Dear Dr. Mosier:

Thank you for the February 17, 2017 and April 17, 2017, corrective action plan (CAP) responses to the findings letter the Centers for Medicare & Medicaid Services (CMS) sent to Kansas on January 13, 2017. This letter conveys CMS’ approval of the Managed Long-Term Service and Supports (MLTSS) CAP response and details a proposed process for moving forward with the CAP implementation.

The MLTSS CAP response, consisting of both the original response sent February 17 and the supplemental documents sent April 17, are approved. We appreciate the weekly meetings we have had since mid-March. Consistent with those meetings, we want to memorialize three points to which CMS and the state have agreed:

First, the state has agreed to include a measure evaluating the number of grievances and appeals related to services not provided as authorized in an enrollee’s plan of care. This measure relates to the requirement for provider signatures on home and community based services (HCBS) plans of care pursuant to 42 C.F.R. 441.301(c). CMS requests the state incorporate those changes into the CAP document.

Second, we note that some of the findings and actions proposed in the responses in the MLTSS CAP overlap with the 372 CAP. CMS and the state agreed that the corrective actions and evaluation measures in the two CAPs should align, to the greatest extent possible.

Finally, CMS looks forward to enhancing its partnership with Kansas to monitor the implementation of the CAP through the end of the timelines presented in the plan. During the April 25th weekly call, we agreed with state staff to continue with biweekly calls through the end of June 2017. In advance of each biweekly call, CMS is willing to provide a list of the milestones from each CAP with target dates that have either passed since the last call, or are upcoming so that our time together can be used efficiently. The state may use these calls to report on progress made with regard to each milestone, highlight any evidence of resolution of findings, and provide any documentation, as appropriate. After June 30, 2017, we can revisit the frequency of the calls again and make any adjustments that seem appropriate to all involved.
CMS appreciates and thanks the state for the hard work put into the development of this CAP and looks forward to working with you during implementation. If you have any questions regarding this letter, please contact Michala Walker at (816) 426-5925.

Sincerely,

James G. Scott
Associate Regional Administrator
for Medicaid and Children’s Health Operations