

## **DEPARTMENT OF AGING & DISABILITIES**

## **DEVELOPMENTAL DISABILITY ORGANIZATION**

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**To:** Representative Will Carpenter & Members of the Special Committee on Targeted Case

Management

From: Jeannette Livingston, Deputy Director, Sedgwick County Department on Aging and

Disabilities/Sedgwick County Developmental Disability Organization

**Re:** Sedgwick County Provider Network and Targeted Case Management

First, I'd like to thank you and other members of the Kansas Legislature for your attention to important issues that impact Kansans with intellectual and developmental disabilities (IDD). I'm sure you've heard very compelling testimony on how critical Targeted Case Management (TCM) is for individuals with Intellectual/Developmental Disabilities (IDD) and their families. I will focus on data related to TCM and the Sedgwick County IDD service system.

Sedgwick County is often thought of as a resource-rich community, and in some ways we are. Sedgwick County is fortunate to have ten (10) agencies that provide TCM services. However, of those ten (10) agencies, only one is completely independent and does not provide any other Home and Community-based Service (HCBS). There are 2,188 individuals with TCM services in Sedgwick County, 382 of these receive an HCBS service from the same agency as they have for TCM. So, systemwide 17% of all individuals with case management receive it from an agency also providing an HCBS service to them.

While the system average is 17%, the portion of TCM clients also receiving a HBCS service varies significantly from agency to agency. At one agency, the second largest TCM provider in Sedgwick County, over half (56%) of their TCM clients also receive an HCBS service from them. There are four additional agencies that provide an HCBS service to 30% or more of their TCM clients; the remaining agencies provide an HCBS service to 10% or fewer of their TCM clients.

Despite the number of agencies providing TCM, it is a difficult service to maintain. In the 2023 capacity report, agencies identified TCM as the service most difficult to meet demand for. During calendar year 2023, all but one agency providing TCM requested a hold on referrals for TCM services. In Sedgwick County all affiliated agencies must serve individuals that choose them, unless a hold on referrals is requested in advance. The struggle to meet the need for TCM services was primarily related to staffing issues. As with other IDD positions, it is difficult to hire TCM's. Providers reported it takes up to 180 days on average to hire a new TCM. Then there is a significant amount of training required before a new TCM is ready to manage a caseload. Pay for Targeted Case Managers has increased 23% since 2020, up to an average of \$18.56 per hour; however, average turnover for Case Managers was the highest (42%) since I began collecting system turnover data in 2017. The average turnover, however, does not tell the full story. Fully

half of the agencies providing TCM reported turnover of 50% or higher. In fact, TCM turnover in Sedgwick County ranged from 0% to 80%.

While 2023 was a challenging year for TCM, in 2022 there was a significant shock to the network when one of the largest TCM providers decided to discontinue providing the services. The agency indicated they chose to stop providing TCM due to a combination of reasons, including the workforce crisis, low rate paid for TCM and uncertainty related to how conflict of interest would be resolved. Please note, this agency discontinued TCM in January 2022 well before the Medicaid rate for TCM was increased. I would like to emphasize how grateful the network was for the recent TCM rate increase. The closure of this TCM program resulted in 200 people needing case management. We were fortunate to have a supportive network of providers who coordinated with us to ensure no one who wanted case management went without. However, this resulted in a network-wide TCM capacity crisis. Many agencies put holds on new referrals for extended periods of time, trying to catch up with the demand. Many of the TCM capacity struggles last year have their root in the crisis of 2022.

It's unclear whether agencies would choose to give up providing Targeted Case Management if forced to make changes. Change management is difficult under the best of circumstances. TCM providers have been under significant stress for a long time. A concern for the SCDDO is that one of the agencies providing TCM also provides Supportive Home Care. We only have two agencies that provide Supportive Home Care in Sedgwick County; it would be devastating for our network, and to individuals served, to lose a provider should they choose TCM over Supportive Home Care.

Likewise, it would be extremely stressful for the network if agencies chose to discontinue providing TCM. Losing one agency in 2022 was a test that stretched our network to the brink. In the 10 years I've been with the SCDDO, we have never had a new affiliate for TCM added to the network. Additionally, the agency that provides Supportive Home Care and TCM is also the only TCM provider that specializes in children. While we have other TCM providers that serve children, no other agency possesses the specialized knowledge this agency has developed.

As a CDDO, our primary concern is ensuring individuals with IDD have the quality services they need to be successful in the community. Targeted case management is certainly a cornerstone service for many individuals. Sedgwick County has nearly 400 individuals that will be impacted by how KDADS decides to address conflict of interest. Some agencies have a high percentage of TCM clients who also receive an HCBS service from their agency, which amplifies the impact on those agencies. I can only imagine how agencies in areas with fewer TCM options would fare.

I hope this information is helpful for the Committee as you examine the intricacies related to TCM and conflict of interest. Thank you for this opportunity to provide testimony. I will stand for any questions.