

Advocacy Day at the Capitol Highlights Important Initiatives

Advocates representing advisory boards and staff of the Kansas Association of Area Agencies on Aging and Disability (k4ad) from 11 regions in Kansas travelled to Topeka March 14th on Advocacy Day at the Capitol to provide testimony and support for several legislative initiatives.



Commission on Aging members attending AAA Advocacy Day

(left to right): Rob Givens, Dale Warman, Carol Sader, Patti Rule, Karen Weber, Pam Shernuk, Chuck Nigro. COA members that also attended, but were not pictured include, Charlotte Esau, Eugene Lipscomb and Stephanie Clayton.

Here's the highlights of the legislation issues they supported:

HB 2754 proposed implementing a *Guardianship Assistance Program (GAP)* to provide funds for seniors providing care as relative guardians. The bill complements the current foster care and adoptive care programs in Kansas and, moreover, the federal government pays the lion's share of the program cost, ranging from 50-80%. Thirty-three states have implemented a GAP program since 2008, including all the states surrounding Kansas.

States with GAP programs have shown cost savings by reducing foster care

expenses through support of kinship guardianship assistance programs. Guardianship assistance programs are also in line with Kansas public policy of family taking care of family.

Testimony highlighted that children with a relative caregiver reach permanency more quickly and that the foster care system alone cannot provide all the required child welfare needs. A GAP program in Kansas would likely save the State \$250,000 or more in the first year.

Testimony and advocacy efforts appeared to be swaying many legislators, and the feeling is that continued support of this initiative will eventually result in Kansas following along with this trend that so many other states are supporting. Advocates are very hopeful for GAP legislation, and will continue to advocate and encourage others to support the program.



Administrative Case Management to improve access to Long-Term Services and Supports (LTSS) for seniors (FE-Frail Elderly) and individuals with physical disabilities (PD) or traumatic brain injuries (TBI) was also advanced with broad legislative support. Funding of this initiative will restore a critical role for those receiving Home and Community Based Services. Funding Administrative Case Management will improve access to long-term services and support for individuals seeking access to the FE, PD, and TBI waiver programs for Medicaid Home and Community Based Services. Enrollment processes would be facilitated by helping

seniors find their bank statements, for example, by providing additional high-touch personal support, ultimately improving participation rates in the program.

Both Frail Elderly and Physically Disabled enrollment had been reduced significantly over the years since the implementation of KanCare. Administrative Case Management would help identify and enroll potential eligible into Medicaid and support the provision of needed medical services to these populations. KanCare Care Coordination would remain with the Managed Care Organizations, but the involvement of the Area Agencies on Aging and Disability would improve enrollments and participation, and assure that eligible people in need get enrolled, stay enrolled, and keep their KanCare medical cards active in order to qualify and receive the assistance they need with activities of daily living.



2018 K4ad Public Policy Goals regarding Senior Care Act, Adequate Nutrition, Employment, and Healthcare Programs

were also part of the K4ad agenda for the day. K4ad members appreciated the restoration of the Senior Care Act Safety Net for seniors, funding to support ongoing in-home services for seniors such as personal attendant care, homemaker, and respite care to give caregivers a break. They advocated for continuing or increased support for this program, as well as full funding for home-delivered and congregate nutrition programs across the state. Also on the goal list for public policy consideration was restoring funding levels for the Older Kansas Employment Program (OKEP), expanding KanCare, improving access to dental care for vulnerable Kansans, maintaining Medicare, and making step therapy protocols more reasonable, transparent, and patient friendly.