

# Targeted Case Management

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## **PRESENTATION TO THE 2024 SPECIAL COMMITTEE ON TARGETED CASE MANAGEMENT**

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# Targeted Case Management

## Definition

- Targeted case management (TCM) is a state plan service defined as assisting eligible Medicaid members in gaining access to needed medical, social, educational and other services. It is not the direct delivery of any referred service.
- The Social Security Act, §1915(g)(2) allows states to define populations of Medicaid members to receive the service and/or areas of the state where the service will be delivered.

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## Medicaid State Plan

- The Kansas Medicaid State Plan defines the populations of Medicaid members that receive TCM.
- TCM is a statewide service for the identified populations.
- Medicaid members do not have to be on a waiver to receive TCM.
- In the recently released CMS SHO letter #24-005, CMS clarified that TCM is not a EPSDT service and is available to only the populations listed in the state plan.

# Intellectual and Developmental Disability Waiver Overview

The Intellectual and Developmental Disability (IDD) Waiver, created in 1991, offers Home and Community-Based Services (HCBS) to individuals aged five and older who have intellectual and/or developmental disabilities. To qualify, individuals must meet the state's definition of IDD and require the level of care provided in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF-IID). The IDD waiver aims to support people with IDD by helping them maintain their physical, mental, and emotional well-being, all while enabling them to live independently in their homes and stay connected to their communities.

To be eligible for the IDD Waiver program, an individual must meet the following criteria:

- Must be 5 years of age or older;
- Have a diagnosis of intellectual disability made by a licensed healthcare professional before the age of 18; or
- Have a diagnosis of developmental disability made by a licensed healthcare professional before the age of 22 years;
- Must be determined eligible by the Community Developmental Disability Organization (CDDO);
- Meet the Medicaid long-term care threshold;
- Be financially eligible for Medicaid.

# Intellectual and Developmental Disability Waiver Overview

**Number of individuals on the IDD Waiver:** 9,031

**Number of individuals on the waitlist:** 4,552

**Number of individuals receiving TCM:** 8,501

**Percentage of individuals receiving TCM and at least 1  
waiver service from the same agency:** 37%

Source: KMMS as of October 1, 2024

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## From a Participant's Perspective: Accessing the IDD Waiver

To access IDD waiver services in Kansas I must go to my local CDDO who will determine whether I am eligible for the IDD waiver. If I am (and funding is available) they will work with me and my family to access services from a variety of Community Service Providers in my area. If funding is not available, I will go on the waitlist. However, if I have KanCare/Medicaid while on the waitlist I can still access a TCM through the state plan.

The services offered on the IDD Waiver are designed to allow me to live in the community and manner of my choosing. Examples of services available include:

- Residential and day supports: help with living independently or in a group setting, and activities to do during the day.
- Personal Care Assistance: help with bathing, toileting, laundry, light housekeeping and health-related care.
- Other services include: medical-alert device rental, financial management services, sleep support, supported employment and wellness monitoring.

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## The Role of my TCM

### Understanding What I Need:

- When I qualify for the IDD waiver, my TCM meets with me to figure out what kinds of help I need. This could be things like assistance with getting dressed, help around the house, or support to get a job.
  - *If I had KanCare while I was on the waitlist for IDD services, I may have already been eligible for a TCM and might even have had one. If not, the CDDO will help me choose a TCM when I am offered a waiver slot.*
- My TCM asks me about my daily life—what I want to do, what's hard for me, and what goals I have for the future. They use this information to understand how the waiver (and other resources/supports available to me) can help me live my preferred lifestyle.

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## The Role of my TCM

### Creating a Plan:

- My TCM works with me to create a plan. This is called a person-centered support plan (PCSP), and it's all about me—my goals, my preferences, and what's important to me. The plan includes the services and supports I need, like personal care, day programs, or help finding a job.
- My TCM ensures the services in my plan fit my needs, focusing on what's best for me, not just what's available. They also include everything important in my life, like support I may have from family, my personal goals, and how I would like to be part of my community, making sure my plan reflects what truly matters to me.

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## The Role of my TCM

### Getting Services:

- Once we have the plan, my TCM helps me find the right providers to deliver these services. If I need help with personal care, they connect me with someone who can come to my home. If I want to work, they help me find a program that supports me in finding a job.
- My TCM also works with the providers to make sure everything is set up and running smoothly. I don't have to worry about the details—they take care of that for me because we agreed to the plan and they make sure everything follows what we discussed, adjusting things if my needs change.

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## Why This Matters to Me

**Personal Control:** The IDD waiver is about **me**—my life, my choices. It's there to support me in living the way I want, whether that means staying at home, finding a job, or being more involved in my community. This means the care I receive is based on **my needs and preferences**, not what's easiest for a provider or what fits into their schedule.

**For example:** if I want help getting a job, my TCM helps me find employment services that fit my skills and goals. They focus on what will help me succeed.

**Empowerment:** This process empowers me. I get to make decisions about the care I receive, and my TCM makes sure those decisions reflect **my voice**, putting me in control of my life.

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## Avoiding Conflicts

When the organization helping me plan my care is also providing the services, it creates a **conflict of interest (COI)**. Even if it's not said out loud, there can be subtle ways in which they guide me to choose their services, even if those services aren't the best fit for me.

The pressure can be **subtle**—things like suggesting I stick with the services I'm already receiving because it's easier, or not fully explaining other options available. It might not feel like outright pressure, but I can sense that staying with my current provider is the “expected” choice. This can make me feel like I have fewer real choices than I actually do.

**For example:** if my case manager is from the same organization that provides my services, they might not emphasize other providers or options. Instead, they could talk about how “smooth” things are going now or how “it's easier not to switch,” even if other services might be a better fit for my long-term goals.

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## Avoiding Conflicts

Over time, this subtle pressure can build up. I might start to feel like changing providers or selecting a different service option would be difficult, or like it's not worth the trouble, or that I might be creating awkwardness for my TCM. It can make me second-guess whether I really have the freedom to choose what's best for me.

However, when the person helping me plan my care isn't tied to a specific provider, I am able to trust that their advice is **completely focused on my best interests**. They won't steer me toward their own services or inadvertently make me feel like I need to stay with them.

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## 2014 Legislative Post Audit

**2014 Legislative Post Audit (LPA):** Kansas identified the conflict of interest issue over 10 years ago in a Legislative Post Audit. The LPA highlighted how conflicts of interest exist when organizations both plan and provide services, leading to potential bias and limited choices for individuals. Yet, despite being identified, this problem hasn't been fully addressed.

**Why This Matters:** If we are unable to resolve the issue now, we risk continuing the same conversations for another decade, slowing down progress and leaving Kansans stuck in a system that may not be structurally fair, equitable, and person-centered.

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## The Risks – Federal Compliance

**Settings Rule Requirements:** The federal HCBS Settings Rule (42 CFR 441.301) clearly states that there must be a separation between case management and service provision to prevent conflicts of interest. If we do not comply with this rule, we risk federal action against our waivers.

**Intention of the Rule:** The Settings Rule requires that people receiving services must have full access to the community and real choices about their care, without undue influence from providers. Case managers must be focused solely on the waiver participant's needs, not the provider's interests.

**Settings Rule Corrective Action Plan (CAP):** COI is specifically called out in the State's Settings Rule CAP. CMS has told the state that the CAP will remain in place until the issue is resolved.

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## The Risks – Community Support Waiver

**The Future of Kansas Waivers:** KDADS is currently working with PCG on the development of a new Community Support Waiver, which aims to provide lighter touch services for Kansans eligible for IDD services. However, CMS has made it clear: if Kansas does not have Conflict Free Case Management (CFCM) in place, this new waiver will not be approved.

Without approval, thousands of Kansans may miss out on needed services that could help them live more independently. Our progress in improving the HCBS system will be impeded, leaving those on the waitlist and in the current system without the reforms needed.

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## Recent Work with Stakeholders

KDADS utilized ARPA funds to conduct a study to evaluate conflict of interest in TCM services, focusing on identifying and addressing issues where service planning and provision may overlap, and developing solutions to ensure compliance with federal guidelines.

Throughout the study, individuals, families, guardians, and providers participated in regular meetings to discuss key concerns and share their experiences.

### Key Themes:

- **Conflict of Interest:** Many voiced concerns about receiving both case management and services from the same agency, stressing the need for clearer separation.
- **Consistency:** Stakeholders highlighted the need for more consistent service provision across regions to ensure fairness and quality.
- **Provider Access:** Rural areas face challenges with limited provider options, making compliance with separation rules more difficult.

**Final Feedback:** Public town halls and surveys emphasized the need for phased changes, potential rural exceptions, and strong ongoing communication with stakeholders as changes are implemented.

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## Summary of Compliance Options

<b>Option 1: Separate TCM and Services</b>	<b>Option 2: Centralized TCM Functions</b>	<b>Option 3: Shared TCM &amp; Services</b>	<b>Option 4: MCO-Led TCM</b>
TCM becomes a CDDO and TCM-only function. Community Service Providers provide services only, ensuring a clear separation and avoiding conflicts of interest.	TCM is provided by independent TCM agencies/individuals, while CDDOs remain focused on eligibility and oversight. Direct services are provided by Community Service Providers.	Agencies can provide both TCM and services but not to the same individual. Strict monitoring will ensure conflict-free service provision.	MCOs take over all TCM functions, with the potential to contract to TCM agencies.  <i>Note: This option has been rejected due to feasibility concerns.</i>

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## Options Moving Forward

### Recommended Path Forward:

#### 1. Complete Separation (Option 2):

- KDADS prefers a clean break between TCMs, CDDOs, and Community Service Providers. Providers who choose this path will have the option to receive grant support to facilitate the transition, with a COI Advisory Group helping to design this initiative.

**AND**

#### 2. Strict Oversight for Non-Separating Agencies (Option 3):

- Agencies that opt to offer TCM and direct services under the same umbrella org. will be barred from serving individuals with both TCM and direct service. KDADS will need to implement rigorous monitoring protocols over these agencies. Furthermore, this option would exclude conflicted providers from participating in the new Community Support Waiver as well as be time limited for the comprehensive IDD waiver (through July 2029).

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## Next Steps

### 1. Identification of a policy roadmap

- Previous slide outlined a path to address conflict of interest and comply with federal guidelines. This includes ensuring separation between case management and service provision.

### 2. Commitment to working with stakeholders through a COI Advisory Group

- We are committed to working with stakeholders through an Advisory Group, ensuring ongoing feedback from key stakeholders to guide the process.

### 3. Grant opportunities

- Grant opportunities will be made available to help agencies transition into compliance, offering financial support for separating case management from service provision.

### 4. Lines of communication open with CMS

- We're maintaining open communication with CMS to ensure alignment with federal requirements and timely waiver approvals, preventing service disruptions.

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## Next Steps

### Facing Change with Confidence

Transitions are never easy, but this isn't our first challenge. The IDD system in Kansas has adapted to sweeping changes before—deinstitutionalization, managed care, and a global pandemic. Compared to these, this shift is straightforward. The resilience we have all demonstrated time and again gives us every reason to believe we can navigate this transition successfully, together.

This is our moment to reinforce what HCBS should always be about: **putting Kansans first**. By eliminating conflicts of interest, we ensure that every person has the freedom to shape their own future, with their voice guiding every step of the way.