

March 14, 2024

There is a dearth of thought given to caring for others, especially regarding the health in the State of Kansas. Please provide a time of discussion so that these needs and concerns can be openly shared and considered by our Legislature. Too long has this issue been dismissed. The public needs must be heard!

Barbara Campbell

March 15, 2024

Dear committee members,

Thank you for the opportunity to present testimony regarding my support for Medicaid expansion.

Medicaid expansion will support the growth of rural healthcare that is critical to those who reside in much of our state. It will also open up funds for critical rural training programs, which will bring new healthcare provider trainees to our state—who are far more likely to stay after their training is complete.

Also, it will expand the availability of mental health services, critical in a state with a relatively high rate of death by suicide.

Please support medicaid expansion.

Thank you for your service to all Kansans,
Annie Cartwright
Fairway, KS

AnneDCartwright@gmail.com

February 9, 2024

Why must Kansas be one of the few states that does not provide Medicaid for those most in need? Hard working people with even two full time jobs but low wages that do not support health insurance, could benefit with the help of medicare. And this expansion would not hurt the economy of Kansas, but actually improve it. Simple medicines and even vaccines are beyond the ability of those poor. I urge you to vote to expand medicaid.

Janet Cashman
8301 Wood Ave
Kansas City, KS 66112

**Henry H. Chamberlain
12808 Kansas Avenue
Bonner Springs, Kansas**

March 17, 2024

TO: Committee Chairs, Sen. McGinn and Rep. Landwehr, c/o Alliance for a Healthy Kansas – Medicaid Expansion Testimony:

There is no recovering the billions of dollars of our federal income tax revenue that Kansas has foolishly forfeited by not expanding Medicaid years ago. That is an egregious breach of the duty of the Kansas Legislature to protect the public interest. The loss of that revenue stream, and the associated loss of rural hospitals, is irreparable.

What can be done now is to expand Medicaid in time to save some of the remaining hospitals before there are more losses. Failing to do so would further impair the availability of medical care in rural Kansas, driving more people out of those areas.

Please take the obvious moral, ethical, fiscally-responsible, and compassionate action.

Sincerely,

A handwritten signature in black ink, appearing to read "H. Chamberlain". The signature is written in a cursive, flowing style.

Henry H. Chamberlain

March 12, 2024

My name is John Chandler I was born and raised in Independence, Kansas. I am the same age and friends and teammates with Derek Schmidt.

Independence Kansas is the home where Alf Landon and his daughter Nancy grew up.. It's history speaks for itself. It may be going through difficult times for the last several years due to the oil situation.

I moved to Irving Texas at age 13, because my father found a greater career. I wasn't happy leaving my town and in friends in junior high and starting high school. My mom and dad was from Wichita and I was a 3rd generation aircraft employee. My dad knew my mom and I were lost in Dallas, especially coming from a small town in Kansas. I went to high school were the kids drove brand new cars. Brian Bosworth was my classmate and teammate. We didnt fit in. So since my parents and other relatives lived in the Wichita Ks area. My dad took a great pay cut for our happiness. We moved to Derby, Kansas it was great. I succeeded and we were happy to be close to my grandparents and other family members. Derby has disappointed me in the last 10 years. Its the same, but i guess we can say that about the entire world. worked fulltime at then Raytheon Aircraft / Beech and went to college to be the first family member of my mom and dad's to ever graduate from college with a Bachelor's degree. I then worked for over 25 years as an Aerospace Engineer. I bought my first house with my wife then. I was 22 yrs old. I wanted a family more than anything. I did everything we are taught. Work hard, get a college degree, buy a house and start a family. It was the way to succeed and I followed beyond expectations. I have 3 children and a grandson. My first wife had my oldest daughter who is 24 with a family and a college degree and bought her 1st house at 22. She has a very good job. I feel I taught her well. I have a 12 year old son and a 16 year old daughter with my current wife of 17 years. So, as I said I was very successful as an Engineer. I made more than enough money. Then in 2013 I was diagnosed with avian necrosis of both hips. I was working at Spirit AEROSYSTEMS at the time who wrongfully terminated/laid off over 300 employees who were costing them high insurance cost and we were on FMLA and over 40. That's a class action suit that still is ongoing. My dad had to sell prosperous family land in s.w. Oklahoma with amazing mineral rights. To pay for Cobra \$1600 a month, because I had to have insurance to get both hips replaced in 2014. 3 total surgeries. I was 44 years old unable to walk before without a cane then walker before and after surgeries. They tried to save one hip by drilling a hole to hopefully start blood flow. It was very much the same recovery of a replacement. It didn't work. So I have 2 prosthetic hips when my children were very young and I couldn't take care of them, so my wife could only work sparingly and my young brother in laws would help with my children while she was at work. My dad paid all my bills. Then I recovered and went back to work at Learjet my favorite place I ever worked. They laid off alot of people because they shut down a Production. Then I found out I had stage 3 iv colon cancer in January 2016. Had a 30% chance to live. I beat it. Then September 2017 I was diagnosed with stage 3 iv metastatic lung cancer. I had a tumor the size of an orange on my left lower lobe of my lung that was

removed. Again a 30% chance of living. I beat it and went back to work in June 2018. I had chemotherapy then my tumor removed in January 2018.

I was in pain and still in pain, but I only lasted 2 months at that job and was fired for missing too much work. Then I was approved for disability by a Social Security Judge.

So, I believe society and a large percentage of politicians and Health professionals profile people on Medicaid as lazy and need to get a job. Basically lovers or trash they can just toss to the side. They have never walked in my shoes or others like me. They would have more passion. I did everything that America drives in our head at a young age and exceeded expectations and was successful in money terms. I have felt the greatest humility and humbled my life. I sat sick and dying at dcf to get Medicaid for my family. I looked around and I seen the stereotypes. I seen most the people there not from this country. At least 50+. Then I looked around and seen mothers with several children, but no father in sight. As I sat there I was like why am sitting here alone dying and seeing all that I seen. Again I didn't belong there I felt, but I was doing it for my family and the Lord I feel put me here on earth to teach my children the ways of life and my children asked me daddy why does God give you cancer and kill your hips. I tell them that he knows I'm strong and others maybe weak and would die, but he knew I had the strength to beat anything. Even if I saved 1 life because God's will in me it was worth it all. Now I am suffering from a life threatening liver and blood disease. I totally understand the misuse and abuse and using the system people are capable of. I think these people need to be held accountable and vetted more in depth to receive Medicaid. Its also a terrible effect on a person that has similar life experiences as I have to sit there while dying and waiting all day at dcf because it's full of people from other countries. It's very unfair. I understand life is not fair, but that has to change along with expansion. 20 years ago I didn't believe in handouts or state or federal benefits. Well I have no choice now and I thank God and Kansas for being there for me and my family we couldn't survive without it. I'm sure there are several thousands of stories like mine. Medicaid does work and expansion will help, but Health Professionals have to stop being unfair to people like my family. They should all be required to take Medicaid. It causes such anxiety just to find a simple good dentist for my children. It takes days of work and calls and lots of health professionals staff just hang the phone up on you. This has to stop. I'm very grateful for Medicaid and I wanted to share my story with you. So hopefully you understand how important this hearing to take place as soon as possible. This is very critical and life saving for unfortunate people. Mentally ill people are in real need. There has to be 3 or 4 mental hospitals in kansas and ease of getting mental health. Smaller settings for people who are maintaining and coping well. I hope you understand you can make a huge difference and save lives. That would give you so much empathy and you would feel the greatness in your heart and spirit.

Thank you for your time,

John Chandler

Derby, Kansas



March 20, 2024

Tanya Koehn, Interim Executive Director
Child Care Aware of Kansas
Written-Only Proponent Testimony for HB 2556
House Committee Health and Human Services

Chairman Landwehr and members of the Committee:

Thank you for the opportunity to provide proponent testimony in support of SB 355, expanding medical assistance eligibility and enacting the cutting healthcare costs for Kansans. Child Care Aware of Kansas leads to a network of four child care resource and referral agencies across the state. Our network is on the front lines, each and every day, working to connect families to high quality child care, partner with child care providers to enhance their business and collaborate with communities to build child care capacity.

Child Care Aware of Kansas strongly advocates for the expansion of medical assistance eligibility, as it promises significant benefits for families throughout Kansas. Among the approximately 150,000 Kansans who stand to gain from Medicaid expansion are child care providers, who play a crucial role in nurturing our youngest citizens. Unfortunately, many of these providers lack affordable access to healthcare, making it challenging for them to prioritize their own well-being.

It's important to note that the proposed expansion carries no financial burden for Kansas taxpayers, yet it holds the potential to positively impact numerous lives. Moreover, by ensuring access to health insurance, it could encourage more individuals to pursue careers in child care, thereby addressing the growing demand for these services.

Thank you for considering my testimony. This issue is important to Child Care Aware of Kansas, as we regularly receive feedback from families and child care providers regarding the financial obstacles they encounter. I strongly urge this committee to prioritize the expansion of medical assistance eligibility and the reduction of healthcare costs for Kansans. If I can be of further assistance, please contact me at tanya.koehn@ks.childcareaware.org or 785-833-6554.

Respectfully Submitted,

A handwritten signature in black ink that reads "Tanya Koehn".

Tanya Koehn
Interim Executive Director



Child Care Aware of Kansas

March 13, 2024

Expanding Medicaid would have helped our family more easily find a skilled nursing facility for our mother.

There are many advantages to expanding Medicaid, but here are a couple of thoughts for you to consider:

The funds will be provided by taxes we have already paid to the Federal Government.

Expanding Medicaid will generate additional economic activity in our state.

"A rising tide floats all boats."

Please help the people of Kansas!

Sincerely,

James David Childers
3109 Trail Rd, Lawrence, KS 66049
785-550-3851



**Proponent Testimony on HB 2556 – Written Only
House Committee on Health and Human Services**

My name is Rachel Marsh, CEO of the Children's Alliance of Kansas. The Alliance is an association of 19 private, non-profit child welfare agencies that collectively provide a full array of services for children and families in child abuse and neglect prevention, human trafficking prevention, family preservation, foster care, adoption, independent living, and parent, youth, and child skill-building, mental health, and substance use treatment. I am offering written testimony in support of HB 2556.

As child welfare providers, we work daily with children and families who are part of Kansas' most vulnerable populations. Access to quality health care is important to supporting those families. Many are working in preventative ways to keep their children safely in their homes, so there is no need to enter the foster care system.

While children who do have to enter foster care are eligible for Medicaid services, many of the families we support are not and, therefore, are in need of affordable, quality health care. Due to current statute, many families are not eligible in Kansas.

We appreciate support of the child welfare focus on preventative measures that keep children and teens out of foster care. Access to healthcare can be one tool that helps us do that. Thank you for the opportunity to testify.

Rachel Marsh
rmarsh@childdally.org
(620) 951 4110

Members of the Children's Alliance of Kansas:

CALM, Emporia
Cornerstones of Care, Kansas City
DCCCA, Lawrence
Eckerd Connects, Wichita
EmberHope Youthville, Wichita
Florence Crittenton, Topeka
FosterAdopt Connect, Olathe
Gathered, Derby
ICT-SOS, Wichita
KidsTLC, Olathe

KVC Kansas, Olathe
O'Connell Children's Shelter, Lawrence
Rainbows United, Wichita
Restoration Family Services, Wichita
Saint Francis Ministries, Salina
TFI Family Services, Topeka
The Villages, Topeka
Wichita Children's Home, Wichita
Zoe's House, Kansas City



To: Rep. Brenda Landwehr, Chair and Members, House Health and Human Services Committee
From: Kylee Childs, Director of Government Affairs, LeadingAge Kansas
Date: 3/20/2024

LeadingAge Kansas is the state association for not-for-profit and mission-focused aging services. We have 150 member organizations across Kansas, which include not-for-profit nursing homes, retirement communities, hospital long-term care units, assisted living, home plus, senior housing, low-income housing, home health agencies, home and community-based service programs, PACE and Meals on Wheels. Our members serve more than 25,000 older Kansans each day and employ more than 20,000 people across the state.

Testimony in Support of House Bill 2556

LeadingAge Kansas supports the creation of a KanCare expansion plan that promotes personal responsibility for participants and minimizes its effect on the state Medicaid budget. We believe that the program outlined in HB 2556 meets both requirements.

LeadingAge Kansas has many hospital-owned members, as well as rural nursing homes that depend on the many services provided by their local hospitals. Failure to expand KanCare has had a significantly negative financial impact on Kansas hospitals, which necessarily has a negative effect on our own members. An increasing number of our hospital-owned nursing homes are closing their doors, and we continually hear of the struggles of nursing homes who are operating in areas where hospitals have closed.

The one concern we have related to expansion is the potential for delayed Medicaid applications for our nursing homes, HCBS-FE waiver providers, and PACE providers. As we already struggle with delayed processing, we would ask this committee along with the KanCare Oversight committee to keep a close eye on the number of aged applications the agency reports out.

We support HB 2556 to promote the security and financial sustainability of our own hospital-affiliated members, and the many seniors who rely on their care and services.

I am submitting this written testimony in support of the bill before you for your consideration.

I am not an expert that can speak to the finer points of the medical, economic, fiscal, or social arguments for Expanding Medicaid. I do feel qualified to speak on the moral component of this issue. Here is why.

Our son is a Type-I diabetic that was diagnosed at age 9. Type-I diabetes was a pre-existing condition at the time he needed individual coverage. His employer carried only major medical. He spent years without seeing his endocrinologist, eye doctor, general practitioner, or other specialists that health care requires for this disease. He struggled to pay for insulin. We worried *constantly* about blindness, amputation, and long-term illness.

The Affordable Care Act was enacted into law in 2012! Because he could buy private insurance our son has been able to control his diabetes with the support of his medical team. Because he has access to health care, **they have been able to stave off blindness!**

Our country did not turn its back on us! Why does Kansas turn its back on those in the insurance gap? Who has gone blind? died of cancer? missed work due to treatment they could not get? What is moral about not expanding Medicaid for the last 10 years when there is a mechanism to do so?

Our elected officials are required to make morally correct decisions. In the case of Medicaid expansion, Article 7, Section 4 of our Constitution requires that *"the state shall provide, as may be prescribed by law, for those inhabitants who, by reason of age, infirmity or other misfortune, may have claims upon the aid of society."* Our forebearers understood the need for moral legislation. **You** have the power to prescribe by law.

As people of faith and conscience we are committed to take morally correct action. My faith system is filled with guidance like Matthew 25:40, *"The King will reply, 'Truly I tell you, whatever you did for one of the least of these brothers and sisters of mine, you did for me.'"* And Luke 3:11 *"John answered, 'Anyone who has two shirts should share with the one who has none, and anyone who has food should do the same.'"* Why stop at shirts and food? I can give to our local food bank, but **you** can give health care coverage.

It is time to correct the mistakes of the past. It is time to take the morally correct action. It is time to expand Medicaid to the full extent of federal law.

A handwritten signature in black ink, appearing to read "Ron Chronister". The signature is fluid and cursive, with a large loop at the end.

Ron Chronister
Halstead



City of Emporia
Testimony in support of Medicaid Expansion

To: House and Senate Committees on Health and Welfare

Bills: Testimony in support of SB 355 and HB 2556

Presented By: Trey Cocking, City Manager

I am writing on behalf of the City of Emporia, Kansas, to express our City Commission's unanimous support for the Cutting Healthcare Costs for All Kansans Act and the expansion of Medicaid in our state. This testimony reflects our collective experience and the critical need for Medicaid expansion, as outlined in our recently passed resolution on January 17, 2024.

Emporia is a community deeply committed to the health and wellbeing of its residents. Our city's resolve, as demonstrated through our actions and policies, underscores the necessity of accessible healthcare for all. The City Commission of Emporia, understanding the far-reaching impacts of this issue, has formally declared its support for Medicaid expansion, recognizing its potential to significantly improve the lives of our citizens and the economic stability of our healthcare institutions.

The Emporia Fire Department, responsible for providing vital Emergency Medical Services (EMS) across the county, has seen its revenues considerably affected due to the lack of Medicaid expansion. **This situation has forced us to rely more heavily on property tax dollars to fund EMS, placing an undue burden on our taxpayers.** Expanding Medicaid would not only alleviate this financial strain but also enhance the health outcomes and quality of life for countless uninsured or underinsured residents.

Moreover, Medicaid expansion promises to bring substantial economic benefits to our community. Specifically, it would provide critical support to Newman Regional Health Medical Center by reducing uncompensated care and bolstering the hospital's financial health. A robust healthcare system is foundational to the prosperity of Emporia, facilitating a healthier, more vibrant community capable of achieving social and economic growth.

Therefore, through this testimony, we urge the Kansas State Legislature and the Governor to act swiftly in expanding Medicaid. This step is essential for ensuring broader access to necessary health services, reducing the financial pressures on local emergency services and taxpayers, and supporting the viability of key healthcare providers like Newman Regional Health Medical Center.

We believe that expanding Medicaid is not just a healthcare issue but a moral imperative that transcends political affiliations. It is about the well-being of our citizens, the stability of our healthcare institutions, and the overall prosperity of our communities. Let this testimony from the City of Emporia serve as a clear call to action: Now is the time to expand Medicaid in Kansas.

Thank you for considering our position and the voices of the Emporia community.



City Manager

201 West 4th Street
P.O. Box 688
Pittsburg, Kansas 66762

620-231-4100
www.pittks.org

To: The Alliance for Healthy Kansas
Re: KanCare Testimony - Pittsburg

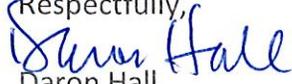
To Whom it May Concern:

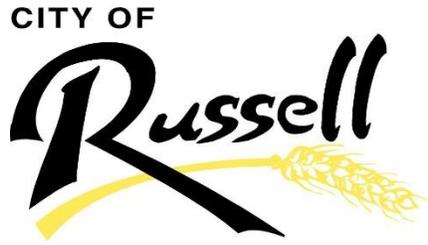
Thank you for this opportunity to testify on behalf of expanding Medicaid in Kansas. Our community appreciates the State legislature allowing Kansans to provide input regarding this important matter. I am providing this testimony from the perspective that Pittsburg is home to a rural hospital and numerous Pittsburg residents would benefit from access to affordable health care.

Our local hospital, community health center and other health care providers in southeast Kansas provide exceptional care to tens of thousands of Kansans who would otherwise have to drive hours for these services, with many likely going out of state. Helping to reduce uncompensated healthcare cost, not only ensures continued access to healthcare for our citizens, but supports a vital economic engine for Pittsburg. Expanding Medicaid helps to keep individuals in the workforce allowing for access to primary care. Pittsburg is a growing community and will continue with a healthy workforce that pulls from the County for workers. Approximately 1,500 individuals in Crawford County would qualify for Medicaid should Kansas expand the program.

Expanding Medicaid would reduce the financial burden of health care which can be a significant portion of a household budget. For eligible families in our community this would allow them to direct more of their resources to housing, childcare, transportation and food. This as a cost-effective way to assist health care providers, consumers and their communities by closing the gap in health care and bringing federal dollars into Kansas.

This support letter is provided with the caveat that if, for some reason, the federal funds allocated for this program were to be eliminated or reduced, the financial burden would not fall to our State. As federal funds are available at this time, I support expanding this critical program to the children and families in Kansas who may go without regular health care otherwise.

Respectfully,

Daron Hall
Pittsburg



133 W 8th St
PO Box 112
Russell KS 67665-0112
Phone: (785) 483-6311
Fax: (785) 483-4397

Testimony on House Bill 2556
House Committee on Health and Human Services

Mayor Jim A. Cross
City of Russell, Kansas

February 5, 2024

Chairwoman Landwehr and Members of the Committee:

As representatives of the Governing Body of the City of Russell, Kansas, it is our duty and privilege to advocate for the well-being of our community. Today, we stand before you in unwavering support of HB 2556, pivotal legislation to expand Medicaid in our great state.

At its core, HB 2556 embodies an opportunity to extend the vital lifeline of healthcare coverage to approximately 150,000 Kansans, many of whom reside right within our city limits. Access to affordable healthcare is not merely a luxury but a fundamental necessity, and the passage of this bill promises to significantly enhance the health outcomes of individuals and families in Russell.

Crucially, we commend HB 2556's foresight in its commitment to maintaining revenue neutrality. By leveraging surplus funds, we can direct resources towards essential areas such as tax cuts, bolstering public schools, and fortifying our infrastructure. This pragmatic approach ensures that the burden won't fall upon the shoulders of hardworking Kansas taxpayers.

Moreover, HB 2556 strikes a delicate balance by incorporating reasonable measures like a work requirement. Such provisions incentivize workforce participation and ensure that administrative hurdles do not impede access to vital healthcare services.

In Russell, where our local hospital and healthcare facilities serve as the backbone of our rural community, Medicaid expansion is nothing short of imperative. By safeguarding these institutions, we preserve jobs and guarantee that residents in remote areas have access to the quality healthcare they deserve right on their doorstep.

The benefits of Medicaid expansion extend far beyond our community borders. By alleviating the financial strains on families, hospitals, healthcare providers, and businesses alike, we pave the way for lower healthcare costs. This ripple effect will undoubtedly enhance the well-being of all Kansans.

We recognize that Medicaid expansion enjoys overwhelming bipartisan support, with more than 75% of Kansans voicing their approval. This isn't about political posturing; it's about fulfilling the needs of our constituents and enhancing the lives of every individual in our state.

For Russell, the benefits of Medicaid expansion are clear and tangible. From job creation to economic stimulation and addressing critical healthcare worker shortages, the advantages are paramount for the prosperity and vitality of our community.

The time for action is now. The delay in Medicaid expansion has already hindered our progress and stifled economic growth. We implore you to seize this opportunity and enact swift, decisive measures to rectify the situation.

In closing, we urge you to stand on the right side of history and throw your unwavering support behind HB 2556. Let us forge a brighter, healthier future for our community, our state, and all Kansans. Thank you for considering our testimony.

March 15, 2024

To begin with, despite a long career as a prosecutor in several offices and as a staff attorney for the Kansas Insurance Department, I am now semi-retired and working as a defense attorney with indigent clients.

I believe I have the professional experience, including a fair understanding of how insurance premium rates are determined, and practical experience with healthcare for people who cannot afford to pay for it to speak on this issue.

I support Medicaid expansion for several reasons.

First, the Affordable Care Act was built as a house of cards, dependent upon the individual mandate and Medicaid expansion to cover the cost of uninsured care that is now ultimately passed to rate-payers. The failure to expand Medicaid and the loss of the individual mandate does not mean those of us who have employer-provided coverage or individual coverage do not pay the cost; it merely means we pay it inequitably. My indigent clients still go to the emergency department, and those of us who pay, directly or indirectly, pay the cost through increased premium rates. The failure of the individual mandate means only that those who choose not to be insured, even when financially able to be, become a drain on those who are responsible enough to insure against the risk of health care costs.

Second, all insurance is about risk distribution. The larger the group, the less each person pays for the statistical risk of loss to any individual member of the group. By losing the individual mandate and the failure of Kansas to expand Medicaid, the result is a minority pays the health care costs of all.

Finally, in rural and poor communities, essential hospitals are unable to survive without a public contribution to supplement the massive amount of charity care they provide.

We do not want to lose rural and small town hospitals, which is happening now because of the legislature's stubborn failure to expand Medicaid simply because the Republican majority gave the ACA the nickname "Obamacare" and they do not want to give credence to anything that came out of the Obama administration. That's irresponsible and detrimental to the people who elected its members.

Brenda Clary
Law Office of Brenda J. Clary
810 Pennsylvania, Suite 203
Lawrence, KS 66044
785 691 7879

CleanAirNow
3730 Metropolitan Avenue
Kansas City, KS 66106



To:

Members of the Joint Committee on Ways and Means and Public Health and Welfare (Kansas Senate)

Members of the Health and Human Services Committee (Kansas House)

**Subject: SB 355; HB 2556
(Proponent)**

Esteemed members of the Kansas Legislation,

CleanAirNow is a community-led organization that creates systemic change in existing policies and practices to protect health, and dismantle environmental racism that perpetuates the unequal distribution of environmental hazards in fenceline communities.

As a community organization, we are strong proponents for the expansion of Medicaid in the state of Kansas. Our fenceline community is exposed to higher environmental hazards through their exposure to emissions from freight, rail, and industry. Studies have shown that the most affected areas can have a shorter life expectancy of up to 20 years. In addition to the increased risk, community members face the additional financial burden associated with healthcare costs, and would greatly benefit from the expansion of Medicaid and the subsequent lowering of health care costs.

[Climate change is the largest global health threat in the world.](#) The direct damage costs to health is estimated to be between [US\\$ 2–4 billion per year by 2030](#). Kansas City is ranked as the

[second poorest in health outcomes in the state](#) (103 out of 104). In consideration of the compounding evidence of pollution, contamination, and climate change effects on communities of color and low-income, we need to be proactive in our efforts to improve access to care. Many community members fall in the health coverage gap where they make more than the poverty line but not enough to receive preventative care. According to a recent study comparing states with medicaid expansion to those without, [findings demonstrated increased health insurance coverage, lower rates of avoiding seeking medical care, and greater utilization of preventive care measures](#). When our community members have early access, they reduce costs from delayed or emergency treatment, they miss less school and work days, and contribute even greater to our collective economy.

The expansion of Medicaid will guarantee an increase in federal funding for the state's healthcare system, expanding job opportunities, and guaranteeing healthcare access for all of our communities, both rural and urban.

We strongly advocate for the implementation of this bill for the benefit of every resident of the state of Kansas, and for the improvement of overall public health.

Regards,

Atenas Mena, Executive Director

Rayan Makarem, Policy Advocate

rayan@cleanairnowkc.org



TO: House and Senate Committees

FROM: Brian Lawrence, MHA
President and CEO, Coffeyville Regional Medical Center

DATE: March 12, 2024

RE: Proponent HB 2556/SB 355

On behalf of Coffeyville Regional Medical Center, we appreciate the opportunity to provide testimony in support of House Bill 2556/Senate Bill 355.

Unlike many other industries, Kansas hospitals cannot refuse medical treatment to patients in emergency situations, regardless of their ability to pay or insurance status. Therefore, when a patient presents in our Emergency Department, we are required to treat them. This creates unique challenges for our hospital financially at a time when reimbursement rates from public and private payers remain stagnant and operational expenses have continued to increase.

Currently in Montgomery County, there are nearly 1,000 uninsured residents who would become eligible for Medicaid with expansion. This would provide access to care they need and reduce healthcare costs for everyone. Expanding Medicaid would protect our residents from medical debt caused by inappropriately utilizing our emergency room for non-emergent healthcare needs. It would also support a healthier workforce for those employees that aren't offered employer-based health insurance or can't afford it. This will also, in turn, help make our economy stronger by allowing our employers, small businesses, and workforce compete with our neighboring states, who have already expanded their Medicaid programs.

Coffeyville Regional Medical Center remains committed to serving our region every day. We are an economic driver for our local economy and join other hospitals as one of the largest industries in the state.

Expanding Medicaid to eligible residents in Montgomery County would create nearly 300 new jobs and insert over \$7 million in new annual healthcare spending in our county. Expanding Medicaid is good for Montgomery County.

This bill comes at a time when the healthcare industry in Kansas is providing almost \$1.2 billion in uncompensated care to our state. At our hospital we have provided over \$5.2 million in uncompensated/charity care in 2023.

Thank you for your consideration of our comments. We ask that the committee recommend favorably HB 2556/SB 355.

March 15, 2024

Lisa Collette, Kansas Citizen
Testimony in support of KanCare expansion
Alliance for a Health Kansas hearing

Thank you for the opportunity to provide testimony in support of expanding KanCare. I am the mother of a child with a medically complex syndrome, CHARGE Syndrome. Due to her diagnosis at birth, we were afforded the opportunity of her being eligible for a waiver and applying for Medicaid. Because of this opportunity, we have been able to afford her medical expenses and therapies that are required for her to meet her milestones in growth and development. She does have two private insurances in front of her Medicaid, but private insurances don't always allow for their consumers to receive the care they need. For instance, some private insurance companies only allow for so many therapy sessions, which for some consumers, these sessions might determine if they'll ever learn how to walk or eat by mouth safely. Furthermore, in my daughter's case, she has a home healthcare nurse that comes to our house to provide care for her 50 hours a week. This allows for my husband and I to both work outside of the home, allow her to go to school safely, and allow for us to spend time with our older child and his interests. Having Medicaid allows for our daughter to have her nurse for the number of hours that she is needed, since in many cases, private insurances' idea of private duty nursing services is different than what a family with a medically complex child view it as. The payment for these services just isn't there. Since we were afforded the opportunity to apply for Medicaid for our daughter and be placed on a waiver, we have avoided being medically bankrupt, which for many people who don't have this opportunity experience. Expanding KanCare will help with preventing this and allow citizens of Kansas to be able to go to the doctor or hospital without the fear of how they're going to pay for it. Without having to make the decision of putting food on the table or putting a roof over their family's heads, and whether the pain they've been having in their chest is serious or not.

As a parent of a child who benefits from having Medicaid, I want to see that for the 150,000 hardworking Kansans who can't afford other coverage. Regardless of having a job, the maximum amount a family of three could make per year in 2024 for the parents to qualify is \$9,812. In my opinion, this amount is very restrictive and makes it impossible for a family to afford everyday living expenses let alone being able to afford insurance premiums from insurance that their job may or may not offer. Expanding Medicaid would allow these parents to get a better paying job or work more hours without the fear of losing health coverage. Expanding KanCare will create new jobs to our state in a field that needs it. The number of jobs that would potentially be created is about 23,000 in the first full year alone. The need for quality nurses, doctors and therapists is in great demand, and by expanding KanCare it will address these challenges to recruit and retain these professionals. Fulfilling these needs will also help keep the doors open and lights on in many of our hospitals and clinics in rural areas. As a citizen of Kansas, it's appalling to me that a community in western Kansas would need to travel to a hospital hours away or even out of state to receive the care they need. Having access to a healthcare provider due to having coverage improves the health and well-being of Kansas children and their parents. Access to quality healthcare should be something that all Kansans have no matter where they fall on the tax bracket. For these

reasons and more, as a Kansas citizen that pays their taxes, supports expanding KanCare. This policy is an investment in Kansas children and the adults who care for them. This is something that future generations to come will benefit from as well. Now is the time, as Kansas lawmakers to support expansion, and pass it. There are many federal incentives currently on the table and the entire state will benefit from this policy implementation.

Thank you again for the opportunity to voice my support for KanCare Expansion. It's time to join the 40 other states who have done what many Kansans want, KanCare Expansion.



To: House Health and Human Services Committee

From: Rachelle Colombo
Executive Director

Date: March 13, 2024

Subject: HB 2556; concerning expanding Medicaid

The Kansas Medical Society appreciates the opportunity to submit the following comments on HB 2556, which directs KDHE to develop and submit a Medicaid waiver application that would expand coverage to certain individuals with an income that is equal to or less than 138% of the federal poverty level. KMS supports HB 2556.

For more than twenty years, the Kansas Medical Society has supported a public policy that all Kansans should have health insurance. To the extent that private health insurance is either unaffordable or unavailable due to health or employment status, public programs such as Medicaid should provide such coverage. The benefits of good health insurance are indisputable. Better primary and preventive care, screening for cancers, high blood pressure and other chronic illnesses, as well as early identification and treatment of diseases, will improve health outcomes, reduce disability and suffering, avoid communicable diseases, increase productivity and save dollars.

We do not dismiss the sincere concerns of those who are reluctant to expand the state's program for fear that the federal government will change the rules of engagement at some point in the future in a way that creates adverse financial consequences for the state's program. It is critical that programs for at-risk populations are sustainably funded to encourage provider participation and ensure that the cost of coverage isn't shifted to those providing the care. However, HB 2556 appears to address this legitimate concern by dissolving expanded benefits if the federal match falls below 90% of the total cost.

Most importantly, HB 2556 has the potential to cover uninsured, childless adults, many of whom are employed, or seeking employment. Today, Kansas has some of the most restrictive income qualification guidelines in the country for non-pregnant, non-disabled adults under the age of 65, even with children in the home. This population can't afford health insurance, and must either rely on care provided charitably by hospitals and physicians, or obtain care from the safety net system of clinics throughout the state. While safety net clinics are an important asset for the state, they are not a substitute for comprehensive health insurance.

We believe SB 2556 to be a responsible approach to extending coverage to a large group of low-income, uninsured individuals. We respectfully request your support of the bill. Thank you.



**House Health and Human Services Committee
Proponent Written Testimony - HB 2556
Nicole Milo, System Director Government & Community Affairs
Mountain Region CommonSpirit Health**

Chairwoman Landwehr and Member of the Committee:

On behalf of the Mountain Region of CommonSpirit Health, we own and operate 20 hospitals in Colorado, Kansas and Utah as well as multiple health clinics, physician practices, urgency centers and Flight for Life. We employ over 21,000 employees and we are very committed to rural health care, which is evident through our longstanding presence in western Kansas.

Patient care is at the forefront of what we do and as a not-for-profit health care system, we take pride in the fact that we treat all patients-regardless of their ability to pay. We believe that a strong health care system is incumbent upon ensuring the community has access to affordable, high-quality health care. This access should be available to all individuals, regardless of their income level.

Anchoring ourselves in underserved communities is one way we live out our mission. While we are committed to rural Kansas, we would be remiss if we did not acknowledge the mounting financial challenges that we are experiencing. The increased inflationary pressures that all hospitals are confronted with coupled with, the fact that public payers traditionally reimburse below the cost of care, and the unprecedented amount of uncompensated care that we are absorbing is translating into a **financial trajectory that is not sustainable.**

With the mounting number of current Medicaid beneficiaries losing coverage due to the expiration of the federal Public Health Emergency (PHE), we are seeing a surge in uninsured patients which is contributing to a significant rise in our uncompensated care numbers. Currently, **25% of our payer mix is Medicaid and Self-Pay** and over the last year, we had **15,500 Medicaid encounters** and we estimate that **4,500 of those encounters will flip to self-pay** with the lapse of the PHE. We continue to see that when individuals lack health care coverage, they tend to delay care and, when they do seek care, they are more acute and have extended recoveries which translates to increases in health care costs for all. By expanding Medicaid, we can collectively reduce the number of uninsured individuals which will improve health

outcomes and strengthen and transform our health care system in the state. For us specifically, expanding Medicaid will **positively impact** our three hospitals by **\$4.4M annually**, which is a lifeline for us.

We encourage the Kansas Legislature to consider the impact expanding Medicaid will have not only the residents of Kansas who need it most, but how it will boost the long-term viability of our rural hospitals in the state.

We are happy to answer any questions the committee may have and thank you in advance for your consideration to HB2556.

To whom it may concern,

I am a Program Director at the Community Health Council of Wyandotte County. My program, the Kansas Assistance Network, assists 600 individuals annually with health insurance applications such as Medicaid, Medicare, and Marketplace. I would like to express my support for Medicaid Expansion. Expansion would allow thousands of chronically ill Kansans to access care and get back to work while decreasing the amount of uncompensated care experienced by hospitals. It could also decrease Kansas's fetal and infant mortality rate.

In my direct experience helping families apply for Medicaid benefits, the majority of uninsured adults have medical or mental health circumstances that limit their ability to work or attend school. Kansans who can work, do work. Medicaid Expansion would overwhelmingly support those who are too sick to work but are not sick enough to obtain disability status or are in the long process of obtaining disability benefits. One man I recently assisted with an application has multiple skeletal issues that restrict his ability to stand or lift objects over 10lbs, he can't drive, and suffers from dyslexia which keeps him from getting any employment that requires extensive reading or writing. If Medicaid Expansion is passed, my client would be able to get the healthcare he needs and go back to work. His family supports him because of his illness but he dreams of a day when he can get the treatment he needs, make his own money, and buy a home. This person is just one of many whom I've helped that would be positively impacted by KanCare expansion.

Disability benefits can be extremely difficult to obtain. The previously mentioned client has been denied 3 times in ten years, which is typical. The process is complex and can take years. I directly work with people without health insurance who cannot access the specialty care needed to support a disability claim. They end up using the emergency department for care and can't pay their bills, passing along higher healthcare costs to Kansans. Additionally, people without access to care and specialty care become more ill over time until they ultimately qualify for disability payments and Medicaid. Their illnesses come more advanced and expensive to treat. Providing Medicaid to people before they become fully disabled would mean the difference between Kansas paying for physical therapy, office appointments, and medications upfront instead of long-term care, emergency procedures, and expensive medical equipment.

Reducing the fetal and infant mortality rate is not only a focus for our organization, it is also a major public health priority. Despite our best efforts, the fetal infant mortality rate in Kansas continues to be higher than the national average according to the Kansas Department of Health and Environment. Expansion has been associated with improvements in preconception health and utilization of preventive care and supporting healthy development of parents and children together. It is known that mothers with cardiac issues or diabetes are more likely to experience pregnancy losses and/or complications. A study published by Dr. John L Kitzmiller, estimates a decrease in stillborn babies of about 90% among moms with diabetes with access to quality diabetic care prior to conception. Furthermore, a study published by Dr. McElvy suggests an 80% decrease in congenital deformities among diabetic mothers with treatment before pregnancy. For these reasons, providing Medicaid to women of childbearing age before they become pregnant would save countless lives of babies and reduce chronic medical conditions.

Please consider these remarks, when considering Medicaid Expansion. Our organization wants what's best for Kansas and works tirelessly to improve the lives of Kansas families whose communities are under-resourced and who often face the greatest barriers to accessing vital health services. I believe Expansion would improve the lives of thousands of Kansans and save the lives of many more. Thank you for your time.

Sincerely,
Molly Gotobed

Molly Gotobed

mgotobed@wycohealth.com | 913-371-9298 x102

Program Director, Kansas Assistance Network

Community Health Council of Wyandotte County

LETTERHEAD

To: House and Senate Committees
From: Todd Willert, CEO
Community HealthCare System
Date: March 14, 2024
Re: Proponent HB 2556/SB 355

On behalf of Community HealthCare System, I appreciate the opportunity to provide testimony in support of House Bill 2556/Senate Bill 355.

I urge members of the legislature to adopt Medicaid expansion and join the other **forty** States in our Union who have done so. Expansion supports our hospitals; supports our communities; and most importantly, supports the citizens of Kansas who cannot afford health care. Moreover, expansion will bring in millions of Federal dollars that *should be* going to Kansas, but are going to other states, including Missouri, Nebraska, Colorado and Oklahoma. At the same time a majority of Kansans have consistently supported expansion. A recent poll by the Sunflower Foundation showed that 68% of Kansans support expansion as well as 83% of small business owners! Another study by the Alliance for a Healthy Kansas estimated the direct benefit to Pottawatomie County to be 444 residents newly eligible for Medicaid; 135 new jobs created and \$3,996,000 in new annual health care spending in the County!

The last couple of years have been particularly hard on rural hospitals, and Community HealthCare System (CHCS) is no different. We still have not seen utilization levels reach the pre-pandemic levels in many services. Our supply costs have continued to increase while our labor costs have risen dramatically due to the shortage of nurses, technicians, and even entry-level personnel. Revenue through the 340B has decreased more than 50% (\$1.4M) due to actions by our nation's pharmaceutical companies. At the same time, we continue to see an increase in the number of people seeking primary care in our emergency rooms as well as a steady increase in bad debt and uncompensated care, which has risen almost 20% to \$1.3M this year. And I should add that CHCS has not increased its charges (prices) in over 4 years! Because of the way we're paid, raising prices is meaningless.

Will Medicaid expansion solve all of our financial challenges? Certainly not, but it will help in many areas. A recent study through the Kansas Hospital Association estimated the additional revenue to CHCS through expansion at \$400,000 annually, which is *after* the proposed hospital surcharge. However, most importantly, expansion will provide the opportunity for almost

150,000 hardworking Kansans to obtain health insurance when it might not otherwise be available or affordable.

Community HealthCare System (CHCS) provides care to over 20,000 people in NE Kansas. We serve a largely rural population of farmers and ranchers through our hospital, seven rural family practice clinics, and three long-term care facilities. CHCS is the third largest employer in Pottawatomie County with 450 associates.

Thank you for providing the opportunity for meaningful debate in both the House and Senate. As well, I appreciate your consideration of my comments. Please support HB 2556/SB 355.

Dominika Cornejo
Wichita KS, 67230

Dear Kansas legislators,

My name is Dominika Cornejo, and I'm a medical assistant, student, and Wichita resident. I'm a young professional who grew up in Kansas and returned to work here after attending college out of state. I am also someone who would greatly benefit from the expansion of Medicaid.

On March 17th of this year, I turned 26, and will therefore age out of my parent's insurance coverage at the end of month. I'm unable to receive employer-sponsored health insurance through my work because I am not a full-time employee, since I am also taking classes at Wichita State University.

Because of this, I am going to have to pay the full cost of the monthly health insurance premium, which will cost me \$300-plus per month out of pocket.

As a part-time student, part-time employee last year, I was only able to make about \$20,000. This puts me in the range of someone who would be eligible for Medicaid under expansion.¹ If Medicaid were expanded, and I was to benefit from that, I would be able to spend my income on a broad variety of other needs instead of insurance. For example, I want to attend school to become a Physician Assistant. The money I have to spend on health insurance would be much better spent on my education.

I love Kansas, and I want to invest my time and energy in a life here. But it's hard to include this state in my future plans when it's unwilling to accept federal dollars that could greatly improve my quality of life.

Thank you for your time, and please reach out to me with any questions.

Best,
Dominika Cornejo
dominikacornejo@gmail.com

1

<https://www.kmuw.org/news/2024-02-28/medicaid-expansion-opposition-kansas-republican-leadership-dan-hawkins#:~:text=Expanding%20Medicaid%20would%20open%20eligibility,income%20residents%20gaining%20health%20coverage>.

From: Charley Crabtree
charleytree04@gmail.com / 1-785-312-2468 / March 18, 2024

To: The Alliance for a Healthy Kansas Medicaid Expansion

To: Kansas Policymakers

Thank you for allowing me the opportunity to provide testimony in support of KanCare expansion. My name is Charley Crabtree. I am a member of the Board of Directors for the League of Women Voters of Lawrence and Douglas County. I spend many hours helping educate Kansans about public policies that help make lives better and gives them a voice in public policymaking at all levels of government.

A critically important policy is Governor Kelly's new bipartisan Medicaid Eligibility Expansion that will – according to the Docking Institute of Public Affairs at Fort Hays State University - give access for 150,000 eligible Kansans to affordable and necessary healthcare and community health services. Many rural hospitals are closing and that does not need to happen. At least 70% of Kansans strongly support expanding Medicaid so that rural healthcare providers can treat the most vulnerable Kansans.

I am 82, physically disabled and I can personally attest to the value of available healthcare for as many Kansas citizens as possible. Fortunately, I can afford excellent healthcare insurance that covers special equipment, in-home licensed nursing care, related therapy as needed, and costly medications. I can attest this type of care is expensive. By investing in our communities through expanded Medicaid Eligibility 150,000 Kansas residents living on low wages or fixed incomes will benefit from an improved quality of life. More struggling clinics, hospitals and healthcare providers trying to serve uninsured patients will thankfully not need to close.

It is vital we support Governor Kelly's Medicaid Eligibility Expansion bill through KanCare. This good old-fashioned common-sense solution will maximize return on investment. It should be a top priority and will have a significant positive impact. We are losing more than \$680 million in Federal money every year. Since the Affordable Care Act went into effect in 2010 Kansans have contributed nearly \$7 billion in federal tax dollars for Medicaid that other states have used. It makes cost-effective and practical sense to turn this around. As one of only ten states that have not adopted Medicaid expansion, we must not leave Federal Medicaid money on the table at the expense of our underserved Kansas communities in need. Expanding access to affordable and comprehensive healthcare provides Kansas families with healthier and happier lives with dignity.

This is your opportunity to show support for all citizens in need, especially those who are struggling. Other states know expanded Medicaid will lead to a healthier workforce, stronger communities, and stable families. It will:

- preserve and strengthen rural healthcare.
- adequately fund rural hospitals and clinics.
- provide benefits that will ensure Kansas continues to be a great place to live, work, and raise a family.

I respectfully urge your support for KanCare Medicaid Eligibility expansion. I applaud your efforts to find a solution to this vitally important policy issue. Please do the right thing.

Respectively, Charley Crabtree

[495 words]

March 15, 2024

This is a human right to have health care. It's a no brainer. I'm a life long tax paying Kansas resident. Get it done!!!!

Kelly Crahan

March 15, 2024

As a physician, who has spent my career in Kansas, I absolutely endorse the need for Medicaid expansion. Our communities, our neighbors, and my patients would all greatly benefit. We are only one of 10 states that has not expanded Medicaid. We need to do everything we can to support healthcare for all.

A survey by the Kansas Sunflower Foundation shows that 68% of Kansas voters including 51% of Republicans and 83% of small business owners support Medicaid expansion. We need to get this done.

Valerie Creswell MD FACP FDSA FSHEA.

736 Shawnee Avenue
Kansas City, Kansas 66105



Phone: 913-281-3388
Fax: 913-300-9428
www.cross-lines.org

March 13th, 2024

Position: Support

To: Senate Ways and Means and Public Health and Welfare Committees &
House Health and Human Services Committee
Re: Medicaid Expansion

My name is Rob Santel, Director of Programs at Cross-Lines Community Outreach in Wyandotte County. We are a non-profit organization that serves as a safety net for our community providing crucial services in the areas of hunger relief and housing stabilization. We are grateful for the opportunity to provide testimony in support of Medicaid Expansion in Kansas since we work daily with Kansans in the coverage gap.

We serve persons with severe mental illness and know firsthand that the behavioral health crisis is complex. We partner closely with our community mental health center, Wyandot Behavioral Health Network; yet still, there are many low-income persons with behavioral health needs that we serve that lack the care they would have if Medicaid were expanded. Reducing the coverage gap for this population can **enhance quality of life** and **prevent costly interventions** like psychiatric hospitalizations and criminal justice involvement.

The single most impactful thing the Kansas Legislature could do to end homelessness is Expand Medicaid. Medicaid Expansion can increase access to additional housing support services and help participants secure employment and income. These housing-related services will **improve health outcomes** and **decrease costs of care** for this population.

We serve many persons with a substance use disorder. For those without insurance, navigating treatment options is nearly impossible. We have seen the ripple effects of inaccessible substance use disorder treatment: placement of children into foster care, job loss, and preventable deaths. Medicaid Expansion would dramatically decrease the treatment gap for low-income Kansans with a substance use disorder. **Recovery is possible. Medicaid Expansion would make Recovery accessible.**

Cross-Lines is committed to a healthier community and a healthier Kansas.

Respectfully Submitted,

Rob Santel, LMSW
rob@cross-lines.org

THRIVE ALLEN COUNTY

Legislation Testimony
Rhonda Culp, Director of Care Coordination
Thrive Allen County
Public Hearing on KanCare Expansion
March 13, 2024

Reference: Written Testimony from Thrive Allen County Supporting Medicaid Expansion

Thrive Allen County has provided care coordination services for our community for the last 16 years. Much of our work involves assisting clients of all ages to utilize the KanCare program. While this program serves as a lifeline to some Kansans in our community and for those unable to access healthcare from their employers or the federal marketplace, there are still nearly 264,000 Kansans without insurance.

In 2021, Kansas's uninsured rate was more than a quarter of a million people uninsured in our state. This data shows that 38,490 were children and 227,624 were adults. This brings us to more than our federal national average of insured people. We are still facing many disparities in access to healthcare for those low-income families who don't make enough money to qualify for the tax credits within the federal marketplace and make too much to qualify for KanCare with its current income limits.

Expanding KanCare this year should be among the top priorities for legislation that serves the members of the communities they represent. Year after year, we leave thousands without insurance and no options to obtain it. We know that expansion is critical to our communities' ability to have access to services, as they need to stay healthy and thrive. We know that expansion will benefit our workforce, and employers will have healthier workers who will, in return, contribute to our economy. It will give those employees a sense of belonging by allowing them to contribute to the communities in which they reside. We know if we don't expand KanCare, it will continue to cost Kansas financially and cost Kansas the lives of the people of our state.

Thrive Allen County and the communities we serve fully support the expansion of KanCare here in Kansas. Expanding KanCare is a cost-effective way to increase access to care for our state by closing the coverage gap, reducing uncompensated care, and being the reason why Kansas will not lose any more hospitals due to the hesitation of not expanding. This will also bring desperately needed federal dollars into our Kansas economy, strengthening our healthcare system and economy.

Sincerely,

Rhonda Culp

Director of Care Coordination

March 17, 2024

This is Dennis Daugherty, Fort Scott, Kansas and I would like to see Medicaid expansion.

This is Marianna Daugherty, Fort Scott, Ks and I would like for the Medicare expansion to go through.

Goodwill is the greatest force in the universe!



**Unified Government of
Wyandotte County and Kansas City, Kansas**

701 North Seventh Street
Kansas City, Kansas 66101
(913) 573-5311 • info@wycokck.org

WRITTEN TESTIMONY

House Bill 2556

Paul T. Davis

On behalf of the Unified Government of Wyandotte County/Kansas City, Kansas

House Committee on Health and Human Services

March 20, 2024

Good Afternoon Chairwoman Landwehr and Members of the Committee:

My name is Paul Davis and I am the lobbyist for the Unified Government of Wyandotte County/Kansas City, Kansas. The UG is submitting testimony today as a proponent of House Bill 2556. In December the UG Board of Commissioners unanimously adopted a resolution in support of Medicaid Expansion. We appreciate your committee having a hearing on this important issue and giving it your consideration.

As many of you are aware, expanding Medicaid will allow over 150,000 Kansans to access health care coverage that they are not eligible to access right now. Many of these citizens live in Wyandotte County. We are well aware of the gaps in coverage that exist in our health care system. Many of the people that will be helped by this legislation have disabilities, mental health challenges, and are economically disadvantaged. If we are going to improve health care outcomes in our communities, we must be able to extend coverage to these individuals.

Additionally, Medicaid Expansion can greatly benefit our hospitals. Wyandotte County is home to the University of Kansas Health System and Providence Medical Center. Our hospitals already provide a significant amount of uncompensated care and Medicaid Expansion can significantly reduce this.

Thank you for the opportunity to provide this testimony.

Trent W. Davis, M.D.
2145 Hillside Drive
Salina, KS 67401
(785) 493-1038
Twdavis22@gmail.com

Re: Kansas Medicaid Expansion
Position: Pro (In favor of)

The overly restrictive access to Kansas Medicaid impacts my daily activities as a physician, Salina City Commissioner (and former Mayor), and as the proverbial “tax paying citizen.”

Physicians have a moral and legal obligation to provide health care to those in need. This often occurs in the absence of payment for services rendered. On a larger scale, the delivery of unreimbursed care leads to a negative bottom line and doors closing. The legislature is aware of reports of rural medical facilities closing because of lack of Medicaid coverage. What perhaps is lost in the economic reports is that these patients are quite often not the deadbeat scourge of society that media often portrays as the typical Medicaid recipient. These are people with families, working two to three jobs with no benefits and not enough income to pay premiums for their own healthcare policy. Their employers don't have the resources to provide health care insurance as an employee benefit. They go to work sick because they don't get paid (or keep their job) with too many sick days. Their kids go to school sick, or miss school with academic penalties, due to lack of medical attention. The physician is unable to complete the investigation because of lack of ability to pay for testing, and the patient is unable to heal quickly because of lack of medication and other therapies. Thus physicians, unable to turn them away are on the short end of an “unfunded mandate.”

Salina is a city currently riding the crest of economic expansion. A limiting negative influence on attracting new employees is the lack of qualified childcare providers because of low wages and/or no benefits. Productive employees are staying home to care for their children because of a deficiency in available childcare slots. There is an untapped cadre of professionals unable to work because of insufficient numbers of childcare providers.

Expansion of Medicaid to those otherwise qualified childcare providers would be a dramatic and courageous economic development tool. As a City Commissioner I have satisfaction in encouraging new businesses and expansion of existing ones, but also the worry that new candidates for these jobs will shun the Salina offer because of lack of childcare. Medical coverage is the most important employee benefit, worth several dollars of equivalent hourly wage, making the job more easily filled and retained. Medicaid expansion can serve as a critical part of our economic expansion.

As a Federal Tax paying citizen I am sending dollars to Washington, D.C. to have them distributed to the states surrounding Kansas to fund their expanded Medicaid coverages. In fact, therefore, Kansas is supporting expanded Medicaid coverage, ironically just not within it's own borders. Kansas dollars should travel back to Kansas where the several times fold return on investment will fuel additional *Kansas* economic output. In short, if Kansas is going to support equitable and expanded Medicaid, at the very least it should our own.

Trent Davis, M.D.

March 15, 2024

All Kansans deserve healthcare, including the disabled, the poor, and the working poor.

As a physician who provided healthcare to the elderly and disabled I have been able to see the problems people have when they don't have access to healthcare. These people suffer more from physical problems that could have been delayed or prevented if they would have had healthcare available to them. Their quality of life is not as good, they don't live as long, and they suffer more.

Please expand Medicaid.

Jon Dedon M.D.

March 14, 2024

Simply put, I am 64 and do not have health insurance because I do not have any children and I am not "old" enough for Medicare. I have retired early for reasons I do not wish to share. I take medication for 3 disorders and 3 diseases. I do not qualify for disability as to look at me you cannot see that there is anything wrong. No wheelchair, no oxygen, etc. I know my limits and if I choose to remain healthy in both mind and body, I cannot work. Luckily I don't pay very much for medication through Blink Health. I take 7 prescriptions and pay less than \$200 a month. However, retiring early means I do not benefit as if I retired at 75. So \$200 is a large chunk out of my meager SSI monthly check. As of right now, I am behind in my routine colonoscopy and was referred to a rheumatologist but cannot afford it.

Please hear us as we are no less human than anyone else who "qualifies" for or can afford health insurance.

Denise Delgado Torres

March 15, 2024

Dear Chairman and Committee Members:

I write to urge you to support Medicaid Expansion in Kansas.

The additional revenue it would bring - at no cost to Kansas - is vitally important to the continued existence of many rural community hospitals and, by extension, the economic health of Kansas:

- Kansas has the second largest number of rural hospitals in the country, with 79% of its rural hospitals operating in the red ([Chartis Center for Rural Health](#)).
- Rural hospitals are important economic drivers that add \$2 for every \$1 spent in terms of direct and indirect Kansas impacts, and each hospital job supports two additional jobs in the surrounding community ([American Hospital Association](#)).
- This effect is particularly important to those 78 Kansas counties that have lost population, according to the most recent U.S. Census figures. In those counties, the loss of their community hospitals would eliminate hard-to-replace good-quality, well-paying jobs that can attract and retain residents.

As a Kansan with friends and relatives served by community hospitals in Allen, Anderson and Lane counties, I greatly appreciate the economic - and health - benefits of strong rural hospitals. Please show your appreciation as well and support Medicaid Expansion.

Michael DeMent
Leawood, Kansas

CURTIS W. AND SPARLA J. DICK

613 Quail Nest Road
Winfield, KS 67156

(620) 222-4196 (cell) Curtis
(620) 222-1265 (cell) Sparla

Email Curtis: cdick3@cox.net

Email Sparla: sparlad@hotmail.com

February 23, 2024

Subject: Kansas Medicaid Expansion HB 2556 and SB 355

We are pleased that the subject that affects many Kansans will finally receive consideration via hearings. We know of many in our community that are currently working but fall within the coverage gap and low enrollment wage guidelines. While we are not in the healthcare profession, we have personally visited with Brian Barta, the CEO of William Newton Memorial Hospital, and several of the Trustees. Without exception, they have all stated that Medicaid expansion would benefit our local hospital and other rural hospitals. We offer the following as well:

1. The Kansas Health Institute, a nonpartisan research organization, unveiled its analysis of Governor Kelly's proposal to expand Medicaid and predicted 152,000 Kansans would enroll in the first year with NO additional cost to the state government. The \$509M federal incentive would help offset state cost for the first eight years. Governor Kelly's plan is a common-sense, middle-of-the road approach to provide health insurance to working Kansans.
2. As many as 80% of Kansans, regardless of party, and 83% of small business owners support Medicaid expansion and Kansas is only one of ten states in the USA that have not expanded Medicaid. Various surveys have varied percentages in favor, but, in each one, those who favor expansion is overwhelming.
3. Medicaid expansion would create an estimated 23,000 jobs and help end our health care worker shortage.
4. We have read written testimony that has been submitted from Kansas groups that have much more knowledge than we do, all in favor of Medicaid expansion. Among those are from Alliance for a Healthy Kansas, 3 Rivers Inc., AARP, Ascension Via Christi, Community Care Network of Kansas, Kansas Action for Children, Kansas Advocates for Better Care, Kansas City Medical Society Foundation, Kansas EMS Association, Kansas Alliance on Mental Illness, United Methodist Health Ministry Fund, and more.

We sincerely hope that the Kansas legislature will finally respond to their constituents and healthcare experts and give Medicaid expansion the attention it deserves. This should not be a partisan issue.

Sincerely yours,

Curtis and Sparla Dick

Legislative Testimony

Chandra EA Dickson

1568 N. Charles

Wichita, KS 67203

Dickson.chandra@gmail.com

316-751-8740

Monday January 29, 2024

Dear Kansas Policy Makers,

My name is Chandra EA Dickson. I am an educator and writer from Wichita. Thank you for the opportunity to provide testimony in support of Medicaid Expansion.

In late 2015, my mother, Jo Anne Dickson, seemed to be having a harder time breathing than usual, and at first this was not alarming, she struggled with asthma since childhood and battled many bouts of pneumonia. What made my mother's life challenging was she did not have access to health insurance through her employer and she also did not earn enough to qualify to buy insurance through the Affordable Care Act. She was one of the 150,000 Kansans who do not qualify for Medicaid and make too little money to buy private insurance from the ACA.

In early 2016, my mother made an appointment to see a doctor at a local low-income clinic. After looking at her x-rays, her doctor was concerned and ordered a CT scan, but since my mother did not have health insurance, she was placed on a waiting list for a reduced cost CT scan. It took two months for her to move up that list and during that time, I watched my strong working-class independent mother become sicker and sicker. She lost 30 pounds and her

breathing worsened. Once she finally had the CT scan, she waited 3 more weeks for the results and during that time she stopped driving and I had to start helping her with basic things.

One night, she couldn't breathe so I rushed her to the ER. Her oxygen levels were so low that she was immediately put on oxygen. It was there that I begged a young intern to look at her CT scan, after she did, she called in an oncologist. We were later told that my mother had non-Hodgkins's lymphoma Mantle Type B. A very rare, very aggressive form of cancer, but also one with a high survival rate. According to the MD Anderson Center, "Non-Hodgkin lymphoma is the seventh most common cancer in men and women in the nation. According to the National Cancer Institute, "...more than 77,000 new cases of non-Hodgkin lymphoma are diagnosed each year in the United States. With early diagnosis and advanced treatment methods, non-Hodgkin lymphoma has a high survival rate. If the cancer is confined to a single region, it has about an 83% survival rate. Even the most advanced stage of non-Hodgkin lymphoma has a survival rate greater than 60%."

A few days after my mother was released from the hospital, she saw her oncologist who wanted my mother to start treatment immediately, but when he found out she didn't have health insurance, he told us we could pay \$500 a week to start her treatment while she waited for her disability to be approved, but that was out of the question, my family could not afford \$2000 a month. We began the long process of applying for financial assistance from the drug companies hoping they were give her the

help she needed, and during that time we just waited and watched her lose more weight and become so weak that she no longer could take her little dog on his nightly walks around the block. She couldn't work anymore.

8 weeks after her diagnosis, because a kind friend loaned me \$500, my mother was able to start her first chemotherapy treatment. While receiving her first round of chemotherapy, her kidneys started to fail. She was rushed to the hospital and admitted to the ICU. She died 8 days later. From cancer, that is considered very treatable and has a high survival rate. A cancer that would have been diagnosis and treated earlier if she could have accessed affordable healthcare. She had so much hope when the ACA passed that Kansas would expand Medicaid. She was a very proud woman who worked her entire life and raised me on her own with no public assistance. But she also understood the importance of having access to health insurance and was disappointed when the leaders of our state did not expand Medicaid when the ACA was passed.

After she died, I received the last hospital bills for the 8 days she was in care, the final costs--\$750,000. A year after she died, a lawyer for the hospital called me and to tell he would be applying for disability posthumously to cover the unpaid medical debt, that she would be approved since she had passed away and that the state would then be responsible for the debt. The state that didn't expand Medicaid would now also be the state paying for my mother's medical treatments.

I often wonder how different mine and my daughter's life could be today if Medicaid had been expanded and my mother received routine healthcare that would

have diagnosed her cancer sooner. On April 24, 2016, my mother, Jo Anne, passed away from a cancer that is considered curable. She was 62.

Today, I write this so you not only know my mother's story, but also for my neighbor Valerie who has a chronic heart condition and can't afford her medication so she skips days, and my student, Amanda, who at 29 is thousands of dollars in medical debt from a broken leg, and the other 150,000 Kansas who are unable to afford their medications, who skip basic care that could save their lives, who are one medical emergency away from finding themselves in massive amounts of medical debt. According to a study done by KMHS in 2018, 44% of low-income adults in Kansas were carrying medical debt. All these problems could easily be solved by expanding Medicaid in Kansas. It's sadly too late for my family, but it is not too late to do the right thing for the other Kansas families so we can all live healthy, happy productive lives.

Thank you,

Chandra EA Dickson

March 17, 2024

I'd like to share how expanded Medicaid transformed my life. I was able to receive a necessary but minor surgery. I've had access to mental health resources. I've had access to affordable prescriptions, most recently one that helped me detox from heavy alcohol use and introduced me to sobriety. From COVID to everyday health needs, expanded Medicaid is the way. I received my care in MO. The impact to community is unmeasurable. Vote to expand access. Vote for the people.

Markus Dixon

March 15, 2024

Dear Governor Kelley, I am writing in regards to my wife who lost her Medicaid. She was diagnosed with MS in the late stages of the disease. She had medicaid up until last year and we were hit with a spend down of over \$17,000 dollars before she could get help. We are both disabled and I only draw around \$29,000 a year. I am on Medicare and Medicaid but she could not get on Medicare till she is 65. She is 62. So they gave her spousal benefits of \$650 a month which will not cover any insurance. She has trimmers daily. Is unable to walk, only stand up and walk maybe 3 steps. She has to use a catheter daily, which she has to insert with curled hands. Which is almost impossible now. She had to cancel home care because we can't afford it. She has had to cancel appointments at neurologists that have taken over 6 months for appointments because they want paid. She has to pay for meds and there are a lot. Catheters appointments and so on. We paid off the spend down in December, and had one month of insurance and it was cancelled and now have another spend down of \$17,000. The Republicans have to get on board with you. They are killing people in Kansas. I bet they would'nt do this to their family's. It's horrible what she goes thru daily. Slowly watching someone lose all hope in life and our state. All because a few politicians who are Trumpsters want to put the money to make the rich, richer. I invite them to come see how the other half lives because of their greed. Come see us and look my wife in the eyes and tell her that she doesn't deserve to have insurance. Especially our Attorney General. He seems to be one of the main voices against it. He is out of touch with real people. Governor Kelley we voted for you and our proud of the job you are doing. We also realize this would have been done along time ago had certain people were not so greedy and on a power kick . Thank you.

Frank Dobrinski

KanCare Expansion
Proponent Testimony
Marcillene Dover
March 12, 2024

When the Affordable Care Act passed in 2012, I was graduating high school and starting my first year of college at Wichita State University. I had grown up poor, living a homeless shelter my first year at Wichita North High School, but my mom had gotten back up from being a divorced housewife with no job experience to having her first job in 15 years, and she was able to move us into an apartment and eventually a rental house.

For all of that time, my sisters and I were covered by KanCare, Kansas' Medicaid program. My mom did not qualify. I had aged out of the program in the spring of my senior year in high school when I turned 18. I didn't worry about it; I was healthy, young, and starting my first steps toward becoming a teacher, the first in my family to graduate from college.

During my first semester, I was working at a job at the mall when I noticed weird tingling in my legs, some numbness. My mom took me to a local clinic, since I was uninsured, and we saw a doctor. She did an exam and said she would like to do an MRI, but she knew we couldn't afford one – it would've been \$1,500 out of pocket. That's more than my mom made in a month, and all of her savings. Instead the doctor diagnosed me, without the MRI, with a pinched nerve, and so my mom paid for six weeks of physical therapy out of pocket.

After physical therapy was over, I didn't really seem to have any reduction of symptoms, the numbness and tingling persisted. With the Affordable Care Act being passed, I hoped that soon healthcare would be affordable for me. It was really scary having no idea what was going on with my body, and not having the ability to see a doctor and getting that MRI was frustrating.

I started looking up my symptoms on *WebMD* and other sites to see if I could find some sort of answer. After a while, I started thinking I might have Multiple Sclerosis. A lot of the symptoms fit. I started randomly having trouble walking, at one point asking a random stranger on campus at WSU to help me get to my class. He asked me what was wrong, and I didn't really have a good answer.

I heard about the Multiple Sclerosis Association of America's grant for a diagnostic MRI for people who are struggling to get a diagnosis. The only way to be diagnosed with MS is with an MRI of the brain or spinal cord showing lesions, thick, scar-like tissue where the immune system has attacked the myelin sheath of the nerves.

To get the grant, I had to save up \$300 to see a neurologist and get his recommendation. They couldn't get me in for about 3 months, which was honestly fine, I was going to need to save up. At this time, I was working a minimum wage job at the mall and working as a tutor for North High's AVID program. I had a third job, wiping down gym equipment at WSU's Heskett Center, around that time, however, when classes started fall of 2014, my junior year, I had to give away my shifts. Classes on top of three jobs and mysterious undiagnosed medical symptoms would've been too much.

Once I was able to see the neurologist, he listened to my symptoms with a serious face. He did a physical exam, and then he signed the grant application. They approved it, and I got the MRI. Results came back positive; I had MS.

I was so worried about how I would pay for this lifelong disease, one that only progresses, and which has no cure. I asked my doctor what I should do. Luckily for me, Sedgwick County at the time had a program called Project Access that connected low-income people with donated healthcare. I could see certain doctors, and I could get MRIs at places that donated the care.

The application for this program was rigorous. I had to show proof of income and tax records going back years, and I had to prove I had a chronic illness; all things that less equipped, less educated, less resourceful people might not be able to do. These barriers aside, I was able to qualify for the donated care. However, at one point while being covered by the program, its funding was on the chopping block by the county commission when they were making budget cuts. I spoke at their meeting, and they decided to keep Project Access.

I also spoke at a KanCare Expansion hearing when first the option to expand was given to states and Kansas had our first expansion proposal, back in 2018. That was after I had graduated WSU in 2016, and had finally gotten a job as a teacher at North High, my alma mater, and I finally had (somewhat) adequate access to care.

If you didn't keep up with the math, I was misdiagnosed from fall of 2012 to fall of 2014, a little over two years. The research shows that MS disease progression can be slowed with treatment. However, disability accrued cannot be reversed. For two years my central nervous system accumulated dozens of lesions. Even once treated, finding just the right treatment that works for any individual with MS is basically trial and error. I have failed on two treatments so far, which means they were not slowing my MS at a high enough rate so I switched treatments.

My last semester of college, my mom finally went to a doctor after putting it off for years, worried about money to pay for visit and what expenditures that might bring about. She was diagnosed with stage four colon cancer. Stage four. If she had gone in and gotten diagnosed sooner, she could've caught the cancer before it spread and wouldn't take to the radiation therapy.

All this to say, I might have gotten to the point of needing a wheelchair in my third year of teaching if KanCare had been expanded right away when we had the chance. Plenty of people with MS can walk well into their 50s and even 60s. I made it to 26. My mom might not have had to move in with me the my first year of teaching, when she began hospice care.

We need to stop waiting. Some of us cannot afford to wait. It has been 6 years since I first testified for Expansion. Around 150,000 Kansans would be covered under expanded KanCare. That's families; sons, daughters, sisters, brothers, aunts, uncles, parents, and grandparents. Its not just people who are looking for a handout. It is people who are looking for safety and access to healthcare when they are at their most vulnerable.

Please consider voting to expand KanCare. Kansas families need you to help them when they need it most.

Thank you for your time,

Marcillene Dover
Wichita, KS 67212
mdover@usd259.net



El Dorado Office: 206 N. Griffith, Suite B • El Dorado, Kansas 67042 • (316) 321-3400 or (316) 320-0365 • Fax (316) 321-1338

Testimony of Jamie Downs to the
House Committee on Health and Human Services
And
Senate Committee on Ways & Means
Proponent for HB2556 and Medicaid Expansion
March 20, 2024

Dear Chairperson and Members of the Committee,

Thank you for the opportunity to provide this written proponent testimony on this bill and Medicaid expansion.

This bill enacts the Cutting Healthcare Costs for All Kansans Act, which would expand medical assistance eligibility for an estimated 150,000i uninsured Kansans. This bill has the potential to increase access to screening and preventative services, chronic disease care, mental health and substance abuse treatment, and prescription medications. Services that improve the quality of life of those who have access to them, allowing them to be more productive at home, work and in their community.

As a health department, we work to protect the health of the population at large and to provide clinical services that are part of the essential healthcare delivery network. We see citizens in our community who do not have insurance, or have insurance with cost prohibitive coinsurance and co-payments, and delayed accessing healthcare services to avoid the expense, often with negative consequences on their health and productivity.

In a survey of Kansans conducted last fallii, almost seventy percent (69.6%) of respondents supported expanding Medicaid, while only 9.3% did not. In another surveyiii, 68% of registered voters, 51% of Republican primary voters and 83% of small business owners favored expanding Medicaid in Kansas.

We ask you to support this bill by voting it favorably from this Committee, and recommending it be passed by the House.

Respectfully,

Jamie Downs
Administrator
Butler County Health Department

Jamie Downs, Administrator



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ⁱ March 4, 2024 Fiscal Note for HB2556 [fisc_note_hb2556_00_0000.pdf \(kslegislature.org\)](https://kslegislature.org/fisc_note_hb2556_00_0000.pdf)

ⁱⁱ The Docking Institute of Public Affairs, Fort Hays State University - Kansas Speaks Fall 2023 Statewide Public Opinion Survey [TITLE \(fhsu.edu\)](https://fhsu.edu)

ⁱⁱⁱ [Statewide poll on Medicaid expansion - Sunflower Foundation](#)

Jamie Downs, Administrator

Mission Statement: To protect the public's health and environment, prevent disease and promote wellness



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March 20, 2024

House Committee on Health and Human Services
Testimony of Glenda DuBoise, AARP Kansas
Proponent Testimony (Oral in-person testimony requested)
House Bill 2556

Good afternoon, Chair Landwehr and members of the Committee. My name is Glenda DuBoise, and I am the State Director for AARP Kansas. Thank you for holding this hearing and allowing us to provide our testimony in support of House Bill 2556.

AARP has more than 278,000 members in Kansas. We are a non-profit, non-partisan organization that works across Kansas to strengthen communities and advocate for issues that matter most to seniors and their families, such as healthcare, retirement savings, and protection from abuse or financial exploitation. In 2022, 35 percent of Kansas voters were age 65+ and another 28 percent were age 50-64.

We support this bill because Medicaid expansion will give at least 150,000 Kansans access to better health care at little cost to the state. AARP estimates that 22,000 of those newly-eligible Kansans will be 50- to 64-year-olds who are currently uninsured. These are men and women who are working hard in jobs without affordable health benefits or have had to leave the workforce due to serious health conditions. HB 2556 will provide health care coverage for hard-working people who have paid taxes all their lives but are now struggling to make ends meet.

The benefits of HB 2556 also go well beyond the 50- to 64-year-old population. By accepting federal funds to expand Medicaid in Kansas, the legislature would give people without insurance access to preventative care that can save lives and reduce the need for expensive emergency room care. Importantly, it would reduce the cost of indigent care that is passed on to the rest of us in the form of higher health care prices and higher local taxes to support hospitals, and it would help the hospitals that serve Kansas residents keep their doors open without losing the doctors and nurses we depend on.

We urge you to vote in favor of HB 2556 so that Kansas can join the 40 other states that have accepted federal dollars for the benefit of their residents.

Respectfully,



Glenda DuBoise
State Director, AARP Kansas

March 15, 2024

Dear Chairperson and committee members,

Thank you for the opportunity to provide testimony in support of Medicaid Expansion.

These are some of the reasons I feel it is important for the state of Kansas to join the large majority of states that have already expanded Medicare.

1. The expansion is budget neutral.
2. It provides help to people who are working to support their families, but at income levels too low to cover medical expenses.
3. A developed, wealthy nation such as ours needs to ensure all its people have access to the medical care they need. Medicaid Expansion would also help address the under-service of mental health needs, which have a ripple effect through families and communities.

Thank you for your time and the work you do. I ask you to PLEASE SUPPORT Medicaid Expansion to benefit the state of Kansas.

Susan Edwards
Overland Park

Ladies and Gentlemen of the Kansas Senate and Legislature:

As a small business owner of a farm and seed operation in western Kansas, we see Medicaid Expansion as part of the puzzle for holding our small community together. Not only that, but expanded Medicaid is one of the keys to a continuation of basic health care here in rural Kansas—and to having a continued presence of a local hospital. Already a number of rural hospitals have closed while waiting for Medicaid Expansion. That lifeline has been severed. And as they say, for these communities, it is impossible to un-ring the bell.

In our business we pay health care benefits for our employees, but these loyal folks have family and friends who may not have that option. They may work part time jobs or have jobs that just don't carry health coverage. In addition, if we can stabilize our local health care costs with Medicaid Expansion, that will go a long way towards ensuring the survival of our community. In visiting with our local hospital official, the needs of care for those with less resources have grown—and that includes the needs of children in our school. And if the children are in need, most likely so are the parents or parent.

Key points from our perspective as a farmer and small business owner:

- * Medicaid Expansion provides resources to our people....the family, friends and neighbors who need it most. This support then frees up money and budget which can then be directed towards supporting our school or county roads, for instance.
- * Our hospital is one of the smallest in the state, yet it is essential because other basic care is over 25 miles away in any direction. That health care and hospital support is needed to maintain or even grow our local community. Today I talked with a woman in a nearby city who chooses to drive 50 miles to our community for care because of our great reputation for getting help to the patient quickly and efficiently. We need help in maintaining that level of care and commitment. Further, it's an essential link in the basic survival of our system.
- * And finally, as a local and state taxpayer, if this can be accomplished without an increase in taxes, the choice is clear—we need to expand Medicaid here in Kansas!

Thank you,

Louise Ehmke

34 Star Farms/Ehmke Seed

74 W Rd 130 Healy, KS 67850 Lane County

From Dr. Gretchen Eick

1536 N Park Place

Wichita, KS 67203

3-17-24

Women for Kansas State Executive Committee has been studying Medicaid expansion throughout the United States since 2016 and has found that there is widespread support in our state for Medicaid Expansion. Between 70-80% of Kansans support Medicaid Expansion and 150,000 Kansans would benefit from Medicaid Expansion.

An annual amount of \$682.4 million in federal funding would enter our state once the legislature votes to join the overwhelming number of states that understand that this federal program helps not only our neediest residents and the working poor but covers 90% of the extra cost of Medicaid services in exchange for expanding eligibility to 138% of the federal poverty rate. This is a no-brainer!

And this expansion would bring money into our state to help our struggling hospitals and other healthcare facilities. We know that 59 out of 102 Hospitals/Clinics in Kansas are at risk of closing, which is more than in any other state. Indeed, "Twenty-eight are at immediate risk of failures, and 84 of the state's 102 rural hospitals recorded financial losses on patient services in the most recent data available, according to the Center for Healthcare Quality and Payment Reform." (Kansas Reflector) This should cause all residents to support this simple way to get money into our state's healthcare providers.

All our neighboring states have passed Medicaid expansion, and to date 40 states plus Washington, D.C. have expanded, with more to follow. Even Mississippi, Alabama, and Georgia have joined Medicaid expansion in 2024! If we seriously think we can entice businesses to come to Kansas we must show ourselves to be at least as progressive as these state governments.

As Kansas taxpayers we have paid over \$7 billion in our federal taxes for Medicaid expansion. This money has gone to other states with none of this tax money coming back to Kansas because of the shortsightedness of the Republican majority in our legislature. Medicaid Expansion will help our local economy and result in no loss to our state.

We know that Medicaid expansion would benefit Kansas by:

1. Reducing health care costs for everyone and protecting Kansans from medical debt;
2. Supporting a healthier workforce and keeping Kansas economically competitive;
3. Preserving and strengthening rural health care systems and the communities they serve; and
4. Ensuring uniform access to affordable health care for all Kansans, regardless of their race, how much money they make, or what their ZIP code is. (Source: the Alliance for a Healthy Kansas)

The League of Women Voters Kansas stated it well in their position statement n this: “Medicaid expansion under the Affordable Care Act provides an important step to address gaps in coverage for the medically indigent – people who lack resources to pay for medically necessary health care. LWV of Kansas supports Medicaid Expansion in Kansas to cover individuals up to 138% of the Federal Poverty Level. “

I urge you to support Medicaid expansion NOW! It is embarrassing and cruel to continue allowing head-in-the-sand ignorance to dictate our health care policy in Kansas. Testimony to the Kansas Legislature for Medicaid Expansion



SU CONEXIÓN A LA COMUNIDAD

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Greater Kansas City Chamber of
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Jonathan Westbrook
Kansas City, Kansas Police
Department

Richard A. Ruiz
Administrative and Services Building
650 Minnesota Avenue
Kansas City, KS 66101

Kansas Policy Makers:

As a trusted community organization, we at El Centro continue to see the negative impacts that thousands in Kansas face due to a lack of Medicaid Expansion in our state. While we focus on removing barriers to healthcare through our Health Navigation and Promotoras de Salud programs, the lack of health coverage is one barrier that we cannot remove. However, you can.

We continue to see hard working people in our community that fall in the Medicaid gap, people like Stephanie. Stephanie came in for assistance to apply for a healthcare plan in the Marketplace. She was working part-time as a nursing assistant, helping review the health of people in their homes and providing care to many while attending school to complete her certification. Stephanie is in her twenties and while she is healthy, she was seeking insurance to be able to get her annual physical and follow up on some medical concerns she was having. While we wanted to help Stephanie find a good plan, it turned out that she did not qualify for any tax credits due to her income being too low. As a young adult with no children in the home or a disability, she did not qualify for Medicaid either. Stephanie was devastated and cried, expressing her frustration with our healthcare system that is failing her.

It is a shame that even those who play a vital role within our healthcare industry here in Kansas cannot access healthcare services for themselves. Stephanie, like the thousands of working individuals without health insurance who make our economy in Kansas, need YOUR support! We cannot afford to see the health of our community continue to suffer, while these important decisions about healthcare access continue to remain stagnant year after year.

We urge you to take action this year and make the right decision to help the many individuals and families in Kansas that make our state one of the best.

Justin Gust, BSW
Vice President of Community Engagement
El Centro, Inc.



March 16, 2024

Mr. Chairman and Members of the Committee:

Permit me to offer testimony in support of Medicaid Expansion in Kansas.

I am a retired healthcare attorney. During my active 37 year career, I represented hospitals and physicians throughout the state in their corporate and regulatory matters. The burden of the indigent care responsibility for hospitals and providers was always an urgent issue for them. Thankfully, in our society, care is rendered regardless of the patients' ability to pay. But the cost of unpaid care must be absorbed by the care provider or hospital or spread among those who do have insurance coverage.

This indigent care burden is particularly acute among the smaller critical access hospitals in our state. Many of them are at risk of closure due to the burden of uncompensated care. Loss of a hospital in any one of our rural communities is tragic. I've always argued that the community hospital was among the pillars of "community" along with the business community, local government, the school system, and the faith community. Loss of any one of those pillars begins the slow unraveling of the community.

Medicaid Expansion would provide health insurance coverage for those valuable citizens who now find themselves in the "gap" of universal insurance coverage envisioned by the Affordable Care Act; unable to access coverage from an employer and unable to buy it on the insurance exchanges created by the ACA. Expansion can now be accomplished with virtually no additional cost to the state.

Studies by the Kansas Health Foundation indicate that over the next 10 years with Expansion's passage, the state could access approximately \$13.7 Billion in resources to support hospitals and other providers with a state investment of merely \$171 Million; a great return on investment if ever there was one.

I urge passage of Medicaid Expansion now.

Respectfully submitted,

Jeffrey O. Ellis
183 Hillcrest West
Lake Quivira, KS 66217

Testimony in Support of Kansas Medicaid Expansion (HB 2556 and SB 355)

Honorable Members of the Committee,

I write to you today to offer my support for the expansion of Medicaid in Kansas through HB 2556 and SB 355. This vital legislation represents a significant step forward in ensuring access to affordable healthcare for all Kansans, while simultaneously alleviating financial burdens on our taxpayers and strengthening our healthcare infrastructure, particularly in rural areas.

It is crucial to emphasize that this expansion comes at no cost to Kansas taxpayers. Adopting a revenue-neutral approach allows us to tap into the state's surplus, directing funds towards essential areas like tax reductions, public education enhancements, and infrastructure improvements. This pragmatic strategy guarantees the efficient allocation of resources, ultimately benefiting our entire community.

Medicaid expansion represents a bipartisan approach that incorporates necessary compromises, including a work requirement that not only bolsters our workforce but also removes administrative barriers to healthcare access.

Medicaid expansion would provide a much-needed impact on rural healthcare. With the closure of eight hospitals since 2014, our rural communities are in desperate need of support. Expanding Medicaid not only safeguards these vital healthcare facilities but also creates jobs and stimulates economic growth in these underserved areas.

Additionally, expanding Medicaid is not just a moral imperative; it is an economic necessity. By providing coverage to more Kansans, we can alleviate the burden on our healthcare system, reduce costs for families, businesses, and even correctional facilities. Embracing expansion would inject much-needed federal funding into our state, creating thousands of jobs and addressing our healthcare worker shortage.

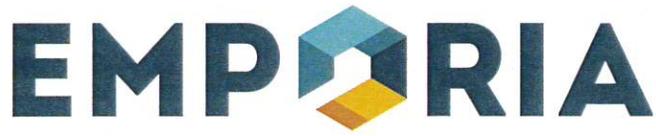
Medicaid expansion is not a partisan issue but a moral imperative supported by nearly 80% of Kansans. It is time for us to set aside political differences and prioritize the health and well-being of our constituents. I urge you to support HB 2556 and SB 355, ensuring that all Kansans have access to the healthcare they deserve.

Thank you for your time and consideration.

Sincerely,

A handwritten signature in black ink that reads "Sarah E. Elsen". The signature is written in a cursive, flowing style.

Sarah E. Elsen



Area Chamber & Visit Emporia

Legislative Testimony
Jeanine McKenna, President/CEO
Emporia Area Chamber of Commerce
Support for Medicaid Expansion
February 27, 2024

RE: Emporia Area Chamber of Commerce Support for Medicaid Expansion

The mission of the Emporia Area Chamber of Commerce is to be proactive in creating an environment for business and community success. Each year we work with businesses and organizations from across our area and develop a joint legislative statement. Each year, we put a statement in our document about supporting the expansion of Medicaid and the importance to our community. Our joint legislative statement represents government, education, health care, and the business community. We constantly hear at our legislative dialogues with our elected officials that Medicaid expansion is important to their constituents.

We believe that Medicaid expansion will help grow our economy. Kansas has lost nearly \$7 billion in additional federal funding while our federal taxpayers support jobs and healthcare in 40 other states. Workforce development is one of the major issues facing our community and we believe Medicaid expansion would help create jobs and help end our health care worker shortage. Finally, Kansas business owners could save up to \$80 million per year in health care costs if Medicaid were expanded.

In addition to the economic benefits, we believe Medicaid expansion will

- Lower the costs for everyone. This will allow those dollars saved to go towards our schools, roads, or even back into the pockets of our citizens.
- Strengthen our rural healthcare system. We believe patient experience, including Kansans who are already insured, would improve.
- It would show that we as a State can work across party lines. This bipartisan proposal shows that both sides of the isle want what is best for all citizens in our fine state.

The results of a recent statewide survey among small business owners, voters, and Republican primary voters in Kansas indicate a significant preference for Medicaid expansion. The majority of respondents believe that such expansion would vastly enhance healthcare accessibility for thousands of low-income Kansans, foster job creation, and invigorate the State's economy.

We urge your support in ensuring that Medicaid expansion is enacted in our State.

March 12, 2024

To the Kansas State Legislature:

My name is Dianne Epp and I am a senior citizen living in a retirement community in North Newton, Kansas. I am writing to you to encourage you to vote to expand Medicaid in the state of Kansas. I am one of the fortunate retirees who has adequate health care and am not personally in need of Medicaid however, I am well aware that this is a position of privilege as it is, no doubt, for each of you. In this state there are many who are not covered by health insurance and an expansion of Medicaid would be of immense benefit to them. In the spirit of being "ones brothers keeper" I urge you to vote for this expansion.

Sincerely,

Dianne N. Epp

11 Lakewood Circle

North Newton, KS 67117

March 15, 2024

KanCare Expansion testimony

I am a physician who has practiced medicine in Johnson & Wyandotte County for over 30 years and I believe it is critical to improve health care access for Kansans by expanding access to Medicaid. I recently saw a woman with uterine fibroids who was working as a cashier but she bled heavily and frequently. We have done everything we can medically through the safety net system and cannot control her bleeding causing her to be dangerously anemic. Because of the amount and frequency of her bleeding (sometimes onto the floor by her register as she can't leave it unattended when she feels the blood gushing), she is unable to obtain enough hours to qualify for insurance. She is afraid to go to the hospital for emergency admission as she can't count on charity dollars to cover her care and doesn't want to put her family housing and food security at risk by accumulating medical debt. I also saw a Hispanic diabetic unable to work as she is caring for a parent with dementia so she is rationing her insulin to try to stretch money with poor diabetic control and struggling to afford healthy food options. Delaying her coverage could lead to renal failure, dialysis, cardiovascular complications. Ultimately these delays end up costing all of us more as these patients enter the health care system with such advanced problems that the cost for care is higher.

Additionally there are Kansans with temporary disabilities who need a safety net to heal so they can be productive again. Providing a safety net benefits the individual and their families as they struggle to maintain secure shelter and nourishment. It provides them a ladder to betterment. Please help us take care of Kansans in need.

Thank you

Margaret Estrin, MD (Drinkwine)

March 16, 2024

Hello,

I am asking that you please expand Medicaid coverage in Kansas. It is clear that a majority of Kansans are in favor and our rural hospitals need every bit of assistance that they can get.

Respectfully,
Scott Eudaly
Baldwin City, Kansas