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Sample Candidate Questions for Kansas Congressional Candidates to the US Senate and US House of Representatives

General:

- Why do you want to be elected to the United States Congress?
- What are the three issues that are the most important to you?

General Health Care in Kansas:

- What is your vision for health care in Kansas and how will you pursue it?
What role do hospitals and health systems play?
- What is the single greatest health care challenge facing Kansas today?
How do you plan to address it?
- What are the regulatory barriers to transforming health care in Kansas?
How do you plan to address those issues?

Medicare:

- What is your position on “Medicare for All”? How do you believe this will impact Kansas hospitals and health care providers?
- Did you know that Kansas hospitals are required by law to provide emergency and stabilization care to any individual who presents to a hospital emergency room? In addition, the Medicare program does not pay Kansas hospitals adequate reimbursement to cover their cost of providing care. Knowing this information, what do you believe Congress should do to address this issue?
- If Kansas hospitals and health systems continue to be reimbursed by public programs (i.e. Medicare and Medicaid) at rates significantly below actual cost, how should health care providers make up the difference in order to balance their budgets?
- Kansas businesses are growing increasingly concerned that inadequate payment from public health care programs like Medicare/Medicaid, combined with other economic pressures, force hospitals to shift costs by charging higher rates to private health plans. This amounts to a “hidden health care tax” on businesses and other private health care consumers. Medicare payments currently cover approximately 85 percent of hospitals’ total costs and are vulnerable to additional cuts as revenues fluctuate. What are your ideas for eliminating this cost shift to businesses and other Kansans who purchase private health insurance?



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340B Drug Discount Program:

- Section 340B of the Public Health Service Act requires pharmaceutical manufacturers participating in Medicaid to sell outpatient drugs at discounted prices to health care organizations that care for many uninsured and low-income patients. These organizations include community health centers, children’s hospitals, hemophilia treatment centers, critical access hospitals (CAHs), sole community hospitals (SCHs), rural referral centers (RRCs), and public and nonprofit disproportionate share hospitals (DSH) that serve low-income and indigent populations.

The program allows 340B hospitals to stretch limited federal resources to reduce the price of outpatient pharmaceuticals for patients and expand health services to patients and the communities they serve. What are your thoughts regarding the 340B drug discount program and what changes, if any, would you make to the program?

Workforce:

- Kansas is already experiencing a shortage of health care practitioners, especially primary care physicians, physician assistants and advanced practice registered nurses. In the near future, as the population of Kansas continues to age, even more Kansans will seek health care services. What do you see as the state’s role in ensuring an adequate and increasing supply of health care providers?

Telemedicine:

- Do you support payment parity to ensure that insurance carriers are adequately reimbursing Kansas health care providers for services performed via telemedicine?

Opioid and Substance Use Disorders:

- Across the nation, many states are confronting the issue of opioid use and substance use disorders. Do you support a federal or state approach in tackling this issue? What policies, if any, do you believe should be considered on the state and/or national level?

Health Care Transparency:

- The issue of health care transparency continues to be discussed on a state and federal level. As consumers take more control of their health care needs, the demand for transparency will grow. What role do you believe health care providers and insurance carriers should have in health care transparency?

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