

Summary of Issues Identified During JAAA's Takeover of OAA Assessments

Background:

- Initial discussions began in March 2025 during the RFP meeting held via Zoom. At that time, we were informed that KDADS was mandating the transition, which was later found to be inaccurate.
- It was also indicated that JAAA would collaborate with us on the transition process. However, we received no further communication until August 19, 2025, when a draft process was shared—without any prior input from our team.

Key Issues Identified:

1. Lack of Communication and Coordination:

- Case managers began contacting clients in mid-September without notifying us that the process had started.
- Initial documentation was sent without explanation or context, leading to significant confusion.
- Multiple client files were bundled into single, disorganized PDFs, often out of order, making it difficult to verify which documents belonged to which clients.

2. HIPAA Violations:

- We received information for at least four individuals who were never on our services, constituting a potential HIPAA breach.

3. Inconsistent Assessment Documentation:

- We received 15+ Notices of Action (NOAs) with conflicting assessment dates. For example, the body of the NOA might state an assessment date of 9/22/2025, while the header lists 5/23/2025. This creates confusion regarding reassessment timelines.

4. Care Plan Errors:

- One client receiving congregate meals was incorrectly assigned home-delivered meals in their care plan.
- Another client was approved for home-delivered meals despite being on our waitlist, with no indication of this status in the documentation.

5. Billing Concerns:

- Initial review of NOAs suggested duplicate billing for Uniform Assessment Instruments (UAI), appearing as though JAAA billed both OAA and Senior Care Act (SCA) funds for the same assessments.

6. Ongoing Lack of Responsiveness:

- JAAA has not responded to any of our submitted questions.
- Identified errors have not been corrected, and no follow-up communication has been provided.

KANSAS DEPARTMENT FOR AGING AND DISABILITY SERVICES

NOTICE OF ACTION

PROGRAM:

☒ Older Americans Act☐ Senior Care Act

Date of Notice: 09/25/2025

TO: [REDACTED]
[REDACTED]

FROM: Sonja [REDACTED]

Agency:

The Jayhawk Area Agency on Aging

2910 SW Topeka Blvd., Topeka, KS 66611

Attention: Donna Hubert

Phone: (785) 235-1367

Service	No. of Units (Specify Per Day or Week)	Self Dir. Y/N?	Provider Name	Dates of Service		Provider Unit Cost
				From	To	
AASMT	15	N	JAAA	12/12/24	12/12/24	\$
HMEL	7/Wk	N	Meals on Wheels of Eastern Kansas	10/01/25	12/11/25	\$
						\$
						\$
						\$

☐ Customer Service Worksheet Attached

Copay: N/A%

Paid To: N/A

Comments, Message, or Explanation of Action:

☐ Effective 10/01/2025, your services and/or plan of care are being implemented as identified above:

[REDACTED]

This notice of action is to inform you that your assessment for OAA funding for Home Delivered Meals was completed on 09/22/2025, and you remain eligible, for OAA funding for Home Delivered Meals through Meals on Wheels of Eastern Kansas.

If you have any questions, contact Sonja [REDACTED] at the number or address listed above.

Sonja [REDACTED] Case Manager / Assessor, The Jayhawk Area Agency on Aging
(785)235-1367

cc:

Regulatory Reference(s): KDADS FSM: 1.3.5.D.b, 4.3.1

You may contact your case manager at the phone number above.

Please carefully read the Customer Rights and Responsibilities with this NOA.

Case Manager Signature: Sonja [REDACTED]Date: Sept 25, 2025

UAI – Page 10 – Plan of Care/Support Services

Customer: [Redacted] Address: [Redacted] Phone #: [Redacted]
 Medicaid #: [Redacted] KAMIS ID #: [Redacted] Other agency identifier: [Redacted]
 Emergency Contact: [Redacted] Relationship: [Redacted] Phone: home [Redacted] work [Redacted]

AAA/CME	Service Code	Funding Source	Provider	Unit(s)	Per	Total Units Monthly	Start Date	End Date	Dis-charge Code	Cost of Unit	Customer Obligation/ Copay	Monthly Cost
04	ATCRSD	SCA	Windsor Place	5	month	5	12/12/24	12/11/25		25.00	0	125.00
04	HMKRSD	SCA	Windsor Place	2	week	10	12/12/24	12/11/25		25.00	0	250.00
04	MISC	SCA	Walmarket	308.33	YEAR	308.33	6/1/25	6/30/25		1	0	308.33
04	HMFEL	SPB	Metals on wheels & pasture KS	7	WEEK	35	10/1/25	12/11/25		8.05	0	281.75
04	ASAT	SCA	Jayhawk	15	YR	15	12/12/24	12/12/24	14	-	-	-
04	CNGIT	SCA	Jayhawk	9	QTR	3	12/12/24	12/11/25		-	-	-
Unmet Need Service Code, Availability Code, Monthly Number of Units							HCBS/IFE monthly costs including customer obligation: (HCBS amount must be reported to EES Specialist)					
Service Code	Availability	Units	Service Code	Availability	Units	SCA total cost including customer copay: <u>etc: 47</u>						
						Co-pay: <u>28</u>						
						OAA total cost: <u> </u>						
						Total customer obligation/copay: <u> </u>						
						HCBS/IFE Total Cost: <u> </u>						

Release of Information: I consent to the release of the information on this page so I can receive services. I understand the information included in these pages 1-10 will be Disability Services and service providers listed above to enable the delivery of services and program monitoring.

Customer or Guardian Signature: [Redacted] Date: Dec 12, 2024
 Assessor Signature & Phone #: [Redacted] 235-1367
 Customer or Guardian Signature: [Redacted] Date: 9.23.2025
 Assessor Signature & Phone #: [Redacted] 205-235-1367

Additional Support/Services from Home Health, Family, Friend, Neighbor, Attorney, Landlord, Church, Club, Other											
Name	Relationship (check if primary caregiver)	Address (indicate "same" if lives with customer)	Phone Home	Phone Work	Service	Frequency	Yes	No	Paid		
MON											