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**Testimony in Support of Medicaid Expansion
by
The Catholic Bishops of Kansas**

**March 20, 2017
Senate Public Health and Welfare Committee**

Madame Chair and Members of the Committee,

If the state of Kansas chooses to expand Medicaid under the terms of the Affordable Care Act (ACA), over 130,000 low-income Kansans would become eligible for health insurance under the Medicaid program. We, the Catholic Bishops of Kansas, support expanding Medicaid to cover these individuals. Indeed, many of our brothers and sisters who cannot currently afford health insurance would gain access to it, bringing an end to the uncertainty and fear that the uninsured of our society must live with daily. However, our endorsement is with serious reservations as there are several aspects of the proposal to expand Medicaid that are very problematic.

Our endorsement flows from the influence of Scripture as well as our living faith tradition. From Scripture we call to mind Luke's parable of the "Good Samaritan." The Samaritan finds a man "half dead," is "moved with compassion," and "treats him with mercy" by caring for him. The parable reminds us that the measure of a culture is the manner in which it provides for its weakest and most vulnerable. Likewise, the living faith tradition of the Catholic Church has long inspired us to support the principle that all people should have access to health care. At this time we are particularly concerned about those among the working poor who are unable to afford health insurance. But as noted above, the expansion of Medicaid also raises serious concerns:

- We are deeply troubled that the Medicaid program in Kansas covers contraception, sterilization, drugs that may induce abortion, and even, in rare cases, a small number of abortion procedures. It is simply unacceptable that the federal government insists on linking access to health care with taxpayer financing of these morally objectionable products and procedures. At a time when the federal government is coercing people to violate their consciences and religious teachings in order to participate in religious or charitable endeavors, it is difficult to embrace it further as a partner in providing health care.

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- While the federal government has promised to pay 90% of the expansion costs, it is unlikely that the federal government will continue for very long to fund those individuals covered by the expansion at that much higher rate than it funds Medicaid for current recipients (approx. 56%). Kansas legislators need to make this commitment with their eyes wide open about what may be asked financially of the State in the future.
- Medicaid is a program in need of reform, fiscal and otherwise. Maintaining a separate and inferior system of health insurance for the poor is far from ideal. Instead, it would be better if low-income Americans were supported in joining the health insurance networks in which the rest of society participates.

In summary, we have grave concerns about these and other aspects of Medicaid expansion and we acknowledge that people of good will can and do disagree about the issue of Medicaid expansion. Nevertheless, we do not believe that a nation that has been blessed with such abundance should leave so many of its poor without health insurance. With this in mind, we support the expansion of Medicaid by the Legislature in order to provide coverage to the needy. We also urge Congress to ensure that Medicaid and the ACA (or any successor program) are made to be financially and morally responsible.

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