



**Kansas Hospital
ASSOCIATION**

LEGISLATIVE PRIORITIES

2026

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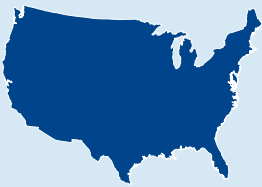
ACCESS TO CARE



Once a top-ten state, Kansas health rankings have fallen to #28.

ENSURING ACCESS TO CARE

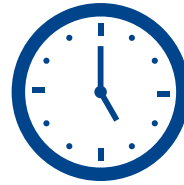
Access to quality health care isn't just a moral priority—it's a business imperative for Kansas. A healthy population drives workforce productivity, economic stability and community growth. Yet Kansas has seen a troubling decline in overall health, falling from a top-10 ranking in the early 1990s to #28 nationally according to the 2024 America's Health Rankings reportⁱ. This downward trend signals risks for employers, investors and local economies alike. To remain competitive, Kansas must maintain and expand access to care by supporting policies and infrastructure that keep hospitals open, attract professionals and ensure employees and their families can stay healthy and productive.



21 other state legislatures have passed 340B protections.

Pass 340B Protections

Kansas hospitals, federally qualified health centers and local pharmacies depend on the discounts provided through the 340B program to allow patients access to life-saving medications and treatments. This program is essential to allowing comprehensive care, in many instances in lieu of local property and sales taxes. We believe Kansas should join the other 21 states that have passed state laws to keep 340B medication discounts in Kansas and not padding pharmaceutical profits.



It can take up to five hours to process one complex prior authorizationⁱⁱ.

Reform Prior Authorization Process

Kansas policymakers can help patients receive more timely access to care by adding statutory timelines for prior authorization for chronic, urgent and emergent care. These reforms would increase patient access while reducing the administrative burdens that are increasing health care costs for the state and employers.



How do Kansas hospitals use 340B savings to serve their communities? Visit 340BKansas.org to learn more.



ACCESS TO CARE



80% of Kansas hospitals do not currently have a space to care for behavioral health patients ⁱⁱⁱ.

Prioritize Behavioral Health Care

The state of Kansas must prioritize crucially needed behavioral health services. We urge the state lawmakers to continue add-on payments for behavioral health beds. Kansas must also keep investments in the reimbursement of care for patients who are waiting in Kansas emergency rooms for admission to a state hospital. We urge the legislature to not make any reductions to staffing, contract or otherwise, at state hospitals, without increasing investments for community hospitals that would see an increased need to provide these services.

\$1.1 Billion

The amount Kansas hospitals provide in uncompensated care. ^v

Decrease Uncompensated Care by Ensuring More Kansas Have Health Care Coverage Options

Kansas hospitals provide more than \$1.1 billion in uncompensated care^v which drives up the cost for patients and for employers. We hope the federal and state government will pursue options to keep the market competitive allowing more Kansans to access the health care coverage needed to get the care that they need in order to keep costs manageable.



Patients spent 138,000 days waiting at a cost of \$110 million for approval and an available bed ^{iv}.

Increase Patient Throughput to Ensure the Right Care at the Right Time

As of 2024, Kansas patients spent more than 138,000 days inside a hospital, at a cost of more than \$110 million, while patients awaited administrative approval and bed space at a more appropriate care setting like a rehabilitation or long-term care facility. Kansas should follow other states in offsetting those costs reducing the uncompensated care being provided by Kansas hospitals that are impacting the cost of care for everyone.



Hospitalists report that 3–4 patients require surrogate decision-making ^{vi}.

Improve the Kansas Guardianship Structures

Ensure medical next of kin for a patient can quickly be identified and put in place so patients can be transferred easier to the appropriate care settings in order to get the best care possible.

WORKFORCE SOLUTIONS



Nearly one in five Kansans will be over age 65 by 2030.

BUILDING AND RETAINING OUR HEALTH CARE WORKFORCE

Kansas' ability to sustain a strong economy depends on its capacity to attract and retain a skilled health care workforce—especially as the state's aging population continues to grow. By 2030, nearly one in five Kansans will be over age 65, increasing demand for medical, long-term, and home-based care. Yet many communities already face critical shortages of nurses, physicians and allied health professionals. Without targeted investment in workforce recruitment, training and retention, these gaps will strain employers, reduce productivity and limit economic growth. We hope the Kansas Legislature will seek regulatory environments and long-term investments to build key workforce components such as childcare and housing.



Over 350 preceptors trained since 2024.

Health Care Preceptor Incentives

Kansas policymakers should join other states in recognizing the importance of preceptor training work and supply more clinical sites by instituting a preceptor tax credit.



On average, two nurses are assaulted every hour in the U.S.^{vii}

Worker Protections

We urge the legislature to consider legislation that would allow health care facilities to pursue legal and criminal remedies when a health care worker is assaulted by creating a crime of interference with health care services similar to statutes that we have for interference with law enforcement and other first responders.



It takes an average of 180 days to get a professional licensed and credentialed in Kansas.

Recruitment to Address Shortages

Allowing qualified health care professionals from other states or those recruited and sponsored from other countries to practice in Kansas is essential to addressing workforce shortages and ensuring access to care across the state. Streamlined licensing and credentialing is critical to fill vacancies faster.



Nearly 900,000 Kansans call a rural community home.

Building on Investments Made in the Federal HR 1 (OBBBA)

With the Rural Health Transformation Program under review by the Centers for Medicare and Medicaid Services, we urge Kansas to invest in long-term sustainable solutions for stretching our workforce such as continued access to telehealth and other health care workforce opportunities.

SOURCES

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|------|---|-----|--|
| i. | 2024 America's Health Ranking Report | v. | AHA Annual Survey |
| ii. | 2022 AMA Prior Authorization Physician Survey | vi. | American College of Physicians (ACP) Clinical Guidelines |
| iii. | KHA Annual Survey | | |
| iv. | KHA Avoidable Days Survey | | |



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