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Kansas Legislature Rejects Big-Government Health Care: Agenda Likely to Remain in Play, However

By Krystle Russin

Kansas Gov. Kathleen Sebelius (D) has signed into law a bill implementing several new health care initiatives, but most of the big-government provisions were rejected by the legislature before the measure reached the governor's desk.

The final version of Senate Bill 81, the Health Care Reform Act of 2008, included nine of 21 recommendations made at the beginning of the legislative session by the Kansas Health Policy Authority (KHPA), an agency responsible for coordinating a statewide health policy agenda.

The new law expands eligibility for enrollment in the state's federally funded Children's Health Insurance Program (SCHIP), provides \$460,000 to expand Medicaid coverage for pregnant women, and earmarks \$2.5 million for clinics treating low-income patients

Channeling Canada?

"Thankfully, the majority of the governor's big-government health agenda didn't pass," said Alan Cobb, Kansas state director of Americans for Prosperity. He called the legislation Sebelius signed "somewhat generic."

Karl Peterjohn, executive director of the Kansas Taxpayer Network, agreed. "My main concern about the latest state changes in health care is the expanding role of government here in Kansas," he said. "I'm concerned we are drifting towards some sort of Canadian-style, single-payer system where the government will be selecting everyone's health care and forcing people into a 'one size fits all' straitjacket."

KHPA Defied Law

"It is unfortunate that the Kansas Health Policy Authority failed to fulfill the requirements established by Senate Bill 11 [passed in April 2007] which specifically required them to consider consumer-driven reform options," said Sarah McIntosh, vice president of programs at the Flint Hills Center for Public Policy.

"Instead of expanding government programs, the state should consider options that would drive down the costs of health insurance, such as mandate reduction--Kansas law currently requires that 37 individual minimum coverages be included in every policy sold in the state--or buying

policies across state lines and plans that allow more portability and individual ownership of insurance like Missouri's reforms," McIntosh said.

Rejected Proposals Will Be Revived

KHPA is planning to push for passage of the remainder of its proposals during the next legislative cycle.

"With a tightening budget picture, legislators will have to determine their priorities. Kansas families still struggle with high health care costs, and a health care system that is hard to navigate," said KHPA Director Marcia Nielsen.

"The 2008 Kansas legislation did not approve the largest health spending expansion proposals coming from the governor's office and her health policy task force," Peterjohn observed. However, he warned, "There are many Kansans, including our governor, who support a much larger role for government in providing state-run health services to residents."

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For more information ...

Kansas Senate Bill 81, "Health Care Reform Act of 2008":
<http://www.kslegislature.org/bills/2008/81.pdf>

Kansas Senate Bill 11: <http://www.kslegislature.org/bills/2008/11.pdf>