House Committee on Health & Human Services

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My adult son has a severe mental health disorder. He is a recipient of Social Security disability payments. And he also receives health insurance through Medicaid.

My son's disability payments are approximately \$10,200 per year. His Medicaid spend-down is approximately \$7,200 per year. His psychiatric medications cost approximately \$750 per month, and the psychiatrist to monitor those medications costs \$165 per month. Clearly, it defies logic that someone with an \$850 monthly income could afford \$900 in monthly medical expenses. But, not in Kansas.

Because gap insurance is not available for Medicaid recipients, the burden for my son's medical expenses falls on my husband and me.

I am grateful, and my son is fortunate, that my husband and I are his safety net—we are able to pay for his medical expenses. However, it is not without effect on us; it affects our ability to save for our retirements and to plan for our son's future. Most importantly, though, I ask you to consider what effect the failure to expand Medicaid has had on those Kansans with severe mental health disorders who do not have a safety net. And I ask you to consider if this is the legacy you want to leave for these vulnerable Kansans.

I am a Republican, so I see this issue through a political lens. I am a parent of a young man with a severe mental health disorder, so I see this issue through a pained parental lens. I am a Kansan, so I see this issue through a values lens—of commitment to our people, regardless of our political lens and regardless of our parental lens. I urge you to support House Bill 2319.

Thank you for the opportunity to present testimony today.