

Kansas Mental Health Coalition

Speaking with one voice to meet critical needs of people with mental illness.

Minutes

Click on underlined items for web links.

November 17, 2021

9:30 a.m. Welcome and Introductions Mary Jones, President

Minutes of the previous meeting approved. [Read minutes draft](#) R.A. McMillan.
motion, Matt Spezia second.

9:45 a.m. Reports

Board of Directors - Next meeting is December 15

Financial Report approved. – Amy Campbell - adopted Chad Childs motion, Nancy Jensen second.

Advocacy Committee – Mental Health Advocacy Day 2022 is scheduled for February 22. Put it on your calendar and plan to participate! We hope it will be in person. Committee is always open to new volunteers and there is a poll for scheduling the rest of the planning meetings in November and December. Reach out to Mary or Amy to get involved.

Governor's Behavioral Health Services Planning Council – Council is meeting today. KMHC will distribute subcommittee report links. Prevention subcommittee is working on some advocacy items and may schedule an advocacy day at the Capitol. Wondering if those might be coordinated with KMHC Advocacy Day.

Big Tent Coalition - Mike Burgess – Stronger Together Retreat -

KanCare Advocates Network – Amy Campbell – meets on Fridays. Has been working on the framework for the Stronger Together Retreat

Consumer Programs - Matt Spezia, P3

Sheri Hall – WRAP Training is offered for free. Wellness Recovery Action Planning usually costs \$300 plus travel and materials. We really want to empower more people with this training online.

K-State Drama Therapy Department presented at the Purple Mask Theatre two ethno-dramas touching on mental health experiences. R.A. McMillan-Beckman wants to acknowledge Sally Bailey and her team for putting on this stigma busting event.

Parity Committee – Parity Issue Paper is on the agenda for today. We have received some comments from Tamara Werth, former committee chair. Hope the Coalition will embrace the paper. Call for informational hearings and particularly attention to the market conduct examinations and perhaps get an interim committee to further dive into the examination and its information. Ongoing work for parity tour and forum. Next meeting is December 1 at 9:00 a.m.

Kansas Suicide Prevention Coalition – The Coalition held its third meeting yesterday and broke into groups to work on communication planning. This included statewide communications, outreach to target groups, and policymaker engagement.

10:00 a.m. Consensus Issues Proposals

[Draft Parity issue paper Nov2021.doc](#)

Some editing necessary – focus on better defining the negative outcomes that occur from this issue.

Do we have other consensus issues to consider prior to the 2022 Legislative Session?

Please remember to review the past issue papers to consider the

Nick Reinecker – I am still interested in moving forward the issue paper I had presented a couple of years ago. I have been going to the Legislature for 8.5 years now trying to get cannabis off the controlled substances act. When we talk about underage access, collecting taxes and other public safety concerns. Would like to be able to work together to find something we could all agree on.

Amy will send out handouts so we can have a full conversation in December.

10:30 a.m. Lobbyist Report Amy Campbell – Reminder that the KDADS/KDHE handout that was presented to the MHMR Committee is linked to our minutes from the last meeting.

Mental Health Medication Advisory Committee -

Special Committee on Mental Health Modernization and Reform + Subcommittees – The committee is meeting today to hear reports from its subcommittees

- Services and Workforce Working Group: Co-chairperson Dr. Will Warnes, Sunflower State Health Plan
- System Capacity and Transformation Working Group: Co-chairperson Kyle Kessler, Association of Community Mental Health Centers of Kansas, Inc.
- Telehealth Working Group: Co-chairpersons Sunee Mickle, Blue Cross Blue Shield of Kansas and Dr. Shawna Wright, University of Kansas Center for Telemedicine and Telehealth

Special Committee on HCBS Intellectual and Developmental Disabilities Waiver – primarily focused on the issue of underpaid direct care workers, inadequate workforce and strategies to reduce the waiting list.

SPARK Executive Committee - ARPA Funds

11:00 a.m. Agency Update: Sarah Fertig, Kansas Medicaid Director

State plan for HCBS 10% increase for ARPA – Joint plan was submitted in July. They originally said they would review in 30 days. Sent partial approval September 30. Did ask a series of questions which we turned around immediately. In October re-sent everything in Word format instead of PDF. We want to start our programs yesterday, but no reply yet!

We know they are overwhelmed.

Federal vaccination orders – Executive order for federal contractors. OSHA rule for large employers on hold by court. CMS provider rule is also being challenged in court. Not issuing any guidance for the CMS interim final rule. State Medicaid agencies had no opportunity for input prior to issuance.

Will keep you informed if we hear anything new.

What is CMHCs are seeking attorney opinions but getting conflicting responses. How do we issue

Perhaps does not because CMHCs do not fall under Medicare rules of participation. Can you tell us what a federal contractor includes? Could be “new” or “renewed” contracts. Are grants contracts? Do not know. Does not cover KDHE – that is our opinion and can’t say about others.

This is why we are not weighing in on these questions. We met with some state leadership and we think the state agencies won’t have any role in enforcement, which means those providers would be regulated through federal surveys. So, we think Kansas Medicaid will be on the downstream to be notified by the federal government that a provider is not eligible to provide. Do not think the federal government is living in a hole in the ground and certainly can’t think that eliminating Stormont Vail from providing Medicare or Medicaid services would serve anyone. Also don’t expect that they will newly require our surveyors to review vaccination compliance as a part of our certification surveys.

This is precisely why we are not sticking our big noses into it. We don’t have the bandwidth or the authority. It is aggravating for us too.

They had the option of using a sledgehammer or scalpel and went with sledgehammer.

CCBHC implementation – meeting every week on lunch hour, meeting with consultant every Wednesday on lunch hour.

Before long, the first group of CMHCs to apply will be submitting cost reports. Our go live date is May 1, 2022 as per the Legislature and it will be an excited time.

Legislative Session – Medicaid Expansion is a top priority and hope to have a discussion this year. Didn’t happen last year. Don’t know if there will be a new version of the bill. Current version includes medical marijuana. It is an elephant in the room for the MHMR. That committee isn’t eager to take a position because there are legislators on it. Keeping an eye on federal legislation that sweetens the pot. Very relevant to so many of the goals of that committee like increasing access and reducing uncompensated care.

KDHE needs statutory change to comply with federal support act. This requires providers to check KTRACs. We have no way to verify that is happening. Will need to get legislative authority to access data.

ARPA option to extend postpartum coverage to 12 months instead of 60 days. Hoping for support.

MHMR – recommends study of it by Kancare Oversight.

Reprocurement of MCO Contracts / Kancare 3.0 – Slow start. Some delays getting a contractor on board to help with the process. Mercer will be helping us review what other states are doing to creatively problem solve some of the problems we have in Kansas.

Will begin with internal discussions to see what opportunities KDADS / DCF / Governors office see for the RFP.

Mercer will create a high level timeline for internal discussion, external stakeholder process, and hopefully have an RFP issued in late summer. Legislative session may change that.

1115 waiver ends 2023. We are studying our options for shifting the source of authority – 1115 offers the most flexibility and most number of bendable rules but comes with the major caveat of budget neutrality. There are built in spending caps. Our caps were set in 2018 and they are not willing to budge them even though we've had a pandemic.

Other sources of authority could allow the exact same program without that requirement.

1915 b managed care waiver combined with a small side 1115 waiver. Continuous eligibility for low income caretaker adults for 12 months has to be under the 1115. Without that, would require constant eligibility redetermination.

The change mostly affects how the state interacts with the federal government – not really any noticeable change for providers or members.

We'll see what happens. Not sure there is anyone who is hell bent to stay on an 1115. If we do shift, there is an unwinding process that takes about a year, so would have to start sometime next year. To renew 1115 would occur on a similar timeline.

One of the million dollar questions is will we stick with managed care? Don't see that changing.

We did have a debrief about hospitalization and the testimony at - speed of transition to community placement is a quality measure. Workforce issues are an issue here.

11:25 a.m. Announcements

11:30 a.m. Adjourn

2021 Schedule: Jan 27, Feb 24, Mar 24, Apr 28, May 26, June 23, July 28, August 25, Sept 22, Oct 27, Nov 17, Dec 15

Mental Health Advocacy Day - Virtual Event: February 22, 2022

Board Meetings: 12 noon quarterly the 4th Wednesdays (March 24, June 23, Sept. 22, Dec. 15)

For more information, contact: Kansas Mental Health Coalition

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Best regards,

[Kansas Mental Health Coalition](#)