



# OneCare Kansas Webinar Series: **OCK Enrollment Process**

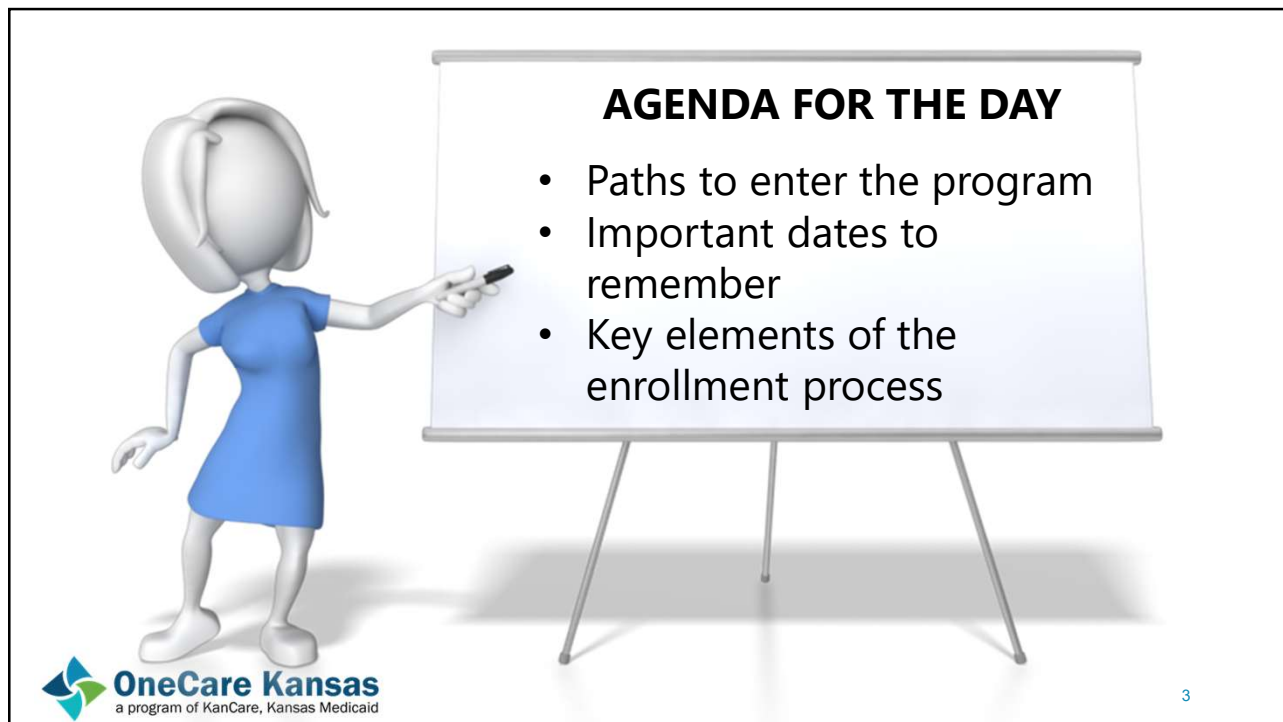
Samantha Ferencik | Program Analyst  
KDHE Division of Healthcare Finance  
January 31, 2020

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

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**AGENDA FOR THE DAY**

- Paths to enter the program
- Important dates to remember
- Key elements of the enrollment process

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

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# Referral Form

[https://www.kancare.ks.gov/docs/default-source/providers/ock/ock-referral-form.pdf?sfvrsn=f1924c1b\\_36](https://www.kancare.ks.gov/docs/default-source/providers/ock/ock-referral-form.pdf?sfvrsn=f1924c1b_36)



 <b>OneCare Kansas</b> <small>a program of KanCare, Kansas Medicaid</small>		<b>OneCare Kansas Referral Form</b>			
<p><b>Directions:</b> Please complete sections 1 through 5 and send via fax, *HIPAA Compliant/Secure E-mail, MCO portals, or standard mail to:</p>					
Aetna Better Health of Kansas Attention: Member Services 9401 Indian Creek Pkwy, Suite 1300 Overland Park, KS 66210 Email*: <a href="mailto:ABHKSOneCare@aetna.com">ABHKSOneCare@aetna.com</a> Fax: (959) 282-8852 Phone: (855) 221-5656		Sunflower Health Plan 8325 Lenexa Drive, Suite 200 Lenexa, KS 66214 Email*: <a href="mailto:SFHPOneCare@sunflowerhealthplan.com">SFHPOneCare@sunflowerhealthplan.com</a> Phone: (877) 644-4623 Fax: (888) 453-4317		United Health Care OneCare Kansas 10895 Grandview Drive, Suite 200 Overland Park, KS 66210 Email*: <a href="mailto:uhckshealthhomes@uhc.com">uhckshealthhomes@uhc.com</a> Fax: (855) 252-9324 Phone: (877) 542-9238	
Current MCO assignment: Choose One <span style="float: right;">Medicaid ID#:</span>					
<b>Section 1: Member Information</b>					
Date of referral:					
Name of individual being referred:					
Date of Birth:					
Address:					
Phone:					
Email:					
<b>Section 2: Referring Organization Information</b>					
Name of Referring Organization:					
Position/Title of individual submitting the referral:					
Address:					
Phone:					
Email:					
<b>Section 3: Has your patient/client/consumer been diagnosed with any of the following chronic conditions? (check all that apply):</b>					
<input type="checkbox"/> Paranoid Schizophrenia	<input type="checkbox"/> Severe Bipolar Disorder	<input type="checkbox"/> Asthma	<input type="checkbox"/> Diabetes	<input type="checkbox"/> Hypertension	<input type="checkbox"/> Kidney Disease (not including Chronic Kidney Disease Stage 4 and ESRD)
<input type="checkbox"/> Cardiovascular Disease	<input type="checkbox"/> COPD	<input type="checkbox"/> Metabolic Syndrome	<input type="checkbox"/> Mental Illness (not including Paranoid Schizophrenia and Severe Bipolar Disorder)		
			<input type="checkbox"/> Substance Use Disorder		
			<input type="checkbox"/> Morbid Obesity (body weight 100lbs over normal body weight, BMI greater than 40, or BMI over 30 with obesity-related health problems)		
			<input type="checkbox"/> Tobacco use or exposure to second hand smoke		
<b>TO BE COMPLETED BY MCO</b>					
<b>Section 4: Eligibility Criteria</b>					
<input type="checkbox"/> Medicaid Eligible (KMAP)					
<input type="checkbox"/> Member meets diagnosis criteria					
<input type="checkbox"/> Member does not meet eligibility criteria.					
Reason for ineligibility:					5
<b>Section 5: MCO Follow-up</b>					
Date referral received:					

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## OCKP Dates to Remember



9<sup>th</sup> – Last day in month for enrollment

18<sup>th</sup> – MCOs notify OCKPs of enrollment

1<sup>st</sup> – Current month services may begin

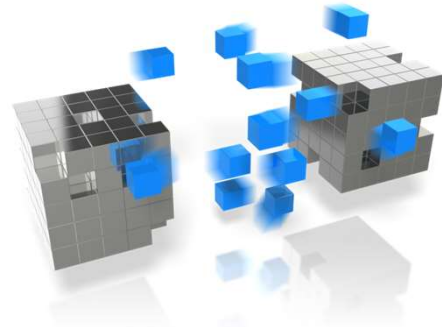


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## MCO Data Mining

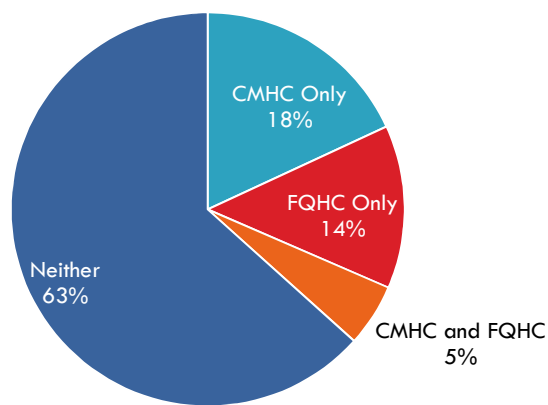
- MCO identifies eligible beneficiaries
- Any existing relationships between the member and available OCKPs
  - In most cases, we anticipate the member to remain with the assigned OCKP.
- Claims based over the last 18 months



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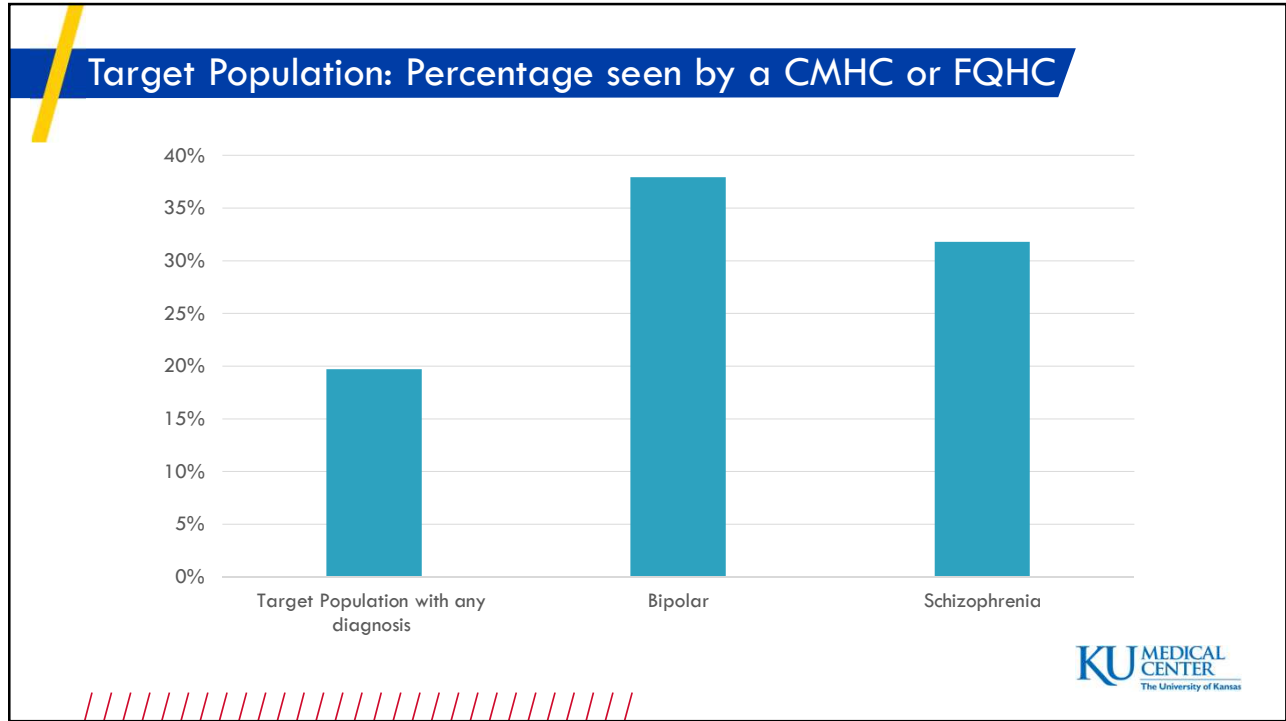
### Target Population Claims (past 18 months)



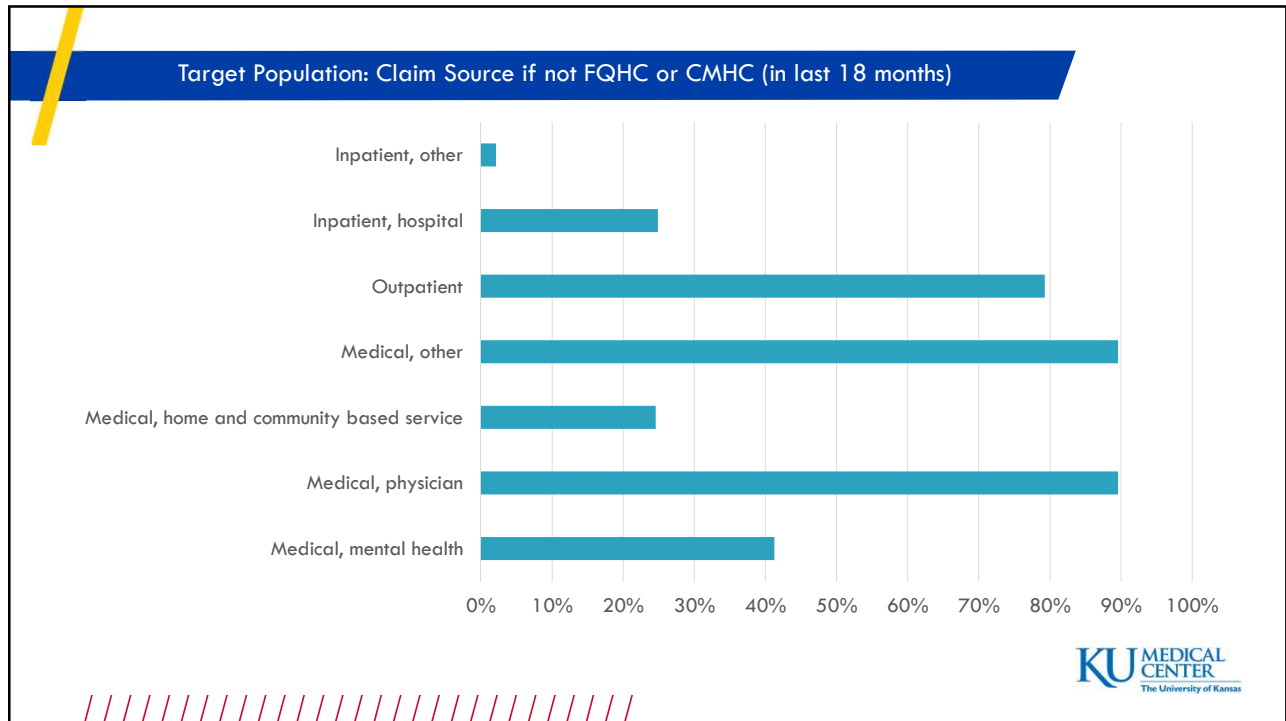
■ CMHC Only ■ FQHC Only ■ CMHC and FQHC ■ Neither



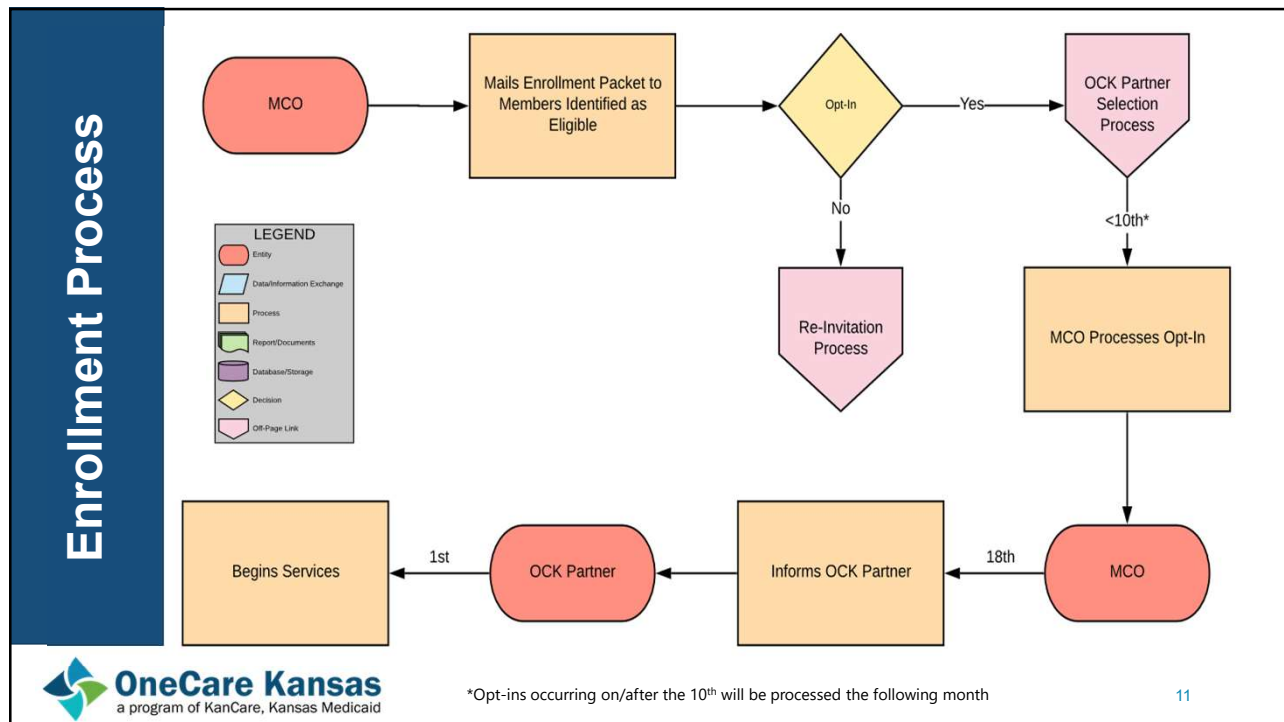
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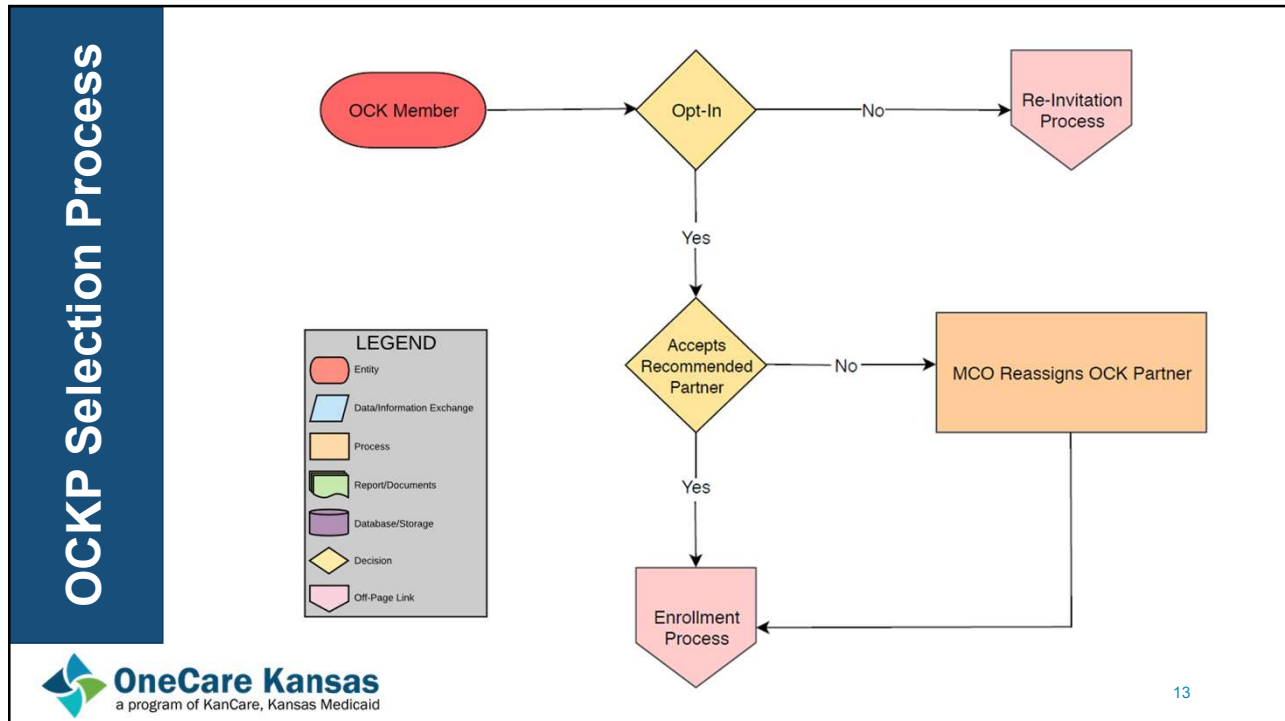
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## OCKP Selection

- Members can choose a different OCKP through mail or by calling the MCO.
- Members can choose a different OCKP either at the time of enrollment or anytime thereafter (processing time withstanding)
- State will post OCKP listing prior to launch




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## Invitation & Enrollment Letter

### Welcome!

You are eligible to get extra help with a new program in [KanCare](#) called **OneCare Kansas**.

OneCare Kansas gives you **services that help you get and stay healthy. These services will be provided to you by your current providers with the help of others.**

In OneCare Kansas you will have a Care Coordinator who will work with you and your doctors to:

- Pay special attention to your health care needs
- Help you and the important people in your life understand your medical conditions
- Make sure you get the medical services you need at the time you need them
- Attend doctor visits (for some people this may include rides to your visits and support while you're there)
- Help you plan for going home from a hospital stay
- Make sure you get the social and community services you need, such as food and housing

**These extra services are free. You will only get them if you want them. The choice is yours. Your other Medicaid benefits will not change.**



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## Data Mining and Invitations

- At the beginning of each month the MCOs will determine which of their members are eligible based on the state's diagnosis criteria
- Invitation letters will be sent to eligible members by the 10<sup>th</sup> of each month
  - Invitation letters will be sent to members whose referrals into the program are approved as well as those we've identified through claims
  - Invitations for eligible Foster Care members will be tailored for Foster Care members and sent to the child welfare agency



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## Opt-in



- Members who receive an invitation letter can opt-in at any time
- Members with an approved referral to the program are not automatically enrolled, they must opt-in
- Eligible Foster Care members will be opted in by their child welfare agency



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## OCK Partner Selection

- Invitation letters will include a recommendation for an OCK partner
  - If the eligible member does not have a relationship with an OCK partner based on claims, the MCO will recommend an OCK partner based on location
- Members who receive an invitation letter can call the MCO or mail a form to the MCO to opt into the OCK program



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**Aetna Better Health of Kansas**  
 9401 Indian Creek Pkwy, Suite 1300  
 Overland Park, KS 66210  
**Phone:** (855) 221-5656  
**Fax:** (959) 282-8852  
**Email:** [ABHKOneCare@aetna.com](mailto:ABHKOneCare@aetna.com)



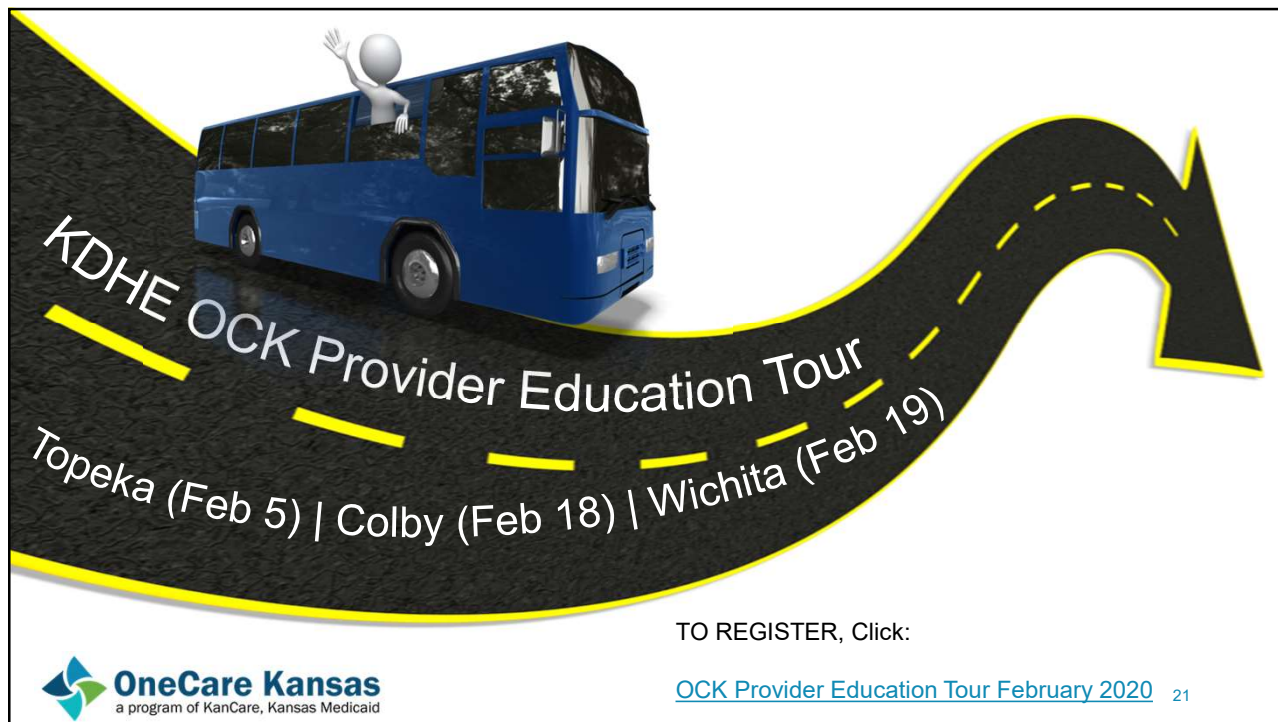
Aetna Better Health® of Kansas

**Sunflower Health Plan**  
 8325 Lenexa Drive, Suite 200  
 Lenexa, KS 66214  
**Phone:** (877) 644-4623  
**Fax:** (888) 453-4317  
**Email:** [SFHPOneCare@sunflowerhealthplan.com](mailto:SFHPOneCare@sunflowerhealthplan.com)




**United Health Care | OneCare Kansas**  
 10895 Grandview Drive, Ste. 200  
**Phone:** (877) 542-9238  
**Fax:** (855) 252-9324  
**Email:** [uhckshealthhomes@uhc.com](mailto:uhckshealthhomes@uhc.com)






**KDHE OCK Provider Education Tour**  
Topeka (Feb 5) | Colby (Feb 18) | Wichita (Feb 19)

TO REGISTER, Click:  
[OCK Provider Education Tour February 2020](#) 21



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**Coming Soon:  
OCK Webinar Series**



Dates/Times  
**TBA**

February  
**Member  
Engagement**

March  
**HAP Portal  
Demo**



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**COMING IN MARCH 2020**

**ONECARE KANSAS**

**MEMBER EDUCATION TOUR**



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the latest developments!**

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