



**Therapy Services LLC**  
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**[www.therapyservicesonline.com](http://www.therapyservicesonline.com)**



KanCare Expansion Testimony  
3/20/2024

My name is Gayle Taylor-Ford. I am the owner of Therapy Services LLC and an activist with the National Multiple Sclerosis Society. At Therapy Services LLC we provide outpatient and intensive outpatient substance use disorder treatment in Burlington, KS and in Emporia, KS. We also provide Home and Community Based Services for the Brain Injury Waiver to include behavior therapy and cognitive therapy, and we provide non-emergency medical transportation. I am a board member for the International Pain Foundation, Empower House Ministries, and I am on the Government Relations Advisory Committee for the National Multiple Sclerosis Society.

I stand before you today to share how Medicaid Expansion would affect some of the clients that I serve. At Therapy Services LLC we accept payers such as Medicaid and for those with no insurance and below 200% of the federal poverty guidelines, we can provide free treatment with State Block Grant Funding. Medicaid expansion would help to reduce the need for block grant funding.

When it comes to substance use disorder treatment, people use substances for many different reasons. For example, there are people that have resorted to purchasing marijuana to treat their chronic pain, only to get arrested for possession of illegal substances. Why didn't they just go to the doctor for a pain prescription? They did not have insurance and it was much less expensive to purchase marijuana than it was to pay for an office visit with a physician and a prescription. Medicaid expansion would mean fewer people having to rely on back-door methods to not cure, but just get by with painful chronic medical issues.

Another example is the addicted person who comes for treatment and as they have sobered up, they find that they have medical issues, such as Hepatitis C. The medical issues could easily be treated but they cannot afford to go to see a physician. As time goes on, these medical issues worsen, becoming difficult to deal with and treat. I have had clients with injured knees or shoulders in need of surgery but, since they lack insurance, that is something out of reach for them. Many have jobs but cannot afford to pay for insurance. I am talking about the working poor that do not make enough money to qualify for the affordable care act subsidy policies. People that are trying to be better in their lives and contribute to society but cannot because lack of health insurance means their medical conditions just get worse due to lack of access to treatment. These are

*Other location: Therapy Services LLC 420 Kennedy Street, Burlington, Kansas 66839*



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the people that Medicaid Expansion in Kansas will help.

Medicaid expansion would not only help my clinic stay open – it would mean a more holistic wellness plan can be implemented by many more people.

In all, Medicaid expansion would help people get actual treatment rather than relying on whatever way they can to manage their health. It would help those Kansans who are working and getting their lives on track but are not there yet. Expanding Medicaid in Kansas is NOT a handout. It is a “hand-up.” Meaning that it would enable more Kansans to be healthy enough to be able to be a more productive member of our workforce society. Additionally, it would help the healthcare providers and social workers like me, who just want to support our community and help our patients. Please expand Medicaid in Kansas. Thank you.

Gayle M Taylor-Ford, LSCSW, LCAC, CCTP  
Executive Director/Owner, Therapy Services LLC  
Board Member/Secretary, International Pain Foundation  
KS GRAC Committee Member, National MS Society  
Board Member/ Empower House Ministries  
620-208-6480, cell 785-221-7560

*Other location: Therapy Services LLC 420 Kennedy Street, Burlington, Kansas 66839*

March 14, 2024

To Whom it may concern:

I am writing to urge you to support the expansion of Medicaid in Kansas. The importance of this expansion cannot be overstated. I grew up in a family without health insurance. My father was self-employed, and we just couldn't afford it. Had we had access to health care, I probably would not have lost my mother to cancer when I was a teenager. For much of my adult life, I did not work in jobs that provided access to health insurance. It was only after I went back to school that I was able to secure better employment that provided this benefit. Many of the chronic conditions I deal with would not be so severe now if I could have dealt with them when I was younger. No one should have to live this way.

Expanding Medicaid will provide accessibility to affordable healthcare, will not cost Kansas taxpayers any money, and will provide support for rural hospitals that desperately need it. Expanding Medicaid will also create nearly 23,000 jobs and help end our health care worker shortage. Kansas business owners could save up to \$80 million per year in health care costs if Medicaid were expanded. This expansion will cut healthcare costs for all Kansans. There is simply no reason not to do it.

Thank you for considering my perspective on this critical matter.

Sincerely,

Lillian C. Taylor  
Lawrence, KS

March 4, 2024

Dear Decision Maker,

Please make decisions based on what is the best for Kansans of all ages, interests, cultures, and abilities.

Please join 41 other states expanding Medicaid: Status of State Medicaid Expansion Decisions: Interactive Map

[https://www.kff.org/affordable-care-act/issue-brief/status-of-state-medicaid-expansion-decisions-interactive-map/#:~:text=Coverage%20under%20the%20Medicaid%20expansion,%2C%20Virginia%20\(1%2F1%2F](https://www.kff.org/affordable-care-act/issue-brief/status-of-state-medicaid-expansion-decisions-interactive-map/#:~:text=Coverage%20under%20the%20Medicaid%20expansion,%2C%20Virginia%20(1%2F1%2F)

If you have not seen these reports, please review and act in the best interest of our future leaders. Healthy students will be more successful learners and become lifelong contributors to society.

"Expanding Medicaid in Kansas would strengthen families like mine"

<https://kansasreflector.com/2023/10/11/expanding-medicaid-in-kansas-would-strengthen-families-like-mine/>

On behalf of Kansas children and families of various financial situations, interests, abilities, and backgrounds, please expand Medicaid.

Former Senator Bob Dole reached across the aisle collaborating with others to move Kansas forward. If we desire "Unity in the Community," please encourage Medicaid expansion.

"Steve Morris on the need for moderate voices in the Kansas Legislature"

<https://kansasreflector.com/podcasts/steve-morris-on-the-need-for-moderate-voices-in-the-kansas-legislature/?emci=e341ebb8-bd68-ee11-9937-00224832eb73&emdi=8742d2c3-dd68-ee11-9937-00224832eb73&ceid=120554>

Respectfully,

Carmaine Ternes

Librarian, Author, Editor, Presenter

"A child who reads will be an adult who thinks!"

February 10, 2024

Dear Members of the House Committee on Health and Human Services

As a retired Pastor and a resident of Shawnee County, Kansas, I want to appeal to you to support HB 2556 which provides for the expansion of Medicaid. I am a person of faith and a follower of Jesus Christ and I strongly suspect that many of you are as well. There are 23 accounts of Jesus healing people in the Gospels, not including the accounts of him delivering people from demon possession. Obviously, people's physical and mental health were of great importance to Jesus and as followers of Jesus, it should be very important to us to do all in our power to enable all, including the people who cannot afford health insurance or health care to have access to both. To me, this is a no-brainer. As a person privileged to have good quality health care as I am sure that you are as well, how can we pass up an opportunity to extend the same benefits to some who may not be as affluent as we are. There is strong evidence that Medicaid expansion would help reduce poverty, help keep health care available in rural areas of Kansas and be a blessing to countless people who now have to either try and get by without seeking health care which increases their risk of developing more serious illnesses, or be burdened with health care debt. Please support Governor Kelly in her efforts to expand Medicaid.

Sincerely and Prayerfully

Rev. Gary W. Teske  
4220 SE Iowa ave.  
Topeka, KS. 66609



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

January 25, 2024

To: Kansas Legislators regarding expansion of Medicaid

From: The 802 United nonprofit educational/ advocacy organization

Re: In support of expanding KanCare

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

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

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

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

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

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

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

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

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

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

From KCUR (public radio) in December, 2022:

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

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

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

KFF article by Guth and Ammula:

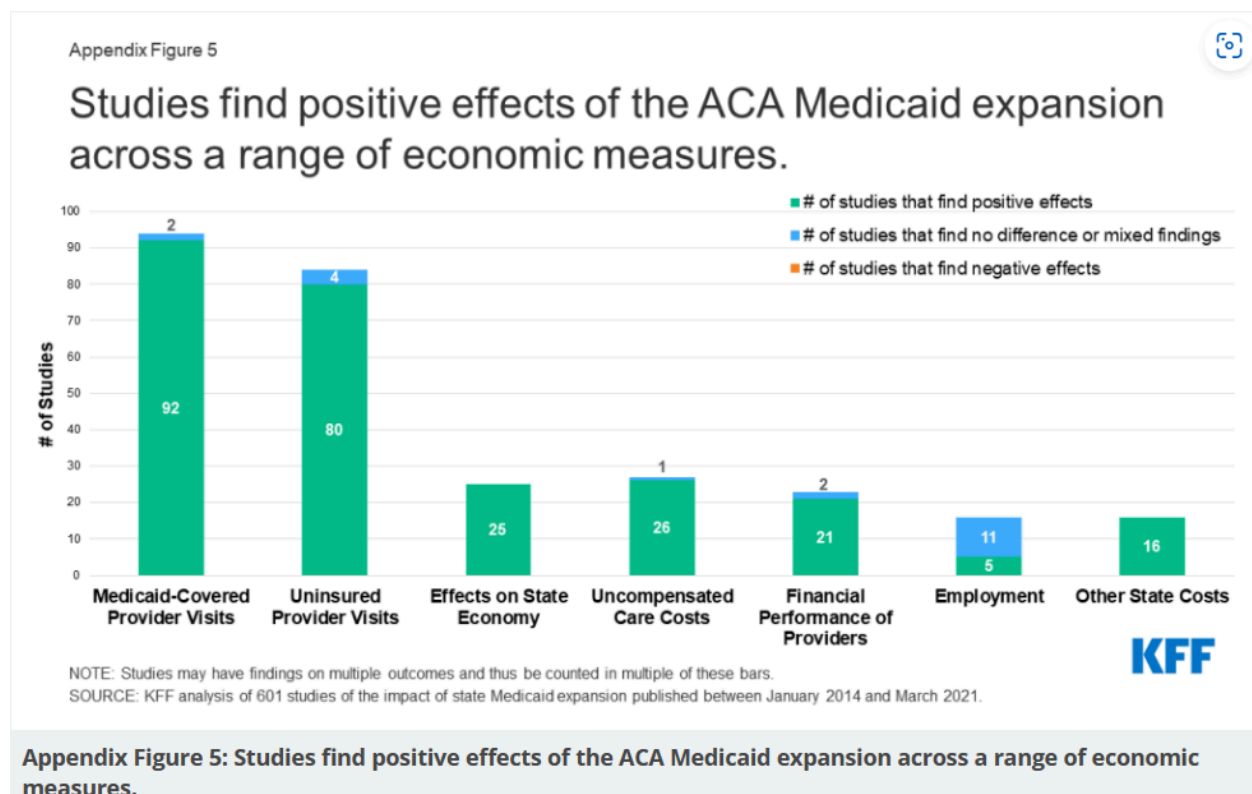
[Building on the Evidence Base: Studies on the Effects of Medicaid Expansion, February 2020 to March 2021 – Report – 9709 | KFF](#)

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

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

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

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





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

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

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

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

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

Rural Kansas hospitals which closed between 2010 and 2023

#### **Kansas**

Central Kansas Medical Center (Great Bend)

Horton Community Hospital

Mercy Hospital Fort Scott

Mercy Hospital Independence

Oswego Community Hospital

Herington Hospital

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

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

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

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

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

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

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

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

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

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

Thank you for your time,

Elizabeth Wickstrom, MD FACOG

Board member of The 802 United

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

March 13, 2024

Hello,

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

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

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

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

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

March 15, 2024

I am writing to support Medicaid expansion.

Our 31 year old daughter has autism and most recently was diagnosed with Cerebral Palsy. She is disabled according to Social Security, however, she receives no cash payments because she works. She has insurance with an out-of-pocket maximum of \$6000 per year.

Over the past 6 years, she has had five major surgeries and she has reached her out of pocket maximum of \$6000 almost each year.

She earned \$14,695 dollars in 2023 because she was not able to work due to her long recovery.

Let me do the math. \$14,695 per year before taxes - less \$6000 in out of pocket medical expenses is \$8695. Divide that by 52 weeks a year. She has \$167 a week to pay for the basics of transportation, groceries, utilities and rent. How can anyone live a decent life on \$334 dollars each month?

The reason she is not living on the streets is because she has two living parents with an extra bedroom.

My husband, who is in his seventies, had cancer and a quadruple heart bypass last year. I am 69. We will not live forever.

Autism and Cerebral Palsy are not curable. She will never be able to find a job where she can earn enough money to leave poverty.

She isn't lazy. She is disabled with little to no resources.

There is no public transportation to her job. There is no assistance for housing, even if it existed. She doesn't qualify for SNAP.

Our family is NOT asking for a handout. We need relief from medical bills so maybe, just maybe, some of that \$6000 out-of-pocket medical expenses could be saved for a downpayment on a place for her to live after we are gone.

Respectfully,  
Randi Thimesch  
242 N Woodchuck St  
Wichita, Ks.  
316.371.4320

March 15, 2024

There are several excellent reasons to expand Medicaid in Kansas: it will help people struggling with medical bills, it will help people who have to choose groceries over medical treatment, and it will bring federal dollars into the state.

Thank you for listening!

Marian Thomas

March 13, 2024

I have been serving the poor in Garden City and Finney County for 27 years. There are so very many stories I could tell that are heart breaking.

One group of stories would be of those who make \$100 a month too much to qualify for Medicaid. When they or their children get sick, they go through the agony of "Can we ever be able to pay for this service and still put food on the table and pay the rent?" I know two children whose dad put off going to ER because he had not finished paying the last health bill. He died in ER and hour after he finally went because he had waited too long.

Another group are our elderly who have a little too much resources even though they have worked all their adult life. They either do not go to the doctor on time or they live in anxiety over how to pay this bill and whether they will need to go to the doctor again. Some even skimp on their medications and so risk their health.

Then there are the small rural health providers and hospitals who are left with so many unpaid bills that they either have closed or are at great risk for doing so. PLEASE look up a map of the hospitals in the state of Kansas and note that some counties no longer have a hospital and the citizens who voted for you are having to travel further all the time even for a doctor's appointment.

PLEASE FOR THE HEALTH AND WELLBEING OF ALL OF US YOU REPRESENT,  
EXPAND MEDICAID!

Sincerely,  
Sister Janice Thome

March 17, 2024

Dear Chairman and Committee Members,

I'm writing to implore you to vote in favor of expanding Medicaid eligibility as envisioned in the Affordable Care Act. 40 states have already done this. Their people are better off for it.

Expansion of the KanCare eligibility guidelines would allow approximately 150,000 Kansans to finally be able to have the peace of mind that comes with having a way to pay for unforeseen medical expenses. As it now stands, they fall into the so-called "coverage gap", meaning they make too little money to get subsidized coverage under the ACA, but too much to qualify for Medicaid.

The main reason cited by opponents of this expansion is the concern that it would be a burden on the state's finances. This bill, however, is revenue neutral. It is not revenue neutral for our critical access hospitals, especially in rural areas. Many of these hospitals are at risk of closing, in part due to the burden of caring for patients who lack the resources to pay for the care they desperately need. Providing these patients with Medicaid would give them a way to pay for that care. Covering those expenses with federal dollars that Kansas is currently leaving on the table would have the added benefit of reducing the cost shifting that makes health care more expensive for those of us who do have health insurance.

It is high time for Kansas to capitalize on the federal resources that are available to us. Please vote to expand Medicaid.

Thank you,

Bryan Thompson  
Salina, KS 67401  
71st House District  
24th Senate District

March 17, 2024

Thank you! I'm so happy that you are considering expanding Medicaid! I am the mother of a child who benefited from Medicaid. He was severely disabled and the medical bills would have ruined us both financially and emotionally. Medical bills can ruin even our wealthier families who have their own insurance. Families who are struggling often cannot even afford the price of an office visit. I know how this is, too, as our other kids were not on the Medicaid program. We had insurance, but a bout of ear infections could destroy our budget.

In a just society, everyone would have access to good health care. Medicaid expansion would help accomplish this. And it would make insurance premiums lower for everyone. Marketplace premiums are 7% lower in states that expanded Medicaid compared to non-expansion states like Kansas. **Here are some other bullet points:**

- **About \$700 million in annual federal funding would flow into the state.**
- **Federal law provides a signing bonus for states that haven't implemented expansion.** This would result in Kansas seeing up to an additional \$450 million in new dollars during the first two years.
- **Medicaid Expansion won't cost Kansans taxpayers a single cent.** The bills being heard next week, HB 2556 and SB 355, are revenue neutral.
- **Addresses the mental health crisis** with improved access to care and medication.
- **Preserves and strengthens rural healthcare.** Rural hospitals face high levels of uncompensated care; 59 of the remaining 102 rural hospitals in Kansas are in danger of closing.
- **Makes Kansas more economically competitive.** Expanding KanCare will not only improve the health of Kansans, but it will also help our state compete with our neighboring states, who have all expanded eligibility for their Medicaid programs.

Please vote for Medicaid Expansion!  
Thank You,

Cynthia Thompson  
Salina



March 13, 2024

Please expand medicaid into Kansas. We've already lost several hospitals because of clinging to some invisible and indefensible principle or simple stubbornness to accept a program supported by Obama. We need the money, especially for our uncared for poor. Compassion should be our principle, not political conformity.

Clarence Thomson  
Overland Park KS 66213

March 13, 2024

Please expand Medicaid for Kansas. It is insane the our state has not done this. We are throwing away hundreds of thousands of federal dollars. All citizens need access to affordable health care. We have much more to gain than we lose!

Thank you,  
Pat Thomson

# THRIVE ALLEN COUNTY

February 9, 2024

Re: Testimony to support KanCare Expansion

From: Lisse Regehr, CEO, Thrive Allen County

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

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

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

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

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

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

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

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

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

Sincerely,

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



February 9, 2024

Re: Testimony to support KanCare Expansion

From: Lisse Regehr, CEO, Thrive Kansas

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

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

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

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

Sincerely,

Lisse Regehr  
President and CEO  
**Thrive Kansas**

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



March 15, 2024

I am writing to voice my support for the expansion of Medicaid in the State of Kansas. For far too long, hardworking Kansans have fallen into the coverage gap of making too little to afford health insurance, too much to qualify for assistance on the Marketplace and too much to qualify for Medicaid. By expanding Medicaid, our state has the opportunity to provide affordable health insurance to Kansans who need it.

The unnecessary burden of medical debt could be reduced by people being able to have health insurance coverage. This will lessen the likelihood of people seeking emergency care that is often uncompensated to hospitals and takes away money families need for housing, food and other necessities.

As a practicing health care provider, I have seen patients who neglect basic health care services because they don't have insurance or the means to pay. Expanding Medicaid will improve the health of Kansans by increasing access to preventative services and encouraging people to seek care in private offices and clinics instead of waiting until it's an emergency and accessing the healthcare system in an urgent way. This scenario often leaves providers and hospitals with uncompensated care, which is not good for business.

Lisa Thurlow, DDS

Overland Park, KS

March 13, 2024

First and foremost, my thanks to the Kansas House and Senate for your scheduled upcoming hearings on Medicaid expansion.

I'm retired and appreciate the health insurance provided by Medicare so Medicaid expansion won't impact me personally. But I believe it will have significant impact on thousands of my fellow Kansans and our state as a whole.

Being one of only a handful of states which have not taken this step reflects poorly on Kansas. It not only implies a series of economically bad decisions, it also implies a lack of empathy for our citizens who need the help it offers.

In your hearings and as you hopefully are given the chance to vote, please consider your fellow Kansans and vote to expand Medicaid.

Thank you,  
Marsha Ticehurst Oliver (R)  
17 SW Pepper Tree Ln  
Topeka, KS 66611



March 14, 2024

It is obvious that there is overwhelming support for expanding Medicaid in Kansas. Why have the majority of states already done this? That's what their constituents' want. I'm convinced the Kansas legislators don't care to represent their constituents'.

We think it is way past time to get this done. Expanding Medicaid would help a tremendous amount of Kansans. Isn't that who the government represents? IT SHOULD Be.

Leann and Jerry Toews  
Goessel, KS



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# Topeka Independent Living Resource Center

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

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

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

March 2024

Topeka Independent Living Resource Center

Topeka, KS 66603

785.233.4572

Ami Hyten, Executive Director

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

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

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

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

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

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

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

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

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

**March 13, 2024**

**Testimony to Support Expansion of KanCare**

My name is Jim Torres. As the Manager of Health Insurance Services at a federally qualified health center with multiple clinics in the Kansas City area, I am dedicated to assisting individuals in accessing vital health insurance coverage. Our team serves both Kansas and Missouri residents, affording me a unique perspective on the significant impact of Medicaid expansion.

The difference between the two states is striking. Since Missouri expanded Medicaid, the number of uninsured residents has seen a remarkable decrease. The majority of individuals seeking assistance in securing coverage are Kansans. It is disheartening to witness hardworking individuals, striving to provide for their families, unable to qualify for KanCare.

Many of these individuals are hesitant to seek necessary medical care out of fear of burdening their loved ones with medical debt. One poignant example stands out: a patient came to our clinic to work with me to apply for Medicaid. As we were talking, he disclosed that he had been told that he was at very high risk of having a heart attack or stroke and should go to the emergency room. Aware of his heightened risk for a cardiac event, he delayed seeking emergency care to avoid potential financial strain on his family. Despite my urging, he insisted on completing the Medicaid application first. We did, and I advised him that it was likely he would qualify. He then went to the ER, and he was having a cardiac event.

This man risked his health and his life with his family's future in mind. Because he was a Missouri resident, he qualified for expanded Medicaid coverage.

This story underscores the critical need for Medicaid expansion in Kansas. Countless Kansans face similar difficult decisions, balancing their health needs with financial concerns. Ensuring access to affordable healthcare not only preserves individual well-being but also bolsters economic stability by keeping people healthy and productive.

I know that there are plenty of Kansans making the same type of decision. There's a huge economic benefit in keeping people healthy and working, and keeping families whole.

**No matter what side of the state border my neighbors live on, I want them to have the chance to stay healthy, keep working, and take care of their families. Please expand KanCare.**

Jim Torres, Manager  
Health Insurance Services

March 15, 2024

**Dear Chairman and Committee Members,**

**Thank you for the work you do for the health and well being of Kansans. I encourage you to support the Medicaid Expansion. Every Kansan will ultimately be winners with this action.**

**150,000 low income Kansans would gain access to medical care.**

**Healthcare costs for everyone would be reduced.**

***About \$700 million in annual federal funding would flow into the state.***

**Preserves and strengthens rural healthcare.** Rural hospitals face high levels of uncompensated care; 59 of the remaining 102 rural hospitals across Kansas could close.

My husband and I recently traveled through Western Kansas for a short getaway. When we returned, I mentioned to him that I did not see one hospital. I appreciate the value of Western Kansans and want them to have better access to medical services.

Availability of medical care is essential to improving a standard of living.

Please support the Medicaid Expansion on behalf of all Kansans.

Thank you for considering my request.

Sincerely,

Deborah Turner, retired KS teacher

Lenexa

March 16, 2024

Hello,

In 2022 and 2023, I helped my disabled elderly family member try to obtain medical and mental health services. He was living in a broken down RV on under \$13,000 a year. His income was too high, according to the State, and he was approved for Kancare with a \$7500 annual deductible/spend down. How is that even humane? He needed thousands of dollars in medical, dental, and mental health services, but would never be able to pay the exorbitant deductible. The waiting list for "medically needy" services was 3 yrs. I know he is one of thousands of Kansans who paid taxes from a good paying job all his life and then a mental and physical disability took that away. Kansas turned his back on him. Please expand Medicaid now!

Stacie Turner  
Wichita, KS



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

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

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

March 15, 2024

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

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

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

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

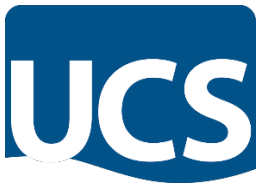
From my math, under KanCare as it currently operates, a single mother of one has to earn less than \$625 to qualify. Can you imagine trying to make ends meet on \$700 a month and then also paying for a mammogram? Or a broken bone? Let alone considering a college degree! Medicaid Expansion would allow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

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

Thank you for considering this essential and pressing issue.

Sincerely,

Pastor Isabel Call



# United Community Services of Johnson County

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

### Board Members

Robin Rollins Harrold,  
President

Dr. Putul Allen, MD

Hon. Jenifer Ashford

Rev. Cheryl Jefferson Bell

David Brown

Joe Connor

Erik Erazo

Thomas Herzog

Stephen Kyle

Patty Markley

Dr. L. Michael McCloud, PhD

Hon. Eric Mikkelsen

Rogeana Patterson-King

Jeff Short

Nolan Sunderman

Hon. Donald Roberts

Vicki Webster

Vanessa Vaughn West

Dave White

### Council of Advisors

Mary Birch

Dr. Andy Bowne

Pat Colloton

Dr. Stuart Day

Hon. Peggy Dunn

Jeff Ellis

SuEllen Fried

Ellen Hanson

Terrie Huntington

Audrey Langworthy

Hon. Mike Kelly

Penny Postoak Ferguson

Jill Quigley

Tom Robinett

Clint Robinson

Carol Sader

Brad Stratton

Charlie Sunderland

Hon. Stephen Tatum

David Warm

### Executive Director

Kristy Baughman

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

Date: February 9, 2024

Kristy Baughman, Executive Director

United Community Services of Johnson County, Inc.

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

Overland Park, KS 66210

Dear Senators:

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

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

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

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

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





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

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

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

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

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

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

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

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

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

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

**Strengthens and Protects Rural Hospitals**

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

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

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

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

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

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

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

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

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

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

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

Again, we cannot afford not to expand Medicaid.

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



United Way of Kaw Valley

TOPEKA OFFICE

1527 SW FAIRLAWN

TOPEKA, KS 66604

LAWRENCE OFFICE

1127 IOWA

LAWRENCE, KS 66044

785.273.4408

UWKAWVALLEY.ORG

February 19, 2024

Jessica Lehnherr

President & CEO, United Way of Kaw Valley

Proponent Written-Only Testimony

Dear Chair and Committee Members:

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

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

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

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

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



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UWKAWVALLEY.ORG

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

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

Sincerely,

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

Jessica Lehnherr  
President & CEO, United Way of Kaw Valley

Kenny Wilk  
Vice President, Government & Community Affairs

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

Senate and House Committee Members:

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

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

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

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

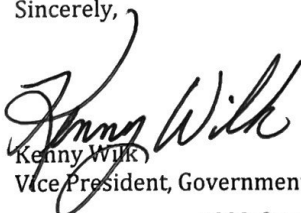
**Economic Benefits:** The expansion of Medicaid would also bring substantial economic benefits to the state. By drawing down federal funds to cover a significant portion of the expansion population, Kansas can inject much-needed resources into the healthcare sector, supporting jobs, and fostering economic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

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

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

Thank you for your time and consideration.

Sincerely,



Kenny Wilk  
Vice President, Governmental and Community Affairs

## Testimony in support of Medicaid Expansion in Kansas

3-15-2024

I have worked as an anesthesiologist at a large hospital in Kansas for 39 years. During that time I have seen hundreds of patients whose health and economic well-being were seriously compromised, even endangered, because they did not have access to Medicaid coverage. Let me give you a current example:

One of our ENT physicians told me about a patient with a large thyroid goiter in her neck that had obstructed some of her breathing. If this patient had qualified for Medicaid, we could have scheduled an urgent surgery and immediately removed the goiter to avoid further complications. However, because she is uninsured, she will have to wait until the mass grows even larger and her condition rises to the level of an emergency before she can receive care. When she arrives in the emergency room, her breathing will have become more labored and her life will be in danger. As the ENT physician told me, "Greg, we've got a disaster brewing here."

For our patient, this 'disaster' will be painful and cause her great physical and mental distress. As the goiter grows, it could further compress her trachea worsening the obstruction. She could lose her voice due to the destruction of nerves that control her vocal cord. This, in turn, could leave her airway unprotected, and gastric contents could spill into her lungs, resulting in pneumonia. The goiter could also compress her esophagus, making it difficult to swallow solid food and cause her to choke on liquids.

Treating conditions like this in the emergency room can require heroic, and costly, measures. The anesthesiologists and surgeons must use advanced airway techniques to intubate the patient. A complex procedure known as extracorporeal membrane oxygenation might have to be used to pump oxygenated blood back into the body, keeping the patient alive until she can breathe on her own. Cardiologists, specialized nurses, expensive equipment, 24/7 monitoring, a lengthy hospital stay—all of this might be required because this patient, who works at a low-paying job, did not have the means to afford insurance on her own.

If she'd had Medicaid, we could have treated her with a routine surgery much earlier, when the goiter was small, that most likely would not have even required an overnight stay at the hospital. As it is, her eventual trip to the ER and subsequent care could end up costing well over \$100,000. The complications from her surgery could mean she can't work for a long time. A woman who had been independent and reasonably self-sufficient could easily end up with severe complications that could cause her to lose that independence.

I said above that I have seen hundreds of cases like this in my career. I know many other physicians who routinely encounter even more health emergencies that could have been avoided if their patients had Medicaid. That possible \$100,000 hospital bill for our patient with the goiter? Multiply that amount by thousands of other similar cases across Kansas and you can see what this short-sighted policy of failing to expand Medicaid has cost our state in the last decade. Multiply this poor woman's experience by the thousands of others with similar stories and you can grasp the magnitude of the human toll this negligence has exacted.

It is far past time to act. I urge you, as a physician and a fellow Kansan, to expand Medicaid now.

Sincerely,

**Gregory Unruh, M.D.**  
**26907 W Shadow Cir**  
**Olathe, KS 66061**

HB 2556  
Written Testimony Only  
Marjorie J. Van Buren  
Topeka, Kansas

Chair Landwehr, Ranking Member Ruiz, Honorable Members:

Thank you for the opportunity to testify in favor of HB 2556.

I've been following the issue of Medicaid expansion, both in Kansas and nationally, for quite a few years. I'm concerned that my state--of which I'm a proud life-long resident--has not extended Medicaid to the tens of thousands of Kansans who fall into the health insurance coverage gap and don't have access to affordable health insurance.

The lack of Medicaid expansion is affecting our friends, family, and neighbors, as well as our hospitals and our small businesses. I'm originally from a rural Kansas county, where we were justifiably proud of our hospital. But hospitals in rural counties are struggling now, in part because people who can't get insurance coverage have to come to the emergency room, which costs the hospital that has to take care of them!

As you probably know, there are many solid benefits to Medicaid expansion, including:

- 1) Expansion will reduce health care costs for everyone and protect Kansans from medical debt. This is documented in the many states that have expanded.
- 2) Access to expanded Medicaid will keep the workforce healthy and ensure Kansas stays economically competitive.
- 3) It preserves and strengthens our rural communities and the health care systems that serve them, and
- 4) It ensures access to affordable health care for all Kansans, regardless of income level, race, or ZIP code.

Over 70% of Kansans support expanding Medicaid in Kansas. Expansion will be good for Kansas. I'm asking each of you to vote to report HB 2556 favorably for passage and give the full House a chance to debate and vote on this bill.

Again, thank you.  
Marjorie J. Van Buren

March 15, 2024

Dear Chairman and Committee members,

I encourage all legislators to support Medicaid Expansion. The benefits of this would help thousands of Kansans in many ways that you are aware of. It would bring millions of dollars into our state without costing the taxpayers anything.

Seize this opportunity to expand Medicaid by demonstrating your leadership in passing HB2556 and SB355.

Thank you for recognizing the importance for doing what is best for us in Kansas. Please support Medicaid Expansion.

Sincerely,  
C. A. Van Goethem  
Stilwell, Ks. 66085



**To the Honorable Members of the Kansas Legislature:**

Subject: Testimony in Support of "The Cutting Healthcare Costs for All Kansans Act"

Dear Legislators,

I write to you today as a concerned citizen, member of the clergy, and an educator urging your support for the Medicaid expansion bill, "The Cutting Healthcare Costs for All Kansans Act," which Governor Kelly has introduced. This initiative is more than a policy; it represents a beacon of hope for thousands of Kansans who are currently left in healthcare limbo.

Maria is a single mother living in a small rural community in Kansas, working two part-time jobs to make ends meet. Despite her hard work, neither job offers health insurance, and her income is just above the current Medicaid eligibility threshold. Her daughter, Emma, who is six years old, has been diagnosed with asthma, a condition requiring regular medical attention and medication to manage.

Under the current system, Maria makes too much to qualify for Medicaid but not enough to afford private health insurance or cover medical costs out of pocket. This financial gap means Emma cannot see a specialist regularly or afford the inhalers and other medications she needs to keep her asthma under control. As a result, Emma's condition has led to several emergency room visits when her asthma attacks became severe, causing distress and mounting medical bills for Maria, as well as days missed out of school which impedes her educational progress.

With the expansion of Medicaid under "The Cutting Healthcare Costs for All Kansans Act," Maria's income would now fall within the expanded eligibility criteria, allowing both her and Emma to qualify for Medicaid. This change means that Emma can regularly visit an asthma specialist and receive the necessary medications to manage her condition effectively. Regular access to healthcare would drastically reduce the likelihood of emergency asthma attacks, improving Emma's quality of life and allowing Maria to avoid the financial strain of unexpected medical bills.

Furthermore, the expansion would support Maria's health as well, ensuring she receives preventative care and medical attention when needed, reducing the risk of untreated health issues that could affect her ability to work and care for Emma.

Evidence consistently shows that states embracing Medicaid expansion witness significant economic and health benefits. Expanding Medicaid in Kansas would not only provide health insurance to over 150,000 additional Kansans but also stimulate economic growth. Hospitals, particularly in rural areas facing financial strain, would receive a much-needed lifeline, thereby preserving access to care for all residents.

Healthcare should not be a privilege for the few but a right accessible to all. In a nation as wealthy as ours, it is unconscionable that we have citizens forced to choose between medical care and other essentials like food and rent. Medicaid expansion embodies our collective commitment to each other, ensuring that no Kansan must suffer due to lack of medical insurance.

The time to act is now. For too long, the issue of Medicaid expansion has been sidelined, leaving countless individuals and families at risk. "The Cutting Healthcare Costs for All Kansans Act" provides us with a viable pathway to ensure that everyone in our state has access to the healthcare they deserve. I implore you to support this bill, not just as a matter of policy, but as a testament to our values as Kansans who believe in taking care of one another.

In closing, I ask you to consider the lives that will be directly affected by your decision. We could make a significant, positive impact on the health and well-being of our fellow Kansans. I strongly urge you to vote in favor of Medicaid expansion, demonstrating your commitment to the health and prosperity of all Kansans.

Thank you for your time and consideration.

Sincerely,

J. Michelle Vann

J. Michelle Vann Dcc, ThD, MS

March 15, 2024

Dear Chairman and committee members, I appreciate the opportunity to provide written testimony to support Medicaid Expansion in Kansas. Kansans deserve the more than \$700 million in annual federal funding that the state would get, plus additional funding through a signing bonus—without costing the taxpayers anything! More importantly, Medicaid expansion would greatly benefit rural Kansans; improve access to critical mental health care; help to lower premiums; and most importantly, allow more low-income Kansans to have access to medical care. Being a state with Medicaid expansion will also help attract workers; I know a number of families who have expressed concern about moving here because of this issue and what it signals to those needing health care.

PLEASE support Medicaid expansion to improve the health and well-being of all Kansans! Thank you.

·  
Lisa McGahey Veglahn  
Prairie Village, KS

March 14, 2024

To the Kansas Legislature:

My name is Kelsey Vetter, and I am a grants administrator in Johnson County. An expansion for Medicaid would be a great help for me as an individual with mild ataxic cerebral palsy. As a self-employed nonprofit worker, I cannot currently afford health care. I know that regular trips for physical therapy sessions will help me take care of my body and keep me fit and active.

I also believe we should expand healthcare access for all hard-working Kansans, able-bodied or not. It's time Kansas lawmakers vote to expand Medicaid once and for all.

Kelsey Vetter



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

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

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

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

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

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

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

Sincerely,

Patrick Sallee  
President & CEO  
Vibrant Health

March 15, 2024

I am a Kansas pediatrician and Medicaid Expansion will do SO much to help families in our state. States with Medicaid Expansion have more competitive insurance markets which lowers costs for everyone. There are at least 150,000 Kansans who fall into the coverage gap who could gain access to healthcare with Medicaid Expansion. Hospitals in danger of closing across the state could be saved if more of the people they care for had coverage through Medicaid Expansion. Fewer families would be crippled by the costs of high deductible plans. I have so many families that actually have to limit their income instead of taking higher paying jobs because their children will lose Medicaid coverage if they make too much money— but they can't afford other healthcare options. The coverage gap is a significant problem for so many families in this state.

Medicaid Expansion is a purely beneficial program. There are no negatives. It is revenue positive for the state since the federal government not only covers the costs but provides bonus incentives as well. Kansans overwhelmingly support Medicaid Expansion.

Please finally get this done. Health care providers are struggling under the weight of un- and under-compensated care. Families are struggling due to unaffordable health care insurance options. Passing Medicaid Expansion in this moment is the right thing for Kansas.

Thank you,  
Amy Voelker, MD  
Olathe, KS

March 15, 2024

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

Committee Chairs, Sen. McGinn and Rep. Landwehr:

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

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

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

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

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

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

Further, Medicaid Expansion would protect rural hospitals, and likely would have prevented eight rural hospitals from closing, gravely impacting surrounding businesses and costing rural communities thousands of jobs. The result of non-expansion is that many Kansans drive hours to receive basic care, and our doctors, nurses, and hospital staff are leaving for higher pay in neighboring states, exacerbating our health care workforce shortage. The expansion would also provide relief for county jails that have been burdened with providing care for admitted inmates.

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

Respectfully submitted,

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



March 13, 2024

Hello, Cutting Healthcare Costs for All Kansans Act hearing,

Thank you for having this hearing on Kansas Medicaid Expansion. It has been a long time for so many Kansans dealing with health issues and no where to go except driving for hours for medical care. Kansans are the bedrock of our Nation, we must treat all Kansans with the dignity and respect of attaining affordable health care. It seems to me, adequate healthcare is a humanitarian right.

Below are a few highlighted reasons I think Kansas desperately needs to expand Medicaid especially for many of our rural citizens.

Thank you,

Your Kansas Constituent,

Gloria Walker

Overland Park, KS

#### **HB 2556 and SB 355 expands Medicaid and lowers health care costs.**

- **It won't cost Kansas taxpayers a single cent.** It's revenue-neutral, so Kansas' surplus can go toward tax cuts, public schools, and infrastructure.

- **It's a commonsense, middle-of-the-road approach** to providing health care to working Kansans.

It builds on previous compromises to include a work requirement that grows our workforce but prevents administrative barriers to healthcare.

#### **>It protects rural hospitals, supporting jobs and health care in rural communities.**

- **8 rural hospitals have closed while we've waited for expansion,** **devastating** surrounding businesses and costing communities thousands of jobs.

#### **Nearly 80% of Kansans – regardless of party – support Medicaid expansion.**

Only a few extremists in the legislature stand in the way of expansion.

#### **Medicaid Expansion Strengthens Rural Healthcare**

##### **Medicaid Expansion Grows Our Economy**

- Kansas has lost nearly \$7 billion in additional federal funding while our federal taxpayers support jobs and healthcare in 40 other states.

- **Medicaid expansion would create nearly 23,000 jobs and help end our health care worker shortage.**



March 15, 2024

### Written testimony in support of Medicaid expansion

My name is Tara Wallace. I am a licensed clinician and trauma therapist. I am also the CEO of a non-profit that provides free therapy to the families of the children I serve. Many of these children are in the child welfare system due to reports of abuse and neglect. Returning them to their birth families is challenging for several reasons. Many of these reasons can be addressed by providing services to help the family become stable. Because Kansas has not expanded Medicaid, therapy is only available if the child shows a need for services or medical necessity.

As previously stated, I am the CEO of a non-profit. Lighthouse Therapeutic Community Outreach Foundation was established in response to the needs I observed while working with children that have experienced trauma. My work in treating traumatized children includes family therapy. However, when a child experiences a traumatic event, they are not the only ones affected by it. Nor are they the only ones to show symptoms. Unless the family receives a similar level of support, my work is either completely ineffective or limited in success.

To help you understand why there was a need for Lighthouse TCO Foundation I will explain it this way. Treating a child that has experienced trauma without the same level of effort towards the family is the same as taking a child from a starving household and feeding them a nutritious meal once each week and then returning them to their family. The child will still starve to death. It will just take longer than the rest of the family that has not eaten at all.

As a social worker I have an ethical and moral responsibility to do no harm. This includes not providing services that I know will minimally meet a child's needs or not improve their situation at all. Lighthouse TCO Foundation allows me to provide services to the family using donations and grants. Lighthouse is a small non-profit organization competing against larger organizations for mental health funding. Considering the state of mental health in Kansas, this means very limited resources to do work that is critical to the wellbeing of children and families.

There is much work to be done in addressing the mental health challenges facing our state. But there is only so much a mental health professional can do when they too are struggling for healthy functioning. Many of my colleagues live in the gap that prevents them from seeking mental health support because they cannot afford insurance. They go to work "sick" because not working means their livelihood.

My deepest fear is that Kansas closes out another legislative session without expanding Medicaid and provides no resources to support those who are currently struggling within our current health system structure. The collapse of our healthcare system would be unparalleled.

A simple solution along the continuum of responding to the complex problem of helping struggling children and families in Kansas is Medicaid expansion.

Respectfully submitted,

A handwritten signature in black ink that reads "Tara D. Wallace". The signature is fluid and cursive, with the first name "Tara" and last name "Wallace" clearly legible.

Tara D. Wallace  
MSW, LSCSW, CTF-CBT/PSB, RYT, SLC  
Lighthouse Therapeutic Community Outreach Foundation

March 15, 2024

Hi there,

I am a type 1 diabetic who is expected to pay 1/4 of my salary on healthcare. Like most people, I cannot afford this.

I recently returned from the UK to KS and am disgusted by the fact that there is virtually NO preventative care and it is purely reactionary. It should be no surprise that Americans have such horrible health. What's more, I pay higher taxes in the US than I did in the UK! And truly have nothing to show for it. No wonder the rest of the world looks down on the narcissistic "American-exceptionalism" mentality that "greed is good".

If America actually prioritizes "life, liberty, and the pursuit of happiness" then we need a single payer healthcare system. It is gross government negligence that Americans are forced to choose between paying rent or paying medical bills.

It's time America prioritizes humanity over capitalism.

Sarah Watney

March 15, 2024

I am writing to support The Cutting Healthcare Costs for all Kansans Act that is scheduled for hearings next week. Why do I support this bill? Because I am part of the many of the forgotten Kansans.

I am a school teacher. I teach high school. I am also a single mom with a child with special needs. I make slightly too much money for my child to qualify for the buy in version of KanCare. What does this mean for me? I'm spending almost 10k a year on premiums, deductibles, and co-pays. This means that often I have to forgo care for myself so that my child gets the care he needs, it means that I have far less disposable income to spend in our economy. Quite frankly it's a huge financial struggle, one that in other states I would not have to face. I don't want free healthcare for myself or even for my child. I just want the right to buy into KanCare for my child so i am not financially crippled by healthcare costs. I am currently paying almost \$500 a month in premiums. I have a 4k deductible. And, I'm paying for this alone on a teachers salary.

I don't expect anyone to pay my or my child's way. I just want access and the ability to pay state run insurance which has better benefits and is more affordable. Please expand KanCare so this type of option might be able to me and other parents like myself. We are not wealthy. I wouldn't even consider myself middle class. We are the forgotten. The people who make just a little too much to currently qualify, but who don't make enough to be able to afford private insurance.

Emma Webb  
McPherson, Kansas



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Mr. Chuck Weber  
Executive Director

Chuck@KansasCatholic.org  
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Phone: 785-227-9247  
Cell: 316-708-5350

KANSAS STATEHOUSE OFFICE  
Kansas Catholic Conference  
204 SW 8<sup>th</sup> Ave.  
Topeka, KS 66603

March 20, 2024

To: Madam Chair Senator Gossage and McGinn, and members of the joint Kansas Senate Health and Ways and Means Committee members

From: Chuck Weber, executive director, Kansas Catholic Conference

### RE: **Written only proponent testimony for Medicaid Expansion**

My name is Chuck Weber, and I serve as executive director of the Kansas Catholic Conference, the public policy voice of the Kansas Catholic Bishops. Thank you for the opportunity to testify as a PROPONENT for the proposal commonly referred to as “Medicaid Expansion.”

The Catholic desire to provide healthcare for all people intersects with Medicaid Expansion (government-sponsored healthcare insurance), a complex topic often beset with confusing and even contradictory evidence.

The Kansas Catholic Conference supports Medicaid Expansion legislation, while also acknowledging that Medicaid healthcare delivery options and other closely-connected issues make it a less than ideal solution—but still the best available option currently.

Of particular concern are the estimated 39,000 Kansans<sup>1</sup> who fall into the health insurance “coverage gap,” where household income is too much to currently qualify for Medicaid, but not enough to qualify for subsidized coverage from the Affordable Care Act Marketplace.

For several years now, Kansas legislative leadership has discussed options to fill this “gap,” without adopting Medicaid Expansion. Regrettably, no such viable plan has emerged.

Catholic social service administrators and providers at the grassroots level believe Medicaid Expansion would provide help to many of the clients they assist daily. These providers include advocates at Catholic Charities agencies throughout Kansas, as well as the many Catholic-supported clinics where healthcare services are provided to the underserved and/or the uninsured.

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<sup>1</sup> [How Many Uninsured Are in the Coverage Gap and How Many Could be Eligible if All States Adopted the Medicaid Expansion? | KFF](#)

Catholic healthcare providers and hospitals like Ascension Via Christi also support Medicaid Expansion, citing the high and rising cost of unreimbursed services that they provide to patients in emergency rooms and elsewhere within their system.

It is regrettable that Medicaid Expansion is not yet in place. The current Administration rejected a compromise in 2020 that would have paved the way for Medicaid Expansion if Kansans had had a chance to vote at that time on the Value Them Both state constitutional amendment. It became clear that the so-called “right to abortion” was more important than healthcare for low-income Kansans.

Although state taxpayer dollars supporting the Kansas Medicaid program are currently prohibited from use for most abortions in Kansas, there is nothing stopping the abortion industry from successfully challenging this law under the strict scrutiny standard set down by the Kansas High Court in their infamous 2019 *Hodes* decision. Indeed, the predatory abortion industry continues to aggressively challenge in court reasonable, bi-partisan laws protecting women and preborn babies.

The Kansas Catholic Conference also has concerns about religious and professional conscience protections for physicians, healthcare institutions and individuals that could be legally endangered if Medicaid Expansion passes.

In summary, Medicaid Expansion for Kansas is a flawed solution, but one we support as a step forward toward the goal of ensuring medical insurance for all Kansans, particularly low-income Kansans, who otherwise cannot access medical insurance.

Thank you for your consideration.

Sincerely,

A handwritten signature in blue ink that reads "Chuck Weber". The signature is cursive and fluid, with the first name "Chuck" and last name "Weber" clearly distinguishable.

Chuck Weber  
Executive Director, Kansas Catholic Conference  
[Chuck@KansasCatholic.org](mailto:Chuck@KansasCatholic.org)

March 14, 2024

Hello,

I am a constituent in Shawnee, KS (Senate District 10, House District 18) reaching out to express my support for expanding Medicaid in Kansas in light of the upcoming committee hearings. I have copied my legislators, Cindy Neighbor and Mike Thompson, so they are aware of my support as well.

I believe healthcare is a fundamental human right and this bill would give 150,000 of our most vulnerable Kansas access to affordable, lifesaving healthcare. As a Christian, I serve a God for whom healing the sick and caring for the poor is a top priority. As such, I feel it is morally repugnant that we have allowed thousands of Kansans to suffer and even die over the past several years because of the legislature's refusal to expand Medicaid. Now is the time to make that right.

Moreover, I also see a strong fiscal argument for expanding Medicaid because the federal government will cover 90% of the costs of Medicaid expansion. I am already funding the costs of Medicaid expansion with my federal tax dollars, yet Kansas is not taking advantage of any of those dollars. Effectively, I am sending my money to fund Medicaid in other states without Kansas seeing any of the benefits. I feel the Kansas legislature is wasting Kansans' federal tax dollars. They can correct this by expanding Medicaid immediately.

Thanks,

Alex Welch Blattner (she/her/hers)



March 14, 2024

## Medicaid Expansion

Ladies and Gentlemen, Our law office serves a wide variety of Kansans from young families to those preparing for their final days. Most need to take off work to see us and many cannot afford to miss hours and meet their obligations. They struggle with health care and insurance is not attainable for many. Our rural hospital also could use some help. Medicaid expansion would pay for care that otherwise is not collectable or results in further hardships with garnishments. Please, before one more family goes untreated or one more rural hospital has to cut back or close, expand Medicaid. It is a no brainer.

Thanks,  
Dennis A White

Greetings! Our names are Charles and Sandra Whitmore, and we are writing to provide testimony about Governor Kelly's 2024 Medicaid Expansion Bill: The Cutting Healthcare Costs for All Kansans Act scheduled for hearings in the Senate (SB355) and House (HB2556) on Wednesday, March 20, 2024. We offer these comments on behalf of our beloved granddaughter, Gabrielle Elizabeth Whitmore, who is 29 years old and in desperate need of financial assistance to cover her living and medical expenses. As a result of conditions she has been diagnosed with since her original bout with COVID-19 which she got while traveling in Rome in January of 2020, she is unable to work and live independently.

Prior to contracting the disease, Elle was a vibrant, active professional working for the Wyandotte County Department of Social Services as an investigator. In the spring of 2020, she had to quit the job she loved because she couldn't get out of bed without falling due to extreme dizziness. As she sought medical assistance, testing indicated a condition referred to as POTS – Postural Orthostatic Tachycardia Syndrome. This condition causes a number of symptoms when you transition from lying down to standing up, such as a fast heart rate, dizziness and fatigue.

- Normally, a body balances its heart rate and blood pressure, regardless of the position your body is in.
- With POTS, the body can't coordinate the balancing act of blood vessel constriction and heart rate response. Therefore, it can't keep one's blood pressure steady and stable, which causes a variety of symptoms.

Last year, she was also diagnosed with Ehlers-Danlos Syndrome, a genetic condition that weakens the body's connective tissue, commonly affecting the skin and joints. In addition to loose or unstable joints and fragile skin that tears easily, EDS can cause complications that may affect one's blood vessels.

As a state-based, public health insurance program, Medicaid is intended to assist people with disabilities like my Granddaughter. Now diagnosed with Long COVID, Elle lives with her parents and is unable to hold down a job. She has sought AND BEEN DENIED financial aid and federal assistance. Being covered by Medicaid would:

- Enable her to pay for her medical care-her biggest fear and stress.
- Rebuild her life and career.
- Be independent.

Expanding Medicaid lowers costs for everyone. When one Kansan doesn't have health insurance, other Kansans end up paying for it. And expanding Medicaid could reduce taxes, thus funneling those monies to schools, infrastructure and, possibly, tax cuts.

Medicare expansion grows our economy. Kansas has lost nearly \$7 billion in additional funding. This would create nearly 23,000 jobs and help end the healthcare worker shortage.

The Medicaid Expansion and Cutting Healthcare Costs for All Kansans Act comes at no additional cost to Kansas taxpayers.

- The federal government pays for 90% of the costs to expand Medicaid; states pay 10%.
- The state's share is completely covered by drug rebates, savings from higher reimbursement rates for existing Medicaid recipients, and
- Additional federal funding.

Currently, Kansans' federal tax dollars are going to support hospitals and jobs in states like New York, California, and every state adjacent to us instead of being invested in the people of Kansas.

In summary, we ask for your support in securing Medicaid coverage for Kansans like our Granddaughter and others in our community who are struggling with medical bills and living expenses that will be greatly eased by the passage of this Medicaid Expansion legislation on March 20<sup>th</sup>. God bless you.

(signed) Charles W. Whitmore  
Overland Park, Kansas

(signed) Sandra L. Whitmore  
Overland Park, Kansas

March 14, 2024

We're writing to submit testimony about Governor Kelly's 2024 Medicaid Expansion Bill: The Cutting Healthcare Costs for All Kansans Act scheduled for hearings in the Senate (SB355) and House (HB2556) on Wednesday, March 20, 2024.

Our daughter, Gabrielle Whitmore, is 29 years old and in desperate need of financial assistance to cover her living and medical expenses as a result of conditions she has been diagnosed with since her original bout with COVID-19 which she got while traveling in Rome in January of 2020.

Prior to contracting the disease, Elle was a vibrant, accomplished, very physically active professional working as an elder abuse investigator. In the spring of 2020, she had to quit the job she loved because she could no longer perform her duties. She also spent about 20 hours a week volunteering for many organizations from grade school on. She's unable to hold a job now, and unable to do daily life needed activities on some level every day and needs physical assistance. All of her time goes to trying to heal and exist, she misses most family events - from holidays to funerals and weddings, and rarely ever socializes.

Covid triggered several medical conditions for Elle. The cytokine storm and combinations of dormant genetic conditions worked to cause her entire body to always be in intense pain and many of her organs to be extremely compromised. First, her gallbladder was removed as though it was perfectly healthy on regular testing, they found it only was working at 7% capacity. She sees an internist, a number of specialists, and does a number of types of physical therapy and a therapist for the mental health burden of a once vibrant full living in her 20's who was a high achiever, suddenly becoming bedridden mostly for going on four years now. She takes 18 prescribed medications daily regularly, and many more as needed. She has many medical provider appointments each week and doing the treatments, visits and basic daily care is all or more than she can manage. She is very slowly improving as things diagnose and can be addressed. Elle has a long way to go per all of her providers and she needs continued support to get there. She very much wants to live a full life again and have hope that she is cared for and can contribute again and do things those her age are doing.

POTS Postural Orthostatic Tachycardia Syndrome. This condition causes a number of symptoms from a dysregulated heart rate. For example, when you transition from lying down to standing up, a fast heart rate, dizziness and fatigue. Normally, a body balances its heart rate and blood pressure, regardless of the position your body is in. With POTS, the body can't coordinate the balancing act of blood vessel constriction and heart rate response. Therefore, it can't keep one's blood pressure steady and stable, which causes a variety of symptoms.

Last year, she was also diagnosed with Ehlers-Danlos Syndrome, a genetic condition that weakens the body's connective tissue, commonly affecting the skin, organs, entire body and joints. In addition to loose or unstable joints that can be injured easily, and fragile skin that tears easily, EDS can cause complications that may affect one's blood vessels. When she contracted covid, her body swelled in 70 pounds of inflammation as the Ehlers allowed her joints to be dislocated which trapped the fluid outside the normal system her body could drain it from. She has seen a lymph specialist and two types of physical therapy specifically to drain these fluids in her body and lost over half of the swelling so far which has begun to decrease the intense pain.

As a state-based, public health insurance program, Medicaid is intended to assist people with disabilities like Elle. Now diagnosed with Long COVID, Elle lives with her parents and is unable to hold down a job. She has sought AND BEEN DENIED financial aid and federal assistance

from disability despite Congresswoman Sharice David's assistance. She is on cobra insurance from her parents' employment with maximum caps that make her treatments possible, she will be mandatory off of that in September this year. With no income she's unable to afford insurance on her own. Because one can have these conditions and still be somewhat functional and undiagnosed or minor illnesses, federal disability has refused cover to her, even though that is not how they present in her case. She has been denied multiple times without any one speaking to or examining her or her providers.

Being covered by Medicaid would:

- Enable her to pay for her medical care-her biggest fear and stress.
- Have the chance someday to rebuild her life and career.
- Be independent.

Expanding Medicaid lowers costs for everyone. When one Kansan doesn't have health insurance, other Kansans end up paying for it. And expanding Medicaid could reduce taxes, thus funneling those monies to schools, infrastructure and, possibly, tax cuts. Medicare expansion grows our economy. Kansas has lost nearly \$7 billion in additional funding. This would create nearly 23,000 jobs and help end the healthcare worker shortage. The Medicaid Expansion and Cutting Healthcare Costs for All Kansans Act comes at no additional cost to Kansas taxpayers. The federal government pays for 90% of the costs to expand Medicaid; states pay 10%. The state's share is completely covered by drug rebates, savings from higher reimbursement rates for existing Medicaid recipients, and additional federal funding.

Currently, Kansans' federal tax dollars are going to support hospitals and jobs in states like New York, California, and every state adjacent to us instead of being invested in the people of Kansas.

Health issues and lack of coverage could happen to anyone, and it does. Most of Elle's family on both sides has lived in Kansas our entire lives and been very active in supporting community and government. Just as has happened to Elle, who was gainfully employed and had to quit due to long covid, and who tried to go back to work at a much lower level and part time and also couldn't sustain that. In Elle's work in adult protective services, Elle helped over 600 people in cases she handled and saw firsthand how many there are in our state suffering from lack of medical care. Elle's grandmother went uninsured for ten years after an illness at work after decades of gainful employment, and she was unable to be well enough to go back to work in Kansas full time before medicare. They sat in ER parking lots twice during that time wondering if they should risk her life or her home. Though she is on medicare now, she still suffers more health issues due to that long lapse in ability to get medical care. That costs society more. One of Marcy's friends in his 40's had always had two jobs, and had quit one that held his insurance to look for another in 2016. During the month of that time, he suffered horrible stomach pain and was diagnosed with cancer and unable to work again or obtain insurance and thus he had no treatment and died six months later leaving an 8 year old son. These issues are very real, non partisan, and they affect the lives of wonderful people who deserve better, have given much and have much to give to our society if they had the support to do so.

In summary, we ask for your support in securing Medicaid coverage for Kansans like Elle and others in our state and community who are struggling with medical bills and living expenses that will be greatly eased by the passage of this Medicaid Expansion legislation on March 20th.

- John Whitmore, unaffiliated registered voter, Lenexa, Kansas
- Marcy Hall, unaffiliated registered voter, Lenexa, Kansas

Also signed by:

- Simon Whitmore, unaffiliated registered voter, Lenexa, Kansas
- Gabrielle Whitmore, registered democrat, Lenexa, Kansas
- Stephen E. Hall, registered voter, Leawood, KS District 7, Ethan Corson, Senator, District 19
- Stephanie Sawyer Clayton, Representative
- Christine Perkins, registered democrat, Miami County, KS



## Support HB 2556- Pass Medicaid Expansion

Kansas should pass Medicaid Expansion to provide an insurance option for Kansans who do not make enough money to afford health insurance from the exchange but also do not qualify for KanCare. Most of the estimated 150,000 Kansans who would benefit from Medicaid expansion are low-income workers or Kansans suffering from chronic illness. These are Kansans stuck in the coverage gap, with no affordable insurance options and no federal subsidies. Our current medical funding model is struggling to provide even the most basic medical services to this population.

As nurses, and later Advanced Practice RNs, we go into medicine because we answer the God-given calling to care for all people. Without appropriate funding, systems fail, and we simply can no longer answer the call. I wish that each of you could witness the light in a patient's eyes when he is able to see a provider at forty-five years old, when he finally gets insurance. The caveat? He spent the last 20 years working menial construction without health care benefits, suffered a debilitating back injury, eventually having so much pain that he could no longer work. But he worked anyway to support a wife and children. Now he cannot walk, is permanently disabled, and has a significantly shortened life expectancy. But at least he can finally qualify for the care he needs. This is just one of the hundreds of comparable stories we hear on the front lines of primary care.

## The Problem

Today you will hear plenty of testimony about Kansas' Medicaid statistics like how the eligibility threshold for adults is among the lowest in the country, or that thirty percent of the people treated by community health centers in Kansas are completely uninsured, that seventy percent of individuals served at community mental health centers have an income of less than \$20,000, and that childless adults who are not disabled cannot qualify for Medicaid without a chronic disability. We will not bore you with numbers. By now you are keenly aware that we are in the midst of a healthcare crisis.

No, today we ask that you consider a much less recognized voice, the testimony of a precarious position faced by the next generation of primary care providers joining the workforce. Please consider the reality of our situation. Enrollment in educational training for the provider workforce is dwindling every year. The nurse practitioner graduating class of 2025 includes a total of eight providers; the class below us has one. Without expansion, we will lose the economic power of not only health care facilities, but the very providers that make the whole thing work.

## Why this Matters

Hundreds of thousands of Kansans served by community health centers are chronically uninsured or under-insured. This uncompensated care has severely limited our capacity to practice as providers, hospitals, and clinics. Uninsured Kansans forgo regular health care and often do not obtain medical and mental health care when they become critically ill. Crisis and desperation are the driving causes of seeking treatment in Kansas. By the time they present for care, their normally uncomplicated conditions are exacerbated resulting in inflated costs which shift to emergency rooms, hospitals, and taxpayers. Because the Affordable Care Act anticipated Medicaid expansion, it reduced the disproportionate share (DSH) subsidies to hospitals that used to help offset the costs of treating the uninsured. Because of this we have watched Kansas facilities struggle and close their doors.

## The Bottom Line

The state would unlock \$682.4 million in annual federal funding with expansion. The federal government covers 90% of the extra cost of Medicaid services in exchange for expanding eligibility to 138% of the federal poverty rate. Low Medicaid reimbursement rates tend to limit access to quality care, worsening health outcomes for Medicaid beneficiaries. States determine their own reimbursement rates, but the Kansas legislature has continued to set ours low, leaving communities to shoulder extra costs.

House lawmakers on a budget committee recommended an additional **one-time funding influx** of \$33.9 million to increase physician provider codes and \$45.2 million to increase outpatient hospital rates. This proposal is being called a *"practical, sustainable solution."* We can report from the front lines that this proposal falls short of long-term resolutions for Kansas health care options. To be truthful, this proposal's impact is highly limited (applicable to the current Medicaid population) and temporary at best. It is a far cry from a practical solution, doing nothing to address the thousands of patients still locked out of healthcare. These are the people that we need to focus on.

The data trends are clear, this population will continue to increase in both number and severity of illness as we keep blocking access to health care. Hospitals will keep closing and new providers will stop trying. We cannot solve this problem with a band aid.

Honorable representatives, it is high time for serious health reform in Kansas by removing the undue restrictions against federal funds available through expansion.

To: Members of the Committee

From: Betsy Wickstrom

Re: Support for Medicaid Expansion

I appreciate the opportunity to share my support and case for expanding eligibility for Medicaid in Kansas. To that end, I have provided the OpEd that I submitted to the Kansas City Star in November 2023.

## **It's past time to expand Medicaid — for pregnant moms and everyone else in Kansas** | Opinion BY BETSY WICKSTROM SPECIAL TO THE KANSAS CITY STAR NOVEMBER 26, 2023

Expanding Medicaid in Kansas would help close health-care gap for pregnant women and low-income workers. I'm a maternal-fetal medicine specialist working in the Kansas City metropolitan area. I work closely with expectant patients with pregnancy complications. I also help educate new parents about postpartum care — what they need to keep themselves and their little one healthy. There was a time when low- to middle-income pregnant women could receive care at a clinic staffed by resident physicians at various medical schools, if they made too much money to qualify for assistance but too little to afford private insurance. They could pay a reduced fee based on their income, and receive excellent, compassionate care. But more than 10 years ago, those clinics began no longer accepting uninsured patients, and we started seeing patients coming in later and later in pregnancy as they couldn't afford multiple visits. For lower income families, KanCare now covers pregnancy and delivery care, but for care not related to pregnancy, (asthma, heart disease, seizure disorder or other neurological problems, for instance) they are on their own. This results in sicker pregnant people with more complications — exactly what we don't want.

Kansas recently passed a bipartisan law to expand health care coverage for new moms up to 12 months post-delivery. Now, as can happen frequently, those who experienced problems in pregnancy can get the continuing care they need to avoid long term complications from heart disease, diabetes and hypertension, for example. We know the benefits of this new law will be lifesaving. Literally. Access to routine check-ups, breastfeeding support, mental health support and more will reduce maternal mortality and improve health outcomes for our most precious resource: our children. So why stop here? The time is long past due for Kansas to expand Medicaid, once and for all. Why does this issue, which is all over the news these days, matter to all Kansans? Medicaid expansion would make a specific population of hardworking Kansans eligible for health



insurance. These people either “make too much” to be eligible for Medicaid, but not enough to afford private insurance. They are working folks in our hospitality industries, (bartenders and waiters, for instance) drivers, and construction workers. They deserve health care, and we need them to stay healthy and in the workforce. Expansion is a practical solution, too. We are one of only 10 states left in the nation that have not expanded Medicaid. That means our federal tax dollars are going to neighboring states to keep their residents healthy — not Kansas families. So far, Kansas has lost more than \$6 billion (with a b) because we have chosen not to expand Medicaid. How much more do we have to lose to say enough is enough?

Not only would expansion help boost the Kansas economy, but it would also help lower health care costs for all Kansans. At a time when we are all feeling the growing costs of everything from groceries to airfare to school lunches, health care is no exception. Why not expand Medicaid so we can drive down the cost of our families’ bills? All our families deserve a break in costs. Let’s talk about our rural hospitals. A recent report found that more than 50% of rural Kansas hospitals are at risk of closing — 60 of 104. Earlier this month, Dickson County’s local Herington Hospital announced its closure after serving Kansans for more than 100 years. Ascension Via Christi recently announced it will be closing the doors of its emergency department in Fort Scott next month. This means many families in southeast Kansas will be driving much further for emergency care. There are numerous variables involved in health care access and costs, but it is a fact that Medicaid expansion would help rural hospitals’ bottom lines. In expanded states, health care centers have higher revenue, greater operational capacity, more financial stability and more sites. They serve more patients, and are more likely to provide behavioral health and vision services.

Researchers have found that hospitals in expansion states also provide more jobs for their respective communities. With closure of rural hospitals, patients must drive further for preventative and maternity care. That’s if they have transportation available, and flexibility to take off more time from work, and child care if they need it. These hospital closures will inevitably lead to fewer health care visits, especially when raising a family, balancing jobs and many other daily tasks. Preventative care (which adds to quality of life as it prevents worsening of chronic illnesses) may drop off the priority list. We need to make it as easy as possible to get patients the care they need. If you are still reading, thank you. The benefits of expanding Medicaid are clear. Let’s help all Kansans out by getting this job done. Betsy Wickstrom is a longtime resident of Prairie Village. She has practiced high risk obstetrics for 31 years and cares for pregnant patients with complications at St. Luke’s Hospital.

March 13, 2024

The state needs to reflect the needs and wants of the great majority of Kansans and expand medicaid now. The reasons are clearly stated in the many testimonials!

Larry Wilgers  
1629 E. 11th Ave.  
Winfield, Ks 67156

March 14, 2024

Dear Legislators,

It is with great hope and trust that I thank you for hosting a hearing on Medicaid expansion for Kansas.

Our families need this.

Our kids need this.

Our workforce needs this.

Our entrepreneurs need this.

Our hospitals need this.

Our mental health providers need this.

With your help, Medicaid expansion can give vulnerable Kansans more tools to build healthy, productive futures for themselves.

Your support for Medicaid expansion will help communities tackle the underlying causes of costly and devastating homelessness.

Your support will help build a stronger Kansas economy on an even playing field with surrounding states.

I am grateful for every vote in favor of Medicaid expansion for Kansas. It's time to pass this. Thank you.

Karen Willey, PhD

Douglas County Commissioner, District 3

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

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

**DATE:** March 15, 2024

**RE:** Proponent SB 355

---

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

This bill comes at a time when the healthcare industry in Kansas is providing almost \$1.2 billion in uncompensated care to our state. Unlike many other industries, Kansas hospitals cannot turn patients away regardless of their ability to pay. Therefore, when a patient presents in our emergency department we are required to treat them. This creates unique challenges for our hospitals financially at a time when reimbursement rates from public and private payers remain stagnant and operational expenses have continued to increase.

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

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

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

Hospitals remain committed to serving the communities we care for each day across our state. We are an economic driver of local economies and one of the largest industries in the state. In the counties where WNH has facilities, Cowley, Chautauqua, and Elk, KanCare expansion is estimated to generate an additional \$8.9 million in healthcare spending annually. This means over 1,000 patients in these counties would become eligible for KanCare.

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

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

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

**DATE:** March 15, 2024

**RE:** Proponent SB 355

---

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

This bill comes at a time when the healthcare industry in Kansas is providing almost \$1.2 billion in uncompensated care to our state. Unlike many other industries, Kansas hospitals cannot turn patients away regardless of their ability to pay. Therefore, when a patient presents in our emergency department we are required to treat them. This creates unique challenges for our hospitals financially at a time when reimbursement rates from public and private payers remain stagnant and operational expenses have continued to increase.

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

March 14, 2024

As a 25-year-old, deeply religious, and life-long Kansan, I urge you to expand our KanCare Program to include the more than 150,000 Kansans who fall in the coverage gap.

As a teacher in a low-income area, students talk often and openly with me about their struggles. I have a student, an 8th grade boy, who desperately wants to play soccer. He has been working to get his grades up from Fs to As and Bs since January, so that he could make the team. As tryouts moved closer, however, he was afraid he wouldn't be able to play because he hadn't gotten a sports physical yet. When I asked why not, he said his parents didn't have health insurance. When he and I looked online for places to get a physical without insurance, the places we saw said it could be anywhere from \$100-\$250, although it was difficult to get a true estimate for his specific situation. The cost alone was enough to potentially keep him from doing the thing he had been working so hard toward - playing soccer with his school and his friends.

If KanCare is expanded, students like mine would see benefits immediately, not just for sports physicals, but for access to doctors appointments and necessary medications. It is impossible to imagine a healthier school without a healthier community, and we cannot have healthier communities without affordable access to health care. The Kansans who need this help are not lazy low-lives hoping to feed off of a system. They are working Kansans with families who desperately need our help. I urge you to move forward with this bill. It is the moral, ethical, and economically right thing to do.

Sincerely,  
Sydney Williams  
Teacher, Wyandotte County

**SB 355 Testimony – Proponent**  
**Rachel Willis, Director of Legislative Affairs**  
**at the Kansas Department of Commerce**  
**Senate Ways and Means Committee & the Senate Public Health and Welfare Committee**  
**March 20, 10:30 A.M.**  
**Room 346 S**

Thank you for the opportunity to provide written testimony in support of SB 355, Medicaid expansion, on behalf of the Kansas Department of Commerce. Expanding Medicaid is critically important to the Kansas economy and to the competitiveness of Kansas businesses for several reasons:

- **Enhanced employee retention and recruitment:** Medicaid expansion will improve employee satisfaction and loyalty, as it ensures that employees have access to affordable healthcare for themselves and their families. This can help businesses retain their skilled workforce and attract new talent. As we work to retain the workforce desperately needed for Kansas businesses to thrive, we must consider that there are approximately 150,000 low-income employees who are currently uninsured in Kansas while 40 other states (including Colorado, Nebraska, Missouri, and Oklahoma) have approved Medicaid expansion to provide this critical benefit.

Those 150,000 uninsured employees represent 73% of total uninsured Kansans, meaning that the vast majority of our uninsured are currently working. These working Kansans fall into the coverage gap by making \$9,500 - \$25,000 per year. In order to gain access to affordable healthcare, they would have to stop working or work only part-time at minimum wage. This disincentivizes work at a time when we are trying to fill over 100,000 vacant jobs in our state.

- **Economic stimulus:** When more individuals have access to healthcare services, there is increased demand for healthcare providers and facilities, leading to job growth and economic development. Medicaid expansion would capture an additional \$1 billion in new annual federal funding, increase consumer spending on health care by \$592 million per year, and create an estimated 23,000 jobs.
- **Increased workforce productivity:** Employees with access to healthcare coverage through Medicaid expansion are more likely to address health issues promptly, resulting in improved productivity and reduced time off work due to illness. Healthy employees are more engaged, focused, and productive in their work.

- **Cost savings for businesses:** When low-income employees have access to Medicaid, they are less likely to rely on employer-sponsored health insurance, which can help businesses save on premium costs. This is especially important to small businesses that may struggle with high healthcare expenses. Medicaid expansion can help businesses reduce healthcare costs by up to \$80 million per year.
- **Improved employee health:** Often, low-income employees do not have access to employer-sponsored health insurance. When employees have access to affordable healthcare, they are more likely to seek preventive care and timely treatment, which leads to better health outcomes and reduced absenteeism.

Overall, Medicaid expansion will benefit Kansas businesses and the economy by increasing productivity, reducing healthcare costs, improving employee health, enhancing employee retention, and stimulating the economy.



TO: Chairperson Landwehr, House Committee on Health and Human Services  
FROM: Jennifer Wilson, Navigator and concerned Kansan  
DATE: February 13, 2024  
RE: Kancare Expansion

I have read many testimonies from companies and organizations that have provided statistics and research on the economic and health reasons to expand Kancare. I've also seen individuals give their personal testimonies as to why they need Kancare expansion. I'm not sure why that has not been enough, but I'd like to get to the heart of the matter and explain my experience.

For the past 3 years in my role as a Navigator, I have spoken to people from all over Kansas who are uninsured and need assistance finding affordable coverage and medical care. Sometimes I can assist with a plan through the Marketplace, but most of the time I can only provide resources and a shoulder to cry on. These Kansans fall into the Medicaid Gap. I'd like to provide some examples of people who have sought my help:

Liz, a 26-year-old losing her parent's employer-sponsored coverage, has mental health struggles that won't allow her to work more than a few hours a week. What are her options?

John and Susan, early retirees who have a few years before Medicare kicks in at age 65. They cannot afford to keep their employers' coverage at the full rate. What are their options?

Megan, who earns \$15/hr working part-time but her employer, like most, does not offer health insurance to part-time workers. What are her options?

Mike, who is self-employed and who has so many business-related expenses that his actual annual income is below 100% FPL. What are his options?

Josh, a physically disabled adult who cannot work but doesn't quite qualify for Kansas disability. What are his options?

Terri, in the service industry, works many hours to make ends meet but health insurance is not offered by her employer. What are her options?

Hannah and Kelsey, college students who are required by their learning institution to have health insurance but who cannot afford the plan offered. Their parents do not have health insurance. What are their options?

All of these are hard-working Kansans or people who suffer from illnesses that prohibit them from being the right candidates for jobs. What can they choose?

1. The Federal Marketplace? No, because they do not make 100% of the FPL so plans are unaffordable.
2. Private pay plans? No, because they are unaffordable.
3. Medicaid? No, because they do not meet the eligibility requirements.
4. FQHC's? Possibly, but there are still fees and prescription expenses and not all services are provided.
5. Hospitals? Possibly, but why are we causing Kansans to put off care until they have an emergency and have no choice but to go to the ED? For people to have optimal health, they must receive routine, preventative care.

Let's give the people of Kansas the health and dignity they deserve by passing Kancare expansion.

It is time to take Medicaid expansion to the floors of the Kansas House and the Senate and vote to expand it for thousands of Kansans.

Why is this issue so important to me? I have a 34-year-old nephew who is neuro-divergent. He is taking the steps he needs to move forward with his life. He is attending college to get a degree in biomedical engineering. He has a job where he is scheduled for maybe 10 hours a week at t \$10.00 an hour.

Recently, has been diagnosed with a significant heart issue. He has no medical insurance as he cannot afford private pay or a policy from the Marketplace. Last year he had to have a surgical procedure to correct his heart issue. A \$60,000 surgery. He is now one of the 40% of Kansans who has medical debt.

Because he cannot afford to live on own, he still lives with his parents. He tried to get health insurance through KanCare, but with the combined household income he doesn't qualify.

Kansas has thousands of citizens whose stories are like my nephew's, and I find it incomprehensible that powerful legislators, lobbyists, and outside organizations are allowed to block any conversation on Medicaid.

Each of you were elected to represent the citizens of your district as well as Kansas. Each of you know that Kansans overwhelmingly support expanding Medicaid. Now is the time to move Medicaid expansion to the floor of both houses and count the votes.

Sincerely,  
Julie Wilson  
Meriden, KS



March 15, 2024

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

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

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

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

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

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

Sincerely,

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

Sarah Werner

CEO, Winfield Area Chamber of Commerce



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

Kansas Policymakers –

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

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

The United Methodist Social Principles say:

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

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

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

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

Ad maiorem Dei gloriam,

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

March 14, 2024

Dear Representatives,

I believe one can measure the strength of a society by looking at the well being of those needing help the most. We are a prosperous State and must find a way to help those in need. I am convinced this investment will give young children born to poverty the fair shot that most of us in more favorable circumstances enjoy.

We can do better!

Thank you for your consideration,

Dave Wiseman  
9004 E Windwood St  
Wichita, Ks

## MEDICAID EXPANSION HEARINGS TESTIMONY

Supporting Medicaid expansion for the State of Kansas has many benefits. It would especially benefit rural community hospitals; two rural community hospitals (of several) closed as a result of not allowing Medicaid to expand – the Alma and Lyndon Cotton-O’Neil Clinics. The immediate consequence is that of depriving the people residing in Alma and Lyndon access to local health care. The long-term consequence is that the people residing in Alma and Lyndon will need to use emergency rooms rather than local clinics. They will likely wait until their symptoms and illnesses are more advanced and use emergency rooms or need to be hospitalized.

Also, Medicaid expansion would benefit the KanCare program.

It would benefit the citizens of Kansas, some whom desperately need health care and can't get it. We have learned that Kansans without health insurance are less likely to seek testing and treatment, thereby putting themselves and other Kansans at risk.

The citizens of Kansas want this Medicaid expansion. This effort has repeatedly been blocked, at all levels, by the Republican leadership in the Legislature.

I have to ask – what are you afraid of? Let the people of Kansas speak!

Rhonda Wisman

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

Kansas Policymakers:

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

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

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

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

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

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

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



January 25, 2024

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

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

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



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

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

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

March 14, 2024

Kansas Legislators,

Would you please vote for Medicaid Expansion.

If you had a loved one that had a handicap that prevented them from being able to work a job that provided health insurance, you might understand why Medicaid Expansion is a smart idea.

Our daughter has dealt with a couple of mental illnesses since she was hit by them during college. She has worked at 25 to 30 different jobs over the 16 years. When she is in the upswing of Bipolar, she is able to get a job because she is bright and a hard worker. But when the depression hits her and she can't get out of bed for a few days, she loses her job. She has worked hard to try to beat the mental illness by going to therapy, and taking the meds her psychiatrist prescribes. She wants to be well and be able to earn enough to be able to provide a living for herself. Only 1 of the jobs she has worked offered her medical insurance, and that was a janitor job at KU. But when her depression knocked her out of that job, she and we, her parents, just wanted to cry.

Please show some compassion and extend a helping hand to many people who could use a little help with health insurance.

Thank you.

Bill & Robin Wood  
2612 W 27th Terr.  
Lawrence KS 66047

Dear Chair and committee members,

I appreciate you holding a hearing on this important issue and for providing an opportunity for Kansans to express their support for Medicaid Expansion. For too many years hundreds of thousands of Kansans have fallen into an insurance coverage gap.

Our leaders in Topeka have been on the precipice of doing the right thing by expanding Medicaid on multiple occasions, but have fallen short for reasons that have frustrated Kansans. This is your opportunity to finally get Medicaid Expansion across the finish line. Forty other states have experienced the benefits of expanding Medicaid, including:

- Significant drop in the uninsured rate
- Stabilization of health care costs for everyone as uncompensated care declines
- Increased access to mental health services
- Reduction in medical debt leading to financial stability for Kansas families
- Healthier and more abundant workforce
- Strong healthcare system is an asset for businesses looking to relocate
- Creation of new jobs
- Enhanced financial stability for rural hospitals

**And quite simply, Medicaid Expansion will save lives.**

In addition to the positives listed above, the bill in front of your committee is revenue neutral and Kansas would receive a \$450 million bonus from the American Rescue Plan Act.

You have the power to do the right thing for Kansans.

For lack of a better term, Medicaid Expansion is really a “no brainer.”

Please pass this bill out of committee and encourage leadership to let the full chamber vote on expanding Medicaid.

Thank you,

Erin Woods  
Leawood, KS



March 20, 2024

Senator Carolyn McGinn, Chair

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

**RE: SB 355 / Neutral Testimony**

Madame Chair and Members of the Committee,

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

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

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

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

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

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

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

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

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

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

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

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

March 15, 2024

Please vote to expand Medicaid.

Thank you,

Kim Wright  
Leawood, KS 66206  
913-626-5220

March 15, 2024

Dear Kansas Legislators,

Please expand Medicaid in Kansas. The majority of your constituents want it- it is time to pass Medicaid expansion.

Yours truly,

Melissa Wurtz  
A Registered and Active Kansas Voter  
26035 W. 77th St  
Shawnee, KS 66227





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

To the Esteemed Members of the Kansas Legislature,

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

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

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

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

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

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

Sincerely,

Members of the Wyandotte County Health Equity Task Force

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

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

<https://www.wycohetf.org>



## Zeta Phi Beta Sorority, Incorporated

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Chi Delta Zeta Chapter Lawrence-Topeka

Regina Singleton, President

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

Re: HB 2556

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

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

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

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

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

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

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

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

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

Thank you for your consideration,

Sincerely,

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

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

Jeff Zmuda, Secretary

Laura Kelly, Governor

To: Senator Rick Billinger  
Chairman, Senate Ways and Means Committee

From: Jeff Zmuda, Secretary  
Kansas Department of Corrections

Date: March 20, 2024

Re: KDOC Testimony on Medicaid Expansion

Mr. Chairman, Committee, thank you for allowing me to present written testimony in support of the expansion of Medicaid eligibility in Kansas to any adults under the age of 65 who are not pregnant and whose incomes does not exceed 138 percent of the federal poverty level.

Currently, KDOC bills Medicaid for inpatient hospitalization services greater than 24 hours for residents who are over 65, under 18, pregnant, or disabled and who meet the income guidelines. Medicaid expansion would increase the number of residents who would be eligible, however, participation would continue to be limited to inpatient hospitalization services.

Under the provisions of the bill, we estimate that approximately 80 percent to 90 percent of our resident population would be eligible for Medicaid under this expansion. If passed, expanded coverage would take effect on January 1, 2025, resulting in a gross savings State General Fund of \$1.8 million in Fiscal Year 2025.

During Fiscal Year 2023, an estimated 82 KDOC residents qualified for Medicaid. Another 370 residents (about nine percent of the 3,851 who were released during the same period) also qualified for Medicaid under the current guidelines. Under the proposed Medicaid expansion, it is estimated that another 2,710 residents, or 80 percent of those released would be eligible for Medicaid. Released residents already encounter a number of challenges in reintegrating into society, and removing barriers to healthcare coverage, which would happen under Medicaid expansion, would greatly assist their transition and help them be successful upon their release. In

addition to removing a barrier to successful reintegration, there could be additional cost savings due to decreases in recidivism.

Medicaid expansion is likely to reduce recidivism rates in Kansas, and it could improve the quality of life for many recently incarcerated people. KDOC's goal has always been to return our residents to society as contributing and active members of their communities.

According to KFF, a non-profit specializing in health policy research, studies in both Washington and Florida found that released residents with mental illness who had the ability to enroll in Medicaid were more likely to access community services and after one year, had 16 percent fewer detentions. KDOC has recently begun gathering data to directly track the correlation with residents being released with access to Medicaid so that we can better understand the impact in Kansas.

Additionally, the bill would require KDOC to coordinate with a sheriff or keeper of a jail who requests assistance in facilitating Medicaid coverage for any eligible person in a Kansas jail or correctional facility. KDOC supports this provision as it would relieve county jails and taxpayers and again, reduce recidivism.

We support this bill.

Again, I thank you for allowing me to provide written testimony to you today.

Lynnette Krieger-Zook  
Medicaid Expansion Verbal Testimony  
Personal experience with the gap

Dear committee members:

Thank you for your time today. My sister, Cheryl, was a pharmacy tech making \$12 an hour. She was a hard worker, supporting herself and her family. She paid taxes. She contributed to our community in southeast Kansas.

But Cheryl died on June 16, 2018 at the age of 60.

I stand before you today because if we had expanded Medicaid, Cheryl might still be here today. You see, Cheryl made “too much” to qualify for Medicaid, and couldn’t afford insurance through the exchange. She had to make an impossible decision: would she pay \$500 for health insurance through her employer or pay rent of \$600?

Because she thought she was healthy... and on a limited income... she chose to pay rent. These are choices no one should have to make in America.

When Cheryl began to have health concerns, she went to the Doctor. As she didn’t have insurance, so it took months to work through the least expensive tests and procedures she could afford out of pocket. In July 2017, the results came back. A rare and aggressive form of uterine cancer. It was urgent that she have surgery.

Surgery was scheduled for August 1, 2017 but Cheryl had to have insurance to cover the needed surgery and chemo. Together we worked for two weeks with hours spent daily calling to find any resource out there to help Cheryl get the surgery she needed.

Finally, through contacting Senator Moran and her local state representative we were able to meet the Doctor and hospital requirements. The day of surgery the Doctor came out shortly after surgery started. The cancer had spread throughout her body and he could only close her back up with a grim future.

We were too late. But it didn’t have to be this way. \*\*

You see, I had a similar situation, but I have affordable health insurance through my employer. I don’t have to choose between rent or my health. In 2018 following Cheryl’s death I went in for my annual physical, paid for by my insurance. A week later I received a phone call that my tests showed precancer cells. That very day, I was referred to a gynecologist and 4 days later I had a biopsy. The very next day test results were in and a complete hysterectomy was recommended. Surgery was scheduled and all precancer cells were removed.

Two stories two very different outcomes. If we had expanded Medicaid, Cheryl would have had regular doctor's appointments. She would have gotten in to see the doctors quicker and maybe - just maybe - Cheryl would still be here today. She would have watched her children get married and played with her grandsons.

This is what not having affordable health insurance looks like, my friends. There's absolutely no logical reason why we can't expand Medicaid now. We know Medicaid expansion saves lives.

We owe it to my sister Cheryl, we owe it to her family who no longer get to enjoy her presence, we owe it to the people of Kansas to do right by each other. To help each other. It's what being a Kansan is all about. Thank you.