

February 13, 2024

Dear Members of the Senate Committee on Public Health and Welfare and House Committee on Health and Human Services:

I am writing to ask that you endeavor to bring the issue of KanCare expansion to a full and open debate.

My name is Marc Galbraith, I live in Topeka and while I am fortunate enough not to need KanCare services, I know many Kansans do. In fact, there are 150,000 Kansans struggling without access to health care. I do not believe these are able-bodied individuals unwilling to work. I believe the contrary is more likely. I believe these Kansans are low paid workers not covered by employer provided health insurance. Many are parents, many suffer from a disability that prevents full-time employment, some are farmers, some are self-employed, some lost a job during the pandemic and have not found a replacement or found a replacement job that pays less than the one they lost. Some even work more than one job, but still remain low-income. Yet, even while low-income, they earn more than the threshold for KanCare eligibility, which is just \$8,345 for a family of three. That leaves these Kansans stuck in the gap; ineligible for KanCare or other subsidized health insurance, unable to afford a market rate insurance plan and without sufficient funds to cover out of pocket health care costs. These Kansans need our help. Expanding KanCare would provide a significant level of help by raising the income threshold for KanCare eligibility to 133% of the federal poverty level and thereby providing health insurance to those 150,000 Kansans currently in the gap.

Expanding KanCare would actually benefit all Kansans because it would support health care infrastructure across the state. It will free many Kansans from seeking medical care only in emergency situations and promote preventative care and early detection and treatment which will mean a healthier population. It will also help address the fact that many of our rural hospitals are at risk of closing. A factor of that risk is the provision of a high level of uncompensated health care. Expanding KanCare can help reduce the amount of uncompensated care and help assure our rural populations have access to the health care they need. Expanding KanCare will also bring approximately \$900 million of our federal tax dollars back home to Kansas annually. That inflow of dollars will help shore up our health care system, create jobs, boost our economy and help our hospitals compete with those in neighboring states that have already expanded Medicaid.

Kansas is just one of 10 states that has not yet expanded Medicaid. More than 70% of Kansans have indicated they support expanding KanCare to address the health care needs of the low income and uninsured. Yet we continue to deny the 150,000 Kansans who need our help. We can afford to do this, as the federal government will fund 90% of the entire program. That is a clear win, win for all of us. Health care is costly and it became even more costly during the recent period of high inflation. I believe now is the time to expand KanCare, but let us at least have a healthy discussion of the issue.

I ask you to please work to ensure an open debate among your legislative colleagues on the issue of KanCare expansion.

Sincerely,

Marc Galbraith  
1230 SW College Ave.  
Topeka, Kansas

February 15, 2024

Dear Committee members:

I am one of the lucky ones. I had medical insurance through an employer during my working career. Now I am retired and have Medicare. Not so lucky – birth defects, over time, caused serious damage to my cervical spine and knee joints. I had three complex surgeries in three years – the knee replacements done at Mayo Clinic because they were so bad as to be disabling. The spinal surgery stopped the progression of neuropathy and muscle loss in my right arm. I am incredibly grateful for the skills of these surgeons and the rehabilitation specialists.

I grieve for those who are unable to access medical care that could keep them from serious disability, sickness, and chronic illness, making their lives miserable, and possibly keeping them in poverty due to an inability to work. This is not fair or even humane.

Because my husband and I had lucrative careers in Wichita for the last 35 years, our income taxes were above average. We paid them without complaint, expecting them to be used in a responsible manner, to improve the lives of Kansans and support the state's prosperity. What seems irresponsible and incomprehensible is this state's rejection of Medicaid expansion: Millions of federal tax dollars being directed to 40 other states to support the health of their residents.

The final irony is that Medicaid expansion is overwhelmingly desired by Kansans. The apparent roadblock is based on political partisanship, which ignores the electorate's wishes and the needs of the state's most vulnerable.

Deborah Gdisis

March 14, 2024

Dear Committee Members,

It is my privilege to provide testimony to support Medicaid Expansion in Kansas. Kansans are working hard to keep rural hospitals from closing, Medicaid Expansion would help. While I live in a metro area with many health options, many of my family members depend on health care in rural Kansas.

I have not heard any valid reasons for opposing Medicaid Expansion, just stubborn partisan arguments. 150,000 Kansans would benefit from expanded coverage. It's time to join the common sense choice taken by 40 other states and offer this help for our citizens.

A Concerned Kansan,  
Barbara Geers  
Shawnee, Kansas 66216

March 15, 2024

This e-mail is in support of passing Medicaid Expansion for the following reasons:

- Reduces health care costs for everyone
- Protects Kansans from medical debt
- Supports a healthier workforce
- Keeps Kansas economically competitive
- Preserves and strengthens rural communities
- Ensures uniform access to care for all Kansans
- 7,440 Johnson County uninsured residents would become eligible for Medicaid with expansion
- 2,256 new jobs would be created in Johnson County
- \$66,960,000 in new annual health care spending in Johnson County

Thank you.

Gretchen Geistdoerfer  
[ggeistdoerfer@gmail.com](mailto:ggeistdoerfer@gmail.com)



**Genesh, Inc.  
DBA Burger King  
8831 Long St  
Lenexa, KS 66215**

March 15, 2024

**To:** Kansas Legislature  
**RE:** Testimony in Support of Kansas Medicaid Expansion

My name is Mukesh Dharod, and I am the owner and CEO of Genesh, Inc., a Lenexa, Kansas based franchisee of Burger King Corporation. Our team consists of 2,000+ employees throughout 51 restaurants, 38 of which are located in Kansas.

On behalf of Genesh, Inc., our staff members and their families, and Kansas' entire restaurant sector, I wanted to express my support for Medicaid Expansion. In our line of work, the best ability is availability. For us to not only hire but also retain our cooks, cashiers, and servers, we need to put them in positions where they can physically show up and commit themselves to our team for the long haul. With such regular labor shortages and high turnover, however, this is no easy feat.

Medicaid Expansion would help us overcome various hiring- and retention-related challenges. Right off the bat, it would help Genesh, Inc. compete for top talent against other employers in our industry whose restaurants might be located in a state where Medicaid has already expanded (ie, each of Kansas' four neighboring states).

Once we do attract such talent, Medicaid Expansion would be a driving force in keeping our teams fully staffed and creating pipelines for internal growth and development, as the increased access to healthcare would result in more productivity and less worker absenteeism, which, again, I cannot stress enough the importance of in the restaurant industry.

From a financial standpoint, the best part about Medicaid Expansion is that it would come at no extra costs to our business. That there would also be a work requirement ensures that our eligible employees would only be motivated to work even harder to benefit from this pro-business policy.

For these reasons, I respectfully urge Kansas to pass Medicaid Expansion and encourage restaurant businesses like ours to continue thriving in the Sunflower State. Thank you!

Mukesh Dharod  
Genesh, Inc. DBA Burger King

March 15, 2024

Dear Chairman and committee members,

I am a resident of Lenexa, Kansas and wanted to thank you for the opportunity to provide testimony in support of Medicaid Expansion.

Medical care is essential to Kansans and in states where it has already been expanded marketplace premiums are 7% lower. Kansas would receive around \$700 million in annual federal funding that would make our state more economically competitive. It would protect Kansans from medical debt and these particular bills that are being presented would not cost Kansas taxpayers anything.

My husband works as an ICU nurse and sees first hand the need to expand Medicaid. Many times his patients are from rural parts of Kansas, where the care is lacking. Patients then are transferred and can at times overwhelm hospitals in the city.

Let's move Kansas forward and make our state the great state that I know it is and expand medicaid so that we can thrive.

Sincerely,  
Danielle Giarla, Lenexa

March 15, 2024

Dear Kansas Decision-Maker,

I am writing in support of Medicaid expansion for Kansas. Besides believing in general terms that the role of government should be, in part, to be a safety net for the most vulnerable citizens, this issue impacts me personally.

I have a twenty-two year old son who has a disability that makes it difficult for him to sustain employment. He is currently unemployed. He has mental health issues that are rooted in the acute early childhood trauma he suffered at the hands of his birth parents. He was removed from the rolls of Kansas Medicaid at the end of January. He has no health insurance and cannot afford the insurance offered in the Marketplace. He has a pending Social Security Disability case (the application was made four years ago)..

He can no longer access prescribed meds that help him regulate himself and manage anxiety and stress. He can no longer afford essential therapy. Both of these are devastating losses for him and our family. It feels like a total rejection of him by our society and has triggered another deep and prolonged episode of debilitating depression in him.

I am retired and on a fixed and limited income that will support me, but does not allow for his meds (one of them is \$1500/month) or the therapy he needs.

Please join 40 other states in passing this expansion that will bring millions of dollars into the Kansas economy and, in the case of my son, allow him to have what he needs to be employed and contributing again.

Sincerely,

Roger E. Gibson  
733 Lincoln St.  
Lawrence, KS. 66044

March 12, 2024

We desperately need expansion of these services across the state and particularly in the less densely populated western third of Kansas where hospital, clinic, and LTC services have closed in recent years. The injection of these monies would help alleviate the dollar crunch experienced in these areas and allow the population to travel fewer miles for their healthcare. It is a “no-brainer” for the legislature and long overdue.

Respectfully,

Robert M. Giess

March 13, 2024

Hello:

I am a surgical technologist/surgical assistant currently working at a Critical Access Hospital. Kansas has 81 CAH's. They provide screening, ER care, surgery, labor/delivery, labs, cardiac rehab etc. They are VITAL to Kansas' health care system and they need this expansion to help keep doors open.

These facilities are often the heart of a city. They allow patients to stay close to home to receive care. This is not only a comfort to them, it also saves them money.

Kancare is essential to these facilities as it allows patients to seek care without fear of medical debt. It also helps to offset the cost of care for those that do not qualify.

Please expand Kancare. It will cost so little, save lives and community health centers. Kansans deserve healthcare and we are proud people so if we cannot afford it we neglect to seek it out.

Prove to Kansans that you do care and expand Kancare.

Dana Gillis, CST, CSA

March 16, 2024

Good afternoon. We are writing to express our full, urgent support for the expansion of Kancare in our state.

This measure will increase the availability of health care, support our hospitals and medical practices, improve the health of Kansans, and contribute to a flourishing economy through the creation of jobs with livable wages.

In addition, this measure has been too long delayed at this point, and now, at last, you have the chance to leave an honest, substantial legacy for the residents of Kansas, a legacy that will add to the respect and honor your term in office deserves.

Joan Tedrow Gilson, PhD  
Jerry Gilson  
13850 W. 91st Ter. Apt. 512D  
Lenexa, KS 66215

**Positive Testimony on SB355  
To Expand Medicaid in the State of Kansas**

**Donna K. Ginther**  
**Director, Institute for Policy & Social Research**  
**Roy A. Roberts & Regents Distinguished Professor of Economics**  
**University of Kansas**

**David J.G. Slusky**  
**Professor, Department of Economics**  
**University of Kansas**

**Thomas C. Becker**  
**Assistant Researcher, Institute for Policy & Social Research**  
**University of Kansas**

**January 26, 2024**

**Based on our research findings and over 600 additional research studies, this testimony is positive for Senate Bill 355.** We (Ginther, Ayan, Slusky 2022) have [studied](#) the impact of failure to expand Medicaid in the state of Kansas. In that report, we found that:

- Kansas lost out on an estimated \$4.9 billion in federally available Medicaid funds from 2014 to 2021, as well as an estimated \$6.62 billion in additional economic activity that would have been spurred by the influx of Medicaid funds. As of today, Kansas has lost close to \$7 billion in Medicaid funds.
- Kansas saw a sizeable 23% increase in state Medicaid expenditures between 2014 and 2019, despite launching a Medicaid managed care program. Other states with Medicaid managed care programs kept their costs relatively flat during this time period.
- From 2014 to 2018, total spending for privately insured residents increased at a faster rate in Kansas than in other states, including both Medicaid expansion and nonexpansion states.
- Since 2014, employee premium contributions for family plans have increased 77% in Kansas, compared to 26% in other nonexpansion states and 25% in expansion states.
- Healthcare utilization increased for privately insured Kansans by 10% between 2014 and 2018.

The evidence is clear: Medicaid expansion increases insurance coverage, decreases mortality, reduces uncompensated hospital care, and improves the financial security of patients and has a negligible impact on state budgets.

**Below we examine the evidence behind many arguments against Medicaid expansion:**

1. ***Opponents claim that more people will enroll than projected*** – This concern is based on the assumption that higher enrollment is a problem rather than a benefit. The consensus in the literature though is that **Medicaid expansion improves individuals’ health and financial well-being** (Allen and Somers 2019; Finkelstein et al 2012).
2. ***Opponents claim it will cost much more than projected, and imply that state budgets will be reapportioned to cover the cost*** – A recent [NBER working paper](#) by Gruber and Somers (2022) found that **expansion states saw only about a 1% change in spending from state funding**, with no change in spending on education, corrections, transportation, or public assistance.
3. ***Opponents claim Medicaid expansion opens the door to massive increases in fraudulent and improper payments*** – [A recent study](#) by Perez and Pastrana (2023) found that **Medicaid expansion states have successfully stepped up enforcement of Medicaid requirements**. The authors concluded that expansion states increased their fraud investigations, excluded more individuals from the program, and made more civil recoveries than states that opted out.
4. ***Opponents claim Medicaid expansion causes people to shift from private insurance plans to Medicaid, and that this effect is significant*** – Available evidence has shown this “crowding out” effect is minimal. A [comprehensive study](#) (Semprini 2023) of expansions and insurance from 1999-2019 found that **expansion states saw a 1.5 point drop in the share of the total population who were privately insured**. This equates to around a 2-3% decline in the number of people covered by private insurance. Some of these people may be self-employed. A recent study shows that the Affordable Care Act increased unmarried women’s rates of self-employment by 1.5 points (Blume-Kohout 2023).
5. ***Opponents claim that Medicaid recipients would face longer wait times due to expansion*** – A [review of studies](#) by Mazurenko et al. (2018) found that most peer-reviewed papers concluded **expansion has not led to longer wait times or difficulty scheduling** new appointments in expansion states.

6. ***Opponents claim that Medicaid recipients would get lower-quality care as a result of expansion*** – Opponents often cite a 10-year-old study on the Oregon health experiment where authors found that after two years, recipients had seen little improvement in most health measures. Baicker et al. (2013), however, found that coverage increased diabetes detection rates and decreased rates of depression among enrollees. A [more recent review of studies](#) by Allen and Sommers (2019) found that **Medicaid expansion has been associated with improved health outcomes for low-income residents across a broad range of acute and chronic conditions.**
7. ***Opponents claim that many people who sign up for Medicaid after expansion would be eligible prior to expansion*** – Opponents claim that additional enrollees “coming out of the woodwork” would amount to around 10% of pre-enrollment levels (even though the article they cite found the average “woodwork effect” among expansion states averaged 2.8%). [Sacarny, Baiker, and Finkelstein \(2022\)](#) **investigated the “woodwork effect” in Oregon and similarly concluded it was small,** mostly due to previously eligible children enrolling. Regardless of the size of this effect, evidence has shown that Medicaid access overwhelmingly improves low-income individuals’ health and finances, and so any “woodwork effect” is actually a benefit of expansion.
8. ***Opponents claim that states will relinquish control of their enrollment requirements if they expand Medicaid*** – Opponents cite the continuous enrollment condition authorized by the Families First Coronavirus Response Act and imply that it will continue indefinitely. **This condition is no longer in place** because of the expiration of the COVID-19 Public Health Emergency. In fact, [12.5 million people have been disenrolled](#) due to the end of the COVID-19 Public Health Emergency.
9. ***Opponents speculate that the federal government will pass legislation to force more of the expansion costs on state budgets*** – **States can and have reduced enrollment,** as many did in response to the end of the continuous enrollment condition using various approaches (NASHP 2023). If the federal government reduces its share of expanded Medicaid, Kansas could reduce enrollment to avoid spending more of the state’s budget.
10. ***Opponents claim that Medicaid does little to benefit patients*** – Opponents reference a study in which they believe the authors found that “only 20-40 cents of each dollar spent on Medicaid directly improves the welfare of Medicaid recipients.” This claim comes from [an NBER working paper](#) by Finkelstein, Hendren, and Luttmer (2015). The original paper found that for each

dollar spent in the 2008 Oregon lottery-based Medicaid expansion, the value of services received by enrollees increased by 20-40 cents. The other 60-80 cents compensated emergency service providers and others who **would otherwise not be paid** for their services. **In other words, the entire dollar pays for healthcare, but in the absence of Medicaid, certain services would either be performed at the cost of the government or would represent a financial loss for the provider.** The authors later edited their language to highlight this point and [published in the \*Journal of Political Economy\*](#) (Finkelstein, Hendren and Luttmer 2019).

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TO: House and Senate Committees

FROM: Ruth Duling, CEO  
Girard Medical Center

DATE: March 12, 2024

RE: Proponent HB 2556/SB 355

On behalf of Girard 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 turn patients away regardless of their ability to pay. Therefore, when a patient presents for treatment in our Emergency Department we are required to treat them. This creates unique challenges for our hospitals financially at a time when reimbursement rates from public and private payers remain stagnant and operational expenses have continued to increase.

Medicaid expansion would benefit our hospital by reducing the amount of uncompensated care we provide. In an environment where operating margins are already in the negative, it doesn't take a lot of uncompensated care to tip the scale even further. Last year alone, our hospital provided more than \$1.86 million in uncompensated care. This bill comes at a time when the healthcare industry in Kansas is providing almost \$1.2 billion in uncompensated care to our state.

Hospitals remain committed to serving the communities we care for each day across our state. We are an economic driver of local economies and one of the largest industries in the state. There is no doubt that our community at large would benefit from Medicaid expansion. Minimum wage workers and those who work very hard for low wages deserve to have health insurance. Having insurance gives these individuals access to care when they are ill and to preventative health services. Access to mental health services for these individuals and families is also a much-needed benefit. Healthy workers are a positive for any local economy. We have only to look at the success in other states where Medicaid is already expanded to know how beneficial it could be for our Kansas communities.

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

**Testimony in support of Medicaid Expansion in Kansas  
3-14-2024**

I am a practicing pediatric cardiologist in Kansas. Most of the patients I see, because they are typically younger than 19, are eligible for Medicaid. That's the good news. The critical care they receive for congenital and chronic heart conditions—care that would be formidably expensive for their parents without some kind of health insurance—makes a huge difference in the quality of their lives.

The challenges for these children occur once they turn 19 and no longer qualify for Medicaid. Just because they received the care they needed as children does not mean that, as young adults, they will no longer require treatment. In fact, almost all of the patients I see face ongoing and serious health challenges throughout their lives. And study after study has shown that patients who age out of specialized pediatric care often have significant gaps in their health care coverage going forward. If their parents can't insure them during these young adult years, then they are hard pressed to receive timely interventions.

Consider the congenital heart defect known as Tetralogy of Fallot, a common condition that prevents adequate flow of blood to the lungs. Surgeries conducted within months after birth can repair this problem, but they cannot cure it. The children who receive the surgery may be left with enlarged hearts and may, as adults, need to have surgery to replace their pulmonary valves. If these adult patients do not have insurance and cannot afford the surgery at the time they need it, they face the prospect of a shortened lifespan. Some, because of their compromised health, find it difficult to maintain steady employment.

Another example: I see many children whose health problems are the result of childhood obesity, a condition that also puts them at risk for liver disease, early development of vascular disease, and Type 2 diabetes. Multiple providers are often required to treat them. And while most children in Kansas at least have Medicaid to initiate this treatment, providing it to them as adults is incredibly expensive, especially if they need insulin-resistant medications. Without access to some kind of health coverage, these patients' conditions will deteriorate and eventually require more complex, and more costly, interventions.

By giving children access to Medicaid, Kansas has provided thousands of young people with the hope of living long and healthy lives. But that hope is nothing more than a mirage if we cannot commit to giving these children access to quality health care once they become adults. Why, after making this investment in their health for their first 18 years, does the state suddenly abandon them? It's long past time for us to truly, and genuinely, give these children hope for a healthy future—and not just until they're old enough to vote.

Sincerely,

**Kenneth K. Goertz, M.D.**  
**6121 W. 86th Terrace, Overland Park, KS 66207**

March 15, 2024

I am writing today to express my strong support and encouragement for adoption of **HB 2556**. There is significant data available confirming the existence of tens of thousands of Kansans who fall into the health insurance coverage gap leaving them vulnerable for financial ruin. I believe that KanCare expansion will likely benefit 150,000 hardworking Kansans who earn too much to qualify for the current Medicaid program, but do not qualify for financial assistance for private insurance. Expanding KanCare will provide access for them to receive affordable health coverage. I believe that access to quality affordable health care is a right and you have the power to make this happen I encourage you to support adoption of HB 2556.

Max Gordon  
3901 West 101<sup>st</sup> Terrace  
Overland Park, KS 66207  
[max@maxgordonlaw.com](mailto:max@maxgordonlaw.com)

March 17, 2024

House and Senate committee members:

Kansas has missed out on at least \$7 billion of federal matching funds since expansion was implemented by the federal government. My Kansas taxes are going to Washington DC and sent to 40 other states that participate. I'm tired of my tax dollars going to Missouri, Colorado, New York and California. This also puts us at a competitive disadvantage since bordering states are participating but Kansas does not.

Hospitals and healthcare centers continue to close in rural Kansas. Those patients have to seek access to healthcare elsewhere. In many cases, it's in Johnson County. My wait time for appointments grows as more people from further away also go to my local facilities. We need more locations, providing more access in close proximity to where people live.

It's past time for Kansas to join this program. Expand Medicaid now.

Best,  
Pat Gouger  
Overland Park, KS



**Gove County  
Medical Center**  
*Committed to Others. Always.*

TO: House and Senate Committees  
FROM: Gove County Medical Center Executive Team  
DATE: March 14, 2024  
RE: Proponent HB 2556/SB 355

On behalf of Gove County 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 turn patients away regardless of their ability to pay. Therefore, when a patient presents in our Emergency Department we are required to treat them. This creates unique challenges for our hospitals financially at a time when reimbursement rates from public and private payers remain stagnant and operational expenses have continued to increase.

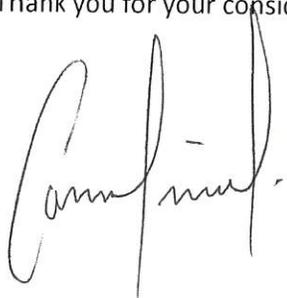
Kansas has 104 rural hospitals. Almost 30% are at risk of closing. Over 40% of them had negative margins. Gove County Medical Center is part of that list. Rural communities provide the food, energy, and raw materials that keep the Kansas economy running. Gove County Medical Center provided over 10 million dollars in salaries and benefits to its community. Rural communities are already struggling with labor shortages and an aging population. Any rural community that would lose that large of an employer and economic benefit would struggle to not see a population collapse. Ultimately leading to negative impact on Kansas overall economic status. Over 74% of the rural hospitals that have closed in the United States have been in the States that have not expanded Medicaid.

Hospitals remain committed to serving the communities we care for each day across our state. We are an economic driver of local economies and one of the largest industries in the state.

It is estimated that 58 residents in Gove County would qualify for Medicaid expansion leading to \$522,000 in new annual health care spending. Rural residents already struggle to have access to local health care and Medicaid expansion would help keep that access close by.

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 \$740,000.

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

 , CEO





Timothy R. Graham  
Director of Government Relations & Legislative Affairs  
Written Testimony – Proponent  
Senate Committee on Public Health and Welfare  
Senate Committee on Ways and Means  
SB Bill 355  
March 20, 2024

Chairperson McGinn, members of the Committee:

Thank you for the opportunity to testify in favor of SB 355.

Kansas NEA is a member-driven organization that represents all 40,000 educators in the state of Kansas. We have nearly 22,000 members. The positions we advocate for have been proposed, debated, and adopted by several hundred members that were selected by their peers to attend our annual Representative Assembly.

We have several resolutions that deal with the health and safety of Kansas Students. Kansas NEA recognizes that Kansas is a state with a diverse population and culture. Our membership is representative of that diverse population. We have members that live in urban, suburban, and rural communities. **Accordingly, Kansas NEA strongly believes that all Kansans, regardless of zip code, deserve access to affordable medical coverage.**

### **Healthy Students are Better Learners**

Multiple studies have indicated that there is a strong correlation between healthy students and academic achievement. KNEA supports the findings in many of these studies, but our best resource is the voice of our members. A simple discussion with any Kansas educator can result in stories of chronic illness that leads to chronic absenteeism and the negative impact that it has on the student's achievement. Simple ailments like toothaches, headaches, and stomachaches can become chronic ailments without access to quality and affordable healthcare. Anxiety and other mental health issues are going untreated and taking a toll on our children as well. The simple need for eyeglasses and the lack of coverage to assess the need properly can also be an impediment. Additionally, students that are weighed down with worry about chronic illness of family members can be a huge obstruction to learning as well. These issues, and more, are frequently cited by our members as common challenges for student success. **The passage of SB 355 would be tremendously effective in addressing these issues.**

### **Lifeblood of Rural Kansas**

Agriculture, schools, and rural hospitals are tremendous drivers of the economic engine of rural Kansas. In many Kansas rural communities, the public school district is one of the largest employers in town. Joining school districts at the top of the list of employers is the regional hospital. Not only does this partnership create jobs, but it also attracts industry that creates more jobs. Access to education and healthcare are quality of life issues for rural Kansans. If a rural hospital closes, it starts a domino effect of challenges that also negatively impacts public schools. **The passage of SB 355 would strengthen and sustain the rural health care system**

**and help ensure rural Kansans get the health care they need while giving a boost to their economies and their public-school systems.**

**Expanding Medicaid is the right thing to do.**

In addition to the reasons listed above, Kansas NEA calls on the legislature **to expand Medicaid because it is the right thing to do.** It is estimated that the passage of SB 355 will provide medical coverage for more than 150,000 Kansans. It is also estimated that more than 45,000 of those that would be covered are children. As the largest union in Kansas, we strongly support the notion of educators as leaders in their communities. Educators touch the lives of vast numbers of individuals in their communities. Because of this they have insights and perspectives that can be useful when discussing policies. In the spirit of partnership and collective action, we join the vast majority of Kansans in supporting Medicaid expansion.

We ask the committee to approve SB 355.

Thank You for your time.



## GREAT PLAINS ANNUAL CONFERENCE of The United Methodist Church

REV. DR. DAVID WILSON, *Resident Bishop*

1207 SW Executive Drive  
Topeka, KS 66615  
785-272-9111  
785-414-4219

[bishop@greatplainsumc.org](mailto:bishop@greatplainsumc.org)

March 14, 2024

Testimony in support of Medicaid expansion in Kansas  
Senate Committee on Ways & Means and Public Health & Welfare, Sen. Carolyn McGinn, chair

Esteemed members of the Kansas Legislature:

I am David Wilson, and it is my privilege to serve as bishop of what our denomination calls the Great Plains Conference, a network of more than 710 churches across Kansas and Nebraska. Roughly two-thirds of those congregations are right here in Kansas.

I am excited to join with hundreds of other faith and community leaders in voicing support for the expansion of the KanCare program. I, along with my many colleagues, believe that the Legislature's action to expand KanCare would allow for greatly improved health care access for more than 150,000 low-income Kansans, many of whom are working each and every day but simply don't earn enough to provide for the health care they need for themselves or their children.

You have the opportunity to make a big difference for families across Kansas. According to a Kansas Reflector article from December 2023, more than 1,500 Kansans have died due to lack of access to health care. I confess to not knowing their methodology for research, but what I do know is the stories shared by United Methodist pastors across Kansas in areas both urban and rural, of people struggling as health care costs continue to soar, of people working longer hours — often in more than one job — to put food on their tables but who cannot afford medicines they need for their children.

I admit that I struggle to understand how something as basic as the health and well-being of the population has become so politicized over the years. We are made in the image of the Creator, and as such, all people are of equal and sacred worth. Scripture tells us that we are to lift up those who lag behind, including the sick. In his parable of the sheep and goats in Matthew 25, Jesus specifically mentions that we are to tend to the sick. He said so not just to encourage visits to the infirm, but rather to illustrate that we will be judged on the extent of our compassion for others.

As the first Native American person elected to serve as a bishop in The United Methodist Church, I often am asked about my background and culture. Among Native peoples, the concept of community is intensely strong. It is a given that we will care for the infirm among us because we are connected. They need assistance, and the able-bodied among us can provide that help. I can help now, and one day I likely will be the one in need of assistance.

I believe we can draw a parallel from my Native culture to what we can do together as Kansans regarding health care in the state today.



Further, in a democracy where citizens govern, our duty to our neighbor merges with the duties that the Hebrew Scriptures assign to those who govern. Expanding KanCare is the right thing to do for Kansans caught between earning too much to qualify for Medicaid and too little to purchase private insurance. Expanding Medicaid via KanCare could create thousands of jobs and return millions of tax dollars to our state every year, according to the Kansas Health Foundation. The National Governors Association (NGA) has reported significant gains in jobs, health of residents and tax revenues in Ohio, Michigan, and Montana — three states studied as Kansas considers this advancement. The NGA reports that findings in those three states are consistent with most of the other states that have opted to expand Medicaid coverage.

After Medicaid expansion was passed in Oklahoma, I saw with my own eyes the great impact it had on tribal members. I serve on the board of the Oklahoma City Indian Clinic, which serves about 22,000 clients from tribes all over the state and country that reside in the service area. The clinic was able to address medical issues that it could not before the expansion. Medicaid expansion opened up many more critical services for clients. It also allowed us to expand our operations to another site.

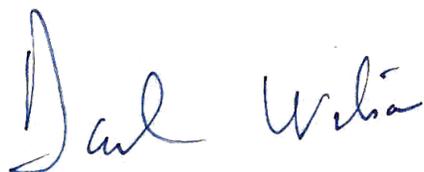
Expansion of Medicaid in Oklahoma has been a gamechanger for so many who didn't have access to critically needed health care, particularly for oncology patients. Leukemia, lymphoma and multiple myeloma patients have received stem-cell transplants, technology that once seemed futuristic but that is now a standard of care. Those without any other hope have been able to enroll in clinical trials that not only help extend their lives but may lead to breakthroughs that save many more people. Breast-reconstruction surgery is now available to women who have been diagnosed with that form of cancer, greatly adding to their quality of life. And genetic testing allowed under expanded Medicaid services provides the amazing benefit of knowledge, which leads to better monitoring and earlier and earlier detection.

In short, I have seen Medicaid expansion save lives. Kansans should have those same benefits.

I know you likely have heard concerns about how Kansas has lagged in this effort to provide health care to more of its residents. I agree that it is an effort that is long overdue. However, none of us has the power to change the past. But you do have the authority to make an important change for the betterment of 150,000 Kansans now.

I pray that you will embrace the opportunity.

Thank you for your time and attention. Please know that I and the more than 180,000 United Methodists in the state of Kansas are praying for you as you face this and other decisions.

A handwritten signature in blue ink that reads "David Wilson". The signature is written in a cursive, flowing style.

Bishop David Wilson  
Great Plains Conference

Testimony for MEDICAID EXPANSION for the Joint Hearing of the Senate Ways & Means Committee and the Senate Public Health & Welfare Committee and for the Hearing of the House Health & Human Services Committee.

Dear Committee members,

Along with my clergy spouse, Marilyn, I served congregations in Kansas for over 40 years. Our United Methodist Social Principles state that “creating the personal, environmental, and social conditions in which health care can thrive is a joint responsibility-public and private.” In John, chapter 10, Jesus declared that He came that “people might have abundant life” or life to the fullest. In Ezekiel 34, God points out the failures of the leadership of Israel to care for the weak. **The lack of health care to over 150,000 persons in a coverage gap because government fails to act undermines abundant life.** As one of my colleagues stated so well, “where in my Holy Scripture, in Hebrew Scripture, or Islamic Scripture would there be anything against caring for our neighbors.” Jesus made it clear: our neighbors include the vulnerable, the sick, the unnoticed, the mentally ill, the homeless, those who fill hospital emergency rooms, those encumbered by medical debt.

Expanding KanCare not only benefits individuals caught in the coverage gap but also benefits health care providers and hospitals that must cover uncompensated care. Marilyn and I lived and served in two communities that have lost their hospitals. The unavailability of health care in a community undermines the vitality of the community.

Finally, the lack of health care compounds existing concerns. Expansion would assist law enforcement officers who encounter persons with mental health concerns. Many communities are increasingly impacted by homelessness. Living without health care to cover housing expenses is a choice no one wants to face. Victims of domestic violence hesitate to leave abusive relationships if it means losing their health care for themselves and their children.

**Caring for all who are vulnerable is at the heart of the teachings of all world religions. I urge that you allow a vote that will mean Kansas can join 40 other states who have expanded Medicaid.**

Rev. Jack Gregory  
Lenexa, Kansas

**Date:** March 15, 2024

**To:** Kansas State House and Senate Committees holding hearings on Medicaid expansion

**From:** Laura Gunderson

**RE:** Written testimony supporting Medicaid expansion in Kansas

I want to thank you for the opportunity to submit written testimony in support of Medicaid expansion in Kansas. From my experience in working in community mental health, it is evident that Medicaid expansion would bridge a coverage gap that currently impacts over 150,000 Kansans and their families. As KanCare exists currently, these Kansans earn too much to meet the financial qualifications of KanCare, but earn too little to receive financial support to cover the costs of private insurance offered by the Health Insurance Marketplace. This leaves Kansans without access to affordable health insurance options, denying them access to quality medical and mental health services. Access to these services is essential for the physical and mental health of our communities all across the state.

As a social work student working in the field of mental health, I recognize that Medicaid expansion is a proactive next step for the Kansas State Legislature to address the mental health crisis impacting our state. In a recent study conducted by Mental Health America, Kansas was ranked last in mental health, in terms of need for, utilization of, quality of, and access to mental health resources. Expanding Medicaid would improve Kansans' ability to access and utilize mental health resources while ensuring that mental health agencies have the financial means to operate and improve the quality of their services.

Every Kansan should have access to the resources and life-saving care they need. Please pursue Medicaid expansion and support the mental wellbeing of all Kansans.

Sincerely,

Laura Gunderson

March 15, 2024

As a physician and former registered nurse, it pains me to see how many uninsured and under insured Kansans could be helped by Medicaid expansion. Please help by expanding Medicaid in Kansas.

Douglas Hagen, MD



**KANSAS**  
ASSOCIATION OF  
**COUNTIES**

715 SW 10th Avenue • Topeka, KS 66612  
785-272-2585 • [www.kansascounties.org](http://www.kansascounties.org)

Senate Ways and Means Committee and Senate Public Health and Welfare Committee  
March 20, 2024  
Medicaid Expansion Informational Hearing

Kansas Association of Counties  
Proponent Testimony – Written Only

Chairwoman McGinn and members of the Committee:

Thank you for allowing the Kansas Association of Counties to offer proponent testimony on Medicaid Expansion, which would expand the eligibility of KanCare pursuant to the Affordable Care Act.

KAC and its member counties support a Medicaid program that maintains the federal government's responsibility for providing for the physical and behavioral health care of the country's most vulnerable citizens.

Thank you for the opportunity to offer support for this important issue.

Jay Hall  
Deputy Director and General Counsel  
Kansas Association of Counties  
[hall@kansascounties.org](mailto:hall@kansascounties.org)  
(785)272-2585

The USA is one of the only industrialized countries in the world without adequate universal/socialized medical system for its citizens.

As a Kansan who has spent 9 years abroad in 5 different countries, I can assure you that our system can't hold a candle to most. Americans avoid the system because of the costs and inconvenience.

Please vote to bring Kansas into the 21<sup>st</sup> century and join the civilized and developed world that puts priority on a healthy citizenry.

Sincerely,  
Tim

March 16, 2024

To the Members of the Kansas House and Senate:

I am writing today to ask you to move forward and Expand Medicaid. Of the many reasons to do this, may I list a few.

- \*It will help preserve hospitals and medical care in rural areas.

- \*It will help provide 150,000 Kansans with health insurance that they now cannot afford. Thus causing them to put off treatment until the medical issue becomes so severe it cannot be resolved.

- \*It will allow Kansas to take advantage of millions of dollars in federal dollars that we have thus far allowed to go to other states!!

- \*It will create jobs and spur economic growth.

- \*It will provide jobs for people with disabilities.

- \*It will provide more funding to mental health services.

- \*It will create better health care for children

My list could go on and on because there are so many valid reasons to accept Medicaid Expansion. You know these reasons are critical and necessary. You have heard this for the last ten years. Now is the time, far past the time, please show courage, show compassion, show wisdom and pass Medicaid Expansion for the people of Kansas. We want it, and you are there to carry out the will of the people!!

Thank you,  
Marilyn Hammond  
9112 Alhambra Street  
Prairie Village, KS 66207

P.S. Your plan to just raise the rates to providers is a faulty one. It will just make the providers wealthier than they already are. Several of those wealthy providers are within your membership.

March 16, 2024

Dear Chairman and committee members,

I write to you in favor of Medicaid Expansion. I have been in healthcare for 12 years and know the importance of EVERYONE receiving adequate access to care is beneficial to the whole community. Many will be able to have a proactive approach to their healthcare, reducing the amount of urgent needs that is burdensome to hospitals. Especially in rural Kansas, Medicaid Expansion will be a lifesaver for those community hospitals.

No one should go into Medical Debt. Everyone should receive access to care. Everyone will benefit from Medicaid Expansion.

Thanks,

Lisa Hamrick

Helen Hands  
509 W. 14<sup>th</sup> St.  
Hays, KS 67601

March 15, 2024

Dear Legislators:

I'm writing to urge you pass Medicaid Expansion. Kansas is long overdue to expand Medicaid and is one of only 10 states not having done so. All of Kansas' neighboring states have expanded eligibility for Medicaid. One year ago, [North Carolina's Legislature passed Medicaid Expansion](#) with large majorities despite being controlled by Republicans. Like Kansas, North Carolina legislators long resisted expanding Medicaid, but finally decided it was a good deal for their constituents. Long-time opponent and current Senate President Pro Tempore, Phil Berger, explained why he and fellow Republican legislators changed their mind in [this interview](#) on the *PBS Newshour*. Points he made about changing his mind to support expanding Medicaid include:

1. The federal government pays 90% of the costs and has done so through both Democratic and Republican control for over 10 years. This is a much better deal than the 66% for traditional Medicaid and there should be no concern about the federal government renegeing on this.
2. Because of the way Medicaid Expansion is designed by the federal government, the majority of the people it helps are working people who make too much to be eligible for traditional Medicaid, but too little to be helped by the Affordable Care Act subsidies.
3. He wasn't concerned about any political consequences of changing his mind after adamantly opposing Medicaid Expansion for many years because there was widespread support for expanding Medicaid, even among Republicans.

Governor Kelly's work requirement proposal should alleviate any concerns about subsidizing those who are unemployed and not looking for work. Her exceptions (students, veterans, caregivers, and people with medical conditions) and less-burdensome paperwork requirements make it more humane than work requirements proposed by other states. By being among the last, Kansas has had the opportunity to learn from the experiences of other states and design an even better program.

Although it may be late in this legislative session, I know the Legislature has a way of passing bills they really want to pass no matter how late. If it can't be passed this session, it needs to be a priority for summer work groups and passed in 2025. A large, **bipartisan** majority of Kansans want this. Our hospitals need it. The data show it is economically responsible. So, please do everything in your power to make it happen.

Thank you for considering my views.

Helen Hands

March 15, 2024

Greetings and good health to you!

My name is Lois Harder; I have been a pastor in Kansas in the Mennonite Church for over 27 years and have witnessed first-hand the need to expand Medicaid in our state. I have served both in Wichita as well as in rural Goessel and the need is great in both urban and rural settings. While in Wichita I witnessed the death of a young neighbor who died of covid complications. If her single mother could have received aid in the form of expanded Medicaid resources it's highly probable that she would still be with us. In the rural setting I have watched as small, rural hospitals have struggled mightily to stay open - and many have not. As you know this is a huge hardship for your constituents who live many miles from medical care. Help them - help all of us - by voting to expand Medicaid!

SB 355 and HB2556 will be heard on Wednesday, March 20. I ask that you listen carefully - and vote yes.

- Expanding Medicaid in Kansas will lower health care costs for everyone.
- Expanding Medicaid in Kansas will not cost Kansas taxpayers anything at all. It is revenue-neutral.
- Expanding Medicaid in Kansas is a commonsense, middle-of-the-road, non-partisan approach to health care that will help to protect rural hospitals and cut health-care costs for everyone - your constituents! When an uninsured Kansan goes to the emergency room for health care and can't pay for the care they need, we ALL pay for it in the form of increased hospital expenses and higher taxes.
- This is a bipartisan proposal that everyone can get behind. Please vote yes!

Sincerely,  
Lois Harder

March 17, 2024

Below is my testimony for this. Thanks for putting all of these together and submitting.

Dear Chairman and committee members,

I really appreciate the opportunity to provide testimony in support of Medicaid Expansion. Thank you for allowing this to occur.

The benefits of Medicaid expansion to Kansans would be wide ranging. Here is a summary of many of them.

**Reduces health care costs for everyone.** Every Kansan is paying the price for not expanding KanCare. When low-wage Kansans can't get health coverage that means more in ER bills, increased uncompensated care for hospitals, and untreated mental and physical health needs. This means individuals, families and businesses all end up paying more for health care. Expanding KanCare will bring the cost of health care down for everyone. As a result of expansion, 150,000 low income Kansans would gain access to medical care.

**Protects Kansans from medical debt.** People all over the state feel the effects of rising costs for housing, food, and other needs, including health care. Almost half of Kansans have medical debt or know someone who does. By expanding KanCare, tens of thousands of Kansans will be able to afford health insurance coverage. That protects them from medical debt so they can use those savings to pay for other essentials.

**Fixes eligibility limits, which are currently too low.** The income limit to qualify for KanCare is about \$8,750 per year for a family of three, which is less than \$4 per hour. Expanding KanCare would raise the income eligibility limits so that more hardworking Kansans, who contribute to the economy, can get the health care they need for themselves and their families.

**Preserves and strengthens rural health care.** Kansans in our rural communities already have a hard time accessing health care when and where they need it, and rural health care providers face high levels of uncompensated care. Kansas has more rural hospitals at risk of closing than any other state our size. Expanding KanCare would strengthen and sustain the rural health care system and help ensure rural Kansans get the health care they need while giving a boost to their economies.

**Makes Kansas more economically competitive.** Expanding KanCare would increase the state's economic output by \$17 billion and increase the personal income of Kansans by \$6.3 billion over the next three years. Expanding KanCare will not only improve the health of Kansans, but it will also help our state compete with our neighboring states, who have all expanded eligibility for their Medicaid programs.

**Addresses workforce issues.** Nearly all industries in Kansas employ individuals who would become eligible under KanCare expansion. The benefits of expansion would be seen not only financially for Kansas employers, but also with improved health and increased ability to work for employees.

My sister-in-law and her husband, who are both low income, would benefit greatly if medicaid was expanded, as I know many other Kansans will as well. The reduction in health care costs and protection from medical debt will be of particular benefit to them, providing them with additional peace of mind and a higher quality of life.

Please make the expansion of Medicaid a reality for so many Kansans that need this.

Sincerely,

Marcel Harmon  
Lawrence, KS

March 14, 2024

When my autistic brother became too ill with MS to care for himself any longer, Medicaid was a godsend. It allowed him to live with dignity in a nursing home until he passed away.

The staff at his last facility did their best to care for their patients, but one thing was obvious. The lack of medical insurance for most of the staff was very detrimental to retention and morale.

We see the same problem with childcare workers. Employees can't take relatively low wage jobs if they don't have medical insurance. And Kansas families suffer as a result.

Please expand Medicaid ASAP!

Thank you for your time and service!

Mary Ann Harmon  
Garden Plain

March 14, 2024

For 4 decades, I worked with low and moderate income people as a lawyer with Kansas Legal Services. Nearly daily, I encountered the effects of lack of medical care on people's lives. More tragically, I tried to solve problems for people who got health care for themselves in critical situations without health insurance. The gall bladder surgery, the broken arm, the cancer treatment. Things that couldn't be ignored. Life saving things that allow them to continue to work and take care of their children.

Many of the people I was working with were working minimum wage, part or full time jobs. They were employed, but at jobs that didn't provide any insurance benefits. They came to a lawyer because they were getting collection letters from the health care provider. They came in because the garnishment of their wages by a hospital removed 25% of their weekly paycheck. They couldn't pay their rent and now were being evicted. Eviction likely means a change of school for their children and a disruption of learning. They were willing to pay for health insurance, but it wasn't available to them in Kansas without Medicaid expansion.

Even the full time employee making \$11 an hour doesn't make enough to participate in the Marketplace (family of 3). If they make less per hour, they can't qualify for insurance without Expanded Medicaid. They work at the convenience store, as the night clerk at the hotel, in crucial jobs needed in your community.

Others I worked with were in the 2 year process of proving their eligibility for Social Security Disability. This could result in monthly benefits which they have paid for by working. But the Catch 22 of this system is that they must get medical proof of their physical or mental impairment during a time when they aren't working and don't likely have access to health insurance. The window to prove their disabling condition and qualify for benefits is a narrow one. Time can run out to qualify, even if their health condition is quite severe. Getting treatment and medical proof would benefit their lives, providing a steady stream of income to meet their daily needs. But, without access to health insurance to fund the treatment they need, they end up homeless. They require the commitment of local agencies and churches to meet their needs forever. There is a direct link between the level of homelessness in our communities and the refusal of a few to allow Medicaid Expansion to take effect.

I wear an Expand Medicaid button everyday at the Capitol. It isn't my lobbying focus, but it is important enough for me to be a daily witness to the benefits to real people that would come from a decision to Expand Medicaid for Kansans.

Marilyn Harp  
Citizen Lobbyist  
Lawrence, KS

March 13, 2024

Denise Hartley  
24635 W. 55th Street  
Shawnee Kansas 66226

To Whom it May Concern,

I am writing to you today as a concerned citizen and constituent in Kansas regarding the upcoming hearing for Kansas Medicaid expansion. I have been informed that you would like to hear testimonies from individuals like myself, and I would like to take this opportunity to share my story.

My name is Denise Hartley, and at the age of 32, I was unfortunately disabled by an infection caused by tick bites. The tick bites led to the development of a blood infection called babesia and also Lyme disease.

Due to the lack of insurance coverage at the time, I was unable to receive prompt medical treatment. As a result, I am now profoundly disabled and reliant on disability benefits and Medicare.

I firmly believe that if Medicaid had been available to me during my working and functioning years, I would not be in the position I find myself in today – confined to my bed and relying on supplemental oxygen for survival. The trauma I have endured in Kansas, solely because of my lack of insurance, is something that I may never fully recover from.

I would like to express my deep appreciation for your relentless efforts in advocating for Medicaid expansion. Your hard work and dedication give hope to people like me who have fallen through the cracks of our healthcare system. I sincerely hope that your endeavors are successful in bringing about the necessary changes. Thank you for your time and consideration. I am grateful for the opportunity to share my testimony.

Sincerely,  
Denise Hartley

March 13, 2024

I am pleased to be able to tell you why up to 80% of Kansans support Medicaid expansion.

First, this directly effects people I know and love. Good, hard working people. I have a niece who lives in another state that has not yet expanded Medicaid. She works part time and cares for her daughter who was born with many medical issues. She is in the donut hole. She cannot get Medicaid nor can she get insurance through the ACA. I see how this affects her. I hear her struggles. She cannot get the medical care she needs as a single mother that will allow her to continue to care for her daughter. So, she goes without routine healthcare and then when she gets really sick, she has to go to the emergency room. That is high cost for her and for the community the hospital serves. If Medicaid were expanded, she would have adequate health care services she could utilize. It is true for my niece and it is true for others I know in Kansas.

Expanding Medicare lowers health care costs, and it won't cost Kansas taxpayers!

Expanding Medicare helps our rural hospital that are critical for so many of us.

I pay Federal taxes. Part of those taxes are going to the residents of 40 States that I do not know. I want the part of my Federal taxes that I pay to help Kansans.

Kansas has lost nearly \$7 Billion in additional federal funding.

Medicaid expansion would create more jobs and help end our health care worker shortage.

In a nut shell, it is a no brainer.

Expand Medicaid.

Barbara Hartness  
11722 SW Diamond Rd  
Augusta, KS 67002

March 15, 2024

Dear Chairman and Committee Members,

Thank you for the opportunity to provide testimony in support of Medicaid Expansion. Expansion of coverage makes sense for many reasons, so I will focus on just a couple of the benefits:

When more Kansans have access to routine and preventative medical and mental health care, our workforce can stay healthier and more productive. That benefits all Kansans. We have a proud rural heritage in Kansas, yet many rural communities have lost, or are facing the loss of their hospitals and physicians. Medicare Expansion can help to stem and reverse this tide. We cannot continue to proudly advertise Kansas farmers on billboards along the highways, while turning a blind eye to their struggle to have nearby quality medical care.

Medicare Expansion would bring increased federal dollars to Kansas, to the tune of \$700 million, annually, with additional dollars in the first two years. Both HB 2556 and SB 355 are revenue neutral. How can we continue to turn away this kind of funding?

It is undisputed that routine and preventative healthcare plays a critical role in child development, and by extension, the success of those children as they move through the educational system. As a career educator, I have seen firsthand, the ripple effects of poor healthcare on children and families. Making healthcare accessible to all moves us all toward a healthier student population that is better able to attend school, and do their best learning. How can we want any less than that?

In my role as a school counselor, I have witnessed the continuing increase in the frequency and severity of mental health issues within our communities. Medicaid Expansion would result in increased accessibility to critical mental health services and treatment. As someone who routinely refers families to community resources, I see how difficult it is for families to obtain the services they need. We need to keep pace with escalating needs.

Please, let's do better for Kansans. We have inched toward taking this step in previous years; make this the year for joining forty other states in expanding this critically important resource.

Thank you for listening,

Rita Hastings  
Olathe, KS.

To: Members of the Committee

From Sara "Sally" V. Hayes

Re: Medicaid Expansion

I personally have always had Health Insurance and know it has helped me reach the age of 76 being very healthy. I want the same for all Kansans. I have worked for Medicaid Expansion because I care that all people have access to doctors and hospitals and that is not happening now. We are closing hospitals especially in rural areas and losing health workers. I am appalled that we are sending an amazing amount of money to Washington, DC with nothing in return. This is not being responsible and fair to All Kansans!

We need to have this come from committee to be voted on as a clear bill for Medicaid Expansion! The Health Care of our whole state demands this!

Sara "Sally" V. Hayes. Wichita, KS

Date: March 20, 2024

From: Sister Eileen Haynes, SCL, Sisters of Charity of Leavenworth Community Director

RE: HB 2556 / SB 355 Proponent testimony

Dear Chairperson and members of the committee,

I write to you concerning Medicaid expansion in Kansas from a personal perspective. Some of my family members, who are working in full-time positions, are not able to afford adequate health insurance. This is through no fault of their own. Due to the lack of insurance, they then avoid going to the doctor due to the cost of healthcare. Eventually, they end up in the emergency room with illnesses that could easily have been prevented. Now, some of these family members have to live with chronic illnesses that would not have happened if they had adequate health care. The medical cost would also be significantly less for everyone. What will it take for persons to understand that it is really much more economical to ensure Medicaid expansion, to say nothing of demonstrating care and respect for all humans?

Sister Eileen Haynes

# HAYSMED

**TO:** House and Senate Committees

**FROM:** Edward Herrman  
President & CEO

**DATE:** March 14, 2024

**RE:** Proponent HB 2556/SB 355

Thank you for the opportunity to offer testimony on this profoundly important issue. On behalf of Hays Medical Center, I am in full support of House Bill 2556/Senate Bill 355.

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

As hospitals across the state are faced with ever-increasing uncompensated care, and stagnant reimbursements from public and private payers, they are forced to look to the local governments to make up shortfalls and keep their doors open. Having the local investments is in many hospitals' cases key to make the financial situation work however, it comes at a price to local taxpayers, many times in the form of increased mill levies.

Hospitals, not unlike many other industries, are facing ever-increasing workforce challenges. As the state continues on the path of non-expansion, many hospitals and health care settings will lose out on talented front-line healthcare professionals who will go to any of the other surrounding Midwest states that have invested in their healthcare systems and already expanded Medicaid.

The bill is very important to the continued success of Hays Medical Center and Ellis County along with the Northwest Kansas Health Alliance of CAH hospitals within this region. As in most communities, HaysMed is the largest employer in the county with 1,500 Associates and plays a significant role in overall economic impact of Ellis County as well as Northwest Kansas. The State of Kansas lack of expanding Medicaid has cost HaysMed more than \$12,000,000 to date and continues to rise. These are dollars that are currently going to other states who have expanded Medicaid and have resulted in job creation and significant direct impact to the local economy. Those are true dollars that directly impact tax revenues, retail sales, and more importantly provides care for working Kansans that so desperately need it.

Hospitals remain committed to serving the communities we care for each day across our state. We are an economic driver of local economies and one of the largest industries in the state. 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 provided over \$14,000,000 in charity and uncompensated care in 2023.

On behalf of our board, staff, patients and especially those that we are yet to serve, I ask for your support of this critical piece of legislation that will expand access to care by providing critically needed resources to our healthcare system – ultimately resulting in healthier and more prosperous communities. We ask that the committee recommend favorably HB 2556/SB 355.

February 22<sup>nd</sup>, 2024

Senate Committee on Ways & Means and Public Health & Welfare  
State Capitol  
300 SW 10<sup>th</sup> Street  
Topeka, KS 66612

**Re: Health Forward Foundation Supports Expanding KanCare**

Chair McGinn and Members of the Committee:

On behalf of Health Forward Foundation (Health Forward), I submit this letter of testimony in support of expanding KanCare. Health Forward works everyday to support and build inclusive, powerful, and healthy communities in Kansas characterized by racial equity and economically just systems. We support expanding KanCare as it would make health care more accessible, cut health care costs and create jobs for Kansans.

Currently, approximately 260,000 Kansans across the state, in rural and urban communities alike, do not have health care coverage. Many of them are hardworking people in high impact jobs that earn too much to qualify for KanCare but too little to purchase health insurance in the marketplace. Expanding KanCare would make 150,000 of those Kansans currently in the coverage gap eligible for coverage that is affordable to them.

Expanding KanCare will not only make healthcare coverage more accessible and affordable to Kansans, it is economically beneficial to the state. These 150,000 potentially qualifying individuals are still receiving care that is being borne by these individuals, hospitals, clinics and businesses at costs far exceeding what the KanCare program provides. Further, any costs that would inure to the state to support the expanded program would be offset by savings and the recoupment of federal dollars Kansas is already paying into the program with no benefit. Instead, the state has forfeited these dollars to other states that have expanded Medicaid and lost nearly \$7 billion dollars as a result. This is money that could have prevented the closure of 8 rural hospitals since 2014, that could protect many more Kansas hospitals at risk of closure, and that would support the creation of 23,000 jobs in health care and other fields during a time of severe workforce shortage.

Health Forward asks legislators to heed the will of nearly 80 percent of Kansas who support KanCare expansion and vote yes to expand KanCare. Expanding KanCare makes good economic sense and would improve health care access and health outcomes. Please feel free to reach out to me at mbryantmacklin@healthforward.org if you have any questions or requests for additional information.

Respectfully,

*McClain Bryant Macklin*

McClain Bryant Macklin, Vice President – Policy and Impact, Health Forward Foundation

**OUR  
PURPOSE**

*Every day we work to support and build inclusive, powerful, and healthy communities characterized by racial equity and economically just systems.*

## Medicaid Expansion Testimony for KS House and Senate, as published 2/28/24 in the Kansas City Star

Richard Hellman MD, FACP, FACE

Past President, American Association of Clinical Endocrinologists

Past President, Metropolitan Medical Society of Greater Kansas City

4900 W 112<sup>th</sup> Terrace

Leawood, KS 66211

More than ten years ago, I was asked by the Executive Director of the Kansas Health Insurance Association for advice as to how to deal with the costs of caring for the persons with Diabetes who were in the Kansas High risk Pool Insurance program. At the time, the costs of care for these Kansas citizens were so high as to make the high-risk insurance program unsustainable. Why me? I am a physician and a clinical endocrinologist, who specializes in diabetes and provided healthcare for many patients from Kansas and Missouri. My team and I had published data showing how our practice had reduced death rates and kidney failure rates in those patients with diabetes. Also, I was involved nationally in multiple efforts to improve diabetes care for all patients with diabetes, and today, I continue to advise national organizations regarding optimal diabetes care. For more than twenty-five years, I have had the privilege of providing advice to both Republican and Democratic administrations in Washington DC as well as to many national groups involved in these worthwhile endeavors.

The advice I gave was simple. Improve early access to quality diabetes care. Diabetes is a serious disease that costs the nation more than 400 billion dollars annually, and it is most expensive when care is delayed. In my more than fifty years as a specialist in diabetes care, it has almost always been the case that if people do not have access to affordable care, and have limited means, particularly if they are uninsured, they will choose to feed their family and keep a roof overhead first and neglect their health care, with devastating consequences to themselves. One of the reasons why the pooled risk insurance program was not going to survive, was that it was providing too little too late. Waiting for people to get sick enough that they are uninsurable by private insurance makes no fiscal sense and from a medical perspective is exactly the wrong way to get a good outcome. Good care for the person with diabetes is early care, which in most cases can prevent the complications that create a downhill spiral that in many cases, leads to suffering, disability, and premature death, as well as high costs.

Today, Kansas is involved in a debate on the expansion of Medicaid. If the opposition to expansion is a fear that it will cost Kansas more, the fear is misguided. Diabetes care is far less expensive if care is given early. Medicaid expansion will increase the likelihood that care will be available earlier in many other chronic diseases, and just as in diabetes care, many disorders, including both cancer and cardiovascular disease, are disorders where prevention, early diagnoses, and early treatment saves not only lives and health, but reduces costs.

One of the many areas where our health care system fails our citizens is in the health of our unborn children and mothers. Our nation has among the very highest infant and maternal mortality rates in the world. One of the key reasons is lack of health care access beginning before the woman become pregnant as well as early in the pregnancy, particularly among those with chronic conditions such as diabetes. Again, the remedy is early access to quality care. The benefit is impossible to overstate. Early care can reduce birth defects in an unborn child with a diabetic mother by up to 80% and reduce the risk of having a stillborn baby by up to 90%.

If preserving life, particularly of the unborn, is as important to the reader as it is to me, the easier the access to health care, and the broader it is, the more likely it is to be timely and successful. In Kansas not only is a lack of Medicaid expansion devastating to women, and to all those with chronic illnesses, but expansion of Medicaid in Kansas will help keep the rural communities of Kansas intact. The rural

**Medicaid Expansion Testimony for KS House and Senate, as published 2/28/24 in the Kansas City Star**

hospitals in Kansas need the funds that will accrue from Medicaid expansion, which in many situations are closer to the real costs of care than many private insurances. Medicaid expansion in Kansas will provide this and reduce the costs of care as well. Medicaid expansion in Kansas is one of those instances where doing what is right from a moral point of view is both scientifically sound and saves money. I hope we can get Medicaid expansion passed this session of the legislature.

March 16, 2024

Hello committee members,

Thank you for the opportunity to provide testimony in support of Medicaid Expansion. Kansas is one of ten states in the U.S. that hasn't yet expanded Medicaid. All of our border states – Missouri, Oklahoma, Nebraska and Colorado – have expanded Medicaid. It's time we match our neighbors. Expanding Medicaid will create jobs. Nearly 23,000 new jobs would be created in the first full year of expansion. In addition to health care jobs, expansion would generate job growth in other industries, including retail and construction. How can we argue about job growth for our state? Please support expanding Medicaid.

Thank you,  
Jory Hennelly  
Shawnee

Molly Henson  
Regarding SB 355 and HB 2556  
March 15, 2024

My name is Molly Henson and I am a student at the University of Saint Mary studying social work. I am writing here today to testify in favor of Medicaid expansion in Kansas.

I originally grew up in Texas, where government assistance is very strict and not openly talked about. However, my father was proud enough to share his story on government assistance. He, like many Kansans, grew up in turner Kansas below the poverty line. His father was abusive toward him and his mother, causing his mother to be the sole provider for my father and his sibling. Because of this, my father grew up with lots of government assistance, through SNAP, Medicaid, and any other government resources that helped push my father toward sustainability. Even though my father grew up in poor conditions, he knew that there was a better life out there and pushed to give that to his children, myself, and my brother. My father, who leans conservative and Republican, still fights for Government aid expansion in Texas through every election available. My father was also a teacher for 15+ years and typically taught in poorer areas of the district, where gang violence was high, and the socioeconomic status was low. Through his teaching experiences, he has taught me that there are so many people in need of care but are unable to get it and that it is my job, as someone who has privilege and a voice, to advocate for these people. My father has seen countless children go to school sick, wearing blankets instead of jackets, because their families couldn't afford to go to a doctor. This is an experience that no one should have. Healthcare is a human right that should be allowed to everyone, regardless of their situation.

I urge the House and Senate to move forward with expanding Medicaid in Kansas so that families and children don't have to have the same suffering that is seen in Texas. I Thank you for reading my testimony and hope you continue to think about the vulnerable population you serve.

Respectfully, Molly Henson

March 17, 2024

My name is Dave Herdman and I live in KCK. I would like to voice my support for Medicaid expansion in Kansas.

I am retired but am an active Ambassador for Harvesters, our food bank that covers eastern Kansas. I also volunteer for the Alzheimer's association in Kansas. I've been doing these for over ten years.

I've been to the Capitol to discuss with representatives there about Alzheimer's effects on all of our Kansas friends.

I see the population in many parts of our states aging and needing help with this and other illnesses and with a lack of nutrition in their diets.

At the same time I see access to that lifesaving health care getting further away from them.

Please expand Medicaid to protect our aging rural population and get lifesaving care to them.

Thanks for listening

Dave Herdman  
11704 Delavan Ave  
Kansas City KS 66109

March 14, 2024

Hi, my husband and I are in our 70's and collecting social security. We are currently on Medicare but that could change. I am worried that if we need Medicaid in the future that we would have to sell our home in KS and move to one of the 40 other states that would help us with the medical care we would need. It's a shame that Kansas is a hold out and the states we are keeping company with are an embarrassment.

Fran Hess  
12320 Pembroke Lane  
Leawood Kansas 66209

March 15, 2024

I urge you to consider expanding Medicaid in Kansas for the following reasons:

Public support:

- 80% of Kansas favor expansion.
- Supporting Medicaid expansion aligns with what people want and demonstrates a commitment to improving the health and well-being of all Kansans.
- 41 other states have already expanded Medicaid.

Economic benefits:

- Kansas has lost nearly \$7 billion in additional federal funding because we refuse to expand Medicaid.
- Expansion would inject significant federal funds into Kansas, creating jobs and stimulate economic growth in the healthcare sector.
- It would also reduce uncompensated care costs for hospitals and healthcare providers, alleviating financial strain on the state's healthcare system.

Better health outcomes:

- Access to Medicaid coverage leads to better health outcomes for Kansans, including lower rates of mortality, improved management of chronic conditions, and increased preventive care utilization.
- Rural Kansans drive hours to access care or aren't getting care because rural hospitals have closed.
- Medicaid expansion would help reduce health disparities by providing coverage to low-income individuals who are disproportionately affected by barriers to healthcare access.

As someone who works in employee benefits - I speak with employees regularly who have difficulty finding providers or choose not to access care because they can't afford it. Medicaid expansion supports the health of thousands of Kansans and would also help our healthcare providers - we should be doing everything we can to make it easier and more affordable to access healthcare.

Thank you,  
Amy Hill  
Olathe, KS

Alliance for a Healthy Kansas, Committee Chairs, and members:

My name is Dr. Evelyn Hill, and I am a voter in Wyandotte County and Commissioner of the Fourth District of the Unified Government of Wyandotte County. I urge you to support the Medicaid Expansion bill by Gov. Laura Kelly that ensures uniform access to healthcare for all Kansans.

Wyandotte County is the most diverse county in Kansas. Hispanic and Black Kansans are more likely to live in the coverage gap. Current statistics report that 8,713 uninsured Wyandotte County residents would become eligible for Medicaid Expansion if enacted, creating 2,642 new jobs. Kansans who live in frontier counties and in the southwest part of the state are also more likely to live in the coverage gap. Expanding Medicaid allows all low-wage Kansans access to affordable health care, regardless of their race, how much money they make, or what their ZIP code is.

Further, expanding Medicaid reduces health care costs for everyone. When low-wage Kansans can't get health coverage, that means more in emergency room visits and crisis treatment for physical and mental health needs. When hospitals and health care providers aren't compensated for services they provide, a portion of those additional costs are passed on to everyone through higher prices, meaning we all pay more out of pocket and through insurance premiums.

Medicaid Expansion supports a healthier work force. Most Kansans in the coverage gap work at least one job, but either aren't offered employer-based health insurance, or can't afford it. Those who are not working are often caretakers or are unable to work because of their own health conditions. When more people have access to the physical and behavioral health care they need, there are more workers healthy enough to re-enter or remain in the workforce.

The expanded healthcare opportunities for families who have experienced traumatic experiences such as a victim of crime or extended services for hospice cases is so needed in our community. One family, we know about, has a daughter who saw her father get shot and killed. She needs extended services for mental wellness and emotional care. Her mother works but is challenged with four children and cannot afford the cost of employee benefits to cover the cost for these needed mental health services. Others who have limited insurance that does not include hospice care is tragic. Hospice allows both the family and patient to prepare for the transition. Cancer patients often cannot afford their medicine or therapy or even the surgery that could directly cut the cancer out of body is limited because of insurance. Expanded healthcare would be a way to transition to health and a better quality of life.

Increased and expanded healthcare also preserves and strengthens rural communities. For Kansans in outlying communities, accessing health care when and where they need it is becoming a significant challenge. When hospitals in rural communities close, not only do residents struggle to get care, but the community loses good-paying jobs.

Expanding Medicaid would help ensure rural Kansans get the care they need while also boosting their local economies.

Please vote to support access to healthcare for both urban and rural Kansans. The vibrancy and well-being of our state depends on it.

Respectfully submitted,

Dr. Evelyn Hill  
Commissioner Fourth District  
Unified Government of Wyandotte County,  
Kansas City, Kansas



**Don Hineman Farms**  
116 S. Longhorn Road  
Dighton, KS 67839  
620-397-3242  
don@hinemanfarms.com

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March 20, 2024

Don Hineman  
Retired Member of Kansas House of Representatives, 118<sup>th</sup> District  
Proponent Written-Only Testimony on SB 355

Senate Joint Committee on Ways and Means and Public Health and Welfare

Chairs Billinger and Gossage and members of the Committees:

Thank you for the opportunity to provide testimony in support of SB 355.

During my time as Chair of the House Committee on Rural Revitalization the committee conducted numerous hearings to identify the challenges facing rural citizens and communities. At the conclusion of the hearings the committee identified 1. access to affordable, quality healthcare, 2. access to highspeed broadband, and 3. adequate affordable workforce housing as the three critical issues constraining growth and vitality in rural Kansas.

Since then, progress has been made regarding broadband, but healthcare and housing still loom as daunting obstacles. The proposal before you today provides an opportunity to make tangible progress on healthcare, not only for rural residents and not only for Medicaid recipients, but for all Kansans.

As a Kansan who depends upon the rural healthcare system for myself and my family, I fear the loss of more rural hospitals as their economic viability becomes less assured. I am concerned by the challenges that rural healthcare providers (and all Kansas healthcare providers) face in recruiting and retaining employees while in all of the states neighboring Kansas, healthcare providers are operating with the infusion of cash provided by expansion. And I am tired of the tax dollars of hardworking Kansans going to pay for that cash infusion for our neighboring states and thirty-six others which have already adopted expanded Medicaid.

This isn't just about providing access to Medicaid to Kansans who truly need the help. It is about improving the economic vitality of Kansas healthcare, which in turn will benefit local communities and the Kansas economy. With a reasonable work requirement, this revenue-neutral proposal just makes sense. And while it won't be the final solution to the problems it seeks to address, it will point the way to a better path forward.

Kansas has delayed taking this step for far too long. This proposal just makes sense, and I urge its adoption.

**March 15, 2024**

**Testimony for Senate joint committee on Ways and Means and Public Health and Welfare,  
and the House Health and Human Service Committee.**

**NAME:** Amy Hinrichs

**TITLE:** Kansas resident

**EMAIL ADDRESS:** aloramy.hinrichs@yahoo.com

**BILL NUMBERS:** HB 2556 and SB 355

**PROPONENT, OPPONENT, or NEUTRAL:** Proponent

**ORAL or WRITTEN ONLY TESTIMONY:** Written Only

Dear Chair & members of the committee,

I am writing to voice my support for HB 2556 and SB 355.

I believe it is fiscally responsible to accept federal money to help with health care costs.

Medicaid expansion will benefit Kansas financially in the following ways:

1. Passing Medicaid expansion will not cost Kansas a cent. This is money that can go toward other important programs such as public schools or tax cuts.
2. Rural hospitals need this money to survive. Not only will the money help 150,000 Kansans who need medical assistance, but it also helps everyone who provides the medical assistance (doctors, lab workers, janitors, nurses, etc.) even restaurants and hotels near the hospitals. Eight rural hospitals have closed while Kansas waited for Medicaid expansion to pass. There are thousands of people directly impacted by these closures.
3. When one person doesn't have health insurance, everyone else must pay for it. Most people without insurance wait to seek help until they are in bad health. When they do finally go, they go to the emergency room. This has a high price tag that must be paid by someone. That usually means hospitals raise the price for other patients. I don't want to pay more out of my pocket for healthcare, especially when it isn't necessary.

The people of Kansas send representatives and senators to legislate for the good of all Kansans. Passing Medicaid expansion is literally taking care of all people in this state. It is especially critical for many Kansans that live in rural areas. Eight hospitals have closed, putting real people in emergency situations far away from help. Passing these bills will not cost the state anything, but it will reap huge benefits. 80% of Kansans want this to be passed. It isn't even a partisan issue. It is a no-brainer to pass this. Please take this opportunity to do what is right for Kansas.

Again, I ask you to support HB 2556 and SB 355.

Amy Hinrichs

Olathe, KS

Hello Senators and Representatives.

I am a member of the Kansas Silver Haired Legislators (SHL). We advocate for seniors. One of our primary issues is MEDICAID EXPANSION. We want that to be an issue for you too.

The Silver Haired Legislature represents over 600,000 Kansans, 60 and older, and we vote. At our legislative session this past October, our delegates unanimously voted to advocate for MEDICAID EXPANSION. The Kansas Health Institute estimates that 14,000 Kansans between 60 and 65 would benefit from expansion. Our members are in all 105 counties and will be watching which legislators support expansion.

In support of MEDICAID EXPANSION, please know that Kansans overwhelmingly want the issue to be debated and voted upon.

It is estimated that 150,000 Kansans, and some of these are from your county, would benefit from MEDICAID EXPANSION. Most of these are of lower income and cannot afford private insurance. Some have great physical and mental health issues and cannot support steady employment. They want to be productive. What happens to you or your family when it becomes your need?

Please be supportive of your fellow Kansans/constituents and support MEDICAID EXPANSION. The entire SHL as well as the six Johnson County SHL members do.

Thank you.

Katy Hoffman  
First Vice President, SHL  
Chair of Johnson County SHL



## ALLIANCE FOR A HEALTHY KANSAS

Joint Senate Committee on Ways and Means and Senate Committee on Public Health and Welfare

SB 355 Testimony

April Holman, Executive Director

Alliance for a Healthy Kansas

Wednesday, March 20, 2024

Thank you for allowing me the opportunity to provide testimony in support of Senate Bill 355, Governor Kelly's 2024 bill enacting Medicaid expansion.

My name is April Holman, and I am the Executive Director of the Alliance for a Healthy Kansas. The Alliance for a Healthy Kansas is a nonprofit, nonpartisan organization centered around increasing access to affordable health care for all Kansans. We facilitate a broad-based statewide coalition of organizations and individuals that have come together to advocate expanding eligibility for Medicaid in Kansas. The Expand KanCare coalition includes more than 130 organizations representing business leaders, doctors and hospitals, social service and safety net organizations, faith communities, chambers of commerce, and advocates for health care consumers, among others."

Kansas has a health coverage problem. Tens of thousands of Kansans fall into the coverage gap and don't have access to affordable health insurance. Kansas has some of the strictest requirements in the country to qualify for our Medicaid program, KanCare. Expanding Medicaid will benefit 150,000 Kansans who otherwise may not have affordable coverage. It will also:

- **Reduce health care costs for everyone.** When uninsured Kansans can't get health coverage, that means more in uncompensated care costs. This means everyone pays more.
- **Protect Kansans from medical debt.** By expanding Medicaid, tens of thousands of Kansans will be able to afford insurance coverage, protecting many from medical debt and bankruptcy.
- **Support a healthier workforce.** Most in the coverage gap work at least one job but aren't offered coverage through their employer. When people have access to the health care they need, there are more workers healthy enough to re-enter or remain in the workforce.
- **Make Kansas more economically competitive.** Expanding Medicaid helps our state compete with our neighbors who have already expanded their Medicaid programs.
- **Help to preserve & strengthen rural health care.** Kansas has more rural hospitals at risk of closing than any other state our size. Expansion ensures rural Kansans can get the care they need while giving a boost to their economies.
- **Ensure uniform access to affordable health care for all Kansans.** Expansion allows all Kansans to access affordable health care regardless of their race, how much money they make, or what their ZIP code is.

Alliance for a Healthy Kansas, 700 SW Jackson, Suite 600, Topeka, Kansas 66603

While we share the Governor's support for Medicaid expansion, we must note our concern about one provision in the governor's proposal. Work requirements create a barrier to participation and result in the loss of coverage rather than effectively promoting work. The Alliance opposes work requirements as contrary to the goal of closing the coverage gap in Kansas. We therefore ask the committee to amend HB 2556 to remove the work requirement by striking New Section 3 beginning on page 2, line 13 of the bill and ending on page 3, line 12 of the bill.

Poll after poll shows that a vast majority of Kansans want to see eligibility for Medicaid expanded in our state. We respectfully urge the committee to advance HB 2556 favorably or without recommendation so that the issue of Medicaid expansion can receive consideration on the floor of the Kansas House, including a full debate and vote.

February 11, 2024

**To all Kansas Republican Members of the Legislature:**

This is simple.

The state of Kansas needs this.

The rural hospitals need this.

The rural residents need this.

Over 70% of Kansans are in favor of this expansion.

Pass the dang bill and take care of Kansans instead of pandering to your base of high rollers.

Please ..... Take care of your constituents.

--

Larry J. Horne

[larryjhorne@gmail.com](mailto:larryjhorne@gmail.com)

Cell: 913-219-0348

March 14, 2024

Proponent, SB 355 and HB 2556

**I am writing to express my strong support for the expansion of Medicaid in Kansas.** As a Kansas citizen who has gone without healthcare because I could not afford insurance when I was younger, I hope you understand how frightening it is to worry about whether you can afford medicine and still have enough left to pay for housing and groceries. I had a dear friend who took his life when, after 25 years working as a licensed electrician, he became disabled, could no longer do such physical work, and could not the afford private insurance that would have allowed him to take care of his health. He was a kind, lovely person, and the world is poorer for his absence. Had he received the healthcare he needed, it's likely he would have trained in a different field, been able to afford insurance, and lived the kind of live he deserved. HB 2556 and SB 355 would prevent 150,000 Kansans from being in a similar position.

**I firmly believe that Medicaid expansion not only improves access to healthcare for thousands of Kansans but also has numerous positive impacts on our economy and overall well-being.**

**One of the key reasons for supporting Medicaid expansion is its ability to lower healthcare costs for everyone.** When uninsured individuals seek medical care at emergency rooms and cannot afford to pay, the burden falls on hospitals, which often leads to increased costs for other patients. By expanding Medicaid coverage, we can mitigate these cost burdens, leading to more stable healthcare pricing for all Kansans.

**Moreover, Medicaid expansion has the potential to alleviate the strain on local budgets and taxpayers.** Currently, without expansion, counties and hospital districts in Kansas are forced to allocate more tax dollars to cover healthcare costs. By expanding Medicaid, these resources can be redirected towards essential services such as education, infrastructure, or even tax cuts, benefiting all residents of our state.

**Furthermore, the expansion of Medicaid has proven to be a catalyst for economic growth.** Kansas has missed out on nearly \$7 billion in federal funding due to our current stance on Medicaid expansion, while other states have reaped the benefits. Expanding Medicaid would not only inject much-needed federal dollars into our economy but also create approximately 23,000 jobs, addressing our healthcare worker shortage and providing employment opportunities for our citizens.

**Additionally, expanding Medicaid is fiscally responsible and revenue-neutral.** Contrary to misconceptions, there will be no additional cost for Kansas taxpayers. In fact, expanding Medicaid could lead to substantial savings for Kansas business owners, potentially up to \$80 million per year in healthcare costs.

In conclusion, Medicaid expansion is a win-win proposition for Kansas. It improves access to healthcare, lowers costs for everyone, stimulates economic growth, and is

fiscally responsible. I urge you to support Medicaid expansion and help ensure a healthier, more prosperous future for all Kansans.

Almost 80% of Kansans agree that we need Medicaid expansion. Thank you for considering our viewpoint on this crucial issue.

Sincerely,  
M Horowitz  
Lawrence, KS

March 15, 2024

We fully support Medicaid expansion and hope you do too! Actually we support Medicare for all! The amount of money companies and individuals will save would be more than enough to pay for health care for all through taxes. We are the only country that doesn't provide health care for EVERYONE! It's a human right!

Judy Houdyshell  
2515 Highway 77  
Lincolnvillle, Ks. 66858  
620-924-5532



# DCF Legislative Testimony

March 20, 2024

**TESTIMONY OF:** Secretary Laura Howard, Department for Children and Families

**TESTIMONY ON:** Medicaid Expansion Hearing in Senate Ways and Means/Senate  
Public Health and Welfare

## DEPARTMENT FOR CHILDREN AND FAMILIES | MEDICAID EXPANSION

Madam Chair and members of the Senate Ways and Means and Senate Public Health and Welfare Committees, thank you for the opportunity to provide written proponent testimony today on Medicaid expansion to the State of Kansas. As the Secretary for the Kansas Department for Children and Families, I stand in strong support of this legislation. For too many years, Kansas has left federal funds on the table, and left Kansas residents, employers and providers stranded while other states adopted expansion.

There is no doubt that Medicaid expansion is best for Kansas and Kansans –

- For **low-income Kansans** who struggle with the cost of health care, and either forego care, or are laden with medical debt and struggle to meet basic housing and food needs;
- For **physicians, mental health providers and rural hospitals** who have carried the load of uncompensated care; and
- For **employers**, who know that employees with access to adequate health care stay healthy and show up healthy and productive to do critical work each day in support of Kansans and the Kansas economy.

In our DCF offices across Kansas, we hear stories every day from families struggling to make ends meet who cite medical debt as a reason they have been driven into poverty. We also hear stories of families unable to access needed care. The inability to access needed health care means the parent is less likely to be at work regularly and to struggle to meet the basic needs of their families. This impacts the ability of employers to have a stable, healthy engaged workforce.

Medicaid expansion is no longer an experiment – it has been operational in many states for an entire decade – 10 years. Kansas can look at real data and real outcomes in making the expansion decision. We don't have to speculate on the impact – we have real evidence from states that have journeyed before us about the real impact of Medicaid expansion on work and family well-being, and on state child welfare systems. Here are just a few examples.

## IMPACT OF MEDICAID EXPANSION ON WORK AND FAMILY WELL-BEING

### Medicaid Expansion Increases Access to Health Coverage for Low-Income Workers

- **More than 24% of Kansas childcare workers would be eligible for Medicaid** if the state were to expand Medicaid. These workers are critical to supporting our youngest Kansans and ensuring Kansans have the necessary childcare to enter and remain in the workforce.

### Reducing Absenteeism and Increasing Worker Productivity

- Medicaid enrollees across multiple studies have shared that Medicaid **supports or improves their ability to work**. A study showed that approximately 84% of Medicaid enrollees said having Medicaid made it easier to work. Medicaid expansion **reduces absenteeism** by increasing access to preventative and behavioral health screenings, prescriptions, and treatment for chronic conditions.

### **Income and Financial Security**

- **Increases in payment of current and past due child support occurred in expansion states, equating to more than \$20 million in payments.**
- Several studies have shown a **reduction in medical debt and Chapter 7 bankruptcies** among low-income persons in expansion states.

### **Reducing Food Insecurity and Increasing Housing Stability:**

- Two studies have shown that Medicaid expansion has resulted in a **reduction in food insecurity** and reduced the rates of very low food security.
- In California, a study showed a **significant reduction in evictions** in the expansion population; another study across several expansion states showed **an increase in home ownership** in the expansion population.

## **IMPACT OF MEDICAID EXPANSION ON CHILD WELFARE**

### **Reports of child maltreatment in Expansion States have Fallen for All Age Groups Compared to Non-Expansion States.**

- First-time neglect reports for children under age 6 fell by 17.3 percent in expansion states. Repeat reports also fell for all age groups.

### **States expanding Medicaid have experienced reductions in foster care admissions due to Neglect compared to non-expansion states.**

- In expansion states there was a **32.0 percent reduction in foster care admissions related to neglect** compared to non-expansion states. If applied to Kansas, this would equate to more than 300 youth.
- Expansion also drove a **17.5 percent decrease in foster care admissions** for any reasons and a **23.3 percent reduction in readmissions.**

Thank you for the opportunity to provide this testimony in support of Medicaid expansion. Expansion is good for individual Kansans, Kansas families, Kansas health care providers, Kansas business, Kansas communities and the Kansas budget. Please follow the evidence and support Medicaid expansion in Kansas.

**Proponent Testimony on Medicaid Expansion (SB 355)  
Joint Meeting of the Senate Ways & Means and Senate Public Health & Welfare Committees  
Wednesday, March 20, 2024**

Chair McGinn and Members of the Committee,

Thank you for holding this hearing and allowing us a chance to provide proponent testimony on Medicaid Expansion, as contained in SB 355 – expanding medical assistance eligibility and enacting the cutting healthcare costs for all Kansans act. The Kansas Department for Aging & Disability Services (KDADS) administers services to older adults; administers behavioral health, addiction and prevention programs; manages the four state hospitals and institutions; administers the state’s home and community-based services waiver programs under KanCare, the state’s Medicaid program; and directs health occupations credentialing. As a state agency that serves vulnerable populations, our testimony will focus on how Medicaid expansion would help those populations.

Medicaid Expansion would increase quality of life and access to health care, not only for the aging but also the disabled population we serve. Many adults eligible under Medicaid expansion are struggling with chronic illness or complex health conditions making it difficult to maintain employment. Expanding Medicaid puts more money back into the pockets of eligible beneficiaries for things like bills and groceries.

Medicaid supplements Medicare costs by paying premiums, deductibles, and cost-sharing. It also fills in the gaps Medicare doesn’t cover for things like transportation to medical appointments and some medical equipment. For adults with disabilities with or without Medicare, Medicaid allows people to gain quicker access to coverage without waiting for a disability determination, which can take months to years. Disabled adults have more costly medical care and often need in-home services to sustain quality of life. Additionally, Medicaid covers close to 60% of nursing home residents and funds over half of long-term care services nationwide. Without Medicaid, many older adults would not be able to afford these services with Medicare alone.

If you consider PACE, where participants must be 55 years of age or older, those who pay out of pocket contributions may pay less or nothing at all for services depending upon their eligibility. Passage of SB 355 would increase PACE enrollment for those who couldn’t afford their portion previously, but who would now qualify for additional financial support.

KDADS administers the state’s seven Home and Community-Based Services (HCBS) waivers, which provide specific benefits outside of the standard Medicaid State Plan to targeted populations. While the waivers themselves would not be directly impacted by Medicaid expansion, there would be many benefits to the populations served by the waivers from Medicaid expansion.

Another population that SB 355 would assist are those with intellectual, developmental, or physical disabilities. Currently, while an individual is on the waiting list for HCBS waiver services, they could receive the standard State Plan medical coverage if their household is financially eligible. The waiting list is for access to additional specialized waiver services. Seventy percent (70%) of individuals on the Intellectual and/or Developmental Disability (I/DD) waiting list are currently receiving the State Plan services under KanCare. Once an individual

is offered a waiver slot, financial eligibility is determined by individual – not household – income. By expanding Medicaid, many people on the waiting list and in the 30% not currently receiving State Plan medical coverage may become eligible for that coverage for routine medical services, prescription drugs, and mental health services. The same is true for individuals on the waiting list for the Physical Disability (PD) Waiver and children on the proposed recipient list for the Autism Waiver.

Additionally, expanding Medicaid would help recruit and retain direct service workers (DSW) for individuals on all of Kansas' HCBS Waivers by providing access to the benefit of health coverage and access to healthcare. Many of these DSW do not receive benefits from their employers and fall into the Medicaid coverage gap that exists in Kansas due to lack of expansion. Based on a survey conducted in 2023, the average wage for DSW is \$15/hr which is not enough to qualify for subsidized health insurance through the federal Marketplace but too much for adult coverage through Kansas Medicaid.

Today, more than 8,950 Kansans are served on the HCBS I/DD Waiver. Kansas has seen a steady increase over the last decade of individuals waiting to receive services on the HCBS IDD Waiver. There are currently 5,240 people on the waiting list and that number has not dropped below 3,000 in the last decade. For the PD Waiver, there are currently 6,063 individuals receiving services and a waiting list of 2,382. The increased number of individuals on the waiting list for these waivers has lengthened the time people are waiting to receive waiver services.

In order to reduce the current waiting list for the I/DD and PD Waivers, having an adequate provider network and workforce is key. KDADS has been focusing on maintaining and expanding the provider network for Home & Community Based Services (HCBS) to serve more individuals on the waiting list. Between years of limited increases to rates, the COVID-19 pandemic, and workforce shortages impacting every industry, there has been a noticeable impact on the provider network of HCBS Services.

Passage of SB 355 would be an additional, and much needed, tool in these efforts by providing health insurance coverage for many low wage DSW. This would not be a cost to the employer and would be a coordinated benefit for the DSW whose children are likely also covered by KanCare.

Over 250,000 Kansans live with Severe and Persistent Mental Illness (SPMI), which can be debilitating if not properly managed. If Medicaid were to be expanded in Kansas, an estimated 13,200 additional Kansans with SPMI would be eligible for coverage. While Kansas' robust Community Mental Health Center system does provide services to people who are indigent or lack health insurance coverage, prescription medication is often an important part of managing SPMI and those medications can be extremely costly out-of-pocket. Medicaid coverage would include prescription medication as well as therapy services. When SB 355 is enacted, the costs of covering those services to would be entirely recouped through cost savings, fees, and one-time federal funding.

Thank you for the opportunity to provide testimony and KDADS strongly encourages the committee to favorably pass SB 355.

Respectfully,



Laura Howard

Secretary, Kansas Department for Aging & Disability Services



## Mid-America Region

**TO:** House and Senate Committee Members

**FROM:** Sam Huenergardt, President & CEO  
AdventHealth Mid-America Region

**RE:** Medicaid Expansion

On behalf of **AdventHealth**, our nearly 4,000 Kansas employees are proud to provide excellent care by extending our healing mission at our hospitals in Shawnee Mission, Ottawa and South Overland Park and dozens of medical offices.

### **Improving Access to Care**

A strong health system is key to a strong and healthy economy. Expanding Medicaid in Kansas would accomplish that and help keep Kansans' health care costs from rising.

It's estimated nearly 150,000 Kansans fall into a health coverage gap, meaning they earn too much to qualify for KanCare but too little to receive federal subsidies to buy private insurance.

In Johnson County, it's [estimated](#) that expanding KanCare would benefit more than 6,500 individuals who are uninsured and would gain access to insurance. In the past two years, Kansas has had a [higher uninsured](#) rate than the national average. Having insurance is a determining factor on seeking health care or not. Many uninsured individuals only seek health care in the Emergency Department, when they are too sick and where health care costs are higher.

[Studies](#) have shown that while some individuals eligible for expansion do not work, they could be disabled, act as caregivers for a family member, work part-time or be at school. Most individuals eligible under a Medicaid expansion work in low-wage jobs. Adults who work below the poverty level often do not have access to employer-based insurance, or if it's available, it is often [unaffordable](#). The most common jobs among adults in the coverage gap are cashier, cook, waiter, construction, maid, retail and janitor. For parents, in some cases even part-time work may make them ineligible for Medicaid. Medicaid expansion would allow those individuals to seek employment while still having access to health insurance.

Kansas has a [high number](#) of hospitals at risk of closure. In October, Herington Hospital closed abruptly, Fort Scott's Emergency Department and other clinics and services have also closed. Medicaid expansion would assist rural providers and hospitals who are [more reliant](#) on public payers due to the vulnerable populations they serve.

### **Developing a healthier economy and workforce**

Medicaid expansion is likely to be budget neutral due to its positive economic impact — it's estimated that it could create 23,000 new jobs in Kansas. With only 10 states remaining to take advantage of Medicaid expansion, Kansas has left more than \$6.6 billion of taxpayer dollars on the table by not expanding Medicaid.

Expanding KanCare would not only save lives and reduce health care costs, but it would also help our state better compete with our neighbors who have expanded Medicaid: Missouri, Nebraska, Colorado and Oklahoma. Several of our facilities are just a few miles from the Missouri border and compete with the same labor force.

According to the University of Kansas' Institute of Policy & Social Research [2023 report](#), the Kansas health care sector contributes over 300,000 jobs and almost \$20 billion in labor income to the economy, including direct and multiplier effects. On average, every 100 jobs in health care industries support an additional 50 jobs in other Kansas industries.

Health care makes substantial contributions to the [Johnson County economy](#), employing more than 49,500 people directly and paying over \$3.8 billion in labor income. Health care employers provide about 10.6 percent of Johnson County's jobs and 10.4 percent of labor income.

Hospitals have been experiencing financial challenges due to inflation and the workforce crisis by continuing to pay for travel agency staffing, increased costs of supplies and pharmaceuticals without increasing reimbursement.

Most importantly, studies show that people who have insurance are healthier than those who do not. We know in our community, many who are uninsured will delay care and come to our Emergency Department at the sickest and most expensive level of care for treatment. Medicaid expansion will help provide our patients with the ability to receive care in the right setting and properly manage their health, because they have insurance.

[Research](#) has demonstrated that uninsured adults may leave health needs [untreated](#) until they become eligible for Medicare at age 65.

A patient in her 50's came to our Shawnee Mission hospital with a grapefruit sized tumor in her breast. She didn't have insurance or a primary care doctor who could have caught it at an earlier stage. Our team worked to get surgeons to donate time and the hospital donated resources and time for surgery and treatment. Unfortunately, it was too late, and she passed away. She knew something was wrong but put this care off because she feared the cost without insurance.

AdventHealth is committed to addressing the social determinants of health for our patients by connecting with resources for food security, transportation, etc. Our social workers do an excellent job with our community partners to address issues, but they often encounter a roadblock to better health: access to insurance.

As we face a continued general workforce shortage, when more people have access to needed physical and behavioral health care then there will be more workers healthy enough to re-enter or remain in the workforce.

We ask for your support for Medicaid expansion in Kansas. Expansion will result in an immense impact to AdventHealth and the communities we serve.

AdventHealth's mission is *Extending the Healing Ministry of Christ*, and caring for the uninsured is a part of that healing mission. Thank you to this committee for your service and leadership to improve health care access in Kansas.

March 5, 2024

My name is Barbara Humpert. I am 71 years old. I was born in Stockton KS. My father was a Republican County Attorney in Rooks County for many years. As a friend and supporter of Bob Dole, my father raised his children to believe in taking care of your community.

I attended Kansas University and married another KU student. We located in Winfield KS in 1975. I was a young nurse and my husband was a retail pharmacist. We raised 3 children while working in healthcare jobs. I started working in Wm Newton Hospital in 1975. I am still working in that hospital.

I have been horrified by the lack of caring by the Republican Party I was raised to believe in, for rural healthcare. I see hospitals across Kansas closing with complete indifference by our elected Kansas Republican Representatives and Senators. Rural hospitals save lives. We work for less money in more difficult circumstances to care for our communities regardless of a patient's insurance status. It is not the Medicaid patients that we lose money on. It is the hard working class people who work low paying jobs and can not afford insurance.

Kansas must expand Medicaid before more rural hospitals close and leave communities without a local hospital. I believe in my local hospital, but we do not get any support from our elected officials. Rural hospitals employ good people who add to the local economy and help the school systems. I will never vote Republican again unless I see some sort of action in Topeka. Please do not let more rural hospitals close in Kansas. Show some caring for the people of Kansas. I do. I am old, but I still work because I care.

Barbara Humpert

February 23, 2024

Written Testimony from K Charles Hunter, 13111 131<sup>st</sup> Road, Winfield, Ka

To Whom It May Concern:

I am writing in support of HB 2556 and SB 355, legislation to expand Medicaid in Kansas. Personally, Medicaid Expansion will not directly affect my eligibility for health insurance, as I am retired and on Medicare plus a supplemental health insurance policy. However, there are several critical reasons why this legislation will affect me indirectly.

1. **Roughly 5% of our state's working population, 150000 men, women and children, is without access to affordable health care.** This legislation provides for that. Medicaid Expansion is the right thing to do for improving the quality of life for this segment of our population. I am a strong supporter of the separation of church and state, but as a reminder to all with a Christian background, the biblical "least of these" passages in the Book of Matthew are pertinent to this debate and discussion.
2. **Somewhere between 70-80% of all Kansans support Medicaid Expansion.** Experiences in the 40 other states that have accepted federal funding for Medicaid Expansion have shown that it has the potential to grow our economy, create jobs and reduce taxes. The bottom line is that not one of the 40 states implementing the program has withdrawn.
3. **Medicaid Expansion will strengthen rural health care and protect rural hospitals, both of vital importance to Kansas.** Since the implementation of the Affordable Care Act, 8 of our rural hospitals have closed. Kansas currently has ~100 rural hospitals, with around 900000 Kansas residents considered as living in rural areas. Our state is at risk of losing 58 of our rural hospitals, with 27 of those at risk of immediately being forced to shut down operations. Our own local hospital, William Newton in Winfield is a wonderful modern, regional facility. However, William Newton is in financial difficulty. Although in 2023 our hospital was able to reduce its monthly losses, it still ended 2023 with an operating loss of just over \$2.5 million. I can't imagine what the loss of this facility would mean to our community.

Thank you for this opportunity to have input. I trust that our State Senators and Representatives will thoroughly, objectively and fairly evaluate the proposed legislation and do what is best for the people of Kansas.

Respectfully submitted, K Charles Hunter

February 26, 2024

Dear Kansas Legislature,

I am simply a citizen, a taxpaying citizen, a retiree, in favor of expanding affordable health care.

Nearly 165,000 Kansans struggle without access to affordable health care because the state legislature continues to fail to expand KanCare.

According to research from the AARP's Public Policy Institute, expanding KanCare would provide health coverage for an estimated 20,219 uninsured Kansas residents aged 50-64 who were living at or below 138 percent of poverty in 2010.

Kansas is one of only 10 states that has yet to expand KanCare health care to hard-working residents who earn less than \$18,000 per year. These Kansans include parents, farmers, and small business employees. They all struggle without access to affordable health care.

Every state that borders Kansas has expanded Medicaid health care. KanCare expansion under the ACA will both expand access to health care.

Just this morning, I heard on the news that "Kansas can't afford to expand medicaid." Two simple questions: How can it be cheaper to have them go to the ER? How can 40 other states afford it?

Kansans are overwhelmingly in support of medicaid expansion. It is time that we are represented in Topeka.

Sincerely,  
Lynne Hunter  
13111 131st Rd  
Winfield, KS

March 15, 2024

Dear Legislative Committee,

I was so glad Chairwoman Landwehr agreed to hold a hearing on Medicaid Expansion on HB 2556/SB355. I have always had health insurance with my employer, but I firmly believe health insurance should not be tied to a job. As a teacher, I still paid deductible, co-pays and in some cases part of the premium.

Since over 70% of Kansans support Medicaid Expansion, I support helping workers whose income is “low” and they really need assistance to maintain health and dignity. Schools will benefit as well as many services for the special needs children require help from the healthcare industry; professionals such as PTs, OTs, Speech Path, Psychs, nurses for feeding tubes, etc. support IEPs of our students. As a “senior” I worry about my future in the skilled nursing center that there will be staff to care for me-and they need to stay healthy for us! Our rural hospitals need Medicaid Expansion to stay open, which is jobs, jobs, jobs.

I attended a KPERS Board of Trustees meeting in January, 2024. Their actuary presented “health trends” and one chart they used was the states with the best longevity. Kansas surprised me at being in the middle. I believe in the heart of America, we ought to be the healthiest, but we are NOT.

Chris Huntsman

4645 NW 50th CT

Topeka, KS 66618

To: Kansas Senate Joint Committee on Ways and Means & Public Health and Welfare and  
Kansas House Health and Human Services Committee

Re: Written Testimony in Support of SB 355 and HB 2556

Date: March 20, 2024

Thank you for the opportunity to submit written testimony in support of SB 355 and HB 2556 on behalf of members of the Hutchinson/Reno County Chamber of Commerce.

The largest employer in Hutchinson is the Hutchinson Regional Healthcare System, contributing to the health and vitality of our own economy. However, like many hospitals in our state, Hutch Regional has struggled due to millions of dollars of unreimbursed care, not to mention the many other healthcare clinics and service providers in this sector who would benefit. We stand with them to ask for your support for the Cutting Healthcare Costs for All Kansans Act, which would accomplish several things.

1. It protects rural hospitals, supporting jobs and healthcare in rural communities.
2. It cuts healthcare costs for Kansas families, and it would provide greater access to those who need it most.
3. Expanding coverage lowers costs for everyone because when people go uninsured in Kansas, it leaves the rest of the consumers paying for it.
4. Lastly, Medicaid Expansion will actually strengthen our economy by bringing federal dollars back to our own taxpayers rather than it going to other states.

According to recent statistics, nearly 1,600 uninsured low-income residents of Reno County would gain health coverage and over \$10 million of annual health care spending will be captured. Currently uninsured residents are either going without care or leaving bills with our current health care providers as uncollected.

Expanding KanCare would also provide health coverage to the residents of Reno County who fall into a coverage gap – those who earn too much to qualify for the current program, but too little to get financial help to obtain private coverage. This bill will allow them and nearly 150,000 Kansans to access preventive care to help them stay healthy and avoid costly ER visits, giving them more financial and emotional wellbeing, knowing they have coverage.

This bill is a step in the right direction for uninsured Kansans, for community hospitals and rural communities, and to help give peace of mind to those who desperately need care, but cannot afford it and certainly cannot afford the financial perils of going uninsured.

We applaud the efforts to consider the importance of expanding KanCare for our State and communities and urge you to support this measure. Thank you for your favorable vote on this issue of great importance to Kansas.

Respectfully,

Debra Teufel, President/CEO

**connect. grow. play. explore.**

March 17, 2024

RE: SB 355 and HB 2556

These bills lower health care for 150,000 Kansas allowing affordable health care.

Medicaid Expansion would give us tax cuts, funds public schools (which is very much needed), and benefit improvements for infrastructure in our state.

Our rural hospitals would be benefited, jobs are supported, and rural communities will be able to have adequate health care.

I believe 80% of my fellow Kansans want Medicaid Expansion, however, a few extremists in the legislature continue to stand in the way of expansion.

It has been reported that 8 hospitals have closed since 2014 and more are at risk of closing by not expanding Medicaid.

Some of my fellow Kansas have to drive long distances to get the basic care they need, and medical care givers are leaving the state causing a growing shortage.

Our state has lost about \$7 billion dollars of federal funding by not expanding Medicaid.

I'm told Medicaid Expansion can create 23,000 jobs, ending health care worker shortages in our state.

I feel our state business owners would benefit also by saving \$80 million in health care costs by Medicaid Expansion.

Respectfully submitted,

Barbara A Ikerd

2738 N 88<sup>th</sup> Terrace

Wyandotte County

Kansas City, KS 66109

March 15, 2024

Please consider expanding Medicaid for the state of Kansas. I understand both sides of this issue. But, surely, providing this crucial assistance to our neighbors, many of whom have suffered for years without the benefits of Medicaid, must compel you to consider how helping the have nots in our state makes all of us better, as a citizenry and a state. I have worked with many folks who have not had the benefits of Medicaid. They deserve the benefits those of us who are more fortunate enjoy. The dollars which our state will receive from the federal government will allow our state to make the improvements our state needs to be a prominent and successful member of the United States. Please do us proud by expanding Medicaid for the state of Kansas.

Thank you,

Joan Jacobson  
10729 Horton St.  
Overland Park, KS

March 15, 2024

Dear Chairman and committee members,

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

As a retired Supply Chain executive, I make business decisions based on the financials associated with an idea, as well as, the impact on people. Medicaid Expansion meets both of those criteria - financially it makes sense AND it's good for Kansans. In fact, 40 other states have already found that to be true and have expanded Medicaid.

Financially, Medicaid Expansion is good because:

1. The bills being heard are cost neutral. These bills will not raise taxes.
2. Approximately \$700MM in annual federal funding will flow into Kansas.
3. In addition, Federal law provides for a signing bonus for states that have not expanded Medicare yet resulting in approximately \$450MM flowing into Kansas during the first two years.
4. Not only is Medicare Expansion good for the individuals who will now be covered, but it is also good for the rest of us. Marketplace premiums are 7% lower in states that have expanded Medicare vs states that have not.

From a human perspective, Medicaid Expansion is good because:

1. It will cover 150,000 Kansans who fall in an insurance coverage gap. These individuals are currently at risk of going bankrupt due to medical debt. The vast majority of these individuals are hard working people in small businesses in the service, construction, or retail industries. Their employers are unable to offer affordable insurance.
2. It will also help prevent rural hospitals from closing. 59 rural hospitals in Kansas are at risk of closing. When rural hospitals close, individuals are reluctant to travel further away for necessary care impacting their quality of life and potentially longevity.

As professionals, it's not often that we have an opportunity to do something that is both this good financially and this great for people too. Medicare Expansion is one of those ideas. Please support Medicaid Expansion.

Thank you,  
Michele M. Jaderborg  
Shawnee, KS

## 2024 Testimony for Medicaid Expansion

Dr. Keith Jantz  
12504 Catalina Street  
Leawood, KS 66209

Notwithstanding the obvious medical benefits for our Kansas citizens and notwithstanding the benefits for sustaining rural Kansas hospitals, overwhelming evidence exists that extending Medicaid benefits to more Kansans would result in an improved overall economy for the state of Kansas as well as an improved economic status for many marginal Kansas residents. We need to move forward to make our state a better place to live.

Sincerely,

Keith Jantz, MD  
Retired Internist  
President of Retired Physicians Organization

Mary Lou Jaramillo  
10203 Edelweiss Circle  
Merriam, KS 66203

March 15, 2024

Senate Ways and Means Committee and the Senate Public Health and Welfare Committee

Housing Health and Human Services Committee

Re: Joint Hearing of KanCare (Medicaid) Expansion

Dear Chairperson and Committee Members:

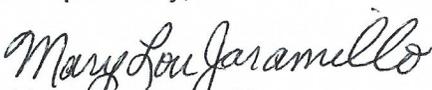
Thank you for the opportunity to provide written testimony in support of KanCare Expansion. My name is Mary Lou Jaramillo and I reside in the city of Merriam in Johnson County.

I support KanCare expansion because it is a means to affordable health insurance to 150,000 Kansas and hopefully reducing medical debt. Other overarching benefits include healthier Kansans, stronger and reliable workforce which makes Kansas more economically competitive. Another consideration is the positive impact on rural health care. I've read about the financial stress and closing of rural hospitals which in my mind is devastating to the human spirit and local economies.

I'm retired and appreciate having health insurance available through employment my adult life. Most of my service has been in the non-profit sector working among low-income and marginalized communities so I am aware of the hardships of many working uninsured individuals and their families. More than 33,000 Johnson County residents are uninsured and over 5,000 of those are children per Johnson County Health Department. This can be changed! Most Kansans are in favor of KanCare expansion.

I am asking for your vote in support of KanCare Expansion. It will make a positive difference to the lives of Kansans.

Respectfully,

  
Mary Lou Jaramillo

March 15, 2024

"Fall through the cracks" citizens include:

- Earn just enough income to disqualify for Medicaid, yet unable to meet basic monthly living expenses. No safety net for dental, mental, optical, scripts, physical health care: emergency, maintenance, or preventive.

Cannot afford co-pays, monthly payments for other insurances.

--Individual does not qualify for current Medicaid given age, marital status, income yet income, living expenses, medical safety net and/or actual needs are not compatible.

--medical providers, services, and sites of service are not easily available and/or accessible for patrons in this rurally based DK County due to increased closings shortage of personnel.

Respectfully,

Loretta Jasper  
Executive Director  
Neighbor To Neighbor Abilene



## JOHNSON COUNTY COMMISSION ON AGING

### Support of the Medicaid Expansion Hearing – Wednesday, March 20<sup>th</sup> Written Testimony Only

Dear Senators,

As members of the Johnson County Commission on Aging we are writing in support of Medicaid Expansion in Kansas.

The Board of Johnson County Commissioners (BOCC) established the Commission on Aging to advise the BOCC on services and programs for the over 130,000 adults, age 60 and over in Johnson County. We support the expansion of Medicaid for Kansans that are in the coverage gap, typically those working part time jobs or at companies that do not provide healthcare. These working individuals earn too much money to qualify for KanCare but too little to receive federal subsidies to buy private insurance. We acknowledge that Kansans over 65 qualify for Medicare. However, if they are unable to obtain affordable insurance prior to age 65 they enter Medicare with health conditions that could have been addressed earlier.

Kansas hospitals provide nearly \$1.2 billion in uncompensated care. These costs are passed on to patients with insurance. Johnson County provides \$7 million of charitable care through mental health and emergency services. This is covered by property taxes which could be reduced if Medicaid were expanded. Individuals without insurance use emergency rooms, the most expensive care option for medical treatment.

When rural hospitals close those patients come to larger cities, including the hospitals in Johnson County, for care. Expanding Medicaid will help rural and urban areas of Kansas. In addition, Missouri borders Johnson County and because they have expanded eligibility for Medicaid, they can pay higher wages making it harder for Johnson County hospitals to compete for staff. Additional employees in the medical field in Johnson County would be an economic boost for all of Kansas.

Medical debt is the leading cause of bankruptcy in the United States. Providing more Kansans with health insurance will reduce this risk of bankruptcy.

We have focused on the financial benefits of Medicaid expansion. More importantly, giving additional Kansans access to affordable preventive care and earlier intervention treatment would result in a healthier population. Our fellow Kansans deserve this care, and we ask you to pass Medicaid expansion this session.

Sincerely,

Cindy Green  
Commission on Aging  
Chair

Julia Meyers  
Commission on Aging  
Legislative Chair

#### **Executive Committee**

Cindy Green, Chair  
John P. Smith, Vice-Chair  
Mary Estrada  
Ben Harber  
Julia Meyer  
Rob Givens

#### **Members**

Carol Feaker  
Dan Goodman  
Ruth Hopkins  
Catherina Kelly  
Andrea Leavitt  
Dana Markel  
Becky Parrott  
Trinette Waldrup

#### **KS Legislature Liaison**

Representative,  
Jarrod Ousley

#### **Board of County Commissioners Liaison**

Commissioner,  
Janee' Hanzlick

#### **Area Agency on Aging**

Tim Wholf,  
AHS Director  
Carol Colnar,  
AAA Deputy Director

#### **Area Agency on Aging**

11811 South Sunset Drive  
Suite 1300  
Olathe, KS 66061-7056  
913-715-8860/ Phone  
913-715-8825/ Fax

Area Agency on Aging

Elisabeth Johnson

Regarding SB 355 and HB 2556

March 15, 2024

My name is Elisabeth Johnson. I am a Kansas resident, an aspiring social worker, a daughter, and a sister. I am testifying in favor of Medicaid expansion in Kansas.

I grew up in a conservative home where government assistance was generally frowned upon. I believe this is a similar mindset of some Kansans and legislators, especially if you have never personally been affected by poverty or experienced a need for government assistance. While I have never personally had to face the intense fear and turmoil that comes from a lack of insurance, it is the reality of life for my sister.

My sister is six years older than me, so she has been out of the house and off my parents' insurance for a while. She and her husband have four beautiful children. All those children are covered under the current Medicaid eligibility. This is a great blessing, but my sister and her husband, although they are the caretakers of their children, do not qualify.

They make just enough money that they do not qualify for Medicaid, but, as my sister put it, to obtain private insurance through her husband's job for both of them would cost more than half his income. This is not something they can manage, so neither my sister nor her husband, who have four children who rely on them, are insured.

This means they don't go to regular check-ups at the doctor or dentist. They don't get routine examinations for any form of cancer, they don't see the optometrist, and they can't phone the doctor every time they get a cold that could potentially be something worse. These are luxuries you and I enjoy.

My sister and her husband have enough money to not "need" Medicaid according to the current eligibility, but not enough to afford a visit to the doctor for strep throat. That is the gap which Medicaid expansion in Kansas seeks to close.

As both an aspiring social worker and advocate for my sister and people like her, I urge the House and Senate to move forward with expanding Medicaid in Kansas. Thank you for your consideration and for reading my testimony.

Respectfully, Elisabeth Johnson

To our legislators:

I am one of the 8 in 10 Kansans who support KanCare expansion. We have 150,000 neighbors in Kansas who do not have access to affordable health care. They are not eligible for Medicaid and they do not make enough money to qualify for help in purchasing private insurance. They know they are one illness or injury away from becoming unable to work. They seldom get preventative care. If they do become ill, they wait until the situation is severe before seeking treatment.

As a retired social worker and a congregational volunteer, I have become aware of many people who fall in this gap. I am a member of Southern Hills Mennonite Church, Topeka. We have many people in our church neighborhood who fall into this gap. Refusing to help our neighbors is a moral issue. Jesus was a healer. He healed anyone in need, not asking them if they were worthy or industrious.

It is time to do the right thing. Many people of conscience are continuing to work for KanCare expansion. In Matthew 22: 37-39, Jesus said "Love your God with all your heart and all your soul and all your mind." This is the first and greatest commandment; And the second is nearly as important; "Love your neighbor as yourself."

Elvera Johnson

2650 SE Lake Terrace

Topeka, KS 66605

March 13, 2024

HB 2556 and SB355 expands Medicaid and lowers health care costs.

Expansion is a commonsense, middle of the road approach to providing health care to working Kansans.

There are many reasons that expansion should happen. One of those reasons is that it protects rural hospitals. I grew up in a small town in central Kansas and know about the absence of health care. Too many rural Kansas hospitals have closed! I can't imagine having a medical emergency and not having a provider available for miles. Closed hospitals affect not only individuals, but they also affect businesses in the area---the entire community suffers.

Expansion of Medicaid is the right thing to do, and expansion is supported by almost 80% of Kansans, regardless of their party affiliation.

Kansas has already lost an enormous amount of federal funding because Medicaid has not been expanded--money that Kansas could have used. Those who will benefit are your constituents. Health care is vital to ALL Kansans. I support expansion of Kancare and urge you to vote in favor of expansion.

Thank you for listening,

Karen I. Johnson  
4950 Adams Street  
Westwood, Kansas 66205

March 13, 2024

Kansas is falling behind our neighbors and our ability to care for our seniors, underserved populations, maintain our rural hospital network, and protect the most vulnerable in our communities is a growing problem that cannot be ignored. If we want our state to remain competitive we must act now. Our fellow Kansans are suffering and by taking these common sense measures to expand KanCare/Medicaid, we can change the healthcare outcomes for thousands of people. Please vote YES to expand Medicaid NOW!

Kyle Johnson  
Overland Park, KS  
66212

February 9, 2024

Dear Kansas Legislators:

I do lots of volunteer work in Leavenworth, at the homeless shelter, serving free community meals, providing rides to those who live in our food desert and can't get to the grocery store. Over and over I meet people who need healthcare, are working full-time, yet can't afford a car, avoid getting the healthcare they need because they can't pay the bill and will get turned over to collection agencies, and suffer from a variety of disabling conditions including open wounds, addiction, alcoholism, mental illness. One man who had worked at a local lumber company for 9 years, had his home, a pickup truck, and faithfully paid child support to his ex-wife, became ill, couldn't work for a month, couldn't pay rent, lost his home, and stayed at the homeless shelter, or sometimes slept in his truck, for almost 6 months while he saved up enough to afford rent and the deposit, all while continuing to pay child support. And to pay off his healthcare bills, because he had no insurance. This is wrong in so many ways. We can easily fix it, save the state money, help workers stay employed and housed. There is no down side to an expansion of medicaid to cover the working poor.

Linda Johnson  
2800 Maple Ave.  
Leavenworth KS 66048-4392  
[swlkj1@gmail.com](mailto:swlkj1@gmail.com)  
913-991-7958 (cell)

March 13, 2024

Having grown up in a town of 1,800 in Nebraska, I know the critical importance of a rural hospital, where my father, a family physician, worked for decades. The hospital in this small town is still there.

In Kansas, rural hospitals are struggling to stay open, as patients come in with no insurance and the hospital is required to treat anyone who needs care. So an indigent patient may not be able to pay for services, and the hospital passes on these costs to those who can pay. That is, those who have insurance coverage. Medicaid/KanCare expansion would clearly help these rural medical centers to stay open, so that residents are not forced to drive 40 or 50 miles for treatment.

So KanCare expansion is a win-win for everyone: for those who make just too much money to qualify for Medicaid, and for those who may be working, but not able to afford health insurance through their jobs.

And a majority of Kansans--about 80%--are in favor of KanCare expansion. And the state of Kansas is losing millions of dollars from the Federal government that is subsidizing the expansion. Our neighbors in surrounding states all have expanded Medicaid. It's time for Kansas legislators to do the right thing and enable 150,000 people to access adequate healthcare

Barbara Johnston  
Baldwin City, KS

March 15, 2024

Please, please, please EXPAND MEDICAID!! I'm a 63-year-old woman in need of healthcare and I can't afford insurance. For more than six years I have not been able to see a doctor or to get the medical tests I need. I NEED TO SEE A DOCTOR!! My husband's employer doesn't offer health insurance to its employees and I'm self-employed, struggling to make a living. I am also handicapped and am unable to get any sort of assistance.

Kansas is one of the last states to expand Medicaid and I don't understand why this state isn't taking advantage of federal government funds to insure more people. We the citizens of Kansas deserve better treatment. Think of it this way: The longer good health keeps us alive, the longer we will continue paying state taxes.

PLEASE expand Medicaid now!

Sincerely,

Elizabeth C Johnston  
Kansas City, Kansas

**March 14, 2024**

**Testimony to the House Committee on Health and Human Services and Senate Committee on Public Health and Welfare**

**NAME:** Jerry Jost

**TITLE:** Kansas resident and taxpayer

**EMAIL ADDRESS:** jerrytjost@gmail.com

**BILL NUMBER:** HB 2556, SB 355 (Medicaid Expansion)

**PROPONENT, OPPONENT, or NEUTRAL:** Proponent

**ORAL or WRITTEN ONLY TESTIMONY:** Written Testimony

Dear Chair & members of the committee,

I am writing in support of expansion of Medicaid (KanCare) and HB 2556 and SB 355. My reasons for this support are as follows:

- Expansion of Medicaid reduces health care costs for everyone by reducing costs of emergency room care.
- Protects Kansans from medical debt.
- Fixes eligibility limits so that working Kansas families can have access to health care.
- Improves the Kansas workforce with increased health care access and improved health.
- Sustains rural health care and rural hospitals by reducing uncompensated care.
- Makes Kansas more economically competitive with our neighboring states who have already expanded Medicaid.
- This is good politics. 82% of registered Kansas voters support Medicaid expansion.
- Expanding Medicaid is prolife changing the lives of 150,000 Kansans.
- Expanding Medicaid supports the lives of children allowing 45,000 children access to health care.
- No Kansan will lose access to health care with the expansion of Medicaid. Again, over 150,000 Kansans GAIN access to health care.

Please support Medicaid expansion. Please vote yes on bills HB 2556 and SB 355.

Thank you for your consideration of this request.



Jerry Jost, Kansas resident and taxpayer

217 North Fifth Street, Lawrence, Kansas 66044

March 17, 2024

Committee members,

I ask you to move ahead with the proposed Medicaid expansion as it is revenue neutral to Kansas taxpayers and encourages healthy workforce participation. House leadership's conflict of interest should not jeopardize health outcomes for Kansans and the viability of hospital systems.

Preventative healthcare is cheaper than reactive healthcare; this is true for individual patients and the overall burden to the community. Many people without insurance delay medical care, and then present to ERs when the situation becomes dire.

Costs are higher for all Kansans when our neighbors are not able to access healthcare:

- medical debt and likely missed wages for the patients;
- losses for hospitals due to increased uncompensated care that jeopardizes small and rural hospitals' ability to operate; and
- higher costs passed on to the insured community via cost of services and premiums.

Many thanks for the opportunity to provide testimony in support of Medicaid expansion.

Hilary Junk  
Lenexa, KS



An independent voice for  
those served by KanCare.

Barb Conant / 785 383-4272  
baconant@hotmail.com

Sean Gatewood / 785 220-5355  
seangatewood@outlook.com

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March 20, 2024

Thank you for the opportunity to voice our strong support to expand Medicaid in Kansas.

As a coalition, the KanCare Advocates Network (KAN) closely monitors KanCare policies, regulations, and legislation. Since its inception, our more than 50 partner organizations have worked with State agencies and the legislature to advocate for the 400,000 Kansans who depend upon KanCare, and its seven HCBS waiver programs for their health care and long-term supports and services.

Year after year, expanding Medicaid has been at the top priority of our legislative platform. We support expansion because the health and quality of life of thousands of our friends, neighbors and family members who do not have health insurance, would be greatly improved.

The reasons for expanding are many but among the most compelling are:

- Expansion provides health insurance to 150,000 hardworking Kansans who can't afford other coverage.
- Expansion strengthens home & community based services.
- Expansion builds the healthcare workforce.
- Expansion protects access to care, especially in rural areas.
- Expansion helps uninsured military veterans and their families.
- Expansion controls health insurance costs.

We focus our comments today on three of those benefits:

**Expansion provides health insurance to hardworking Kansans of all abilities who can't afford coverage.**

The claim that only "able-bodied" Kansans will benefit from Medicaid expansion is not supported by fact. The truth is Kansans with disabilities of working age will benefit from

expansion because only a small percentage of persons with disabilities have the Social Security disability determination making them eligible for health insurance through Medicaid.

According to the Social Security Administration, only an estimated 114,000 Kansans with disabilities meet the current eligibility requirements for KanCare coverage. That leaves an estimated 75% of Kansans with disabilities without access to affordable health coverage. Expanding KanCare could provide access to health coverage for those Kansans with disabilities.

Claims that expanding Medicaid would worsen the waiting lists for Home and Community Based Services (HCBS), are also unfounded. Research has continuously disproved this claim and opponents of Medicaid expansion admit there is no correlation between expansion and HCBS waiting lists.

### **Expansion Strengthens Home & Community Based Services**

Expanding Medicaid not only provides health coverage to direct care workers but also helps seniors and Kansans with disabilities avoid costly institutionalization and remain in their home. Attracting and retaining direct care workers saves Kansas millions of taxpayer dollars and encourages the development of community-based home care services.

If individuals with disabilities cannot hire direct care workers, they may have no choice but to move into expensive institutional settings, which costs both residents and Kansas taxpayers considerably more. Medicaid expansion can help address the critical shortage of in-home direct care workers, incentivizing individuals to join the workforce.

### **Expansion Builds the Healthcare Workforce**

Access to affordable health insurance helps attracting and retaining direct care workers. Few direct care workers in Kansas receive health insurance as a benefit of their employment. A recent University of Kansas survey of HCBS direct care workers in Kansas found 24.1% of these direct care workers were completely uninsured, which is twice the national uninsured rate of 12.2% for working-age adults under 64.<sup>1</sup> Low pay and limited hours often push these Kansans into the coverage gap, making them ineligible for Medicaid.

As advocates we work together to protect the rights and services of all persons to live independently and be active in their communities. We support Kansans' right to health care. We support Medicaid expansion. Thank you.

Sean Gatewood, KAN co-administrator  
Barb Conant, KAN co-administrator

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<sup>1</sup> "Care and Safety Practices during the COVID-19 Pandemic in Home-Based Long term Services and Supports," C. Wendel-Hummell, University of Kansas.



March 20, 2024

Heather Braum, Health Policy Advisor  
Kansas Action for Children

Written-only Proponent Testimony for informational hearing on Medicaid expansion  
Senate Committees on Ways and Means and Public Health and Welfare

Chairperson McGinn and members of the Committees:

Thank you for the opportunity to weigh in with our support of expanding Medicaid.

Kansas Action for Children is a nonprofit advocacy organization working to make Kansas a place where every child can grow up healthy and thrive. We work across the political spectrum to improve the lives of Kansas children through bipartisan advocacy, partnership, and information-sharing on key issues, including early learning and education, health, and economic security for families.

We support expanding KanCare coverage **because it will improve the health and well-being of Kansas children and families.** Healthy Kansas kids and families are critical to our state's future. Their health depends on regular access to quality care, including wellness visits, screenings, vaccinations, mental health resources, and dental checkups. A lack of health care, especially in childhood, leads to chronic conditions, shorter life expectancy, increased lifetime medical costs, and sicker families. Expansion helps them – and their families – in four ways.

## 1. Impact on Parents

With few exceptions, many low-income parents and caretakers don't currently qualify for KanCare. Right now, if a family of three makes more than \$787 per month (\$9,444 per year in 2023) or a family of four makes more than \$950 per month (\$11,400 per year in 2023), the adult(s) cannot qualify for KanCare in Kansas.

Meanwhile, these parents have health care needs that must be addressed, but they have no or few viable options for coverage.

Many employer-sponsored health insurance plans provide coverage for families. But many employees, especially those classified as part-time, are not offered employer-sponsored

insurance. Insurance coverage outside of an employer is then extremely unaffordable, because they cannot receive subsidies on the federal insurance exchange if their household income falls between 38% and 100% of the federal poverty line.

This is what happens when families fall into the coverage gap – making too much to qualify for KanCare, yet not enough to purchase an affordable plan on the insurance marketplace.

**Families must make more than \$24,860/year for a family of three or \$30,000/year for a family of four to qualify for those subsidies.** If their income is even a dollar below those thresholds, they will face paying premiums of hundreds of dollars, potentially even close to \$1,000/month! In most cases, these adults will choose to remain uninsured and wait until emergencies happen to access health care. This costs the system much more than regular, preventative care would, when otherwise it would remain unaffordable without health insurance coverage. Expanding KanCare offers an insurance solution to these adults.

More than 13,500 parents fall into this coverage gap.<sup>1</sup> **Expanding KanCare to cover more Kansas parents is an effective strategy that will improve the health and well-being of Kansas families.**

## 2. Impact on Kids

Most low-income Kansas kids are already eligible for KanCare's Medicaid and the Children's Health Insurance Program (CHIP). Their health depends on regular access to quality care, including wellness visits, prescriptions, screenings, immunizations, mental health resources, and dental checkups. A lack of health care, especially in childhood, leads to lifelong chronic conditions, shorter life expectancy, increased lifetime medical costs, and sicker families. Insured kids are more likely to enter school ready to learn, graduate high school, and become healthy, productive adults.

Expanding KanCare is critical to helping more children access health coverage, thereby reducing the number of uninsured kids in Kansas. As of 2022, about 38,000 Kansas kids are uninsured.<sup>2</sup> Studies show that when parents sign up for insurance programs, it is more likely they will also enroll their kids.<sup>3</sup> And kids' health reflects the health and well-being of their parents. **When parents are insured, kids are more likely to receive regular checkups and preventive care.**

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<sup>1</sup> Wu, A. S., Cink, K., and Lin, W. (2023). *Infographic: Health Insurance in Kansas, 2022*. <https://www.khi.org/articles/infographic-health-insurance-in-kansas-2022/>

<sup>2</sup> Kansas Action for Children. (2023). *KIDS COUNT Data Center*. <https://datacenter.aecf.org/data/tables/7434-uninsured-children?loc=18&loct=2#detailed/2/any/false/1095,2048,1729,37,871,870,573,869,36,868/any/14515>

<sup>3</sup> Hudson, J.L., and Moriya, A.S. (2017). *Medicaid Expansion For Adults Had Measurable 'Welcome Mat' Effects On Their Children*. *Health Affairs* 36(9). <https://doi.org/10.1377/hlthaff.2017.0347>

Additionally, a recent KHI study analyzed other states that had expanded Medicaid and concluded that “Medicaid expansion states experienced a 32 percent reduction in foster care admissions related to neglect compared to non-expansion states. **Applying the reduced rate experienced in expansion states to 2022 Kansas foster care data equates to an estimated 305 fewer children entering the foster care system in Kansas because of neglect.**<sup>4</sup>

### 3. Impact on Pregnant Women and Newborns

To reduce maternal and infant mortality, low birth weights, pre-term births, and post-birth complications – and to address racial disparities in maternal and infant health – we must ensure moms-to-be have continued access to affordable health care coverage before, during, and after pregnancy.

Pregnant moms without health insurance (and whose family income is less than 171% FPL, or about \$42,510/year for a family of three in 2023) can be covered by KanCare during pregnancy and for 12 months after birth. However, short-term coverage is not enough. **Moms must have health insurance to access health care long before their pregnancy begins.** Expanding KanCare would improve coverage for most of these women as they create and nurture their families.

The health of moms and babies supports the health of our entire state. A state full of healthy families will ensure all Kansas communities thrive for years to come.

### 4. Impact on the Workforce

Finally, expanding Medicaid would support hardworking Kansans – like child care providers<sup>5</sup> and other direct support workers – who may not have kids and make low wages but too little to qualify for the federal insurance exchange subsidies. At a time when we are facing a worker crisis in the country, individuals will be forced to choose jobs that pay them enough to qualify for the federal exchange or another job that comes with health insurance benefits just so they can access medical care when they need it.

**Expanding Medicaid would have a positive impact on some of our workforce shortages – particularly those that serve our most vulnerable populations in our state.**

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<sup>4</sup> Steiner, P. and Snyder, C. (2023). *Medicaid Expansion’s Impact on the Kansas Behavioral Health System and Users of Behavioral Health Services*. <https://www.khi.org/articles/medicaid-expansions-impact-on-the-kansas-behavioral-health-system-and-users-of-behavioral-health-services/>

<sup>5</sup> US Bureau of Labor Statistics. (May 2022). *39-9011 Child Care Workers Report*. <https://www.bls.gov/oes/current/oes399011.htm>

We have deep concerns about proposed work reporting requirements for the expansion-eligible population because we know from real world<sup>6</sup> implementation<sup>7</sup> that these only put up more barriers for families needing health insurance coverage. Even so, we remain committed to advocating for closing the coverage gap in Kansas, like 40 other states and D.C. have already done.

For these reasons and more, KAC supports expanding KanCare. This policy is an investment in Kansas children and the adults who care for them that will pay off for generations.

We urge this joint Committee to pass Medicaid expansion and allow it to have a floor vote by the entire Senate chamber. Kansas kids and their families are waiting. If I can be of further assistance, please contact me at [heather@kac.org](mailto:heather@kac.org).

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<sup>6</sup> Harker, L. (2023). *Pain But No Gain: Arkansas' Failed Medicaid Work-Reporting Requirements Should Not Be a Model*. <https://www.cbpp.org/research/health/pain-but-no-gain-arkansas-failed-medicaid-work-reporting-requirements-should-not-be>

<sup>7</sup> Cuello, L. (2023). *Georgia Pathways Implementation: The Glass is 99.6% Empty*. <https://ccf.georgetown.edu/2023/11/27/georgia-pathways-implementation-the-glass-is-99-6-empty/>



March 7, 2024

Jami Reeve, Executive Director  
Kansas Appleseed Center for Law and Justice  
Written Testimony Neutral on SB 355

Thank you for allowing me the opportunity to submit testimony on SB 355. My name is Jami Reeve and I am the Executive Director at Kansas Appleseed. Kansas Appleseed Center for Law and Justice is a nonprofit, nonpartisan organization dedicated to the belief that Kansans, working together, can build a state of thriving, inclusive, and just communities.

Kansas Appleseed is neutral on SB 355. We support medicaid expansion as a policy decision that would allow Kansans to thrive in just communities through the expanded healthcare access, increased financial security, and economic mobility it provides. However, we are opposed to work requirements currently in this bill.

Medicaid expansion helps alleviate the financial burden that prevents so many Kansans from thriving. Right now, more than 150,000 Kansans, including 45,000 children, fall into a health coverage gap Kansas' failure to expand Medicaid has created. Expanding eligibility will support the most vulnerable and hardworking Kansans. Expanding medicaid to all adults ages 19-64 with family income at or below 138 percent of the federal poverty level would provide coverage to 66,000 Kansans who are currently uninsured and ineligible. It would also expand eligibility to 16,000 uninsured Kansas children.<sup>1</sup> 75% of Kansans who would be eligible for medicaid coverage under the expansion are part of working families.<sup>2</sup> That is needed medical and financial help for thousands of Kansans who struggle everyday to get by, despite being employed.

Medicaid expansion means that all families who have been struggling to make ends meet, would now have medical coverage and would no longer be paying for medical needs out-of-pocket, facing high insurance premiums, or be one medical emergency away from not being able to feed their families, pay their bills, or keep their homes. A trip to the grocery store will tell you how dramatically costs are rising for simple necessities like milk and bread for Kansans trying to take care of themselves and their families.

Healthcare is no exception to the ever increasing costs we face, and right now all Kanans are paying the costs of the failure of the state to expand medicaid. They pay through higher shares of health insurance premiums in employer-sponsored plans, higher costs of services, higher local taxes to support state spending in lieu of federal funding already paid for with tax dollars, and hospital closures in vulnerable areas of the state.<sup>3</sup> Expanding medicaid will bring healthcare

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<sup>1</sup> Schmidt, S., Cink, K., Uridge, E., and Rowell, S. C. "2024 Medicaid Expansion Estimates: Enrollment, Costs and Characteristics of the Expansion Population." Kansas Health Institute. 2024.

[https://www.khi.org/articles/2024-medicaid-expansion-estimates/?utm\\_medium=email&utm\\_source=sharpspring&sslid=MzIAAINLSyNL CzMzI3MA&sseid=MzIzMjc3MbcwMQYA&jobid=8035fcf1-a5b0-4cb5-8784-289e18d40dfa](https://www.khi.org/articles/2024-medicaid-expansion-estimates/?utm_medium=email&utm_source=sharpspring&sslid=MzIAAINLSyNL CzMzI3MA&sseid=MzIzMjc3MbcwMQYA&jobid=8035fcf1-a5b0-4cb5-8784-289e18d40dfa)

<sup>2</sup> Kaiser Family Foundation. "Who Could Medicaid Reach with Expansion in Kansas?" Fact Sheet KS. 2020. <https://files.kff.org/attachment/fact-sheet-medicaid-expansion-KS>

<sup>3</sup> Ginther, D. K., Davut, A., and Slusky, D. J. G. "Economic Costs to Kansas Due to State's Failure to Expand Medicaid." 2022. <https://kuscholarworks.ku.edu/handle/1808/32851>



costs down for all Kansans, allowing the most vulnerable through the middle class and beyond to find relief and thrive in these trying times.

Medical debt is a financial burden to Kansans, and that affects their ability to afford food and other necessities everyday, despite having jobs. Medical debt is much higher in states without medicaid expansion. On average, people in non-expansion states owe \$375 more in medical debt. That means the nearly half of all Kansans who experience or know someone experiencing the burden of medical debt, are facing higher rates than the 40 other states in the nation that have adopted medicaid expansion. This affects the most vulnerable Kansans most. Those with medical debt are more likely to be those with disabilities, in worse health, or facing poverty. Much like the effect of not having insurance, medical debt means Kansans are foregoing medical care or prescriptions, cutting spending on food, clothing, and other items, spending their savings, borrowing large amounts of money, and having difficulty maintaining reliable housing and transportation. Expanding medicaid means more Kansans can get healthcare and avoid medical debt, maintaining health and financial stability.<sup>4</sup>

Expanding healthcare coverage through Medicaid to low-income Kansans will save and improve lives. For example, in states that have expanded Medicaid, annual mortality rates among near-elderly adults were reduced by 9.4%. Access to healthcare for this population is proven to reduce disease-related deaths.<sup>5</sup> A review of over 600 studies that have been conducted since states first started expanding medicaid shows that expansion states have better outcomes in mortality, cancer, chronic disease, disabilities, sexual and reproductive health, behavioral health, state finances, racial disparities, socioeconomic disparities, and better social determinants of health than the states that have not expanded medicaid.<sup>6</sup>

Not only does not expanding medicaid harm the ability of Kansans to thrive, but our failure to expand medicaid threatens public safety by putting unnecessary strain on our criminal justice system. Kansas Department of Corrections (KDOC) spent close to \$87 million providing medical services to inmates in Fiscal Year 2023.<sup>7</sup> Medicaid funding covering the costs of in-patient hospital stays exceeding 24 hours for incarcerated individuals, mental health and substance abuse services reducing the number of those incarcerated, and coverage reaching newly-released individuals reducing recidivism are estimated to save KDOC \$11 million annually.<sup>8</sup> Expanding medicaid coverage will save the state money, alleviate overcrowding in

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<sup>4</sup> Cleaves, E. "Closing the Gap: Kancare Covers 165,000 Kansans Currently Left Out of Medicaid." Access Health News. 2023.

<https://accesshealthnews.com/closing-the-gap-kancare-covers-165000-kansans-currently-left-out-of-medicaid/>

<sup>5</sup> National Bureau of Economic Research. "Medicaid and Mortality: New Evidence from Linked Survey and Administrative Data." 2019. <https://www.nber.org/papers/w26081>

<sup>6</sup> Guth, M. & Ammula, M. "Building on the Evidence Base: Studies on the Effects of Medicaid Expansion." Kaiser Family Foundation. 2021.

<https://www.kff.org/medicaid/report/building-on-the-evidence-base-studies-on-the-effects-of-medicaid-expansion-february-2020-to-march-2021/>

<sup>7</sup> KDOC. "Annual Report for Fiscal Year 2023." <https://www.doc.ks.gov/publications/Reports/fy2023-annual-report>

<sup>8</sup> Kansas Appleseed. "Unlock Savings: White Paper on Potential Cost Savings to Kansas Correction System through ACA Medicaid Expansion." 2019.

[https://www.kansasappleseed.org/uploads/2/1/9/2/21929892/unlock\\_savings- white\\_paper\\_on\\_potential\\_cost\\_savings\\_to\\_kansas\\_correctional\\_system\\_through\\_aca\\_medicaid\\_expansion\\_kansas\\_appleseed.pdf](https://www.kansasappleseed.org/uploads/2/1/9/2/21929892/unlock_savings- white_paper_on_potential_cost_savings_to_kansas_correctional_system_through_aca_medicaid_expansion_kansas_appleseed.pdf)



Kansas jails and prisons, reduce recidivism, and improve public safety in Kansas to help build just communities.

If all Kansans are to thrive it is essential for Kansas to expand Medicaid to every Kansan who needs it. Health care is a necessity and should be treated as such. Promoting the general welfare is a founding principle of our Constitution. We urge the legislature to pass Medicaid expansion in a way that removes all barriers to lifesaving medicine and healthcare for every Kansan. Meaning, although we support medicaid expansion, we cannot support the work requirements in the current bill.

Work requirements prevent Kansans from getting access to medical care and are ineffective. All Kansans should have access to medical care, no matter their employment status. Work requirements are rooted in stereotypes based on race, gender, disability status, and class. They ignore the realities of the low-paid labor market, the lack of child care and paid sick and family leave, how health and disability issues and the need to care for family members affect people's lives, and ongoing labor market discrimination. Research on the relationship between work and health shows that work requirements have little impact on employment. Instead, such requirements just limit access to individuals who need services. Further, most medicaid participants already work or face barriers to work. Requiring reporting may result in the loss of coverage while not increasing employment.<sup>9</sup>

Failing to expand medicaid is costing Kansans every day. Costs are felt in all aspects of their lives from their health and livelihood to their budgets and ability to feed their families. Meanwhile, it is costing the state billions of dollars and undermining public safety.<sup>10</sup> Medicaid expansion provides life-saving support to hardworking, low-income Kansans, saves the state money, and makes everyone safer. It is time we stop playing political games with people's lives and livelihoods. Let's eliminate all barriers to healthcare access, and pass medicaid expansion without unnecessary and ineffective work requirements.

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<sup>9</sup> Guth, M. and Musumeci, M. "An Overview of Medicaid Work Requirements: What Happened Under the Trump and Biden Administrations?" 2022. <https://www.kff.org/medicaid/issue-brief/an-overview-of-medicaid-work-requirements-what-happened-under-the-trump-and-biden-administrations/> and Pavettii, L. "Work Requirements Don't Cut Poverty, Evidence Shows." The Center on Budget and Policy Priorities. 2016. <https://www.cbpp.org/research/test-work-requirements-dont-cut-poverty-evidence-shows>

<sup>10</sup> Ginther, D. K., Davut, A., and Slusky, D. J. G. "Issue Brief: The Unexpected Costs of Not Expanding Medicaid in Kansas." 2022. [https://kuscholarworks.ku.edu/bitstream/handle/1808/32850/Medicaid\\_Brief\\_2022.pdf?sequence=1&isAllowed=y](https://kuscholarworks.ku.edu/bitstream/handle/1808/32850/Medicaid_Brief_2022.pdf?sequence=1&isAllowed=y)



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Testimony in Support of Medicaid Expansion

Senate Committee on Ways & Means and Senate Committee on Public Health & Welfare

Dear Chair McGinn and Committee Members:

On behalf of the Kansas Association of Centers for Independent Living, (KACIL), we are asking for your support for Medicaid Expansion in Kansas which could enable individuals with disabilities to gain health insurance that they currently can't access.

In 1990, CILs embraced the opportunity to provide services under the newly developed Medicaid Home and Community Based Services program allowing individuals with significant disabilities to receive the services they needed to remain in their homes. CILs also saw this as an opportunity for some individuals with disabilities to be trained as caregivers. Today, many of the individuals employed as direct service workers (DSWs) in the HCBS program are people with some type of disability.

This could be the perfect work for these DSW's except for the fact they have no access to health care. Kansas chose to set up the Self-Directed HCBS program so that enrolled consumers are the employer of their worker. This model benefits the State and allows the consumer to maximize their ability to Self-Direct their care but leaves the workers with zero access to benefits. In a survey of DSW's in the Self-Direction program, lack of health insurance was the second highest reason listed for why a worker would likely leave their employment in the near future; second only to wages.

Kansas has a long history of supporting individuals with disabilities and seniors to remain in their home with support through programs like HCBS. We also have a philosophy of self-reliance and strong work ethics. I am asking for your support in maintaining both by creating a pathway for DSW's in the Self-Directed HCBS program access to healthcare through Medicaid Expansion.

Thank you,

Audrey Schremmer

KACIL Board Member, and Executive Director, Three Rivers Inc.



***KACIL Members:***

*Independence Inc., Lawrence KS*

*Independent Connection, Salina KS*

*Independent Living Resource Center, Wichita KS*

*LINK, Inc., Hays KS*

*Beyond Barriers, Hutchinson KS*

*Three Rivers Inc., Wamego KS*

*Resource Center for Independent Living Inc., Osage City KS*

*The Whole Person, Kansas City KS*

The Kansas Birth Equity Network  
Kansas City, Kansas  
ksbirthequity@gmail.com

Re: Kansas Medicaid Expansion

Dear Senate Ways & Means Committee and the Senate Public Health & Welfare Committee Members,

I am writing to provide testimony in support of Medicaid expansion in Kansas, particularly highlighting its importance for advancing birth equity in our state. As a concerned citizen and advocate for maternal and infant health, I firmly believe that expanding Medicaid eligibility is a crucial step toward addressing disparities in access to quality prenatal and postpartum care, ultimately leading to improved outcomes for birthing individuals and their babies.

The issue of birth equity is one that deeply concerns me, as it reflects the unjust and unacceptable disparities in maternal and infant health outcomes that persist in our communities. Research consistently shows that individuals from marginalized and low-income backgrounds are disproportionately affected by adverse birth outcomes, including preterm birth, low birth weight, and maternal mortality. These disparities are driven by a complex interplay of socioeconomic factors, systemic barriers, and unequal access to healthcare services.

Expanding Medicaid in Kansas would extend essential healthcare coverage to thousands of low-income individuals, including pregnant women and new mothers who currently lack access to comprehensive prenatal and postpartum care. Access to Medicaid would enable these individuals to receive timely screenings, prenatal visits, and necessary interventions to support healthy pregnancies and positive birth outcomes. Furthermore, Medicaid expansion would provide critical support for accessing essential services such as maternal mental health care, substance use disorder treatment, and breastfeeding support, which are vital components of comprehensive maternity care.

By expanding Medicaid, we have an opportunity to level the playing field and ensure that all Kansans have access to the care they need to thrive during pregnancy and beyond. Medicaid expansion would help address the underlying socioeconomic determinants of health that contribute to birth disparities, including poverty, lack of insurance coverage, and limited access to healthcare providers. Moreover, expanding Medicaid would promote health equity by prioritizing the needs of our most vulnerable populations and reducing the glaring disparities in maternal and infant health outcomes that persist in our state.

In conclusion, I urge you to support Medicaid expansion in Kansas as a critical strategy for advancing birth equity and improving maternal and infant health outcomes statewide. By expanding access to Medicaid coverage, we can ensure that every pregnant woman and new mother has the opportunity to receive high-quality, affordable healthcare, regardless of their socioeconomic status or insurance status. Together, let us work towards a future where every child is born into a world where they have the opportunity to thrive and reach their full potential.

Thank you for considering my testimony and for your commitment to promoting health equity in Kansas.

Sincerely,

*Sharla Smith*

CEO and Founder



3005 Cherry Hill  
Manhattan, KS 66503  
785-477-4666  
bbandy@ksbreastfeeding.org  
www.ksbreastfeeding.org

March 14, 2024

Brenda Bandy, Executive Director  
Kansas Breastfeeding Coalition  
Written Testimony in Support of Medicaid Expansion (SB 355)  
Joint Committee on Ways and Means and Public Health and Welfare

Dear Chair Billinger, Chair Gossage and Committee Members,

I am writing on behalf of the Kansas Breastfeeding Coalition (KBC) in support of expanding eligibility for Kansas Medicaid (KanCare). The KBC believes KanCare expansion will have a significant, positive impact on many, including the estimated 150,000 Kansans living in the "Medicaid gap". Many of these Kansans who would benefit from KanCare expansion are mothers and babies.

The research is clear – Medicaid expansion saves mothers' and babies' lives, particularly Black moms and babies. One study found a 14.5% infant mortality rate decline from 11.7 to 10.0 in African American infants in Medicaid expansion states, more than twice that in non-Medicaid expansion states.<sup>1</sup> Research shows that Medicaid expansion is significantly associated with fewer maternal deaths per 100,000 live births relative to non-expansion states, with the greatest decreases in mortality rates among Black, non-Hispanic women and Hispanic women.<sup>2</sup> Because of the large proportion of maternal, infant, and child health care and preventive services funded by Medicaid, Medicaid expansion may be among the most important ways Kansas can reduce maternal and infant mortality rates.

The KBC's Chair-Elect, Stephanie Rupnicki, has personally experienced falling in the coverage gap. She is a mom and an active breastfeeding advocate for the Kansas Breastfeeding Coalition, providing peer-to-peer breastfeeding support for Indigenous families. Stephanie had been working and had insurance when she had her first child. When it was time to go back to work, she developed postpartum depression. She wasn't able to return to work for six months. After much deliberation, she decided to become a stay-at-home mom. She's been caring for her children at home ever since.

Stephanie tried to get insurance through her husband's employer, but it was too expensive. It would have cost them almost a whole paycheck. She was told about KanCare and was able to qualify during her later pregnancies. This was difficult for Stephanie and her growing family. She developed some health complications outside of pregnancy, some of which were pregnancy-related, that she couldn't get treated. She would have to pay out of pocket for all of the care.

For Stephanie, health insurance is important for families. Having insurance helps relieve some of the stress. She knows firsthand what it is like to be in danger of losing coverage. Before Kansas extended postpartum coverage, in the months after her child's birth, Stephanie had to cancel health appointments because she wasn't able to get in before her insurance ended.

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<sup>1</sup> Bhatt, Chintan B, and Consuelo M Beck-Sagué. "Medicaid Expansion and Infant Mortality in the United States." *American journal of public health* vol. 108,4 (2018): 565-567. doi:10.2105/AJPH.2017.304218. Available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5844390/#bib1>. Accessed April 1, 2022.

<sup>2</sup> E.L. Eliason, "Adoption of Medicaid Expansion Is Associated with Lower Maternal Mortality," *Women's Health Issues*, 30: 147-152 (2020). Available at <https://www.sciencedirect.com/science/article/abs/pii/S1049386720300050>. Accessed April 1, 2022.

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**Mission** To improve the health and well-being of Kansans by working collaboratively to promote, protect and support breastfeeding.

**Vision** Breastfeeding is normal and supported throughout Kansas.

During the pandemic, Stephanie was insured because federal policies have extended coverage options during the pandemic. She could get preventative care without worrying about the bill during this time. She was able to go to the doctor and get her well-woman exams. As the caregiver for her children, she wasn't worried about who would be there to take care of her family. Unfortunately, Stephanie has been without health insurance since the end of 2023.

She wants others to know that insurance is important to her and that "we shouldn't have to stress and worry." She wants legislators to put themselves in the shoes of their constituents. She and most Kansans want the legislature to close the coverage gap by passing SB 355.

Thank you for the opportunity to provide testimony in support of KanCare expansion. Please feel free to me at [bbandy@ksbreastfeeding.org](mailto:bbandy@ksbreastfeeding.org) if you have any questions.

Sincerely,



Brenda Bandy, IBCLC

Executive Director

Kansas Breastfeeding Coalition

March 20, 2024

Re: Joint Hearing of the Senate Ways & Means Committee and the Senate Public Health & Welfare Committee

Chair McGinn and Committee Members:

Thank you for the opportunity to convey our whole-hearted support of Medicaid Expansion, which would give 150,000 hard working Kansans access to health insurance. Expanding KanCare is good for Kansas adults. Perhaps even more importantly, it is good for Kansas children.

The Kansas Chapter, American Academy of Pediatrics (KAAP) is the statewide pediatric association with more than 450 pediatrician and pediatric resident members. The organization and its members share a fundamental goal: all Kansas children should grow up safe and strong, with confidence in themselves and their future. Expanding KanCare supports this goal.

As pediatricians, we know far too well that health insurance has a direct and measurable impact on the willingness of families to access healthcare. Though Medicaid expansion was designed to offer health coverage to uninsured adults, we know it helps keep kids healthy and safe. Expanding KanCare will increase health coverage for children, improve child overall health, and improve the economic stability of their family.

Other individuals and organizations will share information and data regarding the benefits of Medicaid expansion: how it brings a significant amount of federal dollars into Kansas, how it offsets expenditures in the criminal justice system, how it will decrease the number of uninsured Kansans (a number that is higher than the national average), how it has a proven track record of creating jobs, and how it makes it easier for enrollees to work and seek work. However, as an expert in child health, we prefer to highlight how expanding KanCare would directly benefit Kansas kids.

- 1. Medicaid expansion states have lower infant mortality rates.** When reproductive-aged women have insurance coverage before pregnancy, they are better able to manage chronic conditions, to seek pre-conception care, to afford prenatal vitamins, and to seek mental health care. Mentally and physically healthy Moms have healthy babies.
- 2. Medicaid expansion helps ensure kids in rural areas have access to health care.** Four Kansas hospitals have closed in recent years. Rural hospitals are 6 times more likely to close in non-expansion states like Kansas. The United States already has a shortage of pediatric hospital beds. Although Kansas has ready access to pediatric hospital beds, we have witnessed when children are unable to access these beds, especially during surges of respiratory illness, like RSV, influenza and COVID. Medicaid expansion helps Kansas kids, and adults, have critical access to vital rural hospitals.
- 3. Medicaid expansion makes healthier families.** Families are the cornerstone of child development and health. Healthy diets and exercise in children require lifestyle changes for the entire family. When children watch their parents get a

## KANSAS CHAPTER

 PO Box 860481  
Shawnee, KS 66286

 Denise Cyzman  
EXECUTIVE DIRECTOR

 785-380-6100

 [kansasaap.org](http://kansasaap.org)

## EXECUTIVE COMMITTEE

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Gretchen Homan  
MD, FAAP

**President-Elect**  
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**Immediate Past President**  
Kristie Clark  
MD, FAAP



# KANSAS

## KANSAS CHAPTER

 PO Box 860481  
Shawnee, KS 66286

 Denise Cyzman  
EXECUTIVE DIRECTOR

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## EXECUTIVE COMMITTEE

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MD, FAAP

physical, a tetanus shot, or get recommended screenings, they are more likely to do the same. Having healthy parents positively impacts brain structure and function, serving to mitigate the deleterious effects of trauma, poverty, and other Adverse Childhood Experiences (ACEs). Healthy parents mean healthy children.

- 4. Medicaid expansion means kids are more likely to be insured.** States that expand Medicaid have seen an increase in child health insurance enrollment, specifically Medicaid and CHIP. Covered parents means covered children.
- 5. Medicaid expansion means kids are more likely to get routine care.** Low-income kids whose parents have health insurance are almost 30% more likely to have an annual well visit. This means that parents get guidance on how to introduce solid foods and make the house safe for their toddlers, kids are protected from deadly diseases like polio and tetanus through vaccines, and developmental problems are identified and treated earlier.
- 6. Medicaid expansion reduces the likelihood of child neglect.** The increased financial stability offered to families because of Medicaid expansion has statistically reduced the likelihood of child abuse and neglect.

These are just some of the reasons why Medicaid expansion will help ensure a brighter future for Kansas. We are certain we all share the goal of helping Kansas kids thrive in happy and healthy families, this is why KAAP strongly urges you to support Medicaid expansion.

Dena Hubbard, MD, FAAP  
Public Policy Chair  
KAAP

Andrew Donaldson, MD  
KAAP



KANSAS CITY

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**MEDICAL SOCIETY  
FOUNDATION**

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CHARITABLE CARE, EDUCATION, PREVENTION & WELLNESS

**Date: January 29, 2024**  
**Re: Proponent, Support for KanCare expansion**

The Kansas City Medical Society Foundation is a 501(c)(3) public charity that delivers over \$8 million worth of donated specialty care to uninsured patients each year. We have served over 14,000 people, providing over \$106 million in donated care and treatment. We have helped people in our community access heart bypasses, knee replacements, and other medically necessary specialty care that helps people live, work, take care of their families and contribute to their communities.

Charitable healthcare is the core of our programming and mission. Based on our expertise over decades of work in charitable healthcare, **we know the most effective and consistent way to bring health equity and access to our community is through Medicaid expansion.**

KanCare expansion is good for patients and public health and it is the most effective option to ensure the full spectrum of healthcare access – primary care, specialty care, medication and affiliated services - to uninsured Kansans.

Over the last seven years, research of states who have expanded Medicaid show positive health outcomes including substantial increase in coverage and improved access for all healthcare services; preventive care, primary care, and prescription drug access.

States who have expanded Medicaid show increased coverage for low- and middle-class workers as well as support for small businesses who have been burdened by the rising health costs that are also impacting businesses who provide health insurance to their employees.

KanCare expansion would improve access to mental health services and increase access to pre- and post-natal care. This plan would provide those who are uninsured an opportunity to have a medical home. This means better health outcomes including preventive care, early detection, treatment of chronic and serious medical issues, and above all, saving lives.

***On behalf of the Board of the Kansas City Medical Society Foundation, we implore you to support passage of legislation that fixes the coverage gap and increases access to healthcare in Kansas.***



Karole Bradford  
Chief Executive Officer

**HB 2556 / SB 355**  
**Written Proponent Testimony**  
March 20, 2024

The Kansas Coalition Against Sexual and Domestic Violence (KCSDV) is a nonprofit organization located in Topeka with 25 member organizations providing direct services to victims of sexual and domestic violence statewide. These are the programs that provide critical services to survivors 24 hours a day, 7 days a week and include emergency shelter, hotline support, counseling, and other supportive services.

We offer proponent testimony for 2024 HB 2556 and 2024 SB 355 – bills that would enact the Cutting Healthcare Costs for All Kansans Act and expand medical assistance eligibility.

One of the most critical issues for survivors in attaining and readjusting to a life without violence is in having the opportunity for stability – a stable job, stable housing, and stable health care.

The adverse effects of domestic and sexual violence can have a long-term impact on the victim’s health and well-being. The immediate injury due to the violence is just one piece of the picture. Additionally, victims often suffer from chronic illnesses following victimization. Access to good, adequate health care is critical for addressing their needs.

Additionally, victims with health issues of their own or their children may hesitate to leave the abusive relationship if their healthcare is tied to their abuser’s employment, and it means that they will be without health care if they leave. Assuring health care availability for all could add opportunity for many victims to attain safety.

While Kansas would be the second state<sup>1</sup> to implement a work requirement for Medicaid, we support that both bills provide an exemption from the employment verification for victims and survivors of sexual and domestic violence that are seeking shelter at one of our member programs. The bills reference [42 U.S. Code § 11302](#) which defines a homeless individual to encompass any individual or family who is experiencing violence relating to domestic violence, dating violence, sexual assault, stalking, and other dangerous, traumatic, or life-threatening conditions.

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<sup>1</sup> Schmidt, S. L., Cink, K., Uridge, E., & Rowell, S. C. (2024, February 29). 2024 Medicaid Expansion Estimates: Enrollment, costs and characteristics of the expansion population. <https://www.khi.org/articles/2024-medicaid-expansion-estimates/>

KCSDV supports the expansion of access to affordable health care through expansion of health insurance coverages. Because victims often live with residual health issues, adequate health care and health insurance coverage will provide another piece of stability in their lives going forward.

For the reasons stated above, KCSDV is a proponent for 2024 HB 2556 and 2024 SB 355.

Sincerely,

A handwritten signature in black ink that reads "Michelle McCormick". The signature is written in a cursive, flowing style.

Michelle McCormick, LMSW  
Executive Director  
KCSDV



**February 22, 2024**

**To:** Kansas Legislators

**From:** Robert Cooper, Executive Director, Kansas Commission for the Deaf and Hard of Hearing

**Regarding:** Public Hearing on Medicaid Expansion

Kansas lawmakers,

Thank you for allowing me the opportunity to submit testimony in support of expanding Medicaid in Kansas.

As Kansans get older, many will experience some form of hearing loss. By age 60, 30% of older adults will experience hearing loss, and by age 80, that statistic rises to 50%. Often, older Kansans will eventually move to long-term care facilities. Yet these facilities frequently do not have communication support for individuals who are deaf or hard-of-hearing — leaving a large percentage of seniors without the resources they need to thrive. The good news is we can start to address this issue immediately by expanding Medicaid.

As the executive director of the Kansas Commission for the Deaf and Hard-of-Hearing, it's our mission to identify what obstacles our community faces — and how we can assist, alleviate or mitigate those challenges. One major obstacle our community faces is the gap in communication access between health care providers and deaf and hard-of-hearing patients.

Our commission sees time and again how Medicaid-related issues plague the deaf and hard-of-hearing population. Most long-term care facilities are not equipped to accommodate deaf and hard-of-hearing individuals. This leads to a huge gap in health care provider access. Simply put, if you cannot communicate with your health care provider, then you cannot receive the care and services you need.

For example, one Kansan who was deaf and in a long-term care facility was not getting his communications needs met. When an employee asked the staff to assist him, they responded, "We don't know how to communicate with him." This resident was living with dementia and would often roam the halls and try to escape the building. But no one could communicate with him, and he was put in harm's way in one incident. Unfortunately, this story is not an isolated case. It's far too common in many health care facilities in Kansas. It must change.

So why does this happen? Health care providers struggle to pay for essential communication, which, unfortunately, is either the first budget cut or not funded initially.

Expanding Medicaid would benefit all Kansans by lowering health care costs for everyone. It would bring in federal dollars that are already helping our neighboring states to shore up hospitals' bottom lines, and that means funding for critical services — such as access to appropriate health care communications.

For those of us in the deaf and hard-of-hearing community, just like for many other Kansans, employment options may have limited hours and often do not include benefits — such as health insurance. So, they're not eligible for Medicaid currently because they already make a bit too much income to qualify. They are already paying up to \$4,000 for new hearing aids or replacements, which would be a priority, rather than purchasing private health insurance, as private insurance and Medicare rarely cover the cost of hearing aids.

This is a disparity they must face, but we know that Medicaid expansion would help eliminate this obstacle. Expanding Medicaid can't fix every issue that deaf and hard-of-hearing Kansans face in health care settings. We would still have a lot of work to do. However, it would be a giant step forward for our community. And, it's the right thing to do.



Martha Gabehart, Executive Director

Laura Kelly., Governor

Written Proponent Testimony for  
SB 355 and HB 2556 Medicaid Expansion  
By Martha Gabehart, Executive Director  
Kansas Commission on Disability Concerns (KCDC)

Thank you for this opportunity to submit written testimony in support of SB 355 and HB 2556. I am Martha Gabehart, Executive Director of the Kansas Commission on Disability Concerns (KCDC). KCDC is catalyst for change in government for people with disabilities. We work with the governor, legislature and state agencies on issues that adversely affect people with disabilities.

The commissioners have supported Medicaid expansion for several years because many people with disabilities are not financially eligible for Medicaid but are still living in poverty unable to afford health insurance or to get the medical services they need. Also, some of our commissioners along with other people with disabilities are working or have worked for employers who do not provide health care. Medicaid expansion would provide affordable health care to people with disabilities helping them continue to work while improving their health.

Medicaid expansion lowers everyone's health care costs. The cost of providing health care to those without insurance increases the cost of all health care making it more expensive for those with insurance. It also saves hospitals and health care professionals by paying for the health care poor people including people with disabilities need. Eight hospitals have closed since 2014. The people in those rural areas often travel long distances to receive health care if they have transportation. Telemedicine may not be an option for them because of lack of internet access. Having access to local health care providers, assures poor people including people with disabilities have access to health care when they need it.

Thank you for the opportunity to testify in support of SB 355 and HB 2556.



# *Testimony*

## **Medicaid Expansion**

**March 20, 2024  
SB 355 and HB 2556**

The Kansas County Commissioner Association supports the expansion of Medicaid in Kansas.

KCCA represents the elected Commissioners in all 105 counties. That's 362 elected leaders. It's a very diverse, bipartisan group. Republicans. Democrats. Rural. Urban. All of them work to serve their communities.

Forty states and the District of Columbia have expanded Medicaid coverage to provide health insurance to the working poor and others who can't afford adequate healthcare.

The KCCA strongly supports expansion of the Kansas Medicaid program to make healthcare coverage possible for tens of thousands of at-risk Kansans and to increase support for rural hospitals and municipal emergency services.

While we are appreciative the Senate and House are both holding hearings on Medicaid Expansion, this is only the start.

The KCCA urges both the Senate and House leadership to allow these bills to be debated and voted on by each body. The sooner the better.

The Kansas County Commissioners Association supports Senate Bill 196 which restores the Local Ad Valorem Tax Reduction Act.

After 20 years of denying that critical funding to local governments, it is past time for the Kansas Legislature to follow the spirit of the law, keep the promise made decades ago and restore the traditional partnership between cities, counties and state governments.

From 2004 through 2023, local governments have lost about \$2-billion in legally owed LAVTR revenues withheld by Kansas Legislature. Every dollar would have gone to off-setting property tax increases.

The money comes from sales tax collected by the state. Since 1937 the Legislature agreed to share sales tax dollars with local governments with the express purpose of reducing reliance on property taxes to pay for such services as police and fire protection, parks, streets, jails, elections and many other services county governments are required to provide.

Local governments gave-up the ability to impose certain local taxes in exchange for the state to collect those dollars and return a share of them. Going back more than 20 years the State of Kansas, struggling with massive budget shortfalls, began slashing millions of dollars intended for local governments every year. Those cuts now total billions of dollars.

LAVTR is not the only promised and legally owed revenues not being paid to cities and counties. In addition to not sending the Local Ad Valorem Tax Reduction dollars, the Legislature has broken its commitments by not funding the City County Revenue Sharing Fund (CCRS) and the Special City-County Highway Fund (CCRS).

The total dollars owed but not paid to cities and counties since 2001 is more than \$3.5-billion. But those aren't the only legislative decisions which have impacted local property taxes.

In 2006, the Kansas Legislature repealed the property tax on commercial/industrial machinery and equipment. That decision shifted the tax burden of paying for police, fire, street repairs and other services onto homeowners and small commercial businesses. And to make matters worse, after only one year the Legislature broke its agreement with local governments to help ease the severe sudden loss of those tax dollars no longer being paid on machinery and equipment.

In 2014, the Kansas Legislature eliminated the Mortgage Registration Fee. That fee, which had been enshrined in Kansas law since 1925, paid for government services the banking and lending industry used. The revenue helped fund parks and recreation programs. Elimination of the Mortgage Registration fee was another tax shift on everyday taxpayers. It's cost Kansas counties millions in lost revenue.

At the same time, state lawmakers dumped more duties on counties to perform on behalf of the state. District courts, community corrections, mental health, register of deeds, vehicle registrations, elections and tax collections are all state duties performed and paid for by county taxpayers. It is a lopsided relationship.

Kansas residents will be better served if the traditional partnership between local governments and the state government is restored and we all once again work with each other to address the goal of lower property taxes. The traditional partnership between local governments and the state needs to be repaired and restored. We can start by passing Senate Bill 196 and restoring the LAVTR promise.

### **How LAVTR Would Offset Local Property Taxes in Select Counties**

Allen:	3.2 mills
Andersen:	2.7 mills

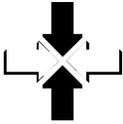
Bourbon:	4.5 mills
Dickinson:	3.0 mills
Franklin:	3.2 mills
Geary:	4.7 mills
Johnson:	2.3 mills
Leavenworth:	3.5 mills
Labette:	4.8 mills
Montgomery:	3.5 mills
Miami:	2.7 mills
Neosho:	4.3 mills
Riley:	3.7 mills
Saline:	3.3 mills
Sedgwick:	3.5 mills
Shawnee:	3.5 mills

Fully restoring LAVTR statewide would offset property taxes by nearly 300 mills combined.

**The Kansas County Commissioners Association is represented by:**

**Mike Taylor**

**StrategyConsultants**



4530 N 108th Street  
913-449-4848

Kansas City, Kansas 66109  
miketaylor4530@gmail.com



**KANSAS EMS ASSOCIATION**  
6021 SW 29th St., Suite A PMB 359 | Topeka, KS 66614  
Ph: 785.580.3459 | [www.kemsa.org](http://www.kemsa.org)

*Unity Is Strength*

To: Chairwoman McGinn and members of the Senate Committees on Ways & Means and Public Health & Welfare

Re: Testimony of Support for Expansion of Medicaid

From: Kansas Emergency Medical Services Association (KEMSA), David Adams, President

Date: February 13, 2024

The Kansas Emergency Medical Services Association (KEMSA) is the professional association representing the paramedics, EMTs and ambulance services serving the citizens of Kansas. KEMSA works on various regulatory and legislative matters as well as conferences and educational programs.

KEMSA is very concerned about the current financial health of the rural hospitals which are the backbone of the health care system throughout much of the state. Rural hospitals in Kansas are seriously challenged with many cutting back services and multiple who have already closed or are on the brink of closure.

Kansas ambulance services are being forced to transport a greater number of patients greater distances as more rural hospitals both minimize the services they can offer or close. The closure of hospitals creates a tremendous burden on local ambulance service (owned and operated by local municipalities) due to a huge increase in call volume and transport times. This has had a dramatic impact on their budgets as they struggle to respond to the situation.

As many patients travel by private vehicle to other hospitals in the where they can find services, the ambulance agencies which service those hospitals have seen an unplanned increase in patient transfers creating additional demands upon their staffing and operations.

As most ambulance services in Kansas are funded by local governments, the closure of hospitals or the scaling back of services means a cost shift to the local government to increase the emergency medical service's capabilities.

Presently, ambulance services provide treatment and transportation services to a large number of patients who cannot pay for the service. This can create a tremendous financial burden on those who, unfortunately, don't have insurance as well as on the local taxpayers

who finance the local ambulance service. Many of these individuals would be covered by an expanded KanCare program. While the current payments made from the KanCare program for ambulance services do not meet the actual cost of the services; having more patients on KanCare would mean additional dollars in the way of additional payment for services.

KEMSA strongly supports the expansion of Kansas' Medicaid program, otherwise known as KanCare as legislation that will have a positive impact on the lives of thousands of Kansans as well as a tremendous impact on the financial well-being of health care institutions in the state.

Sincerely,

David Adams,

President

Kansas EMS Association (KEMSA)

[dadams@kemsas.org](mailto:dadams@kemsas.org)



**To: Senate Committees on Ways & Means and Public Health & Welfare,  
Sen. McGinn, Chair**

**From: Nick Levendofsky, Executive Director, Kansas Farmers Union**

**Date: March 7, 2024**

**RE: SB 355 – Expanding Medicaid**

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Chair McGinn and members of the Committee, thank you for the opportunity to provide testimony in support of SB 355.

Kansas has a health coverage problem. Tens of thousands of Kansans fall into the coverage gap and don't have access to affordable health insurance. Forty states in the U.S., including all the states bordering Kansas, have expanded their Medicaid program, and it is long past time to act and make sure Kansans don't get left behind.

An overwhelming majority of Kansans agree - it's time to expand KanCare. Expanding KanCare will make health insurance accessible to 150,000 Kansans who otherwise may not have affordable coverage.

Expanding KanCare will also:

- Reduce health care costs for everyone. When low-wage Kansans can't get health coverage, that means more emergency room visits and crisis treatment for physical and mental health needs. When hospitals and health care providers aren't compensated for services, a portion of those additional costs are passed on to everyone through higher prices, meaning we are all paying more out of pocket and through insurance premiums.
- Protect Kansans from medical debt. Medical debt is the leading cause of bankruptcy in the United States. Getting access to affordable health insurance protects more Kansans from accruing high medical debt and reducing their risk of bankruptcy.



- Support a healthier workforce. Most Kansans in the coverage gap work at least one job but aren't offered employer-based health insurance or can't afford it. Those who are not working are often caretakers or are unable to work because of their own health conditions. When more people have access to the physical and behavioral health care they need, there are more workers healthy enough to re-enter or remain in the workforce.
- Keep Kansas economically competitive. Nearly all Kansas industries have employees who would benefit from expansion. Expanding KanCare helps our employers, small businesses, and workforce compete with our neighboring states, who have all already expanded their Medicaid programs.
- Preserve and strengthen rural communities. For Kansans in rural communities, accessing health care when and where they need it is becoming a significant challenge. When hospitals in rural communities close, not only do residents struggle to get care, but the community loses good-paying jobs. Expanding KanCare would help ensure rural Kansans get the care they need while also boosting their local economies.
- Ensure uniform access to affordable health care for all Kansans. Hispanic and Black Kansans are more likely to live in the coverage gap. Kansans who live in frontier counties and in the southwest part of the state are also more likely to live in the coverage gap. Expanding KanCare allows all low-wage Kansans access to affordable health care, regardless of their race, how much money they make, or what their zip code is.

Kansas Farmers Union has long called for Medicaid expansion in our grassroots, member-driven policy. We renew this call and strongly encourage policymakers to pass a long-term, sensible solution to the health coverage problem during the 2024 legislative session and expand Medicaid.

Sincerely,

Nick Levendofsky  
Executive Director  
Kansas Farmers Union  
[nick@kansasfarmersunion.org](mailto:nick@kansasfarmersunion.org)



## **Senate Ways and Means & Senate Public Health and Welfare Committees**

Testimony | *Senate Bill 355*

March 20, 2024

Joint committee members:

Thank you for providing an opportunity to submit testimony on Senate Bill 355 – the Kansas Health Foundation (KHF) is in full support of Medicaid expansion and believes access to affordable health care coverage is essential for Kansas to thrive.

Over the last several decades, Kansas has fallen further behind in national health rankings. Currently, thousands of hard-working Kansans do not have access to affordable health care coverage. They are not faceless people. They are Kansans who contribute to our communities and economy. They are our neighbors who wake up every day and do everything within their power to achieve a dignified, fulfilling life. And still, they are unable to afford health care coverage that meets their needs.

Expanding Medicaid is an obvious choice for eliminating the coverage gap and further bolstering our growing economy. Nearly 80% of Kansans support Medicaid expansion. Unfortunately, this debate has gone on for far too long, and the legislature has failed to put forth any meaningful health care policy relief that would benefit as many Kansans while bringing additional dollars to our state.

The legislature plays an essential role in helping Kansas lead the nation in health. We ask that you expand Medicaid and put the Sunflower State on track to return to the ranks of one of America's healthiest places to live.

A handwritten signature in black ink, appearing to read "Ed O'Malley", written in a cursive style.

Ed O'Malley  
President and CEO  
Kansas Health Foundation

### **Background on the Kansas Health Foundation**

"The Kansas Health Foundation (KHF) is a nonprofit organization based in Wichita but statewide in its focus. At KHF, all our work centers on our mission: to improve the health of all Kansans. As part of a new strategic framework, developed by our staff and board of directors, KHF also strives to accomplish three primary purposes: empower Kansas to lead the nation in health; eliminate the inequities that create health disparities; and, for KHF to become THE model for philanthropic impact."



**Kansas Hospital  
ASSOCIATION**

TO: Senate Public Health and Welfare and Senate Ways and Means

FROM: Tara Mays, Vice President State Legislative Relations

DATE: March 20, 2024

RE: Senate Bill 355

The Kansas Hospital Association appreciates the opportunity to provide testimony in support of Senate Bill 355. On behalf of our 122 community hospitals, increasing health insurance coverage is a critical issue for the health of Kansans but also for the health care industry. Currently, Kansas stands as one of only ten states that has been unable to develop a state solution to Medicaid expansion. Senate Bill 355 is a true compromise that will necessitate that everyone, including Kansas hospitals, take part.

The Kansas Hospital Association has had a consistent history of supporting Medicaid expansion. We want to emphasize that Senate Bill 355 is a sensible Kansas-based solution – a solution that will bring hundreds of millions of our federal tax dollars back home to Kansas – creating jobs, boosting our economy, keeping Kansans in the workplace, and improving the health of our state. This legislation will assist approximately 150,000 Kansans who need access to affordable health care coverage, many of whom earn too much to qualify for KanCare but too little to be eligible to receive financial assistance to purchase private insurance in the marketplace. Without regular care, the uninsured often wait until their health concerns reach the point of needing emergency care, which comes at a higher cost to all of us. Further, studies link expanded coverage to fewer opioid overdose deaths<sup>1</sup>, better care, and lower rates of mental and physical health declines.

In Kansas, our hospitals are facing significant financial headwinds. With more than 73 percent of hospitals in Kansas having a negative operating margin going into 2023, we know that 2024 hasn't been easier. On average, hospitals nationally hold 265 days of cash on hand. In Kansas, our hospitals average a mere 62 days of cash on hand. Based on the Center for Healthcare Quality and Payment Reform analysis<sup>2</sup>, 58 rural hospitals in Kansas are at financial risk. These hospitals were losing money on patient services before the COVID-19 pandemic. This is occurring at a time when expenses continue to climb. Our hospital expenses have increased by more than 35 percent in the past three years and Kansas hospitals are having difficulty balancing budgets with stagnant reimbursement rates from public and private payers and more the \$2 billion dollars in uncompensated care. Kansas hospitals recognize the solution for a financial stable environment will require a multi-faceted approach involving expanded coverage, increased reimbursement, and reductions in administrative burdens such as prior authorizations.

Current hospital financial challenges are directly affecting patients because they may lose access to services that are no longer sustainable. This impact is felt most by the elderly, for whom travel is often difficult, and the poor, who have relatively high out-of-pocket transportation fees to obtain healthcare services.

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<sup>1</sup> <https://nyulangone.org/news/medicaid-expansion-associated-fewer-total-opioid-overdose-deaths-across-united-states#:~:text=Adoption%20of%20Medicaid%20expansion%20was,than%20methadone%2C%20such%20as%20fentanyl>.

<sup>2</sup> [https://chqpr.org/downloads/Rural\\_Hospitals\\_at\\_Risk\\_of\\_Closing.pdf](https://chqpr.org/downloads/Rural_Hospitals_at_Risk_of_Closing.pdf)

A February 2023 Kaiser Report found that rural hospitals have fared worse financially in states without Medicaid expansion.<sup>3</sup> In Kansas, we need to address uncompensated care rates that continue to climb. One way of doing that is through Medicaid expansion as a recent study from the Commonwealth Fund showed that states that have expanded had hospitals see a reduction in uncompensated care by \$6.2 billion across all states.<sup>4</sup>

Further, Kansas faces significant workforce challenges, and as the only state in the Midwest who has not expanded Medicaid, we hear frequently about doctors, nurses, and other talented front-line caregivers who would prefer to work in a community that has a financially sound hospital and health care system.

A significant part of this compromise bill includes a hospital surcharge – while such a surcharge is not, and has never been, KHA’s first choice, it is part of an overall recognition that this would produce tremendous benefits for Kansas citizens, the Kansas economy and Kansas hospitals.

We thank you for the opportunity to provide testimony in support of SB 355 and respectfully request the passage of this important legislation.

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<sup>3</sup> <https://www.kff.org/health-costs/press-release/rural-hospitals-have-fared-worse-financially-in-states-that-havent-expanded-medicaid-coverage/#:~:text=For%20the%20most%20recent%20period,on%20the%20438%20hospitals%20analyzed.>

<sup>4</sup> [https://www.commonwealthfund.org/sites/default/files/documents/\\_media\\_files\\_publications\\_issue\\_brief\\_2017\\_may\\_dranove\\_aca\\_medicaid\\_expansion\\_hospital\\_uncomp\\_care\\_ib.pdf](https://www.commonwealthfund.org/sites/default/files/documents/_media_files_publications_issue_brief_2017_may_dranove_aca_medicaid_expansion_hospital_uncomp_care_ib.pdf)



**PO Box 654  
Lawrence, KS 66044**

**Rabbi Moti Rieber, Executive Director  
Rev. Dr. Annie Ricker, Board Chair**

**KansasInterfaithAction.org  
KIFA@kansasinterfaithaction.org**

**(913) 232-2336**

Testimony in Support of Medicaid Expansion  
Senate Committee, Sen. Carolyn McGinn, Chair

Mme. Chair, Members of the Committee –

I am Rabbi Moti Rieber, and I serve as Executive Director of Kansas Interfaith Action, a statewide, multifaith issue-advocacy organization that works with many of the mainline Christian denominations in Kansas, as well as dozens of individual Christian, Jewish and Muslim congregations and hundreds of people of people of faith and conscience throughout the state, to bring a moral voice to public policy in Kansas. We are proud to join with dozens (if not hundreds) of other conferees in calling on our state legislature to at long last expand the KanCare program, so that over 150,000 working and lower-income Kansans can get access to affordable health care.

The issue of access to affordable health care has long been an area of great concern for the faith community, in Kansas and nationally. KIFA has submitted testimony in support of Expansion on numerous occasions since 2017; we've met with legislators; we've prayed about it; we've even protested. Expansion is long overdue. We consider Medicaid Expansion Kansas' most pressing moral priority, and urge this committee and legislative leadership to stop standing in the way of this vital moral imperative and to allow Expansion to move forward.

We take this position based on our Scriptural and moral values. In Genesis it says, "[everyone] is created in the image of God"; we take from this that access to health care should be universal. In Matthew it says, "what you did for the least of my brothers and sisters, you did for me," from which we take that care should not be limited by ability to pay.

The faith communities that make up our coalition — ELCA Lutheran, United Church of Christ, United Methodist, Episcopalian, Catholic, Reform Jewish, and Muslim — have all released statements and advocated both nationally and in states in support of Expansion. We all agree that expansion is a moral necessity. As KIFA Board member, Msgr. Stuart Swetland, said at a faith-and-Medicaid-expansion panel discussion in Johnson County in November 2023, "Catholics believe that adequate health care is a right for everyone, not a privilege for the affluent. As a Catholic theologian and priest, I support the expansion of Medicaid in Kansas to help thousands of my fellow citizens afford access to our health care system and to support our health care facilities in the less affluent areas of our state."<sup>1</sup> The same could be said, and has been said, by all of our partners. Every day that Medicaid Expansion is delayed, people — working people in service or care industries, people with disabilities, real Kansans with real health needs — go without medical attention, and even die.

It's been estimated that over 1,500 Kansans have died as a direct result of this legislature's failure to expand Medicaid.<sup>2</sup> Further such deaths are preventable when we have the means available to help them. *An ethic of life demands Medicaid Expansion.*

Expanded Medicaid is the only option for many lower-income and working Kansans. To be sure, we are mostly talking about Kansans who are working, but who make too much to be covered by traditional Medicaid. These would include workers in minimum-wage and service-industry jobs, precisely the kind of jobs this body has insisted that people on

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<sup>1</sup> "Kansas clergy place faith in state legislators embracing 'moral truth' of Medicaid expansion", Kansas Reflector, November 22, 2023, <https://kansasreflector.com/2023/11/22/kansas-clergy-place-faith-in-state-legislators-embracing-moral-truth-of-medicaid-expansion/>

<sup>2</sup> "'Pro-Life' Catholic leaders have helped block Medicaid expansion as 1,500 Kansans died", Kansas Reflector, December 14, 2023, <https://kansasreflector.com/2023/12/14/pro-life-catholic-leaders-have-helped-block-medicaid-expansion-as-1500-kansans-died>

public assistance take. In other words, the state has compelled people to take jobs that take away their access to health care; we believe this to be immoral and we urge this body to correct that injustice. In addition, Expansion would help people with disabilities to work, because their access to health insurance would not be threatened by income or asset caps that apply to conventional Medicaid.

Kansas Interfaith Action believes that it was a mistake for the state not to expand its Medicaid program years ago. The fact that misinformation and political posturing has made Kansas one of the last 10 states in the country, and the only one in our region, not to have expanded Medicaid, is not only an embarrassment – it's a tragedy. How many Kansans have not had access to affordable health care - how many have died – because of the refusal of this legislature to take the necessary and available steps to protect them?

Other conferees will speak about the economic reasons to expand Medicaid, which are many. KIFA's role here is to bring a clear moral voice to the issue. The people and communities of faith that make up Kansas Interfaith Action care about Expansion because we are concerned for poor and working people, and we care for them because our Scriptures and our values tell us to do so. Expansion is as clear a moral imperative as there is in Kansas policy – and it has been so for many years. It is supported by the majority of Kansans, by the governor and by most of the legislature. It is long overdue.

Expansion will extend access to people who — for no other reason that they are human beings, created, like all of us, in the image of God -- deserve quality and affordable healthcare. It will “bring in from the cold” tens of thousands of Kansans who have previously been excluded from a human right: access to affordable, quality medical care. I urge this committee to work an Expansion bill and get it to the floor as quickly as possible. When all is said and done, it is the right thing to do.

Thank you for your attention.

**To:** Senate Ways & Means and Public Health & Welfare Committees

**From:** Rachelle Colombo  
Executive Director

**Date:** March 13, 2024

**Subject:** SB 355; concerning expanding Medicaid

The Kansas Medical Society appreciates the opportunity to submit the following comments on SB 355, 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 SB 355.

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, SB 355 appears to address this legitimate concern by dissolving expanded benefits if the federal match falls below 90% of the total cost.

Most importantly, SB 355 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 355 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.

# KANSAS MENTAL HEALTH COALITION

An Organization Dedicated to Improving the Lives of Kansans with Mental Illnesses

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March 20, 2024

WRITTEN TESTIMONY

## **Support SB 355 – Pass Medicaid Expansion**

Kansas should pass Medicaid Expansion to provide an insurance option for Kansans who don't make enough money to afford health insurance from the exchange but do not qualify for KanCare. These are Kansans stuck in the coverage gap, with no affordable insurance options and no federal subsidies. The 2019 Mental Health Task Force Report and Governor's Substance Use Disorder Task Force Report recommend expansion.

Our behavioral health programs struggle to sustain treatment for mental illness and addictions for a largely uninsured population. While community mental health centers serve uninsured Kansans, there is no universal access to medications or other medical needs. Expanding Medicaid will improve access to care for Kansans who need it most – those who were not provided coverage in the Affordable Care Act without expansion.

**The Problem:** Most of the Kansans served by addiction treatment facilities and community mental health centers are uninsured or under-insured. Uncompensated care limits mental health and addiction providers, hospitals and clinics capacity. Uninsured Kansans forgo regular health care and often do not obtain medical and mental health care when they become ill. When forced to seek treatment in crisis and desperation, the cost of that treatment shifts to emergency rooms, state mental health hospitals and to taxpayers. Too many of our citizens are currently homeless or incarcerated due to the gaps in our behavioral health continuum of care and Kansas has a serious mental health workforce shortage. Because the Affordable Care Act anticipated Medicaid expansion, it also reduced the disproportionate share (DSH) subsidies to hospitals that used to help offset the costs of treating the uninsured. Kansas should access the federal funds available through expansion.

Today, Kansas' Medicaid eligibility threshold for adults is among the lowest in the country, for instance a parent with a dependent child in a three-person household, would earn less than 33% of the federal poverty level, or roughly \$8,200 per year. In addition, only adults who are caregivers, such as parents and guardians, are eligible at that level unless qualified by disability. Disability varies for individuals with mental illness and there is no waiver for adults with serious mental illness. Childless adults who are not disabled cannot qualify without a chronic disability for Medicaid. Multiple studies link poverty to occurrence and severity of mental illness in adults and children.

**Why this matters:** Thirty percent of the people treated by community mental health centers in Kansas are completely uninsured. Nearly seventy percent of individuals served at community mental health centers have an income of less than \$20,000. Now, the shortage of bed capacity at Osawatomie State Hospital and Larned State Hospital means that individuals in crisis must wait for a hospital bed. Law enforcement and local emergency departments have been placed in an impossible position to hold individuals waiting for inpatient admissions.

According to the 2019 Mental Health Task Force Report, “expanding Medicaid would undergird many of the (Task Force) recommendations by improving access to behavioral health services at all levels of care and allowing investment in workforce and capacity.”

**The bottom line:** For many Kansans, access to important behavioral health treatment and support is out of reach. A Government Accountability Office (GAO) analysis indicates that up to 25% of the new enrollees had mental or substance use disorder diagnoses (under programs studied in four states adopting expansion). Federal cost sharing covers most of the expense for these Kansans.

### **Medicaid Expansion’s Impact on the Kansas Behavioral Health System and Users of Behavioral Health Services – research by the Kansas Health Institute – January 2023**

Medicaid is among the largest purchasers of behavioral health services in the United States and in Kansas. If Kansas were to expand the Medicaid program under the terms of the Affordable Care Act, the outcome also would expand Medicaid’s role in the behavioral health system in Kansas. This report, prepared for the Alliance for a Healthy Kansas through a contract with the Community Care Network of Kansas, studies the impact that Medicaid expansion might have on the behavioral health system in Kansas and how expanding coverage could provide other benefits for Kansas families and communities.

Key findings include:

- Of the 108,800 adults expected to newly enroll in Medicaid if expanded, an estimated 24,154 are likely to use behavioral health services once enrolled.
- Medicaid expansion is estimated to increase annual revenues for behavioral health providers from Medicaid claims by \$87.1 million, a net revenue increase of \$62.6 million.
- Federally qualified health centers in expansion states had average increases of 1,500 visits overall and 1,000 mental health visits per year as compared to non-expansion states.
- Medicaid expansion has been associated with fewer arrests and reduced rates of rearrest. A reduction in arrests may lead to reduced spending at county jails in Kansas and reduced incarceration in the criminal justice system.
- Medicaid expansion states experienced a 32.0 percent reduction in foster care admissions related to neglect as compared to non-expansion states. Applying the reduced rate experienced in expansion states to 2022 Kansas foster care data equates to an estimated 305 fewer children entering the foster care system in Kansas because of neglect.

Thank you for your consideration.

**Kansas Mental Health Coalition**  
c/o Amy A. Campbell, Lobbyist  
P.O. Box 4744, Topeka, KS 66604  
785-969-1617; [campbell525@sbcglobal.net](mailto:campbell525@sbcglobal.net)

**Kansas Poor People's Campaign**  
**kansas@poorpeoplescampaign.org**

Testimony in Support of Medicaid Expansion  
Joint Senate Committee, Sen. Carolyn McGinn, Chair

Mme. Chair, Members of the Committee –

We are leaders within the Kansas Poor People's Campaign. We are people of faith and moral conscience who are or have experienced poverty and low-wages. We are part of the Poor People's Campaign: A National Call for Moral Revival (PPC:NCMR) operating in over 30 states across the country. Since 2017 we have advocated, demanded, educated, voted, and taken action to end the interlocking injustices of poverty, systemic racism, ecological devastation, militarism, and distorted moral narratives. We are connected to dozens of other faith communities and organizations calling on the Kansas state legislature to expand Medicaid in our state so that [over 152,000](#) poor and lower-income Kansans have access to lifesaving, affordable healthcare.



As leaders in the Kansas Poor People's Campaign, we have testified at countless actions, rallies, and meetings about the impact lack of access to affordable healthcare has had on us, our families, and our communities. We have testified to the high rates of farmers' suicides in our state and the need for accessible, affordable mental health care, as well as the services provided from rural hospitals. We have testified about how as veterans we are in need of accessible mental health care and medical care after serving our country in war. We have testified to the impact of medical debt due to lack of access to reproductive health care. We have testified to the impact of lack of affordable care on those of us with disabilities. We have sung in the streets "somebody's hurting our people and it's gone on far too long and we won't be silent anymore!" And above all we have proclaimed that it doesn't have to be this way!

A recent study has shown that [poverty is the fourth leading cause of death in the United States](#). Kansas has contributed to this tragic and avoidable statistic by failing for years to expand Medicaid. It is estimated that [at least 1,500 Kansans have died](#) because our elected leaders have not expanded affordable healthcare in our state. In fact, the [life expectancy of Kansans dropped by 1.8 years](#) between 2019 and 2020, while 150,000 Kansans endured a global pandemic without access to adequate, affordable healthcare. Kansas ranks [last in overall mental health care](#), calculated by the high prevalence of mental illness and lack of access to care. Additionally, failing to expand Medicaid in Kansas has [decimated rural hospitals](#) and prevented access to needed care for many Kansans throughout the state. With these impacts on [Kansans already struggling](#), it is no wonder that [the majority of Kansans support the expansion of Medicaid](#) in our state.

The people and communities these statistics represent deserve better. Our faith traditions teach us to “remove the yoke of oppression, the pointing of the finger, the speaking of evil, if you offer your food to the hungry and satisfy the needs of the afflicted, then your light shall rise in the darkness and your gloom be like the noonday. You shall raise up the foundations of many generations; you shall be called the repairer of the breach, the restorer of streets to live in” (Isaiah 58:10-12). In Matthew 25:31-46, Jesus teaches that societies and nations will be judged by whether or not they feed the hungry, give drink to the thirsty, clothe the naked, invite the stranger, visit the imprisoned, **and care for the sick** for doing so to “the least of these” is the same as doing so to Jesus himself.

It is clear that expansion of Medicaid in Kansas is the moral choice and our elected officials can still make the right decision to save hospitals, save lives, and enact the will of the people of Kansas. As Rev. Dr. William J. Barber, co-chair of PPC:NCMR often says, this is not about left and right, but about right and wrong. We urge you to do right by the people of Kansas and expand Medicaid in our great state.

– Kansas Poor People’s Campaign Coordinating Committee

Rev. Dan Chadwick  
Oshara Hayes  
Bo Johnson  
Kimberly Weaver  
Rev. Dr. Jessica Williams  
Kolina Winburn



**Written Proponent Testimony on SB 355**  
**Senate Committee on Ways and Means & Senate Committee on Public Health and Welfare**  
**March 20, 2024**

Chairwoman McGinn and Members of the Committee:

Thank you for providing the opportunity for the Kansas Public Health Association (KPHA) to provide written testimony in support of SB 355, which would expand medical assistance eligibility and enact the cutting healthcare costs for all Kansans act. KPHA is a professional organization that represents more than 800 public health practitioners, healthcare providers, researchers, advocates, and other professionals working together to build a healthier Kansas.

KPHA is dedicated to promoting safe, healthy living conditions that allow all Kansans to thrive. Ensuring access to quality, affordable healthcare plays an integral role in achieving this goal. Access to healthcare is essential for preventing disease, managing chronic conditions, and improving health outcomes. Expanding KanCare will provide health coverage to more than 150,000 Kansans who currently fall into the coverage gap, increasing their access to primary and preventive care needed to maintain and improve their health. Additionally, expanding KanCare reduces healthcare costs for patients and providers, creates new jobs, and strengthens our state's healthcare infrastructure.

SB 355 is a common-sense policy supported by most Kansas residents. Medicaid expansion increases healthcare access, reduces healthcare costs, and improves health outcomes. We encourage the Committee to invest in bright, healthy futures for Kansans by expanding KanCare coverage.

We appreciate your consideration of SB 355 and urge you to support its passage.

Respectfully submitted,

Erin Attebery  
Policy Chair, Kansas Public Health Association  
[erin.attebery@live.com](mailto:erin.attebery@live.com)

## Kansas Rehabilitation Hospital

A joint venture of **Encompass Health** and **Stormont Vail Health**

TO: House and Senate Committees

FROM: Barry Muninger, CEO

DATE: March 12, 2024

RE: Proponent HB 2556/SB 355

Today I write on behalf of **Kansas Rehabilitation Hospital** in Topeka, an inpatient rehabilitation hospital providing physical rehabilitation to patients recovering from complex medical conditions such as strokes and traumatic brain and spinal cord injuries. We appreciate the opportunity to support House Bill 2556/Senate Bill 355, Expanding Medical Assistance Eligibility and Enacting the Cutting Healthcare Costs for All Kansans Act.

This legislation, if enacted, would help over 150,000 Kansans access affordable healthcare and bring millions of federal tax dollars back home to Kansas. If enacted, providers will be able to hire and retain more nurses and other healthcare professionals in Kansas by bringing more federal dollars back to the healthcare system.

This legislation would allow Kansans who currently earn too much for KanCare, but not enough to cover private insurance to get affordable healthcare coverage. By increasing access to healthcare, Kansans may have the ability to address their health concerns before they become an urgent medical issue needing emergency care, which can increase costs for the state and healthcare system.

While we support expansion of affordable healthcare, we would also like to highlight the need for increased access to inpatient rehabilitation services in the Medicaid program in Kansas. Patients deserve to be cared for in the most appropriate setting to maximize their recovery and increasing access to medical inpatient rehabilitation in Kansas will help patients return back to the community after debilitating injury or illness.

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



# KANSAS RURAL CENTER

FOR THE HEALTH OF THE LAND AND ITS PEOPLE

## KANSAS RURAL CENTER

PO Box 314

North Newton, KS 67117

(866) 579-5469

[www.kansasruralcenter.org](http://www.kansasruralcenter.org)

March 14, 2024

Testimony on SB 355

Proponent

Written Only

Dear Members of the Joint Committee on Ways and Means and Public Health and Welfare:

I appreciate the opportunity to provide written testimony on SB 355. The Kansas Rural Center has been working to build an economically viable, ecologically sound, and socially just farming and food system for Kansans for 45 years. KRC believes that diversified farming systems hold the key to preserving, developing and maintaining a food and farming future that provides healthy food, a healthy environment and social structure, and meaningful livelihoods. Our work has focused on supporting farmers and communities as they create local food systems around the state of Kansas. While an organization that is focused on food systems and farming might seem outside of the realm of health care, lack of access to affordable health care is a dominant issue facing farmers and rural communities across the state.

SB 355 can play a key role in shoring up struggling rural hospitals and providing affordable health care for rural residents. Since the option to expand Medicaid became available, eight rural hospitals have closed, and more are fighting to stay open faced with challenging economics. When rural hospitals cannot be reimbursed for services they provide, they have a hard time staying open. Since the opportunity to expand Medicaid has been repeatedly passed over, Kansas has lost out on billions in funding that could have helped keep those hospitals open. When Kansans are uninsured the rest of us have to pay for their care through increased prices. While there are some farmers who make a decent living in their profession, there are many more who struggle to make ends meet, and often are unable to afford health insurance. Expanding Medicaid can help support these hardworking individuals and families as they continue to produce crops and livestock. SB 355 will also help Kansas catch up with the 40 other states who have already expanded Medicaid.

Thank you to members of the committee for your consideration, and we strongly encourage you to support access to affordable health care for 150,000 more Kansans by voting to pass SB 355 out of committee.

Tom Buller  
Kansas Rural Center

March 15, 2024

Below is my testimony for the House and Senate hearings on Medicaid Expansion:

Dear Chairperson and Committee Members,

First, my apologies for not addressing you by name--I don't know who holds these positions.

This is ask your support for Medicaid expansion. As you know, approximately 150,000 Kansans lack lack access to health care, and expanding Medicaid can fix that. Without health insurance, these people must pile up medical debt or sicken and may die. Their only option may be emergency department treatment--unreimbursed costs that the rest of us pay.

Of course, financial costs must be considered. My understanding is that expansion will come at no cost to Kansas and will, in fact, bring hundreds of millions of additional dollars to our state.

Given the success that all other states with expanded Medicaid have experienced, I struggle to understand why some Kansas electeds resist it. Truly, the only logical answer I can see is to use the issue for political leverage--and that's absolutely unacceptable.

Please fulfill your obligation to act in the best interests of all Kansans and support Medicaid expansion.

Sincerely,

Jean Kasselmann, Ph.D.  
Leawood, KS. 66206

March 15, 2024

I don't have a thought-provoking, touching story about how expanding Medicare and medicaid helped me. I do know that helping others through my taxes is a great use of money.

When we were younger and poorer, we were paying well over 1200\$ a month for a family of 4 in health insurance. This year we are probably going to be kicked off of Kancare due to landing in a higher tax bracket. We also have a bigger family.

We are one of the lucky few who won't be in debt because of this. Many are not so lucky. Supporting fellow humans is this right thing to do, be it thru SNAP, WIC, or Medicaid. Denying Kansans their right to health and wellbeing is cruel.

Kat

Date: March 20, 2024

From: Nick Keehler

RE: HB 2556 / SB 355 Proponent testimony

Dear Kansas Legislators,

I began working in the Office of Justice, Peace, and Integrity of Creation for the Sisters of Charity of Leavenworth in the state of Kansas last year, and was aghast when coworkers informed me about the Medicaid coverage gap in the state. What I found so disturbing was that I fell into this coverage gap in my previous job as a landscaper, but was luckily employed in Missouri, even though we primarily worked in the yards of Overland Park and Kansas City, Kansas residents. Medicaid was the only thing that allowed me to visit the doctor and pay for the asthma medication I need just to breathe. To think that a mere technicality, a state border, meant I didn't have to choose between paying my mortgage and being able to breathe, breaks my heart. How many people are on the other side of that border, being forced to make that same choice? Beyond that, how many people must choose between survival and leaving the place they call home?

**This does not have to be the reality.**

I grew up in Missouri, 12 miles from the Kansas border. Now I reside a mere 8 miles from that same border. Because I work on the Kansas side, it would make sense to move into the state. Not only would I have a shorter commute, but I could feel truly connected to and embedded in the communities I serve. However, as long as the coverage gap exists in Kansas, I will not be moving in. I am at the stage in my life where I am thinking about starting a family. What would I be subjecting my children to if they found themselves in a similar situation to me, in need of healthcare but because of a technicality, were unable to receive the care they require?

Until I see that Kansas cares about the people living here, until I see that Kansas wants to uphold a basic level of ethics, until I see that Kansas refuses to watch their own people suffer and die because of an avoidable technicality, I will not be living here.

This is my personal story, and it does not even touch on the multitude of common-sense arguments to adopt Medicaid expansion. It will save Kansas money, it will cut healthcare costs for everyone, and it will bring in jobs and grow the economy. I urge you to adopt this policy because it makes sense from every angle.

**Please, care about Kansans. Care about people. Expand Medicaid.**

Sincerely,  
Nick Keehler



Heartland Community  
Health Center  
1312 W 6<sup>th</sup> St  
Lawrence, KS 66044  
785.841.7297

Heartland  
Panda Pediatrics  
1803 W 6<sup>th</sup> St  
Lawrence, KS 66044  
785.842.4477

River City  
Pharmacy  
1312 W 6<sup>th</sup> St  
Lawrence, KS 66044  
785.856.3210

February 26, 2024

From: Elizabeth Keever, Chief Development Officer  
RE: Testimony to support Cutting Healthcare Costs for all Kansans Act

On behalf of Heartland Community Health Center, our staff, Board of Directors, and most importantly, our patients, I write to you in support of the Cutting Healthcare Costs for all Kansans Act, embodied in HB 2556 and SB 355. This legislation is not just a bill; it is a lifeline for 150,000 hardworking Kansans who currently lack access to affordable healthcare.

At the heart of this act is a commitment to fiscal responsibility. Medicaid expansion, under this act, is revenue-neutral, ensuring that it won't burden Kansas taxpayers. Instead, it redirects surplus funds towards essential investments in tax cuts, public schools, and infrastructure, benefiting our entire state. **Most importantly, this act will improve the health and wellbeing of Kansans.**

I want to share the story of a patient named Shyanne that I had the pleasure of speaking with recently. Shyanne and countless patients like her whose lives have been deeply impacted by the absence of adequate healthcare coverage. **Shyanne's story echoes the struggles of the 3,000 patients at Heartland Community Health Center in 2023 who found themselves without any form of health insurance.** This number will continue to rise as disenrollment continues. Shyanne, like many, faced the stark reality of delayed medical treatment due to ineligibility for Medicaid. For years, she grappled with chronic conditions that could have been prevented if she had access to preventative care. The repercussions were profound – her health deteriorated, impacting her employment and education. To make matters worse, her medications vital to her well-being remained out of reach, priced beyond \$200 a month.

Health centers like Heartland are these patients' only option to receive this vital care. With rising costs and patient revenue shortfalls without Medicaid expansion, health centers run the risk of closing their doors following suit to the 8 rural hospitals that Kansas has lost since 2014. The weight of uncompensated care threatens the sustainability of vital healthcare services, imperiling the well-being of our most vulnerable populations. Shyanne's story is one experienced by countless Kansans and underscores the urgent need for Medicaid expansion. The individual toll is staggering, but Shyanne's story also vividly illustrates the broader economic strain felt across our state. Kansas has lost nearly \$7 billion in federal funding while our taxpayers support jobs and healthcare in 40 other states.

Medicaid expansion is not merely a policy issue; it is a beacon of hope for those experiencing the reality of healthcare inequity. **Medicaid expansion enhances access to care, provides financial relief for hard working Kansans, strengthens the states healthcare safety net including community health centers, and improves the state and local economy.** I urge you to heed the call of compassion and responsibility, to stand on the side of health, and to expand Medicaid, ensuring that every Kansan, regardless of circumstance, has access to the care they need to thrive. **This is a moral imperative and a fiscal necessity.** Thank you for your attention and consideration.

Sincerely,

Elizabeth Keever  
Chief Development Officer  
Heartland Community Health Center

Ken Keith  
7824 E. Pagent Lane  
Wichita KS 67206

February 2, 2024

I am a 74 year old person, on Medicare, and am paying for supplemental insurance. For my entire working life I carried health insurance for myself and my family, either paying for it myself, having it provided by my employer, or a combination of both. A basic right of all people is the availability of basic health care. I understand that everyone should take care of themselves (and their families) to the best of their abilities, and in a perfect world, that would be happening.

The fact is, we DON'T live in a perfect world. Granted, there are some people who just don't take care of themselves or their families. But here are far more people who simply can't afford health care insurance after paying the rent, buying food and clothing, and other basic necessities for themselves and their families. Should these people suffer because we want to "punish" those who could but don't, or just won't? Mental illness, physical disabilities, etc. are only some of the things keeping people from obtaining the ability to provide themselves and their families with basic health care. I certainly don't see how punishing families for the inability of their primary support (for whatever reason) helps the situation for any of us, especially themselves. It is not logical, and it is not moral.

So, since hospitals must provide basic health care for whomever enters the door, the rates charged to me (and my insurance provider) must cover the cost of those services for others who need, but can't afford basic health care. My federal taxes are going to help provide these services through Medicaid, in which the State of Kansas does not participate. We pay in, and get nothing in return. This is not fair to the people who need these services, and it's not fair to the Kansas residents who subsidize health care programs through their taxes that are not coming back to help the State and it's residents. This needs to change. Please support Medicaid expansion in any way possible, for the sake of the State in general, and most especially for the citizens of the State, who deserve better from their elected representatives.

Thank you for "listening."

Kenneth Keith

**March 20, 2024**

**Testimony for Medicaid Expansion**

**NAME:** Danielle Keller

**TITLE:** Kansas Resident

**PROPONENT, OPPONENT, or NEUTRAL:** Proponent

**ORAL or WRITTEN ONLY TESTIMONY:** Written Only

I am submitting testimony to voice my support of Medicaid Expansion in Kansas.

I believe that all Kansans should have affordable access to healthcare. Medicaid Expansion is the kind and loving thing to do for our neighbors across the state. However, since love and kindness don't pay the bills, let's focus on the numbers that we can estimate and measure:

- Expanding Medicaid will make health insurance accessible to **150,000 Kansans** who otherwise may not have affordable coverage.
- Nearly **23,000 new jobs** would be created in the first full year of expansion.
- Since 2014, Kansas has lost out on nearly **\$7 billion** in federal tax dollars.
- The federal signing bonus under the American Rescue Plan Act if Kansas enacts expansion is **\$450,000,000**.
- Amount marketplace **premiums are 7% lower** in states that expanded Medicaid compared to non-expansion states like Kansas.
- **81% of Kansans**, a supermajority, believe that everyone in Kansas should be able to get affordable health insurance.

I would much rather my federal tax dollars stay here in Kansas to help out my neighbors than be sent to states like New York and California. More importantly, I want to live in a state where everyone has access to the healthcare they need to survive and thrive. I hope that Medicaid Expansion is inevitable in our state. But, I fear when that time comes and Kansas realizes the health and financial benefits we missed out on for so many years, we will look back and ask ourselves why it took so long to make it happen.

Please pass Medicaid Expansion to improve healthcare affordability and access across Kansas. Please pass it this year.

Danielle Keller  
Overland Park

March 15, 2024

Please vote to expand Medicaid to help 152,000 needy Kansans (children, seniors and people with disabilities) get proper health care and help our rural hospitals stay in business. This comes at no additional cost to Kansas taxpayers. Kansas should share in the 90/10 federal financing (\$700 million annually to Kansas) for the Medicaid Expansion program. Since 2014, we have paid federal taxes for 40 other states who have expanded to enjoy this federal financing and Kansas should expand to help needy Kansans. 70% of Kansans want Medicaid expansion.

Thank you.

Marguerite Kennedy

March 15, 2024

To whom it may concern, Our family would like to support Medicaid Expansion. We have a daughter who deals with Rett Syndrome. She deals with Scoliosis, Seizures and is totally dependent upon others for her Self Care. Medicaid Expansion would benefit her and others like her who must be followed for specialized care from her physicians, and who must take medication to help control her seizures. Medicaid expansion is needed in our state.

Thank you for your time and service.

Barbara and John Kenton – Roeland Park, Kansas

March 17, 2024

Dear Chairman and Committee Members,

I am so happy to be able to provide testimony to support Medicaid Expansion.

Last fall, I attended the Johnson County Academy. During the Johnson County Mental Health presentation, they told us that the number one thing we can do to help our county help the mentally ill is to Expand Medicaid.

The jail presentation also provided details about people who were in jail because the Medicaid Expansion resources were not there for mental and addiction services. They mentioned that the mental rehab beds in the state are not adequate for the community, and the backlog is months.

Expanding Medicaid will help all of Kansas and will not hurt us in any way. Marketplace premiums are 7% lower in states that expanded Medicaid compared to non-expansion states like Kansas. Medicaid expansion does not cost the taxpayer. The bills are revenue-neutral. There is no logical reason why we should not say yes to doing the right thing for our state and our people.

Please support Medicaid Expansion.

Deborah Kitchin

Leawood, Kansas

March 15, 2024

Dear Chairman and Committee Members,

I appreciate the opportunity to provide testimony in support of Medicaid Expansion.

Medicaid Expansion is the right thing to do economically, fiscally, and morally.

\* Medicaid Expansion is popular. Nearly 80% of Kansans - regardless of political party - support Medicaid Expansion. Forty states have already expanded Medicaid including all states that border Kansas.

\* It gives 150,000 low income Kansans access to affordable health care which overall leads to a healthier population and a healthier work force.

\* It addresses the mental health crisis with improved access to care and medication.

\* It protects Kansans from medical debt. By expanding KanCare thousands of Kansans will be able to afford health insurance coverage. That protects them from medical debt so they can use the savings to pay for other essentials.

\* Medicaid Expansion lowers healthcare costs for everyone. Marketplace premiums are 7% lower in states that expanded Medicaid compared to non-expansion states like Kansas.

\* Medicaid Expansion won't cost Kansas taxpayers a single cent. HB 2556 and SB 355 are revenue neutral.

\* It protects and strengthens rural healthcare. Since 2014 eight rural hospitals have closed and currently 59 Kansan hospitals are at risk of closing. Medicaid Expansion supports jobs and healthcare access in rural areas.

\* Medicaid Expansion is good for the Kansas economy. About \$700 million in annual federal funding would flow into the state. Medicaid Expansion would create nearly 23,000 jobs and help end our healthcare worker shortage.

For all these reasons, I ask that you support Medicaid Expansion.

Colleen W. Knight  
Leawood, KS 66224



March 20, 2024

Tanya Koehn, Interim Executive Director  
Child Care Aware of Kansas  
Written-Only Proponent Testimony for SB 355  
Senate Committee on Ways and Means

Chairman Billinger 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](mailto: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

Date: March 14, 2024

To: Alliance for a Healthy Kansas

Re: Testimony in Support of Medicaid Expansion

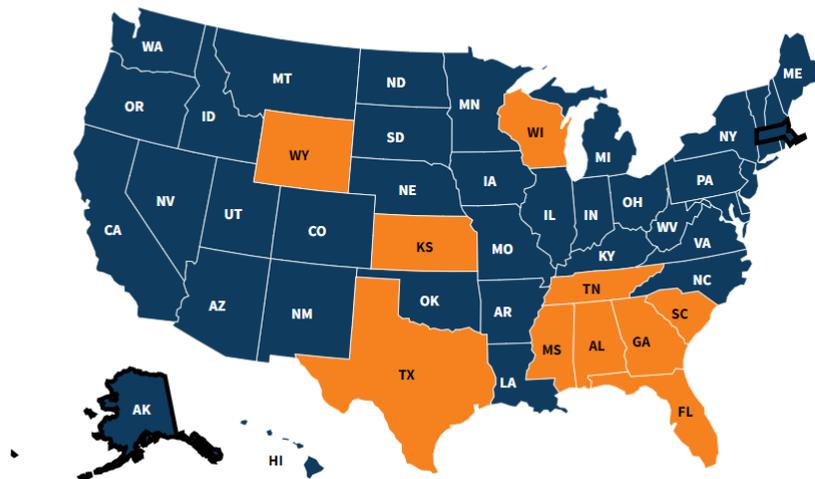
From: Lowell & Stacy Kohlmeier, 5127 MacLeod Drive, Manhattan, Kansas

As lifelong Kansans who both grew up in small towns – Kinsley and Linn specifically - we are all too aware of the importance of maintaining medical services for residents within reasonable driving distances. When hospitals close that serve surrounding rural communities, people suffer and put off seeking medical services which leads to more severe medical problems. The closure of medical facilities even drive people to leave smaller communities they love and migrate to larger cities to be near medical services they require.

We fully support the expansion of Medicaid to help shore up our healthcare system across Kansas by reducing the number of people in the uninsured gap. With Federal funding available to expand Medicaid coverage to all States, there is no excuse not to provide these important basic medical services to Kansas citizens that need and qualify for coverage.

Kansas is now one (1) of only ten (10) states NOT taking advantage of the expanded coverage funding as illustrated on the map below.

### Status of State Action on the Medicaid Expansion Decision



Not only is this a disservice to Kansas citizens, it also puts Kansas at a disadvantage in attracting and retaining businesses and the people that work in those businesses.

Every state bordering Kansas has adopted Medicaid expansion to provide insurance coverage to people in need – and Kansas should do the same.

We thank you for taking action to accept the Federal Medicaid Expansion funding and put Kansas in a position to take care of folks in the unfortunate position of not being able to afford insurance. This strategic, and caring, action will ultimately produce financial benefits to medical facilities across the state that will help stabilize our health care resources and the Kansans they serve.

March 15, 2024

Today there are tens of thousands of Kansans who fall into the health insurance coverage gap. In fact, KanCare expansion could help 150,000 people receive health coverage. These are hardworking men and women in Kansas who make too much to qualify for the state's Medicaid program, KanCare, but too little to qualify for financial assistance for private insurance. This leaves them stuck with few or no options for affordable health coverage.

KanCare expansion is a commonsense policy that will reduce health care costs for everyone, protect Kansans from medical debt, fix current KanCare eligibility limits (which are too low), and preserve and strengthen rural health care.

- Jennie Konomos

March 16, 2024

Dear Chairman and committee members,

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

- 150,000 low income Kansans would gain access to medical care.
- Expanding KanCare will protect tens of thousands of Kansans from medical debt because they will be able to afford health insurance coverage.
- About \$700 million in annual federal funding would flow into the state. And an additional \$450 million in new dollars during the first two years from signing bonus.
- We would be able to address the mental health crisis with improved access to care and medication.
- It will help us preserve and strengthen rural healthcare.

I implore you to support Medicaid Expansion.

Sincerely,  
Jeanne Koontz  
Hutchinson

Center for Research on Aging and Disability Options  
KU School of Social Welfare  
Twente Hall  
1545 Lilac Lane  
Lawrence, KS 66045

March 13, 2024

Sen. Carolyn McGinn, Chair, Senate Ways & Means and Public Health & Welfare Committees  
Chairperson McGinn and Honorable Members of the Committees,

I am a Project Director with the KU School of Social Welfare, where I direct the School's Center for Research on Aging and Disability Options. One of my principal research areas is the Medicaid Home and Community-Based Services (HCBS) program, and the outcomes and experiences of older adults and individuals with disabilities who use these services. Recently, I conducted a federally funded mixed methods examination of the challenges in our HCBS sector during the COVID-19 pandemic, including the ways workforce challenges undermine the well-being of the Kansans who rely on HCBS. This research has important implications for the legislature's consideration of KanCare expansion. I share this testimony from my research evidence and my professional expertise, not on behalf of the University of Kansas.

Throughout the state, the hard-working, compassionate, and committed homecare workers (also known as personal care attendants)—a critical link in our overall health care system and especially imperative in underserved rural communities—are themselves caught in the coverage gap, earning too much to qualify for Medicaid but too little to qualify for the ACA Marketplace. As a result, my research reveals that Kansas' Personal Care Attendants are nearly twice as likely to be uninsured (24.1%) than the national average (12.2%) for working aged adults. This coverage gap harms not only the uninsured workers, but also the Medicaid waiver recipients who depend on these workers to meet their care needs. One personal care attendant in our study explained this bind: *"I've been without health insurance most years...I could probably quit work and get disability due to a serious back injury, but I'm doing that because nobody would be there to take care of my clients."*

This worker's experience is far from unique. Fueled by population aging and older adults' strong preference to receive needed care at home rather than in institutions,<sup>1</sup> the home care workforce is one of the fastest growing in the state. Estimated at more than 25,000 workers in Kansas currently, this workforce is expected to grow in our state by an additional 17% in the next decade.<sup>2</sup> However, this supply does not match demand, resulting in a crisis for many Kansas

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<sup>1</sup> PHI (2021). *Caring for the Future: The Power and Potential of America's Direct Care Workforce*. Available from: <https://www.phinational.org/wp-content/uploads/2021/01/Caring-for-the-Future-2021-PHI.pdf>.

<sup>2</sup> PHI (2023). *Direct Care Workers in the United States: Key Facts 2023*. Available from: <https://www.phinational.org/resource/direct-care-workers-in-the-united-states-key-facts-2023/>.

families seeking care. Insufficient wages make positions hard to fill and retain, and the lack of health insurance keeps people from considering the job, particularly given its health and safety challenges.

Crucially, inability to find and keep good workers leads to many unmet care needs and forces some people into nursing homes—an outcome not only devastating individually, but also far more costly for the state. One study respondent in my latest HCBS research spoke powerfully to the tragic consequences of our HCBS workforce shortages (verbatim quote condensed here): *“It (being in nursing home in middle of a pandemic) was one of the most traumatic emotional and mental experiences of my whole time being disabled which is close to 39 years now, since I was 13 years old. It was indeed one of the most devastating times of my entire life.... The physical care I receive from my personal care attendants allows me to stay in my own home....I would like to live out the rest of my life in my own home. If personal care attendants get a fair raise in pay and other necessary benefits, like health insurance, then the disabled like me can stay in our own homes for the rest of our lives... Who wants to be taken from their home and put into a nursing home? Please whoever reads this, do what you can to help the disabled by telling the powers that be to raise the income, give healthcare and other benefits to of all personal care attendants nationwide.”* This too is a far from unique experience. In my research, 39% of survey respondents reported going without formal home care services for at least 2 consecutive weeks during the pandemic. Half of those going without care for extended periods reported their home care agency or direct support worker was unable to provide services during that time or they did not have a backup worker when their main worker was temporarily unavailable; 39.5% said they were unable to find a care worker or agency altogether. While COVID-19 exacerbated the workforce crisis, these issues predated and have outlasted the acute pandemic period.

Care for older adults and people with disabilities should not be made purely on cost, but there are cost savings to be realized in pursuing home-based rather than institutional care.<sup>3</sup> However, instability and insufficiency in the care workforce threatens this calculus and can compromise health outcomes. Turnover costs for providers range from \$2,413 to \$5,200 per employee,<sup>4</sup> and high turnover rates exact other costs, as well, leading to increased risk of emergency room visits, injuries, and other adverse outcomes for those with disabilities.<sup>5</sup>

Closing the coverage gap is key to connecting willing workers with the Kansans increasingly desperate to hire them, and the most fiscally responsible way to deliver health insurance to this essential workforce is through KanCare Expansion. Providing health insurance to home care workers will increase the value of these jobs, thus reducing turnover and encouraging Kansans to

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<sup>3</sup> McGarry BE, Grabowski DC (2023). Medicaid home and community-based services spending for older adults: Is there a “woodwork” effect? *J Am Geriatr Soc.*; 71(10): 3143-3151.

<sup>4</sup> Medisked Connect (2016). *The Staffing Struggle is Real*. Available from: <https://mykapp.org/wp-content/uploads/2016/10/Medisked-Staffing-Survey.pdf>.

<sup>5</sup> Friedman, C. (2021). The Impact of Direct Support Professional Turnover on the Health and Safety of People With Intellectual and Developmental Disabilities. *Inclusion* 1, 9 (1): 63–73.

join this in-demand field. And because these jobs are home-based, they will benefit every part of Kansas including hard-hit rural communities. As a research respondent described, *“There's a ton of really good workers out there who want to do this kind of work, they have a passion to do this kind of work, but they can't afford to do it and support their family. There's no health insurance. It's not fiscally possible for them to do this. It almost has to be part of a family that they have benefits someplace else that covers 'em.”*

With our population aging and more Kansans needing support to remain in their communities, the HCBS workforce is increasingly essential. We all hope to become older adults, and we all could develop disabilities. To meet the needs of these Kansans today, our policies must invest in closing the coverage gap—for these workers, and for the Kansans who rely on their care.

Sincerely,

A handwritten signature in blue ink, appearing to read "Carrie Wendel-Hummell".

Carrie Wendel-Hummell, PhD  
Director, KU Center for Research on Aging and Disability Options  
785-864-3797  
cwendel@ku.edu

March 16, 2024

Dear Chairman and committee members,

Thank you for the opportunity to provide testimony in support of Medicaid Expansion. Support for the expansion is widespread across the state of Kansas. Statewide, 85% of urban residents, 79% of suburban residents, and 73% of rural residents support expanding medicaid. Why not implement to choice of you constituents!

There are so many benefits to Medicaid Expansion including:

- **150,000 low income Kansans would gain access to medical care.**
- **Protects Kansans from medical debt.** By expanding KanCare, tens of thousands of Kansans will be able to afford health insurance coverage. That protects them from medical debt so they can use those savings to pay for other essentials.
- **Healthcare costs for everyone would be reduced.** Emergency rooms are treating Kansans without the ability to pay, raising the costs of health care for everyone. As workers gain insurance through expansion this uncompensated care declines, reducing the need to increase prices for all Kansans.
  - Marketplace premiums are 7% lower in states that expanded Medicaid compared to non-expansion states like Kansas.
- **About \$700 million in annual federal funding would flow into the state.**
- **Federal law provides a signing bonus for states that haven't implemented expansion.** This would result in Kansas seeing up to an additional \$450 million in new dollars during the first two years.
- **Medicaid Expansion won't cost Kansans taxpayers a single cent.** The bills being heard next week, HB 2556 and SB 355, are revenue neutral.
- **Addresses the mental health crisis** with improved access to care and medication.
- **Preserves and strengthens rural healthcare.** Rural hospitals face high levels of uncompensated care; [59 of the remaining 102 rural hospitals across Kansas are in danger of closing.](#)

Please support Medicaid Expansion!!!

Lisa Kuhnke  
Leawood, KS



TO: Senate Ways & Means and Public Health & Welfare Committees  
FROM: Brian Williams, President and CEO   
DATE: March 1, 2024  
RE: Proponent SB 355

Thank you for the opportunity to provide written testimony to the committee.

Labette County Medical Center, d/b/a Labette Health supports Medicaid Expansion in the state of Kansas from a humanitarian perspective as well as an economic perspective. Based upon our calendar year Medicare Cost Report our Total unreimbursed and uncompensated care cost was \$9,881,741 with the cost of uncompensated care included in this total being \$3,989,942.

Based upon the most recent estimates available, if Medicaid were expanded in Kansas, Labette Health would receive a potential benefit of between \$1,306,542 and \$2,613,084, which still does not cover the total cost of uncompensated care leaving an over \$2,000,000 deficit for a small rural hospital to figure out how they can at least break-even from operations. Hospitals are capital intensive operations that require resources to sustain themselves and replace expensive equipment and technology. At some point, a hospital running its operations at a deficit runs the risk of impacting patient safety and quality in a negative way, which is not something any of us want.

The impacts from COVID-19, inflation, and workforce shortages have had a disparate impact on many rural hospitals and communities. We live and serve in population areas that have declining population densities, fewer resources, and poorer access to healthcare than many other areas of the country. Equitable access to healthcare is an important and fundamental humanitarian responsibility for all of us. In my opinion, to assist those less fortunate than many of us is what we should do and desire to do.

Medicaid expansion would potentially go a long way to helping us sustain high quality, safe, and humanitarian healthcare in Kansas. Thank you in advance for being willing to address this issue and more importantly having the courage to make a humanitarian and economic decision rather than a political one.

March 16, 2024

Dear Committee Chair and Committee Members

Subject: Medicaid Expansion

Date: March 16, 2024

I am strongly in support of Medicaid Expansion and encourage to vote appropriately. Among the benefits of expansion:

- Hundreds of millions of dollars that leave the State would remain for the benefits of Kansans.
- Medical costs would be reduced for everyone.
- Approximately 150,000 Kansans who don't receive medical care would now receive it.
- Thousands of additional jobs in the health care industry would be created.'
- The overall health of Kansans, including mental health, would be dramatically improved.
- Many rural hospitals that are struggling financially would remain open to provide healthcare.

Caring for all Kansans should guide all of your legislative actions. Consequently, I urge you to vote "Yes" for Medicaid Expansion.

Dr. Les Lampe  
Shawnee, Kansas

\*/

Healthcare should be available to All, regardless of their economic circumstances.

- The Alliance for a Healthy Kansas has published their research showing that the 150,000 Kansans who would become eligible under expanded KanCare (Medicaid) earn ***too much*** to qualify for KanCare today, but ***not enough*** to qualify for support to buy private insurance. Medicaid expansion would help to remedy that fact.
- With Medicaid expansion, healthcare costs are reduced for everyone. When a low-wage Kansan can't get health coverage, that means more Emergency Room bills, which increases uncompensated bills for hospitals therefore increasing costs for all.
- By expanding KanCare, tens of thousands of people will be able to afford insurance coverage. That protects them from medical debt which strengthens the economy for all.
- Expanding KanCare would strengthen and sustain the rural health care system and help insure rural Kansans get the health care they need while giving a boost to their economies.

According to the American Cancer Society, a poll of registered voters in Kansas shows 72% in favor of expanding Medicaid. ***Our legislators need to follow the will of the people.***

Chris Miller, Greg Jarrett, Karen and Rod Landrum, Parsons, KS.

February 9, 2024

To the Kansas Legislature,

As an RN living in Kansas City area, Leawood Kansas to be exact, I am dismayed by the Kansas Republican legislators holding back on Medicaid expansion. The lack of Medicaid expansion has caused hospitals to close, especially rural hospitals. All hospitals in the state are in financial difficulties because of your inability to vote to expand Medicaid. Please, expand Medicaid in Kansas so no more hospitals close and those who exist do not have to cut back on more services because of your lack of Medicaid expansion.

Mary Grace Lanese  
Leawood,KS.

March 15, 2024

I am the parent of an adult child with a diagnosis of paranoid schizophrenia. I have experienced first hand the struggle to find good care and services that he needs to live successfully in the community. It is heart breaking and unfortunately too often ends in tragedy when access breaks down. Mental illness does not just impact one person. It affects the family, the community, our economy, public safety, and how we see ourselves as compassionate and caring human beings.

Medicaid expansion addresses the mental health crises in our state with improved access to care and medication. I urge you to support Medicaid expansion.

Jan Langley



**Testimony of Lawrence-Douglas County Public Health  
to Senate Ways and Means Committee and Senate Public Health and Welfare Committee  
Written Proponent of SB 355 | March 20, 2024**

Chairwoman McGinn and members of the committees:

Thank you for allowing Lawrence-Douglas County Public Health (LDCPH) to provide written testimony in support of SB 355, which would expand medical assistance eligibility and enact the cutting healthcare costs for all Kansans act. This bill would expand KanCare eligibility in Kansas to 138% of the federal poverty level. LDCPH serves Lawrence and Douglas County residents and works to create abundant and equitable opportunities for good health.

As of 2024, over 150,000 Kansans sit in a coverage gap for healthcare coverage.<sup>i</sup> This coverage gap includes individuals and families that do not qualify for KanCare under current state regulations, but also do not have employer sponsored healthcare coverage, making healthcare unnecessarily expensive. There is a misconception that those in the coverage gap are not working. However, according to data obtained from Alliance for Healthy Kansas, more than two-thirds of those in the current coverage gap work or are in working families, including children and adults.<sup>ii</sup>

According to data from Alliance for Health Kansas, Kansas has lost over seven billion dollars in tax revenue since 2014 due to not expanding Medicaid eligibility.<sup>iii</sup> Furthermore, over 58% of Kansas' hospitals risk closure due to costs.<sup>iv</sup> Medicaid expansion could help offset that burden.<sup>v</sup> LDCPH encourages you to consider the fiscal ramifications of not passing Medicaid expansion.

The Lawrence City Commission passed Resolution #7510 in November 2023, which supports the expansion of KanCare in Kansas. The resolution notes that over 3,040+ Douglas County residents sit in the "coverage gap".<sup>vi</sup> We applaud efforts to find a solution to this issue and encourage you to consider passing Medicaid expansion during this legislative session.

Thank you,

A handwritten signature in black ink, appearing to read "Jonathan Smith".

Jonathan Smith, MPH  
Executive Director  
Lawrence-Douglas County Public Health



200 Maine, Suite B  
Lawrence, KS 66044-1396

OFFICE: 785.843.3060 FAX: 785.843.3161  
CLINIC: 785.843.0721 FAX: 785.843.2930

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<sup>i</sup> *Expanding KanCare - Alliance for a Healthy Kansas 2022*. (2023, January 3). Alliance for a Healthy Kansas 2022. <https://expandkancare.com/initiative/expanding-kancare-2/>

<sup>ii</sup> KanCare Expansion Advocacy Toolkit. (2022). In *Alliance for Healthy Kansas*. Retrieved February 12, 2024, from <https://expandkancare.com/wp-content/uploads/2023/08/2022-2023-general-toolkit-Aug2023.pdf>

<sup>iii</sup> Alliance for a Healthy Kansas. (2024). *Medicaid expansion in Kansas*. <https://expandkancare.com/wp-content/uploads/2024/01/FINAL-2024-Briefing-Book.pdf>

<sup>iv</sup> Cecil G. Sheps Center for Health Services Research. (n.d.). RURAL HOSPITALS AT RISK OF CLOSING. In *Rural Hospitals at Risk of Closing*. [https://governor.kansas.gov/wp-content/uploads/2023/11/Rural\\_Hospitals\\_at\\_Risk\\_of\\_Closing.pdf](https://governor.kansas.gov/wp-content/uploads/2023/11/Rural_Hospitals_at_Risk_of_Closing.pdf)

<sup>v</sup> Kansas Hospital Association. (2023). *KanCare Expansion Generates Economic Benefits*. <https://www.khanet.org/CriticalIssues/KanCareExpansion/KanCareExpansionResources/d151275.aspx?type=view>

<sup>vi</sup> Lawrence, Kansas, Resolution 7510



200 Maine, Suite B  
Lawrence, KS 66044-1396

OFFICE: 785.843.3060 FAX: 785.843.3161  
CLINIC: 785.843.0721 FAX: 785.843.2930

To: Members of the Kansas State Legislature  
From: LMH Health Board of Trustees  
Re: Testimony in support of Medicaid Expansion

In 1921, a woman named Elizabeth Watkins helped fund a hospital in eastern Kansas. In presenting her gift to Lawrence Memorial Hospital, she made one stipulation,

“No person shall be excluded on account of race, or physical, social or financial condition.”

Now, 103 years later, through the expansion of Medicaid benefits, we have an opportunity to further support our [abiding commitment](#) to provide healthcare to every person who needs it. More than 4,000 residents of the Greater Douglas County community would finally have access to healthcare coverage.

In January, several of us traveled to Topeka and heard Senate President Ty Masterson tell a room full of hospital folks why that won't work. He presented us with what he called “facts on Medicaid,” but we had no opportunity to respond with facts of our own that morning.

It is imperative that those on the frontlines of healthcare in Kansas are heard. We ask you to consider these facts in response to the issues raised by the Senate President on January 16.

**Senator Masterson:** *It is proven [in states that have adopted expansion] that Medicaid expansion doesn't save rural hospitals.*

**Response:** No one program will "save" rural hospitals that are struggling to remain viable in the current delivery system and in the face of shifting population demographics. However, no one solution will help more than Medicaid expansion. The expansion of Medicaid is especially important for rural hospitals where the concentration of lower income households is higher and access to physicians and hospitals is reduced.

**Senator Masterson:** *It has been proven that it doesn't help reduce the numbers in your ERs.*

**Response:** It is difficult to determine the impact Medicaid expansion will have on the emergency room alone. However, it is a fact that people with healthcare insurance like Medicaid are more likely to access primary care and medical surgical specialties they need. This in turn avoids the use of emergency departments for late interventions and chronic conditions that could have been taken care of more effectively and affordably through earlier intervention. And we also know when emergency care is required, patients with Medicaid have coverage for the costs, thereby reducing the hospital's burden for uncompensated care.

**Senator Masterson:** *It displaces other Medicaid users—those that need it most.*

**Response:** Perhaps this is in reference to limits (in some cases) on the number of Medicaid patients that can be treated by a clinic-based physician. The fact is, in Kansas, the majority of physicians are employed by hospitals. In these models, physicians are not limited on the number of Medicaid patients they can serve. Regardless, the idea that displacement would occur is a hollow argument based on assumptions about the care required by individuals who currently don't have the opportunity to seek regular healthcare.

Forty states have come to the decision that Medicaid expansion is better for their residents, their businesses, and the quality of life. No states have reversed their participation in the Medicaid expansion program.

In closing, we have an opportunity to improve the health of all Kansans without any impact to the state's general fund because Kansas hospitals will pay the State's share of matching funds.

Your vote is critical.

Each of us is willing to answer any questions you may have about how our healthcare system is funded and the challenges it faces financially. We will fight to serve the needs of all who need healthcare. We hope you join us in that effort.

The LMH Health Board of Trustees:

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Bob Moody

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Kristin Salmans, RN

Russ Johnson, President and CEO, Ex-Officio Member of the Board of Trustees

**HB 2556  
SB 355  
SUPPORT**

Dear Committee Members,

I want to be sure you realize that many, many farmers in Kansas are living on the edge. The suicide rate for farmers is very high. “The CDC found suicide deaths increased by 5 percent in 2021 and another 2.6 percent in 2022”.

“According to the National Rural Health Association, the suicide rate among farmers is three-and-a-half times higher than the general population.” <https://www.kwch.com/2023/08/15/farmers-not-immune-suicide-rates-increase-nationwide/>.

Many of these farmers, including some of my family members, do not have access to health care. Many of them do not meet the guidelines for the Marketplace insurance so they suffer at home with injuries to the body and to the mind.

Even those that do, now lack access because hospitals and doctors are closing or leaving Kansas for places where they can be reimbursed for the care they take of our people. This makes it hard on everyone in rural Kansas to see a doctor or have a surgery.

Expanding Medicaid will allow these farmers and their families to get the care they deserve in the Kansas breadbasket, as they feed the country and all of us here in this beautiful state. It will allow our hospitals and doctors to treat those who are uninsured and fall in the coverage gap.

Now is your chance to save so many lives, increase Kansas’ prosperity, productivity and encourage people to move home after leaving because they cannot get health insurance as an entrepreneur or small business owner. Farmers don’t have the ability to just move.

Young people leave this state every day because they cannot afford insurance and all of the states surrounding us have now Expanded Medicaid.

Please don’t let this be another example of Kansas always trailing the rest of the nation like we do in everything else. Yes, I am a native Kansan and I have seen this my entire 65 years. More than 3/4 of Kansans want to see Medicaid Expanded.

Kansas will thank you for supporting these bills and voting YES on both!

Thank you!

Lori Lawrence  
321 N. Lorraine Ave.  
Wichita 67214  
316-516-3632

Date: March 20, 2024

From: Sister Victoria Perkins, SCL, Director of Leavenworth Attainable Housing

RE: HB 2556 / SB 355 Proponent testimony

Dear Chairperson and members of the committee,

Leavenworth Attainable Housing provides supportive permanent housing to people who are homeless or at risk of becoming homeless in Leavenworth. I am Sister Vickie Perkins, SCL and I am currently the Director of Leavenworth Attainable Housing and prior to that I was the director of Leavenworth Interfaith Community of Hope, which is a night shelter, day shelter and outreach to those living in poverty.

In these positions I have witnessed so many people who have no medical care because Kansas has not expanded Medicaid. There have been many times that I have driven someone to the Emergency Room because of a need for treatment and since they have no medical home the Emergency Room is the only option. That is a very expensive option, but the only one open to them. This also leaves them with an enormous bill which follows them throughout their life and becomes a major hurdle to breaking the cycle of poverty.

I have also watched a mother who lives in one of our houses struggle with renal failure. She needs dialysis on a regular basis and has no insurance. She had to get a job that included medical coverage so that she could receive the treatment she needed. The job she holds is much more than she can handle, but she continues to keep it because of the medical insurance. If she was covered by Medicaid she could get a job that would not take as much out of her and allow her to live a life with some time for her five children.

All of our residents' work, but most of them have no medical coverage. They struggle to provide for their families and are working to be productive members of their community, but they are not getting any medical treatment for themselves because Medicaid is not available to them. This causes a great deal of stress, which does not help their medical situation.

There is a long-range aspect to this because if people are not getting good health care then when they age things will be much more serious and expensive and all of us will be paying for that.

**Undoubtedly, you have heard all of the reasons that Medicaid expansion is important and effects so many people.** I simply wanted to let you know of some of the individual stories of real people who are suffering because of the lack of the expansion of Medicaid.

Thank you for taking time to listen to my concerns.

Submitted by Sister Vickie Perkins, SCL  
Leavenworth Attainable Housing  
Leavenworth, KS



**To: Senate Committee on Ways and Means & Senate Committee on Public Health & Welfare**  
**From: Stephanie Meyer, President & CEO, Leawood Chamber of Commerce**  
**Date: March 20, 2024**

As representatives of the business community in Leawood and the surrounding Johnson County area, we are writing to express our support for the expansion of Medicaid in our state. As a Chamber of Commerce, we recognize the vital role that access to healthcare plays in ensuring the well-being of our workforce and the overall economic prosperity of our community.

Expanding KanCare eligibility would provide much-needed healthcare coverage for thousands of working but uninsured individuals in our state, including nearly 7,500 in Johnson County. Access to affordable healthcare is a fundamental component of a thriving economy. When individuals are healthy and have access to preventive care, they are more productive in the workplace and less likely to miss work due to illness.

Furthermore, Medicaid expansion would have significant positive impacts on our local economy. By extending coverage to low-income individuals, we can reduce the burden of uncompensated care on our hospitals and healthcare providers. This, in turn, helps to stabilize healthcare costs for businesses and taxpayers alike.

A healthier workforce also translates into lower healthcare costs for employers, allowing them to invest more resources into growing their businesses and creating jobs.

We believe that expanding Medicaid is a smart economic decision. It will improve the health and well-being of our citizens, strengthen our workforce, and boost our local economy. We urge you to support Medicaid expansion and take this important step towards building a healthier, more prosperous future for all residents of our state.

13451 Briar Street, Suite 201  
Leawood, Kansas 66209  
(913) 498-1514  
leawoodchamber.org

February 11, 2024

Dear Kansas Legislature:

Expanding KanCare is critical! Thousands of Kansans are caught in the gap without health care and every person has a right to health care.

Shamefully, 40 out of 50 states have Medicaid and Kansas is one of the ones that does not have it. Health affects every aspect of one's life and is critical for our children.

Not only is health care not available in many of our rural areas and smaller hospitals are closing but the rising costs of healthcare affect all healthcare. When healthcare is not available for people, they are forced to go to emergency rooms in crisis, which raises costs for all hospitals.

It is not right that those of you who have healthcare in Topeka, also have the power to prevent others from adequate care by your vote. Please do the right thing and support programs that help your constituents.

Thank you! You and your ministry of service are in my prayers!

Sincerely,  
Sister Mary Pat Lenahan, SCL, Ph.D



*The Historic Lackman-Thompson Estate*

11180 Lackman Road

Lenexa, KS 66219-1236

913.888.1414

DATE: March 20, 2024

TO: Sen. Carolyn McGinn, Joint Senate Committees on  
Ways & Means and Public Health & Welfare

BY: Ashley Sherard, CEO  
Lenexa Chamber of Commerce

RE: SB 355 - Expanding Income-Based Medicaid Eligibility

Most health care coverage in the U.S. is provided through an employer. Businesses *want* to offer coverage because they recognize its benefits in improving workforce wellness, increasing workplace attendance and productivity, and providing a key attraction and retention tool in a tight labor market.

But health care premiums have been – and continue to be – a very real financial challenge for employers, especially smaller employers. According to the Kaiser Family Foundation’s nationwide 2023 Employer Health Benefits Survey, the average annual premium for employer-sponsored health insurance in 2023 was \$8,435 for single coverage and \$23,968 for family coverage, both a 7% increase from the previous year. Unfortunately, sizeable annual premium increases are not uncommon. To help manage these increases, many workers are being asked to contribute more towards premiums, co-pays, and deductibles. If coverage costs continue to rise, more businesses and workers are at risk of being priced out of the market.

There are many factors challenging our health care facilities and contributing to ever higher health care system costs, and no single solution will “fix” the issue – it will require considering a number of approaches. Increasing low state Medicaid reimbursement rates, as has been proposed by lawmakers, is one important step that will help financially shore up health care facilities and increase access to care by encouraging additional providers to accept Medicaid patients.

In addition, the impact of uncompensated care on health care system costs is significant. Health care for low-income uninsured individuals is generally both expensive – more likely to be costly emergency care and for more serious or chronic conditions caused by delaying care – and unreimbursed. The expense of this uncompensated care is being broadly passed on to others in the health care system through higher costs, primarily employers who provide most of the country’s health care coverage. That cost is substantial -- in FY 2022, one of our area hospital systems provided \$135.7 million in uncompensated care, while for another area system it was \$30 million. The figure statewide is \$1.2 billion. Reducing the amount of uncompensated care and its impact on health care system costs must be considered, and a Kansas solution to expanding income-based Medicaid coverage is one way to achieve that important goal along with the other benefits that come from increased access to health care.

Thank you for this opportunity to provide input on this important issue for Kansas businesses and workers.



March 20, 2024

Members of the Kansas Legislature

Re: The Cutting Healthcare Costs for All Kansans Act (SB 355/HB 2556)

Dear Members:

Thank you for considering The Cutting Healthcare Costs for All Kansans Act, which would provide health insurance for more than 150,000 Kansans living in the coverage gap.

The mission of The Leukemia & Lymphoma Society (LLS) is to cure leukemia, lymphoma, Hodgkin's disease, and myeloma and improve the quality of life for the more than 1.3 million people in the United States living with blood cancer, and their families.

Medicaid expansion is one of the most important policies a state can adopt to protect its citizens' and economy's well-being. LLS urges your committee to amend this legislation to remove work reporting requirement and premium provisions that could disrupt coverage access for enrollees, and to pass a clean proposal as quickly as possible to make this life-saving coverage a reality for Kansans at last.

The evidence is clear that Medicaid expansion has important health benefits. Research suggests that states that expanded Medicaid experienced a 6.4% increase in early cancer detection compared to pre-expansion levels.<sup>1</sup> In Kentucky, research links Medicaid expansion to earlier cancer detection and improved survival rates.<sup>2</sup> Recent research has shown that Medicaid expansion is linked to reductions in overall cancer mortality, at least in part because patients will be able to receive a diagnosis and treatment at an earlier stage of their cancer's progress.<sup>3</sup>

Requiring individuals enrolled in Medicaid to comply with extensive paperwork and administrative burdens undermines these health benefits and will likely result in individuals losing Medicaid coverage. This holds true despite promises of categorical exemptions from work requirements.

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<sup>1</sup> Aparna Soni, Kosali Simon, John Cawley, and Lindsay Sabik, "Effect of Medicaid Expansions of 2014 on Overall and Early-Stage Cancer Diagnoses," American Journal of Public Health, February 2018.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5846584/>

<sup>2</sup> Tong Gan et al, "Impact of the Affordable Care Act on Colorectal Cancer Screening, Incidence, and Survival in Kentucky", Journal of the American College of Surgeons, April 2019.

<https://pubmed.ncbi.nlm.nih.gov/30802505/>

<sup>3</sup> Justin Michael Barnes, Kimberly J. Johnson, Nosayaba Osazuwa-Peters, and Fumiko Chino, "Changes in cancer mortality rates after Medicaid expansion under the Affordable Care Act and the role of changes in stage at diagnosis", Journal of Clinical Oncology, September 2022.

[https://ascopubs.org/doi/10.1200/JCO.2022.40.28\\_suppl.074](https://ascopubs.org/doi/10.1200/JCO.2022.40.28_suppl.074)

This effect has already been seen in other states that passed similar measures. In Arkansas, more than 18,000 people — nearly 1 in 4 of those subject to work requirements — lost coverage over the course of just seven months. In New Hampshire, almost 17,000 people, about 40% of those subject to work requirements, would have lost coverage had state policymakers not put the policy on hold. Some 80,000 Michiganders — nearly 1 in 3 of those subject to work requirements — were in danger of losing coverage had a court not stopped the policy.<sup>4</sup>

Forcing patients to prove the validity of their condition or their qualification for an exemption will create burdensome administrative barriers that stand between Kansans and the care they need. Missing a deadline or the mishandling of a single form could result in a loss of coverage or access to medications lasting months — time that is not a luxury for those battling serious, chronic, or life-threatening conditions.

Additionally, it is important to note that most people on Medicaid who can work already do so.<sup>5</sup> A 2018 study of Michigan’s Medicaid found that the overwhelming majority of enrollees were already employed.<sup>6</sup> Notably, of the 27.6% of unemployed enrollees in that study, many said their ability to work was impacted by other health conditions, such as chronic physical or mental health conditions, underscoring the critical need for access to care.

Requiring premium payments will make it harder for individuals to obtain or keep healthcare coverage, and should also be removed from this legislation.<sup>7</sup> The inclusion of premiums can also exacerbate existing disparities in access to healthcare, as they have been shown to lead to lower enrollments for Black enrollees and lower-income enrollees, compared to their white and higher-income counterparts, respectively.<sup>8</sup> Premiums can be a significant barrier for individuals accessing care, and removing them increases equitable access to care for all enrollees.

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<sup>4</sup> Jennifer Wagner, Jessica Schubel, “States’ Experiences Confirm Harmful Effects of Medicaid Work Requirements,” Center on Budget and Policy Priorities, November 2020, <https://www.cbpp.org/research/health/states-experiences-confirm-harmful-effects-of-medicaid-work-requirements>

<sup>5</sup> Rachel Garfield, Robin Rudowitz, and Anthony Damico, “Understanding the Intersection of Medicaid and Work,” Kaiser Family Foundation, February 2017, <http://kff.org/medicaid/issue-brief/understanding-the-intersection-of-medicaid-and-work/>

<sup>6</sup> Renuka Tipirneni, Susan D. Goold, John Z. Ayanian. “Employment Status and Health Characteristics of Adults With Expanded Medicaid Coverage in Michigan.” JAMA Intern Med. December 11, 2017. doi:10.1001/jamainternmed

<sup>7</sup> Samantha Artiga, Petry Ubri, and Julia Zur, “The Effects of Premiums and Cost Sharing on Low-Income Populations: Updated Review of Research Findings,” Kaiser Family Foundation, June 2017. <https://www.kff.org/medicaid/issue-brief/the-effects-of-premiums-and-cost-sharing-on-low-income-populations-updated-review-of-research-findings/>

<sup>8</sup> University of Wisconsin-Madison Institute for Research on Poverty, “Evaluation of Wisconsin’s BadgerCare Plus Health Coverage for Parents & Caretaker Adults and for Childless Adults 2014 Waiver Provisions.” August 2019. <https://www.irp.wisc.edu/wp/wp-content/uploads/2019/11/BC-2014-Waiver-Provisions-Final-Report-08302019.pdf>

LLS hopes your committee will amend this legislation as outlined in our letter and welcomes the opportunity to answer any questions you might have. Thank you for considering our views.

Sincerely,

A handwritten signature in black ink that reads "Dana Bacon". The signature is written in a cursive, flowing style.

Dana Bacon  
Senior Director, State Government Affairs  
The Leukemia & Lymphoma Society  
[dana.bacon@lls.org](mailto:dana.bacon@lls.org)  
612.308.0479



March 20, 2024

**Senate Committee on Ways & Means and Public Health and Welfare  
Testimony in Support of Senate Bill 355**

Chairperson McGinn and Members of the Committee,

The Behavioral Health Association of Kansas (BHAK) is the state's trade organization dedicated solely to substance use disorder treatment and prevention providers seeking integrated behavioral health care. BHAK believes that true integrated behavioral healthcare means access and funding for mental illness and substance use disorder treatment without regard to where a consumer seeks services.

BHAK fully supports Senate Bill 355 and the expansion of Medicaid benefits to thousands of eligible Kansans, particularly for those with substance use disorders and accompanying mental illness. Other states who have expanded Medicaid report one of the greatest impacts is the expansion of behavioral health services. In particular, we know from preliminary data that the parents of many currently eligible children will become eligible for behavioral health services. Low-income working families benefit from access to healthcare as it promotes family stability, employment, and diverts children from the child welfare system.

We are prepared for the growth of behavioral health services through the implementation of expansion. We lament the years of lost resources and citizens who have gone without behavioral health treatment because we have not yet expanded.

Please contact us if you have any additional questions.

Stuart J. Little, Ph.D., President  
Behavioral Health Association of Kansas  
<https://www.bhakansas.com>

City on a Hill – Garden City  
CKF Addiction Treatment - Salina  
Corner House - Emporia  
DCCCA - Lawrence

Higher Ground - Wichita  
New Chance – Dodge City

New Dawn - Topeka

Burrell/Brightli - Olathe  
Sims-Kemper - Topeka  
Miracles - Wichita  
Substance Abuse Center of Kansas –  
Sedgwick County  
Seventh Direction - Wichita  
Heartland Regional Alcohol and Drug  
Assessment Center – Johnson County

Cities of Merriam, Mission, Prairie Village, and Roeland Park  
Testimony in Support of Medicaid Expansion  
March 20, 2024

To: Chair McGinn & Members of Senate Ways & Means and Chair Gossage & Members of the Senate Public Health & Welfare Committee:

The Northeast Johnson County cities of Prairie Village, Mission, Merriam, and Roeland Park support Medicaid expansion to provide equitable access to health care for the most vulnerable. Expansion provides expanded access to services, funded by federal funds in the beginning, and will serve as an economic benefit statewide and strengthen rural health care.

We believe the current proposal for Expansion is a bipartisan effort to address healthcare concerns for people working who are currently ineligible for affordable public health care benefits. Medicaid can be expanded to add 150,000 members while continuing to grow and retain an active workforce. Expansion will generate revenue, not cost the state, and the inclusion of a work requirement is a valuable step.

Without Medicaid expansion, we all share the cost for the uninsured accessing some services while at the same time the cost of uncompensated care increases. Expansion is a solution that will increase jobs and incentivize more providers, as well as stabilize rural and urban hospitals. The enhanced federal funding Kansas will receive covers the cost of expansion for several years. Expansion will actually free up funding at all levels that can be used for infrastructure, public schools, other programs and services or a tax cut. The economics of expansion benefit the state as well.

Some in the Legislature are not listening to the voices from across Kansas who support Medicaid expansion. The breadth and depth of support is reflected in polls, in our communities, and our healthcare systems. Because of the enhanced federal aid, the expanded access to services for 150,000 Kansans has innumerable benefits that forty-plus of our nation's other states have recognized, and not rejected. Because of a small group whose perspective does not reflect that of a majority of Kansans, we remain one of only ten states who are failing to address the needs of our constituents, and our healthcare systems, particularly in rural areas.

The citizens of our communities and our elected councils support Medicaid expansion. We encourage the Legislature to advance Medicaid Expansion to the full Senate to allow our elected representatives the opportunity to vote on expansion.

Stuart J. Little, Ph.D.  
Little Government Relations  
[stuartjlittle@mac.com](mailto:stuartjlittle@mac.com)

LiveWell Northwest Kansas is a non-profit organization dedicated to enhancing the health and well-being of the rural communities in Northwest Kansas. We have been unwavering in our commitment to this cause for over four decades, working collaboratively with smaller organizations and causes that share our vision. As a central coordinating body, we leverage our leadership and strategic partnerships to facilitate collaborations and plan and organize local and regional programs, services, and initiatives. We focus on advocating for changes in public policy and promoting evidence-based, community-informed solutions.

We strongly support the expansion of Medicaid in Kansas. Below are our reasons:

1. **Healthcare for everyone:** Imagine a single parent trying to raise three children with a single income. Despite earning an hourly rate of \$5 more than the minimum wage in Kansas, these parents cannot obtain affordable health coverage. Medicaid expansion could be the solution that will finally allow them to receive the care they need without financial stress. It is about taking care of each other and ensuring that everyone in Kansas has the opportunity to thrive.
2. **Revitalizing Rural Economies:** Small towns thrive when their residents are healthy and financially secure. By expanding Medicaid, we are not just talking about healthcare; we are talking about investing in the vitality of rural Kansas. It means more jobs at local clinics, stability for rural hospitals, and more dollars circulating in our small-town economies.
3. **Staying Healthy, Together:** I want to live in the Kansas where everyone can access preventive care and where chronic conditions are managed before they become crises. That is the promise of Medicaid expansion – a healthier, happier state where people can focus on living their best lives without worrying about healthcare bills piling up.
4. **Mental Health Matters:** Medicaid expansion is essential for mental health as it helps people facing significant life challenges. It is about recognizing the importance of mental health, just like physical health, and ensuring everyone has access to treatment, regardless of their financial status. Through Medicaid expansion, we can show individuals struggling with mental illness that they matter. It demonstrates our commitment to their mental well-being and provides support every step of the way. It is not just about policies, but it is about compassion, empathy, and building a society where everyone has equal opportunities to lead fulfilling lives without the burden of untreated mental illness.
5. **Bridging the Rural Healthcare Gap:** Rural areas face unique healthcare challenges, from provider shortages to limited access to specialized care. Medicaid expansion is a step towards bridging that gap, ensuring that rural Kansans have the same access to quality healthcare as their urban counterparts.

In summary, we believe that Medicaid expansion is critical, as it improves healthcare access, promotes economic stability, emphasizes preventive and mental healthcare, addresses health

disparities, and maximizes federal funding opportunities. It is a crucial step towards ensuring that all Kansans can access affordable and quality healthcare services regardless of where they live.



Legislative Testimony  
Sarah Karns, Director  
LiveWell Shawnee County  
Written Proponent Testimony for Kansas Medicaid Expansion

Kansas Policymakers,

LiveWell Shawnee County is proud to lend their support for the expansion of Medicaid, giving 150,000 Kansans access to affordable healthcare. We are a coalition that works to mobilize the community in acting on health priorities so that policy, environment, and practice influences a culture shift toward health and wellness for everyone in Shawnee County. Placing the community at the center of our work with health equity as a polar star is why we exist. We imagine, as those representing Kansans and their wellbeing, you can support such a mission. Given the middle-of-the-road approach that HB2556 and SB355 offers to providing health care to Kansans, it only makes sense to pass this legislation essential to improving the quality of life for all members of our community.

Medicaid expansion:

- Cuts health care costs for Kansas families, hospitals, businesses, and jails.
- Will not cost Kansas taxpayers a single cent, it is revenue-neutral.
- It is not a partisan issue. Nearly 80% of Kansans, regardless of party affiliation, support Medicaid expansion.
- Lowers costs for everyone. When one Kansan doesn't have health insurance, other Kansans end up paying for it.
- Grows our economy and would create nearly 23,000 jobs helping with our healthcare worker shortage.
- Is affordable for our state. There is no additional cost for Kansas taxpayers.
- Improves public safety by providing relief for county jails that have been burdened with providing care for admitted inmates without expansion.

These are a few of the common-sense reasons to pass this non-partisan legislation. Thank you for your time and consideration. The coalition is confident that with your support HB2556 and SB355, we can create a healthier and more equitable Kansas.

Sincerely,

Sarah Karns  
LiveWell Shawnee County Director

To: Members of the Kansas Legislature

Fr: Beth Llewellyn

Lawrence, Kansas

Re: Medicaid Expansion

My career has been in healthcare; including hospitals, a national association, a clinic for the medically indigent (Lawrence, Kansas) and public health. This is a critical moment for our State and my hometown, which is served by a single hospital system. We must expand Medicaid.

- It matters for the working poor who are left out from having an insurance plan that eases access to primary care and reduces very real financial stress. A system dependent upon charitable care creates social disparities, especially for the vast majority who work and are struggling to make ends meet. This is one bill we can eliminate at no cost or burden to the State. There is no increased tax burden. And we communicate to the work force at the margins that you belong.
- It matters for our hospitals and providers whose mission mandates care for everyone regardless of payment. This expansion is the difference to producing a bottom line to sustain their services in their communities rather than contract.
- It matters to small businesses that do not provide benefits and are dependent upon a workforce that does not have the money to purchase their own insurance, even with the marketplace – this Medicaid Expansion will fill a gap.
- It matters to the vast majority of Kansas who have said over and over again that they favor Medicaid Expansion. If citizens were the legislature, it would be a veto proof majority.
- It matters to those of us that still have hope that bi-partisan policy can happen to best serve Kansans.

We are beyond the point of shallow excuses and debate, this is the time to simply let the voice of the people and the financial benefactors who fund the State obligation, rule the day. Please take Medicaid Expansion to the floor and vote Yes.

Thank You

February 9, 2024

My Name is Mary M Long, I live in Southeast Kansas.

Obamacare has never helped me because I have always been below poverty level. Every year I apply and always denied just from the fine.

I am now 63 years old with many health issues that cannot be addressed, some hospitals have helped me to a certain point with charity. Then I have to stop medical treatment once the bills get too high.

I am currently working with Freeman Health System to get approved for a procedure that is much needed, I have blood in my bowl and need a colonoscopy as well as an endoscopy for issues inside my tummy.

I have issues with my lungs and just had a biopsy done which in turn is very costly.

Freeman Hospital is doing their best to help me, we even tried getting me on my Medicare, so far, I have been denied because I am not 65.

DCF office in Pittsburg Kansas is now fighting for me to get on KanCare so I can get the treatments I need.

I had to stop working because the job I was doing and have done for 20 years is taking a toll on my muscles, back, knees, hands, joints and so on. I had no choice but to start drawing my Social Security because they claim I am no longer eligible for disability.

Meanwhile, Kansas Senate is still holding up the expansion of KanCare for people like me. I am at a loss as to where to go from here because I do not want to move out of Kansas and at my age and my health the thought of moving to a state that will allow me to have Medicaid is just too overwhelming.

I should have to give up my home of 27 years because of my health and no help from Kansas or Social Security. I love Kansas but I am not loving the way they hold back Medicaid for people who need it. It is not like I am taking advantage of the system; I just want to be healthy again.

You would think that this State would want all their citizens healthy, at this point I feel as if they just don't care except for those who fight for us trying to get it on the table.

This should go to vote by the citizens of Kansas and not the Senate that continuously holds it up with no reason as to why.

Feeling discouraged and defeated at this moment, and fear for my health.

Thank you in advance for hearing me out.

Mary M Long

March 4, 2024

Hello,

First I want to apologize for missing the February deadline. While I feel so passionate about this issue, I am still less than a year away from the loss of my grandfather, father, and brother. I am experiencing deep grief and it's hard to talk about what medical neglect my brother endured.

With that being said, my background is in healthcare and I'm ashamed of his treatment by the healthcare system in his last 3 months of life. I have a degree in Kinesiology and Nursing. I have worked in rehab hospitals, medical surgical units and surgical floors throughout nursing school. Once completing my BSN I worked in the NICU and am currently working at an outpatient surgery center.

Back to the issue at hand, Medicaid Expansion, My brother Austin Heath Lorson was hospitalized in both March and May of 2023 at Stormont Vail Hospital in Topeka, Kansas. He was unemployed at the time and uninsured. He lost his job earlier that year due to his rapid decline in health and hasn't worked more than one job that provided insurance, but has been employed SINCE 18 years of age. He was 33 in 2023 and died on May 27, 2023.

To say that I was extremely disappointed by his treatment in this healthcare system is an understatement. The social work department handling his approval in assistance programs fell incredibly short of both ethical and competent care. I am currently in the process of writing to the hospital's CEO and head of social work to report the negligence of his care.

During his March hospitalization I had requested to speak with social workers multiple times due to financial and social barriers receiving his medications upon discharge, including crucial antibiotics. I was told that only one social worker works the entire hospital on weekends, no only a neglectful response but standard of practice if this is actually accurate. There was absolutely NO mention of resources offered to help with his substance abuse or rehabilitation programs whatsoever before his discharge in March of 2023. I know this because since social work refused to meet with me I asked the nurse to read me the most recent social work note where it stated in paraphrased terms by the nurse "Communicated with patient that he cannot have 3 vices (referring to his alcohol addiction, weed and tobacco consumption), man you really need to give up one".... he died 2 months later from hepatorenal syndrome.

Due to his loss of work from his March hospitalization and low socioeconomic status, my brother qualified and was approved for the Hospital's SCMS Health Access Program. I worked tirelessly to submit all the needed documents for approval, yet the billing department continued to send him **OUTRAGEOUS and incorrect bills**, causing him undue anxiety and stress where he would then self medicate with alcohol.

When I contacted the billing department to communicate with them about his approval into the program and to inquire about financial assistance. He was **belittled, bullied and talked down to**. It took me being on a 3 way call with him and the billing department to finally make any progress. The **ONLY** reason that this conversation was remotely productive is because I am a healthcare professional and understand medical jargon. It wasn't until after I explained I was his sister and acting as a medical advocate that she provided the necessary information to settle the confusion and correct errors in his billing statements.

5 short weeks later, Austin was found minimally responsive in his home by my oldest brother who is also a nurse. His vitals were scary - blood sugar of 10 and pulse of 200 bpm. He was in critical care for a week with every single line, tube, and monitor imaginable keeping him alive. Regardless of the high level of nursing care he was receiving, you can imagine how traumatic it is to see your loved one in that critical state - even as a once ICU nurse myself.

Where his care quickly turned neglectful was when he was **“healthy” enough** to be transferred to the step down unit in the hospital. Again, we were met with barriers and complete lack of respect or care for my brother at a basic level of human decency. He was isolated, uninsured and neglected compared to the other patients on that floor. I suspect subconscious bias, that because he was young and poor that his choices brought on these consequences.. I am not stating that he did not contribute to his poor health outcomes, but why are healthcare professionals neglecting a patient in need which is **ABUSE**. What shocks me is that these “healthcare professionals” can have this type of bias when they have the education to KNOW BETTER. **Substance abuse and addiction are diseases that stem from generational trauma and predisposition just like physical illness**

Our family had a meeting with hospital palliative care to discuss both lifelong and end of life care options. The doctors were appeasing our hopes of recovery, but the palliative care APRN/case coordinator noted that we as a family had "unrealistic expectations" for the recovery of our beloved, 33 year old brother.

I contacted several people in attempts to get his application prioritized since his health was declining so rapidly including Governor Laura Kelly's Director of Constituent Services Dawn Knudtson, Senator Moran's office, Eileen Jewell at KDHE, and Misti, a Stormont Vail administrator.

On May 25, 2023 his status changed to DNR (do not resuscitate) and he was put on comfort care measures at Stormont to ease his pain. His healthcare team anticipated his passing in the next 24-48 hours. Stormont Vail Hospital completely gave up and stopped working towards his transfer to hospice even though that was what our family wanted for our brother. On the 25th, I called Midland Hospice House and basically begged them to take my brother so he didn't have to die in the hospital and they agreed. This is after weeks of Stormont employees telling me he wasn't eligible because of his alcoholism (uninformed nurses, but nonetheless still hospital employees).

Midland Hospice house agreed to take him because of charity donations and he was transferred in the evening of **May, 26th 2023** and on the morning of **May 27th, 2023** my brother peacefully passed away.

His KanCare application was approved shortly after his death.

I know this is probably a lengthy explanation of what occurred, but expansion of Medicaid is extremely important - people are dying without adequate support and care in this current healthcare system.

Thank you for your consideration,

Sophie Lorson

March 16, 2024

I am writing to ask you to support Medicaid expansion in Kansas.

Thank you for accepting testimonies. I believe it is absolutely shameful that Kansas is still among the very few states that have not already expanded Medicaid. You have the opportunity to correct that. It will cost us nothing, Kansas taxpayers will not pay a single penny. Instead expanding Medicaid will bring in about \$700 million dollars of federal funds to our state annually. The current bonus will bring another \$450 million dollars in the first two years. No Kansas family would leave money on the table, Kansas lawmakers cannot afford to leave money on the table either. We're practical people, and you must be too. Expanding Medicaid in Kansas is the practical, responsible decision.

There are 150,000 Kansans struggling because of very low income who would gain access to medical care when we expand Medicaid. It's obscene to neglect our most vulnerable neighbors when we can so easily help them so much. Lives are on the line. Expanding Medicaid is the responsible decision.

Kansans can be protected from crushing medical debt. Expanding Medicaid is the practical, reasonable decision.

By expanding KanCare tens of thousands of Kansans will be able to afford health insurance coverage. Every Kansan deserved to be cared for when they're sick or injured. By expanding Medicaid healthcare costs for all Kansans will be reduced. Right now emergency rooms treat Kansans who have no means to pay for the care they need, raising the costs of health care for everyone. As workers gain insurance through expansion this uncompensated care will decline, reducing rates for all Kansans. Helping the least of us is always the right thing for all of us. Expanding Medicaid is the responsible, practical decision for Kansas.

Marketplace premiums are 7% lower in states that have expanded Medicaid compared to non-expansion states (like Kansas). Expanding Medicaid is the responsible, practical decision.

We have a mental health crisis we need to address. We see it in our schools and communities. Teachers like me feel the impact of this deadly, costly mental health crisis. We all see it in the work of our law enforcement officers. The world saw it on our streets at the Chiefs Super Bowl Parade. Please, expand Medicaid to help address the mental health crisis with improved access to care and medication for Kansans in need. Expanding Medicaid in Kansas is the long overdue, responsible decision.

Medicaid Expansion won't cost Kansans taxpayers a single cent. The bills being heard next week, HB 2556 and SB 355 deserve your action. Be a responsible, reasonable, practical voice for the people of Kansas. Expand Medicaid in Kansas.

Brenda Ludlow  
Olathe, Kansas

March 15, 2024

Dear Chairman and committee members,

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

Medical debt is a national problem that also affects Kansans, especially as we are one of the few states who have not chosen to expand Medicaid. We should take advantage of these federal dollars for the benefit of ALL of our citizens - improving the mental health and financial well-being of our residents. I work in healthcare and the finances of cancer care are top of mind for almost all of my patients; it is cruel that a person is forced to worry about debt instead of focusing on recovering from what can be a devastating disease.

Please support your constituents and vote to Expand Medicaid for Kansans.

Sincerely,  
Margaret Lund  
Prairie Village, KS

March 16, 2024

Julie Lyon, Director of Economic Development

Proponent Written-Only Testimony

SB 355 and HB 2556

Members of the Committee:

My name is Julie Lyon, and I am writing to you today to offer my support for the expansion of Medicaid in the state of Kansas. As a resident, owner of multiple small businesses, former Mayor, and Economic Developer in this state, all in RURAL Kansas, I have witnessed firsthand the struggles faced by individuals and families who lack access to affordable healthcare. I have been following both sides of Medicaid Expansion for the past few years and feel with the current proposal, it only makes sense to pass this legislation now.

By expanding Medicaid, you have the opportunity to extend healthcare coverage to over one hundred thousand hardworking Kansans who currently fall into the coverage gap. These are individuals who earn too much to qualify for traditional Medicaid but earn too little to afford private insurance. They are our neighbors, our friends, and our fellow citizens who deserve access to the care they need to thrive. I encounter so many people that are working multiple jobs to make ends meet, but do not have insurance because they are limited to 30 hours a week by an employer who is strategically avoiding insurance coverage, not because the employee is lazy. When we have people who do not have coverage and cannot afford medical bills, it costs the rest of us to pay the consequences. With the interest of all hard working Kansans, it only makes sense to pass this legislation now.

This year, expanding Medicaid makes economic sense for our state. Studies have shown that states that have expanded Medicaid have experienced significant savings in healthcare costs, as well as boosts to their economies through job creation and increased consumer spending. By drawing down federal funds to cover the costs of expansion, Kansas has the opportunity to strengthen its healthcare infrastructure and improve the overall well-being of its residents. With a revenue neutral plan, it only makes sense to pass this legislation now.

But perhaps most importantly, expanding Medicaid is the right thing to do morally and ethically. While studies show that almost 80% of Kansans are in support of Medicaid Expansion, it seems that this is the first time our elected officials will finally get to take actions on it. It seems that this should not be a partisan issue, and I encourage you to not let it remain one. I understand the divisiveness and although I am a fairly conservative Republican, I have worried that I will be unfairly labeled as a "Liberal", a "RINO", or even terminated from my job because of my stance. I do however believe in doing what is right and standing for what I believe in, regardless of the consequences. However, I do not want my efforts to be in vain, as it makes sense to pass this legislation now.

In closing, I urge you to support Medicaid expansion in Kansas. Let us stand on the side of compassion, fairness, and logic. Let us ensure that every Kansan has access to the healthcare they need and deserve. Thank you for your time and attention.

Sincerely,

A handwritten signature in cursive script that reads "Julie Lyon". The signature is written in black ink and is positioned above the printed name and title.

Julie Lyon  
Director of Economic Development  
620-474-9537

March 17, 2024

This is a "know brainer"it is a win- win for everyone.Come on Kansas get er done.  
It is the right thing to do.

William Mace  
Overland Park, Kansas

I am writing as a resident of McPherson County and as a member of the Outreach Team at the Church of the Brethren in McPherson to share our concern for the 150,000 Kansans, including nearly 500 people here in McPherson County, who currently do not have access to affordable health insurance. They are mostly persons who are employed but they make too much to qualify for KanCare, meaning they fall into the health insurance coverage gap.

When low-wage Kansans can't get health insurance it leads to more ER bills, hospitals that have uncompensated care, putting smaller hospitals at risk of closure, and to people with untreated physical and mental health needs. Kansas has the highest percentage of rural hospital at risk of closure in the nation,

There is a solution to this problem which is for Kansas to expand the KanCare program raising the income eligibility levels. Since 2014, 40 states plus the District of Columbia have expanded Medicaid, including all the states that border Kansas. None of those 40 states have changed their mind and rescinded the expansion.

Medicaid expansion is not a political issue as over 80% of Kansans believe that everyone in the state should be able to get affordable health insurance, and a recent survey showed that a majority of Republicans, Democrats, and independents approve of expanding Medicaid. Nationwide both Democratic and Republican Governors and Legislators have passed expansion. This is a moral issue that should concern us all, no matter our political persuasion.

This issue has directly affected our church community as a much-loved member of our congregation recently passed away. Despite being employed, she fell into the coverage gap, leaving her without affordable health insurance. She consequently delayed preventative care which could have led to an earlier diagnosis of the condition which ultimately took her life. She is just one example of our fellow Kansans who have been negatively impacted by our failure to enact Medicaid expansion.

It is time to take action to expand Medicaid to close the coverage gap and see that all Kansans have access to health care coverage, our hospitals have less uncompensated care, and no one has to live with untreated physical or mental health needs.

Nancy Magnall  
1212 S. Ash Street  
McPherson, KS 67460  
319-296-8307



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Wednesday, March 20, 2024

Michael Poppa  
Executive Director  
contact@mainstream.vote

**Senator Carolyn McGinn, Chair, Senate Medicaid Expansion Hearing**

Senator Beverly Gossage, Chair, Senate Committee on Public Health and Welfare

Senator Rick Billinger, Chair, Senate Committee on Ways and Means

**Proponent Testimony, Written-only**

**SB355 – Expanding medical assistance eligibility and enacting the cutting healthcare costs for all Kansans act.**

Hearing Chair McGinn, Committee Chairs and Committeemembers,

Thank you for the opportunity to submit testimony in support of SB355.

For much of the last decade, Mainstream has been testifying and educating in favor of Medicaid expansion. We affirm that all Kansans have the right to access quality affordable healthcare without discrimination based on socioeconomic status or geography. We uphold this right of Kansans to health, safety, and peace of mind in their personal lives, in their civic communities, and in wider society.

**Medicaid expansion is not a partisan issue.** It is a practical solution to help healthcare consumers, providers and communities by closing the coverage gap, reducing uncompensated care costs and bringing desperately needed federal dollars into the Kansas economy. Forty states have adopted Medicaid expansion, including all of Kansas' neighboring states. It's time for us to join them.

**Medicaid expansion will improve health outcomes** for the Kansas children and adults who would receive care and also for every resident of Kansas. Independent studies have shown that closing the Medicaid gap in Kansas would create thousands of jobs, protect rural communities, and help to control escalating insurance costs that threaten health care for every Kansan.

**SB355 expands Medicaid, lowers health care costs, and gives 150,000 Kansans access to affordable health care.**

- It won't cost Kansas taxpayers a single cent. It's revenue-neutral, so Kansas' surplus can go toward tax cuts, public schools, and infrastructure.
- It's a commonsense, middle-of-the-road approach to providing health care to working Kansans.

- It builds on previous compromises to include a work requirement that grows our workforce but prevents administrative barriers to healthcare.
- Legislators who continue to stand in the way of expansion show that they're simply thinking about politics – not about their constituents.
- It protects rural hospitals, supporting jobs and health care in rural communities.
- It cuts health care costs for Kansas families, hospitals, businesses, and jails.
- 8 rural hospitals have closed while we've waited for expansion, devastating surrounding businesses and costing communities thousands of jobs.

**SB355 is a carefully crafted bipartisan compromise that has found support from both sides of the issues.**

- Work requirements - This helps to keep our workforce strong while providing appropriate exceptions:
  - As a condition for eligibility, an individual applying for Medicaid under expansion must submit proof of work or community engagement at the time of entry. Then that individual must be able to provide proof at the time of renewal, 12 months later, to remain eligible.
  - There will be exceptions for students, veterans, caregivers, and people with medical conditions, and others.
  - This will be less administratively burdensome than other work requirements, which often require proof of employment on a monthly basis.
- Fiscally responsible – This will be revenue-neutral – there will be no additional cost for Kansas taxpayers. We can definitely afford it.
- Comprehensive support for rural healthcare – Medicaid expansion isn't a silver bullet, it's part of a larger solution. This proposal would also create a group to chart a path forward for rural healthcare.
- Improves public safety – This provides relief for county jails that have been burdened with providing care for admitted inmates without expansion.

**It is time to get it done.** This bipartisan proposal shows that Governor Kelly is serious about working across the aisle to get Medicaid expanded. However, a few extremists in the Kansas legislature are still blocking Kansas children and families from accessing affordable quality healthcare. It is time to stop listening to partisan ideologues and pass Medicaid expansion for your constituents.

**On behalf of Mainstream and our statewide network of bipartisan advocates, I respectfully urge you to support SB355.**

March 14, 2024

Hello-I can't contribute much or provide any details however I did work with the Medicaid program for a number of years as a caseworker. The Medicaid program in its present form or at least the form I worked with was a program that could be inaccessible to many. Resource limits, disability requirements, deductibles, provider issues and such would exclude many from insured health care.

Often, virtually always, those excluded would not have access to private insurance.

Unfortunately, there were many who put off a checkup or did not follow up on a strange cough or unusual symptom until it was too late. Others had their condition worsen to the point that they did become permanently disabled. Timely healthcare would have allowed many to overcome an illness and become productive again and for others, timely healthcare would have allowed them to go on living.

The failure to expand Medicaid has allowed this situation to continue and should be remedied as soon as possible.

Thank You.  
Mike Marian

March 15, 2024

Hello,

My name is Isidro Marino. I'm a 24-year-old first-generation Mexican-American, and I reside in Garden City, Kansas. I work full time at the Tyson Fresh Meats packing plant while finishing my bachelors degree in social work via online at Fort Hays State University.

I'm an active member of my community, where I love to advocate for community members on a broad spectrum of issues such as immigration, voting rights, environmental justice, labor rights and most importantly for this issue - healthcare expansion.

Last year, my father was diagnosed with Parkinsons Disease which was a tough realization for my entire family. My fathers diagnosis worried not only himself, but the whole family because he already has Type 2 Diabetes, High blood pressure and works a fulltime job feeding cows on a feed lot 6 days a week. I'd like to say my father, and our family has it easier compared to others health and along with it, financial burden, because my father has health insurance. My father sometimes pays up to \$1000 a monthly solely on medications, treatments and appointments. I thank god I am able to provide some money to help with my fathers ever-growing financial burden because of healthcare costs. As a family we all pitch in to help one way or another but it shouldn't be like that. I feel guilty that the healthcare financial burden is much worse for other families in my hometown of Garden City. I know for a fact that hundreds to thousands of families in Southwest Kansas are struggling to receive adequate healthcare and especially receive medical coverage. I largely blame the Kansas state legislature for failing to pass Medicaid expansion a longtime ago, which would have already helped the financial burden of healthcare costs for thousands of Kansans and ensure that we dont leave our residents abandoned. therefore, I am here writing to you to urgently pass. Medicaid expansion! It is crucial that Medicaid expansion be past this legislative session. It is imperative that Medicaid expansion passes this legislative session as thousands of canons cannot wait any longer because the consequences for those people are dire. Again I plead that you hear the calls from the thousands of people who are waiting for you all to do your job.

Thank you,

Isidro Marino (he/him/his his)  
Garden City, Kansas

March 14, 2024  
Testimony to the Joint Senate  
Ways and Means & Public Health and Welfare Committees

NAME: **Leslie D. Mark**

TITLE: **Kansas Citizen / Voter**

EMAIL ADDRESS: **ldmark61@gmail.com**

BILL NUMBER: **SB355, *An Act expanding medical assistance eligibility and enacting the cutting healthcare costs for all Kansans.***

PROPONENT, OPPONENT, or NEUTRAL: **Proponent**

ORAL or WRITTEN ONLY TESTIMONY: **Written Only**

Chairs Gossage and Billinger & Members of the Committees,

No doubt you have been well prepared with a slew of testimony for Wednesday's hearing. I know the preponderance favors passage of this act. More than 80% of the country has already decided to expand affordable healthcare to their poorest citizens. At least 150,000 Kansans will obtain access to affordable health care under this law

I have volunteered for a decade plus pushing boulders uphill, since the passage of the federal ACA, to help fellow Kansans strengthen our health delivery networks and secure our communities — particularly in rural counties. Keep in mind that SB355

- builds on previous compromises to include a work requirement, as Governor Kelly agrees, enabling our workforce to grow while preventing administrivia from barring access;
- won't cost Kansas taxpayers a single cent, since it is revenue-neutral. Today's budget surplus can go toward balanced tax cuts, public schools, and expanding infrastructure;
- protects rural hospitals as well as thousands of jobs and access to health care in rural communities (8 rural hospitals have closed while we've waited for expansion);
- cuts health care costs for Kansas families, hospitals, businesses, and jails;
- is a commonsense, middle-of-the-road approach to providing health care to working Kansans.

Looking forward to robust and expansive debate this week and ultimately passage of SB355.

Leslie D. Mark

*Mission Hills,*

*HD 25 / Sen 7*



**Proponent Testimony on SB 355 – Written Only  
Senate Committee on Public Health and Welfare**

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 SB 355.

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](mailto: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

March 14, 2024

As a retired health professional, occupational therapist, I understand the need of good health for overall well being.

Individuals have the need to get the care they require to lead a satisfactory life. Also, good health positively impacts a person's ability to lead a productive life.

We are occupational beings doing our best with purposeful, meaningful activities with which to engage. Poor health derails this.

The need for expansion of Medicaid is paramount to the individuals in Kansas.

Alison Marsh

March 14, 2024

Kansas has for many years failed to pass a bill to expand Medicaid to 150,000 needy Kansans. Many Kansas citizens have needlessly died as a result. It has been confirmed from independent sources that expanding Medicaid will not cost the state of Kansas a cent. The Federal government covers 90% of the cost and the rest will be more that recovered from the economic benefits derived from Medicaid Expansion.

Numerous Kansas hospitals have closed and others are in danger of closing. Medicaid expansion would provide the funds to keep these rural hospitals open for Kansans that depend on them. The argument that there would not be enough doctors if more people had access to healthcare is probably the very lamest of arguments. If anything it would attract more medical professionals as funds would be available to cover their costs.

There are more reasons to pass Medicaid Expansion now and a main one is around 80% of Kansans support Medicaid Expansion. The legislature needs to quit playing political games with access to health care for their constituents and pass Medicaid Expansion now!

Mel Marsh  
Mission, KS  
816-582-6618

March 13, 2024

I am a Kansas resident.

I support expanding Medicaid in Kansas.

Please do so.

Mrs Marshall  
Leavenworth

March 14, 2024

From the great State of Kansas, This is a unhealthy place to be, not safer than many places in the Union. I don't feel that my home State, KS, cares about its own residence, the neighbors we live next, or the children who have been suffering because adults are not respecting the basics of humanity. What are those basics; Food, Water, Shelter, Care for the whole body. We cannot care for one hair and let the body die and expect the hair to grow. If we cannot figure out how to take care of the PEOPLE here, what is the point of our Government even existing. If the answer is a few, that will not last and WE will not allow our loved ones to suffer for the FEW. Hope that our representees act on the people will for the sake of the State.

IMHO [USMC active duty 2005-2015, American 1986-now]

VR

Raymond

He/Them

760-805-5708

March 17, 2024

Dear Chairman and committee members,

I appreciate the opportunity to offer testimony in support of Medicaid expansion in Kansas. Expanding access to health is an issue that is critical to address right now for uninsured Kansans, Kansas hospitals, and for Kansas as a whole.

For the 150,000 Kansans who do not have health insurance because they do not qualify under the existing rules, expansion will provide them protection from significant financial risk. It will also help ensure they get care for health issues (including behavioral health issues) before they become critical and more expensive to treat. For Kansas hospitals struggling to stay afloat because are having to write off uncompensated care, expansion would help ensure their doors stay open. We know this is especially critical for the rural communities in Kansas where the medical choices are already limited. For Kansans in general, Medicaid expansion will mean health care savings overall.

I am privileged to have had health care insurance through my employer but I have friends who have not had that benefit. They have had to make difficult health care choices, often delaying care.

I sincerely hope you will vote for Medicaid expansion that will bring so many benefits to Kansas. Thank you for your careful consideration of this matter.

Sincerely,

Donna Martin  
Leawood, KS

March 17, 2024

Alliance for a Healthy Kansas, Committee Chairs, and members:

My husband Dr. Philip Martin (internist) and I are voters in Bonner Springs Kansas. We urge you to support the Medicaid Expansion bill by Gov. Laura Kelly that ensures health care for all Kansas.

We could give you numerous reasons to vote for medicaid expansion but I'm pretty sure you've heard them all. My husband and I have been involved in health care for most of our adult lives and yet we do not understand why Kansas doesn't NOT expand medicaid. Oklahoma got smart, why not Kansas?

I know we are talking about millions of dollars in federal funds that Kansas continues to deny accepting but we wonder where our portion of paid federal taxes that should go for medicaid expansion goes?

Prevention is the low cost, life saving step that is currently NOT available to all Kansans. Please know that your decision on this bill could not only save a Kansas life, save money by preventing a health crisis but also support our battered healthcare system in rural Kansas.

Lastly, remember **the majority of Kansans support the expansion of Medicaid.** You represent us, can you at least listen to your constituents?

Please vote to support access to healthcare for both urban and rural Kansans. The vibrancy and well-being of our state depends on it.

Respectfully submitted,

Dr. Philip E Martin and Susan J Martin  
210 Lake Forest  
Bonner Springs, KS  
913 636 3529

To members of the Senate Committee on Public Health and Welfare and the House Committee on Health and Human Services,

Please allow a discussion and vote for KanCare Expansion in Kansas.

I'm a retired medical social worker and have seen first hand the number of people who are working hard to make ends meet, but cannot afford their own health care or health care insurance. Many people I saw were working more than one job. They were contract staff for a roofing or cleaning company, day care providers, house cleaners or care providers for my Mom.

I grew up on a farm in central Kansas and we employed part-time farm help who I know did not have health insurance. I'm also concerned about the hospital in Abilene, where I was born. Eleven rural hospitals have closed in Kansas since 2005. Rural communities need our support to keep health care affordable and accessible.

Studies show health outcomes for rural residents in states that have expanded Medicaid are markedly better than states that have not expanded. The Center for Healthcare Quality and Payment Reform reports 59 of Kansas rural hospitals are in jeopardy of closing - 59 communities are at risk of having even more limited health care. Expansion dollars covering a portion of the cost for those currently without health insurance would be a significant financial boost to our rural hospitals.

Expansion will help approximately 150,000 people across our state have access to health care. I'm tired of my federal tax dollars going to 40 other states (and all that surround KS) when we have such a need in Kansas. Studies from the 40 states also show when more low-income families have better care for their physical and mental health needs, there are significant drops in numbers of children in foster care and mental health calls for police response.

There are so many logical reasons to accept the federal government's 90% coverage for medicaid expansion, it's hard to mention just a few in a letter to your committee, but allowing time for a good discussion and a vote on the House and Senate floor is well over-due. Your constituents are hopeful you'll listen to our concerns and expectations for expansion to finally happen this year.

Respectfully,

Cathy Matlack  
2140 West 89th Terrace  
Leawood, KS 66206

March 14, 2024

Medicaid expansion in KS impacts me both personally and professionally.

My younger brother worked for the same small business for three years. The business was too small to offer an employee health plan, and he could not afford the high premiums to cover his family on the healthcare marketplace. This is one of the reasons for his recent move to Colorado. They are now covered, and my brother can get long overdue checkups and preventative care.

I work for the foster care system, and I see many children come into care and reenter into care after reintegration because parents are not able to afford healthcare and mental healthcare for themselves. As you know, parental mental health conditions and substance use disorders are major risk factors for children entering foster care. Expanding Medicaid would help more parents to be covered and increase the availability of badly needed MH and SUD services in KS.

Thank you,

April Matthews  
Lawrence, KS

March 15, 2024

I support Medicaid Expansion because everyone deserves access to affordable health insurance. My husband and I were small business owners in the state of Kansas from 2008-2012 (we owned a brick-and-mortar retail business) and he currently owns another small business in Kansas and it's been both challenging and very expensive for us to get health insurance for our family of six. We've made it work, but I know there are many people in the state of Kansas who cannot make it work with their yearly income. It's absurd that a single parent with two children that makes more than ~\$9,800 would not qualify for Medicaid.

Expanding Medicaid for Kansans makes economic sense on many levels -- reducing healthcare costs for everyone, ensuring uniform access for all Kansans no matter their race or where they live, and helping Kansas be economically competitive with surrounding states who offer expanded Medicaid coverage.

Please get this done for our state and our residents!

--Kristen McClain

March 13, 2024

### **HB 2556 and SB 355 expands Medicaid and lowers health care**

**costs.** • It gives **150,000 Kansans** access to affordable health care.

• It **won't cost Kansas taxpayers a single cent.** It's revenue-neutral, so Kansas' surplus can go toward tax cuts, public schools, and infrastructure.

• It's a **commonsense, middle-of-the-road** approach to providing health care to working Kansans.

o It builds on previous compromises to include a work requirement that grows our workforce but prevents administrative barriers to healthcare.

o Legislators who continue to stand in the way of expansion show that they're simply thinking about politics – not about their constituents.

• It **protects rural hospitals**, supporting jobs and health care in rural communities. • It **cuts health care costs** for Kansas families, hospitals, businesses, and jails. • **8 rural hospitals have closed while we've waited for expansion**, devastating surrounding businesses and costing communities thousands of jobs.

This is not a partisan issue. **Nearly 80% of Kansans – regardless of party – support Medicaid expansion.** Only a few extremists in the legislature stand in the way of expansion.

### **Medicaid Expansion Lowers Costs for Everyone**

• When one Kansan doesn't have health insurance, other Kansans end up paying for it. If an uninsured Kansan goes to the emergency room and can't pay for care, the hospital must raise prices for other patients to cover the costs.

• Expanding Medicaid could also **reduce taxes.** Without expansion in Kansas, counties and hospital districts have had to send more tax dollars to their local hospitals. **Expanding Medicaid would allow that money to be spent on schools, roads, or even be put back in Kansans' pockets through tax cuts.**

### **Medicaid Expansion Strengthens Rural Healthcare**

• 8 hospitals have closed since 2014, when Medicaid Expansion became an option to the state. Even more are at risk of closing.

• Too many Kansans drive hours to receive basic care, and our doctors, nurses, and hospital staff are leaving for higher pay in neighboring states, exacerbating our health care workforce shortage.

• Expansion would also improve the patient experience -- including for Kansans who are already insured. Medicaid expansion makes it easier and faster to see your doctor.

### **Medicaid Expansion Grows Our Economy**

• Kansas has lost nearly \$7 billion in additional federal funding while our federal taxpayers support jobs and healthcare in 40 other states.

• Medicaid expansion would create nearly 23,000 jobs and help end our health care worker shortage.

- Kansas business owners could save up to \$80 million per year in health care costs if Medicaid were expanded.

From a life-long Kansan. I love my state.

Sincerely,

Deborah McDaniel  
8901 S Fawn Trail  
Derby, KS 67037

March 16, 2024

Dear Chairman and committee members,

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

I believe healthcare should be available to all no matter how much income one makes. People tend to avoid preventative care because they cannot afford to see a doctor or take the medication they need to stay physically or mentally healthy. This puts an even greater burden on the industry as it can lead to emergent health situations or mental health crisis.

Our family has personally benefited from Kancare when my husband was in-between jobs and we did not have health insurance provided through employment. My children were “bumped into” the Kancare program for which I am extremely grateful. During that time one child needed tooth extraction surgery and another had a severe concussion leading to an MRI. This would have devastated us financially had our children not been insured through Kancare.

Every parent should feel at peace when a child becomes ill, knowing they can receive the care they need without having to make huge financial sacrifices or decisions on what other necessities may have to be overlooked to cover medical expenses. And every child should have no fear when a parent becomes sick, knowing they too can receive the care they need to live long and healthy lives.

With your support for Medicaid Expansion, Kansans of every age can live healthier and that is good for everyone.

Thank you for the opportunity to share my experience and provide testimony for the Expansion of Medicaid.

Kathy McDonald  
Overland Park

March 15, 2024

For years I have been in favor of Medicaid Expansion. More access to affordable healthcare is needed.

Please stop referring to the people who would benefit from this as adults who are lazy, not working, able-bodied.

These generalities are inaccurate and insulting.

Thank you,  
Representative Nikki McDonald, HD 49

2/23/24

To Kansas State Legislators,

I so wish that you could see what I see and hear what I hear when I am in the exam room with a patient who is sick and struggling to access the basic care they need because of lack of money and lack of insurance.

If you could just see and hear what I see and hear, then I feel confident that your concerns about politics, cost, ideology, expansive welfare states, slippery slopes to socialized medicine, diversion of care from the most vulnerable, etc..... would fade.

Instead, those worries would be replaced by a profound concern for the wellbeing of the person sitting in front of you.

You have the power to make a significant, life changing difference in the lives of many vulnerable people. I hope you have the courage to expand Medicaid despite the imperfections inherent in legislation of this size and scope. It is the right thing to do.

Please let me know if you have any questions.

Sincerely,

Sheila McGreevy MD

March 15, 2024

Medicaid expansion will benefit patients and hospitals in rural areas saving lives. In addition more doctors, nurses, and medical staff will benefit entire communities with an increased residential revenue for schools, roads, and commerce. Increased revenue is a win-win for all of Kansas! Pass Medicaid Expansion today!

Cheryl McIntosh

**March 15, 2024**

**Testimony in favor of Medicaid Expansion**

Having worked as a health care executive serving Kansas Counties, I urge an affirmative vote on Medicaid expansion. If we want healthy hospitals and healthy people, this Medicaid expansion is sorely needed. Rejecting this federal support is the classic “cutting off your nose to spite your face”. It punishes both people and our health care delivery system when people are denied access to health care and health care providers are denied payment. It’s time to just do it.

Submitted by:

Elaine McIntosh

4301 W 112 Street

Leawood, KS 66211

Lucy McIntyre

Regarding SB 355 and HB 2556

March 15, 2024

My name is Lucy McIntyre. I live in Leavenworth, KS. I am a parent to nine beautiful children that I adopted from foster care. I am a Social Worker that teaches at The University of Saint Mary. I am providing testimony in favor of SB 355 and HB 2556 to expand Medicaid in Kansas. As a social worker, I see how vital access to healthcare is for children and families that I have had the privilege of working with. As an adoptive parent, I am very fortunate that my children were able to retain their Kansas Medicaid after we finalized their adoptions. It has helped us out financially, as we do not have to obtain health insurance for them through our employers which would impact the amount of money we have to support our family's other needs. Medicaid has also opened many doors for our children as it relates to mental health services. One of my children has severe mental health needs and has had to utilize residential services, which are covered through his Medicaid. This service isn't as affordable when using private insurance.

The biggest reason I am submitting testimony today is on behalf of my mother-in-law, who lives with me. She is 64 years old. She has worked in a variety of jobs since I have known her, most of which did not provide her with health insurance. She has been uninsured for most of the time I've known her. This has forced her to make very difficult decisions regarding her medical care. She has chosen not to go to the doctor for annual wellness exams, has avoided being treated for various illnesses, and has avoided getting treated for hip pain that she has been dealing with for years because she cannot afford to. Currently, she has no income, but is still ineligible for Medicaid since she is a single adult under the age of 65. On February 26, she suffered a stroke. She delayed going to the hospital initially due to the fear of the financial burden it would create. She was afraid of an ER bill if it had turned out to be something less serious. This delay cost her the ability to receive medication that could have prevented her stroke from progressing. She is now facing the reality of thousands of dollars in medical bills, the stress of which is impacting her recovery. I keep thinking that maybe this stroke could have been prevented if she had health insurance. Would she have uncovered underlying medical issues that could have been treated and prevented her stroke?

My mother-in-law gave me her permission to share her story. Her and I both are passionate about making access to healthcare a reality for everyone, regardless of circumstance. Around 80% of Kansans support expanding Medicaid. I urge you to consider the will of the people. Thank you for your consideration.

Respectfully, Lucy McIntyre



Jennifer B. McKenney, MD, FAAFP

1525 Madison Street, Suite 3

P.O. Box 576

Fredonia, Kansas 66736

Phone: (620) 378-3700 Fax: (620) 378-3536

March 15, 2024

Dear Kansas Legislators,

I am a business owner and family physician in my rural hometown of Fredonia, Kansas where I have owned and managed my private practice since 2009. I am also the owner of The Oasis Medical Spa, a small business also located in Fredonia. Additionally, I own The Remote Scribe Company, another small business that provides much-needed medical documentation assistance to Kansas doctors. As the owner of three businesses, I know that Medicaid expansion would help businesses in Kansas to thrive.

In each of these businesses, there are hard-working employees who would benefit from Medicaid expansion. I believe in providing healthcare benefits to my employees, and for most businesses, healthcare costs are a large part of our operating expenses. Medicaid expansion would allow me to grow and expand my businesses and serve even more people in Kansas. Medicaid expansion would also help with my employee satisfaction and retention, keeping high-quality employees in rural Kansas.

Some may not realize the disparity between rural and urban wages. One of my excellent medical assistants who has worked for me for over two years is a 20-year-old mother of two small children. Her spouse is a self-employed 24-year-old. Both she and her family would qualify for Medicaid under expansion, providing her spouse with health care coverage and providing her with better coverage than what I am able to provide her through commercial medical insurance. Additionally, without Medicaid expansion, my medical practice still cares for her spouse but writes off his costs. This is just one example of how Medicaid expansion can impact small rural businesses and their employees in various ways.

I ask that we expand Medicaid in Kansas to help businesses, employees, and their families thrive!

Sincerely,

A handwritten signature in black ink that reads "J B McKenney". The signature is written in a cursive, flowing style.

Jennifer B. McKenney, M.D.

Owner, Fredonia Family Care

Owner, The Oasis Medical Spa

Owner, The Remote Scribe Company

March 13, 2024

I gave birth in November and it made me realize how important rural hospitals are. The closest non-rural hospital would have been 40 or more minutes away!

Please expand Medicaid. It costs Kansans nothing but helps us immensely. Studies have shown rural hospitals are closing much more often in states that refuse expansion.

Jessica McNally



TO: House and Senate Committees

FROM: Tanner Wealand, CFO/Interim CEO

DATE: March 12, 2024

RE: Proponent HB 2556/SB 355

On behalf of McPherson Hospital, Inc., we appreciate the opportunity to provide testimony in support of House Bill 2556/Senate Bill 355.

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

The estimated impact of Medicaid Expansion with 150,000 beneficiaries could provide \$865,552 in new revenue, with a net benefit of \$765,901 for our hospital.

Hospitals remain committed to serving the communities we care for each day across our state. We are an economic driver of local economies and one of the largest industries in the state.

Expanding Medicaid would create \$5,022,000 in new annual health care spending in McPherson County, boosting our economy and creating new jobs in our community.

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, to date we have provided \$2,830,340 in uncompensated care this fiscal year.

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

Sincerely,

A handwritten signature in black ink that reads 'Tanner A. Wealand'. The signature is written in a cursive style with a prominent initial 'T'.

Tanner Wealand  
CFO/Interim CEO

March 5, 2024

I am so sorry we do not care for our citizens. I am a retired physician and I worked for over 10 years at the Marian Charity Clinic in Topeka basically caring for the 8,000 or so Topeka residents who had NO health insurance. Most of our patients WORKED as much as they could and often suffered needlessly from untreated illnesses like diabetes or high blood pressure that impacted their ability to hold a job! It is clear from studies of States that have enacted Medicaid for the poor, if you could provide health insurance to as few as 830 adults gaining health insurance you can prevent 1 death per year! That implies that getting the 150,000 Kansans without health insurance coverage you would potentially save nearly 180 Kansans per year! That means that over the past 10 years our legislators have **caused nearly 1800 needless deaths** in Kansas. And worse, during the pandemic the mortality rate **for maternal deaths of women of color** rose in Kansas to a level matching the mother and baby death rates of some of the poorest third world countries. All because these women were denied health care because they could not afford it and the healthcare industry wouldn't provide it. So sad that the Republican legislative leaders don't understand they are **morally responsible** for these unnecessary deaths!

**Richard Meidinger MD**

Dear Chairperson and committee members,

I am writing to encourage you to support Medicaid Expansion in Kansas. Thank you for holding a hearing and allowing for public input on this topic. As a private citizen, who currently has private insurance, I am a huge proponent of Medicaid Expansion in our state because it provides needed health insurance to those without coverage and because it is financially prudent for our state economy.

From 2009-2014, I worked at the Kansas Health Institute as a policy analyst. Previous to that I worked in the Office of the Inspector General for the federal Department of Health and Human Services. As an analyst at the federal level, we monitored fraud, waste and abuse in the Medicaid program. I became very familiar with the federal guidelines, rules and regulations related to Medicaid. At the Kansas Health Institute, I worked with legislative research to create a Medicaid Primer and additional policy documents for legislators and state officials about the impact of new federal guidelines, like Medicaid Expansion, on the state.

As an analyst in both jobs, my role was to gather facts, data and policy information, without advocating for any legislative bill. Now, as a private citizen, armed with facts and information about the impact of Medicaid expansion on the state, I wholeheartedly advocate for and support Expansion.

Looking at KHI's most recent analysis, expanding Medicaid would result in about 150,000 new Medicaid enrollees in Kansas. (<https://www.khi.org/articles/2024-medicaid-expansion-estimates/>) The benefits to our fellow Kansans far outweigh the risks or costs of expanding Medicaid. Forthly other states, many conservative-leaning, have expanded Medicaid. We can be sure now, years later, that the expansion does improve access to healthcare, but also doesn't balloon costs for states.

Expanding Medicaid not only is the right thing to do to help those who are uninsured, it is also the right thing to do for our state economy. KHI estimates Kansas would save more than \$500 million over two years if Medicaid were expanded under the terms of the Affordable Care Act (ACA) — offsetting the equivalent of approximately eight years worth of net expansion state costs. <https://www.khi.org/articles/2024-medicaid-expansion-estimates/> This benefits all of us by adding more payers to the pool of those receiving medical treatment, spreading costs that hospitals and other providers have to pass along. In addition, it benefits hospitals and clinics, particularly those in rural areas and those who treat uninsured or at-risk patients.

The majority of Kansans support Expansion, it benefits our state financially, and it is just the right thing to do. Please finally pass Medicaid expansion, like so many states have done. Thank you for your service to our great state.

Sincerely,

Emily Meissen-Sebelius, private citizen

Prairie Village, Ks.



Commitment, Quality, Community  
511 NE 10th Street, Abilene, KS 67410  
(785) 263-2100

TO: House and Senate Committees

FROM: Harold Courtois, CEO, Memorial Health System

DATE: March 12, 2024

RE: Proponent HB 2556/SB 355

On behalf of Memorial Health System, we appreciate the opportunity to provide testimony in support of House Bill 2556/Senate Bill 355.

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

Medicaid Expansion would benefit our hospital with \$700,000 in funds that we currently write off due to lack of coverage. We currently have 500+ citizens who fall out of coverage due to income levels just above the Medicaid coverage level.

Hospitals remain committed to serving the communities we care for each day across our state. We are an economic driver of local economies and one of the largest industries in the state.

Medicaid Expansion would bring nearly 20 new jobs to Abilene and create more than 2.2 million per year in additional local health care spending. Medicaid Expansion will create a positive impact on the local economy and will improve access to healthcare in Dickinson 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 \$2.5 million in charity care and bad debt.

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

Sincerely,

Harold Courtois, CEO  
Memorial Health System  
[hcourtois@mhsks.org](mailto:hcourtois@mhsks.org)  
785-263-6610 – Work  
785-263-6622 - Fax

March 12, 2024

To whom it may concern,

I have been a healthcare professional in Wichita for 24 years. I feel strongly that the Kansas legislators need to listen to Kansans and actually vote to expand eligibility for KanCare. We have allowed the working poor to go without healthcare options for too long. This expansion will reduce healthcare costs for everyone and protect Kansans from medical debt.

Please take this request seriously and vote to expand Medicaid. Thank you for your time.

Natalie Merten



**Metro Organization for Racial and Economic Equity**

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Lora McDonald  
Executive Director  
Written Testimony in Support of Medicaid Expansion  
Kansas Legislature

Dear Kansas Legislators,

I am writing on behalf of the Metro Organization for Racial and Economic Equity, a faith based non-for-profit which includes a dozen Kansas congregations standing in support of Medicaid expansion. When we say, "Medicaid Expansion saves lives," we ask you to contemplate what it means to continue to not expand Medicaid.

As we talk to voters all over the state about what expansion means and who it is for, Kansans overwhelmingly stand with us. Many know that rural Kansans are driving further and waiting longer for hospital care. But, often, ordinary Kansans have no idea that expansion is for working people who just don't earn enough to qualify for the exchanges, and their employers are, for whatever reason, unable to offer them insurance. Working Kansans want other working Kansans to have health care coverage. It's that simple.

We know you are aware of the state of hospitals, how this impacts the economy, and even that your own insurance rates will improve when you pass this bill. We know that you have the statistics, that this coverage would mean access to health care for 150,000 people who are in the gap. We want you to know that, as we continue to educate voters, we want to be able to tell them that you stood up for working people and voted yes. We want to educate people on eligibility and access, not about which legislators blocked the coverage that could save lives.

We respectfully request that you vote YES and affirm the right to access health care for Kansans.

Lora McDonald  
Executive Director

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**Covenanting Congregations and Organizations**

AIRR, All Souls Unitarian Universalist, Bethel AME, Blue Valley Christian, Community Christian, Country Club Christian, Crossroads Church (Kansas City), Disciples of Christ Regional Ministry, First Baptist Church of Kansas City, KS; First Baptist Church of Kansas City, MO, G.I.F.T., Grandview Park Presbyterian, Holmeswood Baptist, Individual Members Caucus, Kansas City United Church of Christ, Keystone United Methodist Church, Latinx Education Collaborative, Linwood United Church, Metropolitan Missionary Baptist, Midwest Innocence Project, Neosho Valley Missionary Baptist, The Oasis Church, Our Lady of Perpetual Help Catholic Church, Overland Park Christian, Peace Christian Church United Church of Christ, Pleasant Green Baptist, Prairie Baptist, Rainbow Mennonite; Rime Buddhist Center, St. Francis Xavier, Second Baptist-Olathe, St. James UMC, St. Stephen Baptist, Swope Parkway United Christian, Trinity UMC, United Missionary Baptist Church, What U Can Do

March 16, 2024

The state should not be sending money to the federal government and then refusing to take it back. Our state needs to expand Medicaid, so that rural hospitals do not close. Medicaid needs to be expanded to help people who are falling in the gap and cannot afford insurance. It is Kansas money coming back to Kansas. Kansas is one of the few states that have not expanded it and all of the states that have not expanded it are suffering because of the refusal to expand. Look at the data. Put people before party. The people opposed to expanding Medicaid have no good reason for their position.

Karen Metz  
Prairie Village, KS



<http://www.marc.org/Emergency-Services-9-1-1/MARCER>

To: Senate Committee on Public Health & Welfare and the House Committee on Health & Human Services

RE: Support for Medicaid Expansion

From: Jeff Boss, Chair MARCER, EMS Battalion Chief Med-Act,  
[Jeff.Boss@jocogov.org](mailto:Jeff.Boss@jocogov.org)

Date: February 22, 2024

MARCER supports the expansion of the Medicaid program in Kansas. MARCER has supported Medicaid Expansion for Kansas for several years and we submit this testimony to reaffirm our ongoing support for this critical initiative.

Mid-America Regional Council Emergency Rescue (MARCER) is the Kansas City bi-state regional EMS Council. As a subcommittee to the Mid-America Regional Council (MARC), MARCER consists of over 35 area EMS agencies and 20 hospitals that collaborate on various pre-hospital emergency medical care issues such as communications, disaster planning, hospital diversion, time critical diagnosis, group purchasing, and other policy initiatives.

MARCER believes that providing additional health care insurance coverage for Kansas citizens will increase their productivity and happiness as well as provide tremendous benefit for the Kansas health care system that frequently provides care without financial remuneration.

Ambulance services in Kansas provide services to everyone regardless of ability to pay. Many of our patients have no insurance and either struggle to pay for the services or do not attempt to pay thus shifting the burden to local governments which subsidize ambulance operations. The hospitals we partner with are in a more difficult position as they rarely have a local government to provide additional financial support.

While ambulance service finances are not comparable with hospitals, doctors, and other aspects of health care, the evidence is clear regarding the financial benefit to ambulance services regarding Medicaid expansion. Analysis of a mid-sized ambulance service in Missouri shows an almost 6% growth in the number of Medicaid patients with a substantial decline in those patients without any insurance coverage. This one agency had an increase of revenue of \$1.2 Million related to the increase in the number of patients on Medicaid and the decline in

the number of patients listed as “private pay”.

Nationwide citizens who have some sort of primary health insurance have more successful and healthy lives. The health care system is more fairly compensated for the services it provides, and in much of rural Kansas there will be a stabilization of the rural hospitals critical to much of Kansas.

Presently only 10 states have failed to benefit their citizens with the expansion of Medicaid. The neighboring states of Oklahoma, Missouri, Colorado, and Nebraska have all taken advantage of this life saving program, and we hope that Kansas will move forward to adopting Medicaid Expansion.

If you have any questions, please feel free to contact me.

March 15, 2024

Please, be practical and humane; expand Medicaid NOW.

Marilyn Milhon

March 13, 2024

I find it hard to fathom the resistance to Kancare in the legislature.

Money for finding is being sent to Washington and we are getting nothing back on our investment.

It's long past time for lawmakers to really vote their constituents views. When over 75% of voters in Kansas are pro Kancare, it's obvious that party politics are controlling the legislature.

In this election year, I'm encouraging everyone to vote against legislators who do not back Kancare.

If it's good for 41 states, why isn't it good for Kansas.

Hoping this will be read and considered by somebody who cares to make a difference in individual lives and small town medical care.

Gary L Miller

Kindra Miller

March 20, 2024

Proponent Written Testimony: HB 2556 Cutting Healthcare Costs for All Kansans Act  
Health and Human Services Committee

Dear Chairwoman and Committee Members,

Thank you for allowing me to provide testimony in support of Medicaid Expansion. There are so many wonderful, positive, and proven reasons to expand Medicaid in our state, including the following:

- 150,000 low-income Kansans would gain access to medical care.
- Healthcare costs for everyone would be reduced.
  - Emergency rooms are treating Kansans without the ability to pay, which raises health care costs for everyone.
  - Marketplace premiums are 7% lower in states that expanded Medicaid compared to non-expansion states like Kansas.
- Medicaid Expansion won't cost Kansas taxpayers a single cent.

I also want to take the time to let you know how not expanding Medicaid in our state has affected me personally. A single, hardworking mother raised me. My mom raised 5 children by herself and sometimes worked 3 jobs to keep us fed, clothed, and sheltered. My mom worked hard and never let her kids go without. Since my family was very poor, all my siblings and I were enrolled in state health insurance. Access to this much-needed healthcare was essential and helped my mother tremendously as this was one less financial burden she had to worry about. However, when I turned 18, I was taken off of state insurance. Since my mother worked low-wage jobs that did not offer health insurance (or if they did, she couldn't afford the rates), I had no available option to obtain affordable health coverage. My mother always encouraged her kids to do great things, so I started college soon after graduating from high school. Being a first-generation student and coming from a low-income family, I worked full-time all throughout my time in college, and sometimes even working 2 jobs at once. Despite working 40 hours a week, I was still unable to access healthcare as the jobs that I was qualified to work at did not offer health insurance or they did, and it was not affordable. I went without health insurance for my entire time in college. This affected my mental and physical health greatly. I held off on going to regular preventative care visits and seeking treatment when I was ill. I even carefully calculated my decisions so as not to put myself at risk of an accidental injury that would surely bankrupt me and take away from my dreams and aspirations of completing college and becoming a social worker.

All of this is to say that if the Kansas State Legislature had done the right thing and expanded Medicaid, it would have helped me, a hardworking citizen of Kansas. I would have qualified for Medicaid in our state after turning 18 if Medicaid had been expanded. My physical health would not have constantly been put at risk, and my mental well-being would have benefited as well as I would not have to constantly worry about the what ifs; what if I have a medical issue and I cannot obtain treatment in time because I can't afford it, what if I am seriously injured and I become medically bankrupt.

Not having access to health insurance is a human rights and public health crisis. When you deny the people you serve a means to access much-needed and deserved healthcare, you demean them, and you send the message that they don't matter. It shows them that legislators who were elected to serve the

people of Kansas care more about political ideologies than enhancing the well-being of Kansans. I am begging you to please expand Medicaid for our state and do the right thing.

Your consideration of these matters and solutions is very much appreciated.

Written Statement In favor of MEDICAID expansion  
For SB 355 and HB 2556 on MEDICAID EXPANSION  
BY STEPHEN F MILLER MD  
Commissioner for Kansas Commission on Disability  
Concerns (KCDC)

Thank you for allowing me to share a written testimony on SB 355 And HB 2556. KCDC is an advocate for improvement for disabled people. We work to help the governor, legislature and state agencies on opportunities to improve the lives of those saddled with disabilities.

I am a disabled Viet Nam Veteran and a retired surgeon who practiced in my hometown Parsons Kansas. I volunteered for 18 years and helped run the free PARSONS COMMUNITY CLINIC for the uninsured and underinsured the working poor. It was extremely rewarding volunteering free care for people but very frustrating because of our tiny budget which came from donations. Our all volunteer staff of retired people, nurses and doctors became too old to actively continue our mission.

People in the population we cared for are without access to health care. These patients with no family doctor have to put up with pain and suffering until it becomes unbearable and then go to our local Emergency Room at Labette Health. This type of crisis health care is extremely expensive to provide. The hospital usually gets no reimbursement. Mr. Brian Williams the CEO at Labette Health has told me and other volunteers that expanding MEDICAID would help a large number of our indigent patients. This would help the hospital recover some of the moneys spent providing care that currently has no reimbursement. Most important is that many patients with DISABILITIES already have difficulty accessing health care. MEDICAID EXPANSION is a help in the right direction for poor KANSANS in need. Thank you for allowing me to testify in support of SB 355 and HB2556. Dr Stephen Miller MD,508 Maple Crest Dr, Parsons KS. 620-423-9040

February 28, 2024



To Senate Committees on Ways & Means and Public Health & Welfare,

On behalf of Minneola Healthcare, we extend our gratitude for the opportunity to present our testimony in support of Senate Bill 355.

Unlike many other industries, Kansas hospitals operate under the mandate to provide necessary care to all patients, regardless of their ability to pay. Consequently, when individuals seek treatment in our Emergency Departments, we are obligated to attend to their needs. This obligation presents significant financial challenges for our hospitals, especially considering the persistent stagnation in reimbursement rates from both public and private payers, coupled with escalating operational expenses.

Expanding Medicaid in Kansas is not only a matter of fiscal prudence but also a crucial step in ensuring equitable access to healthcare for our residents. By extending Medicaid coverage, we anticipate several direct benefits to our hospital and the broader community.

With your support of Medicaid expansion, Minneola Healthcare could benefit an estimated \$175,000 annual increase in revenue from Medicaid. This increase could potentially assist in reducing the tax burden of the Minneola Hospital District.

Moreover, Medicaid expansion has the potential to catalyze transformative change within our communities. Improved access to preventive care and timely medical interventions can lead to better health outcomes, reduced reliance on emergency services, and enhanced productivity among residents. This, in turn, fosters stronger local economies and bolsters the overall well-being of our state.

Minneola and Clark County, KS are in a situation where emergency transportation is very limited. Adding coverage to additional Kansans will allow them access to the preventative care and routine appointments with their primary care providers they need, and in turn, could aid in the reduction of emergency transportation within our very limited and rural communities.

At present, the healthcare industry in Kansas shoulders an immense burden, providing nearly \$1.2 billion in uncompensated care statewide. At Minneola Healthcare, we have contributed significantly to this effort, having delivered \$449,780.13 in uncompensated care.

In light of these considerations, we urge you to support SB 355. By endorsing this legislation, you have the opportunity to alleviate the financial strain on our hospitals, enhance access to vital healthcare services, and foster the prosperity of our communities.

Thank you for your thoughtful consideration of our perspective. We respectfully request that the committee recommend favorably on SB 355.

Sincerely,

A handwritten signature in black ink that reads "Debbie Bruner". The signature is written in a cursive, flowing style.

Debbie Bruner  
CEO

Minneola Healthcare  
debb@minneolahealth.com

Saturday, March 17, 2024

To: [Info@expandkancare.com](mailto:Info@expandkancare.com)

Attn: Committee Chairs,

Sen. McGinn and Rep. Landwehr:

Re: Medicaid Expansion Testimony

My name is Wandra Minor and I am a voter in Johnson County, KS and a member of the League of Women Voters, Voter's Rights Network of Wyandotte and Johnson County NAACP. I urge you to support the Medicaid Expansion bill by Gov. Laura Kelly that ensures uniform access to healthcare for all Kansas.

Both HB 2556 and SB 355 expand Medicaid and lower health care costs. Enacted, these bills would give 150,000 Kansas taxpayers a cent. It's revenue-neutral, so Kansas' surplus can go toward tax cuts, public schools, and infrastructure.

Expanding Medicaid reduces health care costs for everyone. When low-wage Kansans can't get health coverage, that means more in emergency room visits and crisis treatment for physical and mental health needs. When hospitals and health care providers aren't compensated for services they provide, a portion of those additional costs are passed on to everyone through higher prices. The result is that we all pay more out of pocket and through insurance premiums.

Lower income Kansans who live in urban areas frontier counties and in the southwest part of the state are more likely to live in the coverage gap. Expanding Medicaid allows all lower-wage Kansas access to affordable health care, regardless of their race, how much money they make, or what their Zip code is.

Increased and expanded healthcare preserves and strengthens our rural communities. For Kansas in outlying communities, accessing health care when and where they need it is becoming significant challenge. When hospitals in rural communities close, not only do residents struggle to get the care they need while also boosting their local economies.

Further, Medicaid Expansion supports a healthier work force. Most Kansans in the coverage gap work at least one job, but either aren't offered employer-based health insurance, or can't afford it. Those who are not working are often caretakers/givers or are unable to work because of their own health conditions.

Kansas has lost nearly \$7 billion in additional federal funding while our federal taxpayers support jobs and healthcare in 40 other states. Expanding Medicaid would create nearly 23,000 jobs and help end our health care worker shortage. Please vote to support additional access to healthcare for Kansans. Our state, its economic vitality and prosperity, count on it.

Respectfully submitted,

*Wandra L. Minor*

Wandra L. Minor

March 15, 2024

I am writing to voice my support for the expansion of Medicaid in the state of Kansas. My husband and I have excellent health care, but have seen the effects on people in Kansas who do not have any health care benefits at all. We feel this is totally unacceptable that people are denied healthcare simply because they can't afford it. It's a disgrace to the state of Kansas that this is happening to people in our state. It's time to rectify this and pass a Medicaid bill. We urge our legislators to do this now.

Sincerely,  
Mary Minshull  
1950 West 139th Terrace  
Leawood, KS. 66224  
816-719-7434

Date: March 20, 2024

From: Sister Marie M. Mollis, SCL

RE: HB 2556 / SB 355 Proponent testimony

Dear Chairperson and members of the committee,

As a member of the Sisters of Charity of Leavenworth, I ask you very sincerely to consider Medicaid Expansion (KanCare) as soon as possible so those who cannot afford healthcare can be served as the rest of us are! We all deserve the same access.

Sincerely,

Sister Marie M. Mollis, SCL

Topic: Testimony for Medicaid Expansion

Position: Proponent

Form: Written Only

Date: March 14, 2024

Forty-one states have expanded Medicaid, but Kansas has not. Our failure to expand Medicaid has so far cost Kansas seven billion dollars, which was mostly our money as we paid it in Federal taxes. But the greater cost is that 150,000 of our working citizens do not have health insurance. This has greatly hurt our working poor, our hospitals, and our medical care providers who are often not paid for their services. This has hit rural hospitals particularly hard as they do not have the resources to make up for lost revenue. Rural hospitals and clinics have been forced to close, and it is estimated that 30% more are at risk.

Here are the reasons that Kansas should expand Medicaid:

- It would provide medical care coverage to 150,000 low-income working Kansans who cannot otherwise afford it. They are caught in the middle as they do not have enough income to receive subsidies from the Affordable Care Act, but make too much to qualify for the present Kancare system.
- It would inject \$5.3 billion into our economy in just the first 10 years. Those funds would have a multiplier effect on consumer spending, business activity, jobs, personal income, and state tax revenue.
- It would create jobs. A study by George Washington University found that expanding KanCare would create 3,500 – 4,000 new jobs in the next five years.
- It would cut the unpaid bills for emergency services. Emergency room care is very expensive compared to preventive care. Emergency rooms are required by law to treat everyone, and those without medical insurance often wait until they are very sick and then go to the emergency room for care.
- Unreimbursed emergency room costs drive up costs for everyone and endanger the financial stability of medical care providers and hospitals.
- It would cover preventive medical care and greatly reduce the spread of communicable diseases.
- It would reduce bankruptcies. Many of us are just one major accident or illness away from bankruptcy. A Harvard study found that about 50% of all bankruptcies in the United States are caused by illness and unpaid medical bills. Bankruptcies affect everyone because the health providers, banks, businesses, and credit card companies who lose money in bankruptcy pass the cost on to the rest of us.

- It would improve everyone's health. Your family's health depends on the health of everyone in your community. You and your family will likely come into contact with thousands of people during this next year. People without health insurance are much less likely to receive immunizations and preventative care - and are much more likely to have untreated communicable diseases.

A study by the [Brooking Institute](#) found that all of the first 37 states to expand Medicaid were satisfied with the results and none wished to withdraw from the program. Further delay will cost Kansas about another \$665 million over the next 10 years. It is time we tapped into the Federal funds available and made health insurance available to the 150,000 working Kansans who are without healthcare coverage.

Respectfully submitted,  
Dr. Jesse Moore

717 W. 4<sup>th</sup> St.

Haysville, Kansas 67060

316-558-7848



*Morris County Hospital*  
600 N Washington  
Council Grove, KS 66846  
(620) 767-6811-Ext 121  
Fax (620) 767-5611

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TO: **House and Senate Committees**

FROM: Kevin A. Leeper, CEO Morris County Hospital

DATE: February 28, 2024

RE: Proponent HB 2556/SB 355

On behalf of Morris County Hospital, we appreciate the opportunity to provide testimony in support of House Bill 2556/Senate Bill 355.

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

The mostly Federally funded program of expanding Medicaid coverage to more Kansans is just the right thing to do to bring in millions of new dollars to our States economy. With the turnover of those dollars and because of the tight margins experienced by 2/3s of our Kansas hospitals, expansion will help to retain or create countless healthcare jobs that we are now at risk of losing to other industries which are attracting healthcare workers for higher wages and/or less stressful work routines. No, it **won't** make up for all of our hospital's current deficits, but it **will** keep Kansas paid tax dollars from continually flowing to other States which have invited this program into their States. The program should increase Morris County Hospital's net revenues by just south of \$100K annually, which is only .6% of our annual net revenues, but a positive boost to funding replacement equipment which helps sustain our future.

Hospitals remain committed to serving the communities we care for each day across our state. We are an economic driver of local economies and one of the largest industries in the state.

Morris County is buffeted by having a lower percentage of uninsured residents than other Counties, but our number has grown over the last 18 months of high inflation. Again to turn over the \$100,000 of new income into our County (six-fold as a common multiplier) makes a significant cash infusion in to our small 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 \$600,000 annually to the indigent / bad debt book of business (4% of our net revenues).

Thank you for your consideration of our comments. We ask that the committee recommend favorably HB 2556/SB 355, and at least move it out of Committees for full slate consideration.

Kelsey Morris

Regarding SB 355 and HB 2556

March 14, 2024

Greetings! My name is Kelsey Morris, and I am a concerned college student who resides in the state of Kansas. I am testifying in support of SB 355 and HB 2556, that would expand Medicaid in Kansas, allowing roughly 150,000 Kansans the opportunity to obtain health insurance and access healthcare with reduced financial burdens. I think that healthcare is an essential part of life and should be accessible for everyone.

I want to thank you for taking time out of your day to read my testimony and hear my voice, it is appreciated greatly. I hope you consider the voices of Kansas and vote in support of expanding Medicaid. All that you do is much appreciated.

Best,

Kelsey Morris

March 14, 2024

TO: Members of the KS House and Senate

FROM: A concerned family needing Medicaid expansion ASAP

RE: KS Medicaid expansion

I am writing this letter trying to explain my granddaughter's situation. At 2 1/2 years old, she was fit with a cochlear implant. She previously tried a hearing aid but it did nothing for her hearing. Then, when in high school, she was fitted with another implant in her other ear. Her doctor and audiologist thought it would improve her capabilities of hearing. She had years of special classes, many interpreters, and extra equipment when it no longer worked or was broken, and a couple of surgeries. All of this was covered under her Medicaid. We are forever grateful she is able to hear and live a life as a hearing person. Any payment from us was minimal.

She is now turning 24 years old in May, works as a hearing impaired teachers' assistant, and cannot qualify for Medicaid by a few hundred dollars. The other problem is her present equipment is "old" and "replacement parts" are not available. She is struggling to continue with her hearing and then, that will soon not allow her to work. Bottomline...if she cannot work, she will qualify for Medicaid. That's not what she wants!

Finally, she will never hear on her own. Why does a person when turning 21 years old, is not covered for implants through Medicaid? How can implants be termed as a prosthetic because that's not what an implant is? We can't even find an insurance company to help us. Medicaid was so helpful in her early years but now, she is discarded and help is not available. Please discuss expanding Medicaid because she needs the equipment but still wants to work at a career helping other youngsters learn and live as a normal child. So many other states have grown their Medicaid; so therefore, why can't Kansas?

March 17, 2024

This is Diana Morriss, a resident and retired nurse who has lived in Fort Scott, Kansas 66701, for the past 47 years. We have lost our hospital and recently our ER. in this community. Medicaid Expansion might very well have helped to prevent this loss from happening! I definitely support Medicaid expansion!!! It is time to stop losing out on this source of income to our state.

Thank you,  
Diana Morriss  
1021 Horton St, Fort Scott, KS 66701

# Testimony In Support of Expanding Medicaid in Kansas

*Gary Morsch, MD*

March 15, 2024

I am a Family and Emergency Medicine Physician who is the founder of Docs Who Care (DocsWhoCare.com), a 30-year old company that provides Physician and Advanced Practice Provider staffing to rural hospitals across Kansas, all of which are Critical Access Hospitals (CAHs). We staff Emergency Rooms, provide inpatient Hospitalist services, as well as outpatient Clinic coverage. Because of the significant and growing shortage of physicians in rural America, our group is increasingly called upon to provide short and long-term staffing to these hospitals.

Our medical group staffs about 30 rural hospitals across Kansas each month, and, over the course of the year will provide staffing to 50 Kansas CAH's. Over the past 30 years I have personally staffed over 25 different rural hospitals in Kansas---from Hiawatha to Hugoton, Sedan to St. Francis, and multiple hospitals in between. I doubt that no other physician in Kansas has worked in more rural hospitals than I have. Over the past nearly 30 years, I have worked in over 120 rural hospitals throughout the Midwest. Believe me, I know the challenges that CAHs face.

Docs Who Care also assists CAHs with physician and APP recruiting. In fact, we allow hospitals to recruit our providers without charging any recruiting fees. We are the only company in the country that provides recruiting services without charge.

As serious as the shortage of physicians and providers is across Kansas, the greatest threat to Kansas CAHs is financial! Because of the higher incidence of Medicare, Medicaid, and uninsured patients in rural areas, rural hospitals deliver care at reimbursement levels that are inadequate to sustain their operations. Year after year, rural Kansas hospitals are closing due to their inability to raise enough revenues to offset their costs of delivering healthcare.

I would respectfully ask that the Kansas legislature expand Medicaid coverage to the approximately 150,000 additional Kansans who would qualify for coverage, many of whom live in rural Kansas. I understand that nearly \$7 billion of unreimbursed medical services have been provided by Kansas hospitals since Kansas rejected the opportunity to expand Medicaid, as 40 other states have done. With approximately 130 hospitals in Kansas, this means that, on average, each hospital in Kansas has forfeited \$53 million each over these many years. As a federal tax payer, I am offended that my tax dollars have gone to 40 other states, while my own state, Kansas, has refused to accept the federal dollars Kansas taxpayers have provided.

The lack of initiative by the Kansas legislature to expand Medicaid is hurting rural hospitals in Kansas. This is an avoidable tragedy, which you now have the opportunity to address.

I beg of you to put aside your ideological positions in order to support Kansas CAHs that are literally dying because of a lack of Medicaid expansion.

## 2024 Testimony for Medicaid Expansion

Wael S. Mourad, MD  
17305 Stearns Street  
Overland Park, KS 66221

Expansion of KanCare is the right thing to do for 2 reasons: 1. Health is critical for a growing economy and to increase the state's GDP as it competes with other states. 2. It is the morally correct step to help our fellow citizens lead a happy and healthy life.

Sincerely,

Wael S. Mourad, MD, MHCM, CHCQM, FAAFP  
Medical Director of Care Coordination | SSM Health - St. Mary's Hospital (Jefferson City)  
Clinical Professor | University of Missouri Kansas City School of Medicine



**NAMI**  
National Alliance on Mental Illness

**Kansas**

March 20, 2024

## **Medicaid Expansion Hearing**

Prepared and Presented by:

Itzel Moya, NAMI Kansas AOT Director and lifelong Kansas Resident

My name is Itzel Moya, and I am writing in support of Medicaid Expansion.

NAMI Kansas is the state organization of the National Alliance on Mental Illness, a grassroots organization whose members are individuals living with mental illnesses and their family members who provide care and support. Our goals at NAMI Kansas include advocating for non-discriminatory access to healthcare.

NAMI Kansas supports Medicaid Expansion as it would help improve access to healthcare for Kansans. A large body of research shows that Medicaid beneficiaries have substantially better access to care than people who are uninsured and are less likely to postpone or go without needed care due to cost.<sup>1</sup> Access to care due to cost is a serious issue many Kansans face and Medicaid Expansion would help alleviate this burden.

Medicaid Expansion supports our commitment to improve the quality of life of many vulnerable Kansans. Overall, the impact of Medicaid Expansion would be a gain for the State of Kansas. As a lifelong Kansas Resident and on behalf of NAMI Kansas, I urge you to pass Medicaid Expansion.

Thank you for the opportunity to provide written testimony.

Sincerely,

Itzel Moya, LMSW  
PO Box #734  
Cimarron, KS, 67835  
[itzel@namikansas.org](mailto:itzel@namikansas.org)

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<sup>1</sup> Rudowitz, R., Burns, A., Hinton, E., & Mohamed, M. (2023, June 30). 10 things to know about Medicaid. KFF. <https://www.kff.org/mental-health/issue-brief/10-things-to-know-about-medicaid/#:~:text=Medicaid%20facilitates%20access%20to%20care,needed%20care%20due%20to%20cost.>

March 14, 2024

I am writing about the Cutting Healthcare Costs for All Kansans Act, Medicaid Expansion Act, **HB 2556 and SB 355**. This is my testimony for the upcoming public hearings in the House and Senate. I have been a Kansas resident for 60 years. I believe there is widespread support in our state for expanding Medicaid so that 150,000 more Kansans will be able to get affordable health care. It will help support our hospitals and health care workers too, and literally save the lives of many Kansans.

Our family has been seriously impacted by the rejection of these federal aid funds to our state. Allow me to tell you about my granddaughter, who was an outgoing, energetic young woman, and has spent most of her life helping others, volunteering in many organizations and charitable programs to provide aid all over the world in many ways. She chose to get a university degree in social work so she could help others, and had a bright and promising future working in a career she loved. She worked for three years in the field before the disaster of the pandemic stole her health and the dreams she had for her life.

In 2000 while in another country she contracted COVID-19 in its original virulent strain and became very ill. When she got back home to Kansas she never fully recovered from this horrible virus, and her health kept deteriorating, with many new symptoms and illnesses developing over the next three years. There were no vaccines or treatments then, and little understanding of long haul covid. She was physically unable to go back to her job, and has no source of income. She has little energy, and it is very difficult for her to get out of bed and care for herself.

She has applied for help, but has repeatedly been denied, and has become overwhelmed with the hopelessness of her situation and the realization she will probably never be able to go back to the life she had. She sees no future the way things are now and fears becoming destitute, homeless and unable to care for herself, get medical care or pay the bills. If my granddaughter could get Medicaid medical insurance it would make a world of difference in her life and allow her to get lifesaving treatment.

Please pass the Cutting Healthcare Costs for All Kansans Act, Medicaid Expansion Act. So many adult disabled Kansans have been omitted from assistance programs because they do not have children. Many are unable to afford health insurance, have disabling health conditions that make them unable to hold a job and have low or no income. They have desperate needs for assistance with basic survival. If we care about our citizens how can we withhold the help that has been given to our state by the federal government?

The Medicaid Expansion Act for Kansas will help disabled people like my granddaughter get assistance and have hope for the future. Please pass this legislation.

Respectfully yours,  
Susan Myers  
Prairie Village