

A Look At The Numbers

Private Managed Care Organizations Provide Value For Kansas

The state of Kansas partners with private managed care organizations (MCOs) to deliver Medicaid benefits. Private MCOs align with Kansas state requirements to deliver a higher standard of healthcare.



Public resources
Accountability
Oversight



Private sector capital
Expertise
Innovation

This partnership leads to higher quality care and improved health outcomes for Kansans enrolled in Medicaid while managing Medicaid costs.

408,000

Kansans enrolled in KanCare¹

78%

of adult recipients rated KanCare MCOs 8/10 or higher in 2019²





TOP 10%

Kansas MCOs rank in the top 10% nationally for mental health follow-up²

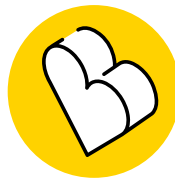
Private MCOs enable Kansas Medicaid to deliver:

Higher Quality Care



-  23% decrease in inpatient hospital stays³
-  Prenatal care has increased 7%²
-  15% increase in children getting all vaccinations²
-  33% increase in non-emergency transportation, meaning more members attending appointments³




Improved Population Health



-  45% increase in use of primary care services⁴
-  8% increase in use of behavioral health services⁴
-  Annual childhood dental visits increased 9%²
-  30% decrease in poor blood glucose control for diabetics²

Managed Healthcare Costs



-  Avoided \$2B in healthcare costs over six years³
-  Provided \$14.1 million in additional services in 2019 to prevent members needing higher cost services later⁵
-  Contributed more than \$3.3 million in value-added services in 2019⁵