



# OneCare Kansas

a program of KanCare, Kansas Medicaid

# OneCare Kansas Implementation Newsletter

April 2019

● Volume 1

● Issue 4

## Quality Sub-Group Update

*Page 1*

## Provider Forum

*Page 2*

## Communication Updates

*Page 2*

## SAMHSA Guidance

*Page 3*

## Special Note

*Page 4*

## **\*Important Update\***

*Provider applications now  
due June 1, 2019*

## Contact Information

**Email:**

[OneCareKansas@ks.gov](mailto:OneCareKansas@ks.gov)

**Website:**

[www.kancare.ks.gov](http://www.kancare.ks.gov)

Helping people live healthier lives by integrating and coordinating services and supports to treat the “whole-person” across the lifespan.

## Quality Sub-Group Update

The OneCare Kansas Quality Sub-group presented lessons learned and current plans for building the quality components of the OneCare program at the OCK Provider Forum. We appreciate the valuable feedback we received from experienced providers during the two sessions about areas for improvement.

One of the key take-aways was a need to address the disconnect between individual level goals and CMS core measures. Providers at the Forum pointed out that the reporting systems established for the original program did not recognize individual efforts toward self-care and improved health. The state team agrees with this point and we are currently working toward a solution. To that end, we are revising our data collection tools to capture this individual-level data and planning for reports and auditing based upon the direction we received.

Thank you to all who shared your insights and suggestions during the forum. We heard you!





Helping people live healthier lives by integrating and coordinating services and supports to treat the “whole-person” across the lifespan.

## OneCare Kansas Provider Forum Re-cap

On March 21, 2019, nearly 100 people from 54 potential OneCare partner organizations across the state attended the OneCare Kansas (OCK) Provider Learning Forum in Topeka, Kansas hosted by KDHE Division of Healthcare Finance and WSU Community Engagement Institute. Those who were present learned about the history and future of OneCare Kansas; participated in breakout sessions on the OCK Provider Application, the OCK Health Action Plan, and the OCK Quality Measures; and provided their thoughts related to the potential target population to be served by OneCare Kansas.

Throughout the event, participants were encouraged to submit questions and comments both verbally and via handwritten index cards that were then discussed in an open forum setting. Responses to the questions that were submitted in writing will soon be available in a separate “Q&A” document on the OneCare Kansas website. Members of the state team and the OneCare Kansas Planning Council will use the information gathered to guide the ongoing development of the OneCare Kansas program.

To receive regular updates on their progress, visit [www.kancare.ks.gov](http://www.kancare.ks.gov) or sign up for the OneCare Kansas newsletter.

## OneCare Kansas Communication Updates

The State team has been working hard to develop new materials for our stakeholders. We recently completed a Member Presentation that can be found here: <https://www.kancare.ks.gov/consumers/onecare-ks-members/materials-for-members> . This presentation should be helpful in explaining to members what OneCare Kansas is and how it can benefit them.

If you have ideas or suggestions about our communication strategy or additional documents we should develop, please let us know!



**OneCare Kansas**  
a program of KanCare, Kansas Medicaid

# SAMHSA Guidance on SUD and Older Adults

SAMHSA reminds us that many people have misconceptions about mental health conditions and/or substance use disorders, especially in older adults. Lack of correct information can prevent older adults from seeking and receiving help for these issues. Learning what is reality and what is a myth can help improve the quality of life for you or someone you care about.

## **MYTH #1**

Only older adults who consistently drink a lot of alcohol have an alcohol problem.

## **REALITY**

The key point in determining a problem is how the alcohol affects the person's health, functioning, and relationships with others. For example, in people with medical conditions such as diabetes and high blood pressure, even one drink per day can be a problem.

## **MYTH #2**

Very few women become alcoholics.

## **REALITY**

Many women have problems with alcohol. Women may not drink publicly; they may remain private about their alcohol use. Thus, people often don't know they have problems.

## **MYTH #3**

If an older adult says that drinking is his or her last remaining pleasure, it is generally best to allow the person to continue to drink. Even if it causes him or her problems, it doesn't matter as long as others are not put at risk.

## **REALITY**

Problem drinking seriously affect physical health and quality of life. It can lead to loneliness, isolation, and depression. It can also lead to forgetfulness, and it may reduce problem-solving skills. Sometimes others unknowingly encourage drinking if they think older people only have a limited time left and therefore should be allowed to enjoy themselves.

For more information, visit the SAMHSA Store website at [www.store.samhsa.gov](http://www.store.samhsa.gov), contact SAMHSA at 1-877-SAMHSA-7 (1-877-726-4727) (English and Español), or visit the SAMHSA website at [www.samhsa.gov](http://www.samhsa.gov).



# OneCare Kansas

a program of KanCare, Kansas Medicaid

If you have questions, or would like more information about OneCare Kansas, please contact us.

Our page on the KanCare website also contains information about our work to develop the project and documents are being updated regularly.

If you would like to receive this newsletter please send us an email.

**Email:**

OneCareKansas@ks.gov

**Website:**

www.kancare.ks.gov



## A Special Note...

### Rethink your Drink!

The Center for Disease Control and Prevention reminds us that calories in drinks are not hidden (they're listed right on the Nutrition Facts label), but many people don't realize just how many calories beverages can contribute to their daily intake. As you can see in the example below, calories from drinks can really add up. But there is good news: you have plenty of options for reducing the number of calories in what you drink.

Occasion	Instead of...	Calories	Try...	Calories
Morning coffee	Medium café latte (16oz) with whole milk	265	Small café latte (12oz) with fat-free milk	125
Lunchtime	20oz. bottle of non-diet cola	227	Bottle of water or diet soda	0
Afternoon break	Sweetened iced tea (16oz)	180	Water with natural lemon flavor (not sweetened)	0
Dinnertime	A glass of non-diet ginger ale (12oz)	124	Water with a slice of lemon or lime.	0
Total calories:		796		125

(USDA National Nutrient Database for Standard Reference)

Substituting no- or low-calorie drinks for sugar-sweetened beverages cuts about 670 calories in the example above.

For more information, see [https://www.cdc.gov/healthyweight/healthy\\_eating/drinks.html](https://www.cdc.gov/healthyweight/healthy_eating/drinks.html) on the Center for Disease Control and Prevention's (CDC) website.