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Partners in America's Poverty Fighting Network

**Testimony Submitted to the Special Committee on Medicaid Expansion
Scott Anglemeyer, Executive Director, Kansas Association of Community Action Programs
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Chairperson Landwehr and Members of the Committee:

I am pleased to submit this testimony to you on behalf of the board and staff of the Kansas Association of Community Action Programs (KACAP). KACAP is the statewide organization representing the eight community action agencies (CAAs) in Kansas. Our members are organizations whose mission is to provide a range of services and activities addressing the causes and conditions of poverty, with the active participation and leadership of the low-income people they serve. Together, these eight agencies provide services to over 21,000 Kansans each year.

KACAP fully supports KanCare expansion. We believe that expanding KanCare is the single most important action that the Legislature could take to reduce poverty in the state. A study from Columbia University researchers reported in the February 2019 issue of *Health Affairs* states that have expanded Medicaid have poverty rates that are nearly a full percentage point lower than they would have had if they had not expanded Medicaid. In Kansas, that equates to more than 26,000 Kansans—almost one-fifth of the 150,000 Kansans who fall in the coverage gap.

There are likely several reasons that expansion reduces poverty. Studies show that low-income residents of non-expansion states have significantly higher levels of medical debt than their counterparts in states that have expanded Medicaid. Because it increases demand for healthcare and provides additional revenue to healthcare providers, expansion creates jobs, at least some of which will be filled by poor Kansans. And expansion improves health outcomes, preventing minor conditions from becoming chronic ones, increasing people's availability for work. A survey of expanded Medicaid recipients in Ohio revealed that more than half of the respondents found that receiving Medicaid made it easier to obtain and maintain employment.

Because of its demonstrated effect on poverty levels, we believe that it imperative that the Legislature pass a Medicaid expansion bill in the 2020 session. But it is important that any expansion plan does not include elements that serve as unnecessary barriers to low-income Kansans obtaining expanded Medicaid coverage. Among those barriers are:

- Work Requirements – Where work requirements have been attempted in other states, analyses have shown that work requirements have little or no effect on employment levels,

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but have resulted in thousands of people being denied coverage, many of whom were likely working but were unable to meet the cumbersome requirements to document their employment status.

- Premiums – Proposals that would require Medicaid recipients to pay premiums can be barriers to obtaining coverage, especially if those premiums are required to be paid prior to receiving Medicaid benefits. While requirements to pay five percent of adjusted gross income may not seem like much, they can be significant barriers to families whose income is severely limited.
- Lockouts – Locking out participants for delays in payment of premiums are punitive, and do not make allowances for variations in income that low-income families often face. Unpredictable schedules, seasonal work, and other factors may keep families from consistently being able to make timely payments. A lockout denies important coverage to people whose inability to make a timely payment may be due to factors they are unable to control.
- Lower income eligibility limits – Setting the eligibility limit at a level below 138% unfairly restrict the options for those who earn too much to qualify under this lowered income threshold but not enough to receive subsidies for coverage on the ACA marketplace.

Critics of safety net programs often stress the value of work in escaping poverty, creating a sense of self-worth, and building character. We agree on work's importance; however, the evidence shows clearly that the best way to help the most low-income Kansans experience the benefits of work is by expanding Medicaid without work requirements.