

Health Homes Herald

August, 2014

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Helping people live healthier lives by integrating and coordinating services and supports to treat the “whole-person” across the lifespan.

SMI Health Homes SPA Receives CMS Approval!

We are excited to report that the State Plan Amendment (SPA) for the SMI Health Home population has received official approval from The Centers for Medicare & Medicaid Services (CMS). Official approval came in on July 28, 2014.

With this formal approval, SMI Health Homes are now officially implemented

and Kansas joins 15 other states who as of June 2014, have achieved federal approval for their Health Homes SPAs.

The process for developing, editing and submitting the SPA was a difficult and time consuming one. We at KDHE would like to thank our colleagues, stakeholders and the staff at CMS for the patience and guidance they have shown us as

we worked toward this goal.

If you would like to review the final SPA document, it is located on the Health Homes website at: http://www.kancare.ks.gov/health_home/providers_materials.htm

For questions, please contact KDHE at healthhomes@kdheks.gov or call (785) 296-3981.

Health Homes Manager: Rick Hoffmeister

In the last few weeks, I've received a tremendous number of questions from providers and consumers alike. For this month's Newsletter, I thought it would be useful to highlight one of the more frequently asked questions I've received.

Some providers have asked me to clarify the billing diagnosis that they should be using for Health Homes. To answer this, remember that the Health Home member has been determined eligible by the MCO (based on claims data) and you can see this on the MCO's portal. Your payment for Health Home services is not determined by the diagnosis you put on your claim.

As always, you may contact me with any questions you may have.

Email: rhoffmeister@kdheks.gov

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Upcoming News and Events

- Weekly SMI Implementation Calls — Thursdays at 10:00am
- Weekly CC Stakeholder Calls — Wednesdays at noon.
- HAP webinar series to begin in late August
- Health Homes Learning Collaborative — September, 2014.

Questions?

Email: healthhomes@kdheks.gov

Phone:

1-785-296-3981



Consumers' Frequently Asked Questions

Are there rules for how and when to opt-out?

Members may opt out at any time. But remember, there is a lot of paper work that must be done for programs this big. This means that it may take a little while for opt outs to be completed. If you are I/DD and want to opt out, we will make sure the opt out sent in July is completed.

You do not have to go to meetings with the Health Home Partner while your opt out is being processed. Remember, Health Homes do not replace any services. If you don't participate you will still get the care that you are already receiving.

We think that Health Homes will help you stay healthier but opting out is your choice. If you want to opt out, send your opt out form to HP in the postage paid envelope that came in the mail. Or, call this toll free number: 1-866-305-5147.

Only the KanCare member or their responsible party identified on their medical case can call to opt them out.

If you have questions or would like to learn more about Health Homes please call Samantha Ferencik:

Email: sferencik@kdheks.gov

Phone: (785) 296-8001

Update from Wichita State University Center for Community Support & Research

Coming Soon!

The WSU Center for Community Support and Research has received a grant from the Kansas Health Foundation to provide training to Health Home Care Coordinators/Managers on writing quality Health Action Plans (HAPs). The four-part, interactive webinar series will begin in early September with ongoing Community of Practice support beginning in the fall of 2014. Please watch for your invitations coming soon!

If you have questions, or want to add someone to the invitation list, please contact Vanessa Lohf, Public Health Initiatives Project Specialist at WSU Center for Community Support & Research:

Email: vanessa.lohf@wichita.edu

Phone: (316) 978-5380



SMI Health Home Providers: Noteworthy Updates

Now that the SMI Health Homes are up and running, we have a few items to update you on:

First, KDHE has posted an updated version of the Program Manual for SMI Health Homes to the KanCare website:

http://www.kancare.ks.gov/health_home/download/KanCare_Health_Homes_Program_Manual_SMI.pdf

This Program Manual is no longer “draft”. As mentioned earlier in the Newsletter, CMS has approved this State Plan Amendment and the Program Manual can now be considered formal and final. This new Program Manual also contains additional billing information as well as further clarification regarding the Physician’s role in the Health Home.

A second important update to be aware of is the state’s decision regarding physician involvement in the development of the Health Action Plan (HAP): The physician does not need to sign the HAP unless involved in the development of the plan. The state still expects that copies will be given to the participant, the Primary Care Provider, those who participated in developing the HAP, as well as anyone else involved in achieving the goal(s) established in the HAP.

Questions or concerns may be directed to Samantha Ferencik:

Email: sferencik@kdheks.gov

Phone: (785) 296-8001

Chronic Conditions Health Home Providers: Implementation Calls

The state is happy to announce a series of telephone calls for providers interested in the Chronic Conditions Health Homes. The purpose of these calls is to provide an update on the Chronic Conditions Health Home progress toward implementation and to answer questions about that topic. (There is another call to talk about SMI Health Homes implementation that occurs on Thursdays at 10:00 am)

Chronic Conditions calls occur weekly and are held Wednesdays at noon. Calls will last no longer than one hour.

Please note: The number of incoming lines KDHE can support is limited, so staff in the same agencies should gather around a single phone line whenever possible.

Call-in information is available on the Health Homes website. If you need more information, in general, about Health Homes (e.g., what they are, how they work, how to become a Health Home Partner), please visit the KanCare Health Homes website: http://www.kancare.ks.gov/health_home.htm

You may contact Samantha Ferencik if you have additional questions or concerns

Email: sferencik@kdheks.gov

Phone: (785) 296-8001



Increase Expected in Medical Care Costs for COPD

The Centers for Disease Control and Prevention (CDC) has weighed in on a new study in which researchers estimate that on average each adult with chronic obstructive pulmonary disease (COPD) paid \$6,000 more in medical care than an adult without COPD.

According to the study, national medical treatment costs for adults with COPD are projected to increase from an overall \$59.3 billion in 2010 to \$90.6 billion by 2020. After taking into account costs of medical treatment for injuries and other conditions unrelated to COPD, the national estimates attributable to COPD are still high (\$32.1 billion in 2010 with a projection to \$49.0 billion by 2020).

The study reported that Medicare paid 51 percent of those costs with 25 percent paid by Medicaid and 18 percent by private insurance in 2010. The researchers also found that total absenteeism costs were \$3.9 billion in 2010 with an estimated 16.4 million days of work lost because of COPD.

This study is the first report of state medical costs for COPD,

which ranged from \$42.5 million in Alaska to \$2.5 billion in Florida in 2010. The rising costs of caring for patients with COPD is making prevention and treatment for COPD a major issue for states, providers and the public at large.

Programs such as Medicare and Medicaid have paid for most of the national health care cost related to COPD. While the costs to states vary, all are paying large amounts for conditions that can be prevented.

The CDC reports that part of the increase in cost may have to do with care received for conditions that are more common among people with COPD. Common co-occurring conditions include: heart disease, pneumonia, diabetes, asthma, and depression.

The CDC hopes providers will help lower COPD costs by using proven interventions to prevent tobacco use and reduce clinical complications of COPD. Providers should also encourage their patients to see their doctor or clinic if they have any symptoms of COPD, especially if they are over age 45 and are a current or former smoker.

Consumers can help by choosing to not start smoking and if they already do smoke, they can ask their doctor or nurse about resources to help them quit.

The American Lung Association reminds us that early detection of COPD is key to successful treatment. Most lung disease can be helped by treatment, and you can have a longer and better quality of life if COPD is caught early.

For more resources on COPD or the study summarized here, please visit:

The American Lung Association:

<http://www.lung.org/lung-disease/copd/about-copd/preventing-copd.html>

The Centers for Disease Control and Prevention:

http://www.cdc.gov/features/ds-copd-costs/?s_cid=cdc_homepage_whatsnew_001

Questions?

If you have questions, or would like more information about Health Homes in Kansas, please contact us. Our page on the KanCare website also contains information about the Health Homes project and documents are being updated regularly.

Phone: 1-785-296-3981

Email: healthhomes@kdheks.gov

Website:

http://www.kancare.ks.gov/health_home.htm

