

**2023**  
**BRIEFING**  
**BOOK**

**ON**  
**KANCARE**  
**EXPANSION**



**ALLIANCE FOR A**  
**HEALTHY KANSAS**



## WHAT'S AT STAKE?

Costs are rising and Kansans are paying more to take care of themselves and provide for their families. Health care is no exception. It's time to help Kansans get more for their money when it comes to health care and bring good paying jobs to our state.

Expanding KanCare will reduce health care costs for everyone by providing health insurance to 150,000 residents in rural areas, small towns, and cities across the state. Expanding KanCare will provide coverage to hard-working Kansans and result in much needed investments in our communities to strengthen our hospitals, clinics, and provider networks. It also will protect and bring in thousands of jobs, keeping us competitive for local businesses and remain a good place to live, work, and raise a family.

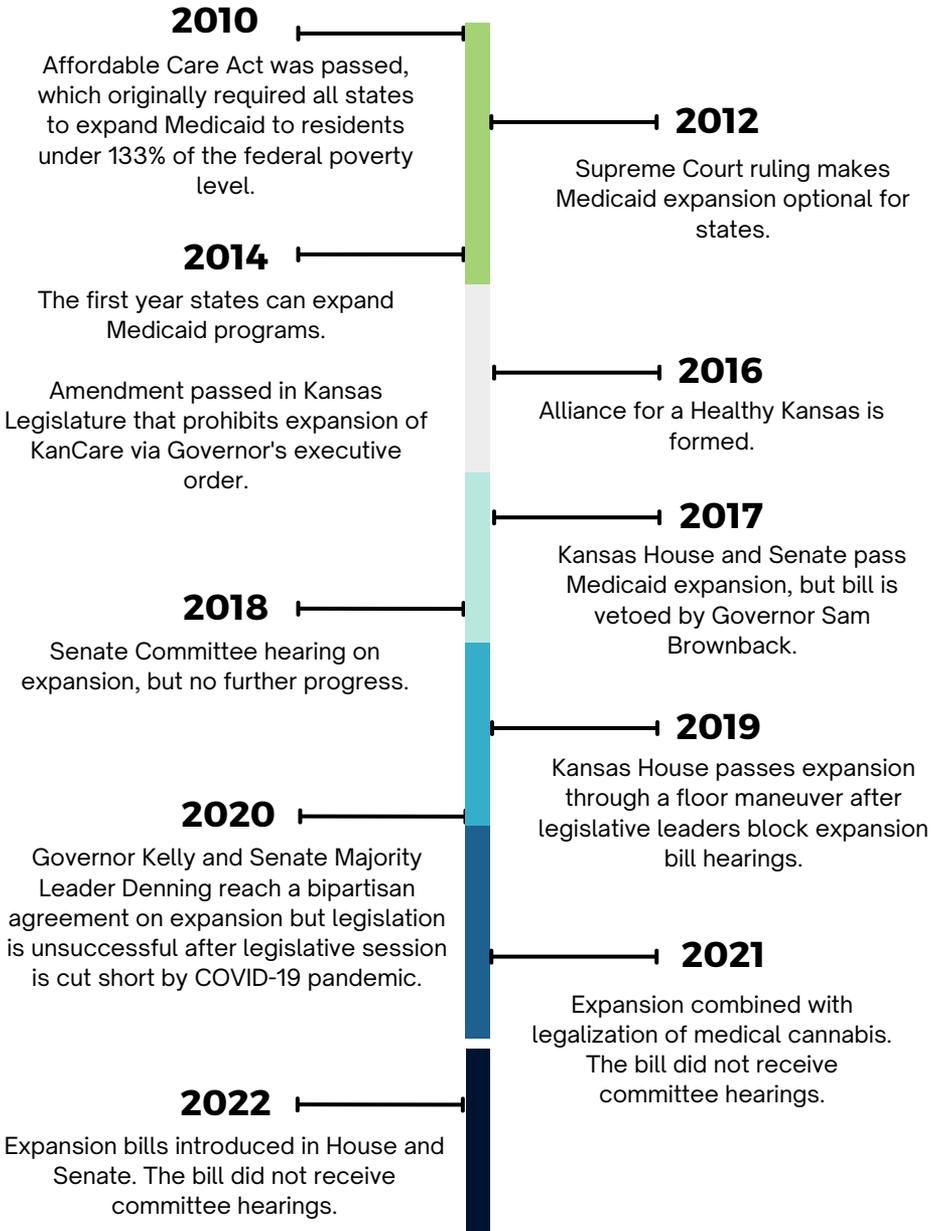
Now is the time to invest in our state and ensure that Kansans have access to the care they need when they need it. **Now is the time to expand KanCare or all of us will keep paying the price.**

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# A timeline of KANCARE EXPANSION



# KanCare Expansion BY THE NUMBERS

**\$8,750**

The maximum amount a family of three could make per year in 2022 to qualify for Medicaid in Kansas. That's about **\$730** per month.

**23,000**

The number of new jobs that would be created in the first full year of KanCare expansion.

**150,000**

The number of Kansans who would benefit from coverage under expanded KanCare.

**75%**

The number of Kansans with disabilities who do not qualify for either KanCare or Medicare coverage today.

**55**

The number of rural hospitals at immediate or high risk of closing in Kansas

**90%**

Amount the federal government covers (by law) of the costs associated with expanding Medicaid. This is unlikely to change in the future because it would require an act of Congress. Thirty-nine states have already expanded and are enjoying the benefits of receiving billions of tax dollars to their states.

**\$450M**

The federal signing bonus under the American Rescue Plan Act if Kansas enacts expansion.

**2/3**

Number of those eligible for KanCare expansion who work or are in working families. Most are employed in the service industry, construction, retail, and other industries characterized by small firms that are less likely to offer affordable insurance.

**7%**

Amount marketplace premiums are lower in states that expanded Medicaid compared to non-expansion states like Kansas.

# FAST FACTS

- **Kansas is one of eleven states in the U.S. that hasn't yet expanded Medicaid.** All of our border states – Missouri, Oklahoma, Nebraska and Colorado – have expanded Medicaid.
- **Expanding KanCare will create jobs.** Nearly 23,000 new jobs would be created in the first full year of expansion. In addition to health care jobs, expansion would generate job growth in other industries, including retail and construction.
- **Expanding KanCare will return hundreds of millions of tax dollars back to the state.** By the end of 2022, Kansas had turned away more than \$6 billion in tax dollars since 2014. This comes from tax dollars that Kansans are already paying.
- **Expanding KanCare will strengthen health care providers, especially those in rural areas.** Kansas has more rural hospitals at risk of closing than any other state its size. KanCare expansion would reduce uncompensated care levels and help health care providers be more financially stable. This could mean the difference between these hospitals staying open or closing their doors. When hospitals close, rural Kansans have a more difficult time accessing care.
- **Most people eligible for KanCare are in working families.** About two-thirds of those eligible for expanded KanCare work or come from working families. Most are employed in the service industry, construction, or retail.
- **In order to qualify for KanCare in 2022, a family of three needed to earn less than \$8,750 per year (\$730 per month).** This low income limit means that one parent can only work about half-time in a minimum wage job before they earn too much to qualify. Expanding KanCare would allow these parents to get a better job or work more hours without losing health coverage.

# 8-in-10 Kansans want KANCARE EXPANSION

- **Expanding KanCare is not a political issue.** A recent statewide survey showed that 65% of Republicans, 76% of Independents and 96% of Democrats support expanding KanCare. Members from both Republican and Democratic parties in Kansas support it, and nationwide both Democratic and Republican Governors and Legislatures have passed expansion.
- **Support for expansion is widespread across the geography of Kansas.** Statewide, 85% of urban residents, 79% of suburban residents, and 73% of rural residents support expanding KanCare.

## CHANDRA, WICHITA

Chandra is one of the 8-in-10 Kansans who support KanCare expansion because of the story of her mom, Jo Anne.

After being uninsured and putting off health care for many years, Jo Anne was diagnosed with an aggressive form of lymphoma. Eight days after her first chemotherapy treatment, Jo Anne died.

Chandra believes that if her mom was able to get routine care, her cancer could have been detected and treated sooner, and she could have spent more time with her mom.



- **A supermajority of Kansans (81%) believe that everyone in Kansas should be able to get affordable health insurance.** They do not believe that income level, geography, race, gender, or immigration status should play a role in access to affordable health care.
- **KanCare expansion will save lives.** Expansion is associated with decreased mortality for all causes, as well as improvements in infant mortality. It directly enhances preventive care and use of mental health and substance use disorder services.
- **States without Medicaid expansion, like Kansas, show worse survival rates for people diagnosed with both early- and late-stage cancer.** Individuals diagnosed with newly-diagnosed cancer -- especially those who live in rural areas -- have better survival rates in Medicaid expansion states.

# KanCare expansion will **REDUCE HEALTH CARE COSTS** for everyone

- **Expanding KanCare will help stabilize health care costs for everyone.** Currently, the cost of providing care to uninsured individuals is passed on to others through higher health care costs. As workers gain insurance through expansion this uncompensated care declines, reducing the need to increase prices for all Kansans.
- **Uncompensated care remains a bigger problem in non-expansion states** such as Kansas. This means everyone ends up paying more for health care. Hospital systems that operate in both expansion and non-expansion states report significantly lower uncompensated care costs in states with expanded Medicaid programs.

## **DR. WHITNEY TRUSTY, KANSAS CITY**

Dr. Trusty is a family medicine physician in Kansas City. She sees many uninsured and underinsured patients in her practice. She is forced to adapt her treatment plans based on what a patient can afford rather than what is best for their health. She often refers her patients to safety net clinics because of the reduced and waived fees.

Dr. Trusty is one of the 8-in-10 Kansans who support KanCare expansion because she believes that care should not be dictated by how much you can afford to pay.



- **Expanding KanCare will make it possible for uninsured people in the coverage gap to access primary and preventive health care.** It also allows the previously uninsured to access prescription drug coverage, behavioral health services, and substance use disorder assistance.
- **States that have expanded Medicaid have generated savings and revenue** that not only offset the cost of expansion, but also create a surplus that could be used to expand Home & Community Based Services (HCBS) for individuals with disabilities.
- **Enhancing access to mental health and Substance Use Disorder (SUD) services will reduce long-term health care costs.** Untreated co-occurring psychiatric and chronic medical conditions are associated with significantly more expensive care.
- **KanCare expansion would help thousands of uninsured military veterans and their families.** About 7,400 veterans and their spouses would gain access to quality, affordable health care coverage with KanCare expansion. Veterans often do not have automatic and easy access to healthcare through the Department of Veterans Affairs, despite their service to our country.

KanCare expansion will protect from

# MEDICAL DEBT

- **KanCare expansion helps reduce medical debt and provides more financial stability.** Medical debt is one of the leading causes of bankruptcy. Expanding KanCare provides people in the coverage gap financial protection and helps improve overall financial stability.
- **KanCare expansion will reduce unpaid bills and medical debt.** This will reduce the number of referrals to collection agencies and the number of short-term payday loans taken out each month. It also will improve credit scores among those who gain coverage and allow those families to spend that money on other things.
- **Medicaid coverage improves social mobility and reduces the accrual of new medical debt and non-medical debt.** Additionally, access to health insurance, including Medicaid, directly contributes to cutting poverty by nearly one-quarter.

## BECKY PLATE, EUDORA

Becky is a nurse from Eudora, but she was uninsured before she got her nursing degree. One night, while uninsured, she started having chest pains and ended up in the emergency room. After being looked at, she found out her chest pain wasn't anything to worry about, but the bill she received was -- it took her two years to pay it off.

Becky is one of the 8-in-10 Kansans who support KanCare expansion because she doesn't want anyone else to go through the same thing she did when she was uninsured.



# KanCare expansion will **FIX ELIGIBILITY LIMITS** which are too low

- **KanCare expansion encourages work and job advancement among low-income parents.** In 2022, a single parent in Kansas made too much to qualify for KanCare if she earned more than about \$8,750 per year, or about \$730 per month for a family of three. Expanding KanCare would allow this single parent to work more hours or get a better job without losing health coverage.
- **An estimated 75% of Kansans with disabilities do not qualify for KanCare or Medicare.** Expansion would help these individuals in the coverage gap. This would include individuals who have serious difficulty hearing, seeing, walking, doing major life activities, and those with serious cognitive impairment. It also would help Kansans with degenerative diseases who do not yet meet the legal definition of having a disability by allowing them to get preventive and ongoing care to prevent or delay the deterioration of their condition.

## STEPHANNE, JACKSON COUNTY

Stephanne is a stay-at-home mom who lives in Jackson county. After the birth of her first child, she tried to get health insurance through her husband's job, but the coverage would have cost them nearly all of his paycheck. She has a pituitary microadenoma tumor, but has put off getting an MRI for more than eight years because of the cost.

Stephanne is one of the 8-in-10 Kansans who support KanCare expansion because she knows it will benefit working families in Kansas -- healthy kids need healthy parents.



# RURAL HEALTHCARE

- **Rural hospitals in non-expansion states such as Kansas are six times more likely to close than rural hospitals in states that have expanded Medicaid.** This means reduced access to care for people living in the area and a loss of highly skilled jobs, such as physicians and nurses, which can severely hurt the local economy.
- **Fifty-five Kansas rural hospitals are at risk of closing – more than any other state our size.** Expanding KanCare provides these hospitals with an additional stream of revenue and provides enhanced financial stability.
- **In Kansas, four hospitals have closed in the last few years,** in part due to the failure to expand KanCare. This means hundreds of jobs lost, a compromise in the health of residents in these communities, and loss of economic activity.

## JIM WILHOIT, WICHITA

Jim has been a farmer his entire life, but recently an injury to his foot meant he had to stop working. Jim does not have the option of employer-sponsored health coverage, so he does not have the health insurance he needs to get medical care. Jim loves farming crops and using big machinery, but he can't do the work he loves because of his injury.

Jim is one of the 8-in-10 Kansans who support KanCare expansion because he wants to get healthy and get back to doing the work that he loves.



- **KanCare expansion would result in improved hospital financial performance, improved operating margins, and a lower likelihood of closure.** Hospital systems with locations in both expansion and non-expansion states report a far higher reduction in uncompensated care in expansion state hospitals than in hospitals in non-expansion states such as Kansas.
- **Medicaid expansion has been a vital part of growing the next generation of farmers in North Dakota.** Access to affordable health insurance is one of the top three issues facing young people who want to begin farming. Expansion eliminates the need for a full-time off-farm job so these families can invest more time and money into their farming operation.
- **The importance of hospitals to rural communities goes well beyond health care.** Hospitals are among the largest employers in their communities and serve as local economic engines, creating jobs and attracting and supporting residents and businesses. Hospital closures are devastating to local economies. Expanding KanCare decreases uncompensated care from uninsured patients and provides a greater income source to the hospital.

# KanCare expansion keeps Kansas **ECONOMICALLY COMPETITIVE**

- **Expanding KanCare will keep Kansas from being left behind when recruiting new business to the state.** Health workers and communities with a strong health care system are important factors businesses consider when deciding where to locate. All of Kansas' surrounding states have expanded Medicaid, potentially making them more attractive for businesses looking to relocate.
- **KanCare expansion will provide insurance coverage for small businesses.** Small businesses are less likely than large employers to be able to afford to provide health insurance to their employees. In states that have expanded Medicaid, small business owners, self-employed individuals and small business employees have seen significant gains in insurance coverage. This means small businesses are better able to compete with larger companies when looking for employees.

## **DAVID TOLAND, TOPEKA**

*Lieutenant Governor and Secretary of Commerce*

"We have an economy that is booming in Kansas, with historically high job growth and historically low unemployment. It's urgent that we have every possible human being healthy and ready to work. When we can't provide preventative care and other health care treatments offered through Medicaid, people often have high absenteeism rates or stay home entirely. This puts Kansas companies and communities at a disadvantage to our competitors."



- **KanCare expansion will reduce business taxes.** Businesses that pay tax penalties for not providing health insurance as required by the Affordable Care Act would see those penalties decline as employees gain coverage through expansion.
- **KanCare expansion will enhance economic development.** Expansion improves the overall climate for doing business in Kansas and boosts economic development and business recruitment efforts. Healthier Kansans mean more healthy employees for businesses.
- **Kansas could lose business recruitment to surrounding states that have expanded Medicaid.** Medicaid directly helps businesses by providing coverage to workers who otherwise would lack access. Since all of Kansas' surrounding states have expanded Medicaid, businesses might choose to locate in one of those states.
- **Expanding KanCare will create jobs.** Nearly 23,000 new jobs will be created in the first full year of expansion. In addition to health care jobs, expansion would generate job growth in other industries, including retail and construction.

# KanCare expansion helps the **KANSAS WORKFORCE**

- **Nearly all Kansas industries employ Kansans who would potentially be eligible for KanCare if expanded.** Here is a breakdown of what industries would benefit the most and how many workers would become eligible for coverage:
  - Accommodation & food services: 23,000 Kansans
  - Retail workers: 19,500 Kansans
  - Health care & social assistance: 18,000 Kansans
  - Education: 17,000 Kansans
  - Manufacturing: 16,000 Kansans
  - Construction: 10,000 Kansans
- **Expanding KanCare supports a healthy and robust workforce.** Ohio and Michigan found that a majority of unemployed individuals said it was easier to look for work with access to health insurance. Additionally, a majority of employed adults reported that having health insurance made it easier to work or made them better at their jobs. Expanding KanCare would mean a healthier and more abundant workforce in Kansas.

## **TAMMI JOHNSON-ARELLANO, TOPEKA**

Tammi has cataracts in both eyes, and her condition is so severe that she is nearly blind. This leaves her not only unable to work, but also unable to drive or do other routine activities. She falls in the coverage gap, so she isn't able to get the surgery she needs to fix her eyes. She doesn't meet requirements for disability coverage, either.

Tammi is one of the 8-in-10 Kansans who support KanCare expansion because she knows having health insurance is key to being able to get back to work.



- **KanCare expansion would provide competitive and integrated employment opportunities for people with disabilities.** Research conducted at the University of Kansas shows that people with disabilities living in Medicaid expansion states are significantly more likely to be employed than those living in non-expansion states.
- **Direct support workers and personal care attendants who care for Kansans with disabilities would also benefit from expansion.** This workforce is the backbone of the disability services system. However, there is a shortage of these workers, in part because these jobs don't typically include health coverage. Expansion would provide coverage for these workers and assist with recruitment and retention.
- **States that have expanded Medicaid have seen minimal changes to the labor market.** Overall, the size of the labor force, number of worked hours, number of early retirements, wages and changes in self-employment were not reduced with Medicaid expansion. This data contradicts fears of some that expansion will cause a reduced labor force.

# KanCare expansion benefits **BEHAVIORAL HEALTH**

- **Expanding KanCare would increase revenues for health care providers who offer behavioral health services.** These increased revenues would benefit community mental health centers (CMHCs) and federally qualified health centers (FQHCs), among others.
- **Medicaid expansion is associated with an increase in the number of mental health providers accepting Medicaid patients.** FQHCs in expansion states also saw an average decrease in uncompensated care.
- **Individuals who need services for mental health and substance use disorders (SUD) make up a substantial share of those who would gain coverage.** In Kansas, nearly one-third of uninsured individuals who would qualify for KanCare expansion experienced mental illness or SUD within the last year. Less than 14% of those people received treatment, largely due to the lack of access to affordable care.

## **CHRISIE STONEQUIST, WELLSVILLE**

Chrisie, from Wellsville, is a mom and grandmother. She has been diagnosed with Bipolar PTSD, anxiety and depression. Because she is uninsured, she struggles to get medication and see doctors for treatment.

Chrisie is one of the 8-in-10 Kansans who support KanCare expansion because she knows the importance of mental health. She would be able to get back to work if she could access routine care and medication.



- **Medicaid expansion has been associated with a reduction in childhood neglect.** In Kansas, neglect is the most frequent reason for removal of children from their home. For the 1,000 Kansas children that were removed from their homes for neglect in state fiscal year 2021, approximately 320 fewer children would have entered the foster care system with KanCare expansion.
- **Expansion has been associated with fewer arrests and reduced rates of rearrests.** This may lead to reduced spending at county jails in Kansas and reduced incarceration in the criminal justice system.
- **Medicaid expansion is associated with a significant reduction in some crime.** These crimes include property crime and violent crime. Researchers attribute the change to access to health care, increased financial stability and reduced exposure to high medical debt, and treatment for mental health and substance disorders.
- **The share of opioid-related hospitalizations of uninsured patients fell dramatically in states that expanded Medicaid,** from 13.4% in 2013 (the year before expansion took effect) to just 2.9% two years later.

# OTHER STATE OUTCOMES

## from Medicaid Expansion

Thirty-nine states, including all of Kansas' surrounding states, have expanded their Medicaid programs. Most recently, South Dakota passed Medicaid expansion through a ballot initiative in November 2022, making Kansas more of an island without affordable health insurance.

Here are some of the benefits other states have seen from expansion.

### Missouri (expanded in 2021)



- An additional 275,000 Missourians became eligible for Medicaid after expansion passed by a ballot initiative.
- Missouri is receiving a signing bonus of approximately \$968 million during the first 2 years of expansion through the American Rescue Plan Act. This more than offsets the estimated \$156 million cost of expansion in 2022.

### Oklahoma (expanded in 2021)



- Oklahomans approved Medicaid expansion in June 2020 by a ballot initiative, with 50.5% of the vote approving expansion.
- Nearly 250,000 Oklahomans enrolled in Medicaid in the first six months of expansion.

## Nebraska (expanded in 2020)



- Nebraskans approved Medicaid expansion in 2018 by a ballot initiative, with 53% of the vote approving expansion.
- In the first two months, 11,000 Nebraskans submitted an application for coverage.
- An estimated 90,000 Nebraskans became eligible for coverage under the expanded Medicaid program.

## Louisiana (expanded in 2016)



- In FY2017, expansion saved the state general fund \$199 million because:
  - Some Medicaid enrollees were funded at a lower state match,
  - Disproportionate share payments to hospitals fell as the number of uninsured people fell, and
  - Additional revenue from a premium tax on managed care organizations.
- Expansion generated \$4 billion in new revenue for the state's health care providers.
- Louisiana saw a 50% reduction in the number of uninsured residents from 2013 - 2017.

## Montana (expanded in 2016)



- The direct fiscal effects of Medicaid expansion created savings of \$25.2 million, fully offsetting state costs in FY2017.
- In 2018 and 2019, approximately 59% of businesses in Montana had employees enrolled in Medicaid.
- Without Medicaid expansion, Montana employers would be subject to tax penalties estimated to be between \$11.1 million and \$16.7 million.
- As of 2020, the Montana expansion program has saved the state health department more than \$30 million.

## Kentucky (expanded in 2014)



- Between 2014 - 2016, Kentucky saved \$13.5 million in uncompensated care costs.
- Most of the federal money that has supported expansion in Kentucky has gone to doctors, hospitals, pharmacists and others who provide care, according to the state's secretary of the Cabinet for Health and Family Services.
- Kentucky saw a 58% reduction in the uninsured rate from 2010 to 2019.

## Michigan (expanded in 2014)



- Michigan was able to save money from mental health and correctional health programs that originally were covered completely by state funds. Under expansion, these programs were eligible for 90% coverage with federal funds.
- Additionally, the increased federal funding coming into the state generated more than 30,000 new jobs and about \$150 million additional revenue for state government via income and sales taxes.
- 90% of Michigan hospitals saw a decline in uncompensated care, from \$7.8 million in FY2013 to \$3.8 million in FY2016.
- A greater proportion of enrollees in the Medicaid program reported being employed and/or a student; in 2018, 61% reported working or going to school versus 55% in 2016.

# KanCare Expansion by **KANSAS COUNTY**

COUNTY	# OF NEW JOBS CREATED	NEW ANNUAL HEALTH CARE SPENDING
Allen	104	\$2,675,844
Anderson	61	\$1,565,928
Atchison	103	\$2,667,240
Barber	34	\$ 869,004
Barton	250	\$6,461,604
Bourbon	112	\$2,890,944
Brown	82	\$2,125,188
Butler	342	\$8,836,308
Chase	15	\$ 378,576
Chautauqua	35	\$ 894,816
Cherokee	160	\$4,147,128
Cheyenne	22	\$ 559,260
Clark	13	\$ 326,952
Clay	57	\$1,479,888
Cloud	59	\$1,522,908
Coffey	49	\$1,256,184
Comanche	10	\$ 266,724
Cowley	292	\$7,537,104
Crawford	524	\$13,542,696
Decatur	20	\$ 524,844
Dickinson	141	\$3,630,888
Doniphan	54	\$1,402,452
Douglas	1,013	\$26,164,764
Edwards	29	\$ 757,152
Elk	21	\$ 550,656
Ellis	222	\$5,730,264
Ellsworth	34	\$ 877,608
Finney	447	\$11,555,172
Ford	502	\$12,974,832
Franklin	169	\$4,362,228
Geary	249	\$6,444,396
Gove	16	\$ 412,992
Graham	18	\$ 456,012
Grant	78	\$2,004,732
Gray	61	\$1,565,928
Greeley	11	\$ 292,536
Greenwood	46	\$1,178,748
Hamilton	36	\$ 937,836
Harper	48	\$1,238,976
Harvey	230	\$5,953,968
Haskell	53	\$1,368,036
Hodgeman	15	\$ 378,576
Jackson	104	\$2,684,448
Jefferson	104	\$2,675,844
Jewell	20	\$ 516,240
Johnson	2,191	\$56,605,716
Kearny	44	\$1,144,332
Kingman	39	\$1,006,668
Kiowa	22	\$ 567,864
Labette	162	\$4,181,544

<b>COUNTY</b>	<b># OF NEW JOBS CREATED</b>	<b>NEW ANNUAL HEALTH CARE SPENDING</b>
Lane	12	\$ 309,744
Leavenworth	413	\$10,660,356
Lincoln	22	\$ 567,864
Linn	82	\$2,107,980
Logan	22	\$ 567,864
Lyon	388	\$10,032,264
McPherson	165	\$4,267,584
Marion	74	\$1,918,692
Marshall	53	\$1,368,036
Meade	44	\$1,144,332
Miami	146	\$3,759,948
Mitchell	33	\$ 860,400
Montgomery	288	\$7,451,064
Morris	41	\$1,049,688
Morton	29	\$ 757,152
Nemaha	48	\$1,247,580
Neosho	136	\$3,519,036
Ness	22	\$ 567,864
Norton	30	\$ 774,360
Osage	113	\$2,916,756
Osborne	25	\$ 645,300
Ottawa	37	\$ 955,044
Pawnee	37	\$ 963,648
Phillips	33	\$ 851,796
Pottawatomie	133	\$3,424,392
Pratt	72	\$1,849,860
Rawlins	16	\$ 421,596
Reno	480	\$12,398,364
Republic	26	\$ 679,716
Rice	76	\$1,953,108
Riley	879	\$22,714,560
Rooks	40	\$1,032,480
Rush	21	\$ 550,656
Russell	56	\$1,436,868
Saline	438	\$11,314,260
Scott	36	\$ 929,232
Sedgwick	5,139	\$132,802,740
Seward	349	\$9,025,596
Shawnee	1,203	\$31,094,856
Sheridan	11	\$ 292,536
Sherman	47	\$1,221,768
Smith	21	\$ 533,448
Stafford	39	\$1,006,668
Stanton	21	\$ 550,656
Stevens	66	\$1,694,988
Sumner	159	\$4,104,108
Thomas	61	\$1,565,928
Trego	18	\$ 464,616
Wabaunsee	40	\$1,041,084
Wallace	10	\$ 258,120
Washington	39	\$ 998,064
Wichita	20	\$ 516,240
Wilson	60	\$1,540,116
Woodson	26	\$ 662,508
Wyandotte	2,486	\$64,237,464

# Pushing back against OPPOSING ARGUMENTS

## Harm to Kansans with disabilities

They say: Expanding KanCare will harm people with disabilities by putting them at the end of the line for services.

**We know: Kansans with disabilities who are waiting for Home & Community Based Services already receive medical services under KanCare. However, 75% of Kansans with disabilities do not currently qualify for KanCare or Medicare, and expansion would allow these individuals and their direct care attendants in the coverage gap to access affordable health care.**

## Underestimated costs

They say: Many states underestimate the number of people who will enroll in expanded coverage, leaving the state on the hook for higher-than-anticipated costs.

**We know: One of the few benefits to being one of the last states in the U.S. to expand Medicaid means we have been able to watch and learn from previous states how to more accurately predict the costs associated with Medicaid. As more states have expanded, more research has come out to help us understand the number of people enrolling and the timing of them doing so.**

## Increased size of government

They say: Medicaid expansion would cause more government spending and higher taxes on hardworking Kansans.

**We know: Thirty-nine states, including all of Kansas' surrounding states, have expanded their Medicaid programs. Attempts to undo the Affordable Care Act at the federal level have failed and critical mass on the issue of Medicaid expansion on a national level was achieved years ago. At this point, Kansas' continued refusal to expand does not reduce the size of government; it just hurts Kansans.**

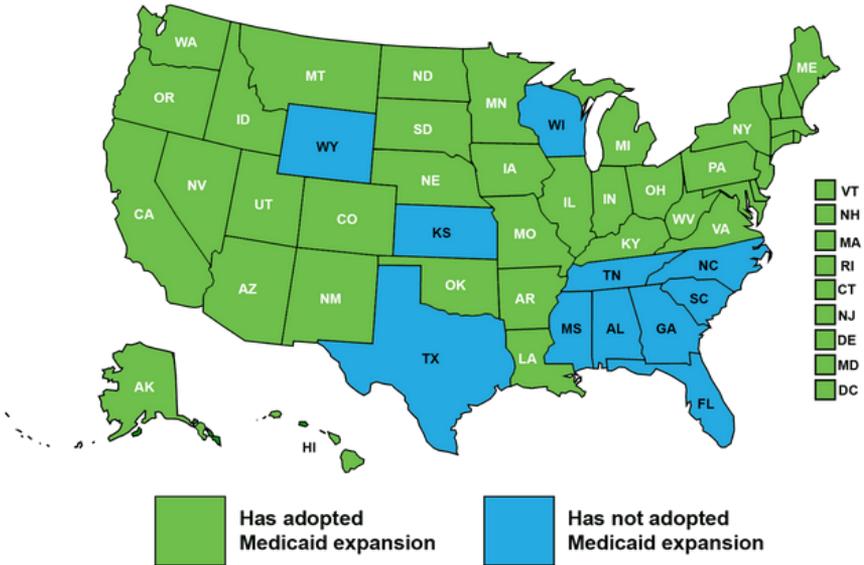
## Abortion

They say: Expanding KanCare will result in state-funded abortions.

**We know: Current law prohibits the use of state or federal dollars for abortion services. However, expanding KanCare would allow for more prenatal and postpartum care.**

# Medicaid Expansion in the **UNITED STATES**

## Status of State Action on Medicaid Expansion



- **Thirty-nine states – including all of Kansas' surrounding states – already have expanded Medicaid.**
- **The American Rescue Plan Act of 2021 provides a signing bonus for states that haven't implemented expansion.** This would result in Kansas seeing an up to an additional \$450 million in new dollars during the first two years.
- **The return to KanCare eligibility determinations after the COVID-19 Public Health Emergency (PHE) will cause thousands of Kansans to lose health insurance coverage.** During the PHE, eligibility determinations were paused and KanCare participants remained in the program, with a few exceptions. Starting in April 2023, ineligible individuals will lose that coverage; many of them will enter the coverage gap. This makes KanCare expansion even more critical to the health of Kansans and the state.

# Alliance for a Healthy Kansas COALITION MEMBERS

ADAPT - KANSAS  
 AMERICAN CANCER SOCIETY CANCER ACTION NETWORK  
 AMERICAN COLLEGE OF CARDIOLOGY  
 AMERICAN FEDERATION OF TEACHERS - KANSAS  
 AMERICAN HEART ASSOCIATION  
 AMERICAN LUNG ASSN IN KANSAS & GREATER KANSAS CITY  
 ASCENSION VIA CHRISTI  
 ASSN OF COMMUNITY MENTAL HEALTH CENTERS OF KANSAS  
 BETTER TOGETHER  
 BIG TENT COALITION  
 BREAKTHROUGH HOUSE  
 CAIRN HEALTH  
 CAPPER FOUNDATION  
 CENTRAL PLAINS HEALTH CARE PARTNERSHIP, INC  
 CHC IN COWLEY COUNTY  
 CHILDREN'S ALLIANCE OF KANSAS  
 COMMUNITIES CREATING OPPORTUNITY (CCO)  
 COMMUNITY CARE NETWORK OF KANSAS  
 COMMUNITY HEALTH CENTER OF SOUTHEAST KANSAS  
 COMMUNITY HEALTH COUNCIL OF WYANDOTTE COUNTY  
 CROSS-LINES COMMUNITY OUTREACH  
 CULTIVATE KANSAS CITY  
 DISABILITY RIGHTS CENTER OF KANSAS  
 DOUGLAS COUNTY CHILD DEVELOPMENT ASSOCIATION  
 DOUGLAS COUNTY COALITION ON AGING  
 EAST CENTRAL KANSAS ECONOMIC OPPORTUNITY CORP  
 EL CENTRO INC., KANSAS CITY  
 FAITH VOICES FOR MEDICAID EXPANSION  
 FIRST CARE CLINIC  
 FLINT HILLS COMMUNITY HEALTH CENTER  
 FREEDOM HEALTHY CHOICES COMM. DEVELOPMENT CORP  
 FRIENDS OF YATES, INC.  
 GRACE UNITED METHODIST CHURCH WINFIELD  
 GRACEMED  
 GRASS ROOTS ADVOCATES FOR INDEPENDENT LIVING  
 HEALTH ALLIANCE OF SEDGWICK COUNTY  
 HEALTH FORWARD FOUNDATION  
 HEALTH PARTNERSHIP CLINIC  
 HEALTHY COMMUNITIES WYANDOTTE  
 HEARTLAND COMMUNITY HEALTH CENTER  
 JERRY WHITE FAMILY CARE CLINIC  
 JEWISH FAMILY SERVICES OF GREATER KANSAS CITY  
 JOHNSON COUNTY MENTAL HEALTH CENTER  
 KANCARE ADVOCATES NETWORK  
 KANSAS AARP  
 KANSAS ACADEMY OF FAMILY PHYSICIANS  
 KANSAS ACTION FOR CHILDREN  
 KANSAS ADVOCATES FOR BETTER CARE  
 KANSAS AFL-CIO  
 KANSAS APPLESEED  
 KANSAS AREA AGENCIES ON AGING  
 KANSAS ASSOCIATION OF ADDICTION PROFESSIONALS  
 KANSAS ASSN OF CENTERS FOR INDEPENDENT LIVING  
 KANSAS ASSN OF COMMUNITY ACTION PROGRAMS  
 KANSAS ASSN OF LOCAL HEALTH DEPARTMENTS  
 KANSAS BREASTFEEDING COALITION  
 KS CHAPTER OF THE AMERICAN ACADEMY OF PEDIATRICS  
 KANSAS CHAPTER, NATIONAL ASSN OF SOCIAL WORKERS  
 KANSAS CITY KANSAS CHAMBER OF COMMERCE  
 KANSAS CITY MEDICAL SOCIETY FOUNDATION  
 KS COALITION AGAINST SEXUAL & DOMESTIC VIOLENCE  
 KANSAS DENTAL HYGIENISTS ASSOCIATION  
 KANSAS EMS ASSOCIATION  
 KANSAS EQUALITY COALITION  
 KANSAS FARMERS UNION

KANSAS HEAD START ASSOCIATION  
 KANSAS HEALTH CARE ASSOCIATION  
 KANSAS HEALTH FOUNDATION  
 KANSAS HOMECARE ASSOCIATION  
 KANSAS HOSPITAL ASSOCIATION  
 KANSAS INTERFAITH ACTION  
 KANSAS MENTAL HEALTH COALITION  
 KANSAS NATIONAL EDUCATION ASSOCIATION  
 KANSAS NURSES ASSOCIATION  
 KANSAS RURAL CENTER  
 KEYS FOR NETWORKING, INC  
 KIDSTLC  
 KONZA PRAIRIE COMMUNITY HEALTH & DENTAL CENTER  
 LABETTE ASSISTANCE CENTER  
 LAWRENCE UNITARIAN FELLOWSHIP  
 LEAGUE OF WOMEN VOTERS OF KANSAS  
 LEUKEMIA & LYMPHOMA SOCIETY, KANSAS  
 MAINSTREAM COALITION  
 MARCH OF DIMES  
 MENTAL HEALTH AMERICA OF THE HEARTLAND  
 NATIONAL ALLIANCE ON MENTAL ILLNESS - NAMI KANSAS  
 NATIONAL MULTIPLE SCLEROSIS SOCIETY  
 NATIONAL ORGANIZATION FOR RARE DISORDERS  
 NEIGHBOR TO NEIGHBOR ON CEDAR ST. FOUNDATION  
 NURTURE KC  
 ORAL HEALTH KANSAS  
 OVERLAND PARK CHAMBER OF COMMERCE  
 PLANNED PARENTHOOD  
 POETRY FOR PERSONAL POWER  
 POSTPARTUM SUPPORT INTERNATIONAL - KS CHAPTER  
 PROSTATE CANCER NETWORKING GROUP  
 PUBLIC HEALTH ASSOCIATION  
 REACH HEALTHCARE FOUNDATION  
 ROSEDALE DEVELOPMENT ASSOCIATION  
 SALINA FAMILY HEALTHCARE CENTER  
 SELF-ADVOCATES COALITION OF KANSAS (SACK)  
 SHAWNEE CO HEALTH AGENCY & COMM HEALTH CTR  
 SILVER CITY HEALTH CENTER  
 SOUTHWEST BOULEVARD FAMILY HEALTH CARE  
 ST. PAUL'S UNITED METHODIST CHURCH LENEXA  
 SUNFLOWER FOUNDATION  
 SUSAN G KOMEN OF KANSAS AND WESTERN MISSOURI  
 SWOPE HEALTH SERVICES  
 TEAM SAINT MARK PRISON MINISTRY GROUP  
 THE ARC OF DOUGLAS COUNTY  
 THE FAMILY CONSERVANCY  
 THE MIDLAND GROUP  
 THE WHOLE PERSON  
 THRIVE ALLEN COUNTY  
 THRIVE HEALTH CONNECTION  
 TOPEKA CENTER FOR PEACE & JUSTICE  
 TOPEKA INDEPENDENT LIVING RESOURCE CENTER  
 UNITED COMMUNITY SERVICES OF JOHNSON CO INC  
 UNITED METHODIST HEALTH MINISTRIES FUND  
 UNITED WAY OF GREATER KANSAS CITY  
 UNITED WAY OF GREATER TOPEKA  
 VIBRANT HEALTH  
 WESTERN KANSAS COMMUNITY FOUNDATION  
 WICHITA HUTCHINSON FEDERATION OF LABOR  
 WICHITA MEDICAL RESEARCH & EDUCATION FOUNDATION  
 WICHITA PEACE CENTER  
 WOMEN FOR KANSAS  
 WYANDOT BEHAVIORAL HEALTH NETWORK  
 WYANDOTTE HEALTH FOUNDATION

# 2023 CALENDAR

## JANUARY

S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

## FEBRUARY

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

## MARCH

S	M	T	W	T	F	S
			1	2	3	4
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12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

## APRIL

S	M	T	W	T	F	S
						1
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9	10	11	12	13	14	15
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23	24	25	26	27	28	29
30						

## MAY

S	M	T	W	T	F	S	
		1	2	3	4	5	6
	7	8	9	10	11	12	13
	14	15	16	17	18	19	20
	21	22	23	24	25	26	27
	28	29	30	31			

# ABOUT US

The Alliance for a Healthy Kansas is a statewide coalition working throughout Kansas, encouraging people and organizations to promote policies that ensure everyone has the opportunity to attain their highest level of health. The first policy goal of the Alliance is to expand KanCare to cover more Kansans. Expanding KanCare would bring down health care costs for everyone; protect Kansans against medical debt; provide affordable insurance for 150,000 Kansans; preserve and strengthen rural health care; and keep Kansas economically competitive.

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