

February 8, 2018

Amanda Gress, Director of Government Relations
Kansas Action for Children
Testimony in Support of House Bill 2591
House Health and Human Services Committee

Chair Hawkins and Members of the Committee:

Thank you for the opportunity to support House Bill 2591, which would require legislative approval prior to imposing new eligibility requirements or limitations in KanCare prior to 2022 and require additional legislative involvement in the development of changes to KanCare. Kansas Action for Children's (KAC's) vision is to make Kansas the best state to raise a child and to be a child, and KAC shapes health, education, and economic policies that improve the lives of Kansas children and families. For that reason, KAC promotes policies that strengthen KanCare, which provides one in three Kansas children with health care coverage. We support requiring legislative approval before Kansas makes substantial eligibility changes to KanCare:

The stakes are high for Kansas children who depend on KanCare for their health care coverage. Public health insurance is a critical investment in childhood well-being. It means children can get regular, preventive care – such as annual check-ups or dental screenings – and they can receive treatment when they are sick. Research shows that public health insurance programs like KanCare boost children's graduation rates from high school and from college. Children insured by Medicaid earn more as adults and are more likely to earn more than their parents. This means that sound decision-making regarding major changes to KanCare is imperative as Kansas seeks to improve outcomes for children.

"KanCare 2.0" proposes changes in eligibility that pose a significant danger to the health and well-being of low-income Kansans and their children, and these policies merit additional scrutiny. Lifetime limits for some parents' Medicaid coverage and termination of Medicaid eligibility for some parents who do not meet work requirements would mean fewer parents receive the care they need to be healthy. This risks children's well-being because children's health reflects the health of their parents. When parents do not have health insurance, children are less likely to get regular checkups and essential preventative care, like immunizations. When parents are not physically and mentally healthy themselves, they are not able to provide the best possible care for their children. Families without health insurance are also financially vulnerable to unexpected medical emergencies. Provisions that end parents' health care coverage put their children at risk and increase the likelihood that their children will become uninsured as well.

We hope additional legislative involvement will lead to increased responsiveness to concerns raised by stakeholders and members of the public.

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The state received a significant amount of feedback in opposition to time limits and work sanctions during the public comment process. Despite stakeholders' varied and detailed concerns, the state included these policies in the final waiver application submitted to the federal government. House Bill 2591 will create further opportunity to ensure public concerns are accounted for as the state makes decisions regarding KanCare.

The Legislature should confirm KanCare's ongoing challenges are resolved before further administrative complexity is added to the program. KanCare's currently faces well-documented problems regarding eligibility systems and processes. Requiring legislative approval changes to eligibility requirements can ensure the state addresses these issues before seeking to administer complex, burdensome, costly new policies.

For these reasons, we believe that KanCare and the children it serves would benefit from additional legislative oversight of major proposed eligibility changes. KAC looks forward to continued dialogue and partnership with policymakers seeking to improve KanCare. Please do not hesitate to contact me (amanda@kac.org) if we can be of assistance.