

Brown County Developmental Services, Inc.

"Expanding Horizons for People With Intellectual Disabilities"

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Testimony of Brown County Developmental Services, Inc. in support of SB 173

Brown County Developmental Services, Inc. (BCDS), located in Hiawatha, KS is a small agency serving 40 adults with intellectual and or developmental disabilities (I/DD). **BCDS has been in existence since 1968** when a group of parents of children with I/DD banded together to provide help for their family members, since at that time there was no special education or other services available. Several of those original children still receive services through BCDS and are now in their 70's.

As you can see in our heading, our mission is to expand the horizons of the folks we serve. This can be done in small steps such as teaching them to write their name or tie their shoes all the way to big steps when they get a community job or move into their own apartment.

The pioneer parents who started this agency in 1968 did so with their own money or donations from the community. They were very relieved to eventually get some state funds so that instead of staffing with volunteers, they could actually pay a local minister's wife to be the director. Her church also let them use a small house it owned for free as the site for these services.

Those parents fought hard to keep the doors open and each increase in state funds and eventually federal funds was a step up the "funding mountain" to improving what services could be provided.

Now in 2017, after 9 years with no rate increases, it feels like BCDS is sliding backwards down that "funding mountain". The funds shrink each year, which makes agencies pick and choose whether staff raises, facility maintenance, or funding new federal requirements (WIOA, Final Rule) is chosen as the priority.

Finding and keeping direct care staff is a huge problem. BCDS competes heavily for direct care staff with local nursing homes, hospitals, day care centers, casinos, school para's and fast food restaurants. In order to continue to be able to give small raises to staff, BCDS cut administrative staff. BCDS currently has two empty administrative offices that once were filled. Those positions were cut so that we could continue to fund direct care staff to make sure the people we serve are safe and healthy.

Most direct care staff work 2 or even more jobs. For example, two of BCDS staff work nights at the hospital full time, and then work part time for BCDS in residential services evenings and weekends. The result is that BCDS is their "second" job so if they are tired from doing their "main" job and don't feel like working, they call in sick, or they quit their lowest paying job which is often BCDS.

BCDS pays for many drug tests, record checks, and training hours only to have people quit after a month or two, due to finding a better paying job.

Another issue has been dealing with the invention of KanCare which has created another layer of paperwork for administrative staff and case managers, who are already strapped for time to complete their real duties.

An example of this is the MCO Care Coordinators. These people work for the managed care organizations. Their job was supposed to be to improve the health and health services of folks with I/DD. They send letters out saying that they will go to the doctor with people, look for specialists for specific problems, provide mental health specialists to help with the issues of the dually diagnosed, and so on and so on. None of this has happened. They don't even know the folks on their case load by name.

Probably the biggest disservice of KanCare was placing vocational and residential services in managed care. This created a billing nightmare by forcing agencies to learn three different methods to bill three different MCO's. This added hours of work to the billing process, and

even more hours on top of that since claims are often not fully paid and agencies must appeal to get all the funds actually billed.

Then there was the addition of those Care Coordinators referred to above. Their duties require the case managers to meet with them regularly to help them fill in the blanks of their paperwork, since they don't actually know the people we serve well enough to fill in the blanks by themselves. This is time consuming for the case managers and serves no purpose for the people we serve, as it duplicates what their case manager has already done more accurately.

Lastly, because the funding of vocational and residential services is now controlled by the for-profit MCO's through their care coordinators, agencies providing services must seek approval from them to add or change services for a person served. One care coordinator was asked by a parent what her duties entailed and she said "I carry the purse". This seems a sad way to describe what a "care coordinator" does.

If legislators want to save money, discontinuing care coordination would be the way to go! And those funds could definitely be directed to better rates so that service providers could pay wages that would keep good staff, maintain and improve facilities, and pay the additional costs of meeting new federal requirements like the CMS Final Rule and the Work Force Initiative Act (WIOA).

Thank you for your consideration, I hope this information will positively impact your decision to support and move SB 173 out of committee.

Linda Lock, Executive Director
Brown County Developmental Services, Inc.