KanCare Expansion
The Bridge to a Healthy Kansas

Myth

The state of Kansas cannot afford expansion.

Fact

Expanding KanCare Is Fiscally Responsible.
The state of Kansas can afford to expand KanCare. The program is beyond BUDGET NEUTRAL because it would actually produce a NET SAVINGS to the state of Kansas. The state cost would be approximately $40.5 million in 2019, which would more than offset by additional revenues and savings of approximately $58.5 million. By 2020, the state costs would reach approximately $109.8 million, but revenues and savings would be up to $114.5 million.

The federal government is unreliable and will decrease payments over time, leaving the state with the costs.

Health Care Is an Exception.
In Medicaid’s 50-year existence, the federal government has reduced Medicaid funding only once, temporarily, in the early 1980s. Since that time, federal Medicaid funding has been increased nationwide in both 2003-2004 and 2007-2009 in response to recessions.\(^1\)
Kansas’ 2019 federal matching rate for Medicaid is 57.10.\(^2\) This means 57 cents of every Kansas Medicaid dollar is paid for with federal funds; the state pays 43 cents.

Expansion only helps a few large, urban hospitals; rural hospitals receive very little funding.

KanCare Expansion Helps Rural Hospitals.
Since 2010, five rural hospitals in Kansas have closed. As Kansans, we cannot afford the loss in health care access if more hospitals follow suit. It’s true that large, urban facilities will receive more funding, but that’s because they treat more patients. In truth, additional revenue from KanCare expansion is extremely important to the bottom lines of rural hospitals. Expansion would cover 17.9 percent of an urban hospital’s uncompensated care cost, but covers 25.8 percent of a rural hospital’s and 44.3 percent of a frontier hospital’s uncompensated care. Expansion may not be the entire solution for financial struggling hospitals, but it’s certainly a necessary piece. The data and research couldn’t be clearer. The large majority of rural hospital closures in recent years have taken place in states – like Kansas – that have not expanded their Medicaid programs. Rural hospitals in these states are six times more likely to close than those in expansion states.

Expansion only provides coverage to able-bodied adults in their prime working years.

KanCare Expansion Helps Hard-Working, Low-Income Kansans.
The majority of those on KanCare and in the expansion population work or are in families with someone who works. Many of these are low-income jobs that do not provide health coverage or the coverage is too expensive to afford. The idea of “able-bodied” is a myth. Of those who don't work, a majority are not healthy enough to work consistently due to chronic illness or disability (it is very difficult to qualify for Social Security disability; a large number of people with disabilities that make it difficult for them to work, have not secured disability status). Most of the remaining people not in the workforce are caregivers for children, elderly adults or individuals with disabilities.

Medicaid expansion will provide coverage for illegal immigrants.

KanCare Expansion Is Limited to Those Legally in the United States.
KanCare eligibility is limited to those legally in the United States. Health care coverage through KanCare is not available for undocumented workers or illegal immigrants. This is according to federal code 8 U.S.C. Section 161 and Kansas law KSA 39-709(a)(2)-39-709.

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1. [https://kaiserfamilyfoundation.files.wordpress.com/2013/01/8352.pdf](https://kaiserfamilyfoundation.files.wordpress.com/2013/01/8352.pdf)
2. [https://www.kff.org/state-category/medicaid-chip/medicaid-spending/](https://www.kff.org/state-category/medicaid-chip/medicaid-spending/)
Government programs lead to less productive people.

**KanCare Expansion Improves Health and Productivity.**
People with health care coverage tend to be healthier and more productive. KanCare expansion will lead to more insured individuals in Kansas, creating a healthy and productive population to help our local and state economies grow.

Any expansion of Medicaid is Obamacare.

**KanCare Expansion Is a Unique Kansas Solution.**
Kansas has always had the freedom to change its Medicaid program because it has always been a joint state-federal program. In 2013, then-Governor Sam Brownback’s administration initiated a unique Kansas solution to reform Kansas Medicaid, known as KanCare. The KanCare Bridge to a Healthy Kansas program, which expands upon the KanCare program, is NOT Obamacare, but a unique, Kansas-centric solution that builds on the values of personal responsibility and accountability.

There isn’t a need to expand; everyone already has access to health care through ERs.

**KanCare Expansion Provides Better Access to Care.**
Making sure 150,000 Kansans have health coverage means more low-income Kansans will receive preventive care, and fewer Kansans will seek care in the most expensive place possible; the emergency room. Proper preventive care and reduced emergency room visits are good for all Kansans because the costs of caring for the uninsured are paid by Kansas hospitals, businesses and individuals with health insurance. KanCare expansion will increase the number of people with health care coverage, which in turn increases the number of people paying for their own health care, making the system fair for everyone.

The state already provides enough assistance to safety net providers.

**The State Will Get a Better Return on its Investment.**
The state of Kansas may get an even better return on its investment in safety net clinics because with more insured individuals, the clinics can utilize their funding to provide more and better services.

Individuals who receive KanCare will be motivated to work less or not at all.

**KanCare Expansion Incentivizes Employment.**
Health care coverage (KanCare expansion) supports working people and those looking for work. Surveys of the expansion population in Ohio found that Medicaid coverage made it easier to look for work (for those who don’t work). It also helped those with jobs to keep their jobs by making them more productive. Withholding health coverage will make it less likely that the uninsured will be able to enter the workforce.

There are better solutions to help our health care system.

**KanCare Expansion Is a Critical Tool for a Healthy Kansas.**
There is an ever-increasing amount of evidence to support the positive impacts of expanding Medicaid. To date, 36 states and the District of Columbia have expanded Medicaid programs. Expanding KanCare makes health care coverage affordable for approximately 150,000 hardworking, low-income Kansans. It is also a critical tool that will help increase access to much-needed mental health and substance use disorder services. Data show states that have expanded Medicaid have increased access to important preventive care and improved chronic disease management.
Medicaid expansion is just a political solution to tout, and it will fail.

*KanCare Expansion Can Work for Kansas.*

Kansas is one of just 14 remaining states that have not yet expanded health care to individuals and families who desperately need it. We’ve seen Republican- and Democratic-led states across the country reach consensus on Medicaid expansion to benefit their citizens, communities and economies. It’s time we do the same in Kansas.

In addition, Kansans overwhelmingly support expansion. According to the most recent polling, three out of four Kansans support expansion because they fundamentally understand many able-bodied Kansans do work for a living, but their wages are too low to afford private health insurance. They also understand KanCare expansion protects our local communities and hospitals while strengthening our local and state economies. KanCare expansion will help every single Kansas community.