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Testimony in Support of a Kansas Medicaid Expansion

A Medicaid expansion will be good for struggling Kansas low income families, health care providers seeking to stretch ever more limited payment dollars, and the overall Kansas economy.

The current Kansas Medicaid program is too restricted in coverage to provide access for thousands of hard-working Kansas families without employer coverage and for other Kansans facing difficult circumstances like partial disability. The only adults in Kansas with Medicaid coverage are parents below 33% of the federal poverty index, pregnant women and a few very disabled persons.

One of my church friends described his child (over age 26) who has traumatic brain injury and earned less than \$5000 last year. He makes too much for Kansas Medicaid and is not disabled enough to qualify for federal or state programs. Why is he left out in Kansas? Persons working in the health exchange describe many situations where people are too poor to qualify for subsidies to make health insurance affordable and must be turned away knowing that the State of Kansas has decided they are not worthy of health care. From my personal work in the Circles of Hope project here in Hutchinson, I can see how the medical bankruptcy rate in our state continues to wreck the path out of poverty for our citizens and deny real economic opportunity. Kansas families need a Medicaid expansion.

Providers such as hospitals, physicians and our hard-working safety net clinics must move into a new era of bundled payments, accountable care and lower volumes in the case of hospitals. The faulty mechanism for providing care to those without a source of payment—shifting costs among payers—is not continuing (and really I have to say “good riddance”). The care available for those on sliding scales or needing full charity will be ever more difficult to produce and access because of the need of most providers to maintain some bottom line.

The payment reform efforts, occurring in government programs and private payers alike, expect states to enact Medicaid reform to eliminate the most indigent from the “no pay” lists of these providers and reduce this financial problem. Becoming an outlier to this effort, Kansas will stress providers more and more, in some cases spelling closure and gaps in provider coverage, especially in rural areas.

The safety net clinics, which the Kansas Legislature has assisted (along with many of us private grant makers), have struggled in Kansas compared to other states in large part because of the absence of a robust adult Medicaid program. With a Medicaid expansion, the safety net will be able to increase its capacity to serve, as Medicaid’s lower reimbursement levels actually produces net revenues for many of these safety net clinics. Providers need a Medicaid expansion.

Finally, as Kansas seeks job growth and a vibrant economy to draw workers and industry to our state, the economics of the Medicaid expansion can become a key element in these overarching economic strategies. Numerous studies by independent groups across the political spectrum have established the overall job growth and tax revenue growth potentials. Other studies have confirmed that Medicaid creates a healthier population which can work and learn without debilitating illness. The opportunity to

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create a Medicaid expansion designed for our culture and our economy makes this decision even easier and more pressing.

There is really no substitute for a Medicaid expansion if the needs of Kansas families, providers and our state's economy matter. We hope and pray that the Legislature will grasp this historic opportunity to free our citizens from the health care access limitations and financial burdens which the current limited Kansas Medicaid program produces.

A handwritten signature in black ink, appearing to read "Kim Moore", with a long horizontal line extending to the right.

Kim Moore
President

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