



October 26, 2016

In a recent *Wichita Eagle* editorial, Kansas Department for Aging and Disability Services (KDADS) Secretary Tim Keck described the state's safety net for Kansans as "strong and improving every day." In reality, the state's safety net has eroded so much that in Johnson County, local taxpayers have had to step in to that role.

Some of our most vulnerable citizens...people with disabilities, a mental health diagnosis, or both...are quite simply "slipping through the cracks". This is despite all of the promises that accompanied the launch of KanCare, including:

- No reduction in Medicaid eligibility
- No Medicaid rate reductions
- No cuts in benefits or services
- More administrative efficiency
- Increased resources for community employment
- Improved access to behavioral health care for those with I/DD
- Improved health outcomes
- A full time Inspector General to provide program oversight

Nearly four years in, Kansas is not seeing these promises fulfilled. What we have seen is an underfunded system that is continuously being whittled away. There is no Inspector General to serve as a watchdog over the program. Instead of increased administrative efficiency, clients and providers have to deal with three private Managed Care Organizations (MCO) who all do things a bit differently. Increased resources through KanCare for community employment and behavioral care have not yet materialized. Improved health and wellness outcomes have not been measured. And in 2016, the hits just kept on coming.

In May, Governor Brownback cut more than \$56 million from KanCare to help balance his budget. This resulted in a four percent cut to Medicaid, impacting Targeted Case Management, community mental health centers, and the health and dental care our clients all rely on. The administration touted the fact that home and community based services were not part of these cuts.

However, what soon followed were cuts to I/DD supports and services that masqueraded as state policy changes. One of those policy changes was stricter enforcement of the Capable Person Policy, which has drastically reduced for many the supports for disability related needs they receive in their home. A second recent policy change is the Residential Pay Policy, which has so dramatically affected providers of residential services. When layered over the fact that Medicaid rates have been stagnant since 2008, virtually no Johnson County service provider will take on new residential clients. Some have stopped providing residential service. Some are closing their doors completely.

One provider closing its doors this week is Cornerstone Supports. Sixteen clients served by Cornerstone suddenly needed to find other providers to support them. Where is the safety net in this situation? It's not the state, and it's not the MCOs. The governing board of Johnson County Developmental Supports voted to ask the Johnson County Board of County Commissioners, who oversee the Johnson County

Developmental Supports budget, to create staff positions to support individuals from Cornerstone left without a provider. These people's lives have been disrupted and services put in jeopardy due to state policy changes and the Governor's budget cuts.

For the Johnson County Mental Health Center, County Government has been put in a position to fill the financial burden left by funding reductions and ill-conceived policy decisions in the amount of \$7.9 million in charitable care to uninsured and underinsured county residents. Furthermore; a once state-of-the-art mental health safety net has been slowly dismantled leaving some of our most vulnerable citizens at risk.

This is most evident within the State Hospital System. In 2014, voluntary admissions to the Osawatome State Hospital (OSH) were suspended. At that time there were a total of 206 beds and average daily census was above 200. In April 2015, the total bed count was reduced to 146 following a survey from the Center for Medicare and Medicaid Services (CMS) citing security and safety issues. In June 2015 the KDADS Secretary placed a moratorium on all admissions to OSH. Since that time only involuntary admissions have been approved and then only when the hospital's census drops below 146 patients. This means that individuals who are considered to be a danger to themselves or others are not admitted until space becomes available. In December 2015, CMS decertified the OSH due to the State's failure to address security and safety issues cited by federal inspectors. In September 2016, the OSH census was 140 with an all-time high of 30 individuals on the waiting list. This would not be an indication of a "strong" and "improving" safety net, but more reflective of a neglected and underfunded state mental health safety net system meant to protect the most vulnerable citizens of our communities and our state.

The lack of support by the state for our vulnerable citizens has forced the taxpayers of Johnson County into the position of paying for services that are the responsibility of the state.

At the end of Secretary Keck's editorial, he praised Kansas for "achieving remarkable success in caring for disabled citizens." We have not seen the remarkable success that is described and are holding our breath that no other crisis or cut is forthcoming.

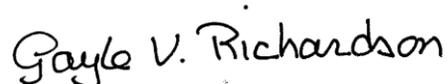
Sincerely,

B. Scott Tschudy

Chairperson, Advisory Board
Johnson County Mental Health Center

Gayle V. Richardson

Chairperson, Governing Board
Johnson County Developmental Supports



Ed Eilert

Chairman of the Board, on behalf of the
Johnson County Board of Commissioners

