It is estimated that direct service workers and their immediate supervisors will receive \$2,000 for retention bonuses and \$1,500 for recruitment bonuses. Final distribution amounts will depend on the number of requests received. Providers and fiscal agents have through April 29, 2022, to submit staffing information for the bonus disbursement. KDADS has held two webinars, and multiple meetings with stakeholders to promote the initiative, answer questions, and provide technical assistance. All program materials, including FAQ documents are available on the KDADS website at <https://kdads.ks.gov/funding-opportunities>.

In addition, KDADS is working to draft RFP language for the Training Grants project, as well as the Study & Design Career Ladder project. The agency expects to have additional updates available for the next quarterly report.

To date, KDADS has no expenditures to report for the projects listed under the Workforce Initiatives category, though future quarterly reports will certainly begin to pick up expenditures.

July 2022 Workforce Initiatives Progress Update:

KDADS launched a Workforce Recruitment and Retention Bonus Initiative on March 28, 2022. The Initiative aims to provide bonus pay to direct service workers and their immediate supervisors that are delivering critical HCBS services to both self-directed and agency directed participants. It is estimated that direct service workers and their immediate supervisors will receive \$2,000 for retention bonuses and \$1,500 for recruitment bonuses. KDADS has received 212 applications for the

program benefitting 28,574 Direct Service Workers and their Immediate Supervisors. A total of \$50,944,132.00 has been allocated for distribution to Provider Agencies for the bonus program. The Managed Care Organizations will be distributing the funds to the HCBS providers to payout the bonuses for their staff. KDADS has held two webinars, and multiple meetings with stakeholders to promote the initiative, answer questions, and provide technical assistance. All program materials, including FAQ documents were available on the KDADS website during the open application period. KDADS is currently processing signed beneficiary agreements and will begin disbursing the funds to Managed Care Organizations beginning as soon as possible.

In addition, the RFP for the Training Grants project is written and currently working through the State procurement process in preparation for release. KDADS is working to draft RFP language for the Study & Design Career Ladder project with stakeholder input. The agency expects to have additional updates available for the next bi-annual report.

To date, KDADS has no expenditures to report for the projects listed under the Workforce Initiatives category, though future reports will certainly begin to pick up expenditures.

October 2022 Workforce Initiatives Progress Update:

As of October 12, 2022, a total of \$50,944,068.00 has been transferred to the three Medicaid Managed Care Organizations, which have distributed funds to providers and fiscal agents. The providers and fiscal agents have begun the process of granting employees retention and recruitment bonuses. Providers have until March 30, 2023, to distribute these funds.

KDADS has prepared a draft request for proposals (RFP) for the Study & Design Career Ladder project with stakeholder input. KDADS is awaiting additional information to submit the RFP to the state procurement agency for posting.

January 2023 Workforce Initiatives Progress Update:

KDADS is in the final bonus period, a total of \$50,944,068.00 has been transferred to the Managed Care Organizations who distributed funds to providers and fiscal agents who are continuing with the process of granting their Direct Service Workers and Supervisors retention and recruitment bonuses. The deadline for bonus distribution is March 31, 2023. At that time providers and fiscal agencies will send in a closeout survey and any funding they have not been able to utilize. To date \$1,330,804.00 in incentive funds have been returned to KDADS due to agency closures.

KDADS has submitted an RFP to the state procurement agency to study and design a defined career ladder for Direct Service Workers (DSW) that will enable them to develop career-enhancing skills valuable to self and others allowing them to be promoted in their current or other healthcare occupations that have higher compensation as well as a workforce need.

KDADS has also submitted an RFP to procurement for the creation of a Direct Service Worker Workforce Training Program. The program allows training providers to apply for funding to create training and professional development for DSWs. These competency-based trainings will ensure that DSWs have the knowledge, skills, and abilities to provide person-centered, quality support. To date no funding has been expended on these initiatives.

July 2023 Workforce Initiatives Progress Update:

KDADS passed the final deadline for providers to payout recruitment and retention bonus funds to Direct Service Workers (DSWs) on June 30, 2023. The original deadline for bonus distribution was

March 31, 2023. KDADS made an amended agreement available, extending the program payout deadline to June 30, 2023, for those providers who had not exhausted all bonus funds. KDADS is currently in the process of collecting closeout surveys as well as any remaining funds from providers and fiscal agencies that they have not been able to utilize. To date \$2,095,718.88 in incentive funds have been returned to KDADS due to agency closures and unspent funds.

KDADS submitted an RFP to procurement for the creation of a Direct Service Worker Workforce Training Program. The program will allow training providers to apply for funding to create training and professional development for DSWs. These competency-based trainings will ensure that DSWs have the knowledge, skills, and abilities to provide person-centered, quality support. To date no funding has been expended on these initiatives. A contract for the program has been awarded and the project will begin July 1, 2023.

KDADS has also submitted an RFP to the state procurement agency to study and design a defined career ladder for Direct Service Workers (DSW) that will enable them to develop career-enhancing skills valuable to self and others allowing them to be promoted in their current or other healthcare occupations that have higher compensation as well as a workforce need. KDADS is currently in the process of resubmitting the RFP due to a lack of qualified bidders. Please note increase in allocated funds for this initiative.

2. **Employment.** Availability of competitive, integrated employment for individuals with disabilities is the aim of the Employment First initiative. Kansas intends to utilize this funding opportunity to study and create a roadmap to a complete and robust implementation of Employment First.

Employment 1 st Study	\$ 1,995,994
Employment 1 st Provider Expansion*	\$ 1,500,000
Total Workforce Initiatives	\$ 3,495,994

April 2022 Employment Initiatives Progress Update:

KDADS has planned meetings with stakeholders to discuss the direction and objectives for the proposed Employment First Study. These sessions will aid KDADS staff in the development of the RFP language for this initiative. The agency expects to have further updates available for future reporting periods.

To date, KDADS has no expenditures to report for the project listed under the Employment Initiatives category.

July 2022 Employment Initiatives Progress Update:

KDADS has planned meetings with stakeholders to discuss the direction and objectives for the proposed Employment First Study. These sessions will aid KDADS staff in the development of the RFP language for this initiative. The agency expects to have further updates available for future reporting periods.

To date, KDADS has no expenditures to report for the project listed under the Employment Initiatives category.

October 2022 Employment Initiatives Progress Update:

KDADS hosted a stakeholder meeting in September 2022. Stakeholders have requested that KDADS use goal #2 under the Kansas Employment First Oversight Commission 2021 Recommendations to the Governor and Members of the Kansas Legislature (see below) as guidance for this initiative. See [Employment First \(ks.gov\)](https://ks.gov) for more information on the Commission's report.

#2. Create a Detailed Systems Change Implementation Plan & Finally Deliver on the Kansas Legislature's Promise of Employment First – The \$2 million in enhanced federal funding should be squarely focused on creating a detailed systems change implementation plan to finally deliver on the Kansas Legislature's promise of Employment First. This plan needs to detail the specific, actionable changes that need to occur to finally make Employment First an everyday reality in Kansas. Successful implementation of the Employment Law is what has been lacking for the past 10 years. As part of this implementation, this plan should include the creation of many different initiatives, from whole scale changes to pilot projects, all designed to make Employment First an everyday reality. These could include everything from enhancements and changes in provider rates and rate structures (including but not limited to supported employment), as well as initiatives demonstrating how to build a successful business model around moving away from non-competitive and non-integrated settings. Instead of just "theories" and "ideas," Kansas needs actual, meaningful, and replicable change to occur, thus finally and fully implementing the law and delivering on the promise of Employment First.

Based upon this feedback, an RFP has been drafted and a proposed scope of work will be shared with stakeholders at the next meeting in October 2022. After further discussion with stakeholders, the RFP will be submitted to procurement for posting.

January 2023 Employment Initiatives Progress Update:

KDADS has drafted an Employment First RFP which is currently under review by the state procurement agency. KDADS also hired an Employment First Specialist November 14, 2022. KDADS is holding regular stakeholder meetings regarding Employment First. The next scheduled Employment First meeting will be held January 26, 2023.

KDADS has applied for 100 hours of technical assistance through the National Expansion of Employment Opportunities Network (NEON). The priority for this technical assistance request is provider rate reconstruction with subject matter experts. KDADS will be notified soon if awarded.

KDADS has received a one-year membership to the Association of People Supporting Employment First (APSE). The Employment First Specialist is attending all pertinent webinars that will be applicable and beneficial for Kansas.

July 2023 Employment Initiatives Progress Update:

The HCBS Director attended the IPS Employment-Highlighting IPS in Utah: The Hive of Industry conference by invitation from KDADS Behavioral Health Division in an effort to learn about employment initiatives and best practices in the Behavioral Health arena. The Employment First Specialist attended the 2023 National APSE conference in June 2023. The networking opportunities with professional colleagues to share "best practices" between states regarding SE (Supported Employment), Employment First, and Charting the LifeCourse' programs to advance initiatives in Kansas.

KDADS has submitted for legal review and contract submission/acceptance an RFP for a vendor to direct and support Supported Employment (SE), Competitive Integrated Employment (CIE), and a phase out plan for 14 (c) Sub-minimum wage statewide for I/DD service recipients.

KDADS in conjunction with contracted program and policy advisors - National Expansion of Employment Opportunities Network (NEON), Wichita State University, et. al. is developing proposed program recommendations and data collections for review and administrative action by the Kansas Employment First Oversight Commission (EFOC). The EFOC has the authority and purpose to provide guided support and directive to KDADS regarding Employment First policies and enacted program supports.

KDADS was awarded an additional 60 hours of TA support from NEON for Subject Matter Experts to continue to provide education and guidance for the State of Kansas on how to unbundle employment rates and re-enacting the Employment First Commission's team to meet on a routine basis with a goal of requesting an Executive Order for Employment First to be signed by State of Kansas Governor Laura Kelly. As the team continues to work on these initiatives, we have partnered with Special Education, School Board, WORK program, STEPS program, KDADS Behavioral Health, Kansas Vocational Rehabilitation and are requesting the Governor to allocate a legislative representative for this stakeholder group. Kansas would like to be a one stop shop for Employment and would like to start these initiatives at the school transition level working with all departments across LTSS to create a more streamlined system for employment for individuals and families to navigate the system more effectively. Additionally, extensive conversations are being had as to how we can increase Benefits Navigation and Education regarding employment through the training of Targeted Case Managers, Self Advocate Peers, Personal Care Attendants, providers and assessing entities.

Please note the State of Kansas is requesting the approval of funds for the expansion of our supported employment providers in addition to providing additional education regarding various tax incentives available to providers.

To date, KDADS has no expenditures to report for the project listed under the Access to Care Initiatives category.

- 3. Access to Care.** Initiatives in this category are intended to expand accessibility to Home and Community Based Services through studies of the Kansas HCBS waiting lists, TCM models, and justice-involved individuals with disabilities. Increased access to institutional transition services and trainings for parents and providers working with individuals with intellectual and developmental disabilities and behavioral health challenges are planned to be addressed.

The projects proposed under the category of Access to Care are targeted to both strengthen the HCBS service delivery system and to provide services directly to individuals who are receiving HCBS through one of Kansas' 1915c waivers. The Waiting Lists study, TCM study, and Sequential Intercept Model (SIM) consultant projects are intended to provide the state with valuable information about the needs of both waiver participants and overall delivery system needs. In particular, the SIM consultation will allow Kansas to bring together professionals and experts to assist Kansas in identifying gaps in services that would

strengthen the continuum of care, focusing on justice-involved dual-diagnosis individuals with disabilities.

The Transition Services, Mobile Crisis, Behavioral Management Family Training Pilot are each aimed at providing direct services to 1915c waiver participants and their families. The Transition Services project would provide support to individuals desiring to move from an institutional setting to receiving HCBS in their homes. The State confirms it will not pay for room and board as part of the activities of this program.

The Remodeling Grants—HCBS Providers proposal would include capital investments as permitted under 9817 of the ARP. Kansas proposes to provide grant opportunities to HCBS providers that demonstrate the ability to come into compliance with the HCBS settings criteria but for the need of small to moderate capital improvement projects. The State understands that these investments would be required to result in settings that are fully compliant with the settings final rule and that FFP could not be claimed for capital investment activities approved in ARP section 9817.

Study I/DD & PD Waiting Lists	\$ 1,000,000
Transition Services*	\$ 0
Study Targeted Case Management Models	\$ 795,430
Mobile Crisis Response for I/DD	\$ 3,500,000
Sequential Intercept Model (SIM) Consultant	\$ 28,000
Behavioral Management Family Training Pilot	\$ 1,500,000
Person Centered Planning*	\$1,000,000
Technology 1 st	\$2,000,000
Smart Home Technology *	\$3,000,000
Community Supports Waiver *	\$2,000,000
PACE Expansion*	\$2,500,000
DCF Award for Autism Behavior Training	\$333,332
Settings Rule Remodeling Grants*	\$5,000,000
IDD Tier Rate Assessment*	\$1,500,000
2 additional FMAP Staff for Initiatives*	\$302,225
One Time Payment Self Advocate Coalition of KS*	\$500,000
Community Supports Waiver Start Up Staff*	\$329,700
PACE Expansion Staff*	\$534,890
2 Additional FISC Staff*	\$304,972
FMAP Staff Training and Travel*	\$150,000
Total Access to Care Initiatives	\$26,298,549

April 2022 Access to Care Initiatives Progress Update: The I/DD & PD Waiting List Study RFP is written and currently working through the State procurement process in preparation for release. The RFP for Targeted Case Management Model Study has been drafted and will be entering the procurement process. KDADS is currently in discussions with Policy Research Associates (PRA) regarding scheduling a statewide Sequential Intercept Model Mapping Workshop for July of 2022. Additionally, outreach has been made to schedule meetings to review the Behavioral Management Family Training Pilot with stakeholders to help formulate the pilot design. Further details will be provided in upcoming reports on all projects as progress continues to be made.

To date, KDADS has no expenditures to report for the project listed under the Access to Care Initiatives category.

July 2022 Access to Care Initiatives Progress Update: I/DD and PD Waiting List Study RFP is in the RFP review. KDADS anticipates this study will begin in the next few months. The RFP for Targeted Case Management Model Study is in the process of being posted by KDADS procurement, as well. KDADS has finalized its agreement with Policy Research Associates (PRA). KDADS and its stakeholders are conducting meetings regarding key topics, dates, and attendees for the upcoming Sequential Intercept Model Mapping (SIM) Workshop. KDADS is working with PRA to host the Workshop in the fall. KDADS anticipates the SIM workshop will provide resources to enhance other Access to Care Initiatives. KDADS is also in the early stages of meeting with stakeholders and planning for the RFP for a Mobile Crisis Response for I/DD.

October 2022 Access to Care Initiatives Progress Update: I/DD and PD Waiting List Study contract has been granted to the University of Kansas and they are in the process of gathering waitlist information. The RFP for the Targeted Case Management Model Study was posted, and procurement is in process. KDADS met with stakeholders for the Sequential Intercept Model Mapping (SIM) Workshop that is scheduled for a 2-day event in November 2022. KDADS is working with a contractor to host the Workshop next month. KDADS anticipates the SIM workshop will provide additional resources to enhance other Access to Care Initiatives as well. KDADS continues to be in the early stages of meeting with stakeholders and planning for the RFP for Mobile Crisis Response for I/DD.

January 2023 Access to Care Initiatives Progress Update:

KDADS received data set requests from its contract researcher, the University of Kansas (KU), for the waiting list study. HIPAA-compliant data has been shared with the researchers.

The RFP for the Targeted Case Management Model Study closed, and KDADS is in the process of procuring a vendor.

The Kansas Statewide Sequential Intercept Model (SIM) conference was held on November 9th and 10th. During the two-day conference 80 individuals from various disciplines including mental health, disability services, advocates, law enforcement, corrections, housing, and state agencies assembled to discuss critical needs for individuals living with complex issues. Kansas is the first state to hold a SIM Conference that focuses on better serving individuals who are living with mental health and I/DD. The conference was facilitated by Policy Research Associates (PRA). Professionals discussed case study examples and identified barriers that exist in Kansas system. Organizations that facilitated previous SIM Conferences discussed how they used the report to make change in their

work. The second day ended with professionals identifying six key areas to focus on moving forward. FMAP team will use the SIM report to guide additional initiatives to help individuals living with complex needs.

April 2023 Access to Care Initiatives Progress Update:

KDADS met with the University of Kansas regarding data requests and surveys. The University of Kansas (KU) collaborated with SACK on plain language for the survey discussion. Additional questions and expanding data requests were received. There was an additional meeting with KDADS and the University of Kansas regarding clarification for the data requests regarding the number of participants for the IDD Waiver and the PD Waiver individually.

KDADS selected a vendor for the Targeted Case Management Study, awaiting finalized contract.

July 2023 Access to Care Initiatives Progress Update:

In February post SIM conference stakeholder groups were facilitated by KDADS FMAP Training and Programming Grants Coordinator, Megan Shepard, based upon the six key priority for change.

The final Sequential Intercept Model (SIM) report was received in March from the contractor Policy Research Associates. The SIM report outlined six key priorities for change to implement. The report was distributed to the SIM participant group via email in May. A SIM Leadership Committee was assembled in May to oversee the key priorities for change. The SIM Leadership Committee is composed of professionals that interact with individuals living with I/DD such as Law Enforcement, Judges, Case Managers, Self-Advocates, KDADS Employees, KDHE Employees, Behavioral Health Professionals, MCO's, and CDDO's. The SIM Leadership Committee is currently working on a cross-system person-centered statewide data system.

KDADS and Department for Children and Families (DCF) signed a Memorandum of Understanding (MOU) in March to fund a new initiative. The Kansas Foster Parent Resource Center (KFRPC) will utilize current training systems to develop a series of state-wide ECHO webinars to provide an overview and education of the behavioral characteristics of children with ASD/IDD, medical needs associated with these children (e.g., physician education services to increase physician referral to services for children in foster care), and training needs for birth/foster families, and professionals who serve them. The goal of this collaboration is to increase the engagement of key stakeholders, educate professionals and foster parents within the system, train professionals how to deliver evidence-based practices, and ultimately increase positive outcomes for children in care. KDADS FMAP has distributed funding to DCF in the amount of \$333,332.00. DCF is still in negotiations with the contractor.

The Behavioral Management Training RFP is in the process of being awarded by procurement. No funds have been distributed at this time.

KDADS accessed, processed, and provided the clarified data requests for the IDD Waiver and the PD Waiver to KU. KU continues to work with Jamie Katsbulas, Waitlist/TCM Study Coordinator and KDADS staff, to process data received to develop the predictive model for this study. KU has sent

invites to Kansas and additional states regarding their waitlist management. These meetings will take place over the next few months to allow time for states to meet and discuss for IDD and PD waivers. KDADS continues to meet with KU monthly for status updates.

KDADS finalized the Targeted Case Management Study contract with Public Consulting Group (PCG). Jamie Katsbulas Waitlist/TCM Study Coordinator and KDADS staff, met with PCG to discuss targeted case management data, training, process mapping, conflict management and stakeholder meetings. Initial email and website posting was completed. Stakeholder meetings will begin and have MCOs, CDDOs, TCMs, SACK, Interhab, and Individuals/Families/Guardians.

April 2022 Staffing Support Progress Update: *KDADS has successfully hired 1.0 FTE position to oversee the approved Section 9817 projects. Additional positions to manage the grant initiatives and strengthen and support program quality and oversight are in the recruitment process.*

To date, KDADS has no expenditures to report for the additional staff support, as the timing of the hire and payroll period fall outside of this reporting period. As additional staff are onboarded, KDADS will include the payroll expenditures in its reporting.

July 2022 Staffing Support Progress Update: *KDADS has hired an additional 2.0 FTE positions to oversee the approved section 9817 projects. Two additional staff to manage the grant initiatives to strengthen and support program quality and oversight are in the recruitment process. To date, KDADS has spent **\$40,007.64** in staffing support for 3.0 FTE positions supporting the 9817 projects.*

October 2022 Staffing Support Progress Update: *To date, KDADS has spent **\$122,203.00** in staffing support for 3.0 FTE positions supporting the 9817 projects. There are currently 2 additional open positions; the Workforce and Employment 1st Specialist and the HCBS Waiting List/TCM Study Coordinator. KDADS continues efforts to recruit these staff.*

January 2023 Staffing Support Progress Update: *No further updates for this quarter.*

January 2023 Staffing Support Progress Update: *No further updates for this quarter*

KDHE INITIATIVES

- 1. Leverage More Community-Based Resources to Support Health Equity.** Stakeholder groups have approached the state about incorporating community health workers (CHWs) into the Medicaid program, with the goal of increasing health equity. CHW activities would strengthen care coordination by connecting beneficiaries with available healthcare services and social supports to address social determinants of health; health education for ARPA Section 9817 eligible program beneficiaries with high-cost chronic conditions; health assessments and environment health assessments; referrals; rural oral health referrals; and oral health referrals for disabled adults.

Initiatives in this area would include exploring contractual agreements with the public health departments, FQHCs, or other entities employing CHWs in which they would act as liaisons with

the MCOs. KDHE would also partner with the state's Division of Public Health to establish contracts with entities employing CHWs. The state would also include an evaluation component, which should be intended to inform the role of CHWs in the next iteration of Medicaid managed care (KanCare). The goal of these initiatives is to improve access to community-based services to help ensure that ARPA Section 9817 eligible Medicaid beneficiaries are able to live safely in the community. KDHE would pursue this in a manner which would keep this funding out of capitation rates.

April 2022 CHW Progress Update: *KDHE has been working with our colleagues in the Division of Public Health to design pilot projects for Medicaid CHW investments, with a focus on the HCBS population and emerging areas of need. Part of our work involves researching strategies for ongoing Medicaid support of CHWs. At present, the Division of Public Health is finalizing proposals for the Medicaid division to consider. To date, no funds have been spent toward this initiative.*

July 2022 CHW Progress Update: *KDHE has been working with the Division of Public Health and community partners to design a pilot project for CHWs with a focus on the HCBS population and emerging areas of need. A draft proposal has been developed, and the team is meeting in late July to review to ensure Section 9817 compliance.*

In April, the state also reported that KDHE was researching strategies for ongoing Medicaid support of CHWs. Since that time, we have identified possible sustainability options that include Section 9817 funding and non-Section 9817 funding. KDHE is discussing those options with other states that have achieved sustainable CHW funding. To date, no funds have been spent toward this initiative.

October 2022 CHW Progress Update: *KDHE continues to work with stakeholders to design a pilot project that would focus on the HCBS population. These meetings are continuing into fall 2022. To date, no funds have been spent toward this initiative.*

January 2023 CHW Progress Update: *KDHE worked extensively with stakeholders to design a pilot project that would focus on the HCBS population. Unfortunately, the work groups were unable to identify a CHW project that would meet the state's needs while not duplicating expenses, and still remain in compliance with the ARPA Section 9817 guidelines. To date, no funds have been spent toward this initiative. KDHE is considering other options to replace this initiative.*

July 2023 CHW Progress Update:

- 2. Housing and Homelessness Incentive Program to Support HCBS.** Initiatives in this area would include developing an incentive program allowing MCOs to earn additional bonus payments for creating housing investments in Kansas for Section 9817 eligible program beneficiaries, such as short-term housing subsidies and partnerships with community-based housing organizations. The purpose of this activity is to encourage the Medicaid MCOs to invest in housing for members who

lack housing stability and are at risk for institutional placement due to health needs complicated by homelessness or inadequate housing. These activities would be targeted at individuals who are receiving services described in Appendix B to SMD #21-003. The state would seek to learn from this time-limited pilot to inform the next iteration of KanCare.

This incentive program would *not* pay for room and board but would enable MCOs to earn incentive payments for housing investments. For example, one Medicaid MCO is currently working on a performance improvement plan (PIP) to provide housing resources for members who are homeless or at-risk of homelessness. That PIP includes working with homeless shelters to connect members with needed services and investing in transitional housing units to help serve medically complex members who are homeless and have high utilization in medical claims.

This incentive program would encourage similar investments in housing supports but would not pay for room and board or capital investment costs.

April 2022 Housing and Homelessness Progress Update: *KDHE intends to begin discussions with the MCOs later this spring, after the legislative session has concluded. To date, no funds have been spent toward this initiative.*

July 2022 Housing and Homelessness Progress Update: *KDHE has had to postpone discussions with the MCOs as other, more urgent priorities have arisen. We hope to reschedule these discussions for fall 2022. To date, no funds have been spent toward this initiative.*

October 2022 Housing and Homelessness Progress Update: *KDHE has had to further postpone discussions with the MCOs as other, more urgent priorities have arisen. We hope to reschedule these discussions for spring 2023. To date, no funds have been spent toward this initiative.*

January 2023 Housing and Homelessness Progress Update: *Recent CMS guidance on using 1115 authority for addressing health-related social needs has led the state to defer further discussions with the MCOs on this initiative. The state will need to assess the new 1115 opportunities and determine whether that type of approach would better fit the state's needs.*

July 2023 Housing and Homelessness Progress Update:

- 3. State Infrastructure Support.** The state would seek to invest in IT infrastructure to better detect and prevent fraud, waste, and abuse in HCBS services. Specific initiatives would include paying one-time costs to link Pondera, a data analytics solution, to the state's MMIS system so that the state's Medicaid Fraud Control Unit and Medicaid Inspector General's Office can mine Medicaid data more efficiently. The goal of this initiative would be to identify and deter improper payments that may be wasting HCBS resources, and to support the Medicaid Inspector General's strategic plan to conduct targeted reviews of HCBS services. Section 9817 funding can help these important functions acquire data analytics tools that otherwise would not be accessible given their available

resources.

April 2022 State Infrastructure Progress Update: *The systems work necessary to link the Pondera solution to the state's MMIS is in process. The state's systems contractor has transferred a test file to Pondera and is awaiting feedback on the success of that transfer. To date, no funds have been spent toward this initiative.*

July 2022 State Infrastructure Progress Update: *The systems work necessary to link the Pondera solution to the state's MMIS has been completed, and the parties have agreed to a standard data set and reporting frequency. The state's fiscal agent is currently working to pull four years of historical data as part of the initial data transfer. That initial data transfer is scheduled to occur the week of July 18. The state has encumbered **\$21,671.21** to pay invoices for systems work completed to date, but no funds have actually been spent yet.*

October 2022 State Infrastructure Progress Update: *The systems are now linked. To date, **\$9,435.79** has been spent on this initiative.*

January 2023 State Infrastructure Progress Update: *No further update on this initiative.*

July 2023 State Infrastructure Progress Update:

4. **Training for Primary Care and Dental Providers to Expand and Improve Services to HCBS Patients.** Initiatives in this area would include hiring a consultant or other outside entity to work with the KDHE training team to design and develop a curriculum to train PCPs and dentists to better serve HCBS and other ARPA Section 9817 beneficiary groups. This training would be available to PACE network providers, primary care providers, and dentists. This initiative would seek to enhance, expand, and strengthen medical services provided to HCBS consumers to ensure that primary medical care is tailored to HCBS consumers' unique needs. The state also hopes that offering this training will encourage more providers to enroll in Medicaid to help serve this population. The state would seek to partner with a disability organization to research and deploy the evidence-based training program or curriculum and provide certifications and/or incentive payments to providers who complete the training. The preferred mechanism for any incentive payments would be outside of capitation rates.

April 2022 Provider Training Progress Update: *KDHE intends to begin planning discussions with stakeholders later this spring. To date, no funds have been spent toward this initiative.*

July 2022 Provider Training Progress Update: *KDHE engaged in stakeholder discussions in late spring 2022 concerning the Kansas adult dental benefit. Those discussions yielded some valuable input on how the state can improve access to dental services for HCBS members. KDHE intends to begin planning discussions on possible procurement activities to support this activity later in the summer. To date, no funds have been spent toward this initiative.*

October 2022 Provider Training Progress Update: *KDHE has begun discussions on possible procurement activities to support this activity. The state is also participating in an interim*

legislative committee during fall 2022 that might yield additional recommendations on how to implement this initiative. To date, no funds have been spent toward this initiative.

January 2023 Provider Training Progress Update: *In fall 2022, KDHE participated in an interim legislative committee focused on how to best address the needs of the I/DD population in Kansas. From those discussions, it appears that KDHE may need to revisit this initiative to ensure it aligns with KDADS' initiatives concerning workforce and remains targeted at the most pressing needs for this population.*

July 2023 Provider Training Progress Update:

- 5. Evaluation of the STEPS Employment Support Pilot Program.** Kansas' approved 1115 waiver includes a pilot project to provide pre-employment services, on-the-job supports, independent living counseling, and other supportive services to assist Medicaid beneficiaries in finding and keeping competitive, integrated employment. The state would seek to retain our EQRO to conduct an in-depth evaluation of the pilot to help inform the next iteration of KanCare. As described in STC #22, the target population for the STEPS program includes HCBS participants, those on wait lists for 1915(c) HCBS waivers, and individuals who receive services through SSI or SSDI and have qualifying behavioral health diagnoses. Although the STEPS program serves the HCBS population, HCBS funding does not pay for the program. Therefore, Section 9817 funding used for this evaluation would only supplement, not supplant, existing HCBS funding.

April 2022 STEPS Evaluation Progress Update: *KDHE has identified a vendor and has been discussing evaluation design with that vendor. Tentative plans are for evaluation work to commence during summer or fall 2022. To date, no funds have been spent toward this initiative.*

July 2022 STEPS Evaluation Progress Update: *KDHE's contracted researcher began work on this project on July 1, 2022. To date, no funds have been spent toward this initiative. The vendor will bill KDHE in accordance with the approved task order.*

October 2022 STEPS Evaluation Progress Update: *KDHE's contracted researcher began work on this project on July 1, 2022. To date, no funds have been spent toward this initiative. The vendor is expected to bill KDHE in October 2022 in accordance with the approved task order.*

January 2023 STEPS Evaluation Progress Update: *Work continues on this evaluation. To date, no funds have been expended. KDHE is awaiting invoicing from the contractor.*

July 2023 STEPS Evaluation Progress Update:

KDADS would like to add several initiatives that were not in the initial Compendium. The Kansas Department of Disability and Aging Services (KDADS) continues to utilize funding provided through section 9817 of the ARPA. Beyond the spending plan provided to CMS by Kansas leaders, new initiatives are continually being developed. These programs align with the CMS guidance outlined in SMD# 21-003 dated May 13, 2021. KDADS is requesting funding for the following programs through 03/31/2025:

PACE Expansion - \$2,500,000 program + \$534,890 2 staff—SMD#21-003 Appendix B outlines the Program of All-Inclusive Care for Elderly (PACE). KDADS is requesting funds to enhance and expand PACE to other regions of Kansas including rural PACE, this requires hiring of 2 additional PACE staff. A request for proposal would be developed for FY24. KDADS believes the proposed programs will strengthen FMAP program initiatives and cross-system partnerships with the ultimate goal of continuity of care and support from a multi-disciplinary network of services.

This funding will be used to expand PACE program to rural Kansas counties. This expansion will require two additional PACE staff. KDADS understands that final approval for PACE expansion will go through CMS post 9817 approval.

SMART Home Technology – \$3,000,000 program + \$151,113 1 staff- KDADS would like to explore SMART home technology as a method to increase individual independence for individuals on the HCBS waivers requiring direct staff support. KDADS is requesting use of \$3,000,000, the goal is to determine how needed services and supports that typically would require human support could increase independence and decrease the need for such supports. The SMART Home Technology aligns with SMD# 21-003, Appendix B, as HCBS Medicaid Authority Section 1915(k) Home and Community Based Services. Approval would allow for providers and provider networks to apply for grants that support SMART Home Technology.

Kansas is requesting funding in the amount of \$3,000,000 to provide multiple requests for applications to allow providers to implement new and innovative technology uses for in-home use. These grants would allow providers to determine the best use for SMART Home Technology. This program aligns with the CMS guidance outline in SMD# 21-003 dated May 13, 2021. Technology assistance aligns with services outlined in Appendix B, HCBS Medicaid Authority “Home Health Care” and Personal Care Services”. Appendix D provides examples of Section 9817 of the ARP activities to support state HCBS capacity building and LTSS rebalancing reform. This initiative falls under the activity function, “Expanding the use of Technology and Telehealth” and “Providing Access to Additional Equipment or Devices”. This funding will increase independence for individuals in Kansas and allow them to stay in the community and away from an institutional setting. The funding can include but not limited to the following services and supports:

- *Remote support*
- *Independence-enhancing living options*
- *Peer support models*
- *Enhanced and expansion on current HCBS services*
- *Expansion of caregiving models*
- *Technology support for daily tasks*
- *Tele-Communications start-up costs (e.g., equipment, internet connectivity activation costs)*
- *Testing the impact of assistive technologies on the need for in-person supports*
- *Providing smartphones, computers, and/or internet activation fees to address functional needs, promote independence, and/or support community integration*

- **Employment First Provider expansion- \$1,500,000 program + \$151,113 1 staff** - KDADS would like to offer opportunities for 14c providers to request funds through RFAs to become Community Integrated Employment (CIE) providers. The E1st Provider Expansion aligns with SMD# 21-003, Appendix B, as HCBS Medicaid Authority Section Managed Long Term Services and Supports. Approval would allow for 14c providers to apply for grants to become CIE providers.

KDADS is requesting \$1,500,000 to develop a request for application that allows employers to develop plans and training for individuals living with disabilities. Employers who currently utilize 14(c) of the Fair Labor Standards Act would be provided the opportunity to become Community Integrated Employment providers. This program would be an expansion of the Employment First initiative previously approved by CMS using ARPA funding. Supported employment promotes independence and allows for individuals living with disabilities to be integrated into the community. This initiative falls under the guidance of eligibility requirements under the Managed Long Term Services and Supports section in Appendix B of SMD #21-003 and a compliant demonstration under section 1115.

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IDD Tier Rate assessment- \$1,500,000- conduct required biennial IDD tier rate study for state of KS. *KDADS is required to complete a biennial IDD Tier Rate study as put forth by the Developmental Disability Reform Act. Completing the IDD Tier Rate Assessment would meet the eligibility requirements under the Managed Long Term Services and Supports section in Appendix B of SMD #21-003 and a compliant demonstration under section 1115.*

KDADS FISC Staffing \$304,972 2 staff- In order to meet the deadline of 03/31/2025 KDADS will need 2 additional staff to assist the FMAP team in processing RFPs, RFAs and budgeting with the expansion of additional FMAP opportunities. To meet the deadline outlined in guidance from SMD# 21-003, March 31, 2025 KDADS is requesting the use of funds for two additional procurement and fiscal staff. These two positions will work closely with KDADS Procurement and Fiscal team to prioritize FMAP projects.

Self-Advocate Coalition of Kansas (SACK)- \$500,000 - due to the requirement of Self Advocate involvement, the State of Kansas would like to provide the Self Advocate Coalition of Kansas (SACK) a one-time payment for the agency to hire additional self advocate staff, staff support, and transportation needs. *SACK is a statewide advocacy group made up of adults with intellectual and/or developmental disabilities, the majority of whom receive services through the Kansas Developmental Disabilities Service System. The addition of including self-advocates on all projects relating to Appendix B of SMD #21-003 ensures the voice of those living with disabilities is heard and their suggestions and lived experiences are taken into account on all projects relating to Appendix B and utilizing FMAP funding. Self-advocates are included in the projects as consultants and team/board/committee members.*

Staff Training/Travel/Conferences - \$150,000 – *The enhancement and expansion of training opportunities for HCBS staff is imperative for ensuring the highest quality of service development and delivery. This can be achieved by providing education on best practices and enabling networking with peers from other*

states. The objective is to provide optimal outcomes for the HCBS waiver participants in Kansas, with a focus on HCBS FMAP-eligible services. It is crucial that the agency be appropriately resourced to carry out this work efficiently and effectively to maximize the opportunity presented to the State and to meet the quarterly federal reporting requirements. Additionally, as the state works deeper into initiatives, it has become apparent that allocation for staff education and travel is of essence to the core of networking with various other states working on like indicatives. The additional training would enhance staff's knowledge of current issues and solutions nationwide for MLTSS, thereby facilitating the delivery of higher-quality HCBS programming. This funding meets the eligibility criteria under the MLTSS section of Appendix B of SMD #21-003.

Those initiatives include:

- **Person Centered Support Planning** – utilizing Charting the Life Course
- **Technology 1st** – technology provided to individuals to increase independence
- **Smart Home Technology** – providers can request funds to implement Smart Home Technology in settings that individuals would benefit from, however, not violate human rights issues and concerns.
- **Community Support Waiver** – requesting funds for up start of Kansas' Community Support Waiver
- **PACE Expansion** – requesting funds to increase PACE programs and staffing in rural communities
- **IDD Tier Rate Assessment** – requesting funds to fulfill the biennial requirement of IDD Tier Rate Reimbursement assessments

Finally, KDADS intends to hire additional staff positions to implement and oversee the projects listed above associated with these funding opportunities. It is crucial that the agency be appropriately resourced to carry out this work efficiently and effectively to maximize the opportunity presented to the State and to meet the quarterly federal reporting requirements. Additionally, as the state works deeper into initiatives, it has become apparent that allocation for staff education and travel is of essence to the core of networking with various other states working on like indicatives. Lastly, due to the requirement of Self Advocate involvement, the State of Kansas would like to provide the Self Advocate Coalition of Kansas a one-time payment for the agency to hire additional self advocates and pay for their support staff and travel needs.