



# KPHA E-NEWS UPDATE

Ph: 233-3103  
Fax: 233-3439  
Email: [director@kpha.us](mailto:director@kpha.us)  
<http://www.kpha.us>

April 23, 2007

Questions? [director@kpha.us](mailto:director@kpha.us)

## Table of Contents

### Legislative Update

### Spring Cleaning Mind Teaser

### KPHA Staff and Board Meets with REACH

### Upcoming HIV/AIDS/STDS and Human Sexuality Conference

### KPHA Receives First VISTA Application to Serve in Our Project!

---

## Legislative Update



The Legislature is on break until this Wednesday but here are the news clips:

### **Backlog Remains for Poor Seeking Health Insurance**

By Sarah Kessinger

TOPEKA - About 14,000 poor Kansans continue to wait months for state health insurance as a processing center struggles to catch up with a paperwork backlog.

State Medicaid officials said the problem, now in its 10th month, doesn't appear to be easing. Lawmakers and the governor pledged on Tuesday another \$1 million to continue working on the problem next budget year.

"Our staff has been working overtime to address this backlog. I have to believe that's led to frustration and to people giving up," said Andy Allison, state Medicaid director.

The delay is caused by a new federal rule that requires verification of each applicant's citizenship. Congress sought it to keep illegal immigrants from seeking Medicaid coverage.

From Kansas' experience so far, it appears an overreaction. It has instead left many U.S. citizens waiting for extended periods for the state to verify their paperwork.

In the meantime, the applicants - a majority of them children - remain uninsured.

"We have received literally hundreds and hundreds of applicants' phone calls and messages left with us," Allison said. "The stories are heart-breaking and we know it has an impact on health."

Some lack the means to get necessary copies of their birth certificate or other "foundation documents" proving they are citizens, officials said.

"That backlog is what we've really got to take care of," said House social services budget Chairman Bob Bethell, R-Alden, "so those in need of services are getting coverage rather than forcing them into emergency rooms and safety net clinics."

Kansas has been among the first states to recognize the problem. Allison is expected to join other states in speaking to Congress about it next week.

Additional funding of \$1 million to speed up the processing won't come until the next budget year, which begins July 1. The money is expected to cut about three to six months off time needed to catch up.

In the meantime, staff has been re-assigned and funds have been reallocated within the state's Medicaid budget to work on cutting the waiting list.

"We're very anxious to work through that," Allison said.

But as more applicants' citizenship documents are verified, more pile up.

"It takes longer now to process these individuals; they're being asked to wait months," Allison said.

Since the new rule went into place last July, the state has watched its Medicaid rolls drop by 18,000 to 20,000. That figure remains steady as of the end of March.

"We expect they'll eventually succeed in qualifying," Allison said.

The state initially identified 4,000 people who couldn't produce necessary documents, but since then that groups has been whittled down to 2,000 who can't show proof of citizenship. Allison expects the number will decrease further.

"Anecdotally there's never been any indication of large numbers of (illegal immigrants) applying," he said.

Bethell said he thinks Congress had good intentions that ended up largely affecting "legal people."

"The problem is the disenfranchisement of citizens," he said.

---

## **KU, Medical Center's Leader Recognize Outstanding Women**

By Steve Vockrodt

Barbara Atkinson said her 10-year vision of growing life sciences in Kansas relies on forming partnerships.

That includes big ones like a proposed teaching and research affiliation between the Kansas University Medical Center and St. Luke's Hospital in Kansas City, Mo.

"Some have questioned this wisdom of this path ... believing instead that the status quo is acceptable," Atkinson, executive vice chancellor of KUMC, said to those attending KU's Women's Recognition Program on Tuesday night.

She also said it relies on smaller partnerships, such as those from the women honored Tuesday night at the Kansas Union by KU's Emily Taylor Women's Resource Center.

"I invite you to enlist with me in this cause," Atkinson said.

Atkinson, the only woman in the United States to serve as a dean for a school of medicine and an academic medical center, was the keynote speaker for the KU Women's Hall of Fame induction.

She lauded Kansas as the state that many influential women have come from or represented, ranging from Amelia Earhart to Gov. Kathleen Sebelius.

"These remarkable pioneers ... stand as a reminder to the significant contributions women in Kansas have made," she told a crowd of about 150 in the Big 12 Room of the Kansas Union.

She was also an inductee into the Women's Hall of Fame.

Three others were inducted: Helen Alexander, a professor in the department of ecology and evolutionary biology; Joan Hunt, a professor of anatomy and cell biology, and Marynell Reece, civic leader.

### **Outstanding women awards**

- Alma Poehler Brook Awards - Shannon Didier, Amy Ferrell, Tiffany Knearem
- Outstanding Woman Student in Athletics - Chelsea Pryor
- Outstanding Woman in Community Service - Bridey Maidhof
- Outstanding Nontraditional Woman Student - Jennifer O'Neill, Deidre White Man
- Outstanding Woman Student in Leadership - Ellen Stolle
- Outstanding Woman in Partnership - Stephanie Gomez
- Outstanding International Woman Student - Cristina Fernandez
- Ethel Bohning Single Mother Award - Cynthia Lynn
- Outstanding Woman Educator - Elizabeth Friis

- Outstanding Woman Staff Member - Dorothy Knoll
  - Pioneer Woman - Martha Peterson
- 

## Agreement Will Save State Millions in Disputed Medicaid Claims



***Marcia Nielsen***

By Dave Ranney and Sarah Green  
KHI News Service

TOPEKA, April 17 - State and federal health officials have reached an agreement that's expected to end a series of long-standing disputes over how the state runs its Medicaid programs.

In exchange for significant changes in how some services are funded, the agreement means the state won't have to pay back millions of federal dollars that may have been misspent, Marcia Nielsen, executive director of the Kansas Health Policy Authority, told members of the House Social Services Budget Committee on Tuesday.

The agreement reached between the health policy authority and the Centers for Medicare and Medicaid Services assumes the state will pay back \$37.5 million in Medicaid payments to special education programs dating back to 2003.

Last year, several federal audits cited the state for inflating the costs of physical, occupational and speech therapies provided to students in special education programs.

"We have to pay back \$37.5 million, but it just as easily could have been 10 times that amount," said Barb Langner, an associate professor at the University of Kansas School of Nursing who has been helping coordinate the Kansas Health Policy Authority's response to the audits.

"There's a lot of liability sitting out there if they wanted to play hardball," Langner said.

Key legislators expressed relief.

"The idea of settling all the deferrals from past errors of omission or commission and getting a clean slate is

exciting," said the committee's chairman, Rep. Bob Bethell, R-Alden. "These audits and the issues behind them have been haunting us for a long time."

### **Other changes**

Similar audits and reviews are driving changes in how the state Department of Social and Rehabilitation Services uses Medicaid to fund its foster care, mental health, substance abuse and juvenile justice programs.

These changes were the subject of Governor's Budget Amendments introduced on Tuesday:

\$8.1 million for foster care.

\$7.6 million for converting the state's community mental health system to managed care.

\$10.7 million for changes in how the state pays for services for people with developmental disabilities.

The agreement assumes these changes will be in place by July 1.

Though he welcomed news of the agreement, Bethell charged that federal officials had reversed course too many times to be trusted.

"In my line of work, one of the most difficult things to achieve is a level of trust after it's been broken," said Bethell, a nursing home administrator. "I'm not convinced that I want to step forward and say I trust (federal officials) now."

Nielsen assured Bethell that while there have been instances of Medicaid rules changing in midstream, the state, too, has not always been diligent in its response to those changes.

"I'll give you an example," Nielsen said. "CMS (Centers for Medicare and Medicaid Services) issued a letter in 2001 that said 'No more bundled rates for schools, you have to move to a fee-for-service environment, and you have to document every service that's provided to a child.'

"Well, the State of Kansas is in the process of starting a fee-for-service model in July of this year," she said. "We stayed in that bundled-rate environment because we'd sort of been grandfathered in and, frankly, because we didn't want to do it."

In retrospect, she said, the switch should have been made years ago.

Though using a bundled - or average - rate proved convenient for school districts, it made it difficult for CMS to know what it's paying for, Nielsen said.

### **Bad advice**

The situation was compounded, Nielsen said, by the state relying on a consultant whose advice proved to be flawed.

"That consultant is no longer used in the state of Kansas for anything," Nielsen said. "And as long as I'm in this position, that consultant will not be used."

Nielsen did not identify the consultant, but in past testimony the consulting firm has been identified as MAXIMUS Inc.

To avoid future disputes over Medicaid policy, the health policy authority will serve as the state's sole clearinghouse for any proposed changes.

Future changes, she said, won't be approved without written federal approval.

Nielsen said the health policy authority hopes to hire a "program integrity manager" to monitor potential conflicts in state and federal interpretation of Medicaid policies.

Joe Tilghman, retired regional CMS administrator and member of the Kansas Health Policy Authority board, urged the authority to pay close attention to the deadlines spelled out in the agreement.

"SRS doesn't have a good track record, and I don't want to see them blow the July 1 implementation date," he said during a health policy authority board meeting Tuesday

Tilghman asked for "iron-clad" reassurances that SRS would have everything in place, and said the board and the health policy authority should be involved in enforcing the deadline.

"We as a board need to make clear that they're following through on their obligations," he said.

### **Expect less**

Though she heralded the agreement, Nielsen warned the committee to expect less - rather than more - from the federal government.

"Globally speaking, we are in an environment in which the federal government is shifting more and more costs onto the states," she said. "That is part and parcel of every one of these issues that we're having to fix. It's not just us, it's going on in every state."

---

## **Ban on Smoking Lights a New Fire**

### **Kansas Supreme Court Will Decide Whether Lawrence Ordinance is Constitutional**

By Diane Carroll  
The Kansas City Star

For more than two years, the city of Lawrence has prohibited smoking in many public places, including bars.

But now the ordinance that went into effect in July 2004 is under review by the Kansas Supreme Court. At 1:30 p.m. Wednesday, the court will hear arguments on whether the smoking ordinance violates the Kansas Constitution.

Dennis Steffes, who owns Last Call and Coyotes, has filed a legal petition that seeks to allow bar patrons to light up once again.

Steffes contends the Lawrence City Commission exceeded its home rule authority by adopting an ordinance that bans smoking in bars and other establishments. And he contends the ordinance fails to specify what a business owner should do if someone does smoke in his establishment.

The case is being monitored by cities across the state, said Sandy Jacquot, legal counsel for the League of Kansas Municipalities.

About a dozen cities have smoking ordinances that could be affected, she said. Another dozen are holding off on adopting ordinances until the court weighs in.

Lawrence is thought to be the first city in the area that adopted a complete ban. It prohibits smoking in places of employment and many indoor public places, including restaurants and bars.

Since then, smoking ordinances have been widely debated in cities in Johnson County and elsewhere. Fairway has implemented a ban that includes bars. Olathe has also, but its ordinance exempts for-profit clubs and fraternal organizations.

Overland Park and Leawood recently adopted ordinances that will take effect Jan. 2. Their ordinances ban smoking in most public places, including bars, but allow it in outdoor seating areas and in tobacco shops.

Attorney Billy Rork, who is representing Steffes, said state statute requires smoke-free areas in designated places but does not give cities the authority to ban smoking altogether.

"What's next?" Rork asked. "Are they going to outlaw heavyweight people or people that don't have designer clothes or are redheads? I mean it just never ends. And that's what this is really about - just exceeding their authority in determining what public policy should be under the guise of protecting me."

Attorney Toni Ramirez Wheeler, who represents the city, declined to comment. But the legal brief the city filed with the court argues that local governments have the authority to pass ordinances more stringent than state law, as long as they don't conflict with state law.

The League of Kansas Municipalities has filed a brief in support of the city's position.

"The plaintiffs are arguing that Kansas state law allows cities to legislate and regulate smoking, but that it doesn't let cities impose complete bans. And we believe this is not the correct statement of the law," Jacquot said.

"So obviously, if the plaintiffs were to prevail, it would affect the ability of cities across the state to have smoking bans."

Rork also argues that the ordinance is so vague that a reasonable person could not adequately defend himself against a violation. In its brief the city says the ordinance provides sufficient detail.

A decision is expected in June.

---

## **CMS Settlement Means Hurried Changes Coming for Kansas Social Services**

By Dave Ranney  
KHI News Service

TOPEKA, April 23 - Big changes that kick in July 1 for the state's social-service providers have had them and Kansas policymakers scrambling to get ready.

Last week, House and Senate budget committees hurriedly agreed to almost \$100 million of extra spending needed to satisfy terms of an agreement struck April 13 - but still not in writing - between the state and the federal Centers for Medicare and Medicaid Services.

The agreement, meant to settle payment disputes resulting from ongoing CMS audits and reviews of the way Kansas has for years used matching federal Medicaid dollars for a host of state programs, is good, officials said, because the deal may have saved the state up to \$500 million in back payments. The downside is that many program changes are coming quicker than many are comfortable with, creating confusion, and social service dollars once provided by the federal government now must come from state coffers.

The budget committees agreed to put into the Omnibus spending bill now awaiting consideration by the full Legislature:

- \$37.5 million for Fiscal Year 2007 to offset the loss of denied Medicaid payments to special education programs,
- \$8.1 million for FY 2007 to offset the loss in denied child welfare payments,
- \$7.6 million in FY 2008 to help launch Kansas Health Solutions, the managed care company for the community mental health systems and \$17 million to offset lost federal dollars.
- Senate and House committees also endorsed about \$11 million in FY 2008 for community programs for the developmentally disabled. The Senate committee, after the House committee had gone home, added \$5 million on top of that.

"That's a lot of money," said Rep. Jerry Henry, D-Cummings. "We'd much rather have used it to do more for the needy, the frail elderly or people with disabilities. Instead, we used it make the federal government happy. We're spending more money to do what we're already doing ? only we're going to do it differently."

The cost isn't only in dollars. Come July 1:

- There will be a different system for deciding whether children in state custody belong in group homes that Medicaid will pay for or in other settings for which it won't.
- Other still uncertain changes are planned for the state's substance abuse programs and those for the developmentally disabled.
- The state's special education programs are gearing up for changes in how they bill Medicaid for services they provide.
- The state's network of community mental health centers will soon be governed by a managed care company.

"This is a tremendous undertaking," Rick Cagen, executive director at the National Alliance of Mental Illness-Kansas Chapter office in Topeka, said. "There's a lot that's going to be different."

## **Worries**

After July 1, some juvenile offenders - no one knows how many - are likely to end up in group homes for

children with medical problems.

That's not a good idea, said Mark Masterson, who runs Sedgwick County's Department of Corrections.

"This is a square peg trying to fit in a round hole," he said shortly after taking part in a round-table discussion hosted by the House Social Services Budget Committee last week.

Masterson is upset because the Department of Social and Rehabilitation Services is adopting a two-tier system for the most troubled children in state custody - one for those with medical needs, another for those without.

"I understand why we're doing this, but we're doing it way too fast," he said. "There's a lot that hasn't been thought out."

The new system, Masterson said, may be good for foster children with medical needs - a term that includes mental illness - but it's sure to hurt juvenile offenders who end up in programs that do little to address criminal behaviors.

"The kids I work with at Judge Riddel Boys Ranch (near Wichita) are already knocking on the front door of prison. Time is running out," he said, "If we don't get this right, it's going to cost us a lot more down the road."

SRS officials said the change is needed to help settle with CMS over how the department used Medicaid dollars to underwrite foster children's stays in group homes.

CMS officials have argued that many of these stays were not medically necessary and, consequently, not eligible for Medicaid reimbursement.

After July 1, children with medical needs will be sent to group homes that have become licensed as psychiatric residential treatment facilities. Those stays will continue to be eligible for Medicaid reimbursement. Children who do not meet the medical-need criteria will go to youth residential centers. Their stays will not be funded by Medicaid. Screenings to decide whether children meet the criteria will be handled by the state's 28 community mental health centers.

Fourteen group homes have completed the process for becoming psychiatric residential treatment facilities, one is pending; 16 are now youth residential centers; five more are weighing their options.

"Now, we're going to label them mentally ill and put them in psychiatric residential treatment facilities based on medical necessity at \$270 a day rather than leaving them where they are at \$123.50 a day and where the focus is on changing criminal behavior. We're going to end up spending more on services that don't address the reason the kids are there," Masterson said.

### **Apples and oranges**

House Social Services budget committee chairman Bob Bethell, R-Alden, shared Masterson's concern.

"He is absolutely correct," Bethell said. "This is an apples-and-oranges issue, and at this point I can't say how it's going to work out. This is one of those things we're going to have to work out as we go along."

Department of Social and Rehabilitation Services Secretary Don Jordan said he's working with the state Juvenile Justice Authority to make sure children receive the services they need.

The criteria for deciding whether children in state custody are sent to psychiatric residential treatment facilities or regular group homes - now referred to as youth residential centers - are due in mid-May, he said. The SRS-proposed standards are still being reviewed by CMS. Until the standards are approved, Jordan said, it's hard to know how many children will end up in which tier.

### **Mental health changes**

To resolve CMS concerns that past policies have discouraged competition within the state's community mental health system, SRS will now use a managed care company, Kansas Health Solutions, to recruit and oversee providers. It is a nonprofit company started by - but separate from - the Association of Community Mental Health Centers of Kansas. Eight of the company's 15 board members are drawn from the centers. After July 1, people on Medicaid will have access to mental health services through private providers that choose to enter associate agreements with Kansas Health Solutions. Currently, these services are controlled by community mental health centers.

"People are going to have access to a wider array of providers," said Ray Dalton, Deputy Secretary of Health Policy at SRS.

CMS recently approved SRS' proposed contract with Kansas Health Solutions. The company expects to announce the hiring of a CEO this week.

### **'No dumping'**

Those who provide services to Kansas foster children are among the most concerned by the changes. Until the new standards take effect, program directors say they don't know which services they'll be able to provide or how much they'll be paid.

But Jordan has assured them SRS has no intention of shortchanging providers.

"We are not going to have kids being dumped out of services," he said at the roundtable meeting last week. He vowed SRS would pay for stays with all-state funds - rather than Medicaid - until issues surrounding a child's placement or a program's payment are resolved.

Jordan said SRS is trying to provide answers to all the providers' question on a Web site it shares with Wichita State University: [www.Medicaidtraining.org](http://www.Medicaidtraining.org). Also, four SRS program directors have been assigned to field questions over the telephone. Their contact information is posted on the Web site.

Starting in mid-May, Jordan said he and his staff will host weekly or semi-weekly meetings to develop quick responses to questions as they arise. Plans also call for hosting training sessions and informational forums throughout the state.

Jordan said he hopes to meet, too, with juvenile court judges. "This is going to have an impact on how some judges are used to operating," he said.

Under the new system, community mental health center screeners will decide which child should go to which program. SRS doesn't want judges making those placement decisions, because judges don't know or care

who pays for the placements.

Several in the audience praised Jordan's efforts to keep them informed.

"There's no one I'd rather have in the catbird seat than you," said Rep. Dick Kelsey, R-Goddard, a member of the committee.

Kelsey, who owns King's Achievement Center, a 44-bed psychiatric residential treatment center in Goddard, said he and other program directors are leery of the upcoming changes.

"The last time we went through this - back when we privatized foster care in 1996 - a lot of people didn't get paid. Some went bankrupt," he said. "That was poorly handled. None of us want to go through that again."

Kelsey said he, like Masterson, had no idea how the changes will affect the children in his program.

"They're still getting the rules worked out," he said.

KDHE Center for Health Disparities in partnership with GlaxoSmith-Kline Pharmaceuticals, American Diabetes Association and the American Heart Association will be offering a one day Legislative Awareness Training as a follow up to the Multicultural Health Summit held in December 2006. [Click here](#) for the flyer.

[Back to top](#)

---

## Spring Cleaning Mind Teaser

Can you read this? Don't even think about using spell check!

fi yuo cna raed tihs, yuo hvae a sgtrane mnid too. Cna yuo raed tihs? Olny 55 plepoe out of 100 can. I cdnuolt blveiee taht I cluod aulacity uesdnatnrd waht I was rdanieg. The phaonmneal pweor of the hmuan mnid, aoccdrnig to a rscheearch at Cmabrigde Uinervtisy, it dseno't mtaetr in waht oerdr the lttres in a wrod are, the olny iproamtnt tihng is taht the frsit and lsat ltteer be in the rghit pclae. The rset can be a taotl mses and you can sitll raed it whotuit a pboerlm. Tihs is bcuseae the huamn mnid deos not raed ervey lteter by istlef, but the wrod as a wlohe. Azanmig huh? Yaeh and I awlyas tghuhot spleling was ipmorant! [Back to top](#)

---

## KPHA Staff and Board Meets with REACH

Eldonna Chesnut, KPHA Director, Barbara Mitchell, KPHA Children, Family and Community Health Section Chair, and Elaine Schwartz, KPHA Executive Director, met with REACH staff last week to explore partnerships with the Foundation. The discussion included a presentation on KPHA and then the proposals the team of KPHA members (Dr. Kim Richter, Dr. Josh Freeman, Dr. Ellen Averett, Erin Dunn, Greg Stephenson, and Diane Bertone) outlined. The proposals are below:

1. Enhance our VISTA project (KPHA Regional Workshops) to include workshops developed specifically for the public to attend on: access for the underserved, mental health and oral health.
2. A project with Jo Co CMHC, specifically, Bill Art, who is Chair of the Statewide Suicide Prevention

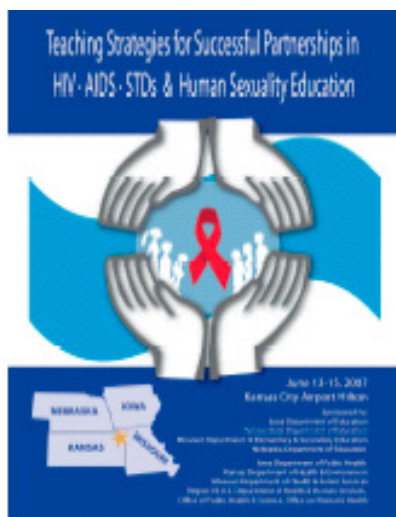
Committee, to address public awareness and response to Suicide.

3. A Capacity Building grant for KPHA Board and Section Chairs, with a pilot in WY JO and AL to begin regional meetings to discuss KPHA's mission and outreach and how to expand
4. A project with JayDOC and Health Partnership to build public health services, advocacy, and protocols needed within their programs with the help of KPHA.
5. A pilot to begin local efforts to link up local, state, and national public officials who are specifically assigned public health practitioners to begin a dialogue for health policy and it's importance

The meeting concluded well with the discussion to look into a capacity building grant, to provide data to REACH, KPHA, and the safety net clinics about what opportunities are available between the clinics and what are their needs. Part of the need could be things that KPHA members could provide and, help identify what are the most urgent needs that need funding. Once all the data has been gathered there might be enough support to apply for a program grant in the next cycle. We also contacted the Safety Net Coalition Chair, Dr. Sharon Lee with KUMC and we are working with her to begin the discussions on what we want to submit to REACH. [Back to top](#)

---

## Upcoming HIV/AIDS/STDS and Human Sexuality Conference



Please see the brochure and the information below regarding the upcoming HIV/AIDS/STDS and Human Sexuality Conference. For more information, please contact Darrel Lang at the information below.

**Click here** to download the brochure for the June 13-15, 2007 workshop, Teaching Strategies for Successful Partnerships in HIV/AIDS/STDS and Human Sexuality Education, which will be held at the Kansas City Airport Hilton.

**Listed below is the link for registering on-line. All registration MUST be done on-line. No faxed or mailed registrations will be accepted.**

<http://conferences.ksde.org/tssp>

Contact Information:  
Dr. Darrel Lang

Health and Physical Education  
HIV/AIDS and Human Sexuality Consultant  
Kansas State Department of Education  
120 SE 10th Ave.  
Topeka, KS 66612-1182  
785/296-6716 - office  
785/296-5867 - fax

[Back to top](#)

---

## KPHA Receives First VISTA Application to Serve in Our Project!



Last week, the KPHA office received an online application from Jewell County from a recent college graduate who found our listing on the federal site. We received a second application this week. We are looking for eight VISTA's for our state wide project. You can help by sending our flyer to your list serves. [Click here](#) for the Flyer. [Click here](#) to see the Job Description. [Back to top](#)



Visit our site at <http://ks.train.org>.



Visit our site at <http://phpartners.org/>.

Copyright 2006-2007. Kansas Public Health Association. All rights reserved.