

OneCare Kansas Newsletter

July 2020

Volume 1

Issue 4

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

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Learning Collaborative Update

June was a busy month of learning and networking for OneCare Kansas partners! On June 16, WSU CEI hosted the OneCare Kansas Learning Collaborative for directors and managers in the OCK network of providers. Shaune Parker from the KDHE Division of Healthcare Finance discussed the OCK Quality Measures and Reporting Requirements and partners engaged in discussions about ways they collect data and use it to tell their organizations' stories.

Our next Learning Collaborative event will be on July 21 at 3:00 p.m. In July we will discuss Health Risk Assessments vs. OCK Health Assessments and learn from Leah Gagnon at the Community Health Center of Southeast Kansas. Leah will discuss these tools as well as strategies they use to engage partners.

As always, please consider the topics you would find interesting or helpful and we will do our best to ensure that they are addressed in a future Learning Collaborative. Be watching your inbox for more information about upcoming Learning Collaborative topics, events and other trainings!





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

Learning Opportunities for OCK Partners

On June 18, WSU CEI launched a monthly virtual Community of Practice for Care Coordinators and Social Workers within the OCK partner network. Approximately 60 providers from across the state shared strategies and challenges related to identifying social service needs as well as engaging members and external partners in the OCK program. Our next session of the OCK Community of Practice will be on July 16 at 3:00 p.m.

On June 26, nearly 50 staff from OCK partners participated in the OCK Health Action Plan Webinar Series. Participants had the opportunity to learn more about the KanQuit and Tobacco Cessation Behavioral Health Programs offered by the KDHE Tobacco Use Prevention Program. Many thanks to Matthew Schrock from KDHE for sharing his time, expertise, and resources with the group!! The next installment in the series, *Understanding the Impact of Trauma on Health Action Planning and Strategies for Success*, will be on July 24 at 10:00 a.m.

OneCare partners will be receiving invitations to all of our July events soon...so watch your inbox!

Efforts to Increase OCK Member Participation

The State Evaluation Team continues to receive requests for information from providers related to both the OCK network of partners as well as the availability of membership. The State Team would like to remind everyone that while we are still accepting applications to become OCK Partners, members cannot be guaranteed to new applicants.

The State continues to work with existing OCK partners to elevate knowledge of, and interest in the program. However, the opt-in nature of the program can make it difficult for new OCK partners to have sufficient members from day one. The State is interested in finding new and innovative ways of helping OCK partners increase their membership and has been working with our MCO partners to address barriers where we find them.

If you are a current or new OCK partner who needs support to increase your membership please contact Samantha Ferencik to discuss how the State Team can best support your organization.

Email: samantha.ferencik@ks.gov



Who Should Get a Hemoglobin A1c Test?

According to the CDC not everyone needs a HbA1c test. This test will not be required on the Health Action Plan (HAP) unless certain risk factors are present. If you are working with a member who meets the criteria below a HbA1c is required:

Get a baseline A1c test if you're working with an adult over age 45—or if the member is under 45, and is overweight, and has one or more <u>risk factors</u> for prediabetes or type 2 diabetes:

- If your member's result is normal but they are over 45, have risk factors, or have ever had gestational diabetes, repeat the A1c test every 3 years (follow doctor recommendations).
- If your member's results show that they have prediabetes, talk to their doctor about taking steps now to improve your member's health and lower their risk for type 2 diabetes. Repeat the A1c test as often as the doctor recommends, usually every 1 to 2 years.
- If your member doesn't have <u>symptoms</u> but the results show that the member may have prediabetes or diabetes, get a second test on a different day to confirm the result.
- If your member's test shows that they have diabetes, make arrangements to refer your
 member to <u>diabetes self-management education and support</u> services so that they can have
 the best start in managing their diabetes.

For more information regarding Hemoglobin A1c testing, please visit the following link: https://www.cdc.gov/diabetes/managing/managing-blood-sugar/a1c.html#:~:text=Get%20a%20baseline%20A1C%20test,A1C%20test%20every%203%20years.

Reducing Vaping Among Youth and Young Adults

SAMHSA (Substance Abuse and Mental Health Services Administration) has a new publication that we wanted to pass on. This guide supports health care providers, systems, and communities seeking to prevent vaping. It describes relevant research findings, examines emerging and best practices, identifies knowledge gaps and implementation challenges, and offers useful resources. You can download it by following this link, https://store.samhsa.gov/product/Reducing-Vaping-Among-Youth-and-Young-Adults/PEP20-06-01-003.



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:

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Investment in comprehensive insurance benefits for smoking cessation provides return for the economy

A study by the University of Kansas School of Medicine shows a significant cost saving from expanded tobacco cessation coverage for smokers, resulting in an estimated \$225 million in economic benefit for the state within 10 years.

The study was commissioned by NAMI-Kansas (National Alliance on Mental Illness), with funding support from the Kansas Health Foundation. The study is based on a proposed expansion of tobacco cessation benefits for private insurance plans and the State Employee Health Plan, which replicates the same expansion for Medicaid recipients approved by the Kansas Legislature in 2018. The expansion included four quit attempts per year, including counseling and medication.

In the study, researchers Tami Gurley-Calvez and Jessica Sand, make the case that smoking cessation programs are an effective strategy to "improve health outcomes, reduce health care burden and decrease the high costs of health care."

Tobacco use remains the single largest preventable cause of death and disease in the United States and Kansas. "Since smokers and vapers are at higher risk of complications resulting from the coronavirus, there is no better time to consider expanding insurance benefits which cover cessation treatments," said Rick Cagan, Director of the Behavioral Health Tobacco Project for NAMI Kansas.

The research team projected cost savings for insurers to cover two quit attempts per year, versus four. In the full report, results are presented on an annual basis, as well as cumulative effects over a 10-year period. In the first year, the cost of increasing cessation coverage is about \$58 per smoker at the higher level, compared with \$32 for the limited two quit attempts per year.

However, beginning at year five, the net economic benefits are much greater with more comprehensive coverage. And at the 10-year mark, the per-person benefit is almost double that of two quit attempts, at \$215 and \$109.

When calculating direct and indirect benefits of expanded coverage together, researchers estimate the state of Kansas would generate about \$225 million in economic benefit within 10 years.

The complete study can be found at:

https://2n07782zqf7l2608b679dk7e-wpengine.netdna-ssl.com/wp-content/uploads/sites/93/2020/06/2020-ROI-Study.pdf