

### WHAT'S AT STAKE?

Kansas has a health coverage problem. Tens of thousands of Kansans fall into the coverage gap and don't have access to affordable health insurance. Kansas has some of the most strict requirements in the country to qualify for Medicaid. A single parent with two children won't qualify for coverage if they make more than about \$9,800 per year. Childless adults don't qualify for Medicaid regardless of how low their income is.

Expanding Medicaid will make health insurance accessible to 150,000 Kansans who otherwise may not have affordable coverage.

It also ensures that low-wage Kansans can access affordable health care, regardless of their race, how much money they make, or what their ZIP code is.

It's time for policymakers to pass a long-term, sensible solution to this health coverage problem. Forty states in the U.S., including all of the states bordering Kansas, have expanded Medicaid, and it's time to take action to make sure that Kansas doesn't get left behind.

The overwhelming majority of Kansans agree — it's time to expand Medicaid.



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### A timeline of

### **MEDICAID EXPANSION**

in Kansas

#### 2010

Affordable Care Act was passed, which originally required all states to expand Medicaid to residents under 133% of the federal poverty level

#### 2014 +

The first year states can expand Medicaid programs.

Amendment passed in Kansas Legislature that prohibits expansion of KanCare via Governor's executive order.

#### 2018

Senate Committee hearing on expansion, but no further progress.

#### **2020 -**

Governor Kelly and Senate Majority Leader Denning reach a bipartisan agreement on expansion but legislation is unsuccessful after legislative session is cut short by COVID-19 pandemic.

#### 2022 & 2023 +

Expansion bills introduced in House and Senate. The bill did not receive committee hearings.

#### **- 2012**

Supreme Court ruling makes Medicaid expansion optional for states.

#### **---** 2016

Alliance for a Healthy Kansas is formed.

#### **→ 2017**

Kansas House and Senate pass Medicaid expansion, but bill is vetoed by Governor Sam Brownback.

#### **- 2019**

Kansas House passes expansion through a floor maneuver after legislative leaders block expansion bill hearings.

#### + 2021

Expansion combined with legalization of medical cannabis.
The bill did not receive committee hearings.

# Medicaid Expansion BY THE NUMBERS

The maximum amount a family of three could make per year in 2024 for the parents to qualify for Medicaid in Kansas. That's about \$817 per month.

**23,000** The approximate number of new jobs that would be created in Kansas in the first full year of Medicaid expansion.

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

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

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

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. Forty 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.

Number of those eligible for Medicaid expansion in Kansas 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.

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

### **FAST FACTS**

- Kansas is one of ten states in the U.S. that hasn't yet expanded Medicaid. All of our border states – Missouri, Oklahoma, Nebraska and Colorado – have expanded Medicaid.
- Expanding Medicaid will create jobs. Nearly 23,000 new jobs would be created in the first full year of expansion. In addition to health care jobs, expansion would generate job growth in other industries, including retail and construction.
- Expanding Medicaid will return hundreds of millions of tax dollars back to the state. By the end of 2023, Kansas had turned away nearly \$7 billion in tax dollars since 2014. This comes from tax dollars that Kansans are already paying.
- Expanding Medicaid 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. Medicaid 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 Medicaid expansion 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 2024, a family of three needed to earn less than \$9,800 per year (\$817 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 Medicaid would allow these parents to get a better job or work more hours without losing health coverage.

### Kansans overwhelmingly support

### **MEDICAID EXPANSION**

- Medicaid expansion is not a political issue. A recent statewide survey showed that 65% of Republicans, 76% of Independents and 96% of Democrats support expanding Medicaid. Members from both Republican and Democratic parties in Kansas support it, and nationwide both Democratic and Republican Governors and Legislatures have passed expansion.
- 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 Medicaid.



Stephanie is a mom of three and caretaker for her grandfather. She now also owns her own cleaning business.

When the COVID-19 pandemic hit, Stephanie lost her job. She applied for Medicaid coverage and qualified for coverage. Thanks to KanCare, she was able to see a doctor regularly.



Stephanie lost her coverage when the pandemic ended, and now lives in the coverage gap. Like thousands of other Kansans, she now must worry about maintaining her health while also working and caring for her family.

- 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.
- Expanding Medicaid 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. One of the reasons for this is because in non-expansion states like Kansas, about 8% of cancer patients were uninsured. In states with Medicaid expansion, only about 2% of cancer patients were uninsured.

### Medicaid expansion will

# REDUCE HEALTH CARE COSTS for everyone

- Medicaid expansion 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.



Carol is a palliative care nurse and spent time working as a nurse oncologist. During the COVID pandemic, she saw many individuals become uninsured. Those individuals would come to her facility looking for preventive treatment or diagnosis.

Carol says it is critical that Kansans be able to access preventive health care.



Care is easier, more effective, and less expensive if issues are caught earlier. Carol is adamant that good health is critical to maintaining a healthy state and healthy workers.

- Medicaid expansion makes 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.
- Medicaid 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 Medicaid expansion. Veterans often do not have automatic and easy access to healthcare through the Department of Veterans Affairs, despite their service to our country.

### Medicaid expansion protects from

### **MEDICAL DEBT**

- Medicaid expansion helps reduce medical debt and provides more financial stability. Medical debt is one of the leading causes of bankruptcy. Expanding Medicaid provides people in the coverage gap financial protection and helps improve overall financial stability.
- Expanding Medicaid 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.



José Luis has lived and worked in Kansas City for more than 25 years, but most of that time he has lived uninsured.

Several years ago, he ended up in the emergency room and required an emergency procedure on his heart. Because he is uninsured, he was billed for the cost of the procedure in full.



José Luis isn't sure how he will ever pay the bill, as he is now retired. If he had insurance, he would have been able to get routine check-ups and maintain his health, and wouldn't have to worry about a medical bill he can't pay.

# FIX ELIGIBILITY LIMITS which are too low

- Medicaid expansion encourages work and job advancement among low-income parents. In 2024, a single parent in Kansas made too much to qualify for KanCare if she earned more than about \$9,800 per year, or about \$817 per month for a family of three. Expanding Medicaid 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 Medicaid 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.



Robyn is one of thousands of Kansans who lost their health insurance coverage after Medicaid renewals began again after the COVID-19 pandemic.

Robyn had Medicaid coverage. As the pandemic eased, she was able to pick up more shifts at work, but earning more pushed her out of Medicaid eligibility and into the health insurance coverage gap.



She doesn't make enough to qualify for subsidies on the Health Insurance Marketplace either, so she is concerned about how she will get the health care she needs now that she doesn't have any options for affordable health insurance.

### Medicaid expansion supports the

### KANSAS WORKFORCE

- Nearly all Kansas industries employ Kansans who would potentially be eligible for Medicaid 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 Medicaid 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 Medicaid would mean a healthier and more abundant workforce in Kansas.



Crystal is a mom of two and a social work student. She also works part-time at a domestic violence shelter. She used to have a full-time job, but in 2016 she became very sick and had to stop working.

She was uninsured for a while, and during that time she didn't get any medical care. Eventually her income fell low enough that she qualified for Medicaid, and then she was able to get the care she needed, including a surgery for her gallbladder.

With the end of the COVID-19 pandemic, Crystal lost her coverage as Medicaid renewals began. Like thousands of other Kansans, she isn't sure how she will get the medical care she needs now that she falls into the coverage gap again.

- Medicaid 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.

# Medicaid expansion keeps Kansas ECONOMICALLY COMPETITIVE

- Expanding Medicaid 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.
- Medicaid 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.



Tammy is a grandmother who recently moved from Missouri to Shawnee Mission. While living in Missouri, she qualified for Medicaid; Missouri expanded its Medicaid program in 2021. When she moved to Kansas, she ended up in the coverage gap.

Tammy says she would have reconsidered moving to Kansas if she had known she would lose her health insurance. She works in a warehouse and makes too much to qualify for KanCare. Her job does not offer her health insurance.

Tammy needs a knee replacement, but without insurance, she'll have to go without it. She is concerned that her serious knee issues will interfere with her ability to work and care for her granddaughter.

- Medicaid 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.
- Expanding Medicaid 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 Medicaid 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.

Medicaid expansion protects & strengthens

### **RURAL HEALTH CARE**

- 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.
- Kansas has more rural hospitals at risk of closing than any other state our size. Expanding Medicaid provides these hospitals with an additional stream of revenue and provides enhanced financial stability.
- In Kansas, five hospitals have closed in the last few years, in part due to the failure to expand Medicaid. This means hundreds of jobs lost, a compromise in the health of residents in these communities, and loss of economic activity.



Donna is a proud mother and cancer patient. Up until 2015, Donna worked as a para in her children's school district, then went to work managing her father's business. Unfortunately, beginning in 2016, she also became uninsured.

During this time doctors found tumors in Donna's legs. Care was difficult because she was uninsured. She scraped together money for her treatments and rationed her medication to make it last longer. Unfortunately, her cancer metastasized.

Donna has struggled with her cancer diagnosis because it came at a time when she didn't have health insurance. Fortunately she has recently reached the age to qualify for Medicare and can get care again, but the last 8 years have been a struggle.

- Medicaid 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 Medicaid
  decreases uncompensated care from uninsured patients
  and provides a greater income source to the hospital.

### Medicaid expansion benefits

### **BEHAVIORAL HEALTH**

- Expanding Medicaid 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 Medicaid 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.



Tayla is a mom and a mental health advocate who has fallen into the cycle many with behavioral health conditions have experienced: she needed a job with health insurance to manage her diagnoses of Bipolar I and PTSD, but those conditions made it difficult for her to get and keep a job, especially if they were untreated.



Thankfully Tayla has found a job that offers her health insurance, but she spent years living in the coverage gap. Medicaid expansion would have made all the difference to Tayla and the management of her behavioral health conditions.

- 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.

### Medicaid Expansion by

### **KANSAS COUNTY**

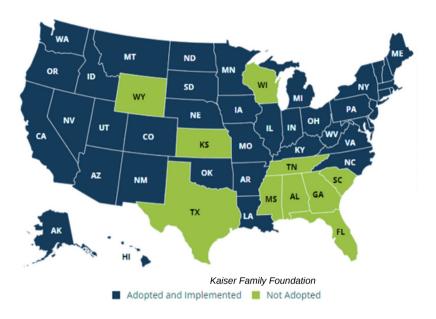
COUNTY	# OF NEW JOBS Created	NEW ANNUAL Health Care Spending
Allen	105	\$3,123,000
Anderson	59	\$1,737,000
Atchison	102	\$3,024,000
Barber	31	\$ 927,000
Barton	232	\$6,894,000
Bourbon	118	\$3,510,000
Brown	76	\$2,268,000
Butler	376	\$11,151,000
Chase	15	\$ 441,000
Chautauqua	38	\$1,116,000
Cherokee	174	\$5,166,000
Cheyenne	26	\$ 765,000
Clark	12	\$ 351,000
Clay	47	\$1,395,000
Cloud	56	\$1,665,000
Coffey	48	\$1,422,000
Comanche	10	\$ 288,000
Cowley	289	\$8,568,000
Crawford	426	\$12,636,000
Decatur	20	\$ 594,000
Dickinson	129	\$3,834,000
Doniphan	46	\$1,377,000
Douglas	1,165	\$34,587,000
Edwards	27 22	\$ 801,000
Elk Ellis	216	\$ 639,000
Ellsworth	31	\$6,417,000 \$ 927,000
	450	
Finney Ford	461	\$13,365,000 \$13,680,000
Franklin	186	\$5,517,000
Geary	295	\$8,766,000
Gove	18	\$ 522,000
Graham	19	\$ 567,000
Grant	79	\$2,349,000
Gray	52	\$1,548,000
Greeley	11	\$ 324,000
Greenwood	45	\$1,323,000
Hamilton	37	\$1,098,000
Harper	49	\$1,449,000
Harvey	236	\$7,020,000
Haskell	45	\$1,323,000
Hodgeman	12	\$ 369,000
Jackson	81	\$2,412,000
Jefferson	101	\$3,006,000
Jewell	22	\$ 639,000
Johnson	2,256	\$66,960,000
Kearny	42	\$1,251,000
Kingman	49	\$1,449,000
Kiowa	16	\$ 486,000
Labette	170	\$5,049,000
Lane	11	\$ 315,000

COUNTY	# OF NEW JOBS Created	NEW ANNUAL Health Care Spending				
Leavenworth	406	\$12,051,000				
Lincoln	20	\$ 603,000				
Linn	82	\$2,439,000				
Logan	21	\$ 612,000				
Lyon	365	\$10,827,000				
McPherson	169	\$5,022,000				
Marion	74	\$2,196,000				
Marshall	52	\$1,548,000				
Meade	39	\$1,143,000				
Miami	161	\$4,788,000				
Mitchell	39	\$1,152,000				
Montgomery	266	\$7,884,000				
Morris	39	\$1,170,000				
Morton	29	\$ 873,000				
Nemaha	49	\$1,458,000				
Neosho	125	\$3,708,000				
Ness	22	\$ 666,000				
Norton	 29	\$ 846,000				
Osage	108	\$3,213,000				
Osborne	25	\$ 747,000				
Ottawa	37	\$1,107,000				
Pawnee	38	\$1,116,000				
Phillips	29	\$ 873,000				
Pottawatomie	135	\$3,996,000				
Pratt	64	\$1,899,000				
Rawlins	18	\$ 522,000				
Reno	482	\$14,301,000				
Republic	29	\$ 873,000				
Rice	67	\$1,980,000				
Riley	774	\$22,968,000				
Rooks	39	\$1,170,000				
Rush	22	\$ 639,000				
Russell	51	\$1,521,000				
Saline	443	\$1,321,000				
Scott	41	\$1,206,000				
Sedgwick	4,994	\$1,200,000				
Seugwick	304					
	1,313	\$9,027,000				
Shawnee Sheridan	1,313	\$38,988,000				
Sherman	41	\$ 369,000 \$1.206.000				
	22					
Smith	37	\$ 666,000 \$1,107,000				
Stafford	20	\$1,107,000				
Stanton	52	\$ 603,000				
Stevens		\$1,557,000				
Sumner	156	\$4,617,000				
Thomas	56	\$1,665,000				
Trego	19	\$ 558,000				
Wabaunsee	37	\$1,098,000				
Wallace	10	\$ 288,000				
Washington	42	\$1,260,000				
Wichita	19	\$ 567,000				
Wilson	69	\$2,052,000				
Woodson	27	\$ 792,000				
Wyandotte	2,642	\$78,417,000				

Data sources: Census Bureau Small Area Health Insurance Estimates; KDHE cost for expansion per covered individual; and "The Economic and Employment Effects of Medicaid Expansion Under the American Rescue Plan" from the Commonwealth Fund.

# Medicaid Expansion in the UNITED STATES

### Status of State Action on Medicaid Expansion



- Forty states including all of Kansas' surrounding states already have expanded Medicaid.
- Federal law 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) has caused 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 lost that coverage and many of them fell into the coverage gap. This makes Medicaid expansion even more critical to the health of Kansans and the state.

### OTHER STATE OUTCOMES

### from Medicaid Expansion

Forty states, including all of Kansas' surrounding states, have expanded their Medicaid programs. Most recently, North Carolina and South Dakota passed Medicaid expansion in 2023, leaving Kansas one of only ten states without affordable health insurance.

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

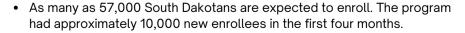
### North Carolina (expanded in 2023)



- North Carolinians became eligible for coverage from Medicaid expansion beginning December 1, 2023.
- As of January 12, 2024, 314,101 North Carolinians had enrolled in coverage, more than 50% of the 600,000 expected to enroll.
- Enrollees ranged in age from 19 to 64, with most enrollees between the ages of 19-29. More than 20% of enrollees were ages 50-64.
- About 25% of enrollees live in rural counties.

### South Dakota (expanded in 2023)

- South Dakotans became eligible for coverage from Medicaid expansion beginning July 1, 2023.
- Voters approved a ballot measure in November 2022, which added Medicaid expansion to the state constitution.



### Missouri (expanded in 2021)



- Missouri voters passed Medicaid expansion through a ballot initiative in August 2020. Due to legislative and legal challenges, enrollment didn't begin until October 1, 2021.
- In the first two years of enrollment about 342,000 Missourians have enrolled in coverage under expansion.
- Missouri has been eligibile to receive a signing bonus of approximately \$968 million during the first two 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. Coverage took effect June 1, 2021.
- Nearly 250,000 Oklahomans enrolled in Medicaid in the first six months of expansion.
- Since enrollment began, 330,521 Oklahomans have been approved for coverage through Medicaid expansion.
- Oklahoma received about \$500 million in additional signing bonus funding in the first two years of expansion.
- Oklahoma's uninsured rate dropped from 14.3% in 2019 to 11.7% in 2022.

### Nebraska (expanded in 2020)



- Nebraskans approved Medicaid expansion in 2018 by a ballot initiative, with coverage effective October 1, 2020.
- In the first two months, 11,000 Nebraskans submitted an application for coverage.
- Approximately two years after implementation, around 75,000 Nebraskans had enrolled in coverage.
- Nebraska's uninsured population fell from 9.7% in 2019 to 6.7% in 2022, after Medicaid expansion took effect.

### Colorado (expanded in 2014)

- Colorado enacted Medicaid expansion on the first day it was available: January 1, 2014.
- Approximately 289,000 Coloradans enrolled in Medicaid expansion in the first two years.



- Colorado's uninsured rate dropped from 15.8% in 2011 to 6.5% in 2019.
- Data from the Colorado Hospital Association showed that average uncompensated care costs decreased by 63% from 2013 to 2016, a \$549 million drop.
- Medicaid expansion has had no cost to the state's General Fund because of:
  - increased federal funding;
  - a hospital provider fee implemented to cover the state's portion of costs;
  - increased tax revenue due to the larger post-expansion economy;
     and
  - modest savings in other state programs.

# Pushing back against OPPOSING ARGUMENTS

#### Harm to Kansans with disabilities

They say: Expanding Medicaid 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 Medicaid. However, 75% of Kansans with disabilities do not currently qualify for Medicaid 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: Forty 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 Medicaid will result in state-funded abortions.

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

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## Alliance for a Healthy Kansas COALITION MEMBERS

ADAPT - KANSAS ALS ASSOCIATION

AMERICAN CANCER SOCIETY CANCER ACTION NETWORK

AMERICAN COLLEGE OF CARDIOLOGY

AMERICAN COLLEGE OF PHYSICIANS -- KANSAS CHAPTER

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

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 LINION

KANSAS HEAD START ASSOCIATION

KANSAS HEALTH CARE ASSOCIATION

KANSAS HEALTH FOLINDATION

KANSAS HOMECARE ASSOCIATION

KANSAS HOSPITAL ASSOCIATION KANSAS INTEREAITH ACTION

KANSAS MENTAL HEALTH COALITION

KANSAS NATIONAL EDUCATION ASSOCIATION

KANSAS NI IRSES ASSOCIATION

KANSAS RURAL CENTER

KANSAS SILVER HAIRED LEGISLATURE

KEYS FOR NETWORKING, INC

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

MISSION MOBILE MEDICAL

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

SELE-ADVOCATES COALITION OF KANSAS (SACK).

SHAWNEE CO HEALTH AGENCY & COMM HEALTH CTR

SILVER CITY HEALTH CENTER

SKIL RESOURCE 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 802 UNITED

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

### **2024 CALENDAR**

JANUARY								FE	BRL	JAR	1			
S	М	Т	W	Т	F	S		S	М	Т	W	Т	F	S
	1	2	3	4	5	6						1	2	3
7	8	9	10	11	12	13		4	5	6	7	8	9	10
14	15	16	17	18	19	20		11	12	13	14	15	16	17
21	22	23	24	25	26	27		18	19	20	21	22	23	24
28	29	30	31					25	26	27	28	29		
MARCH							APRIL							
S	М	Т	W	Т	F	S		S	М	Т	W	Т	F	S
					1	2			1	2	3	4	5	6
3	4	5	6	7	8	9		7	8	9	10	11	12	13
10	11	12	13	14	15	16		14	15	16	17	18	19	20
17	18	19	20	21	22	23		21	22	23	24	25	26	27
24	25	26	27	28	29	30		28	29	30				
31														
MAY														

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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 Medicaid to cover more Kansans. Expanding Medicaid reduce health care costs for everyone and protect Kansans from medical debt; support a healthier workforce and keep Kansas economically competitive; preserve and strengthen rural communities: and ensure uniform access to affordable health care for all Kansans.

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