October 7, 2015

Dear Kansans –

The latest communication from Governor Brownback's office regarding KanCare expansion tries to create a divide between different categories of Kansas citizens. The reality is that all those citizens have something in common: for one reason or another, they are all in circumstances in which they find themselves needing assistance from the safety net of individual and institutional caregivers in our state. The communication also attempts to create a divide between different sizes of Kansas hospitals. Again, the reality is that all those Kansas hospitals, no matter what size or from what part of the state, help to form that safety net and also act as a foundation of the local economy.

So, rather than focus on these attempts at division, we would rather talk about something that could bring Kansans together: the development of a unique, Kansas-based program that builds on the Governor's own KanCare program and helps to bring our federal tax dollars back to Kansas.

KanCare expansion will provide health care coverage to approximately 150,000 Kansans, which will make the population healthier and more productive and prevent further health care cost shifting to businesses and insured individuals.

KanCare expansion can include strategies to promote employer-sponsored insurance, create responsible health care consumers, move those who are unemployed or underemployed toward achieving self-sufficiency and continue to implement system reforms that are transforming health care delivery in Kansas.

Expanding our KanCare program helps those who have disabilities. We are all vulnerable without health care coverage. The broad benefits derived from KanCare expansion can help many Kansans including the disabled and those who care for them.

We believe that Kansas taxpayer dollars should stay in Kansas and it is unfortunate that our state has done nothing about this. By the end of 2015, more than \$355.3 million in federal reimbursement cuts, additional fees and taxes intended to support the Affordable Care Act will leave Kansas and go to the federal government to be spent in other states – states expanding their Medicaid programs. That money should not go to other states. That money should go to a unique, Kansas-based solution.

There is ever increasing evidence from other states that expanding our KanCare program could create a reduced need for state spending on state programs for the uninsured and people with behavioral health needs; as well as savings related to increased federal dollars for certain newly-eligible Medicaid enrollees, including pregnant women and people with disabilities.

If we work together and take advantage of all the tools available, we can both improve our current KanCare program and strengthen the health care safety net. I encourage you to reach out to your elected officials in support of KanCare expansion ... a unique, Kansas-based solution.

Steven G. Kelly Board Chair, Kansas Hospital Association President and CEO, Newton Medical Center