



**To:** House Appropriations Committee

**From:** Jerry Slaughter  
Executive Director

**Date:** February 22, 2013

**Subject:** HCR 5013; concerning Medicaid expansion

The Kansas Medical Society appreciates the opportunity to submit the following comments on HCR 5013, which expresses the will of the Legislature to not expand Medicaid beyond current eligibility levels.

We share the concerns of many of you about the reach of the federal government, particularly in the context of the far-reaching powers delegated to it under the Affordable Care Act. The physician community has many concerns about the growing tendency of the federal government to exert more control over the delivery of health care, including how it is organized, who is covered, how it is delivered and how it is paid for. The Affordable Care Act is forcing health care providers, employers and policymakers to confront difficult policy choices.

The issue of Medicaid expansion is one such policy choice. We understand the reluctance of many to make a commitment to expand Medicaid at a time when both the state and federal governments are experiencing challenging fiscal realities. Although the federal match insulates the state from much of the cost of expansion, any reduction in the federal financial commitment in the future would undoubtedly make the sustainability of expansion problematic.

However, our state has taken steps through the implementation of KanCare that should begin to slow the growth in Medicaid costs, while improving care and outcomes for patients. Because of KanCare, our state is probably positioned about as well as any state to be able to ensure that our Medicaid program is fiscally sustainable in the future, even if it grows through expansion of eligibility.

As a longstanding principle, KMS believes all Kansans should have health insurance, either through private sources, or public programs for low-income and hard to insure individuals. KMS has long been supportive of expanding Medicaid eligibility to low-income, at-risk individuals who are unable to obtain insurance from private sources, in order to improve access to care, as well as reduce the burdens of cost-shifting onto the provider community. Obviously, any program expansions should be fiscally sustainable and not jeopardize the adequacy of existing program commitments. If it is possible to expand Medicaid coverage in such a way, KMS would be supportive. We would urge the Committee to continue to give careful consideration to the question of expansion, and to study how such an expansion could be done in a way that is fiscally sustainable and protects the state in the event the federal government reduces its commitments in the future.