



March of Dimes Foundation

Diane M. Daldrup
State Director
Program & Government Affairs

Greater Kansas Chapter
4400 College Blvd., Suite 180
Overland Park, KS 66211
Telephone 913.235.9840
Fax 913.469.3661
ddaldrup@marchofdimes.org

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To: Kansas House Health & Human Services Committee
Representative Daniel Hawkins, Chair

From: Diane M. Daldrup
State Director Program & Government Affairs

Re: House Bill 2319 – Creating KanCare 2.0

I write on behalf of the March of Dimes in support of HB 2319 which will allow the Kansas Department of Health & Environment to submit a Medicaid waiver application that allows for the creation of the budget-neutral managed care program to be known as KanCare 2.0. This bill will expand Medicaid coverage to include adults 19 to 65 years of age with an income up to 138% of the federal poverty level.

The mission of the March of Dimes is to improve the health of women of childbearing age, infants, and children by preventing birth defects, premature birth, and infant mortality. Access to health coverage is critical to achieving these goals – and the expansion of Medicaid is essential to improve birth outcomes among Kansas high-risk populations.

KanCare 2.0 provides the opportunity to extend health coverage to women before and between pregnancies, improving health for both them and their infants. Studies have shown conclusively that lack of access to health coverage causes women to delay or forego needed health treatment, including both preventive and sick care. For women of childbearing age, this means that critical opportunities to improve their health before pregnancy are missed. If women can obtain regular health care services to help them quit smoking, achieve a healthy weight, and maintain normal blood pressure and blood sugar levels, they are much more likely to have a healthy pregnancy and baby.

During the years 2010-2012, an average of 18.2% of women of childbearing age were uninsured in Kansas. About 43,000 uninsured women of childbearing age in our state would be eligible if Medicaid were expanded up to 138% of the federal poverty level. Currently in Kansas, pregnant women are eligible for Medicaid coverage throughout their pregnancy and for 60 days after delivery. On day 61, these women lose their health care coverage. KanCare 2.0 would provide the mechanism for these women to receive the same health and wellness care year-round and could improve future pregnancy outcomes.

In addition, extending health coverage to parents improves access to care and a greater use of appropriate care for children. Children with health insurance whose parents are insured are less likely to have unmet health care needs compared to insured children with uninsured parents.

Considering this, passage of HB 2319 to create KanCare 2.0 and provide Medicaid coverage for women of child-bearing age would significantly improve birth outcomes in our state. On behalf of the pregnant women and babies we work to protect, the March of Dimes urges the committee to support HB 2319. Please help us protect the health of our tiniest Kansans! Thank you for all that you do to support the health of Kansas residents.

**For more information or questions, contact Diane M. Daldrup, State Director Program & Government Affairs,
913.235.9840 or ddaldrup@marchofdimes.org**