

- a. In May 2022, KDHE promulgated new regulations covering HHAs – the new regulations dealt with service area, supervision and credentials of supervisors among a number of other changes.
- b. A significant portion of Kansas Medicaid HCBS providers reacted. A number felt that they should not be categorized as a home health agency, but as some other form of health care entity that more accurately recognized their HCBS / Medicaid status. Some reasons cited are:
  - i. HCBS providers disagreed with KDHE’s restrictions on service area (200 miles) since it is different than what is used in Kansas Medicaid (statewide).
  - ii. HCBS providers disagreed with restrictions on supervision for home health services arguing that using an RN or medical professional on a 60 – 90 review cycle was cost-prohibitive given HCBS reimbursements. Non-HCBS service providers, also, felt the supervision requirement would probably cause an increase in fees.
  - iii. HCBS providers disagreed with the educational / experience requirements for home health managers and staff.
  - iv. Licensing fees are another issue.
    1. Currently, KDHE charges licensing fees for home health agencies. A KDHE home health agency license is renewed annually, and a renewal fee is charged.
    2. Kansas Medicaid charges a \$599 application fee for applying to be a Kansas Medicaid provider. Medicaid providers renew every 5 years and a renewal is charged.
- c. From an agency standpoint, having a separate HCBS category would raise issues on how to handle complaints and surveying of facilities given current statutory framework. This is why KDHE will be working for the foreseeable future on other avenues to address this issue beyond existing rules and regulations.