

KanCare

Transitional Care Requirements

MCO Transitional and Continuity of Care Management Requirements

Definition

MCOs provide a care manager for all KanCare members. Special care managers are required for members with changing health services like:

- Changing from one MCO to another
- Hospital to home or nursing facility
- Nursing home to home/home to nursing home
- Member gets HCBS waiver services
- Member care manager moves from one provider to another
- Move to or from KanCare
- Moves for children in Foster Care

For a full description of this policy, please refer to the Kansas Transitions of Care Policy found here: <https://www.kancare.ks.gov/policies-and-reports/transition-of-care>

Requirements for Transitions

Move Between MCOs

When Members move from one MCO to another MCO:

- Both MCOs must find people to help the member with the move.
- The new MCO must contact the last MCO to get the Member's file and plan, as needed.
- The last MCO must give the new MCO the member's provider and services.
- The new MCO must get or try to get contracts with the member's providers.
 - MCOs must try to keep a member's services the same as last year.
- New MCO must update all member records and plans.
- The last MCO will have 15 calendar days to give all member files and plans to the new MCO.
- The new MCO will keep the current plan in place for 90 days.
 - No services should change during this time.
 - A new review will be done by the new MCO.
 - The member can ask to change their services
 - The new MCO may change member services if you will need more services.

- Please note, if a hospital or other type of inpatient treatment says that you well enough to leave, then your inpatient authorization will end when you are able to leave.
- The member can see their primary doctor for 6 months after they change MCOs even if the doctor does not contract with the new MCO.
- This policy will be used for the review and Person-Centered Service Plan due dates if the member has a waiver plan. If the member changes waivers OR is new to KanCare, the MCO will use the contract due dates.

Move Between MCOs When New MCO Is New To KanCare

If the MCO is new to KanCare, in the first 90 days the MCO will:

- Pay KMAP providers not yet in network 100% of the rate like they have an agreement with the new MCO for the first 90 days after the new MCO starts or later if the MCO is late with the process.
- Providers without contracts do not need to pre-approve every service during this time. They can follow the approval steps that other providers follow.

The Member or their representative approve any files shared between MCOs.