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



National Multiple Sclerosis Society

March 20th, 2024

Representative Landwehr, Chair House Health & Human Services Committee Re: HB 2556 Amend

Chair Landwehr and Committee Members:

I am writing today on behalf of the National Multiple Sclerosis Society (the Society) to share our concerns about HB 2556 and how it affects those who live with multiple sclerosis (MS) and caregivers. We respectfully ask the House Health & Human Services Committee to remove work requirements in HB 2556 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 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



National Multiple Sclerosis Society

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 HB 2556.

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.

Sincerely,

Jusht Juntu

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.

Neosho Memorial Regional Medical Center

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. <u>This would result</u> in Kansas seeing up to an additional \$450 million in new dollars during the first two years.

- Medicaid Expansion <u>won't cost Kansans taxpayers a single cent</u>. 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



NMC Health Administration 600 Medical Center Drive PO Box 308 Newton, KS 67114-0308 316.283.2700 myNMCHealth.org

TO: Senate Public Health and Welfare Committee

FROM: Vallerie L. Gleason, President and CEO

DATE: March 12, 2024

RE: House Bill 2556 – Support

On behalf of Newton Medical Center, I am pleased to provide a letter of support for House Bill 2556, 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 (HB 2556). Thank you for your consideration of my comments.

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

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 cate.

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 lifethreatening. 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

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



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.

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.

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



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PO Box 4567 Topeka, KS 66604

785-235-6039 (phone) info@oralhealthkansas.org www.oralhealthkansas.org

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.¹

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

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



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

1200 MAIN ST., 40TH FLOOR KANSAS CITY, MO 64105

ORIZONAERO.COM

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 112th 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 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

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



To: Representative Brenda Landwehr and Members of the House Committee on Health and Human Services From: Kevin Walker, Executive Vice President and Chief Policy Officer

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 HB 2556.

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 HB 2556. Thank you for your consideration.

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; <u>59 of the remaining 102 rural hospitals across Kansas are in danger of closing</u>. 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



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

TO: House Health and Human Services

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 HB 2556

On behalf of Patterson Health Center, we appreciate the opportunity to provide testimony in support of House Bill 2556.

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 HB 2556.

Sincerely,

Death

Sarah Teaff, PhD, FACHE

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

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:

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,

Blake Benson President, Pittsburg Area Chamber of Commerce

To Whom it may Concern:

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

*MAINSTREAM

Wednesday, March 20, 2024

Michael Poppa Executive Director contact@mainstream.vote

House Committee on Health and Human Services Representative Brenda Landwehr, Chair

Proponent Testimony, Written-only HB2556 – Expanding medical assistance eligibility and enacting the cutting healthcare costs for all Kansans act.

Chair Landwehr and Committeemembers,

Thank you for the opportunity to submit testimony in support of HB2556. Fortunately, I am able to coordinate hand-delivery of the required five (5) hardcopies of this testimony. However, that is not the case with every Kansans wishing to participate in the democratic process. Those voices, unfortunately, will go unheard. Respectfully, I urge you to update the conferee guidelines and remove the unnecessary mandate for hardcopies. As elected officials, it is expected that you would champion the highest level of public participation.

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.

HB2556 expands Medicaid, lowers health care costs, and gives 150,000 Kansans access to affordable health care.

*MAINSTREAM

- 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.

HB2556 is a carefully crafted bipartisan compromise that has found support from both sides of the issues.

- <u>Work requirements</u> 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.
- <u>Fiscally responsible</u> This will be revenue-neutral there will be no additional cost for Kansas taxpayers. We can definitely afford it.
- <u>Comprehensive support for rural healthcare</u> 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.
- <u>Improves public safety</u> 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 HB2556.

Date: March 15, 2024 Name of Conferee: Jessica Porter, Private Citizen Bill Number: HB 2556 Testimony format: Written Only Disposition: Proponent Contact Info: <u>Jporter4410@gmail.com</u>

Chair Brenda Landwher and Members of the Committee, thank you for giving me time to share my thoughts on the HB 2556.

I urge you support HB 2556 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 HB 2556.

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

20TH DISTRICT

March 15th, 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!

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 andunder 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

Department of Commerce 1000 S.W. Jackson St., Suite 100 Topeka, KS 66612-1354

David C. Toland, Secretary



Phone: (785) 296-3481 Fax: (785) 296-5055 KansasCommerce.gov

Laura Kelly, Governor

HB 2556 Testimony - Proponent Trisha Purdon, Director of the Office of Rural Prosperity at the Kansas Department of Commerce Health and Human Services March 20, 1:00 P.M. Room 112 N

The Office of Rural Prosperity supports HB 2556 and requests that the House Committee on Health and Human Services pass the bill favorably.

The Office of Rural Prosperity is located in Independence, which is one of the first communities to lose their rural hospital since the Federal Medicaid changes took effect in 2010. Working in economic development in Montgomery County at the time, I saw the trauma and resulting economic losses that this closure caused all of Montgomery County, and after 9 years, the community is only recently started to recover. Since this time, we have seen so many of our rural communities struggle to maintain their rural hospitals, with 7 communities also experiencing a hospital closure, and 56 additional communities currently on the verge of closure across our state.

With well over half of Kansas counties experiencing healthcare shortages, there is no question that something must be done to guarantee that rural Kansans have access to healthcare. Expanding Medicaid will go a long way to supporting these rural health systems, ensuring that all Kansans can be part of a healthy workforce that helps all rural communities prosper. In addition, the following reasons are why the Office of Rural Prosperity supports Medicaid expansion:

• There is a significant healthcare workforce shortage, especially related to the competitiveness of our rural hospitals with neighboring border communities - Medicaid expansion would create nearly 23,000 jobs and help end our healthcare worker shortage.

• Our small local businesses struggle to fill jobs, as they cannot afford to offer employees health insurance. With Medicaid expansion, they will be better able to retain and recruit employees – like rural grocery store clerks, childcare providers, wait staff, and cashiers at the local diner. All of these employees are currently falling in the Medicaid coverage gap, and with expansion, these business owners could save almost \$80 Million in healthcare costs and employee turnover.

• Rural counties are now often assisting their rural hospitals with financial support, resulting in rising taxes on all taxpayers, who already bear the burden of disproportionate property taxes due to the declining populations. Losing their healthcare would only increase these population and business losses, making counties further struggle with high taxes.

In summary, rural communities critically need this expansion. All Kansans deserve access to healthcare no matter where they live, and without this expansion, we are limiting the opportunities for our rural communities in our state. The Office of Rural Prosperity requests that this committee consider the future of rural communities in our state as you consider this bill, and we request that you pass this favorably.

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, thia 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



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 <u>brenda@reachhealth.org</u> 913-432-4196

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: <u>clairereagankc@gmail.com</u> 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

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 <u>states that have expanded Medicaid</u>, 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 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, <u>we are already paying for people with lower income to receive health care</u>. 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