



## 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.





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.

January 26, 2024

The Honorable Carolyn McGinn  
Senate Committee on Ways & Means

Dear Chair McGinn and members of the Committee,

On behalf of The ALS Association and the 290 Kansans living with ALS, we urge you to support SB 355 to close the healthcare coverage gap.

ALS, or amyotrophic lateral sclerosis, is a fatal progressive neurodegenerative disease that affects the nerve cells responsible for controlling voluntary muscle movement. It is a devastating condition that leads to the gradual loss of muscle function, eventually rendering individuals unable to speak, eat, or breathe independently.

Individuals with ALS require a significant amount of medical care and assistance to manage the symptoms of the disease. Some examples include assistance with dressing, feeding, travel to appointments, mobility, and equipment use.

For Kansans living with ALS, accessing affordable care can be a significant challenge due to the state not expanding KanCare coverage. As we have seen in other states that have enacted Medicaid expansion, expanding KanCare coverage will help to prevent the financial harm caused by ALS. Based on our analysis of Centers for Medicare and Medicaid data from 2021, we know that 19 percent of people living with ALS are currently eligible or utilizing Medicaid in Kansas. We know additional families impacted by ALS fall outside of the current income requirements and would greatly benefit from KanCare expansion.

The average annual out-of-pocket costs for people living with ALS can be as high as \$250,000 a year. Recent data from an ALS Association survey shows the importance of addressing lack of affordable insurance coverage and the high costs of care for our patients. One in ten respondents to our survey said they lost healthcare coverage after an ALS diagnosis. Our survey also found that one in four respondents said they experienced medical debt due to ALS treatment or caregiving.

The ALS Association shares concerns with other patient advocacy organizations regarding the proposed work requirements in this bill and the bureaucratic complexities that accompany them. As we have seen in other states, these complexities often create cracks that patients fall through and cause a loss of coverage. Navigating the bureaucracy to prove that one is exempt from work requirements due to disability can be an added and unnecessary burden for people living with ALS and their families. This process can be time-consuming and complex, diverting energy and resources that could be better spent on health and well-being.

We hope the committee will consider these concerns and make necessary changes to the current bill language so as to reduce the burden put on the shoulders of patients and caregivers. We are committed to meeting the critical mission of making ALS livable, for everyone, everywhere until we find a cure. Policies that can help people living with ALS access affordable healthcare can greatly assist our work in meeting this objective.

We strongly encourage members of the Committee to advance SB 355 to the full Kansas Senate for their consideration.

Sincerely,

Matt Prokop  
Managing Director, Advocacy  
The ALS Association  
[matt.prokop@als.org](mailto:matt.prokop@als.org)





March 20, 2024

Senator Carolyn McGinn, Chair

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

**RE: SB 355 / Neutral Testimony**

Madame Chair and Members of the Committee,

The American Cancer Society Cancer Action Network (ACS CAN) is the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society. Our mission is to "Advocate for evidence-based public policies to reduce the cancer burden for everyone." To that end, ACS CAN will continue to prioritize policies that help every Kansan prevent, find, treat, and survive cancer.

***"If you are uninsured, and you are diagnosed with cancer, you have a 60% greater chance of dying from cancer than if you were insured and diagnosed with cancer."***<sup>i</sup> In 2024, the American Cancer Society projects a total of 16,640 new cancer diagnoses for Kansans; many of which are preventable.

Whether it is access to primary health care through which cancer risks and prevention tools are learned, vaccine and screening education is taught and accessible, or diagnostic tools, treatment guidance and support are provided; meaningful cancer prevention relies on consistent access to health care and comprehensive health insurance. SB 355 provides that access to an estimated 150,000 low-income Kansans by expanding Medicaid eligibility. **ACS CAN supports expanding Medicaid eligibility** and in so doing, ensuring all Kansans have access to comprehensive health insurance without restrictions. The connection between increased access and improved cancer outcomes is well established:

- Medicaid expansion was associated with improved rates of colorectal<sup>ii</sup> prostate, and cervical cancer screenings.<sup>iii</sup>
- Individuals enrolled in Medicaid prior to their cancer diagnosis have better survival rates than those who enroll after their diagnosis.<sup>iv</sup>
- Medicaid expansion led to an increase in both total and earlier-stage cancer diagnoses in expansion states, while the gap in diagnoses between expansion and non-expansion states widened.<sup>v</sup>
- Maternal and infant health outcomes are more favorable in states that have expanded Medicaid. Medicaid expansion increases access to health care before, during, and after pregnancy and has contributed to decreased maternal and infant mortality rates.<sup>vi</sup>
- Medicaid expansion extends survival for patients in all racial and ethnic groups but has the greatest survival benefit for those in medically underserved minority groups.<sup>vii</sup>
- The health coverage provided by Medicaid helps to improve outcomes and reduce the burden of cancer by offering access to prevention services; timely cancer screening and early detection services; as well as affordable treatment services and care.

- Medicaid expansion is associated with an increase in survival from cancer at 2 years post diagnosis, and the increase was most prominent among non-Hispanic Blacks in rural areas, highlighting how expanding Medicaid can reduce health disparities<sup>viii</sup>.

While SB 355 expands Medicaid eligibility to low-income Kansans, it does so with requirements that do not work for cancer patients and their caregivers. ACS CAN opposes any attempt to condition Medicaid coverage on work requirements because:

- People impacted by cancer can be locked out of coverage. The reality of cancer treatment, survivorship and caregiving is that there are times when holding a job or engaging in a job search is physically unworkable – and while some may be exempt from work requirements, the administrative complexity of constantly reporting work or health status could still lead to them being locked out of coverage.<sup>ix</sup>
- Several courts have ruled that Medicaid work requirements are unlawful because they decrease access to Medicaid coverage. Most adults enrolled in Medicaid already work (61%), or have caregiving responsibilities, school, or serious illness/disabilities that legitimately prevent them from working (30%) – so work requirements are not likely to increase employment or punish individuals who are deliberately ‘gaming the system.’
- Work requirements “fail to promote the intended objectives of the Medicaid program...(and) directly inhibit access to high-quality cancer care.” Further, conditioning health insurance on work requirements can create numerous consequences for enrollees including but not limited to “disruptions in care, delays in treatment, dis-enrollment in coverage – all of these gaps in care delivery that have been shown to directly adversely impact cancer care outcomes.”<sup>x</sup>

Further, SB 355 imposes cost share requirements that have been shown to deter enrollment; ACS CAN has concerns about such policies for several reasons:

- Studies have shown that imposing even modest premiums on low-income individuals is likely to deter enrollment in the Medicaid program.<sup>xi</sup>
- Imposing cost sharing on low-income populations has been shown to decrease the likelihood that they will seek health care services, including preventive screenings.<sup>xii</sup>
- Cancers that are found at an early stage through screening are less expensive to treat and lead to greater survival.

ACS CAN continues working to ensure every Kansan has access to affordable health care. For the 150,000 Kansans who are stuck in the coverage gap, access to KanCare should be expanded, not restricted. Due to the concerns we have referenced above, ACS CAN is neutral on SB 355 as currently written; we stand ready to help the committee address these concerns at any time. Thank you for the opportunity to share our testimony and concerns, please do not hesitate to contact me with any questions.

Megan Word  
Government Relations Director, Kansas  
American Cancer Society Cancer Action Network

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- <sup>i</sup> Dr. Otis Brawley, former Chief Medical Officer, American Cancer Society
- <sup>ii</sup> Aparna Soni, Kosali Simon, John Cawley, Lindsay Sabik, “Effect of Medicaid Expansions of 2014 on Overall and Early-Stage Cancer Diagnoses”, *American Journal of Public Health* 108, no. 2 (February 1, 2018): pp. 216-218.
- <sup>iii</sup> Dehkordy, SF, Hall, K, West, B, et al. “Medicaid Expansion Improves Breast Cancer Screening for Low Income Women.” November 30, 2015. [https://www2.rsna.org/timssnet/Media/pressreleases/14\\_pr\\_target.cfm?id=1849](https://www2.rsna.org/timssnet/Media/pressreleases/14_pr_target.cfm?id=1849)
- <sup>iv</sup> Ungar, Laura. “More KY Medicaid Patients Get Preventative Care.” *Courier Journal*. August 7, 2015. Web [www.courier-journal.com/story/life/wellness/2015/08/05/preventive-care-r...](http://www.courier-journal.com/story/life/wellness/2015/08/05/preventive-care-r...)
- <sup>v</sup> Soni A, Cawley J, Sabik L, & Simon K. Effect of Medicaid Expansions of 2014 on Overall and Early-Stage Cancer Diagnoses. *The American Journal of Public Health*, 108(2), 216–218. doi:10.2105/AJPH.2017.304166.
- <sup>vi</sup> ACS CAN *Cancer and Closing the Health Insurance Coverage Gap*, Feb. 2024
- <sup>vii</sup> *Medicaid expansion increases survival for patients with cancer*, CA: A Cancer Journal for Clinicians, <https://doi.org/10.3322/caac.21751>
- <sup>viii</sup> Han, Xuesong, et al. Association Between Medicaid Expansion Under the Affordable Care Act and Survival Among Newly Diagnosed Cancer Patients. *Journal of the National Cancer Institute*. 2022 Aug 8;114(8):1176-1185. doi: 10.1093/jnci/djac077.
- <sup>ix</sup> ACS CAN, *Medicaid Work Requirements*, June 2023 – a 2018 analysis suggests that if all states were to implement Medicaid work requirements, between 1.4 and 4.0 million Medicaid adults could lose coverage, with the majority of disenrollment occurring among individuals who comply with the requirements (i.e., are working enough hours to satisfy requirements) and remain eligible but lose coverage due to new administrative reporting burdens or red tape.
- <sup>x</sup> Medicaid Work Requirements: A Conversation With Dr. Manali Patel, Clifford A. Hudis, MD, FASCO, FACP, October 3, 2018
- <sup>xi</sup> Hendryx M, Onizuka R, Wilson V, Ahern M. Effects of a Cost-Sharing Policy on Disenrollment from a State Health Insurance Program. *Soc Work Public Health*. 2012; 27(7): 671-86. - Wright BJ, Carlson MJ, Allen H, Holmgren AL, Rustvold DL. Raising Premiums and Other Costs for Oregon Health Plan Enrollees Drove Many to Drop Out. *Health Affairs*. 2010; 29(12):2311-16. - Office of the Assistant Secretary for Planning and Evaluation. Financial Condition and Health Care Burdens of People in Deep Poverty. Published July 16, 2015. Accessed October 2019. <http://aspe.hhs.gov/basic-report/financial-condition-and-health-care-burdens-people-deep-poverty>.
- <sup>xii</sup> Solanki G, Schauffler HH, Miller LS. The direct and indirect effects of cost-sharing on the use of preventive services. *Health Services Research*. 2000; 34: 1331-50. - Wharam JF, Graves AJ, Landon BE, Zhang F, Soumerai SB, Ross-Degnan D. Two-year trends in colorectal cancer screening after switch to a high-deductible health plan. *Med Care*. 2011; 49: 865-71. - Trivedi AN, Rakowski W, Ayanian JA. Effect of cost sharing on screening mammography in Medicare health plans. *N Eng J Med*. 2008; 358: 375-83



RE: HB 2556/SB 355

KanCare Expansion 2024

Neutral Testimony- written submission

I am writing on behalf of the American Heart Association (AHA) regarding KanCare Expansion. The AHA believes that closing the insurance coverage gap will have a significant positive impact on many including the following:

- People living with cardiovascular disease (CVD).
- Parental and non-parental caregivers of children living with congenital heart disease (CHD).
- Spouses and other family who care for people who are recovering from CVD and stroke.
- Young adults, including college students, living with CHD who have aged out of KanCare.

Recent peer reviewed research published by the AHA found the following for states that participated in Medicaid expansion, raising the income level to be eligible for Medicaid up to 138% of the federal poverty level<sup>i</sup>:

- Decreased out-of-hospital deaths.
- Fewer socioeconomic and demographic disparities in care.
- Increased preventive care and screening.

In 2015, 41.5% (102.7 million) of the U.S. population had at least one cardiovascular disease (CVD) related condition.<sup>ii</sup> It's easy to see why insurance access matters to them when no insurance means the following:

- Higher mortality rates<sup>iii</sup>
- Poorer blood pressure control.<sup>iv</sup>
- Greater neurological impairments, longer hospital stays,<sup>v</sup> and higher risk of death<sup>vi</sup> for stroke patients.
- Delay in seeking medical care<sup>vii</sup> during an acute heart attack.

Clearly, a lack of access to quality comprehensive healthcare is bad for the 150,000 Kansans living in the insurance "gap". So why are we neutral on HB 2556/SB 255? Work requirements don't work. Data from other programs with work requirements (SNAP, TANF) show the ineffectiveness of increasing employment but do show a large reduction in participation. This is often due to complex administrative requirements and a lack of assistance in filling out necessary paperwork to claim exemptions.<sup>viii</sup>

The AHA knows that closing the gap and joining the 40 states that have opted for expanded eligibility is a highly effective common-sense way to improve the health of working Kansans impacted by heart disease and stroke. We are thankful for the discussion and the opportunity to provide this testimony.



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<sup>i</sup> Ginger Y. Jiang, John W. Urwin and Jason H. Wasfy. Medicaid Expansion Under the Affordable Care Act and Association With Cardiac Care: A Systematic Review. *Circulation: Cardiovascular Quality and Outcomes* 2023.

<https://www.ahajournals.org/doi/10.1161/CIRCOUTCOMES.122.009753>

<sup>ii</sup> RTI. Projections of Cardiovascular Disease Prevalence and Costs: 2015–2035, Technical Report. [http://www.heart.org/idc/groups/heart-public/@wcm/@adv/documents/downloadable/ucm\\_491513.pdf](http://www.heart.org/idc/groups/heart-public/@wcm/@adv/documents/downloadable/ucm_491513.pdf)

Accessed June 19, 2017.

<sup>iii</sup> McWilliams JM, Zaslavsky AM, Meara E, Ayanian JZ. Health insurance coverage and mortality among the near-elderly. *Health Affairs* 2004; 23(4): 223-233.

<sup>iv</sup> Shen JJ, Washington EL. Disparities in outcomes among patients with stroke associated with insurance status. *Stroke* 38(3):1010-1016.

<sup>v</sup> Rice T, LaVarreda SA, Ponce NA, Brown ER. The impact of private and public health insurance on medication use for adults with chronic diseases. *Med Care Res Rev* 2005; 62(1): 231-249.

<sup>vi</sup> McWilliams JM, Meara E, Zaslavsky AM, Ayanian JZ. Health of previously uninsured adults after acquiring Medicare coverage. *JAMA*. 2007; 298:2886–2894.

<sup>vii</sup> Smolderen KG, et al. Health Care Insurance, Financial Concerns in Accessing Care, and Delays to Hospital Presentation in Acute Myocardial Infarction. *JAMA* 2010;303(14):1392-1400.

<sup>viii</sup> CBPP, “Taking Away Medicaid for Not Meeting Work Requirements Harms People with Disabilities,” updated March 10, 2022, <https://www.cbpp.org/research/health/taking-away-medicaid-for-not-meeting-work-requirements-harms-people-with->



Sara Prem, Director of Advocacy in Kansas  
American Lung Association in Kansas and Greater Kansas City  
RE: SB 355 – Neutral: Written Testimony

The American Lung Association is the oldest voluntary public health association in the United States, currently representing the more than 34 million people in the United States living with lung diseases, including more than 383,535 adults in Kansas living with chronic lung disease. The Lung Association strongly supports KanCare expansion, which would expand access to care for 150,000 Kansans. However, we must provide neutral testimony regarding SB 355 because, as written, it would significantly limit the benefits of expansion by including a work requirement, as well as premiums for patients. The Lung Association strongly urges members of the Committee to strike these provisions from the bill.

KanCare expansion will help patients with asthma, lung cancer, and other lung diseases in Kansas access quality, affordable care. Research has shown that Medicaid expansion is associated with higher rates of early-stage cancer diagnosis when survival rates are higher.<sup>1</sup> Similarly, Medicaid expansion reduces preventable hospitalizations for individuals with chronic conditions including asthma and COPD<sup>2</sup> and reduces racial disparities in timely treatment for cancer patients, amongst many other health benefits.<sup>3</sup> KanCare expansion also would have significant financial benefits for Kansas. An evaluation of Medicaid expansion in Ohio found that enrollees are less likely to have medical debt than their non-enrolled counterparts.<sup>4</sup> Additionally, Medicaid expansion has helped state economies and has been associated with a reduced risk of hospital closures, especially in rural areas.<sup>5</sup> Researchers have predicted that expanding KanCare in Kansas would create nearly 23,000 new jobs across multiple sectors.<sup>6</sup> The American Rescue Plan Act makes the fiscal case even stronger by providing states that implement expansion with a significant increase in Medicaid funding, totaling an estimated \$468 million in Kansas.

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However, SB355 would add burdensome work requirements to KanCare expansion. The employment verification process outlined in the bill would cause otherwise-eligible people to get caught up in red tape that could prevent them from accessing healthcare coverage. In 2018, Arkansas imposed a work requirement on people enrolled in Medicaid. Before a federal court halted the state's efforts, more than

18,000 individuals who were otherwise eligible for Medicaid lost their healthcare in just seven months due to onerous paperwork requirements and additional bureaucracy. One of these patients, Adrian, found out at the pharmacy counter that he had lost his Medicaid coverage – he couldn't fill his COPD medications, ended up in the hospital, and ultimately lost his job because he missed too much work.<sup>8</sup> We don't want to see other patients in Kansas go through this same ordeal.

Most people on KanCare who can work already do work. More than 90% of adults with Medicaid coverage are either workers, caregivers, students, or unable to work due to illness.<sup>9</sup> And continuous Medicaid coverage can actually help people find and sustain employment. In a report looking at the impact of Medicaid expansion in Ohio, the majority of enrollees reported that that being enrolled in Medicaid made it easier to work or look for work (83.5 percent and 60 percent, respectively).<sup>10</sup> Work requirements will hurt rather than help people search for and obtain employment.

SB355 also includes premiums that would limit the benefits of KanCare expansion. Research on Michigan's Medicaid expansion showed that modest increases of a few dollars in premiums resulted in coverage losses, especially among healthy individuals.<sup>11</sup> Additionally, premiums 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>12</sup>

The American Lung Association urges lawmakers supports expanding access to quality, affordable healthcare in Kansas but urges lawmakers to do so without additional financial and administrative barriers to care.

Thank you for your time and consideration,

Sara J Prem, MPA  
Director of Advocacy  
American Lung Association in Kansas and Greater Kansas City

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<sup>1</sup> Aparna Soni, Kosali Simon, John Cawley, Lindsay Sabik, "Effect of Medicaid Expansions of 2014 on Overall and Early-Stage Cancer Diagnoses", *American Journal of Public Health* 108, no. 2 (February 1, 2018): pp. 216-218. Available at <http://ajph.aphapublications.org/doi/abs/10.2105/AJPH.2017.304166>.

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<sup>2</sup> Hefei Wen Kenton J. Johnston, Lindsay Allen, and Theresa M Waters. "Medicaid Expansion Associated with Reductions in Preventable Hospitalizations." November 2019. Health Affairs. Available at: <https://www.healthaffairs.org/doi/10.1377/hlthaff.2019.00483>.

<sup>3</sup> *Racial Disparities in Access to Timely Cancer Treatment Nearly*. (2019, June 2). [Press release]. <https://www.asco.org/about-asco/press-center/news-releases/racial-disparities-access-timely-cancer-treatment-nearly>

<sup>4</sup> Ohio Department of Medicaid, *2018 Ohio Medicaid Group VII Assessment: Follow-Up to the 2016 Ohio Medicaid Group VIII Assessment*, August 2018. Accessed at: <http://medicaid.ohio.gov/Portals/0/Resources/Reports/Annual/Group-VIII-Final-Report.pdf>.

<sup>5</sup> Richard Lindrooth, Marcelo Perrailon, Rose Hardy, and Gregory Tung, "Understanding the Relationship Between Medicaid Expansions and Hospital Closures," Health Affairs 27, no. 1 (January 2018): pp. 111-120. Available at <https://www.healthaffairs.org/doi/abs/10.1377/hlthaff.2017.0976>.

<sup>6</sup> Leighton Ku and Erin Brantley, *The Economic and Employment Effects of Medicaid Expansion Under the American Rescue Plan* (Commonwealth Fund, May 2021). <https://doi.org/10.26099/x6zp-g424>

<sup>7</sup> Manatt Health, "Assessing the Fiscal Impact of Medicaid Expansion Following the Enactment of the American Rescue Plan Act of 2021," April 2021, <https://www.manatt.com/Manatt/media/Documents/Articles/ARP-Medicaid-Expansion.pdf>

<sup>8</sup> <https://www.pbs.org/newshour/show/with-new-work-requirement-thousands-lose-medicaid-coverage-in-arkansas>

<sup>9</sup> KFF. Understanding the Intersection of Medicaid & Work: A Look at What the Data Say. April 24, 2023. Available at: <https://www.kff.org/medicaid/issue-brief/understanding-the-intersection-of-medicaid-work-a-look-at-what-the-data-say/>.

<sup>10</sup> Ohio Department of Medicaid, *2018 Ohio Medicaid Group VII Assessment: Follow-Up to the 2016 Ohio Medicaid Group VIII Assessment*, August 2018. Accessed at: <http://medicaid.ohio.gov/Portals/0/Resources/Reports/Annual/Group-VIII-Final-Report.pdf>.

<sup>11</sup> [w28762.pdf \(nber.org\)](#)

<sup>12</sup> University of Wisconsin-Madison Institute for Research on Poverty. (2019). Evaluation of Wisconsin's BadgerCare Plus Health Coverage for Parents & Caretaker Adults and for Childless Adults 2014 Waiver Provisions. Available at <https://www.irp.wisc.edu/wp/wp-content/uploads/2019/11/BC-2014-Waiver-Provisions-Final-Report-08302019.pdf>



TO: Sen. Carloyn McGinn, Chair  
Joint Committee  
Senate Ways and Means and Public Health and Welfare Committees

FROM: Kevin Strecker  
Ministry Market CEO  
Ascension Via Christi

DATE: March 20, 2024

RE: Senate Bill 355

Thank you, Chair McGinn and members of the Joint Committee of the Senate Public Health and Welfare and Senate Ways Means Committees, for holding this hearing and providing an opportunity to receive public comment.

Ascension Via Christi is one of the largest healthcare systems in Kansas. We have more than 6,200 employees, and eleven hospitals, as well as many physician clinics and outpatient ancillary and home-based services.

We provide over \$422 million in wages and salaries to our associates, resulting in \$16.3 million in state taxes withheld. In FY 2023, we provided \$65 million in community benefit, which includes \$21 million in uncompensated care and \$19 million in unpaid costs of Medicaid services.

On behalf of Ascension Via Christi, I want to thank Governor Kelly for introducing her plan to expand Medicaid in Kansas. Senate Bill 355 ensures 90 percent of expanded KanCare program costs are covered by the federal government, while the remaining 10 percent is funded with no state dollars and with support from hospitals, drug rebates, and other strategies.

Ascension Via Christi has a long and consistent tradition informed by our faith of supporting 100% coverage and 100% access to healthcare for all people. As stated in the *Ethical and Religious Directives for Catholic Health Care Services*, which guides the services we provide, the "Catholic Health Care Ministry is rooted in the commitment to promote and defend human dignity. This is the foundation of its concern to respect the sacredness of every human life from conception until death. The first right of the human person, the right to life, entails the right to the means for the proper development of life, such as *adequate health care*." (Emphasis added). Expanding Medicaid will provide adequate health care to thousands of Kansans who do not have access right now.

This plan maximizes the benefits of Medicaid expansion in Kansas while minimizing the risk of any new financial costs for Kansans.

It's important to recognize Kansans have been paying additional taxes associated with the federal Affordable Care Act for more than a decade. Other states have recouped those tax dollars and reinvested them into their healthcare systems, creating new jobs, sustaining rural hospitals, and improving public

health outcomes. Kansas would benefit by taking a similar approach and helping Kansans rather than continuing to fund Medicaid expansion and better health outcomes in other states.

Expanding KanCare is the most effective way to improve public health, stabilize the financial outlook for Kansas hospitals and healthcare providers, create additional good-paying jobs and encourage routine and preventive care before patients are in crisis with serious and expensive conditions.

Patients in crisis come to us through our emergency department, where they could stay for multiple days until an inpatient bed opens at a state facility or at a support service in the community. In 2023, we admitted 3,384 behavioral health patients, and their average length of stay exceeded 10 days.

The high volume of uninsured patients requiring care and the increasing complexity of patients' behavioral health needs have resulted in an increasing number of patients being boarded in the emergency department while they await placement in a behavioral health department bed.

The length and expense of these stays would be mitigated by more proactive, timely interventions, which an expanded KanCare program would provide.

We have good reason to believe Kansas could realize these benefits because of the experiences of other states that have developed conservative approaches to expanding Medicaid. Montana, for example, expanded its Medicaid program in 2016 and receives about \$900 million annually, which has helped sustain thousands of new jobs and strengthen public health.

Importantly, not a single rural hospital in Montana has closed since Montana expanded its Medicaid program and recouped its residents' federal tax dollars to support its healthcare system. To be clear, rural hospitals face many challenges, and Medicaid expansion is not a universal cure. However, it is clear that the states that have chosen to leverage Medicaid expansion dollars have been more successful in preserving hospital access in rural communities. Expansion can reduce millions of dollars in uncompensated care while also helping patients receive preventive care so conditions don't escalate to more serious and more costly levels.

Rural hospitals across Kansas are dealing with very difficult financial conditions that put their continued operation in jeopardy. The current proposal to expand KanCare will have a positive and meaningful financial impact on these facilities and their ability to sustain care in rural Kansas.

For these reasons, we support expanding KanCare and encourage committee members to approve this important proposal.



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





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



**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



## City of Emporia

Testimony in support of Medicaid Expansion

**To:** House and Senate Committees on Health and Welfare

**Bills:** Testimony in support of SB 355 and HB 2556

**Presented By:** Trey Cocking, City Manager

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

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

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

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

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

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

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



**City Manager**

201 West 4<sup>th</sup> Street  
P.O. Box 688  
Pittsburg, Kansas 66762

620-231-4100  
[www.pittks.org](http://www.pittks.org)

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

To Whom it May Concern:

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

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

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

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

Respectfully,  
  
Daron Hall  
Pittsburg



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

Testimony on Senate Bill 355  
Senate Committee on Ways & Means and Public Health & Welfare

Mayor Jim A. Cross  
City of Russell, Kansas

February 5, 2024

Chairwoman McGinn and Members of the Committee:

As representatives of the Governing Body of the City of Russell, Kansas, it is our duty and privilege to advocate for the well-being of our community. Today, we stand before you in unwavering support of SB 355, pivotal legislation to expand Medicaid in our great state.

At its core, SB 355 embodies an opportunity to extend the vital lifeline of healthcare coverage to approximately 150,000 Kansans, many of whom reside right within our city limits. Access to affordable healthcare is not merely a luxury but a fundamental necessity, and the passage of this bill promises to significantly enhance the health outcomes of individuals and families in Russell.

Crucially, we commend SB 355's foresight in its commitment to maintaining revenue neutrality. By leveraging surplus funds, we can direct resources towards essential areas such as tax cuts, bolstering public schools, and fortifying our infrastructure. This pragmatic approach ensures that the burden won't fall upon the shoulders of hardworking Kansas taxpayers.

Moreover, SB 355 strikes a delicate balance by incorporating reasonable measures like a work requirement. Such provisions incentivize workforce participation and ensure that administrative hurdles do not impede access to vital healthcare services.

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

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

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

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

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

In closing, we urge you to stand on the right side of history and throw your unwavering support behind SB 355. Let us forge a brighter, healthier future for our community, our state, and all Kansans. Thank you for considering our testimony.



CleanAirNow  
3730 Metropolitan Avenue  
Kansas City, KS 66106



To:

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

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

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

Esteemed members of the Kansas Legislation,

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

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

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

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

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

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

Regards,

Atenas Mena, Executive Director

Rayan Makarem, Policy Advocate

[rayan@cleanairnowkc.org](mailto:rayan@cleanairnowkc.org)



TO: House and Senate Committees

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

DATE: March 12, 2024

RE: Proponent HB 2556/SB 355

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

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

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

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

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

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

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



**Senate Public Health and Welfare Committee  
Proponent Written Testimony – SB 355  
Nicole Milo, System Director Government & Community Affairs  
Mountain Region CommonSpirit Health**

Chairman Hilderbrand and Members of the Committee:

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

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

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

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

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

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

We are happy to answer any questions the committee may have and thank you in advance for your consideration to SB355.

To whom it may concern,

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

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

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

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

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

Sincerely,

*Molly Gotobed*

Molly Gotobed

[mgotobed@wycohealth.com](mailto:mgotobed@wycohealth.com) | 913-371-9298 x102

Program Director, Kansas Assistance Network

Community Health Council of Wyandotte County



## LETTERHEAD

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

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

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

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

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

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

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

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

736 Shawnee Avenue  
Kansas City, Kansas 66105



Phone: 913-281-3388  
Fax: 913-300-9428  
[www.cross-lines.org](http://www.cross-lines.org)

March 13<sup>th</sup>, 2024

Position: Support

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

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

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

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

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

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

Respectfully Submitted,

Rob Santel, LMSW  
[rob@cross-lines.org](mailto:rob@cross-lines.org)



**SU CONEXIÓN A LA COMUNIDAD**

**2021 - 2022 Board of Directors**

Catalina Velarde, Board Chair  
Immigration Attorney

Jorge Flores, 1st Vice Chair  
Northwestern Mutual

Lucas Behrens, 2nd Vice Chair  
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Dr. Edward Kremer, Treasurer  
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Research and Extension

Marielena Marroquin  
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Dr Alicia Miquel  
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Anna Bazan-Munguia  
Big Brothers Big Sisters

Christopher (Chris) Munoz  
KCK Community College

Deana Munoz  
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Father Oswaldo Sandoval  
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Church

Art Silva  
Helzberg Diamonds

Greg Valdovino  
Greater Kansas City Chamber of  
Commerce

Jonathan Westbrook  
Kansas City, Kansas Police  
Department

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

**Kansas Policy Makers:**

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

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

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

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

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





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

**RE: Emporia Area Chamber of Commerce Support for Medicaid Expansion**

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

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

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

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

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

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

March 15, 2024

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,

Since fall of 2021, Faith Voices for Medicaid Expansion has been bringing voices of faith communities across Kansas to legislators in Topeka. We believe providing health care coverage for low-income Kansans is a moral issue for those who believe we are called to love and care for our neighbors.

Expanding KanCare in Kansas makes sense for those who need healthcare, and it makes sense for our state as a whole;

- \* KanCare expansion protects families from medical debt - nearly 4 in 10 Kansans have medical debt

- \* It will help to preserve and strengthen rural healthcare

- \* KanCare expansion brings costs down for everyone - fewer ER visits, less uncompensated care for clinics and hospitals and a decrease in untreated physical and mental health needs in our communities.

- \* Kansans Federal tax dollars are now going to 40 other states who have expanded their medicaid coverage, including all 4 of our surrounding states. Why wouldn't we want to benefit our own Kansas families with legislation for health care that is revenue neutral?

- \* Adults with low-wage jobs who do not have a disability nor children under 18 have no healthcare coverage options. KanCare expansion will fill this gap.

Faithful people look not only to their own interests, but also to the interests of others. Voices of faith across Kansas are asking you to look to the interests of your fellow Kansans who need mental and physical health care but currently have no options they can afford. It will benefit all Kansans.

Submitted by Rev. Jack Gregory and Cathy Matlack  
Faith Voices for Medicaid Expansion





**FRESENIUS  
MEDICAL CARE**

March 15, 2024

Senate Ways & Means Committee  
Kansas State Capitol  
300 SW 10th Street  
Topeka, KS 66612

RE: Support for Medicaid Expansion

Dear Chair Senator McGinn and Senate Ways & Means Committee Members:

Fresenius Medical Care operates 23 dialysis clinics in Kansas and provides life-sustaining dialysis treatments to nearly 1,200 Kansans with kidney failure, or End Stage Renal Disease (ESRD). Chronic Kidney Disease (CKD) is a pervasive problem. In fact, 1 in 7 Americans have CKD. Many live with the disease without knowing they have it due to inadequate medical care and simple blood and urine tests that can detect CKD.

Diabetes and high blood pressure are the main causes of CKD. Health insurance is vital in keeping chronic diseases, such as diabetes and high blood pressure, in check to prevent more serious and life-threatening conditions. Far too many people live with CKD and do not receive the medical care they need to keep them from progressing into kidney failure. The majority of patients who are new to dialysis start in a hospital setting. Many are unprepared medically to start dialysis in an out-patient clinic setting or receive a kidney transplant and avoid dialysis all together. These hospital "crashes" result in much higher costs to the health care system than managing a chronic condition upstream, not to mention the life-time requirements for managing ESRD which include dialysis or a kidney transplant.

For these reasons, we ask you to support Medicaid Expansion.

Sincerely,

Wendy Funk Schrag, LMSW, ACSW  
Vice President State Government Affairs  
P.O. Box 103  
N. Newton, KS 67117  
316.841.5245  
[wendy.schrag@freseniusmedicalcare.com](mailto:wendy.schrag@freseniusmedicalcare.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



**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).

## Sources

Allen, Heidi and Benjamin Sommers. 2019. "Medicaid Expansion and Health: Assessing the Evidence After 5 Years." *JAMA* 322(13):1253–1254. doi:10.1001/jama.2019.12345

Baicker, Katherine, Sarah Taubman, Heidi Allen, Mira Bernstein, Jonathan Gruber, Joseph P. Newhouse, Eric Schneider, Bill Wright, Alan Zaslavsky, Amy Finkelstein, and the Oregon Health Study Group, "The Oregon Experiment – Effects of Medicaid on Clinical Outcomes", *New England Journal of Medicine*, 2013 May; 368(18): 1713-1722.

Blume-Kohout, Margaret E. 2023. "The Affordable Care Act and Women's Self-Employment in the United States," *Feminist Economics*, 29:1, 174-204, DOI: [10.1080/13545701.2022.2118342](https://doi.org/10.1080/13545701.2022.2118342)

Centers for Medicare & Medicaid Services. 2022. "Fiscal Year 2022 Improper Payments Fact Sheet." November 15, 2022. <https://www.cms.gov/newsroom/fact-sheets/fiscal-year-2022-improper-payments-fact-sheet>

Finkelstein, Amy, Sarah Taubman, Bill Wright, Mira Bernstein, Jonathan Gruber, Joseph P. Newhouse, Heidi Allen, Katherine Baicker, and the Oregon Health Study Group. 2012. "The Oregon Health Insurance Experiment: Evidence from the First Year", *Quarterly Journal of Economics*; 127(3): 1057-1106.

Finkelstein, Amy, Erzo Luttmer and Nathaniel Hendren. 2015. "The Value of Medicaid: Interpreting Results from the Oregon Health Insurance Experiment." NBER Working Paper 21308. Cambridge, MA: National Bureau of Economic Research.

Finkelstein, Amy, Erzo Luttmer and Nathaniel Hendren. 2019. "The Value of Medicaid: Interpreting Results from the Oregon Health Insurance Experiment." *Journal of Political Economy* 127(61). <https://doi.org/10.1086/702238>

Ginther, Donna K., Davut Ayan, and David J.G. Slusky, The Unexpected Costs of Not Expanding Medicaid in Kansas, sponsored by the REACH Foundation, May 2022.

Gruber, J. and B. Sommers. 2020. "Fiscal Federalism and the Budget Impacts of the Affordable Care Act's Medicaid Expansion." NBER Working Paper 26862. Cambridge, MA: National Bureau of Economic Research.

Mazurenko, Olena, Casey Balio, Fajender Agarwal, Aaron Carrol and Nir Menachemi. 2018. "The Effects Of Medicaid Expansion Under The ACA: A Systematic Review." *Health Affairs* 37(6). <https://doi.org/10.1377/hlthaff.2017.1491>

National Academy for State Health Policy. 2023. "The Long Unwinding Road: States Prepare for the End of the Medicaid Continuous Coverage Requirement." Brief. March 13, 2023. <https://nashp.org/the-long-unwinding-road-states-prepare-for-the-end-of-the-medicaid-continuous-coverage-requirement/>

Perez, V., and Ramos Pastrana, J.A. 2023. "Finding fraud: enforcement, detection, and recoveries after the ACA." *International Journal of Health Economics and Management*. 23: 393–409. <https://doi.org/10.1007/s10754-023-09357-w>

Sacarny, Adam, Katherine Baicker, and Amy Finkelstein. 2022. "Out of the Woodwork: Enrollment Spillovers in the Oregon Health Insurance Experiment." *American Economic Journal: Economic Policy* 14(3):273-295. <https://doi.org/10.1257/pol.20200172>

Semprini, Jason. 2023. "Medicaid expansions and private insurance "crowd-out" (1999–2019)." *Social Science Quarterly* 00: 1–14. <https://doi.org/10.1111/ssqu.13318>



GirardMedicalCenter.com

302 North Hospital Drive • Girard, KS 66743 • PHONE 620.724.8291 • FAX 620.724.6332

#1 In Service

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.





# 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.

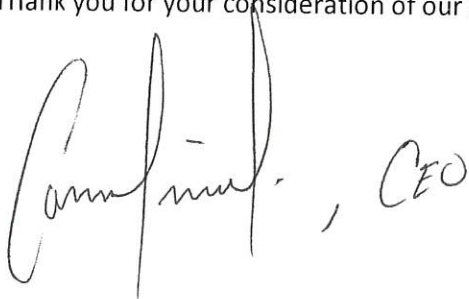
Kansas has 104 rural hospitals. Almost 30% are at risk of closing. Over 40% of them had negative margins. Gove County Medical Center is part of that list. Rural communities provide the food, energy, and raw materials that keep the Kansas economy running. Gove County Medical Center provided over 10 million 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







## 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.

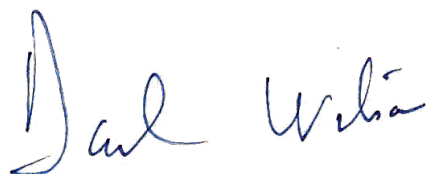
Expansion of Medicaid in Oklahoma has been a gamechanger for so many who didn't have access to critically needed health care, particularly for oncology patients. Leukemia, lymphoma and multiple myeloma patients have received stem-cell transplants, technology that once seemed futuristic but that is now 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 fluid and cursive, with the first name "David" being more prominent than the last name "Wilson".

Bishop David Wilson  
Great Plains Conference

# 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](mailto: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

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.**



## **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



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&loc=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&ssli\\_d=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&ssli_d=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 Pavetti, 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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Kristie Clark  
MD, FAAP




**KANSAS**

## KANSAS CHAPTER

 PO Box 860481  
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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

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KANSAS CITY

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**MEDICAL SOCIETY  
FOUNDATION**

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CHARITABLE CARE, EDUCATION, PREVENTION & WELLNESS

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**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, reading "Michelle McCormick". The signature is fluid and cursive, with the first name "Michelle" and last name "McCormick" clearly legible.

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

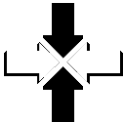
Bourbon:	4.5 mills
Dickinson:	3.0 mills
Franklin:	3.2 mills
Geary:	4.7 mills
Johnson:	2.3 mills
Leavenworth:	3.5 mills
Labette:	4.8 mills
Montgomery:	3.5 mills
Miami:	2.7 mills
Neosho:	4.3 mills
Riley:	3.7 mills
Saline:	3.3 mills
Sedgwick:	3.5 mills
Shawnee:	3.5 mills

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.

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."



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, multifait 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 Osawatimie 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)

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



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,



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



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.



**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

<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:

Pat Miller, Chair

Shari Matejka Quick, MD, Vice-Chair

Beth Llewellyn, Treasurer

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Kristin Salmans, RN

Russ Johnson, President and CEO, Ex-Officio Member of the Board of Trustees



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](http://leawoodchamber.org)



*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, appearing to read "Dana Bacon". The signature is fluid and cursive, with the first name "Dana" and last name "Bacon" clearly distinguishable.

Dana Bacon  
Senior Director, State Government Affairs  
The Leukemia & Lymphoma Society  
[dana.bacon@lls.org](mailto:dana.bacon@lls.org)  
612.308.0479

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



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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.**



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, flowing style.

Tanner Wealand  
CFO/Interim CEO



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



3151 Olive  
Kansas City, MO 64109  
www.more2.org

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**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



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.



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,

Debbie Bruner  
CEO

Minneola Healthcare  
debb@minneolahealth.com



*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.



February 22, 2024

Presented by:  
Christopher Chastain  
Public Policy and Advocacy Director  
NAMI Kansas

House Committee Chair, Rep. Brenda Landwehr, Vice Chair Rep. John Eplee, and Ranking Minority Member, Rep. Susan Ruiz, thank you for this opportunity to submit written testimony for Medicaid Expansion To the Senate Committee on Public Health and Welfare.

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.

As a leading advocacy organization for individuals and families affected by Mental illness, NAMI Kansas wholeheartedly supports the expansion of Medicaid in our state. The expansion of Medicaid will provide much-needed access to affordable healthcare for thousands of Kansans, including Those living with mental health conditions.

NAMI Kansas supports Medicaid Expansion. By expanding Medicaid, an estimated 150,000 Kansans would gain access to medical care. Additional reasons on how Medicaid Expansion can help Kansans include improved access to mental health care and treatment when they need it. By improving access to treatment, Medicaid Expansion decreases risks for hospitalizations and increases more affordable utilization of community-based services.

NAMI Kansas supports a full Medicaid Expansion to 138% of the Federal Poverty Level with a 90/10 match. Currently, many individuals in Kansas are unable to access the care they need due to a lack of affordable healthcare coverage. For those living with mental illness, this can have devastating consequences, including a higher risk of hospitalization, unemployment, and homelessness. By expanding Medicaid, we can ensure that more Kansans have access to essential mental healthcare services, including therapy, medication, and crisis intervention.

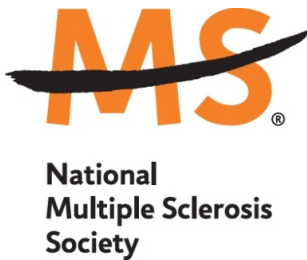
Furthermore, expanding Medicaid will also benefit our state's economy. By providing coverage to low-income individuals and families, we can reduce the burden on emergency rooms and increase preventive care, ultimately saving money in the long run.

As an organization dedicated to improving the lives of those affected by mental illness, NAMI Kansas urges policymakers to recognize the importance of Medicaid expansion and work towards ensuring that all Kansans have access to the care they need to lead healthy and fulfilling lives. Expanding Medicaid is a crucial step towards creating a more equitable and compassionate health care system in our state.

Thank you for the opportunity to provide this information to the committee.

Sincerely,

Christopher Chastain  
Public Policy and Advocacy Director  
NAMI Kansas



March 20<sup>th</sup>, 2024

Senator McGinn, Chair  
Senate Ways & Means Committee  
Senate Public Health & Welfare Committee  
Re: SB 225 Amend

Chair McGinn and Committee Members:

I am writing today on behalf of the National Multiple Sclerosis Society (the Society) to share our concerns about SB 225 and how it affects those who live with multiple sclerosis (MS) and caregivers. We respectfully ask the Senate Ways & Means Committee and the Senate Public Health & Welfare Committee to remove work requirements in SB 225 and expand Medicaid.

MS is an unpredictable disease of the central nervous system. Currently there is no cure. Symptoms vary from person to person and may include disabling fatigue, mobility challenges, cognitive changes and vision issues. An estimated 1 million people live with MS in the United States. Early diagnosis and treatment are critical to minimize disability. Significant progress is being made to achieve a world free of MS.

We are concerned that the current exemption criteria for work requirements in this legislation may not capture all patients with (or at risk of) serious and chronic health conditions that prevent them from meeting work requirements, or the caregivers who help these patients manage their conditions. Even for those who do meet the exemption standards, they still face a burden of proof that may be cumbersome, complex, and difficult to navigate. Individuals living with MS may face physical or cognitive symptoms that make following multifaceted procedures more challenging than it would be for others. This is a burden that means someone living with MS or an MS caregiver may be unable to focus on their health or the health of their family.

MS is typically diagnosed between the ages of 20 and 50, when most are raising families, advancing careers and maximizing their earnings, yet many must scale back their work and life activities due to disease progression. Studies show that only 40% are in the workforce ten years after their diagnosis, leading to many losing access to their employer-based insurance.

If someone fails to meet any of these work requirements, including the bureaucratic processes required, they are at risk of losing coverage. For many, including those living with MS, this could potentially lead to negative health outcomes. MS is a highly expensive disease, with the average total cost of living with MS at \$88,487 per year. Disease modifying therapies (DMTs) are the biggest cost of living with the disease, with individuals



**National  
Multiple Sclerosis  
Society**

spending an average of \$65,612 more on medical costs than individuals who don't have MS. Early and ongoing treatment with a DMT is the best way we know to slow the progression of MS, prevent the buildup of disability and protect the brain from damage due to MS. In addition to the cost of medications, people with MS can require costly visits to the doctor, hospital, or specialists. To lose coverage in the middle of treatment would have a disastrous effect on an individual's physical and emotional health, as well as their financial well-being.

When individuals have access to consistent and adequate health coverage through Medicaid, they are more likely to seek treatment early, get the treatment they need, and avoid trips to the emergency rooms or expensive stays in rehab facilities that end up costing the state much more. States that have expanded Medicaid have reported lower out-of-pocket spending, a decline in hospital admission, increased medication adherence, and improved health outcomes. Expanded Medicaid coverage also helps to narrow health disparities, as Medicaid expansion has been associated with better health outcomes for Black and Hispanic/Latinx individuals, who represent 60% of uninsured adults.

The vast majority of individuals with Medicaid coverage who can work do so. Nearly 8 in 10 non-disabled adults with coverage live in working families and nearly 60 percent are working themselves. Of those not working, more than one-third reported that illness or a disability was the primary reason, 28 percent reported that they were taking care of home or family, and 18 percent were in school.

Medicaid work requirements legislation reduces coverage and runs contrary to the core mission of Medicaid, which is to provide health coverage to low-income people so that they can get the health care services they need. CMS has repeatedly blocked work requirements in other states and will likely do so again if this is passed in Kansas.

The National MS Society urges this committee remove work requirements within SB 225.

Should you have any questions or concerns, please feel free to reach out to Lisbet Finseth, Senior Manager of Advocacy, at [Lisbet.Finseth@NMSS.org](mailto:Lisbet.Finseth@NMSS.org).

Sincerely,

A handwritten signature in black ink, reading "Lisbet Finseth". The signature is fluid and cursive, with the first name "Lisbet" and last name "Finseth" clearly distinguishable.

Lisbet Finseth  
Senior Manager of Advocacy  
National Multiple Sclerosis Society



TO: House and Senate Committees

FROM: Dennis Franks

DATE: February 28, 2024

RE: Proponent HB 2556/SB 355

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

Unlike many other industries, Kansas hospitals cannot 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.

A major benefit our hospital would have from this program would be the ability to provide our area with integral equipment for daily operations.

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 expansion would keep our local economy alive, open doors for new jobs, and new specialty services in an already struggling community with limited specialty physicians. The social determinants of health of a community are impacted tremendously by their local or regional hospital.

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 \$4,672,787.00 in uncompensated care.

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

A handwritten signature in black ink, appearing to read "D. E. Franks", is written over the printed name and title.

Dennis E. Franks, CEO

Neosho Memorial Regional Medical Center

NMC Health Administration  
600 Medical Center Drive  
PO Box 308  
Newton, KS 67114-0308  
316.283.2700  
[myNMCHHealth.org](http://myNMCHHealth.org)

TO: Senate Public Health and Welfare Committee

FROM: Vallerie L. Gleason, President and CEO

DATE: March 12, 2024

RE: Senate Bill 355 – Support

On behalf of Newton Medical Center, I am pleased to provide a letter of support for Senate Bill 355, The Bridge to a Healthy Kansas.

The Bridge to a Healthy Kansas is a fiscally responsible Kansas-based solution that will bring hundreds of millions of our federal tax dollars back home to Kansas – creating jobs, boosting our economy, protecting hospitals and improving the health of Kansans. More than 150,000 Kansans need access to affordable health care. They currently earn too much to qualify for KanCare but too little to be eligible to get financial help to buy private insurance. These are hard working men and women who are stuck with few options for affordable health coverage. 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.

Newton Medical Center, the sole hospital in Harvey County, serves a primary service area of 110,000 persons. We care for all who come to us in need. We provide services for those who pay and for those who have no means to pay or who have no intention of ever paying even a portion of their bill which is sometimes not known until well after care is provided. The annual impact of The Bridge for my hospital would be \$3,268,147 which would go a long way to mitigate the annual effect of \$3,380,420 net reductions we are already seeing from the federal legislative hospital cuts. Even with that impact, NMC would still be in a position to receive \$112,273 less than the Federal cuts annually which inflicts harm to this community through threats of reduced services and fewer local jobs. Every dollar of expansion through the Bridge to a Healthy Kansas is quite meaningful to greater Newton and Harvey County.

Moreover, we tithe back to our community with financial gifts and services. Our generous financial assistance policy, aids those who are at 275% of the Federal Poverty Level (FPL) with free and deeply-reduced fee care in our hospital and clinics.

Newton Medical Center is a local economic engine. We contribute over 800 jobs to the



local economy and significant financial re-investment. We provide significant support to Health Ministries Clinic, a local designated Community Health Center that cares for the poor. Our Food Service Department has contributed daily to the preparation and distribution of Meals on Wheels continuously for 50 years in 2024. In addition we have raised through our annual Share the Love over \$80,000 for Meals on Wheels.

Regrettably continued funding cuts and regulatory burdens are now having an impact on our staffing decisions. We intend to protect and defend our current employees to the best of our ability but at this time we are not adding employees to our workforce, even when positions are vacated (except for essential direct patient care positions). It is said that organizations cannot cut their way to prosperity. So despite the hiring decisions we are currently making, we are still looking for ways to introduce other desperately needed services for our vulnerable local populations which include behavioral health/drug/alcohol issues, pulmonology, cardiology, tele-medicine, and primary care access.

Our opinion is that all persons in our community deserve access to healthcare at a good price and with quality outcomes. We strive to be part of that solution for our greater community. Frankly, the deep funding cuts we have experienced are unsustainable and unreasonable. We support relief measures and a re-balancing of fiscal responsibility especially toward poor, working Kansans. The offer of a hand-up through The Bridge to a Healthy Kansas is entirely consistent with Kansas values and is certainly consistent with the mission of Newton Medical Center.

For these reasons, I support The Bridge to a Healthy Kansas (SB 355). Thank you for your consideration of my comments.



nejcchamber

connect. build. grow.

From: Deb Settle, President, and CEO of the Northeast Johnson County Chamber of Commerce

RE: Testimony to support KanCare expansion

February 26, 2024

My name is Deb Settle, President, and CEO of the NEJC Chamber of Commerce representing ten cities in the northeast region of Johnson County, KS. The NEJC Chamber has been a supporter of expansion of Medicaid - KanCare.

Expanding KanCare is a practical and cost-effective way to help our citizens, businesses, and communities by lowering health care costs.

Personally, I grew up in a small town in rural Kansas and it is so harmful to see so many of the smaller town hospitals having to close. So far, eight hospitals have closed since 2014 with more at risk. What if your loved one is having a heart attack or stroke. The thought of having to drive an hour to the next largest town for healthcare is unacceptable and we should take every step available to ensure that ALL people have access to affordable healthcare.

From a Chamber of Commerce perspective our business owners in the State of Kansas could save up to \$80 million dollars per year in health care costs if Medicaid were expanded. It won't cost Kansas taxpayers a single cent. It is revenue-neutral, and this expansion could also create jobs, and help to end our health care worker shortage. Expanding KanCare could also help reduce taxes which means more dollars could be spent on schools, and roads which benefit all Kansans.

Respectfully, the NEJC Chamber requests that you support the creation and implementation of a Medicaid expansion plan. Thank you for your consideration.

Deb Settle

President and CEO

Northeast Johnson County Chamber of Commerce



## **Written-only Testimony in Support of Medicaid Expansion**

**Tracy Russell, Executive Director, Nurture KC**

My name is Tracy Russell and I serve as the Executive Director of Nurture KC, an organization dedicated to reducing infant and maternal mortality in Kansas City. Our families come from the six ZIP codes of Wyandotte County with the highest rates of infant mortality. These families are among our most vulnerable, often facing barriers to care exacerbated by the unwillingness of Kansas to join the 40 states that have enacted Medicaid expansion.

Two years ago, Kansas extended Medicaid postpartum coverage from 60 days to one year, rightly recognizing the need and importance of continuous care for mothers and babies. It is past time to apply that standard before pregnancy and prioritize the continuum of care that is critical to improving our maternal and infant health outcomes. Access to care through Medicaid expansion would knock down one of the barriers to early prenatal care as well as address and manage chronic conditions before conception.

The benefit of expanded Medicaid eligibility is borne out by the facts. The infant mortality rate in expansion states is 50% lower than in non-expansion states. There is also a reduced occurrence of low birthweight babies in expansion states. The rates of maternal mortality are also less in expansion states.

While these improvements early in the life of the child are so important, there is also evidence that having parents who have health coverage means that children are more likely to have coverage going forward. In other words, parents who are part of the care system are more likely to participate on their children's behalf as well. Finally, the financial burdens that accompany uninsured health care can have a grievous impact on family financial stability and stress, ultimately undermining children.

Valuing our families and their access to needed care will strengthen Kansas. Thank you for your consideration of Medicaid expansion as key to Kansas families and their ability to thrive.

#### Board of Directors

Charles A. Abbick, DDS  
Salina Family Healthcare Center

Tami Allen  
Families Together, Inc.

Melanie Simmer-Beck, PhD, RDH  
UMKC School of Dentistry

Veronica Byrd  
Parents as Teachers Pine Ridge

Kent Haverkamp, MD  
Blue Cross & Blue Shield of Kansas

Davette McCoy, MHS, RDH, ECP III  
Kansas Dental Hygienists' Assoc.

Debra Meisenheimer, BS, MS, CPC

Trina Morgan  
Kansas Children's Service League

Debra Pochop  
Rawlins County Dental Clinic

Michelle Ponce  
Association of Community Mental  
Health Centers of Kansas

Kevin Robertson, MPA, CAE  
Kansas Dental Association

Linda J Sheppard, JD  
Kansas Health Institute

Preddis Sullivan, DDS  
Delta Dental of Kansas

Shannon Uehling  
Sunflower Health Plan

## Medicaid Expansion Proponent February 27, 2024

Oral Health Kansas is the statewide advocacy organization dedicated to promoting the importance of lifelong oral health by shaping policy and educating the public. We stand in support of Medicaid expansion.

Dental diseases like tooth decay and gum disease are nearly 100% preventable. When people have access to routine preventive dental care, they are able to catch any problems early and stay healthier. Prevention and early detection of disease are always easier and far less expensive than more complex treatments. With expanded Medicaid coverage, Kansans would have the ability to seek dental care at the first sign of trouble rather than waiting until the condition worsens. This early intervention can prevent the progression of dental problems, leading to better outcomes and lower healthcare costs in the long run. For example, addressing tooth decay in its early stages can prevent the need for more extensive and expensive treatments such as root canals or extractions. People with healthy teeth are able to get and keep jobs as well as better maintain their overall health. **Expanding Medicaid in Kansas will ensure adults have access to routine dental care, which will keep them healthier and ready to work.**

In 2020 Oral Health Kansas collaborated with the Kansas Health Institute to produce a report called "Dental Insurance Coverage and Unmet Dental Needs in Kansas" The report found that 34% of working age adults in Kansas do not have dental insurance. This uninsurance rate far outstretches even the health uninsurance rate. **Only about 43% of jobs offer dental insurance, which means that the rest of the workforce must either pay for their own insurance or go without dental insurance.** Expanding Medicaid in Kansas will help close this dental insurance coverage gap and begin to access much needed dental care.<sup>1</sup>

One unintended consequence of not expanding Medicaid is risking the loss of access to sedation dental care. Few people require sedation in order to receive dental care, but for the people who really need it, including some people with disabilities, it can be extremely hard to find. Some small-town Kansas hospitals are committed to making their operating rooms available for sedation dental care, but these same small-town hospitals are at risk of closure because Medicaid has not been expanded. **People with Medicaid coverage and even with private insurance coverage risk losing access to sedation dental care if their local hospital is forced to close.** The list of places people can access sedation dental care is very small, and it would be an additional burden if more of those access points are lost because Medicaid has not been expanded.

Organizations opposed to Medicaid expansion have cited the tragic death of Deamonte Driver as a reason to not expand Medicaid. His story is not a reason to retreat from expansion. Rather it is an important reminder of how to learn from the consequences of a tragedy and to commit to doing better.

In 2007, a twelve-year-old boy named Deamonte Driver died when an infection from an abscessed tooth went to his brain. Deamonte's mother, a lawyer, and a slew of case managers worked hard, but could not get the dental care he needed for the abscess in time to save his life.

When Deamonte died, the governor of Maryland's first reaction was to form a task force charged with crafting a list of remedies for the state's broken Medicaid system. His reaction was not to retreat and provide less support to low-income people through Medicaid. It was to do more to keep the people of his state healthy. Maryland adopted a number of policy changes and invested in an oral health infrastructure to ensure families like the Drivers can access the care they need.

**The loss of Deamonte is proof that more needs to be done to ensure children and adults do not suffer from preventable diseases.** In the years since his death, the oral health community has come together to demonstrate the importance of helping families do three things:

1. Access dental providers when they need them.
2. Be able to afford dental care.
3. Understand how to take good care of their teeth.

Deamonte's family made the best of his tragic death. His mother became a dental assistant, and the community raised funds to establish the "Deamonte Driver Dental Project" mobile clinic, which goes to schools to provide the dental care students need. Deamonte's mom honored her son's memory by working in that mobile clinic. His oldest brother honored his memory by naming his first son Deamonte. Deamonte's legacy is systems change with the goal of ensuring low-income families have access to the services they need. His life was cut tragically short, and nothing can change that. But he taught all of us a powerful lesson that the lives of people living in poverty are important and are worth investing in.

**Oral Health Kansas believes Medicaid expansion is one of the most important policies Kansas could adopt.** It would be the investment that we need in order to assure working Kansans can lead happy, healthy, and productive lives. Thank you for the opportunity to share the reasons Medicaid expansion will help Kansans and tell you the story of Deamonte Driver and his legacy. Oral Health Kansas fully supports Medicaid expansion and urges the Kansas Legislature to approve it.

Sincerely,



Tanya Dorf Brunner  
Executive Director  
[tdorf@oralhealthkansas.org](mailto:tdorf@oralhealthkansas.org)

<sup>1</sup> Kansas Health Institute: "Dental Insurance Coverage and Unmet Dental Needs in Kansas," 2020.  
<https://www.oralhealthkansas.org/Dental%20Insurance%20Report/DentalInsuranceUnmetNeedsKansas.pdf>





March 13, 2024

To Kansas Policy Makers,

Orizon Aerostructures manufactures, processes, and assembles product for various commercial, defense and space programs within the aerospace industry. Our largest plant is in Chanute, Kansas where we employ nearly 600 Associates in a town of about 8,500. (We also have a facility in Olathe, Kansas).

Our continued growth in Chanute depends in part upon the community's ability to provide health care and passing Medicaid expansion is critically necessary. Amazingly, Kansas is one of very few states that does not offer this benefit and the projected net loss for Medicaid write-offs for our community hospital alone exceeds \$90 million annually.

We have read and agree that expanding KanCare will: "Reduce health care costs for everyone. Every Kansas 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".

Passing Medicaid expansion would not only make Kansas more competitive with our neighboring states but provide significant resources to our community hospital. Accordingly, we urge you to continue the fight to pass this bill, and protecting the sixty to seventy Kansas community hospitals that are at risk!

Sincerely,

*Charles M. Newell*

Charles M. Newell  
CEO  
Orizon Aerostructures

*Henry H. Newell*

Henry H. Newell  
President  
Orizon Aerostructures



**To: Senator Carolyn McGinn and Members of the Senate Committees on  
Ways & Means and Public Health & Welfare**  
**From: Kevin Walker, Executive Vice President and Chief Policy Officer  
Overland Park Chamber of Commerce**  
**Date: 15 February 2024**

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

The healthcare costs of low-income uninsured individuals are currently being passed on to businesses and others in the system. As part of a comprehensive review of the data, the Chamber supports Kansas solutions that improve the quality and efficiency of the current KanCare/Medicaid system while maximizing coverage to those newly eligible under the federal Affordable Care Act.

The expansion of KanCare eligibility will help as many as 150,000 working but uninsured Kansans gain access to affordable health care. Additionally, it can also provide a boost to our state's economy due to a healthier and more efficient workforce and by creating as many as 3,500 – 4,000 new jobs over the next five years (according to a study by George Washington University).

Additionally, expanding KanCare will lead to a reduction in our overall state spending on health care while alleviating the strain of the increasing cost of uncompensated care that hospitals and other providers are struggling to absorb. These unnecessary costs are contributing to increasingly higher health insurance premiums being passed on to businesses and individuals. All too often individuals without health benefits delay or avoid altogether seeking medical care. These delays not only jeopardize their health but result in higher costs of treatment when they do choose to seek care. These costs are

passed on to all consumers. In short, we are already incurring costs associated with providing care for the uninsured. Providing pathways for the uninsured to gain coverage will help reduce costs for everyone.

According to an analysis by Manatt Health Solutions, many of the dollars currently spent by the state in providing required health care services to the uninsured would be reimbursed by federal funds, including as much as \$75 million per year spent on mental and behavioral health care; \$29 million spent annually to reimburse hospitals and clinics for uncompensated care they provide; and \$9 million spent annually to provide medical services to prison inmates.

Further, a thoughtful, well-designed Kansas-specific program to expand KanCare could generate more than \$126 million in savings and new revenue, more than offsetting the predicted cost of approximately \$57.5 million, thus netting the state more than \$69 million in revenue.

For the reasons stated above, the Chamber respectfully requests that you support the creation and adoption of SB 355. Thank you for your consideration.





485 N KS HWY 2, Anthony, KS 67003 | 620.914.1200

TO: Senate Committees on Ways & Means and Public Health Welfare

FROM: Sarah Teaff, Chief Executive Officer Hospital District #6 of Harper  
County, Kansas  
Dba Patterson Health Center  
485 N KS HWY 2  
Anthony, Kansas 67003

DATE: 2/14/2024

RE: Proponent SB 355

On behalf of Patterson Health Center, we appreciate the opportunity to provide testimony in support of 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.

At the end of 2023, eight percent of Patterson Health Center's payer mix was self-pay or uninsured, which is approximately 1.2 million dollars of our operating revenue in 2023 with \$760, 953 in uncompensated care. These challenges are only the tip of the iceberg facing rural hospitals in Kansas in 2024 and beyond.

Patterson Health Center remains 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.

Our hospital employs 50% of employees in the healthcare industry in Harper County and have a multiplier effect of 1.4; meaning for every employee at Patterson Health Center, an additional .4 jobs are supported in Harper County. Our hospital is critical to the future viability and vitality of our rural 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. As noted above, our hospital provided \$760, 953 of uncompensated care in 2023.

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

Sincerely,

Sarah Teaff, PhD, FACHE

## **We have a mental health crisis in Kansas – it's time to expand Medicaid.**

By: Robbin Cole, CEO Pawnee Mental Health Services

Earlier this year, Mental Health America released its annual mental health rankings by state. They placed Kansas last in the nation. Let that sink in — last, out of 51 states and territories.

Although this is disappointing news, we've come together before to make progress. In 2021, Kansas became the first state in the nation to pass a transformative law that put us at the forefront of addressing our state's mental health needs. This bipartisan bill established a new model for providing behavioral health services called the Certified Community Behavioral Health Clinic model.

It was a significant step in the right direction. Kansas has increased access to community-based mental health services and encouraged integration of behavioral health with physical health care. Our Certified Community Behavioral Health Clinics are focused on helping patients increase their independence and stay active in their communities.

Lawmakers put partisanship aside, came together, and worked on a solution to help Kansans. That is leadership. And I know the Legislature can work together again to address this crisis – and finally expand Medicaid.

Expansion would mean that 150,000 hard-working Kansans, who fall into the coverage 'gap,' have access to affordable healthcare. Many folks in this gap are working and either aren't offered or can't afford private health coverage, and they make "too much" to qualify for Medicaid. But they don't make enough to afford private healthcare coverage. Therefore, they have no health insurance.

So, what does it have to do with mental health?

Kansans with mental healthcare needs make up nearly one-third of the folks in the 'gap.' If we expanded, thousands of Kansans could get the mental health care they need when they need it.

Simple as that.

Expansion greatly enhances the use of mental health services and enables healthcare providers to offer new services. We've found that in [states that have expanded Medicaid](#), people are less likely to skip medications due to cost and more likely to seek regular care for their ongoing health conditions while reporting improvements in their overall health.

Kansas is one of only ten states left in the nation that has not expanded Medicaid – that's another ranking we don't want to be known for. We are surrounded by states that have expanded: Missouri, Nebraska, Colorado, and Oklahoma.

And whether we expand or not, we are paying for our neighbors who have. Federal tax dollars cover 90% of Medicaid expansion costs. The federal income taxes Kansans pay are funding better health coverage for 40 other states, but not here.

The University of Kansas Institute for Policy and Social Research estimates that Kansas lost an estimated \$4.9 billion in federal Medicaid funding from 2014 to 2021, in addition to \$6.62 billion in related economic activity for failure to expand.

That makes no sense.

But our state legislative leaders won't even allow the issue to come to the floor for discussion. Polls show that the majority of Kansans support Medicaid expansion, because it will lower the healthcare costs for everyone. But our legislators aren't even allowed to debate it.

There are no excuses left.

Imagine the social and economic impact on Kansas if all Kansas children and families had access to affordable health care. Imagine the impact on Kansas hospitals and other health care providers, especially those in rural areas, if they could get paid for the services they provide to those in this 'gap.'

No state wants to be 51st in the nation in anything. We certainly don't want to be 51st in mental health. Let's urge the State of Kansas to do what it must to improve upon Kansas' last place mental health ranking.

I urge our legislators to take the next step and finally expand Medicaid.



March 15, 2024

To Whom It May Concern:

On behalf of the Pittsburg Area Chamber of Commerce and our 500+ member businesses, representing over 10,000 employees throughout Southeast Kansas, please allow me to voice our overwhelming support for the Medicaid expansion bill currently being considered. Our reasons for taking this position are numerous, but none more so than its anticipated impact on the economic development of communities like Pittsburg.

Health care is a significant driver of the Pittsburg area economy, particularly as it relates to Ascension/Via Christi Hospital-Pittsburg and the Community Health Center of Southeast Kansas. Medicaid expansion would create an additional \$2 million in revenue for both of these entities, which represent two of our largest employers. All told, Medicaid expansion would generate more than \$11 million in new health care spending in Crawford County alone. Ensuring a robust health care community is particularly important for border communities like Pittsburg, as failure to do so puts us at a disadvantage to neighboring states...all of which have already expanded Medicaid.

An expanded Medicaid program would also ensure a healthier, more productive and efficient workforce to continue fueling our community's and our state's business growth. The largest investment for most companies is the one they make in their employees, and expanding coverage to more than 1,600 uninsured Crawford County residents would increase productivity, while reducing absenteeism and employee turnover. This type of focus on workforce development is increasingly a top consideration in locating and/or expanding a business.

Providing these Kansans with access to routine and preventive care would also create new jobs for doctors, nurses, medical support staff and others, further helping to boost the economy of our region and the state. We've also found that health care tends to play a role similar to travel and tourism, in that many are now traveling to Pittsburg for their health care, which stimulates business for our restaurants, hotels and other local businesses.

It's for these reasons (and several others) that I strongly urge you to consider the positive impact of Medicaid expansion on our state's health care industry and our economy. Thank you in advance for your consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "Blake Benson". The signature is fluid and cursive, with a large initial "B" and a long, sweeping underline.

Blake Benson  
President, Pittsburg Area Chamber of Commerce



February 1, 2024

To: Representative Brenda Landwehr, Chair  
Members of the House Committee on Health and Human Services

From: Brenda R. Sharpe, President and CEO  
REACH Healthcare Foundation

Re: Support for Cutting Healthcare Costs for All Kansans Act

I am writing to ask you to support the “Cutting Healthcare Costs for All Kansans” Medicaid expansion bill. Kansas has a well-documented health coverage problem. Thousands of Kansans fall into a coverage gap because of the state’s highly restrictive eligibility requirements and few affordable options. This is a problem that affects all of us, and Kansans are ready for a solution today.

The REACH Healthcare Foundation has a mission and mandate to reduce uninsurance and increase access to quality health care for uninsured and medically underserved people. Our work with community health and mental health providers, hospital administrators, public health officials, health advocates and business organizations has shown us the immense value of health coverage to workers, small businesses, rural hospitals, and the economy.

Forty states have taken advantage of the enhanced federal match that covers most of the cost of expansion. Kansas is now surrounded by states that have expanded Medicaid. There is no “win” for Kansas in continuing to decline federal resources to invest in Kansas people and health care.

We know people without coverage are at greater health and financial risk, and the health providers that serve them carry a larger cost burden that ultimately gets passed on to all of us.

Meeting the current demand for workers is a major state and business priority. Nearly all Kansas industries have employees who would benefit from expansion. The majority of those in the coverage gap work, and in jobs we turn to everyday – but they don’t offer coverage.

Rural health care providers are facing elevated levels of uncompensated care. They have been upfront about their difficulties retaining health care professionals and the financial strain on their operations. We also have heard the worries of people living in communities that have lost their hospitals. When a hospital closes, a lot of jobs go, too, and communities lose the ability to attract and retain residents.

Kansas has missed nearly a decade of opportunity to leverage federal resources to bolster the health of our people and communities. Kansans know that uninsured workers and families are vulnerable *now* and that communities struggle without access to health care *today*. We encourage you to look to your neighboring states for examples and take the next step to advance the health of Kansas for the future.

Brenda R. Sharpe  
President and CEO, REACH Healthcare Foundation  
[brenda@reachhealth.org](mailto:brenda@reachhealth.org)  
913-432-4196

# Second Baptist Church of Olathe

331 N. Kansas Avenue  
Olathe, KS 66061  
Reverend Dr. Bobby L. Love, Pastor

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Church Office 913-780-5553  
Fax 913-764-1980  
Pastor's Office 913-829-7776  
[www.secondbaptistchurchofolathe.org](http://www.secondbaptistchurchofolathe.org)

Dear Kansas Legislators,

I am writing on behalf of the Second Baptist Church of Olathe Kansas which is one of the oldest predominately black congregations in the state of Kansas, established in 1868. We are proud members of the Missionary Baptist State Convention of Kansas and one of the founding Congregations of MORE2 (Metro Organization for Racial and Economic Equity). Together with our denominational brothers and sisters across the state we stand in support of Medicaid expansion. We have seen and felt the impact of having many of our sister churches in rural Kansas suffer when the hospitals in their area have closed and they have been forced to travel greater distances to get their healthcare needs met.

In conversations across the state, parishioners overwhelmingly have come to the same conclusion that something must be done, and expanding Medicaid is a solution that can help. We all have been splattered with the talking points and statistics on what can happen if this legislation is approved expanding Medicaid in Kansas. We know factually that Kansans indeed will be helped and afforded access to health care, and approximately 150,000 people who are presently mired in the coverage gap will benefit from its passage.

In my faith tradition two biblical stories remind me of the great opportunity that we have in Kansas to truly demonstrate our care and concern for the well being of all Kansans. In the Gospel according to Luke 10:25-37 we read about the all too familiar story of the Good Samaritan. This account vividly demonstrates the choices of those who are in a position to render assistance/aid to a person who is clearly in need but for various reasons (personal, political, positional power) chooses not to help (although they see him) but decides to leave the bloodied, wounded, stripped, and suffering man to fend for himself. But I thank God each and every day that there are folk in elective office that care! There are those who see the impact of leaving people on the side of the road and are willing to be the "Good Samaritans" in Kansas and render the necessary access to healthcare the man required.

Being a lifelong resident of Kansas I have been fascinated about the origin of my birthplace Liberal, Kansas. Its humble beginning was initiated by the kind act of benevolence and generosity stemming from the act of giving. That's right...caring enough for others who were in need of water in a time when water was scarce. The gesture of being blessed so that you may be a blessing to others put Liberal on the map. Mr. S.S. Rogers, the first homesteader, freely provided travelers with water. His kind act sprung forth the genesis of a new town. Liberal, Kansas was born. I cannot help but think about Matthew 25:35b "For I was thirsty and you gave me drink. How about Kansas...let us do the right thing and Expand Kancare Now!

In advance, with faith, we thank you for your vote of YES to Medicaid Expansion.

*Rev. Dr. Bobby L. Love, Sr.*  
Pastor  
Second Baptist Church of Olathe  
General Secretary  
Missionary Baptist state Convention of Kansas



## **KANSAS SILVER HAIREd LEGISLATURE**

The Kansas Silver Haired Legislature (SHL) was formed in 1982, created by an act of Congress in 1969. The SHL is made up of 125 representatives, one from each of the 105 counties with the exception of the larger counties having five additional. Representatives must be 60 years old and are elected from their county of residence.

Our purpose is to advocate for seniors and provide a voice at the state level with emphasis in educating our seniors and other populations about issues on bills and resolutions being proposed. The SHL gives voice to approximately 600,000 senior citizens of Kansas. We also enlighten the Kansas Legislature about issues promoted by their Silver Haired Legislators.

### **The Resolutions to be presented to the 2024 Legislature**

- **Support Medicaid Expansion;**
- **Establish a medical cannabis advisory board to explore and make recommendations regarding the medical use of cannabis;**
- **Support voting rights of seniors and all other registered voters by ensuring accessibility to the polls;**
- **Expand the existing Grandparents as Caregivers Act to provide financial assistance to other relatives providing care to children;**
- **Support the elimination of the tax cliff and increase income thresholds to qualify for an exemption of social security benefits from state income tax.**

### **Executive Board Officers**

President: Thomas Gordon, Wyandotte County, [tgpsa1shl@gmail.com](mailto:tgpsa1shl@gmail.com)

First Vice-president: Katy Hoffman, Johnson County, [kmrhoffman@gmail.com](mailto:kmrhoffman@gmail.com)

Second Vice-president: Sherri Grogan, Leavenworth, [sdr7304@gmail.com](mailto:sdr7304@gmail.com)

Treasurer: Gary Scott, Johnson County, [scottskufhsu@gmail.com](mailto:scottskufhsu@gmail.com)

Secretary: Donna Lehane, Sedgwick County, [stillinadream@sbcglobal.net](mailto:stillinadream@sbcglobal.net)

### **Officers for State Legislature**

Speaker: Randall Hardy, Saline County, [KS67401@gmail.com](mailto:KS67401@gmail.com)

Speaker Pro Tem: Chuck Schmidt, Sedgwick County, [cschmidt3131@gmail.com](mailto:cschmidt3131@gmail.com)

Floor Leader: Leroy Burton, Butler County, [leburton@cox.net](mailto:leburton@cox.net)

-over-

We represent the SHL from the Planning Service Area, PSA 11, Johnson County. We are: Katy Hoffman, Chair, kmrhoffman@gmail.com; Gary Scott, Vice Chair, scottskufhsu@gmail.com; Mary L. Calhoun, Merrilee517@yahoo.com; Norman Kahn, nkahnmd@gmail.com; Mary Penrose, Penrose,mary@gmail.com; David Wood, wowowoody@earthlink.net. We want to keep you informed! You may also visit [Kansas Silver Haired Legislature \(kansas-shl.org\)](http://kansas-shl.org).



4200 S. 4th  
Street  
Cantwell Hall  
913-758-6564



# SISTERS OF CHARITY OF LEAVENWORTH

OFFICE OF JUSTICE, PEACE, AND INTEGRITY OF CREATION



Date: March 20, 2024

From: Rebecca Metz, Lead Coordinator,

Office of Justice, Peace, and Integrity of Creation- Sisters of Charity of Leavenworth

RE: Proponent testimony for House Bill 2556 / Senate Bill 355

Dear Chairperson and Committee members,

I write today not only as a coordinator for the the Sisters of Charity of Leavenworth's Office of Justice, Peace, and Integrity of Creation but also as a concerned citizen of Kansas. The Sisters of Charity follow in the traditions of St. Vincent de Paul and St. Louise de Marillac, who began the daughters of charity with a particular emphasis on serving those living in poverty. It is in the same tradition that we support House Bill 2556 / Senate Bill 355, which could provide health coverage for "A total of 151,898 Kansans, including 106,450 adults and 45,448 children . . . if Medicaid were to be expanded in January 2025."<sup>1</sup> The Sisters of Charity of Leavenworth have a legacy of having founded and operated several hospitals between spanning California to Kansas and are intimately aware of the struggles of every day Kansans.

I believe it is deeply immoral for that many Kansans to continue to go without care and it is beyond time to offer additional help to struggling families and individuals to provide for their basic needs.

## **Human Dignity and the Common Good**

Catholic Social Teaching emphasizes the dignity of every individual, the common good and a preferential option for the poor. Expanding KanCare is a lifesaving measure full stop. Expansion increases access to high-quality care for those who would otherwise go without healthcare. Making sure our brothers and sisters, *our neighbors*, have access to health care is everyone's responsibility and our state is worse off for having not expanded Medicaid yet. "We answer the Gospel call to affirm that each person's life is a treasure and everyone should have the opportunity to flourish. Access to quality health care is a right and is necessary for everyone to achieve that vision."<sup>2</sup>

## **A Justice Issue**

A lack of affordable health care coverage is an economic and racial justice issue. To date, Kansas has lost over 6 billion dollars by refusing to expand Medicaid.<sup>3</sup> With the most recent closing of of CareArc clinic in Eureka<sup>4</sup> is no secret that rural health care access is in jeopardy for some of Kansas' most marginalized. While we have continued to not accept federal dollars for Medicaid Expansion, we have *actively* seen the loss of health care access.

Finally, it is known that Medicaid Expansion is a matter of racial justice. In Kansas, those in communities of color are three times more likely than those in primarily white areas to lack any form of health insurance.<sup>5</sup> As a state, we are morally obligated to reduce these disparities and to ensure communities of color have equal access to healthcare. The Governor's Commission on Racial Justice and Equity also recommended expanding Medicaid in order to reduce barriers to healthcare access for people of color.<sup>6</sup>

**I implore you to pass Medicaid expansion in committee and on the floor, because we cannot wait any longer to give Kansans the care they so desperately need.**

Sincerely,

Rebecca Metz

<sup>1</sup> [Kansas Health Institute, 2024 Medicaid Expansion Estimates: Enrollment, Costs and Characteristics of the Expansion Population.](#)

<sup>2</sup> [Journal of the Catholic Health Association of the United States, Medicaid Expansion in Michigan Reflects Catholic Social Principles.](#)

<sup>3</sup> [Home, Alliance for a Health Kansas 2024.](#)

<sup>4</sup> [The Emporia Gazette, CareArc Announces Closure of Eureka Health Center.](#)

<sup>5</sup> [Llopis-Jepsen, Celia. "Kansas and Missouri Health Care Is Saddling People of Color with Debt." KCUR 89.3 - NPR in Kansas City.](#)

<sup>6</sup> [CREJ Report July 1 2021 Final - Governor of the State of Kansas.](#)



TO: House Health and Human Services Committee

FROM: Robert L. Olm-Shipman, President & Chief Executive Officer, South and East Regions,  
Saint Luke's Health System

DATE: March 20, 2024

RE: Proponent Testimony Senate Bill 355

On behalf of Saint Luke's Health System, a faith-based, not-for-profit, and our over 4,200 employees who live or work in Kansas, thank you for allowing me to submit testimony in support of House Bill 2556. My name is Bobby Olm-Shipman and I am President and Chief Executive Officer of the South and East Regions of Saint Luke's Health System. I am also the current Board Chairman of the Kansas Hospital Association. Saint Luke's Health System operates Saint Luke's South Hospital in Overland Park, with additional locations in Leawood, Roeland Park, and Kansas City, and two critical access hospitals in Anderson County Hospital in Garnett and Allen County Regional Hospital in Iola. In fiscal year 2022, our Kansas hospitals provided over \$12.3 million in uncompensated care costs.

Under the *Emergency Medical Treatment and Labor Act (EMTALA)*, federal law requires Medicare-participating hospitals to ensure public access to emergency services regardless of ability to pay. Because of this requirement, hospitals often absorb the uncompensated cost of emergency department visits of those who are unable to pay. It is well established that visits to the emergency department, generally the most expensive place in the hospital to receive care, are a significant driver to the rising cost of health care in the United States. And while as providers we are committed to caring for anyone who comes through our emergency department doors, regardless of ability to pay, the neglected costs of that care end up saddled on a hospitals' bottom line and are typically passed on to private insurance holders in the form of higher health insurance plan premiums. Expanding Medicaid in the state of Kansas will not only provide access to health care for tens of thousands of hard-working Kansans who currently find themselves in the coverage gap, making too much for Medicaid coverage but not enough for subsidized coverage on an exchange plan, and improve health outcomes, but also mitigate unnecessary, expensive, last-resort emergency department visits and improve the viability of hospitals in communities across our state.

Hospitals across the country, and certainly in our State, continue to navigate a perilous economic environment, confronting increased staffing and supply costs and stagnant reimbursement, leading to razor-thin margins and deficits. 2022 National Health Expenditure (NHE) data from the Centers for Medicare and Medicaid Services (CMS) show that while total healthcare spending increased 4.1% that year, hospital spending was up only 2.2% - compared to physician services (+2.7%), prescription drugs (+8.4%), private insurance (+5.9%) and the overall inflation rate (+6.5%). Additionally, according to a recent report by Syntellis Performance Solutions and the American Hospital Association, hospital labor expenses per adjusted discharge were up by 24.8% by the end of 2022 compared to pre-pandemic levels in 2019.<sup>1</sup> The rapid growth in labor expenses in 2022 alone were projected to increase hospitals' labor costs by \$135 billion according to a report published by Kaufman Hall in September 2022. Inflated labor

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<sup>1</sup> [https://www.syntellis.com/sites/default/files/2023-03/AHA\\_Q2\\_Feb\\_2023.pdf](https://www.syntellis.com/sites/default/files/2023-03/AHA_Q2_Feb_2023.pdf)

and supply costs continue to challenge hospital finances today, as does *EMTALA*, chronic government payer reimbursement below cost, and unnecessary prior authorization and improper claim denials from commercial health plans. Without supportive public policies like expanding Medicaid, Kansas hospitals will continue to fall further behind on their balance sheets, which could lead to shuttered services, limited investment and innovation, and, unfortunately, potential closure. Given the ongoing financial hardship hospitals are experiencing, not expanding Medicaid jeopardizes improved access to health care services for all Kansans.

Thank you for your consideration of our comments. We ask that the committee recommend favorably Senate Bill 355.

Sincerely,

A handwritten signature in cursive script, appearing to read "Bobby", written in black ink.

Robert L. Olm-Shipman  
President & Chief Executive Officer, South and East Regions, Saint Luke's Health System



To: Representative Brenda Landwehr

House Health and Human Services Committee Chair

From: Stormont Vail Health

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

Subject: Testimony in Support of HB 2556

Thank you, Madam Chair Landwehr and member of the House Health and Human Services committee, for allowing Stormont Vail Health to provide testimony. My name is Stacie Mason and I am the Chief Financial Officer and Senior Vice President at Stormont Vail Health system based in Topeka and Geary County, Kansas. Today, Stormont Vail is the second largest health care system in the state providing care to over 219,000 unique patients in our hospitals and over 793,000 patients in our care clinics across northeast Kansas. We employ about 5,700 team members and invest \$47 million in our community annually, not including the nearly \$79 million written off for charity, which, many times, does not fully cover the cost of care.

Medicaid Expansion presents a unique opportunity for Kansas, offering significant benefits that align with the well-being of our community. By extending health coverage, we can:

- enhance overall community health
- mitigate uncompensated care costs for local hospitals
- foster a more productive workforce

Rural hospitals, in particular, are at risk, with eight closures since 2014. The legislation not only safeguards these institutions but also creates a comprehensive strategy for rural healthcare. However, rural hospitals are not the only health care facilities at risk if Medicaid is not expanded.

Recent changes to the federal Disproportionate Share Hospital (DSH) program put Stormont Vail's hospitals at risk of losing \$25-\$30 million by losing eligibility in the 340b drug savings program. Medicaid Expansion will:

- Allow Stormont to remain in the 340b program
- Recoup reimbursement for the millions in uncompensated care we already give
- Provide patients with access to critical services that keep them healthy

Passing HB 2556 is the difference between losing \$25-30 million without Medicaid Expansion or Stormont Vail being able to conservatively invest \$7-10 million more into the community with Medicaid Expansion—at no additional cost to tax payers. Facing the rising prices of health care and the rollback of pandemic era support programs, losing \$25-\$30 million will cripple Stormont's ability to provide comprehensive care and support to communities across Kansas.

Medicaid Expansion will not only help hospitals but will also greatly contribute to the growth and prosperity of our local businesses. The financial implications are substantial. Medicaid Expansion can generate approximately 23,000 jobs and save employers up to \$80 million annually in healthcare costs.



This not only supports the health and productivity of Kansans but also contributes to a thriving community.

Furthermore, this bipartisan proposal addresses key concerns by incorporating a work requirement that both grows our workforce and streamlines administrative processes. Exceptions for students, veterans, caregivers, and those with medical conditions make it a pragmatic and inclusive approach. Recent statistics indicate overwhelming support from Kansans (approx. 80%), aligning with the vision of growing our workforce and ensuring the prosperity of our local businesses.

The financial burden on health care providers, local businesses, and communities due to the lack of Medicaid Expansion cannot be understated. Your influential support in advocating for Medicaid Expansion through HB 2556, is crucial. We urge you to support the Cutting Healthcare Costs for All Kansans Act. Thank you for your consideration of my comments.

Respectfully,

Stacie Mason, MBA

Senior Vice President and Chief Financial Officer/Treasurer





***Submitted to the Senate Committee on Public Health and Welfare and the Senate Committee on Ways  
March 20, 2024  
By Susan G. Komen***

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Thank you for the opportunity to provide written testimony in support of Medicaid Expansion. Susan G. Komen is committed to ensuring that all Kansans have access to healthcare that could save their lives. Expanding the eligibility of KanCare would ensure the availability of the full range of health services to low-income Kansans, including required cancer screenings, diagnostic services and treatment.

Many women are forced to delay or forego breast cancer screenings because they do not have health insurance. In Kansas 12% of women between the ages of 19 and 64 are uninsured.<sup>1</sup> Unfortunately, we know that health insurance is key to obtaining health care services, and those who lack insurance are less likely to get timely, appropriate, and high-quality healthcare.

Having a regular provider is one of the best predictors of mammography use. Women with a regular primary care physician, for example, are more than twice as likely as women without one to have undergone mammography screening. Many women who delay screening may be diagnosed with more advanced breast cancers that are more difficult to treat, deadlier and as much as five times more expensive to treat than cancers caught in earlier stages. This impacts every Kansas taxpayer, as public funds are often tapped to cover the cost of uncompensated care.

Medicaid expansion has been associated with earlier diagnoses, fewer treatment delays, and more treatment options being available for patients with cancer. In particular, patients with newly diagnosed stage IV breast cancer, Medicaid expansion was linked to enhanced survival rates and a reduction in the 2-year mortality gap.<sup>2</sup> Research has also shown Medicaid expansion has led to earlier cancer diagnoses and a reduction in cancer mortality rates.<sup>3</sup>

We also know that most Kansans who would benefit from Medicaid expansion are already working. Of all adults aged 19-64 likely eligible for Medicaid expansion in Kansas 7 out of 10 are already working.<sup>4</sup> We believe Medicaid expansion should be offered to these individuals without additional barriers or restrictions.

KanCare expansion will bring tremendous benefits for Kansas citizens as well as the Kansas economy. Expanding KanCare will create jobs and return hundreds of millions of tax dollars to Kansas every year. Kansas has already lost out on an estimated \$6.9 billion in federally available Medicaid funds between 2014 and 2023. In addition, the state missed out on the additional economic activity that can be spurred by the influx of federal Medicaid dollars.<sup>5</sup> Medicaid expansion would also help ease the closure of hospitals and clinics in rural Kansas. It's estimated that 28% of rural Kansas hospitals face an immediate risk of closing.

Susan G. Komen urges you to support the expansion of KanCare without burdensome restrictions. We hope that you will take advantage of this opportunity to provide health care to the most vulnerable in our state.

Thank you for your consideration.

Michael Steiner  
State Policy & Advocacy Manager for KS, MO & NE  
msteiner@komen.org

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<sup>1</sup> Kaiser Family Foundation. "Women's Health Insurance Coverage" 2022

<sup>2</sup> Hotca A, Bloom JR, Runnels J, Salgado LR, Cherry DR, Hsieh K, Sindhu KK. The Impact of Medicaid Expansion on Patients with Cancer in the United States: A Review. *Current Oncology*. 2023; 30(7):6362-6373.

<sup>3</sup> Justin M Barnes, Kimberly J Johnson, Eric Adjei Boakye, Lidia Schapira, Tomi Akinyemiju, Eliza M Park, Evan M Graboyes, Nosayaba Osazuwa-Peters, Early Medicaid Expansion and Cancer Mortality, *JNCI: Journal of the National Cancer Institute*, Volume 113, Issue 12, December 2021, Pages 1714–1722

<sup>4</sup> Schmidt, S., Sink, K., Uridge, E., & Rowell, S. (2024, February 29). *2024 Medicaid Expansion Estimates: Enrollment, costs and characteristics of the expansion population*. Kansas Health Institute. <https://www.khi.org/articles/2024-medicaid-expansion-estimates/>

<sup>5</sup> Kansas Hospital Association



[www.802united.org](http://www.802united.org)

January 25, 2024

To: Kansas Legislators regarding expansion of Medicaid

From: The 802 United nonprofit educational/ advocacy organization

Re: In support of expanding KanCare

On behalf of our nonprofit organization, and as a Kansas citizen practicing medicine in our state for over 30 years, I resoundingly support the expansion of Medicaid in our state, as do hundreds of other physicians and medical organizations. We request that this issue be brought to the floor for a hearing immediately. It's past time.

The following is an excerpt of a referenced educational module from our website, [The802United.org](http://The802United.org). It describes the importance of expanding Medicaid in Kansas, one of only 10 states in the nation not currently benefiting from federal funding to support our healthcare institutions and close the insurance gap for middle income Kansans:

### **1. Medicaid Expansion- what is it and what are the pros and cons?**

Medicaid is a federal health insurance program and is offered only to specific categories of individuals for very specific purposes. The rules and regulations vary by state, and any expansion of the program must come through the state legislature and be signed by the Governor. In Kansas, the Medicaid program is administered by KanCare, and benefits are restricted to seniors over 65, low income families with children (or pregnant people), and those with disabilities. Medicaid expansion would remove the restrictions except for meeting income and employment standards, with benefits provided to all residents with a household income at or below 138% of the federally established poverty level, regardless of disability, age or having children.

To put that figure into perspective, the annual income at 138% of the federal poverty level depends on the number of people in the household:



# of Persons in Household	2023 Federal Poverty Level for the 48 Contiguous States (Annual Income)	
	100%	138%
1	\$14,580	\$20,120
2	\$19,720	\$27,214
3	\$24,860	\$34,307

In locations with expanded state health insurance, federal funding is increased alongside the state funds, resulting in a net gain to the state in direct funding, jobs created, and personal income for the residents (which can then be taxed). States that have not expanded the program have opted out of (all 10 states together) over \$43 Billion dollars in federal funding.

From Governor Kelly's office in 2021: [ICYMI: New Report Today Says Medicaid Expansion Would Create 23,000 New Jobs in Kansas - Governor of the State of Kansas](#)

Historically, there have been bills introduced in Kansas for several years (at least since 2012) to expand Medicaid and take advantage of federal designated funds, some of which Kansas is already missing out on because it has refused to expand the program. In every case, the legislature voted along party lines or a Republican Governor (Sam Brownback) refused to sign a bill which passed both the house and senate, and the proposals were voted down, usually stating that the expansion would be "too expensive". More recently, the Republican legislators tried to tie a "poison pill" (an amendment which is so unpopular it will keep an otherwise attractive bill from being passed) to the Medicaid expansion legislation, by stating they would only vote for the bill if it also contained a state constitutional amendment banning abortion from the moment of conception.

All but 10 states in the US have voted to expand Medicaid to the fullest extent allowed by the Affordable Care Act. Some of the states had to create ballot measures to force their legislators to expand Medicaid (not an option in Kansas, because there is no process in our state constitution which allows citizens to create ballot measures- this can only be done by legislators). In the states that have expanded Medicaid, health outcomes have almost universally improved in multiple areas of medicine (none worsened).

From KCUR (public radio) in December, 2022:

[Medicaid expansion in Kansas: What to know before lawmakers convene in January | KCUR - Kansas City news and NPR](#)

News story about why Medicaid expansion is critical to keep Kansans from falling through the "gap" and failing to obtain care:

<https://www.kctv5.com/2023/08/31/kansas-patients-coverage-gap-face-medicaid-issues/?fbclid=IwAR2EpMJpzXHFZA10R3DgmRqA0ZzzA4cgN5UkgwPNOD2OsC6xAE2vnuy53s>

KFF article by Guth and Ammula:

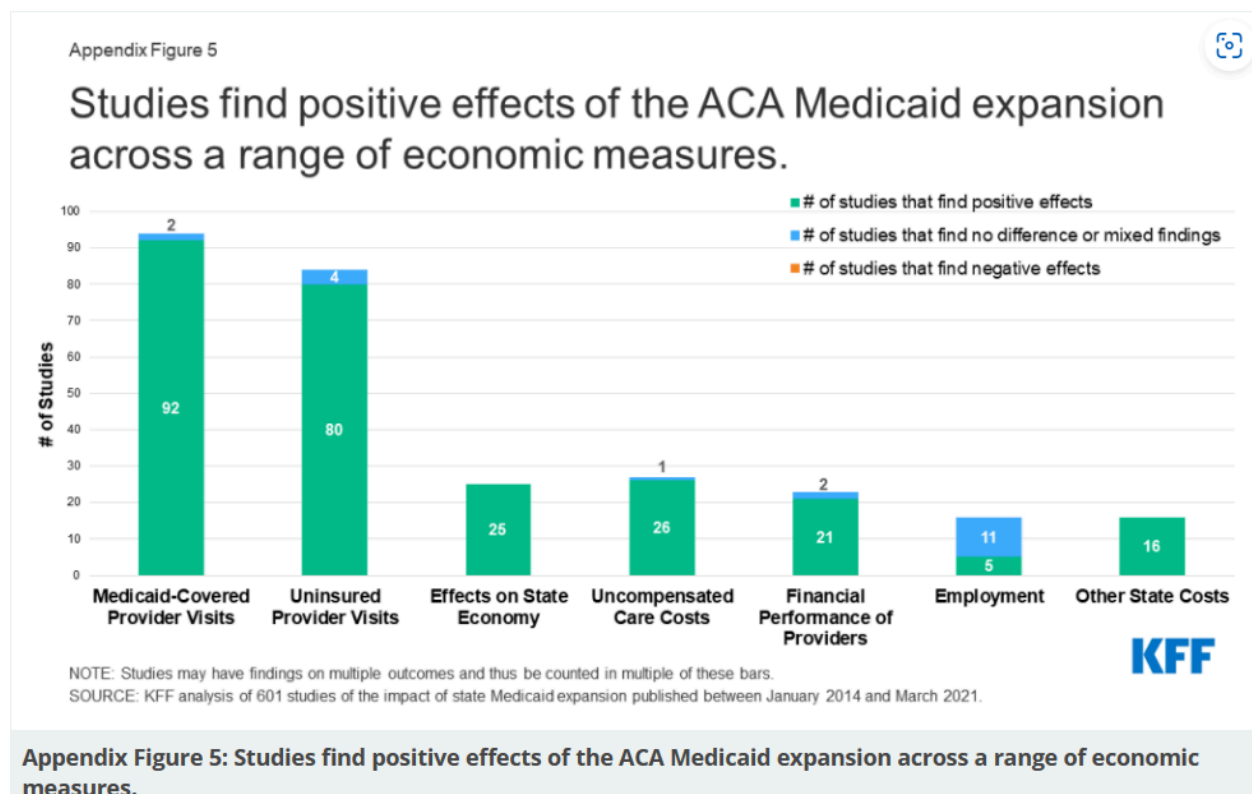
[Building on the Evidence Base: Studies on the Effects of Medicaid Expansion, February 2020 to March 2021 – Report – 9709 | KFF](#)

[The Effects of Earlier Medicaid Expansions: A Literature Review | CEA | The White House](#)

#### A. What is the impact on rural healthcare access of expanding Medicaid (or not)?

In the several years that lawmakers have not managed to pass Medicaid expansion, one of the sticking points is that legislators believe that hospitals would be overwhelmed by the influx of patients who would seek care once they were insured. In truth, it is the rural hospitals that have strongly recommended expanding the program, as the effect of increasing the number of insured patients (rather than the number of uninsured patients, who will still come into the hospital in crisis situations but NOT for preventive care, which would be less expensive and improve health outcomes) would improve the proportion of uninsured/ insured patients resulting in fewer uninsured cases that go unreimbursed, increase income and provide more jobs at these small hospitals.

Figure from Appendix A of the KFF article by Guth and Ammula:



Information regarding the impact on rural hospitals from the KCUR article:

"Tom Bell, former chief executive of the Kansas Hospital Association, testified in 2020 that 85% of rural Kansas hospitals were operating at a loss. Since then, operating under the strain of the pandemic, about one-third of rural hospitals nationwide are now at risk of closing in the next year, including 55 in Kansas.

Nearly 75% of rural hospital closures nationwide since 2010 were in states that have not yet enacted Medicaid expansion, or waited too long for it to make a difference, according to a report from the American Hospital Association.

By keeping hospitals open, Medicaid expansion could create jobs at those hospitals, said Don King, chief executive of Ascension via Christi, in testimony to lawmakers in 2020. Governor Kelly's office forecast as many as 23,000 jobs could be created."

(These statistics are from embedded hotlinks in the KCUR article, referenced above).

Rural Kansas hospitals which closed between 2010 and 2023

#### **Kansas**

Central Kansas Medical Center (Great Bend)

Horton Community Hospital

Mercy Hospital Fort Scott

Mercy Hospital Independence

Oswego Community Hospital

Herington Hospital

[State-by-state breakdown of 120 rural hospital closures \(beckershospitalreview.com\)](https://beckershospitalreview.com/state-by-state-breakdown-of-120-rural-hospital-closures/)

January 2023 article from the same site shows that 53% of rural Kansas hospitals are at high risk of closure:

[631 hospitals at risk of closure, state by state \(beckershospitalreview.com\)](https://beckershospitalreview.com/631-hospitals-at-risk-of-closure-state-by-state/)

Please note, to read these articles from Beckers Hospital Review, you may need to enter your email address. If you would rather not, one of the articles is quoted here, and you only need to put up with ads:

[Hundreds of Hospitals Could Close Across Rural America \(usnews.com\)](https://www.usnews.com/story/health/hospitals-closures-rural-america)

Therefore, the expansion of Medicaid would help the state with funding, keep rural hospitals open, and give more Kansans access to health insurance. This would encourage more preventive instead of crisis care, which has been demonstrated to improve health outcomes.

Here is a recent article regarding Governor Kelly's take on the issue:

[More than 50% of rural hospitals at-risk of closing. Kansas governor says there's simple solution \(kwch.com\)](#)

As you know, Governor Kelly has had a lot more to say on this issue over the Fall, leading up to a compromise proposal that now includes an employment requirement. I believe that, given the opportunity for an open conversation about this proposal, our legislators would faithfully represent the more than 70% of Kansans who support expanding Medicaid, and pass the law.

Give our representatives and senators the chance to do their jobs. Schedule a hearing for Medicaid Expansion right away.

Thank you for your time,

Elizabeth Wickstrom, MD FACOG

Board member of The 802 United

[www.802united.org](http://www.802united.org) [info@802united.org](mailto:info@802united.org) 1430 SW Woodhull St #4262 Topeka, Kansas 6604  
(785)251-0803

March 13, 2024

Hello,

I am writing to provide support for Medicaid expansion in the upcoming KS state hearings. I am the president of the board of directors for the Overbrook Rural Health Initiative, a rural non-profit organization working to provide medical education and access to 2,500+ residents in Osage County (NE Kansas). A few notes I'd like to share:

- The Overbrook Rural Health Initiative (ORHI) is a bipartisan organization working to provide quality care to our neighbors and community
- Osage County is one of the largest KS counties without a hospital.
- Many of our residents travel 30+ minutes for emergency medical care; the difference between life & death in some cases!
- Our county has existing healthcare buildings and amenities that can be further or better utilized to provide expanded healthcare if Medicaid was expanded to include our community population
- The expansion of Medicaid would make rural healthcare an attractive business opportunity to larger hospital networks in neighboring Topeka, Lawrence, and Kansas City which directly benefits our communities' access to care.
- Medicaid expansion would provide employment opportunities to a significant part of our population who are trained & certified nurses commuting long distances for work away from home.

Rural Kansas represents a landscape of blue-collar workers supporting the backbone of America but quite literally, the backbone of our communities are breaking without access to quality healthcare. This initiative is a common sense bi-partisan issue that supports our state's fiscal responsibilities, creates opportunity for private-sector growth and employment, protects large employers already established in our state, reduces the burden of healthcare costs for our community, and - most importantly - shows the impact of a bipartisan approach to legislature that benefits ALL constituents.

We respectfully request support for HB2556 in the House and SB355 in the Senate.

Sincerely,  
Katie Moon  
President, The Overbrook Rural Health Initiative, Inc.  
[www.orhi.org](http://www.orhi.org)

# THRIVE ALLEN COUNTY

February 9, 2024

Re: Testimony to support KanCare Expansion

From: Lisse Regehr, CEO, Thrive Allen County

Thrive Allen County is a nonprofit organization located in Iola that focuses on improving health, wellness, recreation, and education conditions in our county. Our vision is that Allen County will become the healthiest rural county in Kansas, and we do this through supporting and encouraging programs, policies and resources that promote access to healthcare, healthy lifestyles, and positive community conversation.

This testimony is submitted in support of expanding Medicaid in the state of Kansas. As an organization that works intensively “on the ground” in rural Southeast Kansas we have seen firsthand the extraordinary need for Medicaid expansion--as well as the opportunity it holds to bolster our county’s healthcare system.

Thrive participates in the Allen County Rural Health Initiative, which consists of all of the safety-net healthcare providers in Allen County, including Allen County Regional Hospital. Uncompensated care is a major concern of our county’s hospital. Medicaid expansion would provide significant new revenues, ensuring the continued financial stability of our hospital. For those concerned about property taxes this means a lower likelihood that the hospital will require infusions of cash from the county’s general fund. Keeping the hospital from becoming a property tax burden for our small businesses and families is an economic imperative of our community.

Beyond the hospital, Thrive’s staff includes certified Navigators, who work with community members from Allen and surrounding counties to navigate the Federal Health Insurance Marketplace. Our staff has worked with thousands of individuals over the past five years to get them health insurance through the Marketplace. From August 2022 – February 2023, our care coordinators enrolled 953 people in Medicaid and another 2,472 people in health insurance through the Marketplace. Care coordinators have reached out to over 3,700 people across Kansas who were at potential risk to losing KanCare coverage due to the Unwinding, and have been able to assist over 250 people with renewing their KanCare or enrolling in Marketplace insurance.

” Many more, who are not included in this 24%, made phone calls to Thrive during the open enrollment periods, where our Navigators pre-screened them and let them know they would not qualify for health insurance because they made too little money. Most of these individuals falling into the Medicaid Gap work at least one job; many more hold two or three jobs. We live in a rural community where wages are lower than metropolitan areas.

Our working class families are doing everything they can to keep their families afloat. They come into Thrive excited that they will finally have health insurance, many for the first time in their adult lives, only to be told that under the current system in Kansas they are too poor to be

able to receive care. The most unfortunate part of this is how many of these people already expect this answer; they have been denied services their whole adult lives and feel it is just their lot in life to be discarded and looked over.

If Medicaid were expanded in the state of Kansas, these individuals would be able to receive preventive care, instead of using the hospital emergency room as their primary care center, which in turn reduces indigent costs at Allen County Regional Hospital. They would be able to receive the prescriptions they need to better function and contribute even more fully to the workforce and our communities.

Thrive believes that expanding Medicaid will better our community's physical and mental health, increase workforce productivity, and create more security for families. We strongly encourage and support the expansion of Medicaid in Kansas.

Sincerely,

Lisse Regehr  
President and CEO  
**Thrive Allen County**



February 9, 2024

Re: Testimony to support KanCare Expansion

From: Lisse Regehr, CEO, Thrive Kansas

Thrive Kansas is an organization committed to advocating for programs and systems that promote healthy rural Kansas communities. Our mission is to give a voice to all 105 Kansas counties at the state level. Thrive Kansas leads innovative programs that serve Kansas communities, such as KansasCares, which provides health insurance enrollment assistance for low-income individuals and also connects those in need with vital community resources. The Zero to Thrive coalition educates and advocates for early childhood education services and policies. Thrive Kansas is also the lead organization in the Southeast Kansas Recovery Resources coalition, which offers resources to those struggling with substance misuse such as removing barriers to treatment and offering peer support for those in recovery and reducing stigma through community education.

We believe that many of the individuals served by Thrive Kansas programs would greatly benefit by expanding KanCare to more Kansans who fall in the current coverage gap. As hospitals are forced to close, rural Kansans struggle to find local healthcare providers. As inflation rises, they struggle to afford basic necessities such as food, utilities, and rent. Many rural Kansas parents struggle to find safe and affordable childcare. All of these struggles have a huge economic impact on our state, and we believe that KanCare expansion would help to ease at least one of these burdens for many Kansans; the struggle to access affordable health insurance.

In 2023, Thrive Kansas participated in community conversations on the future of rural health care in Atchison, Dodge City, Colby, Hays, and Pittsburg. The events brought together community members, local and state leaders, businesses, and health care providers. The top issue raised was Medicaid expansion. We heard stories about how strict income limits to qualify for Medicaid, less than \$4.75 an hour for an uninsured single parent with two children, prevent hardworking rural Kansans from getting care. One farmer could not afford to seek treatment for his diabetes and lost his foot. Another community member who was forced to put off care, resulted in a missed cancer diagnoses that had devastating impacts.

Thrive Kansas, and the rural communities we serve, support KanCare expansion and ask you to consider the impact it will have on our state if we do not utilize federal funding to help our most vulnerable community members have access to health insurance, so they can receive the care that they need.

Sincerely,

Lisse Regehr  
President and CEO  
**Thrive Kansas**

**9 S. Jefferson Avenue | Iola, KS 66749 | 620-365-8128 | [info@thriveallencounty.org](mailto:info@thriveallencounty.org)**







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# Topeka Independent Living Resource Center

785-233-4572 V/TTY • FAX 785-233-1561 • TOLL FREE 1-800-443-2207  
501 SW Jackson Street • Suite 100 • Topeka, KS 66603-3300

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**Senate Joint Ways & Means and Public Health & Welfare Committee**  
**Sen. Carolyn McGinn, Chair**

## **Testimony in Support of Medicaid Expansion**

March 2024

Topeka Independent Living Resource Center

Topeka, KS 66603

785.233.4572

Ami Hyten, Executive Director

[ahyten@tilrc.org](mailto:ahyten@tilrc.org)

The Topeka Independent Living Resource Center (TILRC) is a civil and human rights organization. Our mission is to advocate for justice, equality and essential services for a fully integrated and accessible society for all people with disabilities. TILRC has been providing cross-age, cross-disability advocacy and services for over 40 years to people with disabilities in Shawnee County and across the state of Kansas. Our agency has been particularly interested in and committed to assuring that people who require long term services and supports have access to information, services and supports that offer choices; choices that promote freedom, independent lifestyles and dignity, including the dignity of risk.

Thank you for the opportunity to provide information about how people with disabilities would be impacted by expansion of Medicaid in Kansas.

Health insurance coverage for all Kansans IS a disability rights issue.

A substantial number of the people who would benefit from Medicaid expansion are people with disabilities. Currently, Kansans with disabilities can only obtain Medicaid by establishing both that there is a disability, and that the person is incapable of “substantial gainful activity,” essentially that the person is unemployable. Medicaid expansion would allow people who have a disability to secure health insurance coverage and care without having to remove themselves from the workforce.

***Advocacy and services provided by and for people with disabilities.***

Medicaid expansion has been shown to boost employment, most specifically for people with disabilities. People who have been determined to be disabled by social security may be capable of working and interested in doing so, but not at the peril of losing health insurance coverage. A University of Kansas study showed a direct correlation between increased employment for people with disabilities and Medicaid expansion. (“Medicaid Expansion Boosts Employment”, July 19, 2018. <https://www.sciencedaily.com/releases/2018/07/180719165043.htm>).

People with disabilities who use Home and Community Based Services rely on the labor of Direct Support Workers, most of whom are paid less than \$10.00/hour, and none of whom have access to employer-provided benefits such as health insurance. As a matter of the freedom and choice for people with disabilities to live in their own homes and communities, extending a benefit that would serve Direct Support Workers is critical to maintaining the workforce we rely on.

Medicaid expansion will benefit disabled people in Kansas; political efforts to make Medicaid expansion come at the cost of other services and supports for people with disabilities perpetuates segregation and discrimination against people with disabilities by forcing us to leave or remain out of the workforce, and by failing to support the direct support workforce we rely on to maintain our places in the community. We support the effort to expand Medicaid with no barriers, no limitations, no premiums, and no delays.



UNITARIAN UNIVERSALIST FELLOWSHIP OF MANHATTAN  
481 Zeandale Road  
Manhattan, KS 66502

Pastor Isabel Call | [pastor@uufm.net](mailto:pastor@uufm.net) | 785-748-2533

*A diverse, evolving, spiritual community acting for a better world.*

March 15, 2024

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

Thank you for receiving my testimony in support of Medicaid expansion. My name is Isabel Call and I am a pastor, a PhD-holder, and a former Medicaid enrollee. I live, work, and worship in Manhattan, Kansas.

When I first applied for social services, I was newly enrolled in divinity school and had just survived a harrowing and disabling injury. I could not walk. Confident that I would regain my earning capacity, I took out additional student loans to cover my housing, grocery, and student health insurance costs. I gradually learned that I qualified for Supplemental Security Income; later I learned about Medicaid. Accessing this support allowed for affordable doctor visits and more physical and occupational therapy, which has improved my mobility and helped me more quickly find work and build a life here in Kansas.

I tell this story because my congregation and I want you to understand that **all kinds of people benefit** from social services. The system is challenging to navigate, but it's our best option for getting our feet under ourselves (in my case, literally) and building up a life of greater self-sufficiency. I'm immensely grateful for the support I received. It was an integral part of my growing career and my capacity to serve the community.

From my math, under KanCare as it currently operates, a single mother of one has to earn less than \$625 to qualify. Can you imagine trying to make ends meet on \$700 a month and then also paying for a mammogram? Or a broken bone? Let alone considering a college degree! Medicaid Expansion would allow her to earn up to \$2270 a month and still qualify for Medicaid, and the federal government would cover 90% of the cost.

To access Medicaid, I spent hours researching and advocating for myself. I can only imagine what it would be like for someone with less education, less confidence, less access to credit for covering basic expenses — not to mention children or elders to care for along the way. The lack of Medicaid expansion is just one more barrier for people working towards lives of meaning and service in our communities. These people are essential workers, parents, caregivers, transitioning careers, and neighbors. **We should cherish these people.** My religious tradition honors the inherent worth and dignity of every person. We have faith in human flourishing. We know that we are all interdependent. In regard to Kansans suffering for lack of health care, we have not only an ethical responsibility to them but a personal stake in their success.

Thank you for considering this essential and pressing issue.

Sincerely,

Pastor Isabel Call



# United Community Services of Johnson County

## Written-Only *Proponent* Testimony Regarding Medicaid Expansion

### Board Members

Robin Rollins Harrold,

President

Dr. Putul Allen, MD

Hon. Jenifer Ashford

Rev. Cheryl Jefferson Bell

David Brown

Joe Connor

Erik Erazo

Thomas Herzog

Stephen Kyle

Patty Markley

Dr. L. Michael McCloud, PhD

Hon. Eric Mikkelsen

Rogeana Patterson-King

Jeff Short

Nolan Sunderman

Hon. Donald Roberts

Vicki Webster

Vanessa Vaughn West

Dave White

### Council of Advisors

Mary Birch

Dr. Andy Bowne

Pat Colloton

Dr. Stuart Day

Hon. Peggy Dunn

Jeff Ellis

SuEllen Fried

Ellen Hanson

Terrie Huntington

Audrey Langworthy

Hon. Mike Kelly

Penny Postoak Ferguson

Jill Quigley

Tom Robinett

Clint Robinson

Carol Sader

Brad Stratton

Charlie Sunderland

Hon. Stephen Tatum

David Warm

### Executive Director

Kristy Baughman

**Kristy Baughman, Executive Director of United Community Services of Johnson County**

Date: February 9, 2024

Kristy Baughman, Executive Director

United Community Services of Johnson County, Inc.

9001 W. 110<sup>th</sup> St., Ste 100

Overland Park, KS 66210

Dear Senators:

**On behalf of the residents of Johnson County and of all Kansas, we urge you to expand eligibility for receipt of benefits under the Kansas program of medical assistance (KanCare). Expanding eligibility will improve the health and economic well-being of Kansas families.**

Expanding KanCare would reduce the cost burden of health care for thousands of residents. For the approximately 32,000 Johnson County residents living in poverty (\$23,000/year for a family of three), the cost of health care can represent over 1/3 of their household budget. According to the Economic Policy Institute, healthcare costs a family of three in the Johnson County area approximately \$8,490 per year.

Additionally, expansion of KanCare will support housing stability by reducing medical debt and poverty for low-income households. With KanCare expansion, low-income households can redirect spending on housing, transportation, childcare, healthy food, and other needs.

Lack of health insurance exacerbates health disparities in communities of color. In Johnson County, the uninsured rate for Black residents is twice the uninsured rate for White residents, and the uninsured rate Hispanic residents is over five times that of White residents.

Expanding KanCare would increase access to primary and preventative care and would lead to improved health outcomes for all Kansans by reducing the cost of uncompensated care and enhancing continuity of coverage and care for chronic illness. Kansas could lower overall mortality rates by expanding KanCare, as many of our neighboring states have done.



To: Chairwoman Carolyn McGinn and members of the Senate Committees on Ways & Means and Public Health & Welfare  
From: David Jordan, President and CEO, United Methodist Health Ministry Fund  
Date: March 15, 2024  
RE: Proponent Testimony for SB 355

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

Thank you for the opportunity to provide proponent testimony in support of SB 355, the Cutting Healthcare Costs for All Kansans Act, which would expand Medicaid eligibility in Kansas.

The United Methodist Health Ministry Fund is a 38-year-old, \$65-million health philanthropy located in Hutchinson. Our mission is to improve the health of all Kansans. Our goal is to support innovative and sustainable health systems that ensure people have access to all facets of care.

We strongly support expanding Medicaid because it will reduce health care costs for all Kansans and strengthen and protect rural hospitals. Expanding Medicaid does not have to be political. Forty other states have already expanded Medicaid.

**Saves Kansans Money and Increases Access to Care by Fixing Eligibility Limits**

According to the latest Census figures, 8.6% of Kansas residents are [uninsured](#), which for the second straight year places the state's uninsured rate above the national average (8.0%).

The reason that so many hardworking Kansans are uninsured is because of Kansas' strict limits on who can qualify for Medicaid, the state's health program for low-income families' limits. For example, an uninsured single parent with two children must earn less than \$4.75 an hour to qualify for Medicaid. If you do not have children you cannot qualify at all, no matter how little you make.

Expanding Medicaid would increase eligibility for health care from \$9,446 to \$34,307 yearly income for KanCare would help thousands of Kansans go to the doctor when they are sick and pay for prescription drugs. We all benefit when the people of our state are healthy, productive, and financially stable.

As more of our hardworking neighbors go without coverage, it means added costs in ER bills, increased medical debt, and unpaid bills for doctors and hospitals. This uncompensated care means we all – individuals, families, businesses – end up paying more for health care. Expanding Medicaid would save Kansas about \$200 million in health care costs, and increased access to health care would reduce emergency room visits.

**Strengthens and Protects Rural Hospitals**

As noted, higher levels of uninsured Kansans, means higher levels of uncompensated care for Kansas health care providers. The high levels of uncompensated care are putting Kansas hospitals at risk financially – 59 Kansas hospitals are classified as financially vulnerable, more than any other state.

In Kansas, 44% of the uncompensated care at rural critical access hospitals could be eliminated if we expanded Medicaid. Expanding Medicaid is not the only solution but it is a critically important piece of the solution.

In fact, the biggest predictor of whether a hospital will close is whether it is located in a state that expanded Medicaid. Rural hospitals in states that have not expanded Medicaid are six times more likely to close than those located in states that expanded Medicaid.

While there's been a lot of discussion about the need to increase reimbursement rates, which we support, it will not address the crippling levels of uncompensated care that are strangling Kansas hospitals. It will not improve access to care for uninsured Kansans who make too much to qualify for Medicaid but too little to qualify for affordable coverage on the health care marketplace.

It's also important to note that there is [extensive literature](#) that demonstrates Medicaid expansion improves hospitals' finances and that the increase in insured patients and the decrease in uncompensated care outweighs challenges with low Medicaid reimbursement rates.

The evidence is clear, expanding Medicaid will strengthen and protect rural Kansas hospitals. We have lost eight Kansas hospitals in the last decade, we cannot afford to lose anymore. Let's expand Medicaid.

### **Keeps Kansas Tax Dollars in Kansas**

In poll after poll, over 70% of Kansans support expanding Medicaid. Expanding Medicaid does not have to be political. Forty other states have already expanded Medicaid. No state has reversed course.

Over the last decade, as all our neighboring states have expanded Medicaid, we have forfeited over \$6.9 billion dollars by not expanding Medicaid. Rather than bring our tax dollars back to Kansas, the money we send to Washington goes to California or New York. We must keep tax dollars here in Kansas to help Kansans afford health care and to help protect our financially vulnerable hospitals.

Additionally, the Kansas Health Institute reports, "The Federal incentives in the American Rescue Plan Act of 2021 would provide an estimated \$509 million in savings to Kansas over two years if Medicaid were expanded to low-income adults under the terms of the Affordable Care Act (ACA) — offsetting the equivalent of approximately eight years' worth of net expansion state costs."

The bottom line is that expanding Medicaid will bring billions of dollars back to Kansas to improve health, protect hospitals and improve our state budget. These dollars will benefit all Kansans as they ripple through our economy.

Again, we cannot afford not to expand Medicaid.

We urge you to join us in support of expanding Medicaid. Please be in touch with questions or if I can be of assistance.



United Way of Kaw Valley

TOPEKA OFFICE  
1527 SW FAIRLAWN  
TOPEKA, KS 66604

LAWRENCE OFFICE  
1127 IOWA  
LAWRENCE, KS 66044

785.273.4408  
UWKAWVALLEY.ORG

February 19, 2024

Jessica Lehnherr  
President & CEO, United Way of Kaw Valley  
Proponent Written-Only Testimony

Dear Chair and Committee Members:

Thank you for the opportunity to provide testimony **in support of Medicaid expansion** in the state of Kansas.

**United Way of Kaw Valley serves a four-county region – Shawnee, Douglas, Jackson, and Jefferson – in northeast Kansas.** We work with cross-sector partners and donors to create an unbreakable network of support for a **strong, healthy, and equitable community**. We live into this vision through grantmaking, collaborating, and convening stakeholders around issues that are too complex for any one program, agency, or government to handle on their own. Recently, we have added a whole family lens to our work and are applying a 2-generation approach to our grantmaking and convening. This approach calls for **serving both the adults and the children in a family in intentional and coordinated ways** to break unhealthy patterns and cycles. Many of the families served through our programs have **children who qualify for CHIP, but the adults do not have access to Medicaid.**

We know that **healthy families mean healthy adults and children** – children who are more likely to be in school learning and **adults who are more likely to be in the workforce, helping Kansas businesses**, large and small, provide goods and services and support local economies. We know that healthy families mean lower costs – **lower healthcare costs for taxpayers, hospitals, jails, etc.** because of increased access to coverage and preventative care. **Through Medicaid expansion**, we can have healthier families and reduced costs in our communities. Additionally, we know that expansion **provides crucial dollars** for the healthcare industry which would produce more than 20,000 jobs across the state, helping us **reduce the healthcare worker shortages** across the state and in the communities we serve.

In recent years, we know of **two mothers, in their 40s, served by our programs whose lives were cut short by chronic disease. Neither had healthcare coverage.** They **left behind children and loved ones who relied on them.** While there were likely contributing factors to these early deaths, we know that while both sought regular medical care for their children, they did not seek regular healthcare for themselves. In conversations with our partners, we believe that **healthcare access was a factor in their untimely deaths.**

**80% of neighbors support Medicaid expansion.** We strongly urge you to **pass this crucial legislation** so that more Kansans are covered, more families are healthy, and





United Way of Kaw Valley

TOPEKA OFFICE

1527 SW FAIRLAWN

TOPEKA, KS 66604

LAWRENCE OFFICE

1127 IOWA

LAWRENCE, KS 66044

785.273.4408

UWKAWVALLEY.ORG

more communities across our state. **Our families deserve our very best.** Thank you in advance for your efforts.

If you have any questions, you are welcome to contact me at [jlehnherr@uwkawvalley.org](mailto:jlehnherr@uwkawvalley.org).

Sincerely,

A handwritten signature in black ink that reads "Jessica Lehnherr". The signature is fluid and cursive, with the first name "Jessica" and last name "Lehnherr" clearly distinguishable.

Jessica Lehnherr  
President & CEO, United Way of Kaw Valley

Kenny Wilk  
Vice President, Government & Community Affairs

Subject: Testimony in Support of Expanding Medicaid in Kansas from  
The University of Kansas Health System

Senate and House Committee Members:

On behalf of The University of Kansas Health System, I appreciate the opportunity to provide written testimony in support of expanding Medicaid in Kansas. The University of Kansas Health System has wide-reaching roots which stretch across the state with 8 hospitals and more than 140 locations. We serve over 237,000 unique Kansans and treat patients from every county in Kansas. As the only academic health system in the state, we provide funding for 150 residents over our Medicare funding cap; and train over 600 physicians in our residency and fellowship programs. Our hospital, like many others across the state, is deeply committed to providing quality healthcare services to those we serve throughout the state of Kansas. Medicaid expansion represents a crucial step towards improving access to care, enhancing the financial stability of healthcare providers, and ultimately promoting the well-being of Kansans.

Expanding Medicaid would have several positive impacts on our hospitals and the communities we serve:

**Increased Access to Care:** Medicaid expansion will extend coverage to approximately 150,000 Kansans who currently fall into the coverage gap. Many individuals in our community are working in low-wage jobs without access to employer-sponsored health insurance. Expanding Medicaid would provide these hardworking individuals with the necessary coverage to access essential healthcare services, preventive care, and chronic disease management.

**Financial Stability for Hospitals:** The current reality is hospitals often bear the burden of uncompensated care for the uninsured. Medicaid expansion would reduce the number of uninsured patients, leading to a decrease in uncompensated care costs for hospitals. This, in turn, would contribute to the financial stability of healthcare institutions across the state, allowing us to reinvest in crucial resources, infrastructure, and services for our community.

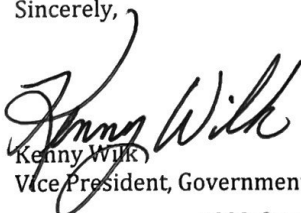
**Economic Benefits:** The expansion of Medicaid would also bring substantial economic benefits to the state. By drawing down federal funds to cover a significant portion of the expansion population, Kansas can inject much-needed resources into the healthcare sector, supporting jobs, and fostering economic growth. This strategic investment not only improves health outcomes but also stimulates the local economy.

**Enhanced Preventive Care:** Medicaid expansion facilitates access to preventive services, reducing the burden of preventable illnesses and complications. Timely preventive care not only improves individual health but also contributes to the overall well-being of our community by reducing the prevalence of serious and costly health conditions.

In conclusion, expanding Medicaid in Kansas is a critical and compassionate measure, which aligns with our health system's mission to provide accessible and high-quality healthcare to all Kansans. It is a sensible and pragmatic solution to address the healthcare needs of our communities while supporting the financial viability of healthcare providers. I urge the Committee to consider the significant benefits Medicaid expansion would bring to our state and recommend its implementation for the betterment of all Kansans.

Thank you for your time and consideration.

Sincerely,



Kenny Wilk  
Vice President, Governmental and Community Affairs



From: Patrick Sallee, President & CEO, Vibrant Health  
RE: Testimony to support KanCare expansion  
February 7, 2024

Vibrant Health is the dominant community health center in Wyandotte County. Our mission is to provide access to respectful, empowering, culturally sensitive and appropriate high-quality health care for the community, regardless of socio-economic obstacles.

In 2024, Vibrant will serve nearly 20,000 patients at four clinics located in Wyandotte County. We are a recognized Patient-Centered Medical Home practice. Services include preventative care, chronic disease management, acute medical care, women's health care, behavioral health care, dental care, and pharmacy.

90% of the patients we are honored to serve in our clinics are uninsured or insured through KanCare. We see patients every day who have elected not to access care or put off routine health care over worries about the cost of care. Additionally, many of our patients who are recommended for specialty care don't follow through with a referral because they feel it will be too expensive.

Wyandotte County ranks 102 out of 105 for overall health outcomes and last in Kansas for health factors. Among the 167,046 Wyandotte County residents, nearly 20% are uninsured and 16% live below the federal poverty level. In fact, if you live in certain urban zip codes within Wyandotte County your life expectancy can be as much as 20 years shorter than neighboring Johnson County.

At Vibrant Health we believe that equitable access to healthcare is a human right, and the expansion of Medicaid in Kansas would provide additional healthcare access to thousands of our neighbors and community members in Wyandotte County.

In closing, Vibrant Health and the community we serve fully support Medicaid expansion in Kansas. Please help our patients and neighbors live longer, healthier lives!

Sincerely,

Patrick Sallee  
President & CEO  
Vibrant Health

March 15, 2024

TO: Alliance for a Healthy Kansas – Medicaid Expansion Testimony  
FR: Connie Brown Collins, Founder/Director, Voter Rights Network of Wyandotte County

Committee Chairs, Sen. McGinn and Rep. Landwehr:

My name is Connie Brown Collins, Voter Rights Network of Wyandotte County, Kansas City, Kansas. Our organization advocates on issues that impact underrepresented communities in Wyandotte and Johnson Counties. Healthcare Access is one of those issues. We therefore urge support for Medicaid Expansion via HB 2556 and SB 355.

Wyandotte County is the most diverse county in Kansas. We are also one of the counties most in need with nearly 16% of residents in poverty based on the last Census data. Further, nearly 18% of residents under age 65 are without health insurance. Many work, but fall into the coverage gap.

When my husband was in in-home hospice care, one of his healthcare workers came to me saying she could no longer serve his needs due to health problems she was having and her inability to qualify for Medicaid in Kansas. She worked at a local fast-food restaurant and provided in-home CNA care during her off hours. She told me that she had to move to Missouri in hopes of qualifying there. I hated to lose her since she was an excellent caregiver and former care provider at a well-known Johnson County continuing care facility. However, I was gratified to hear that her health and well-being were paramount concerns and she was being proactive in addressing the problem.

Current statistics report that 8,713 uninsured Wyandotte County residents would become eligible for Medicaid Expansion if enacted, creating 2,642 new jobs. Unfortunately, some, like my husband's caregiver, had to move to other states to receive immediate and necessary healthcare services.

Kansas and Kansans are losing out by not expanding Medicaid. Kansas has lost nearly \$7 billion in additional federal funding from the lack of Medicaid expansion. Not only won't it cost our state a cent, it gives 150,000 Kansans access to affordable health care.

Medicaid Expansion also lowers costs for everyone. It cuts health care costs for Kansas families, hospitals, businesses, and jails. Currently, when one Kansan doesn't have health insurance, other Kansans pay for it. If an uninsured Kansan goes to the emergency room and can't afford to pay for care, the hospital must raise prices for other patients in order to cover the costs.

Further, Medicaid Expansion would protect rural hospitals, and likely would have prevented eight rural hospitals from closing, gravely impacting surrounding businesses and costing rural communities thousands of jobs. The result of non-expansion is that 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. The expansion would also provide relief for county jails that have been burdened with providing care for admitted inmates.

For these and myriad other reasons, Medicaid Expansion in Kansas is crucial. We implore the committees and the legislature to act NOW to support healthcare access for the hundreds of thousands of Kansans without it. Please vote for HB 2566 and SB 355!

Respectfully submitted,

Connie Brown Collins  
Voter Rights Network of Wyandotte County  
Kansas City, KS

**TO:** Sen. Rick Billinger, Chair  
Senate Committee on Ways and Means

**FROM:** Brian Barta, CPA, William Newton Hospital Chief Executive Officer

**DATE:** March 15, 2024

**RE:** Proponent SB 355

---

Thank you, Chairperson Billinger and members of the Senate Committee on Ways and Means, for allowing William Newton Hospital (WNH) the opportunity to provide testimony in support of Senate Bill 355.

This bill comes at a time when the healthcare industry in Kansas is providing almost \$1.2 billion in uncompensated care to our state. 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.

WNH is a 25-bed Critical Access Hospital located in rural Winfield, KS with about 350 employees across seven facilities in three counties. WNH's economic impact in our service area in 2023 was \$26.6M in wages and benefits, \$5.6M in community benefit, and \$2.6M in local spending. The biggest impact KanCare expansion could make on rural hospitals like WNH is the cost of uncompensated care, which for our hospital is approximately \$2.7M per year.

The majority of services for uncompensated care are for emergency room visits and emergency surgeries. In 2023, WNH's emergency room volumes were at an all-time high, approaching 10,000 visits for the year. Many of these visits would have been avoidable if the patients had healthcare coverage and sought preventative care to help address and treat their condition, instead of waiting until they couldn't bear it any longer and presenting to our emergency department.

WNH and the 103 other rural Kansas hospitals can provide preventative primary care services and screenings at a much lower cost, instead of utilizing the high cost and limited emergency department resources. Preventative care is also tremendously better for patients because they can easily monitor and manage their health through regular visits instead of waiting for a catastrophic event that forces them to seek treatment.

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. In the counties where WNH has facilities, Cowley, Chautauqua, and Elk, KanCare expansion is estimated to generate an additional \$8.9 million in healthcare spending annually. This means over 1,000 patients in these counties would become eligible for KanCare.

For these reasons, we ask that the committee recommend favorably SB 355. Thank you for your consideration of our comments.

**TO:** Sen. Beverly Gossage, Chair  
Senate Committee on Public Health and Welfare

**FROM:** Brian Barta, CPA, William Newton Hospital Chief Executive Officer

**DATE:** March 15, 2024

**RE:** Proponent SB 355

---

Thank you, Chairperson Gossage and members of the Senate Committee on Public Health and Welfare, for allowing William Newton Hospital (WNH) the opportunity to provide testimony in support of Senate Bill 355.

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For these reasons, we ask that the committee recommend favorably SB 355. Thank you for your consideration of our comments.



March 15, 2024

Dear Senator McGinn and the Joint Committee on Ways and Means and Public Health and Welfare,

I am amongst the 80% of Kansans who support Medicaid expansion. I am writing this letter to express my support for SB 355.

As the CEO of the Winfield Area Chamber of Commerce, the state of the economy in Kansas and in my town is my top priority. **Medicaid Expansion would grow our economy.** Medicaid expansion would help business owners save nearly \$80 million each year and would create nearly 23,000 new jobs in Kansas. Furthermore, it would not cost our state additional dollars, and would allow us to access federal money we have been missing out on for years.

It is a well-known fact that rural hospitals in our state are struggling. My local community hospital, William Newton Memorial Hospital would benefit from Medicaid expansion through the additional revenue brought in by patients who are able to obtain health care through Medicaid expansion. The state of our local hospital directly impacts the well-being of our community.

Even more important than the economic impact is the effect it will have on the lives of Kansans. Medicaid expansion will allow to opportunity to obtain affordable health care for 150,000 additional people in our state. These are good people, hard-working people, who simply don't make enough to afford health insurance. These people deserve the opportunity for health care.

The legislation that has been proposed is a pragmatic approach to providing health care to working Kansans. I encourage you to whole-heartedly support legislation to expand Medicaid.

Sincerely,

A handwritten signature in black ink, appearing to read "Sarah Werner". The signature is fluid and cursive, with the first name "Sarah" being more prominent than the last name "Werner".

Sarah Werner

CEO, Winfield Area Chamber of Commerce





Legislative Testimony  
Charles L. McKinzie II, Sr. Pastor  
Grace United Methodist Church of Winfield, KS  
Public Hearing on KanCare Expansion

Kansas Policymakers –

Thank you for allowing me the opportunity to provide testimony in support of KanCare Expansion.

I am Pastor Charles McKinzie and have the honor of serving the parish of Grace United Methodist Church in Winfield, KS. Grace is a historic congregation established in 1888. This congregation has always been steeped in the Methodist traditions established by John Wesley. One of these core ideals has always been the right to health care.

The United Methodist Social Principles say:

*Providing the care needed to maintain health, prevent disease, and restore health after injury or illness is a responsibility each person owes others and government owes to all, a responsibility government ignores at its peril. In Ezekiel 34:4a, God points out the failures of the leadership of Israel to care for the weak: "You don't strengthen the weak, heal the sick, bind up the injured, bring back the strays, or seek out the lost." As a result all suffer. Like police and fire protection, health care is best funded through the government's ability to tax each person equitably and directly fund the provider entities.*

With over 150,000 *working* Kansans unable to access affordable health coverage and over 70% of all Kansans in support of KanCare expansion, it would seem that the only objections to expansion are truly partisan tomfoolery. It is morally reprehensible to continue to keep this issue from being debated on the floor. On behalf of my congregation, I urge you to give a bill the opportunity to be considered and vetted.

The economic impacts of this bill are widely received by experts to be positive for this State. Others who will provide testimony will undoubtedly name the figures for you. I bring you only the moral argument. Jesus taught that the ways we treat those on the margins of society are a reflection of our love for God. Policymakers I ask you: what will your response to the least among us be?

As your constituents we will be anxiously awaiting your response by the actions you take.

Ad maiorem Dei gloriam,

Ptr. Charles L. McKinzie II  
Grace United Methodist  
320 College St Winfield, KS 67156  
620.221.0618  
charles@gracewinfield.com

Legislative Testimony  
Pam Martin, Chairperson  
Women for Kansas, Barton Co. Chapter  
Hearing on KanCare Expansion Bills  
Friday, March 15, 2024

Kansas Policymakers:

Thank you for holding a hearing on the Kancare Expansion Bill. I am writing today in support of expanding Kancare.

Good business models advise investment in employees. If you look at Kansas as a business, not investing in citizens who are on the low end of the economic scale makes no sense. Not providing insurance protections costs all of us more money in increased medical expenses and contributes to a shortage of employees.

As an example, currently in Barton and Stafford Counties, efforts are underway to attain additional quality childcare, which includes finding good employees. According to Ziprecruiter, the average childcare employee in Kansas makes \$13 per hour. That puts them squarely in the insurance gap, making too little for Medicaid and too much for the health insurance exchange. Insurance coverage is rarely included as a benefit for childcare employees. The same can be said for those who care for the elderly. It's already hard to attract employees to these jobs due to low pay, but throw in the lack of insurance coverage and it's becoming nearly impossible.

It is counterintuitive to turn down funds that would help the Kansas economy. Kansas has lost more than \$6 BILLION since 2014 by not implementing expansion. \$6 billion that could have helped Kansas citizens. Kansas taxpayers have paid \$7 BILLION in taxes for Medicaid expansion for other states. While it is admirable to be altruistic by providing our tax dollars to help US citizens in 40 states, it's way past time for Kansas to utilize those dollars for its own citizens.

Quoting from the recent study by the non-partisan Kansas Health Institute: "...the change in income eligibility would result in 151,898 people enrolling in KanCare — 106,450 adults and 45,448 children. Those numbers include 68,236 adults and 16,377 children who are currently uninsured".

About 68.9% of the adults are already working at least part-time, according to the KHI analysis. It isn't clear how many of the remaining 31.1% would be excluded under Kelly's work requirement, but KHI determined 19.1% of the unemployed adults have a disability, 16.1% are students and 3.8% are veterans".

Projections for Kansas state government surplus in fiscal year 2024 is \$2.8 billion, with \$1.7 billion in the rainy-day fund. That is more than enough funding to decrease, or eliminate, the waiting list for disability benefits and expand Kancare, especially with federal funding incentives for the next 8 years. It doesn't have to be an "either or" decision.



January 25, 2024

Women for Kansas is a non-partisan organization that advocates for moderate policies. We are a grassroots initiative designed to energize & educate individuals & groups of women (and men) across the state for the purpose of promoting moderation in the political arena throughout Kansas, both through our 11 chapters, our weekly newsletter, our webinars, our social media, and our conferences. We reach 20,000+ Kansans.

For several years, **Women for Kansas has supported Medicaid (KanCare) Expansion**, and this year we've made it our **top priority**. Here are a few of the reasons Women for Kansas asks that Medicaid Expansion becomes law this year:

- Current Medicaid rules in Kansas provide Medicaid to those with none or little income. However, many low-income working Kansans make "too much." As an example, if a working single mom of three earns \$9,500 gross per year, she does not qualify. At the same time, she would have to make \$24,000 a year to be eligible for affordable health insurance in the market. She is caught in the "gap." Unfortunately, 150,000 Kansans are caught in this gap. This serves as a disincentive for the low-income working poor to seek higher paying jobs (if they are even able to do so) and keeps them in an unstable situation. Most of the people caught in the gap do work, but their jobs pay little---fast food and restaurant employees, farmers, veterans, those looking for work, caregivers, disabled, mentally challenged, etc. Several of those in our chapters or their families have had negative health experiences because of being "in the gap." Each of our chapters has made a significant effort to promote Medicaid Expansion and it's been a highlight of our newsletters and conferences as well.
- Our organization has seen **all our neighboring states pass expansion**, and to date **40 states have expanded, plus D.C.** Other states will soon follow, and Kansas will continue to be left behind unless legislators pass expansion this year. Currently, Republican legislative leaders in **three additional conservative southern states have signaled they are now open to adopting full expansion---Mississippi, Alabama, and Georgia.**
- No state that has passed Medicaid Expansion has reneged.
- Between **70% and 80% of Kansans support Medicaid Expansion**...and have for several years.
- **59 of our 120 rural Kansas hospitals are at risk of closure; 8 have already closed** in the last few years. More hospitals than any other state. People without health insurance end up in emergency rooms with serious health issues, creating heavy expenses for all hospitals and making our rural, smaller hospitals more vulnerable. When a community hospital closes, the entire community is negatively affected.

- **City councils throughout Kansas have voted to have Medicaid Expansion** as one of their top legislative priorities. The Wichita City Council voted in favor this week. As J.V. Johnston, a newly elected conservative City Council member says, “Medicaid Expansion is the right thing to do for a lot of people.”
- We’ve been studying expansion throughout the USA since 2016, and sound research indicates **states that have expanded experience positives in their economy**. The US government pays 90% of the cost, and the state only pays 10%, and increases in the economy and increased taxes from individuals with better jobs result in no loss of revenue for the state. Rural hospitals (and city hospitals) are saved, and jobs are added. Additionally, **this year’s proposal for expansion includes a work requirement** for those who are able.
- To date, **Kansas taxpayers have paid in over \$7 BILLION for expansion**---but those dollars have all gone to states that have expanded—none of this tax money has come back to Kansas. This is inexcusable.
- The most important reason to pass Medicaid Expansion, though, is to **help vulnerable Kansans gain access to healthcare**. Many have died unnecessarily without insurance that they could have qualified for in 40 other states! You can read stories about those who’ve been affected at <https://expandkancare.com/coverage-gap/>

Women for Kansas strongly endorses Medicaid Expansion, and we are reaching out to our legislators to encourage them to support expansion. We request that Medicaid Expansion pass out of committee, be debated on the floor, and voted upon this spring. Expansion shouldn’t be political. It is logical and a win-win for Kansas. Senate and House leadership should allow Medicaid Expansion to be discussed openly and then vote in support of expanding Medicaid. The reasons for not passing it to date have all been answered. That is why so many conservative states (like our neighboring states) have passed it.

Susan Osborne  
 State Executive Committee  
 Women for Kansas  
 WomenforKansas.org  
 PO Box 8774, Wichita, KS 67208  
[sosborne46@cox.net](mailto:sosborne46@cox.net)  
 316-680-4868



Written Testimony  
Public Hearings on KanCare Expansion  
Thursday, March 14, 2024

To the Esteemed Members of the Kansas Legislature,

On behalf of the Wyandotte County Health Equity Task Force (HETF), we submit our testimony to express our unwavering support for expanding KanCare, Kansas's Medicaid program. Our commitment comes from our deep understanding of our community's health needs, and it aligns with our vision that every resident of Wyandotte County has equitable access to healthcare.

With our diverse population, Wyandotte County faces unique health challenges. Notably, Wyandotte County ranks next to last in the Robert Wood Johnson Foundation's annual County Health Rankings in Kansas. About 16% of our residents are uninsured, and approximately 22% of children live below the poverty line. The impact of COVID-19 has further exacerbated these disparities, underscoring the urgency for expanding healthcare access. As one of only ten states in the country without expanded access to Medicaid, we believe the time is now for Kansas to stand up for justice in our healthcare system.

Expanding KanCare is not merely a legislative action but a crucial step toward addressing long-standing health inequities. This expansion could extend healthcare coverage to approximately 150,000 Kansans, including about 7,466 Wyandotte County residents, including hardworking individuals caught in the coverage gap due to their income levels. The positive ramifications of such an expansion include better health outcomes, economic benefits through job creation, and enhanced public health preparedness.

Our advocacy for KanCare expansion is grounded in our belief that healthcare is a fundamental right, not a privilege. The collaborative efforts of the HETF, which includes community leaders and health experts, demonstrate the power of collective action to address health disparities. By prioritizing vaccine equity in underserved neighborhoods, engaging youth in our community, and advocating for systemic changes, we've laid a foundation upon which better healthcare access can build a healthier community.

Building on this foundation, we recognize the pivotal role of expanding KanCare as an essential next step toward creating a more equitable future for all. Expanding KanCare would ensure that every Kansan, regardless of socioeconomic status, has the chance to lead a healthy, productive life.

We urge the Kansas Legislature to expand KanCare. Thank you for considering our testimony.

Sincerely,

Members of the Wyandotte County Health Equity Task Force

*The HETF is a collaborative partnership between the Unified Government of Wyandotte County's Public Health Department and the following organizations:*

*Bethel Neighborhood Center / El Centro, Inc. / JUNTOS Center for Advancing Latino Health / KCKPS USD 500 / KU Medical Center / LISC KC / Midland Care Connection / NBC CDC / Salem Missionary Baptist Church / Swope Health / Vibrant Health*

<https://www.wycohetf.org>



## Zeta Phi Beta Sorority, Incorporated

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Chi Delta Zeta Chapter Lawrence-Topeka

Regina Singleton, President

### **To the Members of the Kansas House of Representative House Committee on Health and Human Services**

Re: HB 2556

We, the members of Zeta Phi Beta Sorority Inc., Chi Delta Zeta Lawrence-Topeka, Chapter offer our support for the expansion of Medicaid in Kansas. Not only are we pillars in the Lawrence-Topeka communities, but we also care about the welfare of the entire State of Kansas. Many of us are residents of this great state, were born and raised in Kansas and have family members and friends that would benefit tremendously from Medicaid Expansion. However, we are just as concerned about the Kansas who could benefit from Medicaid Expansion that we work with every day in the schools, daycare/pre-school settings, the mental health outpatient and inpatient facilities, the young mothers (African Americans, Native Americans, and Hispanic Americans) who are the most at risk for maternal deaths, high risk pregnancies and low birth weight infants, these women and children need Medicaid Expansion. The behavioral challenged, the autistic child and the adult disabled. All these groups are citizens of Kansas, and they all deserve the best health care that we as a State can provide them.

Our chapter membership is comprised of Democrats, Republicans, and Independents and together we support Medicaid expansion and see it as a vital step towards ensuring access to healthcare for all Kansans.

Kansas has not expanded Medicaid while other surrounding states have, and it has been proven to be a success in those states. So, we ask the question... Why not?

Medicaid expansion is **intended to expand healthcare coverage:**

- **to low-income working families and individuals**
- **individuals and families who currently fall into the coverage gap.**
- **increase access to essential healthcare services**
- **increase a healthier community**

#### **The Benefits of Medicaid Expansion:**

- Lower fees for preventable care
- A strong and healthy workforce
- Positive economic propositions

We understand that there may be concerns about the financial impact of Medicaid expansion on our state budget. According to the governor, the federal government will pay for most of the expansion while the state only pays 10% therefore our taxpayers do not incur any extra cost. It is also important to note that studies have steadily shown that the long-term benefits are greater than any initial costs.

In conclusion, we encourage you to support Medicaid expansion in Kansas. As previously stated, we can improve the health and well-being of many Kansans throughout our great state as well as strengthen the economy. We, the members of Zeta Phi Beta Sorority Inc. Chi Delta Zeta Lawrence-Topeka Chapter urge you to take a step towards providing a future where health care is accessible to everyone.

Thank you for your consideration,

Sincerely,

The 40 Members of Chi Delta Zeta Lawrence-Topeka, Chapter

Regina Singleton, President  
Kansas State Z-HOPE Coordinator  
Chi Delta Zeta Chapter  
Zeta Phi Beta Sorority, Incorporated  
[XDZ-B@kansaszetas.com](mailto:XDZ-B@kansaszetas.com)



March 17, 2024

Dear Chairman and committee members,

I am writing today to thank you for the opportunity to provide testimony in support of Medicaid Expansion. This is such an important issue and will not cost Kansans a single penny.

It is estimated that 150,000 Low Income households would now have access to Medical care, \$700 million in annual federal funding would be added to the state and protect Kansans from medical debt and help rural Kansans have access to quality healthcare.

Kansans want, and need low-wage families to have access to Medicaid Expansion for coverage they can count on if they are not offered health insurance through a job or cannot afford to buy it on their own.

We need to protect Kansans and do the right thing by expanding Medicaid.

I plead with you to support Medicaid Expansion.

Sincerely,

Kerry Adam

Overland Park, KS



March 13, 2024

I'm writing to support the passage of the HB 2556 and SB 355 Medicaid expansion bills.

Although I'm fortunate enough to be covered under an employer-provided health care plan, I believe that all Kansans - regardless of income level or wealth - have heretofore suffered the ill effects of our legislature's refusal to support the wellbeing of our citizens via Medicaid expansion.

This expansion is 100% funded by the federal government, and will make a major difference in the lives of 150,000 Kansas who are currently struggling without adequate health insurance. The drag on our economy, our communities and our rural health care facilities caused by rejecting these federal funds can't be overstated.

I believe we shouldn't require low-income families and individuals to live in complete destitute poverty in order to obtain access to essential health services, and that those who are struggling economically should have their efforts to achieve productive employment rewarded - rather than stripping a single parent and their children of health care access for earning more than \$26,000/year. Our current Medicaid program guidelines disincentivize work and human flourishing for the most backwards, small-minded and spiteful reasons. This legislation, while imperfect, would be a major step in the right direction.

Stuart Aiken

March 20<sup>th</sup>, 2024

Senator McGinn, Chair  
Senate Ways & Means Committee  
Senate Public Health & Welfare Committee  
Re: SB 225 Amend

Chair McGinn and Committee Members:

I am writing today as a Kansas physician on behalf of my patients living with MS and an activist with the National Multiple Sclerosis Society. I ask the Senate Ways & Means Committee and the Senate Public Health & Welfare Committee to remove work requirements in SB 225 and expand Medicaid to give all Kansans the opportunity to access health care.

I am a pediatric neurologist at Children's Mercy Kansas City and I live in Overland Park, Kansas. Regionally, I am our expert in caring for children with progressive autoinflammatory conditions including multiple sclerosis, opsoclonus myoclonus ataxia syndrome, and cerebral forms of systemic lupus all of which lead to significant intellectual and physical disabilities when not treated appropriately.

I see my Kansan patients struggling in the current economy partially because of the expense of their medications. The annual cost of the only FDA-approved medication for multiple sclerosis in pediatric patients at Walmart with a coupon for the generic form is a little over \$3700. Imagine that the day you turned 19 years old finding out that your Medicaid coverage lapsed and what it would be like to try to find an entry level job with a high school degree that covered your health insurance well enough or to get a minimum wage position where one hour of every day was dedicated to just the single pill you take daily, let alone the costs of lab work, hospital visits, and the regular MRI imaging required for these patients.

As soon as I finish this letter, I will be working on a letter for one of my Kansas patients with multiple sclerosis that is having trouble getting disability status that would allow her Medicaid coverage. Multiple Sclerosis can be an insidious and often invisible disease when it starts, with children that get the disease having on average two flares of their disease per year for the first 6 years. As patients have more flares of their disease over time or a single severe flare event, they can lose the ability to walk or become incontinent for the rest of their lives. The \$10-per-day pill I mentioned above reduces the chance of these flares by 90%, prolonging the time for these patients to become disabled significantly and keeping the disease completely controlled for some. Because my patient is not severely disabled yet, cannot work outside in high heat as it can cause flares of her disease, and has not been hired at any entry level position for a job that can be attained with a high school

degree that has health insurance available on day one, she is not currently qualifying for Kansas Medicaid through disability. Expanding Medicaid and removing work requirements would help patients like mine be able to afford their medications and keep them from becoming severely disabled enough to qualify for our current requirements for disability status.

Please remove work requirements and expand Medicaid for all Kansans.

*Tyler Allison, MD*

(signed electronically)

Tyler Allison, MD

Pediatric Neurologist

Tallison@cmh.edu

Joint Committee on Ways and Means and Public Health and Welfare

From: Thomas Alonzo, 507 No. Thompson, Kansas City, Kansas 66101

Honorable Chair and Committee,

I appreciate the opportunity to submit written testimony in support of Medicaid Expansion in Kansas. I am a lifelong resident of Wyandotte County, Kansas City, Kansas.

Wyandotte County has some of the poorest health outcomes in the State of Kansas.

As a local activist in the Farmers Market Community, the LGBTQ+ Community and for the People of Wyandotte County as a volunteer participant on the Unified Government's Advisory Commission on Human Relations and Disability Issues, I can attest to the fact that the population of uninsured and underinsured residents in Wyandotte County represents one of our biggest challenges in meeting the health needs of our county.

We are the most diverse community in Kansas and one of the unique counties with this type of diversity in the United States. We have a large immigrant and refugee population, a larger than average unemployment rate and a larger than average poverty rate and yet when you come to Wyandotte County, you see people working so hard to live their lives and to make the lives of their families better.

Kansans overwhelmingly support Medicaid Expansion by 71% or more

Many of our rural hospitals have either closed or are in danger of closing. In fact, while I know there is animosity from some of our legislators towards the urban communities and in particular, Wyandotte County, the fact is, there are similar health issues in the rural counties in Kansas. I often see the legislature pitting the interests of rural communities against the interests of urban communities when in fact, with regard to health outcomes, they are more similar than they are different. Some have used this as a way to keep voters divided and in fact, some of this is born out of racism, whether you acknowledge it or not.

Only 10 states in this country have refused to expand Medicaid. And now, even Mississippi is considering passing Medicaid Expansion....Mississippi. Our surrounding states have passed some form of Medicaid Expansion, but not Kansas.

Meanwhile, Kansas sends millions of tax dollars to other states to fund their Medicaid. How smart is that? Oh, I know some of you have an answer for that with the "accounting" some of you have cooked up that has very little accuracy...in fact, it's mostly misinformation and deception, which is shameful.

The majority of your constituents want Medicaid Expansion. Medicaid Expansion is economically sound for Kansas, no matter what some of you try to say. It is incumbent

upon you as a governing body, if you truly consider yourselves leaders and representatives of a diverse population in a state that is changing rapidly, demographically, socially and economically. Don't pass up this opportunity to do something truly good for the state.

Thank you.

Thomas A. Alonzo

March 16, 2024

Dear Chairman and committee members,

I am taking time today to thank you for your attention to my testimony urging you to expand Medicaid for Kansans.

As I am sure this committee is aware, one of the biggest contributors to poverty is medical debt. The members of the current legislative session have the opportunity to help protect Kansans from this by expanding KanCare. It would allow 150,000 Kansans who fit into a current insurance gap to afford coverage and gain access to medical care. These are real Kansans with real families that need our help.

This expansion has the potential to reduce healthcare costs for *everyone* by allowing more access to medical care before an expensive ER visit is necessary. This is especially important in our rural communities who have limited access to facilities to have their medical needs met. With so many rural hospitals closing their doors, they need all the help they can get.

And it seems now is the time to act. Federal law is providing a signing bonus for holdout states such as KS to implement expansion. This means KS would not only gain access to \$700 million in annual funding, but an additional \$450 million in the first two years. And the best part is, it doesn't cost KS taxpayers anything more.

I close by thanking you again for your time and urging you support the expansion of KanCare.

Jennifer Ancell  
Shawnee, KS

February 10, 2024

As a Kansas retired school nurse I know the importance of consistent health care for children. Children with consistent health insurance are much more likely to have access to preventive health services that are so crucial to success in school; staying current on vaccines and annual flu shots, preventive dental care, access to vision correction, early identification of health conditions.

Parents who do not have health insurance often delay taking their children to medical services due to the high cost of care that will prevent them from fully paying the rent, utilities, groceries or other bills. Often these delays in accessing health care cost the children valuable time in school and increase the likelihood of needing special education services to get them caught up with their peers.

What I am asking you to consider is the cost savings that it brings to the community at large even if you do not consider the value that it will bring to each individual family that you serve representing as your constituents.

In my retirement I worked as a visiting nurse to primarily elderly individuals in their homes, and in assisted care facilities. As you know a significant proportion of Medicaid money is spent on our aging population in Kansas and even more will be needed as the baby boomer generation continues to age. So many of our rural hospitals have had to close due to lack of payment for services from our aging farmers, ranchers and those who value living in rural communities.

Please support Medicaid expansion to communicate to our rural Kansans that you value their contributions and support their lives as their medical costs increase in their retirement. Many senior Kansans do not have the financial resources to pay for the more expensive part B of Medicare and could benefit from the Medicaid expansion. Maybe with Medicaid expansion the healthcare services will return to our rural communities.

Karen Anderson Harvey

March 15, 2024

I support the Medicaid Expansion because it just makes sense. 150,000 low income Kansans would gain access to medical care. It protects Kansans from medical debt. Healthcare for everyone would be reduced. We would receive millions in federal funding. It would save rural hospitals from having to close. And best of all it won't cost taxpayers a cent.

Please support Medicaid expansion for the good of Kansas.

Becky Anderson



March 15, 2024

Thank you for the opportunity to provide testimony in support of expanding KanCare, the Medicaid program in Kansas. Medicaid expansion would provide healthcare coverage to over 150,000 low-income Kansans who are currently uninsured, improving their health outcomes and financial stability. It would also bring over \$500 million in federal funding into Kansas each year, stimulating the state's economy and creating thousands of new jobs in the healthcare sector. After accounting for cost savings and increased revenue, multiple nonpartisan analyses have found that expansion would have a net positive impact on the state budget.

Expanding Medicaid is critical for supporting rural hospitals and clinics in Kansas, many of which are struggling financially and at risk of closing without the increased revenue that expansion would provide. It would also help address health disparities and promote health equity by providing coverage to many people of color, individuals with disabilities, and low-income workers who currently lack access to affordable care. By increasing access to preventive care and early treatment, Medicaid expansion can help reduce costly emergency room visits and hospitalizations, saving money for hospitals and the state.

41 states have already expanded Medicaid, and evidence shows it has improved health outcomes, reduced uncompensated care costs for hospitals, and strengthened state budgets. Without expansion, many low-income Kansans fall into a coverage gap - earning too much for traditional Medicaid but too little for marketplace subsidies. Expansion would close this gap and ensure no one is left behind. Medicaid expansion is also vital for addressing the opioid epidemic and expanding access to substance use disorder treatment. In expansion states, access to addiction treatment has increased by 18%.

Providing healthcare to more Kansans is simply the right thing to do. In a prosperous state like ours, no one should have to go without the care they need. We urge you to support Medicaid expansion and invest in a healthier future for all Kansans. Thank you for your consideration.

Jason Anderson

FEB 09, 2024

To: Kansas Legislature on Medicaid Expansion

Reference: Testimony in Support of the Expansion of Eligibility for  
KanCare

Kansas is one of only 12 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. Many are between the ages of 50 to 64. We all struggle without access to affordable health care.

NOTE; Every state that borders Kansas has expanded Medicaid health care.

kirk anderson

wichita, kans.

registered VOTER

February 9, 2024

In 2014 my brother-in-law was diagnosed with glioblastoma (brain tumor), from which he subsequently died. He was 64 when he was scheduled for surgery at Wesley Hospital in Wichita. He didn't show up for it. While we were not close, he gave my name as a point of contact at his apartment. When we went to check on him, he was semi-delirious and explained that he failed to meet the taxi he called to take him to the hospital.

We were able to get him admitted to Wesley, where he subsequently underwent surgery with radiation therapy to follow up. He became eligible for Medicare while undergoing this treatment, but his hospitalization continued for a long time with much of it in ICU because of frequent, unpredictable seizures when he often became violent. The case worker at Wesley searched far and wide to find a long term care facility that would accept him. She was finally able to place Tom in the Catholic Care Center in Bel Aire. He remained there until his death in 2015. Our family ordeal is over, but we don't know what would have happened if he hadn't qualified for Medicaid. I know there is pressure to include a work requirement to qualify, but I hope there is legislative consideration for people who find themselves in a predicament like Tom's. Work was absolutely out of the question for Tom.

There seems to be plenty of evidence that lower income Kansans need Medicaid Expansion and that there is broad-based political support for it. I support it, and I hope you will cast your vote to make it happen.

Glen Armbruster  
1009 N Stratford Ln  
Wichita, KS 67206  
316-213-1660  
[ICTGlen@gmail.com](mailto:ICTGlen@gmail.com)

March 15, 2024

I urge the Kansas House and Senate to expand Medicaid in Kansas. Doing so will help low income individuals, disabled people, and health care providers. Medicaid expansion would also enable more rural hospitals to stay open. Right now, a family of three needs to earn less than \$9,800 per year to qualify. Expanding Medicaid would allow them to earn more money and still qualify for Kan Care.

By the end of 2023, Kansas had turned away nearly \$7 billion in tax dollars since 2014. This comes from tax dollars that Kansans are already paying. This is plain stupid!

There is no down side for Medicaid expansion.

Sincerely,  
Audrey Asher  
6501 W 106th St  
Overland Park, KS 66212

2/9/24

Good morning my name is Michael Audley. I have twins that are stage three autistic and nonverbal. Early intervention is everything they are eight now and my son is self harming to a point where I think he's going to have brain damage. The older and stronger he gets the more fearful I am about his future. I am a hard-working, blue collared employee that just makes above where I would need to be at to get any help from Kansas. Expanded Medicaid would allow my kids to have the proper help that they need because at some point if this trend continues my son is going to weigh on the state anyways financially when he's 18. All this could be avoided with early intervention. Expanded Medicaid is literally paid for by the federal government. Honestly, I'm disappointed in the leadership we have in Kansas. Shame on you. Any questions please give me a call 316-727-4358.

January 26, 2024

Hello,

My name is Crystal and I would like to tell you why I think KanCare should be expanded. KanCare covers the cost for my therapy and medications. I suffer from anxiety and PTSD. I work in a women's shelter, go to school full time, and am the mother of two amazing children. It is not true that "KanCare is just welfare for able bodied people who do not want to work." I work and do not receive healthcare through my job, and I do not make enough money to afford it any other way. Many service jobs do not offer health care to their employees. Many people have jobs and do not have healthcare. Hardworking Kansans deserve better than to be told they do not deserve healthcare. I appreciate your time and hope that you will consider expanding KanCare.

Thank You,

Crystal  
Riley County

March 20<sup>th</sup>, 2024

Senator McGinn, Chair  
Senate Ways & Means Committee  
Senate Public Health & Welfare Committee  
Re: SB 225 Amend



Chair McGinn and Committee Members:

My name is Frank Austin. I am a Kansan, from Plainville. I live with multiple sclerosis (MS). I write as a Kansan and activist with the National Multiple Sclerosis Society to ask you to remove work requirements and expand Medicaid.

It all started in 1983. My 20/12 vision deteriorated to 20/40 overnight. I lost 60% of my depth perception and I was suddenly color blind. Doctors at the Stanford University Medical Center could not find a reason, and they tried everything in their diagnostic toolkit at the time. The final diagnosis was Macular Degeneration. But, months later, everything was back to normal.

14 years later in 1997, I could not walk 9 holes of golf without stopping to rest. After a MRI and spinal tap I was finally diagnosed with Multiple Sclerosis (MS).

After a serious MS exacerbation in 2000 which included loss of use of my right leg, and a long regimen of infused steroids to restore function in my leg, I applied for Social Security Disability. The result, DENIED.

Back into the workforce I went. In 2006 I had another serious exacerbation. I woke up one morning while I was traveling unable to even turn over. My MS was complicated by a case of pneumonia. Even then Social Security was more interested in the acute case of pneumonia than the chronic case of MS. Because I would not let it go, I was finally awarded SSDI. Of course, that came with a 24 month waiting period before Medicare kicked in.

So, 25 years after my first MS symptoms, I finally got insurance coverage. I was diagnosed with a disabling, chronic illness and was still constantly denied disability status and left without insurance and support.

Obtaining disability status is difficult, and once approved, getting onto insurance still leaves gaps in time and coverage. To require Kansans to work to obtain health insurance inhibits those of us who do live with a disability and struggle to get our status approved. Please remove work requirements from Medicaid so Kansans don't have to struggle to get health coverage.

**Frank Austin**

Email: [f.frank.austin@gmail.com](mailto:f.frank.austin@gmail.com)

Phone: (785) 203-0421

March 13, 2024

Expand kancare & bring Kansas into the 21st century. Stop ignoring the people.

Joyce Austin



March 13, 2024

Please expand health care for **working** Kansans.

My children had to go to extremes in their late twenties and early 30s just to have health care. They were too old to be on our policy, yet were starting out in jobs with low wages, and bad benefits. My son joined the military for the benefits, even though he already had a sporadic back injury. As predicted, while overseas patrolling with a 60 pound pack, he injured it further. Now the VA is having to provide a lot of care, they may not have had to. My daughter went without health insurance, and now has a couple of health problems that are worse because not treated promptly. We were on pins and needles during the time she was without insurance. If anything had happened, we would have been wiped out in medical debt, or she would have had to declare bankruptcy. They both worked hard during this time, in retail, and other low wage jobs.

No one is going to want to move to rural Kansas, because of **closing hospitals**. We are retired, and could move, but distance to healthcare is a scary factor. I would advise my children against it as well.

Sincerely,  
Sharon Avery, Topeka

March 15, 2024

I believe it is imperative to expand Medicaid in order to provide necessary care for those in need for it. Please support these efforts!

Elizabeth Barnes

Kansas resident and active voter

Sheyla Barrera

Regarding SB 355 and HB 2556

March 14, 2024

My name is Sheyla Barrera, a Social Work student and athlete at The University of Saint Mary in Leavenworth, Kansas, and I am concerned about the barriers to accessing healthcare for many Kansas residents. I am submitting testimony in favor of SB 355 and HB 2556 that would expand Medicaid in Kansas.

I believe that everyone deserves access to quality medical services, regardless of their income or socioeconomic status. Unfortunately, many people in Kansas are currently unable to receive the care they need due to a lack of affordable healthcare options and barriers to obtaining health insurance. This is where Medicaid expansion comes in. Expanding Medicaid would provide coverage to thousands of Kansans who currently fall into a coverage gap, allowing them to receive the medical attention they need without having to worry about the financial burden. Medicaid expansion would create jobs, boost the economy, and improve the overall health of our state.

As a Kansas resident, I urge the committee to support Medicaid expansion and help ensure that every Kansan has access to the care they need to live a healthy and productive life. Your consideration of these matters and solutions is very much appreciated. Thank you for your time.

Respectfully, Sheyla Barrera

March 16, 2024

I am a retired nurse. I worked in public health for 14 years and that is where I became aware of the many working people who don't have access to any form of health insurance. And for many the Affordable Care Act is not affordable. I talked with people who felt they would be better off not working so they could get some kind of health care – but they wanted to work. As a follower of Jesus – one of the teachings he most emphasized was caring for the poor. And helping them stay well is part of that. Basic health care should be a right, not a privilege for the wealthy. Lack of health care also leads to an increase in unwanted pregnancies because women don't have access to birth control.

Also, if people have insurance they are more likely to take care of health problems before they are catastrophic and cost all us when they are hospitalized and can't pay. Guess who pays then – those of us with health insurance get our fees increased to pay for those who can't pay. Our small rural hospitals who are forced out of business because of too many people without insurance.

Grace Bartel  
North Newton, KS

March 14, 2024

Expanding Medicaid is the most important thing our government can do to help the rural economy - and to keep local hospitals functioning.

It is also the right thing to do to keep low income Kansans healthy which will, in turn, benefit our wider population and our State's economy.

Herb & Pat Bartel  
1220 220th Street  
Hillsboro, KS 67063

## **MEDICAID EXPANSION: DIGNITY & NEIGHBORLINESS**

**In Luke 10 of the Bible we find the familiar parable of the Good Samaritan. The Samaritan finds a wounded man and provides personal care, transportation and financial support. The lawyer who questioned Jesus eventually admits that a neighbor is one who showed mercy to the needy man. Others had just walked by interested only in protecting themselves.**

**I find that Kansans, for the most part, value being neighbors. In the story, a neighbor is defined by action, not geography. Caring for the poor is a biblical value that most of us claim. In fact, studies show that over 70% of Kansans support Medicaid expansion. In small towns and rural areas we tend to help each other.**

**Perhaps the best way to understand an issue is to put a face on it. Many years ago, I was an attorney in Montgomery County. I remember a couple who were my clients. They worked in low wage jobs and had children to support. They were on the verge of wage garnishments for unpaid, uninsured medical bills. Like many folks in that situation, they lived paycheck to paycheck just to meet the basic needs of life. I had to file a bankruptcy action for them over around \$5,000 medical bills. Medicaid expansion becomes a matter of human dignity to folks like these.**

**I lived in Oklahoma before Medicaid expansion was enacted there. One of the most visible advocates was a Republican Representative who was a physician from a small town. For him the issue was saving rural hospitals. I am not personally aware of any hospital administrator in this state who is opposed to Medicaid expansion. In rural and small town Kansas we are plagued yearly by population decline and low wage employment. For us, continued access to quality medical care is unpredictable. Medicaid expansion may help to stabilize life in our areas.**

**In Oklahoma, as in Kansas, the Republican-led legislature refused to expand Medicaid. Unlike Kansas, Oklahoma has a process of enacting legislation by initiative petition. The people accomplished what the legislature would not do. The state question passed. Why can't the Kansas Legislature make the question a ballot issue as they did for abortion? What is the harm in asking the will of the people they represent?**

**As a political independent and as a minister, I am disappointed that a moral issue such as this one is held captive by partisan politics. We are all neighbors and compose communities. We should be accountable to one another in need. Medicaid expansion is a rare opportunity to do the right thing because the federal government provides 90% of the cost.**

**Many people are like my former clients. They want to be validated as having human worth in spite of their inability to pay for or get insurance for appropriate medical care. For them, it is an issue of dignity.**

**Rev. Dr. Stan Basler Rural Galesburg (former: attorney, Montgomery County Commissioner, theological seminary professor and ordained United Methodist minister)**

March 16, 2024

Dear Chairman and Committee Members,

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

Medicaid expansion would allow 150,000 low income Kansas access to medical care. By expanding Medicaid tens of thousands of Kansans will be able to afford health insurance coverage. This would reduce medical debt - or allow them to seek medical care for things they now do not because of cost. Healthcare costs for everyone would be reduced through reduced Marketplace premiums and reduction of treatment for those who are unable to pay.

Medicaid expansion would preserve and strengthen rural healthcare. Over half of the remaining rural hospitals are in danger of closing due to uncompensated care. That would further reduce the care available for a majority of our state.

Medicaid expansion won't cost Kansas taxpayers a single cent! The HBB 2556 and SB 355 are revenue neutral. It would actually bring IN money as federal law provides a signing bonus for states that have not yet implemented expansion. This would result in Kansas seeing up to an additional \$450 MILLION new dollars during the first two years.

I am asking you to please support Medicaid expansion in Kansas.

Thank you,  
Angela Beck  
Leavenworth



Karl E Becker, MD, MBA  
11708 High Drive  
Leawood, KS 66211-2226

[kbecker4365@gmail.com](mailto:kbecker4365@gmail.com)  
[kebmd@msn.com](mailto:kebmd@msn.com)

913-345-1158 (O)  
913-333-6099 (M)

February 21, 2024

RE: Enthusiastic Support for KanCare Expansion

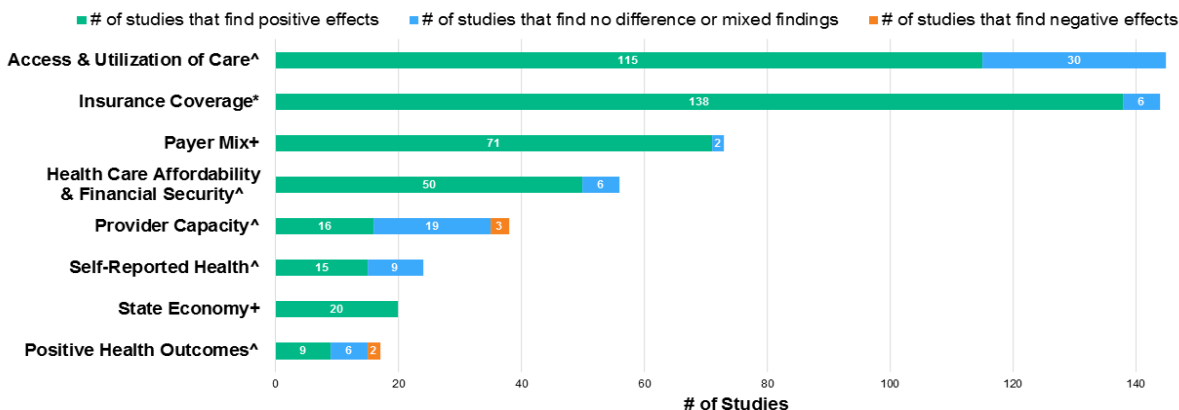
Dear Members of the Kansas House and Senate:

As a retired physician now in my eighth year, I vigorously support KanCare /Medicaid expansion in Kansas. I am a registered Republican and consider myself a right-of-center moderate; I am also a physician who is a supporter of Public Health for the public good. We call the USA a republic and a democracy. We certainly have individual rights, but we also have individual responsibilities to the to our fellow citizens. As a society we have developed government support for the **common good**. If we only believe in our individual rights but not in the rights of our fellow man, we will no longer have a republic, we will have anarchy. We must care about our neighbor's health for the benefit of all.

KanCare expansion is **for the benefit of all**. Forty-one States (including DC) have benefitted greatly from Medicaid Expansion, as shown below in <https://www.kff.org/affordable-care-act/report/the-effects-of-medicaid-expansion-under-the-aca-updated-findings-from-a-literature-review/>. (Figure 1)

Figure 1

## Studies generally find positive effects of the ACA Medicaid expansion on different outcomes.



NOTES: This brief groups outcomes into 3 categories, indicated as such: <sup>\*</sup>Coverage outcomes, <sup>^</sup>Access outcomes, <sup>+</sup>Economic outcomes. Studies may have findings on multiple outcomes and be counted in multiple bars. "Insurance Coverage" includes coverage rates generally and for Medicaid. SOURCE: KFF analysis of 404 studies of the impact of state Medicaid expansion published between January 2014 and January 2020.

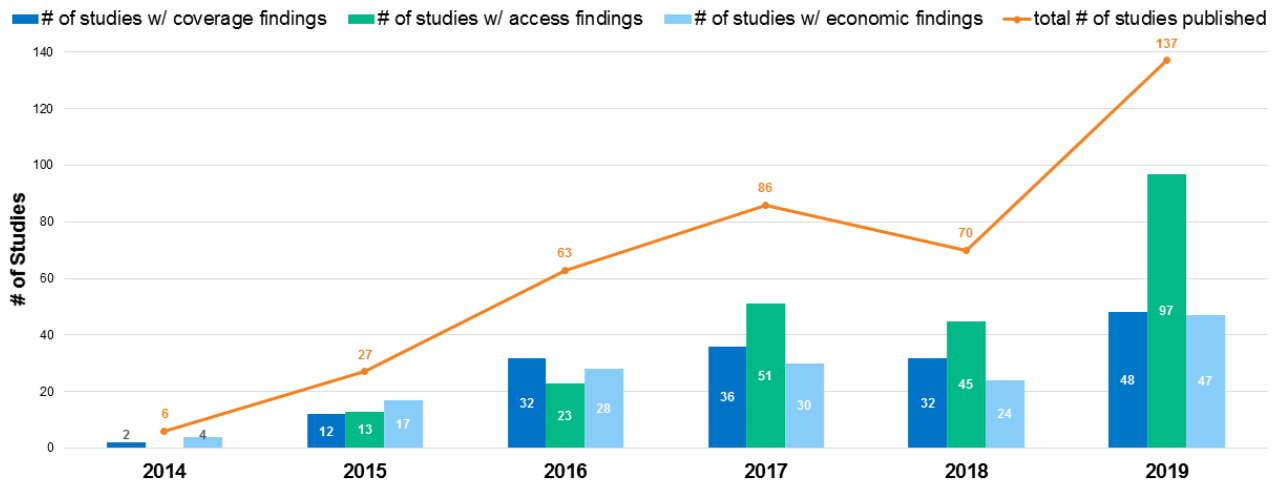


In this study, the vast majority of studies find positive effects, including access and utilization of care, insurance coverage, financial security and a **positive effect on the state economy**. More recent studies quoted in the article have focused on outcomes related to access to care since 2014 (Figure 2).

Figure 2

## More recent studies focus on outcomes related to access.

*Number of Studies on the ACA Medicaid Expansion Published Yearly 2014-2019, Overall and by Area of Study Focus.*



NOTES: Counts of studies in each category exceed the count of total studies because studies may have findings in multiple of the three categories. An additional 6 miscellaneous studies do not have any findings that fit into the three categories and are thus not reflected in the figure.

SOURCE: KFF analysis of 404 studies of the impact of state Medicaid expansion published between January 2014 and January 2020.



Kansas is surrounded by States that have expanded Medicaid. If we want to compete with these States for economic and population growth, we must expand KanCare. As a retired physician, I know that expansion is the right thing to do financially, morally, and ethically. I enthusiastically urge you to support Medicaid expansion in Kansas.

Sincerely,

Karl E Becker

Professor Emeritus,  
University of Kansas School of Medicine  
Retired Physicians Organization  
Kansas City Medical Center Foundation

March 15, 2024

Chairman and legislators,

I support expansion on Medicaid. There are many, many benefits to doing this. It won't cost Kansans any additional money. It would provide healthcare for many more low income Kansas families. The state would get around \$700 million in federal monies. It would also help our hospitals, particularly the ones located in rural areas. it also helps to cover mental health benefits.

Sincerely,  
Sherris Bellamy  
Overland Park

March 17, 2024

Please ensure that medicaid expansion becomes a reality in the State of Kansas as soon as humanly possible. Medicaid Expansion will serve to reduce the overall cost of healthcare in the state, slow the loss of rural hospitals, and will provide medical access to 150,000 additional Kansans.

Medicaid expansion will provide nearly 9,000 Wyandotte County residents with health care and provide approximately 3,000 new jobs to bolster the local economy.

Sincerely,

--

Hillard G. Berry, Jr.,

March 15, 2024

Dear Chairman and Committee Members,

Thank you for allowing me to provide testimony in support of Medicaid Expansion.

Health care is essential in order for members of our community to thrive. By expanding Medicaid, 150,000 more Kansans would have access to affordable health care, which would have an immensely positive impact on all of their lives. Not only that, but it would be helpful for all of us. If a Kansan without health insurance goes to a hospital or emergency room, Kansans with health insurance end up paying for it as hospitals and clinics will raise prices to cover their missed revenue. This bill, which is revenue-neutral, will not cost Kansas taxpayers money, but it will change the lives of thousands of hard-working Kansans who cannot cover the expenses that health care comes with.

This is a widely popular issue amongst those of all political parties in our state. Nearly 80% of Kansans support Medicaid Expansion and recognize its importance. Medicaid Expansion would protect some of our most vulnerable community members, strengthen rural health care, and grow our economy. This bill allows *all* members of the Kansas legislature to come together on a popular issue and show that bipartisanship is possible in the statehouse. Governor Kelly wants to work across the aisle to accomplish this, and I encourage all members of the committee to listen to the overwhelming majority of their constituents and support this bill.

Thank you for your time. Please vote in favor of Medicaid Expansion.

Kristen Blackton  
Shawnee, KS

March 16, 2024

Expansion of Medicaid is important to many Kansans, those who are in need of better access to medical care and those to whom the needs of others are of concern.

While I personally have good insurance and medical care, I have friends and colleagues, as well as family members who do not. Recently I took one of our tenants who had a severe respiratory infection to a clinic for care. She had no insurance, although she was working a full time job age minimum wage. After checking in, she was informed that it would cost \$163 just to be seen. Needless to say, she went home unseen; fortunately she recovered without medical intervention.

Since 2014, when Medicaid expansion became an option, 8 rural hospitals have closed, and more are on the brink. Families in those areas are traveling hours to get the care they need, in some cases with lethal results. Furthermore, federal funds that should be coming to Kansans for their health care are going to other states for care of their citizens. THIS IS NOT RIGHT!

There are a number of other reasons why the expansion of Medicaid would be advantageous to Kansas citizens. I am sure you have repeatedly heard many of them, so I will not repeat them here. 80% of Kansans approve of expanding Medicaid, including a number of legislators. Being held hostage by the leadership is also not right.

I am delighted that hearings on this subject have been scheduled, and I implore each of you to carefully consider the testimony being given in committee and that a full vote on the floor of the house will be forthcoming.

Lynne Bodle  
1218 Tennessee St.  
Lawrence, KS

March 15, 2024

We are writing in support of Medicaid expansion in Kansas. We believe that accessible, affordable health insurance should be available for all Kansans. It is surprising that forty states have already passed this but Kansas is one of the ten who has not. This has been an issue since 2010. Expansion would create jobs, bring in tax dollars, expand the HCBS program for disabilities, provide for mental health, and help our Vets, as well as those who lost coverage after Covid. We have a disabled daughter who depends on this coverage. It is obvious that the constituents want this expansion of Medicaid. Kansas, what are we waiting for?

Ed & Nina Bokern

[ed27nina@aol.com](mailto:ed27nina@aol.com)

913-661-9825

March 17, 2024

As a citizen of Kansas I am for expanding Medicaid . We live in rural Kansas. There are very few options for medical care here in Fort Scott.

Our hospital is closed and now we have no emergency room either. We need this expansion.

Donna Bowman  
Ft. Scott, Kansas



March 15, 2024

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

I survived working in home health, physical therapy, through the first 25 months of covid. Then the hospital in Winfield had to close the home health department... due to lack of reimbursement (and other reasons).

This loss of revenue could have been lessened had the representatives of Kansas listened to those people in the midst of the storm. A desperately needed service would not have been sacrificed.

Shame on our leaders!

Michelle Boyts

March 14, 2024

I, like many other Kansans, believe it is way past time to start bringing our federal tax dollars back to our state to help our citizens, hospitals, and economy. Informed Kansans are aware of the coverage gap caused by the state's refusal to expand Medicaid. We are also aware of the fact that our legislature has caused our state to lose out on over \$6 billion of our own tax dollars.

Medicaid expansion will help all Kansans and communities by keeping local healthcare facilities open, keeping the people who may work in our childcare centers, nursing homes, schools, restaurants, etc. healthy and working, and by creating additional jobs which adds to our tax base.

Voters are tired of the obstructionist leaders in the Statehouse who block this issue from being heard. Some of our surrounding states have passed Medicaid expansion by ballot initiative. We apparently don't have that option in Kansas. Our elected leaders owe it to us to hold a vote so we can see where our representatives stand on this issue.

Sincerely,  
Doretta Braden  
Manhattan, KS

March 17, 2024

Dear Chairperson and Committee Members:

I am submitting my testimony in SUPPORT of Medicaid Expansion. Low income Kansans are desperate for health care and more access to healthcare. Over 150,000 of our fellow citizens would greatly benefit from the health care Medicaid could provide them. And this would not add costs Kansas taxpayers - these bills are revenue neutral.

Medical debt is crushing for families, and we can help families avoid these situations by providing them health care through Medicaid. This not only helps our families but helps our Kansas economy as well. Additionally, all of our healthcare costs would be reduced as right now we are all paying for those Kansans who cannot afford medical care but are forced to visit emergency rooms.

Additionally about \$700 million in federal funding would flow into Kansas which would further benefit our economy. It would also help our mental health crisis and help those living in rural areas of the state.

I urge you to SUPPORT Medicaid Expansion for Kansas.

Kindly,  
Kelly Brende  
Leawood, Kansas

February 22, 2024

To: Members of the Kansas Legislature

I urge you to debate the topic of Medicaid Expansion and pass legislation to expand it within KanCare, because:

- Here in Cowley County, it will benefit hard working, low income citizens – NOT deadbeats. Nursing home aides, waitresses, and farm workers are not deadbeats.
- Our Critical Access Hospital here provides care to Cowley and several surrounding counties. We have dramatically reduced costs but still operate at an annual loss of over \$2 Million. We treat all patients who come to our hospital. Uncompensated care is one of the most significant factors driving our losses. Without Medicaid Expansion, it may be impossible for our hospital to remain open.
- The revenue neutral proposal for KanCare expansion, with 90% federal funding and the remainder coming from fees for providers, means Kansas taxpayers will see no tax increase.

Most citizens (est. 70-80%) in our county and throughout Kansas understand and favor the adoption of KanCare Expansion. Rural healthcare is a vital part of our state culture. I urge you to listen to your voters and, for the good of Kansas, expand KanCare.

Thank you for your consideration.

Gary Brewer, Trustee  
William Newton Hospital

March 14, 2024

To the Kansas Legislature:

In 2021 I moved back to Kansas after 17 years living in rural Montana. I was astounded that Kansas had not yet expanded medicaid! Montana, like Kansas, is a vast rural state in which agriculture is its largest industry. In 2015, it was moderate Republicans in Montana who collaborated with minority Democrats, to get the job done.

Why? Because rural areas of the state lacked adequate healthcare facilities, and hospitals and community health centers were closing down. And the overall state of health of Montana residents was dismal. Once the expansion was passed, Montanans saw a boom in the health care industry throughout the state. The non-profit Billings Clinic, for example, expanded its efforts in eastern Montana, bringing specialists to rural clinics and hospitals that had been saved from shutdowns. My own doctor told me he was seeing and helping patients who had never seen a doctor before. Instead of Montana residents competing for scarce care, the opposite happened. Hospitals and clinics were able to staff up and provide services where they had never been before. Good healthcare systems in rural communities encouraged younger residents to stay in their rural communities as well. What young start-up entrepreneur would establish a business in an area devastated by lack of healthcare and a brain drain? THAT CHANGED! For further details please

consult: <https://www.kff.org/medicaid/fact-sheet/medicaid-expansion-in-montana/>

Instead of fretting over who does or does not deserve health insurance, think clearly about where all of the Medicaid funding goes. NOT to the pockets of the working poor! But rather to an expanding healthcare network that will bring rural prosperity and a far healthier labor force. It will aid small business owners who cannot afford to insure their workers. And, let's not forget, it will provide treatment to individuals trying to recover from substance use disorder. It is a win-win situation for Kansas.

I have worked and paid Federal Income taxes since I was 13 years old, and I am now 75. My taxes help fund Medicare, which I benefit from, and Medicaid expansion in 40 other states. But not Kansas. Please bring my taxes home to Kansas so that it can look to a more prosperous future.

Karen L. Brock Ph.D.  
Retired

Date: 2/27/24

To: Kansas House and Senate Committee Members

Re: Medicaid Expansion

From: Sheryl Brotton

22143 S.W. Meadowlark Rd.

Douglass, Ks. 316 706 4038

I have grass roots experience working with my local families in need through Hope Connections and the Emergency Food Assistance Program (TEFAP) in my communities of Douglass and Rose Hill Kansas. Upon my retirement, I have volunteered for the past 15 years.

I have called and tried to express my concern to the Kansas Legislature over the lack of Medicaid Expansion for the last 8 years. I have never felt that my voice has been heard, or any concern has ever been expressed over the plight of our families.

In 2023 the me and the staff at Hope Connections saw 35 families who made requests for financial assistance and give out over \$7,500. In financial assistance.

THESE FAMILIES WERE NOT ABLE BODIED LAZY PEOPLE LOOKING FOR HANDOUT! They are our friends and neighbors that have fallen on hard times.

Most have families that they are supporting, most are in debt because of health issues, most have worked several different jobs, and most fall in the gap of 33% of the poverty level and 100% of the federal poverty level. Many express shame and humility at having to ask for assistance.

I welcome any of you who would like to see our experiences in real life to call me and join us at any of our food distribution and community assistance times. Our sites are at the Methodist churches in our communities.

In Conclusion, I ask that you expand Medicaid. Thank you for your consideration.

March 15, 2024

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

Kansas should be doing all it can to support Kansans live full, meaningful, healthy lives. Expanding Medicaid is the easiest and smartest way to ensure that more Kansans can have access to all kinds of medical care, physical or mental. Hundreds of millions of federal dollars would be accessible to our state, and low-income Kansans would not face crushing medical debt. This would help all Kansans, as it helps keep medical costs down.

There are so many ways that the legislature can help Kansans live fuller and happier lives, and this one is simply a no-brainer, especially because it is at no extra cost to Kansas taxpayers.

We want expansion. We have been asking for expansion for years. Listen to the people.

Thanks,

Dawn Brumbley  
Olathe, KS

March 14, 2024

Dear Kansas legislators,

Please support Medicaid expansion, the 2024 "Cutting Healthcare Costs for All Kansans Act."

So far, preventing these funds from returning to Kansas has shifted the unpaid costs of those uninsured onto hospitals. Brown County, where I live, used to have two good hospitals, one in Horton and one in Hiawatha. The Horton one closed, partly due to this restriction of funding. This loss removed clinical and emergency services for those in South Brown County to a greater distance and increased the burden on the Hiawatha system.

As a result, Hiawatha's services have suffered in the effort to meet expenses, because their own funds have also been restricted. Most visible to the patient, phone receptionists at our remaining hospital were decimated and largely replaced by an automated phone tree, making scheduling and other communication more difficult. Remaining employees are strained by the understaffing.

Hospital ownership keeps shifting into fewer hands and more remote management to save money. This causes even more economic strain on smaller rural communities like ours, because local wealth is being diverted to non-local, for-profit hospital management organizations.

Larger hospitals may not feel this crunch as intensely we do out in the country. We feel it in higher insurance rates and fewer, less accessible services.

Please enable a vote on the Medicaid Expansion bill.

Greg Bryant  
2024 Raven Road  
Robinson, KS 66532



March 14, 2024

I am writing in support of Kansas Medicaid Expansion. It seems like the best path to keep rural Kansans from living in a health care desert. In my home community, Horton Community Hospital was forced to close due to financial problems. Now people from Horton must drive to Hiawatha or Atchison or Holton for healthcare services and the nearest ambulance is 13 miles away. In western Kansas where the population is less dense, the problem can be more acute. It seems like a no-brainer to allow these federal dollars to help us on this issue of concern to rural Kansans.

Susan Bryant  
2054 Raven Road  
Robinson, KS 66532

March 15, 2024

I am very much in favor of expanding Medicaid in Kansas. No one should be without insurance in our country. I dislike paying towards the 90% covered costs for most other states while our lower income residents go without. I also support it to protect the hospitals in the rural areas of our state. I also do not support the work mandate. So many individuals suffer from diagnosed and undiagnosed mental health conditions that keep them from being able to hold down a job. I don't feel that drug abusers would even seek medical insurance let alone thinking, "I think I'll get free insurance and just not work". There are many reasons a person could find it too difficult to hold down a job, and most people want to work and be as independent as they can be. I see no good reason NOT to insure more Kansans and improve lives and protect our rural communities' health care.

Mary Bunn  
Topeka, KS

February 23, 2024

Dear Members of House and Senate Committees:

My name is Paul Byrne. I am a Professor of Economics at Washburn University and a twenty-year resident of Topeka, KS. Thank you for the opportunity to provide testimony in support of Medicaid expansion. Motivated by the public debate over Medicaid expansion in my state, coupled with many policy makers' concerns over the financial vitality of rural health care, I began a research project this past year examining the impact of Medicaid expansion on rural migration.

Health care providers, like providers of many other services, can achieve greater economies of scale in markets with larger populations. This often results in rural health care providers earning smaller profit margins than those in larger metropolitan areas, which can result in fewer services as compared to metropolitan areas. This problem is exacerbated by the fact that health care providers often provide services to those who lack the ability to pay, and rural residents have higher levels of uninsured residents.<sup>1</sup> The cost of this uncompensated care is either passed on to insured patients or leads to the further deterioration of providers' profit margins, which can lead to closures or fewer services offered in rural communities.<sup>2</sup>

The extent to which these disparities result in less robust health care offerings in rural areas results in urban markets offering residents greater health care amenities. Whereas urban residents enjoy a wide array of health care services and providers close to home, rural residents may have to travel significant distances to access the same services. It is through this avenue that Medicaid expansion may have a positive influence on all rural residents, even those with private insurance.<sup>3</sup> By reducing the burden of uncompensated care, Medicaid expansion could mitigate the disparity between health care services available to rural and urban residents and therefore influence migration from rural to urban areas.

My research looks at how Medicaid expansion influences rural to urban migration using Public-Use Microdata from the Census Bureau's American Community Survey (ACS). This survey contains observations at the individual level, allowing for the examination of the interaction between Medicaid expansion and individual level characteristics. I use data from all 50 states from the 2015 to 2021 ACS surveys, to examine the influences on rural to urban migration. With over 1 million observations, I use multivariate logit regression to control for education, age, family income, sex, race, ethnicity, in addition to year and state fixed effects. The model estimates that living in a state and year in which Medicaid expansion is in effect, corresponds to

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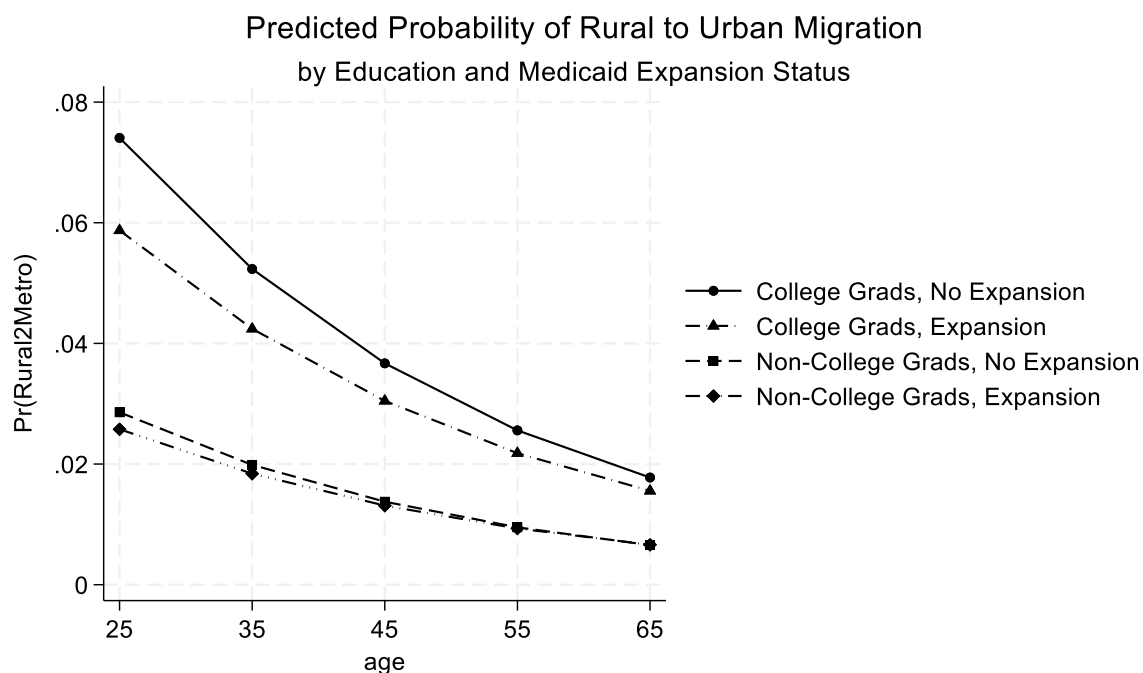
<sup>1</sup> American Hospital Association (2019). Rural report: challenges facing rural communities and the roadmap to ensure local access to high-quality, affordable care. AHA. <https://www.aha.org/system/files/2019-02/rural-report-2019.pdf>

<sup>2</sup> Levinson, Z., Godwin, J., & Hulver, Scott. (2023). Rural Hospitals Face Renewed Financial Challenges, Especially in States That Have Not Expanded Medicaid. KFF. <https://www.kff.org/health-costs/issue-brief/rural-hospitals-face-renewed-financial-challenges-especially-in-states-that-have-not-expanded-medicaid/>

<sup>3</sup> US Government Accountability Office, GAO (2020). Rural Hospital Closures: Affected Residents Had Reduced Access to Health Care Services. GAO. <https://www.gao.gov/products/gao-21-93>

a statistically significant decrease in the probability of rural to urban migration by 0.18 percentage points (from 1.76% to 1.58% for the national sample). The effect of Medicaid expansion on rural to urban migration was greatest for those most likely to leave rural areas, the younger and higher educated. These interaction effects were statistically significant.

The graph below shows how Medicaid expansion interacts with age and education. The top two lines show the predicted probability of rural to urban migration for college graduates across the age distribution in states and years in which Medicaid expansion was and was not in effect. The gap between the lines shows the differences in predicted rural to urban migration between expansion and non-expansion state-years. The bottom two lines show the same predicted probabilities for those without a college degree. As you can see, Medicaid expansion has the greatest effect for young college graduates.



As an economist, I recognize that there is no free lunch. Medicaid expansion, like all policy choices, has benefits and costs. However, I believe one additional benefit of Medicare expansion is its' potential to make rural areas of Kansas a more appealing option to young individuals starting their careers.

Paul Byrne, Ph.D.  
Professor of Economics  
Washburn University School of Business

Note: The opinions in this testimony reflect my personal views as an economist, and do not reflect the views or opinions of my employer.

March 14, 2024

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

Barbara Campbell

March 15, 2024

Dear committee members,

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

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

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

Please support medicaid expansion.

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

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

February 9, 2024

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

Janet Cashman  
8301 Wood Ave  
Kansas City, KS 66112

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

March 17, 2024

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

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

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

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

Sincerely,

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

Henry H. Chamberlain



March 12, 2024

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

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

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

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

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

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

Thank you for your time,

John Chandler

Derby, Kansas

March 13, 2024

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

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

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

Expanding Medicaid will generate additional economic activity in our state.

"A rising tide floats all boats."

Please help the people of Kansas!

Sincerely,

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

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

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

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

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

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

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

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

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

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

Ron Chronister  
Halstead

March 15, 2024

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

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

I support Medicaid expansion for several reasons.

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

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

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

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

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

March 15, 2024

Lisa Collette, Kansas Citizen

Testimony in support of KanCare expansion

Alliance for a Health Kansas hearing

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

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

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

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

Dominika Cornejo  
Wichita KS, 67230

Dear Kansas legislators,

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

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

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

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

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

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

Best,  
Dominika Cornejo  
dominikacornejo@gmail.com

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



From: Charley Crabtree  
[charleytree04@gmail.com](mailto:charleytree04@gmail.com) / 1-785-312-2468 / March 18, 2024

To: The Alliance for a Healthy Kansas Medicaid Expansion

To: Kansas Policymakers

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

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

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

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

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

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

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

Respectively, Charley Crabtree

[495 words]

March 15, 2024

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

Kelly Crahan

March 15, 2024

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

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

Valerie Creswell MD FACP FDSA FSHEA.



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

Reference: Written Testimony from Thrive Allen County Supporting Medicaid Expansion

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

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

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

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

Sincerely,

Rhonda Culp

Director of Care Coordination

March 17, 2024

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

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

Goodwill is the greatest force in the universe!

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

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

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

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

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

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

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

Trent Davis, M.D.

March 15, 2024

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

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

Please expand Medicaid.

Jon Dedon M.D.

March 14, 2024

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

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

Denise Delgado Torres



March 15, 2024

Dear Chairman and Committee Members:

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

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

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

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

Michael DeMent  
Leawood, Kansas

# CURTIS W. AND SPARLA J. DICK

613 Quail Nest Road  
Winfield, KS 67156

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

Email Curtis: [cdick3@cox.net](mailto:cdick3@cox.net)

Email Sparla: [sparlad@hotmail.com](mailto:sparlad@hotmail.com)

February 23, 2024

Subject: Kansas Medicaid Expansion HB 2556 and SB 355

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

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

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

Sincerely yours,

Curtis and Sparla Dick

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Legislative Testimony

Chandra EA Dickson

1568 N. Charles

Wichita, KS 67203

Dickson.chandra@gmail.com

316-751-8740

Monday January 29. 2024

Dear Kansas Policy Makers,

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

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

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

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

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

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

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

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

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

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

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

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

Thank you,

Chandra EA Dickson

March 17, 2024

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

Markus Dixon

March 15, 2024

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

Frank Dobrinski



KanCare Expansion  
Proponent Testimony  
Marcillene Dover  
March 12, 2024

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Thank you for your time,

Marcillene Dover  
Wichita, KS 67212  
mdover@usd259.net

March 15, 2024

Dear Chairperson and committee members,

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

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

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

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

Susan Edwards  
Overland Park

Ladies and Gentlemen of the Kansas Senate and Legislature:

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

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

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

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

Thank you,

Louise Ehmke

34 Star Farms/Ehmke Seed

74 W Rd 130    Healy, KS 67850    Lane County



From Dr. Gretchen Eick

1536 N Park Place

Wichita, KS 67203

3-17-24

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

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

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

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

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

We know that Medicaid expansion would benefit Kansas by:

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

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

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

March 16, 2024

Mr. Chairman and Members of the Committee:

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

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

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

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

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

I urge passage of Medicaid Expansion now.

Respectfully submitted,

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



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

Honorable Members of the Committee,

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

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

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

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

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

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

Thank you for your time and consideration.

Sincerely,

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

Sarah E. Elsen

March 12, 2024

To the Kansas State Legislature:

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

Sincerely,

Dianne N. Epp

11 Lakewood Circle

North Newton, KS 67117

March 15, 2024

### KanCare Expansion testimony

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

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

Thank you

Margaret Estrin, MD (Drinkwine)

March 16, 2024

Hello,

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

Respectfully,  
Scott Eudaly  
Baldwin City, Kansas

March 17, 2024

Dear Elected Officials,

I am a life long Kansan who grew up in western Kansas where distances are great and healthcare can be a challenge to obtain. My parents (now elderly) and many friends have been forced to relocate to suburban areas of Kansas in order to obtain adequate healthcare as they age or develop more serious health conditions.

As Kansans we are all concerned with the "de-population" of our rural areas. Losing an aging population who has no choice but to move as rural hospitals and services continue to dwindle is a significant contributing factor.

The expansion of Medicaid would help slow this decline by supporting rural hospitals and giving over 150,000 Kansans the opportunity to receive the healthcare they need and deserve. Please vote to support the expansion of Medicaid. Your constituents are hurting because of a lack of progress in meeting a basic human need - healthcare.

Respectfully,  
Jan (Janice L) Faidley  
4807 Birch Street  
Roeland Park, KS 66205  
c. 913-709-6812

**Testimony in Support of Medicaid Expansion in Kansas**  
**March 14, 2024**

I am a Kansas resident and the medical director of a hospital emergency department on the Missouri side of the Kansas City region. In my professional capacity, I have seen firsthand the difference that access to Medicaid makes in a patient's health. Before Missouri expanded Medicaid, I encountered countless, hardworking individuals in our emergency room with diseases that had advanced beyond what they should have. These patients delayed their care because they didn't have the money to pay for the treatment. But when their symptoms progressed and they could no longer put off care, they came to the ER desperate for help.

We would treat them, but that treatment came at a steep cost—to the hospital and, more importantly, to the patient. Consider what was a common occurrence before Missouri expanded Medicaid: A patient with diabetes, and no health insurance, arrives at the ER with a swollen and infected foot. The infection is so far along that we have no choice but to amputate. The hospital absorbs the cost of that treatment, and the patient goes home with a new disability.

Today, that same patient would at the very least have access to Medicaid in Missouri. He or she would most likely seek treatment from a personal physician and we wouldn't see them in the ER. Or, they would come to us before the infection got out of control. The result: a patient with both feet intact, and a hospital that does not have to absorb the cost of acute care.

These days, at my hospital, amputations due to diabetes are much less common. I am certain that my colleagues in Kansas would see similar reductions with Medicaid expansion. Hospitals, as a result, would see reductions in their uncompensated care. For rural hospitals, savings like these can mean the difference between closing their doors or remaining a vital healthcare resource for their communities. As it stands, according to a recent article in The Kansas Reflector, more than half of all rural hospitals in Kansas are in danger of closing.

It doesn't have to be this way. Expanding Medicaid would not only help these hospitals stay open, it would pump \$17 billion into the economy, add more than 20,000 jobs, and, most importantly, improve the health of hardworking Kansans who make too much money to qualify for Medicaid and too little to get health insurance through the Marketplace. Please act now to expand Medicaid and begin building a healthier Kansas.

Sincerely,

**William Featherston, M.D., FACEP**  
**11007 W 100th St., Overland Park, KS 66214**

February 14, 2024

### Testimony for Medicaid Expansion

We strongly support Medicaid Expansion. Our State has individuals that are in need of and deserve to have this medical coverage. Rural Kansas hospitals could benefit greatly from this program to continue to serve their patients, to cut healthcare costs, lower taxes and to provide affordable healthcare to more working Kansans. We support expanding Medicaid with the provision to include health coverage for inmates. The Federal Government pays for 90% of the costs to expand Medicaid, while states pay 10%. Forty other states have expanded Medicaid and Kansas lawmakers are letting residents' tax dollars go to every one of its bordering states, while healthcare costs continue to rise and hospitals close. Legislators need to act now to invest in the people of Kansas. This is your opportunity to make a positive impact on the Kansans whom you represent. It's the humanitarian thing to do!

Forrest and Joyce Fee

March 15, 2024

To our Elected Legislators

RE: Cutting Health Care Costs For All Kansans Act

I'm writing in support of expanding Medicaid in the state of Kansas. I've lived in Kansas all my life, from Johnson County to the far Northwest corner of the state, to the Southwest corner of the state, and for the last four decades in South Central Kansas. I know that some of my friends in the west have to travel for 100 miles or more for major health care, and sometimes even out of state. Since 2014, I have watched with deep concern when other counties much like my own have lost their medical facilities. Here in Cowley County, we have two mid-size communities, and each has a hospital. But in the last few years, headlines in the local newspaper detail how each of the two hospitals is having financial issues. I worry a great deal that we could lose some of the services they offer, or lose the hospitals altogether, if we don't act now to accept the dollars available to Kansas for Medicaid Expansion.

My husband and I are custodial grandparents to a talented, athletic grandson. He's covered by Medicaid as a minor, but I worry for his sake what will happen when he turns 18. How will he manage health coverage as a college student? How will other college age young people manage their health care?

I have spoken to a few single mothers who try very hard to earn a living, but with children at home, and with the available jobs limited, they fall in that group which can't afford to buy health insurance but earn too much for Medicaid. For young people just entering the work force, if they can't afford continued education, the job prospects are slim. We have a young friend who struggles with finding a job that will support her, and is often behind in paying rent, as well as utilities to keep her home comfortable. Every person should live with the dignity to be able to take care of their daily needs including food, clothing, shelter, and medical care.

If expansion of Medicaid to help these people will cost the rest of us nothing, and would actually cut our own health care costs, why can't we go ahead and accept these dollars that we have paid with our taxes? All but a few states have already done it. I hate to think Kansas will be the last state to wake up to the benefits of Medicaid Expansion.

Thank you for taking action!

Ann Fell





LeEtta J. Felter

14220 South Copper Creek Drive  
Olathe, Kansas 66062  
(913) 486-7809

21 February 2024

RE: HB 2556 and SB 355

Dear Kansas Legislators,

Thank you for your service to our great state, and thank you for allowing me the opportunity to provide testimony in support of the *Cutting Healthcare Costs for all Kansans Act*. I am writing to encourage you to pass HB 2556 and SB 355, Governor Kelly's Medicaid Expansion bills, in Kansas. I'd like to share with you why I believe Medicaid expansion is a small business issue, an economic development issue, a domestic migration issue, and perhaps a moral issue. I support Medicaid expansion in Kansas and believe doing so would increase health care access for the low-income Kansans currently in the *Insurance Gap*, spur job growth and boost the state's economy.

Medicaid expansion takes care of a major issue that impacts **small businesses**, which are the backbone of the Kansas economy, by providing access to affordable healthcare to those individuals who have no access due to the *Insurance Gap*. My husband and I started a truck and equipment dealership in 1997 and grew that business over the next 18 years into a successful organization that included seven truck and equipment dealerships, located in five states, with over 260 employees on average. Due to the large size of our organization, we had access to exceptional insurance plans to offer to our employees. When a large company offered to buy business, we sold and then branched off into other areas of interest ranging from ranching/farming to commercial real estate, developing, and building. Our new business is very successful, but we are small and don't have access to all of the outstanding plans we could offer before. This experience has made us aware of the issue for the small businesses that have just part-time jobs, and end up with employees that fall into the *Insurance Gap*. These small businesses need employees to grow, but may not yet have enough work for a full-time employee. Having access to affordable healthcare through Medicaid expansion is truly an **economic development** issue that impacts these small businesses, and will **spur job growth** and **boost the state economy**. The *Cutting Healthcare Costs for all Kansans Act* addresses this issue, giving small businesses the ability to employee individuals while they are getting their feet under them as a new business, and these employees will have access to affordable healthcare.

**Outbound migration** is an issue in Kansas and 2022 was another year of more Kansans leaving the state than new residents coming in. Expanding Medicaid would




help solve our outbound migration problem. Our son Michael joined our family when he was 18 and his mother passed away suddenly. Michael was a freshman in college at the time, and if we officially adopted him it would mess up his Pell Grant. Because he wasn't officially adopted, he had no access to our family health coverage, yet when he applied to buy healthcare coverage on the Healthcare Insurance Marketplace website he would be flagged as "should be covered by Medicaid." Yet, in Kansas, since Michael had no dependents and no disability, he didn't qualify for health insurance through Medicaid. This straight A student, who had just lost his mother, was left floundering in Kansas unable to get insured because he was in the *Insurance Gap*. Guess where Michael ended up going to college...in Oklahoma (where he had coverage due to their Medicaid expansion). Michael is the exact type of individual we want to STAY in Kansas, yet he really had no options here due to the lack of Medicaid expansion.

The **moral issue** comes into play when we consider that at least 150,000 Kansans are currently in the *Insurance Gap* finding themselves without access to affordable healthcare...my son Michael was one of those for more than six-years (undergrad and law school). Michael came back to Kansas for law school and attended Kansas University Law School. While there he was uninsured due to the reasons stated in the paragraph above. He experienced two major health crises while in law school, and received care at Lawrence Memorial Hospital. Due to his lack of coverage, LMH ended up picking up 100% of Michael's medical expenses through their foundation. Thankfully LMH has a thriving foundation, but many of the rural hospitals do not have this resource. The eight hospitals that have closed while Kansas has wasted time fighting over Medicaid expansion are examples of what happens when you have this many individuals in the *Insurance Gap*, and the burden falls upon all other Kansans and the local hospitals.

I am writing to you as a life-long Republican, and a long-time public servant...having served over 12-years on the board of education for the Olathe Public Schools, over a decade so far on the Kansas Children's Cabinet (appointed by three different Governors: Brownback, Colyer, and Kelly), and I serve on the Olathe City Council. Governor Kelly has presented a plan that makes sense and I believe it should be passed. All of the major objections have been addressed in the bill with common sense solutions. Data indicates that nearly 80% of Kansans, regardless of political party, support Medicaid expansion. With this level of broad support throughout our state, please pass expansion and put this divisive issue behind us once and for all.

Sincerely & respectfully,



LeEtta Felter

# AUSTIN & FERGUSON, L.L.C.

Office: (816) 356-7100  
Fax: (816) 356-7110

Suite 315  
4240 Blue Ridge Blvd.  
Kansas City, MO 64133

February 26, 2024

Kansas Legislature  
Health & Human Services Committees  
Rep. Daniel Hawkins, Speaker of the House  
President Ty Masterson

Re: **The Cutting Healthcare Costs for All Kansans Act  
HB 2556 and SB 355**

Suite 315  
4240 Blue Ridge Blvd.  
Kansas City, MO 64133

Dear Chair, Speaker, President and Members:

I am a former Kansan, and a practicing attorney in Kansas City MO. I have many clients, individuals and companies, who reside, work and vote in Kansas. I am a member of MORE2, the Alliance for a Healthy Kansas, and a part of the KanCare bicycle team that has been riding to communities in Kansas to raise awareness of the lawmakers who have blocked Medicaid Expansion for the past 10 years.

I am relieved that you have finally decided to hold a hearing on the Governor's proposed bill, because it could give over 150,000 Kansas access to affordable health care. It is better late than never, although this delay has cost Kansans *millions* of dollars in lost federal funds. My concern, after meeting with people in communities throughout Kansas, is that our rural hospitals will close if this expansion is not passed. Although I do not live in Kansas, I am IN Kansas frequently and my elderly father and family members reside in Kansas. They need access to hospitals and adequate medical care. That simply is not happening now, because of the loss of excellent medical staff to our neighboring States. Healthcare professionals are leaving for better paying jobs in neighboring States that have passed Medicaid expansion.

Help protect Kansans, grow the economy, and strengthen our rural medical services by supporting HB 2556 and SB 355.

Sincerely,



Angela J. Ferguson Allard

February 11, 2024

Dear Kansas Legislature:

My daily experience is with people of various adult ages who struggle with health needs. Through no personal choice or fault they do not have and cannot "earn" enough to access adequate care. The wealth of America is overwhelmingly great. With any real understanding and heart Americans surely can and NEED to provide adequately for one another. Why don't we?

Mary Rachel Flynn

Dear Elected officials,

Expanding Medicaid is the humane thing to do.

Here are a few items from research:

Whether you qualify for Medicaid coverage depends partly on whether your state has expanded its program.

- In all states: You can qualify for Medicaid based on income, household size, disability, family status, and other factors. Eligibility rules differ between states.
- In states that have expanded Medicaid coverage: You can qualify based on your income alone. If your household income is below 133% of the federal poverty level, you qualify. (Because of the way this is calculated, it turns out to be 138% of the federal poverty level. A few states use a different income limit.)
- Thirty-eight states and DC have expanded Medicaid under the ACA (South Dakota will join them in July 2023).
- Twelve states continue to refuse to adopt Medicaid expansion, despite the fact that the federal government will always pay 90% of the cost (this will drop to 11 once South Dakota's Medicaid expansion takes effect).
- 21 million Americans had gained coverage as of 2022 through the ACA's Medicaid expansion.
- The uninsured rate, particularly among low-income residents, is considerably lower in Medicaid expansion states.

This should make your decision much easier!

Cynthia Forsberg

March 13, 2024

## Support Medicaid Expansion in Kansas

As a practicing obstetrician gynecologist, I recognize the importance of health insurance. I have worked in Wyandotte county since 2016, delivering hundreds of babies and seeing women from across the state. When asked what the hardest part of my job is, I always reply “being unable to get patients the care they need”. More often than not, the obstacle that my patients face is being uninsured so they can’t afford the healthcare that they need.

Shortly after passage of the Affordable Care Act, I saw a patient I will call Karen, a woman who was able to get Medicaid after 15 years without insurance. She had watched her mother endure the diagnosis and treatment of breast cancer, a disease that ultimately took her life. During her first visit, we discussed breast-cancer screening and she got her first mammogram. The results were normal, and she felt tremendous relief. Without the Medicaid, Karen would still worry about her health. Taking care of Karen is what healthcare should look like – but I cared for her before working in Kansas. Karen lived in a state with Medicaid expansion.

Despite the incredible benefits, the state of Kansas has still not expanded Medicaid. In our state, roughly half of the deliveries are paid for by Medicaid, allowing most patients to get the care they need during pregnancy. But could do so much better for our pregnant patients if they got healthcare **before** they got pregnant. Too many of my patients fall into the coverage gap. I recently saw a young woman, who I will call Samantha, who came into the emergency room for bleeding during her first pregnancy. I had to deliver the heartbreaking news that she was experiencing a miscarriage. She asked what she could do to make her chances of a healthy pregnancy better. You see, Samantha has type 1 diabetes. She works a full-time minimum wage job but earns too much to qualify for Medicaid under our current system. Without health insurance, Samantha cannot afford the insulin she needs to stay healthy. Her average blood sugars are around 300, which is why she experienced a miscarriage. It broke my heart to tell her that her best chance of a healthy pregnancy was to take better care of her diabetes, a task that she is not able to do without insurance. I know how to deliver good healthcare but I was unable to help Samantha.

I encourage our state legislators to pass Medicaid expansion to help my patients. My fellow physicians in the surrounding states are baffled that I can’t provide the same care they can since Nebraska, Missouri, Oklahoma and Colorado have all expanded Medicaid. Our patients deserve the same care.

Dr. Valerie French  
Obstetrician-gynecologist  
Wyandotte County, KS

Testimony for KS 2024 Medicaid Expansion hearing:

Imagine this story:

Your doorbell rings. When you answer it a man says, “I’m Dave. Congratulations! You are 1 of 50 people in the United States to receive \$1,000,000. Here is your check. And you will be receiving a check every year.”

You: Imagine what I could do with that! “What’s the catch?”

Dave: “The only requirement is that you have to spend the money in Kansas. It will help you and help the economy of Kansas.”

You: “I’m not sure I want to do that”.

Dave: “You can take the money for now. You can stop any time you want.”

You: “What happens to the money if I say no?”

Dave: “The money is divided among the other people who said yes. Why don’t you try it for this year?”

Since 2014 when US government funds were made available to states for Medicaid Expansion the majority in the Kansas legislature has not passed Expansion. Most years a hearing has not even been allowed. And it is not just \$1,000,000 – it is over \$300,000,000 per year that is turned away and distributed to the 40 states that accepted Expansion. Imagine what a help that would have been to providing medical care to 150,000 Kansans who cannot afford private health insurance. Imagine what a boost that would have been to the Kansas economy – increased jobs, helping rural hospitals stay open, expanding mental health services throughout the state, a healthier workforce.

In 2024 160 hospital administrators and officials asked the legislature to pass Expansion. And polls of Kansans show almost 70% say “YES” to Medicaid Expansion.

All we are asking is for you to say “YES” this year. If the legislature doesn’t like the money, they can always cancel it next year. But none of the states that have expanded Medicaid have chosen to leave the program.

In 2024, say “YES”. Your constituents will thank you.

Nina Fricke  
Overland Park, KS

February 9, 2024

To whom this may concern:

My name is Al Frisby and I live in Merriam KS.

I am the acting Chair for JoCo MoveOn. We have close to 1000 members in KS locally who don't understand why all four states surrounding KS support advocacy for those folks in need of healthcare because of their financial situation or disability and our leaders in the KS Capitol do not. We now have an approximate 5 Billion dollars in the kitty...so we can afford to help those who can't help themselves.

All but 10 states have moved in the correct direction. KS has not. Our state is like the bully on the playground, determined to hide the ball from others who want to have a good reputation for safe basketball. Our state should join the other 40 states to care for their citizens who can't help themselves for many reasons.

Al Frisby  
Merriam, KS



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)

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

**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

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



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. Receive 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 reneging 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

## **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

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  
Lincolnvill, Ks. 66858  
620-924-5532

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

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:

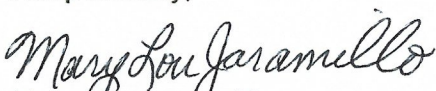
Thank you for the opportunity to provide written testimony in support of KanCare Expansion. My name is Mary Lou Jaramillo and I reside in the city of Merriam in Johnson County.

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

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

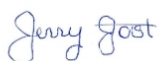
Dear Chair & members of the committee,

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



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

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 its 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

Date: March 14, 2024

To: Alliance for a Healthy Kansas

Re: Testimony in Support of Medicaid Expansion

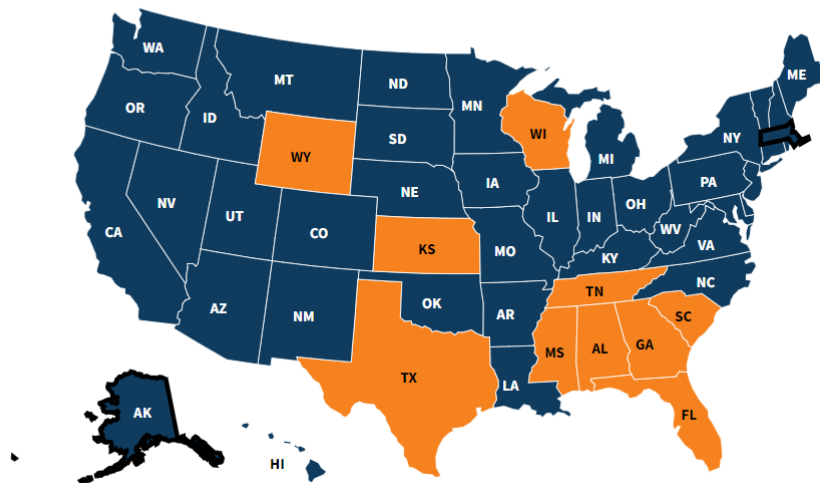
From: Lowell & Stacy Kohlmeier, 5127 MacLeod Drive, Manhattan, Kansas

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

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

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

**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

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

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 workplace 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, not 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 black ink, appearing to read "Julie Lyon", with a stylized flourish underneath.

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

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*



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 "JB McKenney".

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

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. Forty 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.

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

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

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

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

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



National Alliance on Mental Illness

# nami | 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



March 15, 2024

I urge you to pass expanded Medicaid in KS. I will not use it because I'm able to afford and pay for my own medicare supplement ins. I want to help support others in need in KS who need affordable health care.

1. Everyone in KS is entitled to access to good medical treatment.
2. Those who cannot afford it, still should have access.
3. Children should have access, all of them.
4. I understand that the Federal government will support much of the cost.
5. I understand that many county hospitals have closed because KS does not have broad medicaid coverage. That's not right.
6. I understand that expanded medicaid would employ many throughout the state, and in all counties. Both professional and administrative jobs would be created and filled.
7. I believe expanded medicaid would help bring KS to the norm in medical care, and would help attract other businesses to locate here.

Please support and pass this needed legislation.

David R. Nachman  
10990 Quivira Rd Ste 200  
Overland Park KS 66210  
T: 816.285.6029  
[dnachman@nachmanlaw.com](mailto:dnachman@nachmanlaw.com)

February 23, 2024

Dear Kansas Legislature,

As a career educator, I have seen how health services for students and families impacted the students and patrons I served. During the "Brownback Experiment," many social services were impacted by cuts and a lack of funding. Foster care, Medicaid reimbursement to school districts, and basic state aid cuts to public schools, all impacted the services provided to Kansas citizens and school districts. It has taken us years to recover from the devastating impact of the "Brownback Experiment".

Fast forward to 2024, Kansas legislators still deny the 80% of Kansas citizens who ask for and support Medicaid expansion. By expanding Medicaid, an estimated 150,000 Kansans with low incomes would gain access to medical care. About \$700 million in annual federal funding would flow into the state, offering a lifeline to 59 rural hospitals at risk of closing.

Rural health services have declined and facilities closed in many areas of our state. When Kansas citizens do not have healthcare and healthcare coverage, those costs are passed on to the insured. Eight rural healthcare facilities have closed due to restricted funding and the lack of federal funds since 2014. 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 healthcare worker shortage.
- Kansas business owners could save up to \$80 million per year in healthcare costs if Medicaid was expanded.

Please listen to the will of the citizens of Kansas. Please stop sending Kansas taxpayer-collected funds to other states.

Respectfully,  
Dr. Janet Neufeld

March 17, 2024

Dear Chairman and committee members,

Thank you for the opportunity to provide testimony in support of Medicaid Expansion. I would like to strongly encourage you to support Medicaid Expansion for our state.

Expanding Medicaid would be a win for Kansans in so many ways and improve the quality of life:

- 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 healthcare 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.
- Makes Kansas more economically competitive. 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.

Please vote YES in support of Medicaid Expansion in Kansas.

Sincerely,  
Adrienne Newlin  
Overland Park, KS resident

Date: March 20, 2024

From: Steve and Marcia Nicely, SCLA

RE: HB 2556 / SB 355 Proponent testimony

Kansas legislators,

Thank you for your service to our state. We all know the arguments in favor of Medicaid expansion and the arguments against it. I don't want to argue and suspect you don't either. Let me just invite you to join the majority of us who favor it on behalf of the struggling families who need it and we taxpayers who are willing to pay for it.

Thank you,  
Steve and Marcia Nicely  
6527 Maple Dr.  
Mission, KS

March 15, 2024

Dear Chairman and Committee members,

I urge you to support Medicaid Expansion. It's a win-win for Kansas.

Thank you for the opportunity to submit testimony.

Kansas is a rural state and many rural hospitals will benefit from this expansion. The proposed bills are revenue neutral. About \$700 million in annual federal funding would flow into Kansas. Plus there is a federal funds signing bonus when Kansas approves expansion. This increase of funds are too large to ignore!

150,000 low income Kansans need to be included in this opportunity for health care.

We have relatives who have been impacted by the closure of the hospital at Fort Scott. They now have to drive longer distances to receive treatment, which can be life-threatening. Please do everything to prevent further hospital closures across the state.

Please vote to approve Medicaid Expansion

Thank you,  
Ann Norbury  
5101 Ballentine  
Shawnee, KS 66203

March 15, 2024

I fully support Kancare expansion in Kansas. We need it for the hospitals and the rural communities and the people who work in healthcare . Also it helps people who work in the service industries who are in the gap, the working poor.

Please move this forward so it can be voted on and passed which would help all Kansans. Everyone I talk to feels the same.

Respectfully,

Leslie Nord

March 15, 2024

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

Dear Chairman and Committee Members,

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

Expanding Medicaid benefits all Kansans. Here are just a few of the benefits that would result:

150,00 Kansans who currently fall in an insurance coverage gap would now be covered. It has the potential to boost the state's economy with a healthier, more efficient workforce and up to 13,000 new jobs.

Medicaid expansion helps hospitals and the communities they serve. Besides providing healthcare, hospitals are generally among the largest employers in their communities and a key foundation for economic growth and development.

Medicaid expansion helps children by boosting families' financial security and enabling children to get better care from healthier parents. Medicaid expansion is an investment in our future.

This is by no means a complete list of all the benefits. It's time Kansas joins the 40 states that have already recognized the benefits that come with Medicaid Expansion.

I am a part of the overwhelming majority of Kansans who agree - it's time to expand Medicaid!

Thank you for your support of this important legislation,

Donna Oberstein  
Overland Park

March 13, 2024

I am 84 years old. I would be dead now were it not for Medicaid.

I had a kidney transplant 13 years ago and have received the best post surgery care possible from The University of Kansas Hospital. However my income is way below the poverty line. Medicaid made it possible for me to receive treatment.

I live in a rural area where the average income is below the poverty level for most individuals and most families. It's only right that those folks receive the same care and treatment that Medicare made possible for me.

W. W. O'Bryan  
303 N Prairie St  
Hepler, KS 66746



**Testimony: Kansas Senate's Joint Committee on Ways and Means Committee and the Public Health and Welfare Committee on Senate Bill 355 regarding Medicaid Expansion for Kansas Citizens**

**Testimony: Kansas House of Representatives's Public Health and Welfare Committee regarding Medicaid Expansion for Kansas Citizens**

My name is Lana Oleen and I reside in Manhattan, Kansas.

I had the privilege to represent the Manhattan/Junction City area in the Kansas Senate for 16 years, serving as the elected Senate Majority Leader for 4 years. During my legislative service, Senate District 22 was composed of the cities of Manhattan, Junction City, Ft. Riley, some smaller towns and also rural areas. I did (and still) consider it a microcosm mix of the state's population in Kansas. The measure before you today speaks to these same kinds of demographics, whether urban or rural.

We know the facts that we already "pay" (through our federal taxes and our insurance premiums) for health care. Much of Kansas taxpayer money is channeled to the other forty (40) states that have already expanded Medicaid for their citizens.

We know that closures and reduced services are happening to our fellow Kansans. We know there are citizens who need medical and mental health services, as well as physical therapy services. In numerous situations our citizens can't access these services because of hospital closures and "downsizing" in rural communities. We know emergency care facilities are over-burdened by citizens needing help and health care positions are stretched. Kansas and Kansans can do better

I implore you to work together, make Kansas/ Kansans healthier and safer by supporting Medicaid with your votes in these committees and in your respective Chambers.

Sincerely,

Lana Oleen  
3000 Stagg Hill Road,  
Manhattan, KS 66502. Cell phone: 785-341-3623



## Medicaid Expansion Testimony

Dear Legislators,

I am a family nurse practitioner at Vibrant Health in Kansas City, KS. Vibrant Health is a Federally Qualified Health Center so many of the patients I serve live in poverty and experience many barriers to care. Many of our patients must decide if they should spend the little money they have left after paying all the bills on food or medicine. A parent may have to choose between feeding their child or buying medicine and paying for a visit to the doctor to address their ailments. No parent should ever have to go without medical care for themselves or their children because they can't afford it. Receiving medical care should not be a luxury available only to the rich.

Medicaid expansion would allow those who currently make slightly too much money to qualify for Medicaid but not enough to afford health insurance on their own, to access medical care. When people are sick and can't get appropriate medical care, they become unproductive members of society. Taking care of this basic need would lead to more productive, happier, and healthier communities. Having access to primary and preventative care is a lot less expensive than ending up in tertiary care because of an advanced chronic condition that could have been avoided. I'm asking all of you to expand Medicaid coverage to improve the health of Kansans everywhere. You hold in your hands the ability to make a great impact on people's lives. Please don't squander this opportunity to make a difference.

Sincerely,

Erika Ortiz  
17546 W 112<sup>th</sup> St.  
Olathe, KS 66061

**Erika Ortiz, MSN, FNP-C**  
**Outreach Nurse Practitioner**  
**Vibrant Health/WYCO Care Connection**

*Susan Osborne*

1211 S. Siena Ct.  
Wichita, Kansas 67235  
[sosborne46@cox.net](mailto:sosborne46@cox.net)  
316-680-4868

March 15, 2024

Re: Testimony in Support of Medicaid Expansion

Dear Chair and Committee members:

I am submitting my testimony in support of Medicaid expansion. I ask you to support it and send it to the floor for a vote. I have been actively researching Medicaid Expansion for the past 8 years, and I see only benefits for making such a decision.

None of the 40 states that have expanded Medicaid since 2014 have reneged. The concerns about expansion have all been addressed, and it is past time to vote in support. As a Kansan, I hate to see our citizens lose over \$7 billion dollars in our taxes to the states that have expanded. 150,000 Kansans, the working poor, would gain access to healthcare instead of being caught in the "gap." Our rural hospitals are at risk of closure – more than any other state (except Texas!) These hospitals need permanent and stable funding that would be provided by expanding Medicaid. Even Mississippi is now considering expansion....it has already passed their House.

Most Kansans in each political party support expansion, and we are closely watching our legislators this year.

I do want to mention an additional reason that I support expansion. I am a Catholic, and I have watched the Catholic Bishops of Kansas waiver on their support in the past. However, this year it is different. Here is a direct quote from Bishop Carl Kemme of the Catholic Diocese of Wichita in response to a question about his support directed through his executive secretary:

"He stands with you. He and the other Kansas Bishops are all for it. They have even been promoting it. It is just unfortunate that so many politicians are against it."

Listens to Kansans instead of the multiple falsehoods that have been disseminated by biased sources with hidden agendas. The ample solid research indicates that it's past time for Kansas to pass Medicaid Expansion!!!

Sincerely,

Susan Osborne

March 15, 2024

We in Kansas were one of the first states to try to set up a system to expand medicaid, only to see the effort and expense of doing this trashed for highly unfounded political reasons. We have continued to lose billions of dollars available from the federal government to help needy Kansans at and below poverty levels. It is short-sighted, inhumane, and destroying our small rural hospitals and the availability of medical care to those populations. Please listen to the majority of Kansans in their wanting the expansion of medicaid that has been adopted even by our highly conservative neighboring states.

Kathleen Outlaw  
8801

March 15, 2024

Dear Chairman and committee members:

Thank you for the opportunity to provide support for the expansion of Medicaid in Kansas. I believe this legislation is important for Kansas for many reasons, including:

1. **Medicaid Expansion won't cost Kansans taxpayers a single cent.** The bills being heard next week, HB 2556 and SB 355, are revenue-neutral.
2. **About \$700 million in annual federal funding would flow into the state.**
3. **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.
4. **Healthcare costs for everyone would be reduced.** Emergency rooms are treating Kansans without the ability to pay, raising the costs of healthcare 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.
5. **Addresses the mental health crisis** with improved access to care and medication.
6. **Preserve and strengthen rural healthcare.** Rural hospitals face high levels of uncompensated care; 59 of the remaining 102 rural hospitals across Kansas are in danger of closing. Having grown up in the rural part of Kansas, I know how challenging it is to find good healthcare within an hour of your home.

Please support the expansion of Medicaid in Kansas.

Melinda Parks, Lenexa, KS

To Whom It May Concern,

I am writing to express my support for expanding Medicaid. I see no reason not to make this move, as HB 2556 and SB 355 will provide healthcare to those most at risk and lowers health care costs for over 150,000 Kansans. It is also revenue-neutral and so will not cost any taxpayer money. The majority of Kansans support Medicaid expansion, so any legislator who is listening to their constituents should enthusiastically support this decision. Please do not let partisan ideology prevent sick people from receiving care.

Aside from these general reasons, I support expanding for two personal important reasons. First, I am a pastor and so am committed to improving conditions for all people, who I believe are all made in the image of God. For those who use pro-life language, this measure should emphatically be seen as pro-life because it will literally save lives and improve the quality of life for thousands. I have also ministered in rural communities, and I know that Medicaid Expansion will go a long way toward supporting these at-risk places where hospitals will continue to close without these readily available funds.

My second reason for supporting Medicaid Expansion is even more personal. My son has special needs and has benefited greatly from KanCare. I want to ensure as many as possible can have access to such care with even fewer barriers to access. Surely accepting this money will only make it possible for more children to receive care. I have also recently started caring for my elderly father-in-law, who has moved to Kansas to live with us. I want there to be a strong healthcare network for the challenges he faces, along with all other elderly Kansas residents.

Please do not pass up the opportunity to bless countless lives. Thank you for your consideration.

Regards,  
Christopher Perrey  
1704 N Stoney Point St.  
Wichita, KS 67212

March 14, 2024

Please listen to the people of Kansas, and expand Medicaid. I am for spending the federal money available for our state instead of letting everyone else benefit from it. It is a no-brainer in my opinion. Help our own. Thanks!

Liza Perry

3186 Hamilton Rd, Princeton, KS 66078



March 15, 2024

Please consider expanding Medicaid for Kansas residents. Costs are rising and we are paying more to take care of ourselves and provide for our families. I understand that expanding Medicaid will reduce health care costs for everyone by providing health insurance to 150,000 residents in rural areas, small towns, and cities across the state. Expanding Medicaid will provide coverage to hardworking Kansans and result in much-needed investments in our communities to strengthen our hospitals, clinics, and provider networks. It will also make Kansas more competitive with neighboring states that have expanded Medicaid, protecting jobs and ensuring Kansas continues to be a good place to live, work and raise a family.

I live in Marion, Kansas, a small rural community with a local hospital. Having access to a hospital and clinic nearby has saved many lives, including mine. Extra funding will help keep St. Luke Hospital and Clinic open.

Thank you for your consideration of this request,  
Margaret Pickering

To Whom it may Concern:

February 12, 2024

I am providing this short letter in support of Medicaid expansion in Kansas.

Our son has had various missteps and illnesses. Eye exams, routine checkups, lacerations, cuts and abrasions along with several trips to the ER for falls and accidents of one kind or another have been a part of this young man's life.

I am retired and my wife and I have ordered glasses, contact lenses, paid for treatments, medications and procedures that would have been covered by Medicaid.

Some years as much as \$2 - 3,000.00. One year probably, a little more than that.

Our son has normally been employed and on occasions with more than one job and often has worked weekends on his own initiatives recycling materials and being of service.

It just seems to me that when our son has broken glasses and got to a point where they cannot be replaced without an examination or had a cut and needed stitches, or a broken finger all-in-all his being qualified for Medicaid would have saved us probably \$6 - 8,000.00. Our son's personal confidences and self-esteem would probably have also been bolstered several years earlier had he felt that he had his own coverage and was not relying on us into his late 20's.

Today, this is no longer an issue for us. Our son is employed and he has insurance coverage for himself and his family. He has always been a reliable and hard worker.

My point is that in our case this was never about trying to identify and keep a welfare recipient and benefit those who would have preferred not to work or encourage any welfare state encroachment in our little piece of Kansas. That is in my opinion foolish thinking. Selfish thinking and very un-Christian like thinking. A standard that today in my thinking I do not care for but see in the current majority leadership of our legislative bodies here in Kansas.

Again, I support Medicaid Expansion in Kansas. I do this for my concerns and hope for those who are deserving of assistance and comfort that Medicaid Expansion provides.

The economic impact in our rural community medical facilities is also obvious and will help to sustain hospitals, clinics and emergency care personnel, operations and agencies in our rural areas, towns, cities and counties. Much needed as rural Kansas continues to move to a future.

Respectfully,  
Douglas Plummer  
130 S Second Ave  
Minneapolis, KS 67467

March 13, 2024

We know that 78 percent of Kansas want low income people and families to have health care. I am over 65 and glad to have Medicare, but the population below 65 are in a health care desert.

What about our rural residents? Farmers in Western Kansas are aging, they are suffering drought and livestock losses, and mental health issues are increasing as this population has been taking their own lives at a record pace. And we raise up farmers as heros, but treat them unfairly as our health care dollars go to other states with Medicaid expansion.

Please help them by giving them Medicaid expansion!

Thank you,  
Janet Podoll

March 15, 2024

Date: March 15, 2024

Name of Conferee: Jessica Porter, Private Citizen

Bill Number: SB 355

Testimony format: Written Only

Disposition: Proponent

Contact Info: [Jporter4410@gmail.com](mailto:Jporter4410@gmail.com)

Chair Carolyn McGinn and Members of the Committee, thank you for giving me time to share my thoughts on the SB 355.

I urge you support SB 355 because it protects rural hospitals, and health care in rural communities. Medical physicians, nurses, and hospitals in Kansas have been fighting for years to expand Medicaid, it is time to listen to the people of Kansas! Eight (8) rural hospitals have closed while we've waited for expansion, devastating surrounding businesses and costing communities thousands of jobs. Legislators who continue to stand in the way of expansion show that they're simply thinking about politics, not about their constituents. Once again, I thank you all for hearing my thoughts on this bill, and I encourage you to support Medicaid Expansion by supporting SB 355.

March 15, 2024

Expand Kancare now!!

David Poskin

STATE OF KANSAS  
HOUSE OF REPRESENTATIVES

STATE CAPITOL  
TOPEKA, KANSAS 66612  
(785) 296-7436  
mari-lynn.poskin@house.ks.gov



12924 HOWE DRIVE  
LEAWOOD, KANSAS 66209  
(913) 735-0064

MARI-LYNN POSKIN  
20TH DISTRICT

March 15<sup>th</sup>, 2024

To: House Health and Human Services Committee Members  
Senate Ways and Means Committee Members

Distinguished Committee Members,

Thank you for holding a hearing on Medicaid Expansion. It's way past time for Kansas to stop sticking its head in the mud and refusing to pass Medicaid Expansion for partisan politicking. A recent statewide survey showed that 65% of Republicans, 76% of Independents and 96% of Democrats support expanding Medicaid. Members from both Republican and Democratic parties in Kansas support it, and nationwide both Democratic and Republican Governors and Legislatures have passed expansion. As one of the last states to consider it, we have plenty of data from other states to guide us.

As a border district, my HD 20 small businesses have to compete with Missouri for workers who have access to healthcare coverage through Medicaid. Here is a breakdown of what industries would benefit the most and how many workers would become eligible for coverage:  
Accommodation & food services: 23,000 Kansans Retail workers: 19,500 Kansans Health care & social assistance: 18,000 Kansans Education: 17,000 Kansans Manufacturing: 16,000 Kansans Construction: 10,000 Kansans

Not expanding Medicaid increases healthcare costs for ALL Kansans and we have the power to put a stop to that. Let's get it done!

A handwritten signature in blue ink that reads "Mari-Lynn Poskin".

March 16, 2024

Dear Chairman and committee members,

I appreciate the opportunity to provide testimony in support of Medicaid Expansion. As a public educator, I see the need for this expansion in my day-to-day work.

Because Medicaid Expansion would provide 15,000 low-income Kansans access to medical care, it would protect these citizens from crippling medical debt and improve their overall health. I work with many low-income families as an educator, and they have so many stresses in their life. Being able to access the medical care they need would take one thing off of their plates. The healthier Kansas families are, the better Kansas students can learn in school.

Medicaid Expansion is also the fiscally responsible thing to do. First, it would lower healthcare costs for all Kansans. Most importantly, it would bring additional \$700 million in annual funds into Kansas. HB 2556 and SB 355 are revenue neutral, so it wouldn't cost Kansas anything. It also strengthens rural health care in a time in which over half of our rural hospitals are in danger of closing. Finally, it makes our state more competitive, as the surrounding states have already expanded Medicaid.

One of the most important benefits of expanding Medicaid is that it will help us address the mental health crisis we are facing. I can attest to the fact that our students and families are in desperate need for mental health care. While schools do what they can with the allocated funding and our community partners to support this need, we continue to run out of funds to get students the help they need every year. Medicaid Expansion would help alleviate the pressure by providing some of these students coverage their families didn't previously have.

Thank you again for the opportunity to provide written testimony in support of Medicaid expansion. It is beyond time to do so.

Angie Powers  
Olathe, KS

I was born in Kansas and have lived in Topeka for over 45 years. I ardently support expansion of Medicaid NOW in Kansas. I thank our current Legislature for scheduling committee hearings on this vital issue.

In 2017, I attended a committee hearing on Medicaid expansion in the Kansas Capitol conducted by the excellent Republican senator and chairwoman Vicki Schmidt. The meeting was fair to both sides, facts were presented, and the members unanimously passed that bill out of committee. Unfortunately, passage was blocked by the Republican leadership. Each session since, I have observed the Republican leadership block Medicaid expansion. All Kansas legislators should be given the opportunity to work together and vote on this important matter. My voice and the voices of all Kansans are wrongly silenced when most of our representatives are never allowed to vote. As a Kansas taxpayer and constituent, I object.

Providing life-sustaining health care to needy persons should be a nonpartisan issue especially to those legislators who, like me, profess to be Christian. The 40 states that have expanded Medicaid include all our neighboring states. Even states with partisan legislatures like ours have worked together to pass expansion. Kansas is now one of only 10 states that continue to reject Medicaid expansion.

Both supporters and opponents of expansion have had several years to learn from the expanded states. Studies clearly show that expanded states are reaping big benefits. Kansas can expect the same success. The reasons to expand Medicaid in Kansas are many and are based on research and facts. First and foremost, expanding Medicaid would provide health care to numerous people in Kansas who live barely above the poverty level. They are too poor to buy health insurance yet make too much to qualify for KanCare. Unfortunately, 225,000 Kansans between 19 and 65 have no health insurance. The nonpartisan Kansas Health Institute recently announced its new estimate that Medicaid expansion would serve 152,000 Kansans. These Kansans include parents; farmers; caregivers; workers at small businesses, as in food service and retail; veterans, 30,000 children, and many disabled adults and children.

Under expansion, the federal government would cover 90 % of the costs for Medicaid services in Kansas. By expanding, our state would receive an influx of \$682.4 million dollars a year. Expanded states are already receiving these millions. Since 2014, Kansans have paid federal taxes yearly that go into the expansion program, but we forfeited any chance to bring these tax dollars home. Our legislature's refusal to expand Medicaid in Kansas has cost our state billions of federal dollars.

The KHI recently estimated from its research that expanded Medicaid coverage would in effect be at no cost to our state for the first eight years. In any event, our ten percent share would clearly be outweighed by the economic boost and savings to our State. Kansas has been called "unrivaled" in its rural hospital crisis, with 59% of rural medical centers at risk of closing and those in 84 of our 102 counties losing money on unreimbursed patient services. The nearly \$700 million annual influx of federal funding to our state could potentially save rural hospitals from closing and help struggling rural medical providers. Hospitals could fund equipment, add employees, and add new services. Expansion would create 23,000 jobs for providers of additional services. Expansion money could ensure competitive wages for doctors and other medical staff and halt their exodus from our state to expanded states. Unexpanded states like Kansas



have to absorb the financial consequences of higher numbers of uninsured and uncompensated care. Insurance for the needy would decrease their dependence on expensive emergency rooms. The bills for these services are often inflated and then written off. Property taxes will no longer have to be high enough to subsidize local public hospitals. Expansion could also mean better wages for our essential home caregivers. Our workforce would be strengthened as health outcomes for working poor and rural residents improve like in other states with expansion. Insurance costs could be lower for all Kansans, as they are in expanded states; and taxpayers would be relieved of the burden of paying for the higher priced uninsured healthcare. This would also reduce medical debt which is a leading cause of personal bankruptcies. Expansion would improve availability of mental health counseling and addiction treatment and thus benefit law enforcement by reducing arrests and confinement costs. 15,000 Kansans with disabilities will be allowed to enroll in KanCare. Expansion will also lead to economic development, increased tax revenue, and increase our state's competitiveness with other states. It will positively impact all parts of Kansas' health care system and help rural communities survive.

Opponents of expansion in the Kansas Legislature have never refuted any of these many reasons for expansion. The Republican leadership bases their opposition and attempts to justify their blocking of Medicaid expansion on their fear that it would grow the welfare state. Poor people in our state should be entitled to access healthcare. Opponents also complain that expansion will provide care to able-bodied Kansans. This bald argument is nothing more than an ideological bias against poor people and "entitlement programs." Some 70% of those eligible for healthcare under Medicaid expansion are working at least part time, many are children, and many others are plainly too disabled or impaired to work. Legislative leadership has failed to support either of these arguments with any facts or figures.

Finally, our Legislature should be hugely motivated to pass Medicaid expansion by the fact alone that 70% to 80% of Kansans support it. Most good Kansans believe we all have a moral obligation to care for the sick and poor. The few legislators blocking hearings on expansion must be aware that their constituents are savvy and want expansion. The Director of the Kansas ACLU reported at the Capitol this past week that the Kansas legislature ranks among the very bottom of states that follow the will of their constituents. Surely, you are obliged to listen to the people of Kansas who pay taxes and your salaries.

If you have actually read the foregoing written evidence, I thank you wholeheartedly. During these hearings you will be presented with overwhelming evidence that Kansas needs Medicaid expansion NOW. I plead with you to use your intelligence, morality, and rationality in weighing the evidence before you and to do the right thing. EXPAND MEDICAID NOW!

Leslie Prentice  
4020 SE 37th Street  
Topeka, KS. 66605  
(785) 266-9349

March 15, 2024

I am an ER nurse for many years. I have seen how uninsured and under insured patients get their care. It is not the way to get the best care possible for good health. It's also so very much more expensive. Just fund medicaid to help folks get care before they get too sick. Let them get screenings and immunizations. Let them go to planned parenthood, if that's convenient for them.

Don't end up spending more money on more acute illnesses.

Keeping rural hospitals going is a wonderful way to provide good care as well as employ folks and keep them in their small towns.

Don't waste federal dollars

Jamie Proffer

March 14, 2024

I ask you to make healthcare available for all Kansans by expanding Medicaid. Allow me to share my experience.

I am a masters prepared nurse. For several years I worked in a safety net clinic in Kansas City, Kansas. I saw hardworking people in low paying jobs that did not provide health insurance. Some had chronic diseases that required continual care and medication. As they struggled to pay rent, buy food, and take care of their families, they were often forced to choose between providing the necessities for their families and taking care of their own health needs. Putting their own needs on the back burner, led to more health problems, more personal sick days, loss of employment...a downward spiral.

We can help these hardworking people stay healthy and succeed. Helping these adults helps their families, their children, society. We all benefit from healthy neighbors, healthy workers.

Please expand Medicaid so all Kansans can achieve their potential.

Thanks for your consideration,  
Jill Quigley  
Retired Nurse, Former Legislator.

## **Testimony in Support of the Expansion of Eligibility for KanCare**

My name is Trudy Racine, and I am a former administrator in the Department of Children and Families and at the Kansas Childrens Service League. I appreciate the opportunity to provide testimony in support of expanding Medicaid coverage to the more than 150,000 Kansans who need the essential services expansion would provide.

Ample evidence has shown that at the macro level, Medicaid expansion can reduce health care costs for everyone, bring additional hard-earned federal tax money paid by all Kansans back to Kansas rather than subsidizing other states' Medicaid expansions, strengthen rural health care by helping struggling hospitals stay afloat, and make Kansas more economically competitive by increasing the state's economic input.

Closer to home, improving access to medical insurance can protect families from medical debt, fix our current Medicaid eligibility levels, improve access to health care, and make it possible for lower wage earners to afford the multitude of other things their families need. My work and life experience has made it abundantly clear to me that families do better when they have stable housing, employment, and medical care. All too often, it's lack of access to medical care that causes things to fall apart. If you can't afford the medications, surgeries, or other medical care you need, you often can't work, and it's a slippery slope downward from there.

Can we realistically expect a family of three that earns \$4 an hour (just over the \$8,345 limit for Medicaid eligibility) to pay the full cost of their prescriptions? We have great insurance, so my co-pay for my generic (frequently prescribed) cholesterol medication is \$0. As in most areas of health care, it's the private pay patients who get the bigger bills, because insurance companies have all the bargaining power. If I had to pay the full retail cost of that prescription it would be \$271. Even if I had a relatively common hourly hiring wage of \$13 per hour, that's 20 hours (before taxes and expenses) of work to pay for one medication. I hope no one else gets sick, the car doesn't break down, the rent doesn't go up...

Most Kansans agree. As cited in the Alliance for a Healthy Kansas' testimony, a recent survey by national research firms, Perry/Undem and Bellwether Research, found nearly 4 out of 5 Kansans (78 percent) want low-wage families to have access to KanCare for coverage they can count on if they are not offered health insurance through a job or cannot afford to buy it on their own.

So, if economics and public opinion clearly and overwhelmingly support expansion, why has the Kansas Legislature so steadfastly and repeatedly resisted? "Politics" is the easy answer, but there's also evidence that some may have a misplaced belief that Kansans who can't afford medical care are somehow unworthy of our help and support. Neither of those reasons can be easily defended when faced with the reality of the harm that is being done, so shame on us. All of us.

Thank you for your consideration.

13 March 2024

I am a retired KS Army National Guard Colonel who was previously head of the Physical Exam Section of the Kansas Army National Guard. In 2003, the United States invaded Iraq and this was done primarily with active duty military members. In 2004, we began activating National Guard members for service in Iraq. A major problem in Kansas was that up to 40% of some units were medically or dentally disqualified from deployment. The main contributing factor was the lack of medical and dental care due to a lack of insurance. This caused such a manning problem that the US Military expanded eligibility for the Tricare health insurance to all drilling Guardsmen and Reservists. In the Kansas Army National Guard, this provided 5600 soldiers (plus their families) with medical and dental insurance which for many was for the first time. As care was rendered, the medical and dental condition of the vast majority of the disqualified guardsmen improved and they were then eligible to deploy in support of our military operations.

This expansion of access to medical and dental care through government health and dental insurance shows what could be done to improve the functioning of the US Military. Imagine the improvement in the functioning of the Kansas workforce and families if we expand Medicaid in Kansas.

Richard J Randolph III, MD

COL, US Army - Retired

March 15, 2024

There are a number of reasons why I support expansion of Kancare.

1. When lower income folks are not eligible for Medicaid and need to access healthcare, it ends up costing everyone with higher premiums.
2. Not having health insurance restricts people from accessing preventative services. This causes more emergency room visits and serious illness.
3. More rural area hospitals are at risk of closing which impacts their patients and communities.

Please consider passing this important initiative.

Susie Rawlings  
2212 W. 104<sup>th</sup> St.  
Leawood, KS 66206

**March 17, 2024**

**Testimony to the Senate Assessment and Taxation Committee**

**NAME:** Claire Reagan

**TITLE:** Parent, former educator, and current Olathe Public Schools Board Member

**EMAIL ADDRESS:** [clairereagankc@gmail.com](mailto:clairereagankc@gmail.com)

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

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

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

Dear Chair & members of the committee,

I am writing to respectfully request that you **PASS** Medicaid Expansion out of committee. Thank you for giving Kansans the opportunity to provide written testimony on this very important issue.

The bottom line: Expanding Medicaid will make health insurance accessible to 150,000 Kansans who otherwise may not have affordable coverage. This **revenue neutral** legislation is what Kansans want, and not just those who'd directly benefit from the expanded coverage. Our family is fortunate to have health insurance through my husband's employer; when I worked full time, I had access to coverage as well. This testimony is on behalf of those who fall in the current coverage gap, those whose community is at risk of losing its local hospital, those who would benefit from the extensive employment opportunities expansion would bring.

As I've been learning about the clear benefits of expansion, one has stood out to me. Medicaid Expansion will help stabilize health care costs for **ALL** of us. Currently, the cost of providing care to uninsured individuals, like those who are forced to use emergency rooms for primary care, is passed on to the rest of us through higher health care costs. As Kansans gain insurance through Medicaid Expansion, this uncompensated care declines, reducing the need to increase prices for everyone.

Beyond the financial benefits our state and residents would see, expanding Medicaid is the **right** thing to do. How we treat (and mistreat) those among us who are under-served, those who lack access, those who struggle to feed their families, those who are working but make too much to qualify for KanCare (a family of three needed to earn less than \$9,800 per year) and are not provided coverage through their employment, how we treat these fellow Kansans is a true reflection of our values. Failing to expand Medicaid lacks compassion, common sense, and basic decency.

It is with the utmost respect and appreciation for what our great state has provided our family thus far that I appeal to you now. I trust you will proceed with our entire state's very best interest in mind and **SUPPORT** Medicaid Expansion.

Thank you for your careful consideration.

Claire M. Reagan

Olathe, KS

March 15, 2024

Dear Chairman and committee members,

Thank you for taking the time to read my testimony in favor of Medicaid expansion. Kansas is one of only 10 states that has NOT expanded Medicaid, do we want to be known as the last state in our union to take action?

Expanding Medicaid helps ALL Kansans, unlike other bills that are moving forward to only help a small percentage of Kansans. Kansas tax dollars should go to bills that benefit us all. Over half of our rural hospitals are in danger of closing. This will be detrimental to family growth, senior citizen, and the economy in these areas. People wont move there, and residents will move out.

Expanding Medicaid doesn't cost tax payers any additional money and it will bring \$450 million in Federal funding over the first two years!!!

We hear all the time there isn't a gun problem, there is a mental health problem. Let's put our money where your mouth is! Expanding Medicaid will greatly improve access to mental health care and medication.

Please expand Medicaid for all of Kansans.

Thank you,

Michaela Reynolds

Shawnee, KS



March 14, 2024

This is so needed. As many young people would qualify that aren't eligible for health coverage through a possible family member. Where mental health is involved many young workers in Kansas won't have earnings to offset insurance cost, they must continue to have care. Those on disability need the expansion to pick up what Medicare doesn't. Please push for the expansion. Kansas's out counting on you. Rural hospitals are closing. Help them to stay open.

Deborah Robinson

## TESTIMONY IN FAVOR OF KANCARE (MEDICAID) EXPANSION

**February 26, 2024**

I am a medical ethicist and educator providing written testimony in favor of KanCare (Medicaid) expansion.

I was raised on a farm by conservative, Christian, Republican parents. I live still in a conservative rural Red Kansas community where we know and value hard work and independence.

We know also—all of us do—that even the hardest working farmer or laborer can get injured or sick. We all know how expensive medical care will be when that happens. Even if we are privileged to have healthcare insurance benefits, as most of us are, we have some awareness of how expensive insurance premiums would be for those who do not have such privilege and cannot afford that expense on their own.

Indeed, the vast majority of us do have employer-sponsored insurance benefits, or we're old enough for Medicare or disabled enough to qualify for disability benefits or poor enough to get Medicaid. But not all of us qualify for one of those or are wealthy enough to self-insure. Some of our neighbors slip through the cracks of this hodge-podge insurance benefits system. They still get sick or injured and need healthcare. So what happens then?

I have spent a good portion of my personal and professional life tending to the needs of such neighbors in need, first as a Christian and an ordained minister, then also as an ethics educator and consultant.

I have begged healthcare providers for provision of free or reduced fee care for neighbors who needed help but couldn't pay.

I have visited and prayed for, then officiated the funerals of neighbors who didn't get care soon enough or at all.

I have collaborated with safety net clinics in Kansas and Missouri to create nonprofit organizations that solicit pro bono specialty care for patients who need it yet have no payer source.

I have helped hundreds of new neighbors find jobs with employee benefits for healthcare.

My wife and I have given away tens of thousands of dollars in charitable donations to help families and their children access healthcare or establish income generating businesses so as to sustain health and better prepare for future healthcare crises.

Many of us are doing our part. But still it is not enough. Still there are neighbors in need who suffer too long and die too young for lack of adequate healthcare access.

Some of them end up at the University of Kansas Hospital where I provide ethics consultation. My clinical colleagues take care of many patients who have no payer source. Some of them go

## TESTIMONY IN FAVOR OF KANCARE (MEDICAID) EXPANSION

**February 26, 2024**

bankrupt. Ultimately, we all foot those unpaid medical bills. We all know that those costs became much higher than they would have been if uninsured patients had been able to access care long before they required an ER visit and hospitalization.

For those of you to whom it matters, please understand that Medicaid expansion actually is a fiscally conservative—also Christian and compassionate—response to a fixable problem.

We all know how to resolve this, don't we? We know what could be done for Kansas neighbors who slip through the cracks of a hodge-podge healthcare insurance system. Almost every state except this one has implemented known solutions for well-known problems.

I am doing my part. Many of us are. Now we are asking our Kansas legislators to do your part. Expand KanCare (Medicaid) access. Just do it. Please.

Tarris (Terry) Rosell, PhD, DMin, HEC-C  
Rosemary Flanigan Chair at the Center for Practical Bioethics  
Professor of Pastoral Theology for Ethics & Ministry Praxis -- Central Baptist Theological Seminary  
Clinical Professor, History & Philosophy of Medicine -- University of Kansas Medical Center, School of Medicine  
Co-Chair, Hospital Ethics Committee; Director, Ethics Consultation Service -- University of Kansas Health System

5374 Choctaw Ln, McLouth, KS 66054

## Cutting Healthcare Costs for All Kansans Act Proponent Testimony

February 2024

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

My name is Shea Roy and I am a current PhD student studying Health Policy & Management in Kansas City. I am proud to provide proponent testimony in support of the Cutting Healthcare Costs for All Kansans Act. My educational specialty is Medicaid and disability health policy, which makes me especially qualified to speak to this subject.

Currently, we are already paying for people with lower income to receive health care. Many people on the Medicaid cliff of eligibility that do not qualify for Medicaid cannot afford health insurance. People are forced to use urgent care or emergent services, and are not able to pay for that care, which leads to money out of everyone's pockets. If we expanded Medicaid eligibility, more people could utilize primary care services and save everyone taxpayer money. On top of that, a strain would be lifted from healthcare workers and decrease their workload, improving burnout on our already overworked nurses and physicians.

With inflation limiting the budgets of Kansans, we are facing a moment where people are choosing between receiving health care and putting food on the table. If we ignore the cries of help from working class Kansans, we are setting ourselves up for financial failure. Already, rural hospitals are feeling the pressure as closures are mounting in Western Kansas. By expanding Medicaid, we are able to increase access to primary care doctors and preventative screening, saving millions of dollars by keeping our workforce healthy, preserving the working Kansas family's dollar, and preventing illnesses before they turn chronic.

Why should we finance government safety-net programs such as Medicaid? 1) Because Kansans take care of Kansans. By not expanding Medicaid, you are actively contributing to Kansan deaths and chronic illness. 2) We will save money on the short and long-term. Preventing disease means that people are healthy and able to contribute more to the Kansas economy. And 3) the majority of Kansans support this policy. If this was on a ballot, we would have had Medicaid expansion years ago. If you are truly a representative for your constituents, you would listen to them and pass this bill.

As a young adult who works with Medicaid recipients and the disability population, I see firsthand the struggle and negative effects of not expanding Medicaid. People die because they cannot get care. They are trapped in the cycle of poverty because they have common conditions like diabetes, asthma, and high blood pressure but can't afford to see a doctor because they can't afford health insurance without Medicaid. It is critical for Kansas to receive Medicaid expansion. Kansans—your constituents—cannot struggle one day longer.

Sincerely,

Shea J. Roy

## Legislative Testimony

To: The Alliance for a Healthy Kansas Medicaid Expansion

To Kansas Policymakers –

My name is Sondra L Samuels, Wyandotte County Resident, and member of the Voter Rights Network of Wyandotte County located in Kansas City, Kansas. I would like to thank you for allowing me the opportunity to provide testimony in support of KanCare Expansion.

My purpose today is to urge the 2024 legislative body to pass the KanCare expansion for the citizens of Kansas because medical costs are increasingly rising for us. The rising costs are causing all Kansans to pay more money for health care for families. KanCare expansion will help reduce health care costs for all because it will provide health insurance to Kansas residents in rural areas, small towns, and cities across the state.

Expanding KanCare will provide coverage for hardworking Kansans and help to invest in Kansas communities. For example, it will help strengthen hospitals, clinics, and provider networks. In addition, it will make Kansas more competitive with neighboring states that have expanded Medicaid; protect jobs; and ensure that Kansas continues to be a good place to live, work, and raise a family. A survey conducted by the national research firm of Perry/Undem and Bellwether Research, found nearly 4 out of 5 Kansans (78 percent) want low medical costs for them and their families.

The benefits of passing KanCare are as follows:

- Reduce health care costs for everyone. For example, every Kansan benefits as it relates to mental and physical health care. Without health coverage increases the cost of more ER bills, increased uncompensated care for hospitals, and untreated mental and physical health needs. Expanding KanCare will bring the cost of health care down for everyone which and without it, individuals, families, and businesses all end up paying more for health care.
- Protect Kansans from medical debt. The rising costs for Kansans are felt as it relates to housing, food, and other needs, including health care. Almost half of Kansans have medical debt or knows someone who does. By expanding KanCare, tens of thousands of people will be able to afford insurance coverage. That protects them from medical debt. By saving on medical costs, individuals will be able to pay for other essentials.
- Fix eligibility limits. The income limit to qualify for KanCare is less than \$8,345 a 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.
- Rural health care can be preserved and strengthen. At the present time, Kansans living in rural communities struggle as they face difficulty accessing health care when and where they need it. Also, rural health care providers face high levels of uncompensated care. Many rural hospitals are currently at risk of closing across our state, which is more than any other state our size. Expanding KanCare would strengthen and sustain the rural health care system and help ensure that rural Kansans get the health care they need as well as giving a boost to their economies. HB 2556 and SB 355 expands Medicaid and lowers health care costs. It gives 150,000 Kansans access to affordable health care. It can go toward tax

cuts, funding for public schools, and infrastructure. Only a few extremists in the legislature stand in the way of expansion but I urge you not to let them prevail in their efforts to make this bill fail.

- Make Kansas more economically competitive. Expanding KanCare would increase the state's future economic output by billions and increase the personal income of Kansans by billions. Expanding KanCare will not only improve the health of Kansans, but it will also help our state compete with our neighbors who have expanded eligibility for their Medicaid programs.

In closing, cutting health Cutting Healthcare Costs for all Kansans Act is a must. HB 2556 and SB 355 expands Medicaid and lowers health care costs and gives 150,000 Kansans access to affordable health care. It is common sense way to help increase the Kansas economy providing funds for public schools, infrastructure, and providing health care simultaneously for all Kansans. It helps to strengthen our work force and eliminates barriers to health care for Kansans.

I urge to help Governor Kelly and her commitment to help all Kansans receive the health care well supporting Kansas communities. I urge you to listen to your constituents and protect all of us. Thank you again for your support regarding this urgent matter.

Respectfully submitted,  
*Dr. Sondra B Samuels*  
Dr. Sondra B Samuels

March 13, 2024

Hello,

Since 2008 I have been paying for Medicare through F.I.C.A. yet I have not been able to receive any of the Medicare reduction benefits. Other States get the benefit of MINE and ALL Kansans payments into FICA-Medicare!

My daughter goes without health insurance because she is self employed. She gross annual income is just above the range to enjoy any benefits she pays into the system.

It's TERRIBLE that ALL Kansans suffer because of ONE MAN...Daniel Hawkins!!!!  
Where is the democracy in one man denying others of the money that is rightful due to ALL KANSANS!

Daniel's false narrative needs to be exposed all across Kansas!!!

Please spread the news!!

Sara Schaufler  
Shawnee KS

March 13, 2024

As a taxpayer I ask that you do NOT cut Kansas healthcare care please vote for Medicaid expansion.

Debby Schloegel



March 17, 2024

Dear Chairman and committee members,  
Please support Medicaid expansion and vote NO HB2653

Thank you for your consideration.  
James Schloegel  
Leawood, KS

March 15, 2024

A lady I know comes to my home to help me with an assortment of things when I call her. She is on a limited income and needs better healthcare. She has looked into Medicaid (and may have it) but I know she has found it challenging to acquire the medical care she needs because of limitations. I do not understand her complete health situation but she needs adequate and more easily obtainable health services when she has certain health issues that need attention.

Thank you,

Marge Schlosberg  
Overland Park KS 66207

## **Testimony in support of Medicaid Expansion in Kansas**

**March 16, 2024**

Dear Legislators:

I am a retired physician and an enthusiastic supporter of expanding Medicaid in Kansas. In addition to spending many years in the private sector practicing pulmonary intensive care medicine in Missouri, I also spent a significant part of my career seeing patients in rural Kansas communities through an outreach program.

While in Missouri, before that state expanded Medicaid, I became familiar with the frustrating scenarios that healthcare providers still face every day in Kansas: serving patients who cannot afford insurance, whose financial circumstances cause them to delay care, and whose conditions worsen until they must seek acute treatment at an emergency room. As a pulmonary specialist, for example, I saw patients in extreme distress because they could not afford medication to treat their COPD. Imagine having to choose between feeding your family and breathing freely without discomfort.

While treating patients in rural Kansas, I learned how the hospitals there operate on razor thin margins. Many of these hospitals' patients are uninsured and do not qualify for Medicaid. This means the hospitals must treat them without adequate compensation. While the state does provide hospitals with some funds for uncompensated care, that support falls far short of the hospitals' needs. The results over the last two decades have been catastrophic: Nearly a dozen rural hospitals have closed, and many more could follow.

This is shameful. Kansas should not put its hospitals in jeopardy, and it especially should not put at risk the health and economic welfare of our most vulnerable residents. But that's exactly what our Legislature has done every year that it rejects Medicaid expansion. I urge all Legislators to reconsider their past opposition to this life-saving policy and do their part to keep our hospitals open and our residents healthy.

Sincerely,

**Daniel L. Schlozman, MD**  
**6600 Overhill, Mission Hills, KS 66208**

March 13, 2024

**Just a quick note to thank you for the hearing on Medicaid expansion and encourage follow through on approval of this much-needed legislation. States all around Kansas have implemented this: Oklahoma, Missouri, Nebraska, Colorado. It will be helpful for many Kansans who fall in a coverage gap with health care, helpful for the economy, helpful for rural hospitals. It is a win-win for our state.**

*Linda Schmidt*

Subject: Testimony in Support of Expanding Medicaid in Kansas

Dear Legislators,

I am writing to you today as a concerned citizen and advocate for the well-being of our fellow Kansans. As our state faces various challenges, I would like to bring to your attention the critical importance of expanding Medicaid in Kansas. This expansion is not just a policy change; it is an investment in the health and prosperity of our communities and the state as a whole.

Medicaid expansion holds the potential to positively impact the lives of over hundreds of thousands of individuals across Kansas, providing access to essential healthcare services for those who currently find themselves without adequate coverage. Medicaid expansion will:

1. Improve access to healthcare,
2. provide economic benefits to our state's economy and to healthcare providers, creating jobs, and stimulating economic growth,
3. Improve workforce productivity as individuals who have access to healthcare are more likely to maintain their health leading to a more productive workforce,
4. Increase fiscal responsibility by leveraging existing resources to address the healthcare needs of our residents without placing an undue burden on the state budget, and
5. Enhance community resilience by building stronger, more connected neighborhoods where individuals can thrive and contribute to the well-being of the state.

Lastly, most Kansans support Medicaid expansion. I urge you to consider the profound positive impact that Medicaid expansion can have on the lives of our fellow Kansans and the overall prosperity of our state. By supporting this you can make significant strides towards a healthier, more economically robust, and compassionate Kansas.

Thank you for your time and consideration. I trust that you will prioritize the well-being of our communities as you deliberate on this important matter.

Sincerely,

Jerry Schultz

1945 Tennessee St.  
Lawrence, KS 66046

March 17, 2024

Dear Chairperson and Committee Members,

Thank you for the opportunity to provide testimony in support of Medicaid Expansion. I have been writing to the legislature and individual KS legislators for years now, on why we need to join the majority of our country and expand Medicaid. It is hard for me to believe that our state has still refused to do this for our own residents. I know you already know all the benefits of doing it - because we have been hearing about them for more than 10 years.

It's interesting to me that in all parts of my life, the support behind Medicaid Expansion is expressed. Even as a Realtor, we are now being encouraged to write to you all about passing this important piece of legislation. I am also a member of the Lenexa Chamber of Commerce (previously a member of Olathe Chamber of Commerce), and both of them also support the passing of Medicaid Expansion. Why is it that so many people, businesses, and organizations around us want to see this passed, but our state legislature keeps saying "no"?

I've heard the excuse that until we can properly fund our IDD community needs, then we cannot pass Medicaid Expansion. Well, the IDD community also supports passing it. I've visited with Johnson County Developmental Supports and heard directly from their mouths when I was running for office in 2018 and 2020. Holding one hostage over the other is inhumane. Acting like this is a group of undeserving Kansans is also inhumane. Representative Adam Turk told me at a legislative forum that if those are the people moving out of our state, then good. Is that really the image we want of our state? That the working poor should move away to find an option to have healthcare? I certainly hope not.

Thank you again for your consideration on this, and please do what is right for Kansans and pass Medicaid Expansion this year.

--

Angela Justus Schweller (She/Hers)  
Realtor w/ Thrive Real Estate KC - KW Kansas City Metro  
Angela@AngelaSchweller.com  
913-710-1146

March 16, 2024

To the Chairman and Committee Members:

I urge you to support Medicaid expansion in Kansas and help to improve the health of over 150,000 Kansas citizens without healthcare coverage.

In Kansas, severely mentally ill patients without insurance cannot access the care they need, until they are arrested and taken to an Emergency Department by police seeking treatment. At Advent Health - Shawnee Mission, on most nights, at least 4 ED beds are being occupied by mentally ill patients, most without the ability to pay for care. That means, the hospitals are absorbing the expense of providing care until the patient is transferred to another facility or stabilized and discharged into the community. Many destined to return when their condition deteriorates and they are again picked up by the police.

This situation increases overall healthcare costs for everyone and providing Medicare expansion can help reduce the pressure on healthcare costs, costs for our business community, insurers and law enforcement, as more people can receive the care they need.

Families having a loved one with mental illness and unable to pay or find care, live in fear that the next time their loved one is in crisis, instead of getting a call that their family member has been arrested, they get the call that the police officer feared for their life and "we're sorry to tell you"...another tragedy and fatality. I carry that fear in my heart every day.

YOU have the power to change how Kansas treats their most vulnerable citizens. YOU have the power to make the difference that Kansas citizens have made it known they want and support. YOU have the responsibility to step up and represent the majority of the citizens that are saying...."the time is NOW....for Medicaid expansion".

Sincerely,

Linda Seiner  
8017 Meadow Lane  
Leawood, Kansas 66206

To: Members of the Committee

From: Paula Shields

Re: Support for Medicaid expansion

I have been blessed to always have health insurance. I have never had to worry about when I am sick if I can go to the doctor. So many Kansans face this dilemma. Many small businesses can not afford to give their employees health insurance.

Also, many rural hospitals have been closed because of not having Medicaid expansion. So sad that we are one of ten states without Medicaid expansion.

Paula Shields



Legislative Testimony

John Shively

Hearing on KanCare Expansion

Wednesday, March 20<sup>th</sup>, 2024

Dear Chairperson and Committee Members,

My name is John Shively, and I work as the Executive Director of Mission at the Sisters of Charity of Leavenworth. However, I write today speaking only on behalf of myself as a lifelong Kansan and Catholic.

I spent my entire life growing up in Kansas, and one thing I know about the people of Kansas is that they are good neighbors. They care about one another. **We have an opportunity to demonstrate that care for one another – that is at the heart of our Christian and Kansas identity – and to put it into public practice by expanding KanCare.**

Nearly 150,000 people would benefit from expansion if we passed Medicaid expansion, which would bring Kansas tax dollars back to the state to pay for the health and well-being of our own people. Many of those who would qualify already work, pay taxes, and contribute to our state. It only makes sense that we bring Kansas tax dollars back to the state to reinvest in the health of our own workforce. **We are already paying the cost and have lost nearly \$7 billion that would have benefited Kansas Hospitals, workers, and citizens by refusing to enact expansion.**

More importantly, expanding access to healthcare is the moral thing to do. People without coverage are dying and getting sick, putting additional strain on already burdened rural healthcare facilities. My Catholic faith calls me to care for the sick. **In their 1981 Pastoral Letter, the U.S. Catholic Bishops state plainly that "health care is so important for full human dignity and so necessary for the proper development of life that it is a fundamental right of every human being."**

I urge you strongly to do what is right for the poor and medically underserved people of Kansas and pass Medicaid Expansion in committee and on the floor.

In Christ,

A handwritten signature in black ink that reads "John Shively". The script is cursive and fluid, with the first letters of the first and last names being capitalized and prominent.

John Shively

Sisters of Charity of Leavenworth Associate

March 12, 2024

I admit that I have it better than many disabled people, but I still find affording doctor appointments and prescription medicine difficult. I currently have Medicare, but do not qualify for Medicaid or for Extra Help. (My income is >just< above the threshold for Extra Help). Medicaid expansion would help me greatly, and would help several of my friends who are also disabled greatly. I have considered moving to another state that has expanded Medicaid. Please pass a Medicaid expansion bill!

--David Shobe  
Lawrence, KS

March 15, 2024

I am a proud Kansan growing up in Parsons. I know small town Kansas medical care has suffered due to the lack of Medicaid availability. It is time to expand Medicaid and do the right thing for our state !

David Shuss

March 14, 2024

Hello,

I am writing to urge the Kansas Legislature to expand KanCare in Kansas.

Kansas has missed out on so much funding over many years that could have gone to help hard-working Kansans.

While my husband and I have been able to afford health care insurance throughout our lives while farming, many Kansans cannot. And most of these Kansans are hard-working, employed individuals! I cannot imagine not seeking medical attention when needed, because I had no help from insurance coverage!

And a big percentage of about 80% of Kansans support expanding KanCare! Please listen to your constituents and help this issue get out of committee and onto the floor for a vote!

Harry and Eileen Sieger, Marion

March 14, 2024

Dear Kansas Legislators:

**Please pass HB 2556 and SB 355 in support of Medicaid expansion in Kansas.** As a lifelong Kansan, retired former small business owner and active Manhattan Area Chamber of Commerce volunteer, I see so many positives for this and NO negatives.

It won't cost my fellow Kansans and me a dime—and **over 80% of us want this to happen because we see the catastrophic results of not allowing Medicaid expansion!**

We are already paying our hard-earned tax dollars to the federal government, who is sending our dollars to the **40 other states that have already expanded Medicaid eligibility.**

It's a travesty to me that **we're penalizing our neediest neighbors, colleagues, friends and family members over purely partisan politics.** Rural Kansas continues to suffer from lack of employment opportunities, population decrease and access to good healthcare. Lack of Medicaid expansion in rural Kansas, where our poverty rates are highest, has tragic consequences.

**Small hospitals are usually one of the largest employers in a town or county, but when they close because of lack of Medicaid dollars coming in to cover care,** not only do Kansans on Medicaid suffer, so do all the other citizens in that community, because now they have to drive a half hour...an hour...two hours or MORE to reach a hospital. And all those **well-paying jobs for healthcare professionals go away.** And so do those skilled workers—doctors, nurses, radiology techs and more—who have to leave to earn a living.

For the sake of our small communities and our critical access hospital network—which feeds our larger regional hospitals and serves an absolutely vital function in saving Kansans' lives!—**please vote YES to expand Medicaid and bring our beautiful state up to par with the rest of the country.**

Let's stop financing good healthcare for everybody else, instead of ourselves.

Thank you,  
Lisa A. Sisley  
Manhattan, Kansas

March 16, 2024

Dear Health & Human Services Committee Members:

I write in support of HB 2556, which is important to me with senior hindsight, since I am still catching up with deferred health care from my previous uninsured era.

Health care coverage is a bi-partisan issue, as Medicaid expansion will give coverage to some additional 100,000 adults of both major parties and 50,000 related children in Kansas (data per the non-partisan Kansas Health Institute). Funding for this expansion is essentially revenue neutral, even after the two years of Federal American Rescue Plan Act monies, which offset the first eight years of implementation costs. Approximately a third of the newly eligible adults are currently working a minimum of 20 hours/week, yet cannot afford coverage for themselves or their children. Others work less than 20 hours/week or are disabled. HB2556 includes a work requirement with limited exceptions.

**Fiscal Responsibility reasons to expand Medicaid** coverage include:

- \* Financial savings to employers/individual patients due to the lower cost of prevention/early intervention
- \* Savings to entire taxpayer base who otherwise pay for uncovered ED visits
- \* Savings to entire taxpayer base who otherwise pay for uncovered health services to inmates
- \* Savings to County/Local Government who otherwise pay for mandated but unfunded health services
- \* Revenue generation for the retention/preservation of rural hospitals/clinics
- \* Revenue generation for retention/recruitment of health care providers/adjunct staff

**Community Health and Well-Being reasons to expand Medicaid** coverage include:

- \* Supports the health/well-being of Kansas residents who constitute your work force, your families and your future
- \* Reductions in crime/safety concerns, due to accessible treatment for mental health/substance treatment
- \* Enhanced Quality of Life reputation which helps attract/retain business; trained employees; and tourism
- \* Increases population health resilience during contagious epidemics
- \* Generation of adjunct jobs due to spin off from health care industry
- \* Reassures your Constituents that you recognize/respect the 80% of Kansans who support expansion

So far Kansas has lost in the vicinity of \$7B from declining this opportunity. Please review the ten years of outcome data from the 40 States that previously expanded Medicaid, which has been analyzed by KHI.

[https://www.khi.org/articles/event-recap-exploring-medicaid-expansion-experiences-in-other-states/?utm\\_medium=email&utm\\_source=sharpspring&sslid=MzlwMDA0NgZic3MDI3MA&sseid=MzIzNjA0MDM0NAUA&jobid=60559961-39a3-4f98-afc0-25ac54a35014](https://www.khi.org/articles/event-recap-exploring-medicaid-expansion-experiences-in-other-states/?utm_medium=email&utm_source=sharpspring&sslid=MzlwMDA0NgZic3MDI3MA&sseid=MzIzNjA0MDM0NAUA&jobid=60559961-39a3-4f98-afc0-25ac54a35014)

Regards,

Sherry G. Skillwoman

Retired Medical Social Worker

Native Kansan in Wichita

February 23, 2024

772 Hwy 40  
Lawrence, KS 66049  
785-841-1526  
[Glsloan\\_ks@yahoo.com](mailto:Glsloan_ks@yahoo.com)

Re: Medicaid Expansion

Dear Legislators,

I am a retired Republican State Representative and current LMH Health Trustee. You have heard for years that Medicaid expansion will help local hospitals and the people of Kansas and that over 70 percent of Kansans support Medicaid expansion.

Some legislators have opposed expansion for a variety of presumed financial risks to the State. We believe risks to the State have been addressed by hospitals committing to pay for the State's required match of federal dollars. What has not been adequately explained to legislators is the financial realities being experienced by hospitals in the absence of Medicaid expansion.

LMH Health in 2023 provided \$12 million of uncompensated care to patients. Medicaid expansion would provide approximately \$3 million in additional annual revenue to the hospital, based on the additional 3,800 residents who would be covered by the program. This is crucial to our efforts to remain an independent community hospital because we had almost a \$6 million operating shortfall in 2023. Medicaid expansion will not solve all of our fiscal challenges, and we are aggressively addressing cost controls and other opportunities, but it would significantly reduce our uncompensated care costs.

I am writing with three requests: 1) that you contact our CEO Russ Johnson ([russ.johnson@lmh.org](mailto:russ.johnson@lmh.org)) to discuss the very real financial impact that Medicaid expansion would have on LMH's ability to remain an independent community hospital; 2) that you recognize that the Governor's proposed Medicaid expansion bill requires Kansas hospitals to pay the State's share of the cost-matching requirement (this is similar to a similar program in which adult care facilities pay the State's matching requirement for other federal financial aid). We support that proposal because the increased federal funds will more than offset our contribution to the State's matching requirement; and 3) after your conversation with Mr. Johnson, that you contact other hospital CEOs in your legislative district or region about their very real financial challenges.

Thank you for your consideration of these requests. I trust that you will accept the opportunity to discuss with Mr. Johnson and other hospital CEO's the benefits to healthcare providers' (e.g., hospitals, physicians, etc.) ability to provide quality healthcare to patients locally and statewide and the willingness of these entities to financially support the State's matching requirements. Medicaid expansion will help close the "coverage gap" for those whose incomes are too high to qualify for Kansas' current Medicaid program, but too low to qualify for marketplace plan subsidies.

Sincerely,

Tom Sloan  
45th District Representative (Retired)  
LMH Health Trustee

P.S. In Kansas, a single mother of two only qualifies for Medicaid if she makes less than \$8,203 per year. If she works full time for minimum wage, she makes too much to qualify for Medicaid and is not eligible for a health insurance exchange incentive. Expanding Medicaid in Kansas will give families the opportunity to work and have health insurance.



March 17, 2024

I am a resident of Bourbon County and a registered Republican. My husband and I are very much in favor of the expansion of Medicaid in Kansas. We are retired educators and we are confident that our Bourbon County residents would benefit from the expansion of Medicaid in Kansas. Other states benefit from Medicaid and it is time for Kansans to choose to accept Medicaid expansion. We pay federal taxes that help provide this program and we would like our state to benefit also.

Sincerely,  
Patricia Smilie  
Dale Smilie

Jonathan Smith

Private Citizen

03/14/2024

SB 355 - Expanding medical assistance eligibility and enacting the cutting healthcare costs for all Kansans act.

Written-Only Proponent testimony

Hearing Date: March 20th, 2024 10:30am

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

Chairwoman McGinn, and esteemed members of the committee,

Hello, and thank you for taking the time to read my testimony today. I cannot tell you how long I have waited for Kansas to finally expand Medicaid coverage for Kansans. I implore you with my whole being, to please, PLEASE pass SB 355 favorably. I cannot think of anything that will improve the lives of more Kansans with one stroke of the pen.

My children have been on a form of Kancare for most of their lives, it's what we've used for all of their doctor visits, all of their hospital stays, all of their dental appointments, all of their medications, all of their therapy, all of their case managers, and so on. Me and my wife do not make enough money to be able to afford real health insurance; I can barely afford insurance for me through my job. We let our kids' insurance through Kancare lapse *once*, and it *decimated* our finances. I think it cost us about \$1,700 in three months from medication and doctor's appointments. Luckily we had some money saved up in our savings, and we were able to eat that cost until they were reactivated at Kancare. Those few months probably set us back from buying a home for another year, but our children were able to stay in school without any disruptions to their medication.

But what my point is, is that Americans cannot afford health insurance or healthcare anymore. People would rather sit at home and die from an infection than risk going to a hospital to save their life and bankrupting their family in the process. We need the solace of knowing that our healthcare will be covered by the government. That the government will be able to fight these greedy insurance companies with more teeth than the American public ever could.

Finally, expanding Medicaid Coverage is covered by the federal government. It's not even going to increase our state tax burden, plus, any additional cost would obviously be covered by the healthcare cost savings on the back from Kansans not having to pay for the uninsured Kansans' healthcare across the state.

Expanding Medicaid is a sure-fire way to help more Kansan's than just about anything else I can imagine. I have been waiting so long for our state to finally catch up to the rest of the country. I wish, more than anything, for any family to be able to experience that stability, calm, order, and reliability that we were able to experience with our children on Kancare.

Please pass SB 355 favorably out of committee, for all Kansas families to prosper more tomorrow than yesterday.

Thank you for your time,

Jonathan Smith

Sharla Smith  
4723 Grove Street  
Shawnee, KS 66226  
Smithsa98@gmail.com

Re: Kansas Medicaid Expansion

Joint Hearing of the Senate Ways & Means Committee and the Senate Public Health & Welfare Committee  
Chaired by Senator Carolyn McGinn

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

I am writing to express my strong support for the expansion of Medicaid in Kansas. As a resident of this state, I have seen firsthand the significant impact that lack of access to affordable healthcare has had on individuals and families in our community. Expanding Medicaid would not only improve the health and well-being of thousands of Kansans but also provide numerous economic and social benefits to our state.

One of the primary reasons I believe Medicaid expansion is because I lived in a Medicaid expansion state prior to moving to Kansas. When I accepted the position at KUMC, I remained a resident of my state for three months preparing for the move. Accepting the position meant that I did not qualify for benefits for 90 days. However, as a resident of a expansion state, I was able to purchase affordable and comprehensive insurance for myself and family, thus when my son faced an injury during a high school basketball game, we were able to receive healthcare and physical therapy because of our ability to purchase affordable health insurance. Medicaid expansion is crucial because it would extend healthcare coverage to low-income adults who currently fall into the coverage gap and middle-class families like mine. These are hardworking individuals who earn too much to qualify for traditional Medicaid but too little to afford private insurance. By expanding Medicaid, we can ensure that over 140,000 individuals in our state have access to essential healthcare services such as preventive care, prescription medications, and treatment for chronic conditions. This will not only improve their health outcomes but also reduce the financial burden on hospitals and healthcare providers who currently bear the cost of uncompensated care.

Furthermore, ***Medicaid expansion would stimulate our state's economy by creating jobs and generating revenue.*** Studies have shown that expanding Medicaid leads to increased healthcare spending, which in turn creates jobs in the healthcare sector and related industries. Additionally, by drawing down federal funds to cover the costs of expansion, Kansas can save millions of dollars in state spending, which can be reinvested in other critical areas such as education and infrastructure and recoup the seven billion dollars that would be allocated to Kansas going to other states because we have not expanded Medicaid. We also can no longer ignore the closing of rural hospitals and millions of Kansans, your constituents, losing access to medical care and driving miles to receive health care.

Beyond the economic benefits, Medicaid expansion is a moral imperative, the bible clearly outline that we are to take care of the least of them, Matthew 25:40: "Truly I tell you, whatever you did for one of the least of these brothers and sisters of mine, you did for me. Access to healthcare is a basic human right and also the requirement of a bible belt state and believers, and no one should have to go without medical care simply because they cannot afford it. By expanding Medicaid, we can ensure that all Kansans have the opportunity to live healthy and productive lives, regardless of their income or background.

In conclusion, I urge you to support Medicaid expansion in Kansas. It is not only the right thing to do morally, but it is also in the best interest of our state's health, economy, and future prosperity. Thank you for considering my testimony, and please do not hesitate to contact me if you have any questions or need further information.

Sincerely,

*Sharla Smith*

February 11, 2024

Dear policymakers,

I am not a Medicaid recipient and I don't need it. However, I know folks who suffer because they don't have insurance and are not well. I also believe that if folks have medical insurance they are healthier because they can see a doctor before they are sick into death. Expanding Medicaid will save the state a lot of money in the long run. Taxpayers pay for trips to the ER and hospitalizations when there is no insurer to pay. All the way around having health insurance for everyone is a win-win situation. Thank you.

Sincerely,

Sister MaryLex Smith, SCL

March 15, 2024

I'd like to submit this written testimony in support of expanding Medicaid in the state of Kansas. As a Clinical Psychologist in Kansas City, KS, I've seen first hand the extreme mental health needs of our community members. This need is evident in the rise of anxiety in our youth, the increase of utilization within our community mental health centers, hospitals, K-12 schools, and Universities and Colleges, as well as the increase in suicidality among our most vulnerable populations (our youth and our elders). Moreover, research has shown that less 50% of people who need mental health treatment actually obtain mental health treatment. A major factor impacting this horribly low treatment rate is the lack of resources to access available treatment. Expanding Medicaid in Kansas would help our neighbors, family, and friends obtain the treatment needed to live a meaningful life and, frankly, to save lives.

I implore you to vote to expand. Medicaid in our wonderful state, so that all Kansans have the opportunity to live healthy and happy lives within healthy and happy communities.

Thank you,

Rev. Dr. Lynette Sparkman-Barnes, Psy.D.  
Licensed Clinical Psychologist  
Associate Minister, Grant Chapel African Methodist Episcopal Church, 2800 N.  
Tremont, Kansas City, KS, 66101  
(913) 909-481

March 13, 2024

To the Kansas legislature,

I strongly support the expansion of Medicaid in Kansas. I am working to develop wind power, long duration energy storage and green hydrogen projects in western Kansas and have close relationships and friendships with many western Kansans. My friends there need the expansion of Medicaid to retain hospitals and medical help for their communities.

No one who considers themselves to be “pro-life” can oppose the expansion of Medicaid. One cannot say that life is precious on one hand and then deny healthcare to hundreds of thousands of people on the other hand. All Kansans deserve access to quality healthcare.

The legislature must support expanding Medicaid to promote healthy lives in our state. We are counting on all legislators to stand up for healthy lives by voting for expanded Medicaid.

Thank you for caring for all Kansans.

Joe L Spease, CEO  
WindSoHy, LLC  
Overland Park, KS 66214  
Mobile: 913-481-2869  
[www.windsohy.com](http://www.windsohy.com)  
[jspease@windsohy.com](mailto:jspease@windsohy.com)

Audrey Spellman

Regarding SB 355 and HB 2556

March 13, 2024

My name is Audrey Spellman, I am a college athlete at the University Saint Mary. I am testifying in favor of SB 355 and HB 2556 for the expansion of Medicaid. I am a nursing major and work as a CNA. Adults or elderly patients that do not have the funds for healthcare is a more common problem than people think. Everyone should have access to healthcare and be treated fairly. I have seen too many patients choose not to go to the hospital and choose to manage their needs on their own because they don't have insurance to pay for it.

By expanding Medicaid, roughly 150,000 more Kansans would have access to affordable health care, and it won't cost Kansas taxpayers a single cent. Nearly 80% of Kansans support Medicaid expansion, including myself. We have lost \$7 billion in federal funding while our federal taxpayers support jobs and healthcare in 40 other states. This will also be better for the economy and will create more jobs. Thank you for your consideration. Please vote yes to expand Medicaid.

Thank you, Audrey Spellman



March 14, 2024

Testimony in support of SB 355 and HB 2556.

My name is Robin St James and I am Executive Director of Papan's Landing Senior Center. PLSC is an activity center for seniors (age 60+) in Topeka and Shawnee County, Kansas. Our Mission is to provide the services that help keep seniors in their own homes for as long as possible. One of those services is ensuring that our seniors are aware of issues that affect them.

Medicaid Expansion is one of those issues and is important to me because a full 75% of our participants fall into that income gap between being financially ineligible for Medicaid but being unable to afford marketplace plan subsidies. Many of our seniors do not get the medical services they need or do without something else, such as food or heat in the winter, to pay for medication or copays. When we discuss Medicaid expansion, they are very vocal and do not understand why so many other states have expanded Medicaid but Kansas has not. They ask why when the money is there, it's not available to the people of Kansas. I honestly don't know what to tell them because I have the same questions and have yet to find answers that make sense to me.

Beyond the senior citizen issue are people like our employees. As a small not-for-profit, we are unable to provide health insurance for the people who are here every day working for our seniors including me. One of our employees makes too much to qualify for KanCare, but it would cost over \$500 a month to buy health insurance for his family through his wife's employer. They are doing without because \$500 a month is a financial burden they are can not bear at this time. He is just one of more than 150,000 Kansans who fall into this healthcare gap.

SB 355 and HB 2556 could make a difference for a lot of people, be they retirees or those who are working. I ask that those who have the power to make a true, positive change, consider every Kansan and vote yes on these bills.

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

--

Robin St James  
Executive Director  
619 NW Paramore Street  
Topeka, Kansas 66608  
785.232.1968

March 15, 2024

Dear Kansas Legislature:

Over the last two weeks I have attended rallies for Medicaid Expansion and Mental Health Advocacy Day at the Kansas State Capitol. Governor Laura Kelly addressed both rallies. I am writing to encourage you to expand Medicaid in Kansas.

## **A Long Journey**

When my wife and I came to Topeka in 1972 from the east coast for me to pursue two years of Post-Doctoral Training in Clinical Psychology at the Menninger Clinic, a large billboard posted at I-70 and McVicar greeted travelers: "Welcome to Topeka, Psychiatric Capitol of the World."

How the passage of time and the transformation of health care has changed all that.

Living in a city my mother volunteered to go door to door on behalf of the American Heart Association, the American Cancer Association, and other charities to ask for modest contributions to those charities. There I was as a child at my mother's side witnessing her quest and learning about charity.

Growing up in a religious household and attending Sunday school and prayer services I learned the two most important lessons of many religions: 1) the most important "good deed" one can do is take care of and look after those less fortunate than ourselves and 2) "I am my brother's keeper."

## **Medicaid Expansion**

150, 000 Kansans go to bed each evening and wake up in the morning with an awareness that if they develop a moderate or life-threatening illness they may not have access to life-affirming or life-saving health care. This is not right by any standard or measure.

## **Related Matters**

During the last four years of my work at the Menninger Clinic (1972-1995) I had a unique opportunity and experience. I had spent my first 19 years at Menninger treating patients in the Adult and Children's Hospitals at Menninger. From 1991-1995 I visited with the CEOs, Medical Directors, Network Development Directors of about 100 insurance companies across America and about 200 hospitals, clinics, and doctors' offices. I witnessed first hand the transformation taking place in health care in America at that time.

Later, as Kansas made its own good faith effort to enact universal health insurance I shared some of my experiences and knowledge before several committees of the Kansas Legislature.

### **The Moral Imperative for Medicaid Expansion**

During that era Len Nichols, Ph.D., a health care economist for the New America Foundation, reminded the Kansas legislature about the concept of “gleaning” from the Book of Leviticus in the Old Testament. Gleaning is the idea that when the farmer harvests the wheat from the field, he or she sets aside 10% of the harvest for the widow and orphan.

Nichols suggested to the legislature that a modern day interpretation of gleaning would apply to health care and health care reform. It may be our moral obligation to set aside 10% of our national wealth to provide health care for all our citizens.

Thank you for your consideration.

Ira Stamm

Topeka

Dear Kansas Policymakers,

Thank you for the opportunity to provide testimony in support of the Kansas Medicaid Expansion program, KanCare.

My purpose today is to urge the passage of KanCare expansion legislation in 2024. Kansans are paying more to take care of themselves and provide for their families. Polling shows that over 75% of Kansans want to Expand Medicaid for their hardworking family, friends and neighbors that fall in the Healthcare gap. Expanding KanCare will reduce health care costs for everyone.

Medicaid Expansion in Kansas:

- is a cost savings for all Kansans.
- will help promote a healthier Kansas by providing much needed healthcare to 150,000 individuals working in rural areas, small towns and cities that fall in the gap and cannot get health coverage.
- will help struggling rural hospitals and clinics, provide investment in our communities, and make Kansas more competitive with neighboring states that have expanded Medicaid.

Personally, I am tired of my hard-earned tax dollars going to the states around us that have Medicaid Expansion, i.e., Missouri, Iowa, Nebraska, etc. It is time for the Kansas Legislature to listen to their constituents and support an open debate on KanCare expansion legislation in the Kansas Statehouse so that the voices of the 8 in 10 Kansans supporting expansion can be heard and expansion can be enacted in our state.

Sincerely,  
Chris Steege  
Medicaid Expansion Supporter  
Lenexa, KS

March 14, 2024

Dear Kansas Legislators,

My State Legislators are Senator Pat Pettey and Representative Louis Ruiz.

As the mother of a 19-year-old college student with Type 1 Diabetes who has just aged out of Children's Medicaid, who is currently waiting for word as to whether my child has been accepted for Adult Medicaid, I urge you to vote Yes for Medicaid expansion. If my child is rejected for Adult Medicaid and needs to be on my Healthcare Marketplace plan, I know there will be copays for every doctor visit and also for prescriptions. I myself often postpone going to the doctor because I cannot afford the copay, but I know I'll have to find a way to pay it for my child who needs the lifesaving care and medications and supplies. I'm praying that we'll find out that my child can receive Adult Medicaid, because then we won't have to cut back on food to pay for healthcare.

Expanding Medicaid will be a godsend for many, many Kansas individuals and families, especially as our food costs keep going up, and property taxes are rising as well here in Wyandotte County. Having a home, food, and regular healthcare is starting to feel like an impossible dream to dream here in Kansas. You legislators can help make it possible again. Please do!

Sincerely,

Susan Stevens,  
Argentine Neighborhood, Kansas City, Kansas

March 15, 2024

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

I am a registered voter in Kansas and I always vote.

It is way past time that we pass Medicaid/Kancare expansion. This is what the majority of citizens want and it is time to do it.

All people deserve affordable healthcare!

Linda Stoner  
913-633-2002

Phyllis Stowell, scl

I am offering my testimony regarding the expansion of Medicaid for the citizens of Kansas. I have been a citizen of this state since my childhood and value the tradition it has of serving those residents most in need as part of its responsibilities to provide for the common good.

My family has rural roots and because of this has depended upon health services in rural areas of the state.

- I received polio shots from a clinic in Seneca.
- My sister and brother-in-law received health care at the now closed Holton hospital.
- My niece and her family must travel from their farm in Fairview to Topeka when hospital services are needed. The travel and cost of medical care and travel is extraordinary causing delayed medical attention.
- There are nearly one hundred Sisters of Charity of Leavenworth residing in Leavenworth who now have only one hospital in the city to deal with health needs, some life threatening, when a 30-45 minute or longer ambulance ride to a hospital able to provide necessary care for strokes, etc. could be critical.
- As a state that prides itself still on fiscal responsibility and respect for its citizens, it is imperative that Kansans receive assistance from Medicaid expansion.
- Accepting the federal funds to provide for the health and well-being of Kansans must not fall prey to partisan politics.

*S. Phyllis Stowell, scl*

March 13, 2024

Please support medicaid expansion in Kansas. It is a “win win” for all Kansans. I see no reason to prevent this assistance. Eight rural hospitals have closed since 2014 and thousands of Kansans are without medical coverage which they cannot afford.

Passing this medicaid expansion will decrease medical cost for all Kansans. When an uninsured Kansan goes to the emergency room the hospital will increase the cost of services for those who can pay to make up for short falls incurred serving the uninsured.

Most Kansas support medicaid expansion, and the state will have no additional taxpayer cost. In fact, it will bring revenue into the state. I understand Kansas has lost nearly \$7 billion in additional federal funding while our federal taxpayers support jobs and healthcare in 40 other states.

Ron and Sheila Szymankowski of Overland Park Kansas





**Therapy Services LLC**  
**1200 Graphic Arts Road, Ste 100**  
**Emporia, KS 66801**  
**620-208-6480**  
**fax 620-364-2551**  
**[www.therapyservicesonline.com](http://www.therapyservicesonline.com)**



KanCare Expansion Testimony  
3/20/2024

My name is Gayle Taylor-Ford. I am the owner of Therapy Services LLC and an activist with the National Multiple Sclerosis Society. At Therapy Services LLC we provide outpatient and intensive outpatient substance use disorder treatment in Burlington, KS and in Emporia, KS. We also provide Home and Community Based Services for the Brain Injury Waiver to include behavior therapy and cognitive therapy, and we provide non-emergency medical transportation. I am a board member for the International Pain Foundation, Empower House Ministries, and I am on the Government Relations Advisory Committee for the National Multiple Sclerosis Society.

I stand before you today to share how Medicaid Expansion would affect some of the clients that I serve. At Therapy Services LLC we accept payers such as Medicaid and for those with no insurance and below 200% of the federal poverty guidelines, we can provide free treatment with State Block Grant Funding. Medicaid expansion would help to reduce the need for block grant funding.

When it comes to substance use disorder treatment, people use substances for many different reasons. For example, there are people that have resorted to purchasing marijuana to treat their chronic pain, only to get arrested for possession of illegal substances. Why didn't they just go to the doctor for a pain prescription? They did not have insurance and it was much less expensive to purchase marijuana than it was to pay for an office visit with a physician and a prescription. Medicaid expansion would mean fewer people having to rely on back-door methods to not cure, but just get by with painful chronic medical issues.

Another example is the addicted person who comes for treatment and as they have sobered up, they find that they have medical issues, such as Hepatitis C. The medical issues could easily be treated but they cannot afford to go to see a physician. As time goes on, these medical issues worsen, becoming difficult to deal with and treat. I have had clients with injured knees or shoulders in need of surgery but, since they lack insurance, that is something out of reach for them. Many have jobs but cannot afford to pay for insurance. I am talking about the working poor that do not make enough money to qualify for the affordable care act subsidy policies. People that are trying to be better in their lives and contribute to society but cannot because lack of health insurance means their medical conditions just get worse due to lack of access to treatment. These are

*Other location: Therapy Services LLC 420 Kennedy Street, Burlington, Kansas 66839*



**Therapy Services LLC**  
**1200 Graphic Arts Road, Ste 100**  
**Emporia, KS 66801**  
**620-208-6480**  
**fax 620-364-2551**  
**[www.therapyservicesonline.com](http://www.therapyservicesonline.com)**



the people that Medicaid Expansion in Kansas will help.

Medicaid expansion would not only help my clinic stay open – it would mean a more holistic wellness plan can be implemented by many more people.

In all, Medicaid expansion would help people get actual treatment rather than relying on whatever way they can to manage their health. It would help those Kansans who are working and getting their lives on track but are not there yet. Expanding Medicaid in Kansas is NOT a handout. It is a “hand-up.” Meaning that it would enable more Kansans to be healthy enough to be able to be a more productive member of our workforce society. Additionally, it would help the healthcare providers and social workers like me, who just want to support our community and help our patients. Please expand Medicaid in Kansas. Thank you.

Gayle M Taylor-Ford, LSCSW, LCAC, CCTP  
Executive Director/Owner, Therapy Services LLC  
Board Member/Secretary, International Pain Foundation  
KS GRAC Committee Member, National MS Society  
Board Member/ Empower House Ministries  
620-208-6480, cell 785-221-7560

*Other location: Therapy Services LLC 420 Kennedy Street, Burlington, Kansas 66839*

March 14, 2024

To Whom it may concern:

I am writing to urge you to support the expansion of Medicaid in Kansas. The importance of this expansion cannot be overstated. I grew up in a family without health insurance. My father was self-employed, and we just couldn't afford it. Had we had access to health care, I probably would not have lost my mother to cancer when I was a teenager. For much of my adult life, I did not work in jobs that provided access to health insurance. It was only after I went back to school that I was able to secure better employment that provided this benefit. Many of the chronic conditions I deal with would not be so severe now if I could have dealt with them when I was younger. No one should have to live this way.

Expanding Medicaid will provide accessibility to affordable healthcare, will not cost Kansas taxpayers any money, and will provide support for rural hospitals that desperately need it. Expanding Medicaid will also 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. This expansion will cut healthcare costs for all Kansans. There is simply no reason not to do it.

Thank you for considering my perspective on this critical matter.

Sincerely,

Lillian C. Taylor  
Lawrence, KS

March 4, 2024

Dear Decision Maker,

Please make decisions based on what is the best for Kansans of all ages, interests, cultures, and abilities.

Please join 41 other states expanding Medicaid: Status of State Medicaid Expansion Decisions: Interactive Map

[https://www.kff.org/affordable-care-act/issue-brief/status-of-state-medicaid-expansion-decisions-interactive-map/#:~:text=Coverage%20under%20the%20Medicaid%20expansion,%2C%20Virginia%20\(1%2F1%2F](https://www.kff.org/affordable-care-act/issue-brief/status-of-state-medicaid-expansion-decisions-interactive-map/#:~:text=Coverage%20under%20the%20Medicaid%20expansion,%2C%20Virginia%20(1%2F1%2F)

If you have not seen these reports, please review and act in the best interest of our future leaders. Healthy students will be more successful learners and become lifelong contributors to society.

"Expanding Medicaid in Kansas would strengthen families like mine"

<https://kansasreflector.com/2023/10/11/expanding-medicaid-in-kansas-would-strengthen-families-like-mine/>

On behalf of Kansas children and families of various financial situations, interests, abilities, and backgrounds, please expand Medicaid.

Former Senator Bob Dole reached across the aisle collaborating with others to move Kansas forward. If we desire "Unity in the Community," please encourage Medicaid expansion.

"Steve Morris on the need for moderate voices in the Kansas Legislature"

<https://kansasreflector.com/podcasts/steve-morris-on-the-need-for-moderate-voices-in-the-kansas-legislature/?emci=e341ebb8-bd68-ee11-9937-00224832eb73&emdi=8742d2c3-dd68-ee11-9937-00224832eb73&ceid=120554>

Respectfully,

Carmaine Ternes

Librarian, Author, Editor, Presenter

"A child who reads will be an adult who thinks!"

February 10, 2024

Dear Members of the House Committee on Health and Human Services

As a retired Pastor and a resident of Shawnee County, Kansas, I want to appeal to you to support HB 2556 which provides for the expansion of Medicaid. I am a person of faith and a follower of Jesus Christ and I strongly suspect that many of you are as well. There are 23 accounts of Jesus healing people in the Gospels, not including the accounts of him delivering people from demon possession. Obviously, people's physical and mental health were of great importance to Jesus and as followers of Jesus, it should be very important to us to do all in our power to enable all, including the people who cannot afford health insurance or health care to have access to both. To me, this is a no-brainer. As a person privileged to have good quality health care as I am sure that you are as well, how can we pass up an opportunity to extend the same benefits to some who may not be as affluent as we are. There is strong evidence that Medicaid expansion would help reduce poverty, help keep health care available in rural areas of Kansas and be a blessing to countless people who now have to either try and get by without seeking health care which increases their risk of developing more serious illnesses, or be burdened with health care debt. Please support Governor Kelly in her efforts to expand Medicaid.

Sincerely and Prayerfully

Rev. Gary W. Teske  
4220 SE Iowa ave.  
Topeka, KS. 66609

March 15, 2024

I am writing to support Medicaid expansion.

Our 31 year old daughter has autism and most recently was diagnosed with Cerebral Palsy. She is disabled according to Social Security, however, she receives no cash payments because she works. She has insurance with an out-of-pocket maximum of \$6000 per year.

Over the past 6 years, she has had five major surgeries and she has reached her out of pocket maximum of \$6000 almost each year.

She earned \$14,695 dollars in 2023 because she was not able to work due to her long recovery.

Let me do the math. \$14,695 per year before taxes - less \$6000 in out of pocket medical expenses is \$8695. Divide that by 52 weeks a year. She has \$167 a week to pay for the basics of transportation, groceries, utilities and rent. How can anyone live a decent life on \$334 dollars each month?

The reason she is not living on the streets is because she has two living parents with an extra bedroom.

My husband, who is in his seventies, had cancer and a quadruple heart bypass last year. I am 69. We will not live forever.

Autism and Cerebral Palsy are not curable. She will never be able to find a job where she can earn enough money to leave poverty.

She isn't lazy. She is disabled with little to no resources.

There is no public transportation to her job. There is no assistance for housing, even if it existed. She doesn't qualify for SNAP.

Our family is NOT asking for a handout. We need relief from medical bills so maybe, just maybe, some of that \$6000 out-of-pocket medical expenses could be saved for a downpayment on a place for her to live after we are gone.

Respectfully,  
Randi Thimesch  
242 N Woodchuck St  
Wichita, Ks.  
316.371.4320

March 15, 2024

There are several excellent reasons to expand Medicaid in Kansas: it will help people struggling with medical bills, it will help people who have to choose groceries over medical treatment, and it will bring federal dollars into the state.

Thank you for listening!

Marian Thomas

March 13, 2024

I have been serving the poor in Garden City and Finney County for 27 years. There are so very many stories I could tell that are heart breaking.

One group of stories would be of those who make \$100 a month too much to qualify for Medicaid. When they or their children get sick, they go through the agony of "Can we ever be able to pay for this service and still put food on the table and pay the rent?" I know two children whose dad put off going to ER because he had not finished paying the last health bill. He died in ER and hour after he finally went because he had waited too long.

Another group are our elderly who have a little too much resources even though they have worked all their adult life. They either do not go to the doctor on time or they live in anxiety over how to pay this bill and whether they will need to go to the doctor again. Some even skimp on their medications and so risk their health.

Then there are the small rural health providers and hospitals who are left with so many unpaid bills that they either have closed or are at great risk for doing so. PLEASE look up a map of the hospitals in the state of Kansas and note that some counties no longer have a hospital and the citizens who voted for you are having to travel further all the time even for a doctor's appointment.

PLEASE FOR THE HEALTH AND WELLBEING OF ALL OF US YOU REPRESENT,  
EXPAND MEDICAID!

Sincerely,  
Sister Janice Thome



March 17, 2024

Dear Chairman and Committee Members,

I'm writing to implore you to vote in favor of expanding Medicaid eligibility as envisioned in the Affordable Care Act. 40 states have already done this. Their people are better off for it.

Expansion of the KanCare eligibility guidelines would allow approximately 150,000 Kansans to finally be able to have the peace of mind that comes with having a way to pay for unforeseen medical expenses. As it now stands, they fall into the so-called "coverage gap", meaning they make too little money to get subsidized coverage under the ACA, but too much to qualify for Medicaid.

The main reason cited by opponents of this expansion is the concern that it would be a burden on the state's finances. This bill, however, is revenue neutral. It is not revenue neutral for our critical access hospitals, especially in rural areas. Many of these hospitals are at risk of closing, in part due to the burden of caring for patients who lack the resources to pay for the care they desperately need. Providing these patients with Medicaid would give them a way to pay for that care. Covering those expenses with federal dollars that Kansas is currently leaving on the table would have the added benefit of reducing the cost shifting that makes health care more expensive for those of us who do have health insurance.

It is high time for Kansas to capitalize on the federal resources that are available to us. Please vote to expand Medicaid.

Thank you,

Bryan Thompson  
Salina, KS 67401  
71st House District  
24th Senate District

March 17, 2024

Thank you! I'm so happy that you are considering expanding Medicaid! I am the mother of a child who benefited from Medicaid. He was severely disabled and the medical bills would have ruined us both financially and emotionally. Medical bills can ruin even our wealthier families who have their own insurance. Families who are struggling often cannot even afford the price of an office visit. I know how this is, too, as our other kids were not on the Medicaid program. We had insurance, but a bout of ear infections could destroy our budget.

In a just society, everyone would have access to good health care. Medicaid expansion would help accomplish this. And it would make insurance premiums lower for everyone. Marketplace premiums are 7% lower in states that expanded Medicaid compared to non-expansion states like Kansas. **Here are some other bullet points:**

- **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 in Kansas are in danger of closing.
- **Makes Kansas more economically competitive.** 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.

Please vote for Medicaid Expansion!  
Thank You,

Cynthia Thompson  
Salina

March 13, 2024

Please expand medicaid into Kansas. We've already lost several hospitals because of clinging to some invisible and indefensible principle or simple stubbornness to accept a program supported by Obama. We need the money, especially for our uncared for poor. Compassion should be our principle, not political conformity.

Clarence Thomson  
Overland Park KS 66213

March 13, 2024

Please expand Medicaid for Kansas. It is insane the our state has not done this. We are throwing away hundreds of thousands of federal dollars. All citizens need access to affordable health care. We have much more to gain than we lose!

Thank you,  
Pat Thomson

March 15, 2024

I am writing to voice my support for the expansion of Medicaid in the State of Kansas. For far too long, hardworking Kansans have fallen into the coverage gap of making too little to afford health insurance, too much to qualify for assistance on the Marketplace and too much to qualify for Medicaid. By expanding Medicaid, our state has the opportunity to provide affordable health insurance to Kansans who need it.

The unnecessary burden of medical debt could be reduced by people being able to have health insurance coverage. This will lessen the likelihood of people seeking emergency care that is often uncompensated to hospitals and takes away money families need for housing, food and other necessities.

As a practicing health care provider, I have seen patients who neglect basic health care services because they don't have insurance or the means to pay. Expanding Medicaid will improve the health of Kansans by increasing access to preventative services and encouraging people to seek care in private offices and clinics instead of waiting until it's an emergency and accessing the healthcare system in an urgent way. This scenario often leaves providers and hospitals with uncompensated care, which is not good for business.

Lisa Thurlow, DDS

Overland Park, KS

March 13, 2024

First and foremost, my thanks to the Kansas House and Senate for your scheduled upcoming hearings on Medicaid expansion.

I'm retired and appreciate the health insurance provided by Medicare so Medicaid expansion won't impact me personally. But I believe it will have significant impact on thousands of my fellow Kansans and our state as a whole.

Being one of only a handful of states which have not taken this step reflects poorly on Kansas. It not only implies a series of economically bad decisions, it also implies a lack of empathy for our citizens who need the help it offers.

In your hearings and as you hopefully are given the chance to vote, please consider your fellow Kansans and vote to expand Medicaid.

Thank you,  
Marsha Ticehurst Oliver (R)  
17 SW Pepper Tree Ln  
Topeka, KS 66611

March 14, 2024

It is obvious that there is overwhelming support for expanding Medicaid in Kansas. Why have the majority of states already done this? That's what their constituents' want. I'm convinced the Kansas legislators don't care to represent their constituents'.

We think it is way past time to get this done. Expanding Medicaid would help a tremendous amount of Kansans. Isn't that who the government represents? IT SHOULD Be.

Leann and Jerry Toews  
Goessel, KS

**March 13, 2024**

**Testimony to Support Expansion of KanCare**

My name is Jim Torres. As the Manager of Health Insurance Services at a federally qualified health center with multiple clinics in the Kansas City area, I am dedicated to assisting individuals in accessing vital health insurance coverage. Our team serves both Kansas and Missouri residents, affording me a unique perspective on the significant impact of Medicaid expansion.

The difference between the two states is striking. Since Missouri expanded Medicaid, the number of uninsured residents has seen a remarkable decrease. The majority of individuals seeking assistance in securing coverage are Kansans. It is disheartening to witness hardworking individuals, striving to provide for their families, unable to qualify for KanCare.

Many of these individuals are hesitant to seek necessary medical care out of fear of burdening their loved ones with medical debt. One poignant example stands out: a patient came to our clinic to work with me to apply for Medicaid. As we were talking, he disclosed that he had been told that he was at very high risk of having a heart attack or stroke and should go to the emergency room. Aware of his heightened risk for a cardiac event, he delayed seeking emergency care to avoid potential financial strain on his family. Despite my urging, he insisted on completing the Medicaid application first. We did, and I advised him that it was likely he would qualify. He then went to the ER, and he was having a cardiac event.

This man risked his health and his life with his family's future in mind. Because he was a Missouri resident, he qualified for expanded Medicaid coverage.

This story underscores the critical need for Medicaid expansion in Kansas. Countless Kansans face similar difficult decisions, balancing their health needs with financial concerns. Ensuring access to affordable healthcare not only preserves individual well-being but also bolsters economic stability by keeping people healthy and productive.

I know that there are plenty of Kansans making the same type of decision. There's a huge economic benefit in keeping people healthy and working, and keeping families whole.

**No matter what side of the state border my neighbors live on, I want them to have the chance to stay healthy, keep working, and take care of their families. Please expand KanCare.**

Jim Torres, Manager  
Health Insurance Services



March 15, 2024

**Dear Chairman and Committee Members,**

**Thank you for the work you do for the health and well being of Kansans. I encourage you to support the Medicaid Expansion. Every Kansan will ultimately be winners with this action.**

**150,000 low income Kansans would gain access to medical care.**

**Healthcare costs for everyone would be reduced.**

***About \$700 million in annual federal funding would flow into the state.***

**Preserves and strengthens rural healthcare.** Rural hospitals face high levels of uncompensated care; 59 of the remaining 102 rural hospitals across Kansas could close.

My husband and I recently traveled through Western Kansas for a short getaway. When we returned, I mentioned to him that I did not see one hospital. I appreciate the value of Western Kansans and want them to have better access to medical services.

Availability of medical care is essential to improving a standard of living.

Please support the Medicaid Expansion on behalf of all Kansans.

Thank you for considering my request.

Sincerely,

Deborah Turner, retired KS teacher

Lenexa

March 16, 2024

Hello,

In 2022 and 2023, I helped my disabled elderly family member try to obtain medical and mental health services. He was living in a broken down RV on under \$13,000 a year. His income was too high, according to the State, and he was approved for Kancare with a \$7500 annual deductible/spend down. How is that even humane? He needed thousands of dollars in medical, dental, and mental health services, but would never be able to pay the exorbitant deductible. The waiting list for "medically needy" services was 3 yrs. I know he is one of thousands of Kansans who paid taxes from a good paying job all his life and then a mental and physical disability took that away. Kansas turned his back on him. Please expand Medicaid now!

Stacie Turner  
Wichita, KS

## Testimony in support of Medicaid Expansion in Kansas

3-15-2024

I have worked as an anesthesiologist at a large hospital in Kansas for 39 years. During that time I have seen hundreds of patients whose health and economic well-being were seriously compromised, even endangered, because they did not have access to Medicaid coverage. Let me give you a current example:

One of our ENT physicians told me about a patient with a large thyroid goiter in her neck that had obstructed some of her breathing. If this patient had qualified for Medicaid, we could have scheduled an urgent surgery and immediately removed the goiter to avoid further complications. However, because she is uninsured, she will have to wait until the mass grows even larger and her condition rises to the level of an emergency before she can receive care. When she arrives in the emergency room, her breathing will have become more labored and her life will be in danger. As the ENT physician told me, "Greg, we've got a disaster brewing here."

For our patient, this 'disaster' will be painful and cause her great physical and mental distress. As the goiter grows, it could further compress her trachea worsening the obstruction. She could lose her voice due to the destruction of nerves that control her vocal cord. This, in turn, could leave her airway unprotected, and gastric contents could spill into her lungs, resulting in pneumonia. The goiter could also compress her esophagus, making it difficult to swallow solid food and cause her to choke on liquids.

Treating conditions like this in the emergency room can require heroic, and costly, measures. The anesthesiologists and surgeons must use advanced airway techniques to intubate the patient. A complex procedure known as extracorporeal membrane oxygenation might have to be used to pump oxygenated blood back into the body, keeping the patient alive until she can breathe on her own. Cardiologists, specialized nurses, expensive equipment, 24/7 monitoring, a lengthy hospital stay—all of this might be required because this patient, who works at a low-paying job, did not have the means to afford insurance on her own.

If she'd had Medicaid, we could have treated her with a routine surgery much earlier, when the goiter was small, that most likely would not have even required an overnight stay at the hospital. As it is, her eventual trip to the ER and subsequent care could end up costing well over \$100,000. The complications from her surgery could mean she can't work for a long time. A woman who had been independent and reasonably self-sufficient could easily end up with severe complications that could cause her to lose that independence.

I said above that I have seen hundreds of cases like this in my career. I know many other physicians who routinely encounter even more health emergencies that could have been avoided if their patients had Medicaid. That possible \$100,000 hospital bill for our patient with the goiter? Multiply that amount by thousands of other similar cases across Kansas and you can see what this short-sighted policy of failing to expand Medicaid has cost our state in the last decade. Multiply this poor woman's experience by the thousands of others with similar stories and you can grasp the magnitude of the human toll this negligence has exacted.

It is far past time to act. I urge you, as a physician and a fellow Kansan, to expand Medicaid now.

Sincerely,

**Gregory Unruh, M.D.**  
**26907 W Shadow Cir**  
**Olathe, KS 66061**

HB 2556  
Written Testimony Only  
Marjorie J. Van Buren  
Topeka, Kansas

Chair Landwehr, Ranking Member Ruiz, Honorable Members:

Thank you for the opportunity to testify in favor of HB 2556.

I've been following the issue of Medicaid expansion, both in Kansas and nationally, for quite a few years. I'm concerned that my state--of which I'm a proud life-long resident--has not extended Medicaid to the tens of thousands of Kansans who fall into the health insurance coverage gap and don't have access to affordable health insurance.

The lack of Medicaid expansion is affecting our friends, family, and neighbors, as well as our hospitals and our small businesses. I'm originally from a rural Kansas county, where we were justifiably proud of our hospital. But hospitals in rural counties are struggling now, in part because people who can't get insurance coverage have to come to the emergency room, which costs the hospital that has to take care of them!

As you probably know, there are many solid benefits to Medicaid expansion, including:

- 1) Expansion will reduce health care costs for everyone and protect Kansans from medical debt. This is documented in the many states that have expanded.
- 2) Access to expanded Medicaid will keep the workforce healthy and ensure Kansas stays economically competitive.
- 3) It preserves and strengthens our rural communities and the health care systems that serve them, and
- 4) It ensures access to affordable health care for all Kansans, regardless of income level, race, or ZIP code.

Over 70% of Kansans support expanding Medicaid in Kansas. Expansion will be good for Kansas. I'm asking each of you to vote to report HB 2556 favorably for passage and give the full House a chance to debate and vote on this bill.

Again, thank you.  
Marjorie J. Van Buren

March 15, 2024

Dear Chairman and Committee members,

I encourage all legislators to support Medicaid Expansion. The benefits of this would help thousands of Kansans in many ways that you are aware of. It would bring millions of dollars into our state without costing the taxpayers anything.

Seize this opportunity to expand Medicaid by demonstrating your leadership in passing HB2556 and SB355.

Thank you for recognizing the importance for doing what is best for us in Kansas. Please support Medicaid Expansion.

Sincerely,  
C. A. Van Goethem  
Stilwell, Ks. 66085

**To the Honorable Members of the Kansas Legislature:**

Subject: Testimony in Support of "The Cutting Healthcare Costs for All Kansans Act"

Dear Legislators,

I write to you today as a concerned citizen, member of the clergy, and an educator urging your support for the Medicaid expansion bill, "The Cutting Healthcare Costs for All Kansans Act," which Governor Kelly has introduced. This initiative is more than a policy; it represents a beacon of hope for thousands of Kansans who are currently left in healthcare limbo.

Maria is a single mother living in a small rural community in Kansas, working two part-time jobs to make ends meet. Despite her hard work, neither job offers health insurance, and her income is just above the current Medicaid eligibility threshold. Her daughter, Emma, who is six years old, has been diagnosed with asthma, a condition requiring regular medical attention and medication to manage.

Under the current system, Maria makes too much to qualify for Medicaid but not enough to afford private health insurance or cover medical costs out of pocket. This financial gap means Emma cannot see a specialist regularly or afford the inhalers and other medications she needs to keep her asthma under control. As a result, Emma's condition has led to several emergency room visits when her asthma attacks became severe, causing distress and mounting medical bills for Maria, as well as days missed out of school which impedes her educational progress.

With the expansion of Medicaid under "The Cutting Healthcare Costs for All Kansans Act," Maria's income would now fall within the expanded eligibility criteria, allowing both her and Emma to qualify for Medicaid. This change means that Emma can regularly visit an asthma specialist and receive the necessary medications to manage her condition effectively. Regular access to healthcare would drastically reduce the likelihood of emergency asthma attacks, improving Emma's quality of life and allowing Maria to avoid the financial strain of unexpected medical bills.

Furthermore, the expansion would support Maria's health as well, ensuring she receives preventative care and medical attention when needed, reducing the risk of untreated health issues that could affect her ability to work and care for Emma.

Evidence consistently shows that states embracing Medicaid expansion witness significant economic and health benefits. Expanding Medicaid in Kansas would not only provide health insurance to over 150,000 additional Kansans but also stimulate economic growth. Hospitals, particularly in rural areas facing financial strain, would receive a much-needed lifeline, thereby preserving access to care for all residents.

Healthcare should not be a privilege for the few but a right accessible to all. In a nation as wealthy as ours, it is unconscionable that we have citizens forced to choose between medical care and other essentials like food and rent. Medicaid expansion embodies our collective commitment to each other, ensuring that no Kansan must suffer due to lack of medical insurance.

The time to act is now. For too long, the issue of Medicaid expansion has been sidelined, leaving countless individuals and families at risk. "The Cutting Healthcare Costs for All Kansans Act" provides us with a viable pathway to ensure that everyone in our state has access to the healthcare they deserve. I implore you to support this bill, not just as a matter of policy, but as a testament to our values as Kansans who believe in taking care of one another.

In closing, I ask you to consider the lives that will be directly affected by your decision. We could make a significant, positive impact on the health and well-being of our fellow Kansans. I strongly urge you to vote in favor of Medicaid expansion, demonstrating your commitment to the health and prosperity of all Kansans.

Thank you for your time and consideration.

Sincerely,

J. Michelle Vann

J. Michelle Vann Dcc, ThD, MS

March 15, 2024

Dear Chairman and committee members, I appreciate the opportunity to provide written testimony to support Medicaid Expansion in Kansas. Kansans deserve the more than \$700 million in annual federal funding that the state would get, plus additional funding through a signing bonus—without costing the taxpayers anything! More importantly, Medicaid expansion would greatly benefit rural Kansans; improve access to critical mental health care; help to lower premiums; and most importantly, allow more low-income Kansans to have access to medical care. Being a state with Medicaid expansion will also help attract workers; I know a number of families who have expressed concern about moving here because of this issue and what it signals to those needing health care.

PLEASE support Medicaid expansion to improve the health and well-being of all Kansans! Thank you.

·  
Lisa McGahey Veglahn  
Prairie Village, KS



March 14, 2024

To the Kansas Legislature:

My name is Kelsey Vetter, and I am a grants administrator in Johnson County. An expansion for Medicaid would be a great help for me as an individual with mild ataxic cerebral palsy. As a self-employed nonprofit worker, I cannot currently afford health care. I know that regular trips for physical therapy sessions will help me take care of my body and keep me fit and active.

I also believe we should expand healthcare access for all hard-working Kansans, able-bodied or not. It's time Kansas lawmakers vote to expand Medicaid once and for all.

Kelsey Vetter

March 15, 2024

I am a Kansas pediatrician and Medicaid Expansion will do SO much to help families in our state. States with Medicaid Expansion have more competitive insurance markets which lowers costs for everyone. There are at least 150,000 Kansans who fall into the coverage gap who could gain access to healthcare with Medicaid Expansion. Hospitals in danger of closing across the state could be saved if more of the people they care for had coverage through Medicaid Expansion. Fewer families would be crippled by the costs of high deductible plans. I have so many families that actually have to limit their income instead of taking higher paying jobs because their children will lose Medicaid coverage if they make too much money— but they can't afford other healthcare options. The coverage gap is a significant problem for so many families in this state.

Medicaid Expansion is a purely beneficial program. There are no negatives. It is revenue positive for the state since the federal government not only covers the costs but provides bonus incentives as well. Kansans overwhelmingly support Medicaid Expansion.

Please finally get this done. Health care providers are struggling under the weight of un- and under-compensated care. Families are struggling due to unaffordable health care insurance options. Passing Medicaid Expansion in this moment is the right thing for Kansas.

Thank you,  
Amy Voelker, MD  
Olathe, KS

March 13, 2024

Hello, Cutting Healthcare Costs for All Kansans Act hearing,

Thank you for having this hearing on Kansas Medicaid Expansion. It has been a long time for so many Kansans dealing with health issues and no where to go except driving for hours for medical care. Kansans are the bedrock of our Nation, we must treat all Kansans with the dignity and respect of attaining affordable health care. It seems to me, adequate healthcare is a humanitarian right.

Below are a few highlighted reasons I think Kansas desperately needs to expand Medicaid especially for many of our rural citizens.

Thank you,

Your Kansas Constituent,

Gloria Walker

Overland Park, KS

#### **HB 2556 and SB 355 expands Medicaid and lowers health care costs.**

- **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.

- **It protects rural hospitals, supporting jobs and health care in rural communities.**

- **8 rural hospitals have closed while we've waited for expansion, devastating** surrounding businesses and costing communities thousands of jobs.

- **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 Strengthens Rural Healthcare**

##### **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.**



March 15, 2024

### Written testimony in support of Medicaid expansion

My name is Tara Wallace. I am a licensed clinician and trauma therapist. I am also the CEO of a non-profit that provides free therapy to the families of the children I serve. Many of these children are in the child welfare system due to reports of abuse and neglect. Returning them to their birth families is challenging for several reasons. Many of these reasons can be addressed by providing services to help the family become stable. Because Kansas has not expanded Medicaid, therapy is only available if the child shows a need for services or medical necessity.

As previously stated, I am the CEO of a non-profit. Lighthouse Therapeutic Community Outreach Foundation was established in response to the needs I observed while working with children that have experienced trauma. My work in treating traumatized children includes family therapy. However, when a child experiences a traumatic event, they are not the only ones affected by it. Nor are they the only ones to show symptoms. Unless the family receives a similar level of support, my work is either completely ineffective or limited in success.

To help you understand why there was a need for Lighthouse TCO Foundation I will explain it this way. Treating a child that has experienced trauma without the same level of effort towards the family is the same as taking a child from a starving household and feeding them a nutritious meal once each week and then returning them to their family. The child will still starve to death. It will just take longer than the rest of the family that has not eaten at all.

As a social worker I have an ethical and moral responsibility to do no harm. This includes not providing services that I know will minimally meet a child's needs or not improve their situation at all. Lighthouse TCO Foundation allows me to provide services to the family using donations and grants. Lighthouse is a small non-profit organization competing against larger organizations for mental health funding. Considering the state of mental health in Kansas, this means very limited resources to do work that is critical to the wellbeing of children and families.

There is much work to be done in addressing the mental health challenges facing our state. But there is only so much a mental health professional can do when they too are struggling for healthy functioning. Many of my colleagues live in the gap that prevents them from seeking mental health support because they cannot afford insurance. They go to work "sick" because not working means their livelihood.

My deepest fear is that Kansas closes out another legislative session without expanding Medicaid and provides no resources to support those who are currently struggling within our current health system structure. The collapse of our healthcare system would be unparalleled.

A simple solution along the continuum of responding to the complex problem of helping struggling children and families in Kansas is Medicaid expansion.

Respectfully submitted,

A handwritten signature in black ink that reads "Tara D. Wallace". The signature is fluid and cursive, with the first name "Tara" and last name "Wallace" clearly legible.

Tara D. Wallace  
MSW, LSCSW, CTF-CBT/PSB, RYT, SLC  
Lighthouse Therapeutic Community Outreach Foundation

March 15, 2024

Hi there,

I am a type 1 diabetic who is expected to pay 1/4 of my salary on healthcare. Like most people, I cannot afford this.

I recently returned from the UK to KS and am disgusted by the fact that there is virtually NO preventative care and it is purely reactionary. It should be no surprise that Americans have such horrible health. What's more, I pay higher taxes in the US than I did in the UK! And truly have nothing to show for it. No wonder the rest of the world looks down on the narcissistic "American-exceptionalism" mentality that "greed is good".

If America actually prioritizes "life, liberty, and the pursuit of happiness" then we need a single payer healthcare system. It is gross government negligence that Americans are forced to choose between paying rent or paying medical bills.

It's time America prioritizes humanity over capitalism.

Sarah Watney

March 15, 2024

I am writing to support The Cutting Healthcare Costs for all Kansans Act that is scheduled for hearings next week. Why do I support this bill? Because I am part of the many of the forgotten Kansans.

I am a school teacher. I teach high school. I am also a single mom with a child with special needs. I make slightly too much money for my child to qualify for the buy in version of KanCare. What does this mean for me? I'm spending almost 10k a year on premiums, deductibles, and co- pays. This means that often I have to forgo care for myself so that my child gets the care he needs, it means that I have far less disposable income to spend in our economy. Quite frankly it's a huge financial struggle, one that in other states I would not have to face. I don't want free healthcare for myself or even for my child. I just want the right to buy into KanCare for my child so i am not financially crippled by healthcare costs. I am currently paying almost \$500 a month in premiums. I have a 4k deductible. And, I'm paying for this alone on a teachers salary.

I don't expect anyone to pay my or my child's way. I just want access and the ability to pay state run insurance which has better benefits and is more affordable. Please expand KanCare so this type of option might be able to me and other parents like myself. We are not wealthy. I wouldn't even consider myself middle class. We are the forgotten. The people who make just a little too much to currently qualify, but who don't make enough to be able to afford private insurance.

Emma Webb  
McPherson, Kansas

March 14, 2024

Hello,

I am a constituent in Shawnee, KS (Senate District 10, House District 18) reaching out to express my support for expanding Medicaid in Kansas in light of the upcoming committee hearings. I have copied my legislators, Cindy Neighbor and Mike Thompson, so they are aware of my support as well.

I believe healthcare is a fundamental human right and this bill would give 150,000 of our most vulnerable Kansas access to affordable, lifesaving healthcare. As a Christian, I serve a God for whom healing the sick and caring for the poor is a top priority. As such, I feel it is morally repugnant that we have allowed thousands of Kansans to suffer and even die over the past several years because of the legislature's refusal to expand Medicaid. Now is the time to make that right.

Moreover, I also see a strong fiscal argument for expanding Medicaid because the federal government will cover 90% of the costs of Medicaid expansion. I am already funding the costs of Medicaid expansion with my federal tax dollars, yet Kansas is not taking advantage of any of those dollars. Effectively, I am sending my money to fund Medicaid in other states without Kansas seeing any of the benefits. I feel the Kansas legislature is wasting Kansans' federal tax dollars. They can correct this by expanding Medicaid immediately.

Thanks,

Alex Welch Blattner (she/her/hers)



March 14, 2024

## Medicaid Expansion

Ladies and Gentlemen, Our law office serves a wide variety of Kansans from young families to those preparing for their final days. Most need to take off work to see us and many cannot afford to miss hours and meet their obligations. They struggle with health care and insurance is not attainable for many. Our rural hospital also could use some help. Medicaid expansion would pay for care that otherwise is not collectable or results in further hardships with garnishments. Please, before one more family goes untreated or one more rural hospital has to cut back or close, expand Medicaid. It is a no brainer.

Thanks,  
Dennis A White

Greetings! Our names are Charles and Sandra Whitmore, and we are writing to provide testimony about Governor Kelly's 2024 Medicaid Expansion Bill: The Cutting Healthcare Costs for All Kansans Act scheduled for hearings in the Senate (SB355) and House (HB2556) on Wednesday, March 20, 2024. We offer these comments on behalf of our beloved granddaughter, Gabrielle Elizabeth Whitmore, who is 29 years old and in desperate need of financial assistance to cover her living and medical expenses. As a result of conditions she has been diagnosed with since her original bout with COVID-19 which she got while traveling in Rome in January of 2020, she is unable to work and live independently.

Prior to contracting the disease, Elle was a vibrant, active professional working for the Wyandotte County Department of Social Services as an investigator. In the spring of 2020, she had to quit the job she loved because she couldn't get out of bed without falling due to extreme dizziness. As she sought medical assistance, testing indicated a condition referred to as POTS – Postural Orthostatic Tachycardia Syndrome. This condition causes a number of symptoms when you transition from lying down to standing up, such as a fast heart rate, dizziness and fatigue.

- Normally, a body balances its heart rate and blood pressure, regardless of the position your body is in.
- With POTS, the body can't coordinate the balancing act of blood vessel constriction and heart rate response. Therefore, it can't keep one's blood pressure steady and stable, which causes a variety of symptoms.

Last year, she was also diagnosed with Ehlers-Danlos Syndrome, a genetic condition that weakens the body's connective tissue, commonly affecting the skin and joints. In addition to loose or unstable joints and fragile skin that tears easily, EDS can cause complications that may affect one's blood vessels.

As a state-based, public health insurance program, Medicaid is intended to assist people with disabilities like my Granddaughter. Now diagnosed with Long COVID, Elle lives with her parents and is unable to hold down a job. She has sought AND BEEN DENIED financial aid and federal assistance. Being covered by Medicaid would:

- Enable her to pay for her medical care-her biggest fear and stress.
- Rebuild her life and career.
- Be independent.

Expanding Medicaid lowers costs for everyone. When one Kansan doesn't have health insurance, other Kansans end up paying for it. And expanding Medicaid could reduce taxes, thus funneling those monies to schools, infrastructure and, possibly, tax cuts.

Medicare expansion grows our economy. Kansas has lost nearly \$7 billion in additional funding. This would create nearly 23,000 jobs and help end the healthcare worker shortage.

The Medicaid Expansion and Cutting Healthcare Costs for All Kansans Act comes at no additional cost to Kansas taxpayers.

- The federal government pays for 90% of the costs to expand Medicaid; states pay 10%.
- The state's share is completely covered by drug rebates, savings from higher reimbursement rates for existing Medicaid recipients, and
- Additional federal funding.

Currently, Kansans' federal tax dollars are going to support hospitals and jobs in states like New York, California, and every state adjacent to us instead of being invested in the people of Kansas.

In summary, we ask for your support in securing Medicaid coverage for Kansans like our Granddaughter and others in our community who are struggling with medical bills and living expenses that will be greatly eased by the passage of this Medicaid Expansion legislation on March 20<sup>th</sup>. God bless you.

(signed) Charles W. Whitmore  
Overland Park, Kansas

(signed) Sandra L. Whitmore  
Overland Park, Kansas

March 14, 2024

We're writing to submit testimony about Governor Kelly's 2024 Medicaid Expansion Bill: The Cutting Healthcare Costs for All Kansans Act scheduled for hearings in the Senate (SB355) and House (HB2556) on Wednesday, March 20, 2024.

Our daughter, Gabrielle Whitmore, is 29 years old and in desperate need of financial assistance to cover her living and medical expenses as a result of conditions she has been diagnosed with since her original bout with COVID-19 which she got while traveling in Rome in January of 2020.

Prior to contracting the disease, Elle was a vibrant, accomplished, very physically active professional working as an elder abuse investigator. In the spring of 2020, she had to quit the job she loved because she could no longer perform her duties. She also spent about 20 hours a week volunteering for many organizations from grade school on. She's unable to hold a job now, and unable to do daily life needed activities on some level every day and needs physical assistance. All of her time goes to trying to heal and exist, she misses most family events - from holidays to funerals and weddings, and rarely ever socializes.

Covid triggered several medical conditions for Elle. The cytokine storm and combinations of dormant genetic conditions worked to cause her entire body to always be in intense pain and many of her organs to be extremely compromised. First, her gallbladder was removed as though it was perfectly healthy on regular testing, they found it only was working at 7% capacity. She sees an internist, a number of specialists, and does a number of types of physical therapy and a therapist for the mental health burden of a once vibrant full living in her 20's who was a high achiever, suddenly becoming bedridden mostly for going on four years now. She takes 18 prescribed medications daily regularly, and many more as needed. She has many medical provider appointments each week and doing the treatments, visits and basic daily care is all or more than she can manage. She is very slowly improving as things diagnose and can be addressed. Elle has a long way to go per all of her providers and she needs continued support to get there. She very much wants to live a full life again and have hope that she is cared for and can contribute again and do things those her age are doing.

POTS Postural Orthostatic Tachycardia Syndrome. This condition causes a number of symptoms from a dysregulated heart rate. For example, when you transition from lying down to standing up, a fast heart rate, dizziness and fatigue. Normally, a body balances its heart rate and blood pressure, regardless of the position your body is in. With POTS, the body can't coordinate the balancing act of blood vessel constriction and heart rate response. Therefore, it can't keep one's blood pressure steady and stable, which causes a variety of symptoms.

Last year, she was also diagnosed with Ehlers-Danlos Syndrome, a genetic condition that weakens the body's connective tissue, commonly affecting the skin, organs, entire body and joints. In addition to loose or unstable joints that can be injured easily, and fragile skin that tears easily, EDS can cause complications that may affect one's blood vessels. When she contracted covid, her body swelled in 70 pounds of inflammation as the Ehlers allowed her joints to be dislocated which trapped the fluid outside the normal system her body could drain it from. She has seen a lymph specialist and two types of physical therapy specifically to drain these fluids in her body and lost over half of the swelling so far which has begun to decrease the intense pain.

As a state-based, public health insurance program, Medicaid is intended to assist people with disabilities like Elle. Now diagnosed with Long COVID, Elle lives with her parents and is unable to hold down a job. She has sought AND BEEN DENIED financial aid and federal assistance

from disability despite Congresswoman Sharice David's assistance. She is on cobra insurance from her parents' employment with maximum caps that make her treatments possible, she will be mandatory off of that in September this year. With no income she's unable to afford insurance on her own. Because one can have these conditions and still be somewhat functional and undiagnosed or minor illnesses, federal disability has refused cover to her, even though that is not how they present in her case. She has been denied multiple times without any one speaking to or examining her or her providers.

Being covered by Medicaid would:

- Enable her to pay for her medical care-her biggest fear and stress.
- Have the chance someday to rebuild her life and career.
- Be independent.

Expanding Medicaid lowers costs for everyone. When one Kansan doesn't have health insurance, other Kansans end up paying for it. And expanding Medicaid could reduce taxes, thus funneling those monies to schools, infrastructure and, possibly, tax cuts. Medicare expansion grows our economy. Kansas has lost nearly \$7 billion in additional funding. This would create nearly 23,000 jobs and help end the healthcare worker shortage. The Medicaid Expansion and Cutting Healthcare Costs for All Kansans Act comes at no additional cost to Kansas taxpayers. The federal government pays for 90% of the costs to expand Medicaid; states pay 10%. The state's share is completely covered by drug rebates, savings from higher reimbursement rates for existing Medicaid recipients, and additional federal funding.

Currently, Kansans' federal tax dollars are going to support hospitals and jobs in states like New York, California, and every state adjacent to us instead of being invested in the people of Kansas.

Health issues and lack of coverage could happen to anyone, and it does. Most of Elle's family on both sides has lived in Kansas our entire lives and been very active in supporting community and government. Just as has happened to Elle, who was gainfully employed and had to quit due to long covid, and who tried to go back to work at a much lower level and part time and also couldn't sustain that. In Elle's work in adult protective services, Elle helped over 600 people in cases she handled and saw firsthand how many there are in our state suffering from lack of medical care. Elle's grandmother went uninsured for ten years after an illness at work after decades of gainful employment, and she was unable to be well enough to go back to work in Kansas full time before medicare. They sat in ER parking lots twice during that time wondering if they should risk her life or her home. Though she is on medicare now, she still suffers more health issues due to that long lapse in ability to get medical care. That costs society more. One of Marcy's friends in his 40's had always had two jobs, and had quit one that held his insurance to look for another in 2016. During the month of that time, he suffered horrible stomach pain and was diagnosed with cancer and unable to work again or obtain insurance and thus he had no treatment and died six months later leaving an 8 year old son. These issues are very real, non partisan, and they affect the lives of wonderful people who deserve better, have given much and have much to give to our society if they had the support to do so.

In summary, we ask for your support in securing Medicaid coverage for Kansans like Elle and others in our state and community who are struggling with medical bills and living expenses that will be greatly eased by the passage of this Medicaid Expansion legislation on March 20th.

- John Whitmore, unaffiliated registered voter, Lenexa, Kansas
- Marcy Hall, unaffiliated registered voter, Lenexa, Kansas

Also signed by:

- Simon Whitmore, unaffiliated registered voter, Lenexa, Kansas
- Gabrielle Whitmore, registered democrat, Lenexa, Kansas
- Stephen E. Hall, registered voter, Leawood, KS District 7, Ethan Corson, Senator, District 19
- Stephanie Sawyer Clayton, Representative
- Christine Perkins, registered democrat, Miami County, KS



## Support HB 2556- Pass Medicaid Expansion

Kansas should pass Medicaid Expansion to provide an insurance option for Kansans who do not make enough money to afford health insurance from the exchange but also do not qualify for KanCare. Most of the estimated 150,000 Kansans who would benefit from Medicaid expansion are low-income workers or Kansans suffering from chronic illness. These are Kansans stuck in the coverage gap, with no affordable insurance options and no federal subsidies. Our current medical funding model is struggling to provide even the most basic medical services to this population.

As nurses, and later Advanced Practice RNs, we go into medicine because we answer the God-given calling to care for all people. Without appropriate funding, systems fail, and we simply can no longer answer the call. I wish that each of you could witness the light in a patient's eyes when he is able to see a provider at forty-five years old, when he finally gets insurance. The caveat? He spent the last 20 years working menial construction without health care benefits, suffered a debilitating back injury, eventually having so much pain that he could no longer work. But he worked anyway to support a wife and children. Now he cannot walk, is permanently disabled, and has a significantly shortened life expectancy. But at least he can finally qualify for the care he needs. This is just one of the hundreds of comparable stories we hear on the front lines of primary care.

## The Problem

Today you will hear plenty of testimony about Kansas' Medicaid statistics like how the eligibility threshold for adults is among the lowest in the country, or that thirty percent of the people treated by community health centers in Kansas are completely uninsured, that seventy percent of individuals served at community mental health centers have an income of less than \$20,000, and that childless adults who are not disabled cannot qualify for Medicaid without a chronic disability. We will not bore you with numbers. By now you are keenly aware that we are in the midst of a healthcare crisis.

No, today we ask that you consider a much less recognized voice, the testimony of a precarious position faced by the next generation of primary care providers joining the workforce. Please consider the reality of our situation. Enrollment in educational training for the provider workforce is dwindling every year. The nurse practitioner graduating class of 2025 includes a total of eight providers; the class below us has one. Without expansion, we will lose the economic power of not only health care facilities, but the very providers that make the whole thing work.

## Why this Matters

Hundreds of thousands of Kansans served by community health centers are chronically uninsured or under-insured. This uncompensated care has severely limited our capacity to practice as providers, hospitals, and clinics. Uninsured Kansans forgo regular health care and often do not obtain medical and mental health care when they become critically ill. Crisis and desperation are the driving causes of seeking treatment in Kansas. By the time they present for care, their normally uncomplicated conditions are exacerbated resulting in inflated costs which shift to emergency rooms, hospitals, and taxpayers. Because the Affordable Care Act anticipated Medicaid expansion, it reduced the disproportionate share (DSH) subsidies to hospitals that used to help offset the costs of treating the uninsured. Because of this we have watched Kansas facilities struggle and close their doors.

## The Bottom Line

The state would unlock \$682.4 million in annual federal funding with expansion. The federal government covers 90% of the extra cost of Medicaid services in exchange for expanding eligibility to 138% of the federal poverty rate. Low Medicaid reimbursement rates tend to limit access to quality care, worsening health outcomes for Medicaid beneficiaries. States determine their own reimbursement rates, but the Kansas legislature has continued to set ours low, leaving communities to shoulder extra costs.

House lawmakers on a budget committee recommended an additional **one-time funding influx** of \$33.9 million to increase physician provider codes and \$45.2 million to increase outpatient hospital rates. This proposal is being called a *"practical, sustainable solution."* We can report from the front lines that this proposal falls short of long-term resolutions for Kansas health care options. To be truthful, this proposal's impact is highly limited (applicable to the current Medicaid population) and temporary at best. It is a far cry from a practical solution, doing nothing to address the thousands of patients still locked out of healthcare. These are the people that we need to focus on.

The data trends are clear, this population will continue to increase in both number and severity of illness as we keep blocking access to health care. Hospitals will keep closing and new providers will stop trying. We cannot solve this problem with a band aid.

Honorable representatives, it is high time for serious health reform in Kansas by removing the undue restrictions against federal funds available through expansion.

To: Members of the Committee

From: Betsy Wickstrom

Re: Support for Medicaid Expansion

I appreciate the opportunity to share my support and case for expanding eligibility for Medicaid in Kansas. To that end, I have provided the OpEd that I submitted to the Kansas City Star in November 2023.

## **It's past time to expand Medicaid — for pregnant moms and everyone else in Kansas** | Opinion BY BETSY WICKSTROM SPECIAL TO THE KANSAS CITY STAR NOVEMBER 26, 2023

Expanding Medicaid in Kansas would help close health-care gap for pregnant women and low-income workers. I'm a maternal-fetal medicine specialist working in the Kansas City metropolitan area. I work closely with expectant patients with pregnancy complications. I also help educate new parents about postpartum care — what they need to keep themselves and their little one healthy. There was a time when low- to middle-income pregnant women could receive care at a clinic staffed by resident physicians at various medical schools, if they made too much money to qualify for assistance but too little to afford private insurance. They could pay a reduced fee based on their income, and receive excellent, compassionate care. But more than 10 years ago, those clinics began no longer accepting uninsured patients, and we started seeing patients coming in later and later in pregnancy as they couldn't afford multiple visits. For lower income families, KanCare now covers pregnancy and delivery care, but for care not related to pregnancy, (asthma, heart disease, seizure disorder or other neurological problems, for instance) they are on their own. This results in sicker pregnant people with more complications — exactly what we don't want.

Kansas recently passed a bipartisan law to expand health care coverage for new moms up to 12 months post-delivery. Now, as can happen frequently, those who experienced problems in pregnancy can get the continuing care they need to avoid long term complications from heart disease, diabetes and hypertension, for example. We know the benefits of this new law will be lifesaving. Literally. Access to routine check-ups, breastfeeding support, mental health support and more will reduce maternal mortality and improve health outcomes for our most precious resource: our children. So why stop here? The time is long past due for Kansas to expand Medicaid, once and for all. Why does this issue, which is all over the news these days, matter to all Kansans? Medicaid expansion would make a specific population of hardworking Kansans eligible for health



insurance. These people either “make too much” to be eligible for Medicaid, but not enough to afford private insurance. They are working folks in our hospitality industries, (bartenders and waiters, for instance) drivers, and construction workers. They deserve health care, and we need them to stay healthy and in the workforce. Expansion is a practical solution, too. We are one of only 10 states left in the nation that have not expanded Medicaid. That means our federal tax dollars are going to neighboring states to keep their residents healthy — not Kansas families. So far, Kansas has lost more than \$6 billion (with a b) because we have chosen not to expand Medicaid. How much more do we have to lose to say enough is enough?

Not only would expansion help boost the Kansas economy, but it would also help lower health care costs for all Kansans. At a time when we are all feeling the growing costs of everything from groceries to airfare to school lunches, health care is no exception. Why not expand Medicaid so we can drive down the cost of our families’ bills? All our families deserve a break in costs. Let’s talk about our rural hospitals. A recent report found that more than 50% of rural Kansas hospitals are at risk of closing — 60 of 104. Earlier this month, Dickson County’s local Herington Hospital announced its closure after serving Kansans for more than 100 years. Ascension Via Christi recently announced it will be closing the doors of its emergency department in Fort Scott next month. This means many families in southeast Kansas will be driving much further for emergency care. There are numerous variables involved in health care access and costs, but it is a fact that Medicaid expansion would help rural hospitals’ bottom lines. In expanded states, health care centers have higher revenue, greater operational capacity, more financial stability and more sites. They serve more patients, and are more likely to provide behavioral health and vision services.

Researchers have found that hospitals in expansion states also provide more jobs for their respective communities. With closure of rural hospitals, patients must drive further for preventative and maternity care. That’s if they have transportation available, and flexibility to take off more time from work, and child care if they need it. These hospital closures will inevitably lead to fewer health care visits, especially when raising a family, balancing jobs and many other daily tasks. Preventative care (which adds to quality of life as it prevents worsening of chronic illnesses) may drop off the priority list. We need to make it as easy as possible to get patients the care they need. If you are still reading, thank you. The benefits of expanding Medicaid are clear. Let’s help all Kansans out by getting this job done. Betsy Wickstrom is a longtime resident of Prairie Village. She has practiced high risk obstetrics for 31 years and cares for pregnant patients with complications at St. Luke’s Hospital.

March 13, 2024

The state needs to reflect the needs and wants of the great majority of Kansans and expand medicaid now. The reasons are clearly stated in the many testimonials!

Larry Wilgers  
1629 E. 11th Ave.  
Winfield, Ks 67156

March 14, 2024

Dear Legislators,

It is with great hope and trust that I thank you for hosting a hearing on Medicaid expansion for Kansas.

Our families need this.

Our kids need this.

Our workforce needs this.

Our entrepreneurs need this.

Our hospitals need this.

Our mental health providers need this.

With your help, Medicaid expansion can give vulnerable Kansans more tools to build healthy, productive futures for themselves.

Your support for Medicaid expansion will help communities tackle the underlying causes of costly and devastating homelessness.

Your support will help build a stronger Kansas economy on an even playing field with surrounding states.

I am grateful for every vote in favor of Medicaid expansion for Kansas. It's time to pass this. Thank you.

Karen Willey, PhD

Douglas County Commissioner, District 3

March 14, 2024

As a 25-year-old, deeply religious, and life-long Kansan, I urge you to expand our KanCare Program to include the more than 150,000 Kansans who fall in the coverage gap.

As a teacher in a low-income area, students talk often and openly with me about their struggles. I have a student, an 8th grade boy, who desperately wants to play soccer. He has been working to get his grades up from Fs to As and Bs since January, so that he could make the team. As tryouts moved closer, however, he was afraid he wouldn't be able to play because he hadn't gotten a sports physical yet. When I asked why not, he said his parents didn't have health insurance. When he and I looked online for places to get a physical without insurance, the places we saw said it could be anywhere from \$100-\$250, although it was difficult to get a true estimate for his specific situation. The cost alone was enough to potentially keep him from doing the thing he had been working so hard toward - playing soccer with his school and his friends.

If KanCare is expanded, students like mine would see benefits immediately, not just for sports physicals, but for access to doctors appointments and necessary medications. It is impossible to imagine a healthier school without a healthier community, and we cannot have healthier communities without affordable access to health care. The Kansans who need this help are not lazy low-lives hoping to feed off of a system. They are working Kansans with families who desperately need our help. I urge you to move forward with this bill. It is the moral, ethical, and economically right thing to do.

Sincerely,  
Sydney Williams  
Teacher, Wyandotte County

TO: Chairperson Landwehr, House Committee on Health and Human Services  
FROM: Jennifer Wilson, Navigator and concerned Kansan  
DATE: February 13, 2024  
RE: Kancare Expansion

I have read many testimonies from companies and organizations that have provided statistics and research on the economic and health reasons to expand Kancare. I've also seen individuals give their personal testimonies as to why they need Kancare expansion. I'm not sure why that has not been enough, but I'd like to get to the heart of the matter and explain my experience.

For the past 3 years in my role as a Navigator, I have spoken to people from all over Kansas who are uninsured and need assistance finding affordable coverage and medical care. Sometimes I can assist with a plan through the Marketplace, but most of the time I can only provide resources and a shoulder to cry on. These Kansans fall into the Medicaid Gap. I'd like to provide some examples of people who have sought my help:

Liz, a 26-year-old losing her parent's employer-sponsored coverage, has mental health struggles that won't allow her to work more than a few hours a week. What are her options?

John and Susan, early retirees who have a few years before Medicare kicks in at age 65. They cannot afford to keep their employers' coverage at the full rate. What are their options?

Megan, who earns \$15/hr working part-time but her employer, like most, does not offer health insurance to part-time workers. What are her options?

Mike, who is self-employed and who has so many business-related expenses that his actual annual income is below 100% FPL. What are his options?

Josh, a physically disabled adult who cannot work but doesn't quite qualify for Kansas disability. What are his options?

Terri, in the service industry, works many hours to make ends meet but health insurance is not offered by her employer. What are her options?

Hannah and Kelsey, college students who are required by their learning institution to have health insurance but who cannot afford the plan offered. Their parents do not have health insurance. What are their options?

All of these are hard-working Kansans or people who suffer from illnesses that prohibit them from being the right candidates for jobs. What can they choose?

1. The Federal Marketplace? No, because they do not make 100% of the FPL so plans are unaffordable.
2. Private pay plans? No, because they are unaffordable.
3. Medicaid? No, because they do not meet the eligibility requirements.
4. FQHC's? Possibly, but there are still fees and prescription expenses and not all services are provided.
5. Hospitals? Possibly, but why are we causing Kansans to put off care until they have an emergency and have no choice but to go to the ED? For people to have optimal health, they must receive routine, preventative care.

Let's give the people of Kansas the health and dignity they deserve by passing Kancare expansion.

It is time to take Medicaid expansion to the floors of the Kansas House and the Senate and vote to expand it for thousands of Kansans.

Why is this issue so important to me? I have a 34-year-old nephew who is neuro-divergent. He is taking the steps he needs to move forward with his life. He is attending college to get a degree in biomedical engineering. He has a job where he is scheduled for maybe 10 hours a week at t \$10.00 an hour.

Recently, has been diagnosed with a significant heart issue. He has no medical insurance as he cannot afford private pay or a policy from the Marketplace. Last year he had to have a surgical procedure to correct his heart issue. A \$60,000 surgery. He is now one of the 40% of Kansans who has medical debt.

Because he cannot afford to live on own, he still lives with his parents. He tried to get health insurance through KanCare, but with the combined household income he doesn't qualify.

Kansas has thousands of citizens whose stories are like my nephew's, and I find it incomprehensible that powerful legislators, lobbyists, and outside organizations are allowed to block any conversation on Medicaid.

Each of you were elected to represent the citizens of your district as well as Kansas. Each of you know that Kansans overwhelmingly support expanding Medicaid. Now is the time to move Medicaid expansion to the floor of both houses and count the votes.

Sincerely,  
Julie Wilson  
Meriden, KS

March 14, 2024

Dear Representatives,

I believe one can measure the strength of a society by looking at the well being of those needing help the most. We are a prosperous State and must find a way to help those in need. I am convinced this investment will give young children born to poverty the fair shot that most of us in more favorable circumstances enjoy.

We can do better!

Thank you for your consideration,

Dave Wiseman  
9004 E Windwood St  
Wichita, Ks

## MEDICAID EXPANSION HEARINGS TESTIMONY

Supporting Medicaid expansion for the State of Kansas has many benefits. It would especially benefit rural community hospitals; two rural community hospitals (of several) closed as a result of not allowing Medicaid to expand – the Alma and Lyndon Cotton-O’Neil Clinics. The immediate consequence is that of depriving the people residing in Alma and Lyndon access to local health care. The long-term consequence is that the people residing in Alma and Lyndon will need to use emergency rooms rather than local clinics. They will likely wait until their symptoms and illnesses are more advanced and use emergency rooms or need to be hospitalized.

Also, Medicaid expansion would benefit the KanCare program.

It would benefit the citizens of Kansas, some whom desperately need health care and can't get it. We have learned that Kansans without health insurance are less likely to seek testing and treatment, thereby putting themselves and other Kansans at risk.

The citizens of Kansas want this Medicaid expansion. This effort has repeatedly been blocked, at all levels, by the Republican leadership in the Legislature.

I have to ask – what are you afraid of? Let the people of Kansas speak!

Rhonda Wisman



March 14, 2024

Kansas Legislators,

Would you please vote for Medicaid Expansion.

If you had a loved one that had a handicap that prevented them from being able to work a job that provided health insurance, you might understand why Medicaid Expansion is a smart idea.

Our daughter has dealt with a couple of mental illnesses since she was hit by them during college. She has worked at 25 to 30 different jobs over the 16 years. When she is in the upswing of Bipolar, she is able to get a job because she is bright and a hard worker. But when the depression hits her and she can't get out of bed for a few days, she loses her job. She has worked hard to try to beat the mental illness by going to therapy, and taking the meds her psychiatrist prescribes. She wants to be well and be able to earn enough to be able to provide a living for herself. Only 1 of the jobs she has worked offered her medical insurance, and that was a janitor job at KU. But when her depression knocked her out of that job, she and we, her parents, just wanted to cry.

Please show some compassion and extend a helping hand to many people who could use a little help with health insurance.

Thank you.

Bill & Robin Wood  
2612 W 27th Terr.  
Lawrence KS 66047

Dear Chair and committee members,

I appreciate you holding a hearing on this important issue and for providing an opportunity for Kansans to express their support for Medicaid Expansion. For too many years hundreds of thousands of Kansans have fallen into an insurance coverage gap.

Our leaders in Topeka have been on the precipice of doing the right thing by expanding Medicaid on multiple occasions, but have fallen short for reasons that have frustrated Kansans. This is your opportunity to finally get Medicaid Expansion across the finish line. Forty other states have experienced the benefits of expanding Medicaid, including:

- Significant drop in the uninsured rate
- Stabilization of health care costs for everyone as uncompensated care declines
- Increased access to mental health services
- Reduction in medical debt leading to financial stability for Kansas families
- Healthier and more abundant workforce
- Strong healthcare system is an asset for businesses looking to relocate
- Creation of new jobs
- Enhanced financial stability for rural hospitals

**And quite simply, Medicaid Expansion will save lives.**

In addition to the positives listed above, the bill in front of your committee is revenue neutral and Kansas would receive a \$450 million bonus from the American Rescue Plan Act.

You have the power to do the right thing for Kansans.

For lack of a better term, Medicaid Expansion is really a “no brainer.”

Please pass this bill out of committee and encourage leadership to let the full chamber vote on expanding Medicaid.

Thank you,

Erin Woods  
Leawood, KS

March 15, 2024

Please vote to expand Medicaid.

Thank you,

Kim Wright  
Leawood, KS 66206  
913-626-5220

March 15, 2024

Dear Kansas Legislators,

Please expand Medicaid in Kansas. The majority of your constituents want it- it is time to pass Medicaid expansion.

Yours truly,

Melissa Wurtz  
A Registered and Active Kansas Voter  
26035 W. 77th St  
Shawnee, KS 66227