



OneCare Kansas Quick Facts Providers



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

What is OneCare Kansas (OCK)?

- **Defined:** OCK is a comprehensive and intense method of care coordination for Kansas Medicaid members who qualify. OCK integrates and coordinates all services and supports with the goal of treating the “whole person” across the lifespan.
- **6 core services:**
 - **Comprehensive care management:** develop a plan to guide you and your doctors and other providers.
 - **Care coordination:** making sure members get the right services at the right time.
 - **Health promotion:** learn about your conditions and how you can help yourself be healthier.
 - **Comprehensive transitional care:** when you are discharged from a hospital or care facility.
 - **Member and family supports:** help members meet their health goals with the help of family or other helpers and caregivers.
 - **Referral to community supports and services:** making sure you get the other services and supports you need to stay in your home.
- **Target population:** The program will be an opt-in program for members who have:
 - 1 serious and persistent mental illness, defined as having at least one of the following diagnoses:
 - Schizophrenia
 - Bipolar Disorder
 - Major Depressive Disorder
 - **Or** one chronic condition defined as people who have Asthma that also are at risk for developing:
 - Diabetes
 - Hypertension
 - Kidney Disease (not including Chronic Kidney Disease Stage 4 and ESRD)
 - Cardiovascular Disease
 - COPD
 - Metabolic Syndrome
 - Mental Illness (not including Schizophrenia, Bipolar Disorder, or Major Depressive Disorder)
 - Substance Use Disorder
 - Morbid Obesity (body weight 100lbs over normal body weight, BMI greater than 40, or BMI over 30 with obesity-related health problems)
 - Tobacco Use or exposure to second hand smoke
- **Health Action Plan (HAP):** Each OCK member will have a HAP that will be completed by the OCK partner. The HAP clarifies the roles and responsibilities of the lead entity, OCK partner, member, family/support persons/guardian, and health services social service staff. This will be made with input from the member, family members or other persons who provide support, guardians, and service providers. The HAP is available on the OCK website.

I'm interested in becoming a OneCare Kansas Partner

- **Application Process:** interested providers will complete an application to become an OCK partner. Applications are being accepted and evaluated now. Find the application at the following link:
https://kancare.ks.gov/docs/default-source/providers/ock/onecare-kansas-provider-application---updated-3-25-2019266e2d54f5e56149804cff0000ec1706.pdf?sfvrsn=74ac4c1b_32.
- **Payment:** No Tiers- Only 2 rates
 - One-time bonus for completion of the HAP
 - There will be a once in a lifetime, PMPM capitated rate
 - The regular OCK PMPM payment
 - 10% administrative cap for MCOs
 - Exact payment amounts will be determined later
 - The State may draw 90% federal funding for programs serving new populations for 8 quarters.
- **Contracting:** MCOs will contract with OCK partners to provide the 6 core services.
- **Collaboration:** OCK Partners will work in collaboration with other providers to ensure that OCK members receive care that aims to treat the “whole-person”.

Other Providers That Will Collaborate with OneCare Kansas Partners

- **Role of other providers:**
 - Participate in the development and implementation of Health Action Plans
 - Be involved in the development of discharge plans from inpatient or long-term care settings for OCK members
 - Participate in coordination and communication activities to ensure OCK members have positive health outcomes
 - Provide OCK materials to prospective members
 - Make referrals of patients to OCK

More Information

- Website for more information: <https://www.kancare.ks.gov>; Email for contact: OneCareKansas@ks.gov

