



**GERARD L. MICHAUD, President**

**To: Representative Will Carpenter, Chair – Special Committee on Targeted Case Management (TCM)**  
**From: Jerry Michaud, President/CEO - Developmental Services of Northwest Kansas, Inc. (DSNWK) - Serving the 18 Counties of NW Kansas *J.M.***  
**Date: October 9, 2024**  
**Re: Impact of Proposed Targeted Case Management (TCM) Changes upon the Intellectual and Developmental Disabilities (I/DD) system and particularly TCM options in rural settings.**

Chairman Carpenter and members of the committee, thank you for the opportunity to share my testimony regarding the Impact of the proposed changes to TCM for persons with I/DD in Kansas.

My name is Jerry Michaud and I am the President of Developmental Services of Northwest Kansas (DSNWK), a non-profit organization serving 550 individuals with I/DD in northwest Kansas. We serve as the Community Developmental Disability Organization (CDDO) and provide community services in our 18 county region. I am grateful for the opportunity to share some perspectives and insights on this important matter, and the importance of having a TCM and service system that is viable and strong. I am serving in my 33rd year within this organization, work which began in the area of quality assurance oversight, licensing and accreditation; I have a clear understanding of the importance of solid processes and the integrity needed within every aspect of operations.

Community services are vitally important and Targeted Case Management is among those essential services that helps connect the needs of people with I/DD to the services and resources available to them within their community and within the network of providers who help meet their needs everyday. Helping people have full and productive lives is essential to our mission at DSNWK over the last fifty plus years. From our grassroots start in 1967, we listened to people with I/DD and their families and all along the way helped our communities and the state develop workable services that provided them with the best possible choices.

DSNWK is among the organizations that would be required to choose to either provide community services to individuals with I/DD or to provide TCM services to those same people - but not both. This means if individuals wanted DSNWK TCM services, they could not have DSNWK community services (and vice versa). For those individuals, their network would effectively encounter a forced divorce. For DSNWK, this could result in the termination of employees, many of whom have dedicated their lives in service through their specialty and separate roles while working for DSNWK. I am unaware of any claim made regarding an actual conflict of interest between our TCM provision and our community services. When asked, why is this change happening? Is something not working? The answer in effect has been, you just can't, because CMS says there is an inherent conflict of interest.

In this day and age, people do not have the luxury of serving in only one role or responsibility. Most every one of us wear multiple hats – A Pastor of a church also serves on the City Council and an Insurance agent serves on the board of a non-profit. In each of these scenarios (as in most), there exists the potential for a conflict of interest. In those cases, numerous people are involved (Boards or city councils) and the person with multiple roles, with integrity, recuses themselves, as a preemptive step to mitigate any potential problems (real or perceived). Currently regulations, requirements and structure exist to prevent potential conflicts of interest. There are deliberate separations built within organizations to have separate lines of authority for their TCM and the Community Service provision efforts.

TCM services essentially connect the person with I/DD with information and resources, providing support/assistance, with the person and their team, capturing what is important for the person and their needs and desired lifestyle. Their team is generally composed of the TCM, the provider(s) of service, and the advocates/guardian/family members. There are opportunities for choice at every juncture. If the person with I/DD wants to change from one TCM provider to another, we work to make that happen. When their choice is to move to a different community, we help them. When there are difficulties, we help support them and find solutions. Up until the last couple of years, this TCM service was grossly underfunded. Our interest, even when doing so was upside down financially, we carried on this important service because our interest and focus was on the person with I/DD and its impact on their life.

In each of our lives we wear multiple hats everyday for the various responsibilities we carry. Coming from a rural area, knowing how to manage the books as well as the livestock and land are both important. Common sense approaches need to consider all the options and factors to build reasonable safeguards to keep our system functional and adaptable to meet the needs.

There is no one I know that disagrees about the importance of managing and mitigating conflicts of interest. What's at question in Kansas is the approach proposed. The proposed solutions remove the individual's fundamental right to choice. If crafted solutions did not consider the development of other reasonable and practical alternative mitigation strategies to address the potential conflicts of interest, then those approaches would seem to have missed other potential viable solutions. In exploring options, did the concept of creating a waiver service for a 'service coordination' type of service for people on the I/DD Waiver, occur? Were there other options that did not get consideration? Having TCM offered, as well as an appropriately funded 'service coordination' service under the waiver, could allow individuals to choose one or the other and thereby protect their choice.

Our commitment to serve and support people with I/DD remains central to our mission and the reason behind this testimony today. To implement the proposed options from the state will create many negative consequences for our System. TCM and community services at DSNWK are carried out with the focus and interest of the person with I/DD at the center. We do so with intentionality, purpose and integrity. Thank you for your thoughtful evaluation of this vitally important matter.