

Jean Rumbaugh Sunflower State Health Plan

## Testimony before Joint Committee on Health Policy Oversight January 23, 2012

Good morning, Madame Chairman and members. My name is Jean Rumbaugh, and I am the CEO of Sunflower State Health Plan. I am honored to be here today to provide you an update on our implementation and operations of the KanCare program.

Sunflower is part of Centene Corporation which currently serves Medicaid beneficiaries in 18 states. We are committed to providing fully-integrated care to all of our members, and we believe in holding ourselves accountable for improving health outcomes for our members.

We have worked diligently to ensure the January 1 go-live was successful. I would like to update you on how the Sunflower program is serving KanCare members and how we are working with providers.

Member Services: In order to ensure a smooth transition for our members, we began outreach prior to January 1<sup>st</sup>. We mailed ID cards and member materials to all individuals with Sunflower coverage prior to January 1<sup>st</sup>, and since then we have made over 47,000 outbound call attempts to members to make sure they understand their benefits and how to access care. Our call center has handled over 30,000 incoming phone calls with less than 1% abandonment rate and excellent service levels. The primary reasons members have contacted us are to change their PCP or to ask questions about network or benefits. Our Member Connections Representatives are located across the state and available for members who needed additional assistance or who would benefit from a personal visit. For members with care management needs, Sunflower case managers have contacted them to introduce themselves with face-to-face meetings scheduled. To date we have completed 9,549 screenings and assessments to evaluate the need for case management services for our members. We look forward to the planned February state tour focused on member outreach.

Provider Network: We know that one of your priorities is to improve members' access to care and we share that priority. We have met the network standards set by the state but are working to surpass those goals by contracting with as many current Medicaid providers as possible. We have conducted many provider education sessions with focused training for the home and community based services (HCBS) and nursing facility providers. We are working with providers to facilitate the completion of contracts, to submit claims and to follow the status of claims payment. The names and contact information for our Provider Relations team as well as an updated issues log is posted on our website, www.sunflowerstatehealth.com.

Claims Payment: One of the most important things we do is ensure that providers are paid the right amount in a timely manner. We have built systems and processes to assure accurate and timely payment to providers. Initially, we are reviewing claims more thoroughly before they are released to test systems with special attention to nursing facility and HCBS claims. Claim payment occurs two times a week with providers encouraged to register for EFT payment. We have received 166,642 claim lines of

which 99,609 were pharmacy. Including the check run today, we have processed payment of almost \$3M in medical claims and over \$4M in pharmacy claims.

We continue to meet with leaders from KDHE and KDADS to understand issues, and they are holding us accountable for delivering quality services. No go-live is without some bumps, and you may hear from your constituents who are our members or our providers. We are committed to resolving any issues they have in a timely manner, and I want to make sure that you know how to reach me. The fastest way to reach me is by e-mail at <a href="mailto:jrumbaugh@sunflowerstatehealth.com">jrumbaugh@sunflowerstatehealth.com</a>. Jim Gardner, our VP of Government Relations is also a great resource to help resolve any issue, and I know several of you have worked with him in the past.

You all have placed a great deal of confidence in us and our ability not only to serve Kansans who depend on Medicaid, but also to save your constituents' money. We have appreciated the efforts of your agencies to work with us in partnership to ensure a smooth transition for members and providers. Thank you both for the opportunity to present to you today and for the opportunity to serve Kansans. We look forward to working with you this Session and in the months and years ahead.