



**National
Multiple Sclerosis
Society**

January 17, 2020

Senator Gene Suellentrop, Chair
Senate Public Health and Welfare Committee
Re: SB 252 Proponent

Chair Suellentrop and Committee Members:

I am writing on behalf of the National Multiple Sclerosis (MS) Society regarding our support for SB 252, which expands eligibility for KanCare to those that live at 138% of the Federal Poverty Level. The National MS Society believes that the passage of SB 252 will have a significant, positive impact on many, including Kansans living with and affected by multiple sclerosis. That positive impact comes in the form of increased access to healthcare and prescription medication, both of which are the core of our organization's advocacy efforts.

Multiple sclerosis (MS) is an unpredictable, often disabling disease of the central nervous system that disrupts the flow of information within the brain, and between the brain and the body. Symptoms range from numbness and tingling to blindness and paralysis. The progress, severity and specific symptoms of MS in any one person cannot yet be predicted, but advances in research and treatment are leading to better understanding and moving us closer to a world free of MS. Managing MS symptoms often require physician- or specialist-prescribed medications known as disease modifying therapies (DMTs). The initiation of treatment with an FDA-approved DMT is recommended as soon as possible following a diagnosis of MS and continued adherence to medication is a key element of treatment effectiveness. Unfortunately, the cost of living with MS is prohibitive without adequate coverage. The average cost of living with MS per person, per year is upwards of \$70,000 and the average wholesale cost of brand DMTs in 2019 was over \$88,000.

This is the eighth year that the Society has included KanCare Expansion as a policy priority within our Kansas advocacy mission. We keep coming back because the Society is committed to ensuring that each state's Medicaid program provides adequate, affordable and accessible health care coverage. KanCare expansion would improve this access for Kansans living with MS and ultimately aid many in slowing the progression of their disease.



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Not only would expansion be good for people living with MS, but it would be good for the state. Expanding KanCare would mean hundreds of millions of tax dollars returned to the state in federal funding. It would also mean expanded coverage for 150,000 Kansans. When individuals have access to adequate coverage, they are more likely to seek treatment early, get the treatment they need, and avoid trips to the emergency rooms or expensive stays in rehab facilities that end up costing the state much more. States that have expanded Medicaid have reported lower out-of-pocket spending, a decline in hospital admission, fewer disparities in care, increased medication adherence, and improved health outcomes.

Funding MS research is also a part of our Society's mission. We are a driving force of MS research and treatment to stop disease progression, restore function, and end MS forever. To date, we have funded over \$1 billion in such research. In fiscal year 2018, Kansas received over \$110 million in funding from the National Institutes of Health (NIH). However, this investment in research means nothing if people cannot benefit from the gains derived from that research. The Society believes that benefit should not be dependent upon your income and insurance access.

The people in the "KanCare Gap" include college students living with MS, like Marceline Dover was in 2015. Marceline held three jobs while going to school at Wichita State University and yet lacked health insurance and the income to qualify for a marketplace plan. Marceline would have benefitted from the "hand up" that KanCare Expansion would have provided.

Other people in the "KanCare gap" include people living with MS who have transitioned to part-time employment to accommodate their disease. MS is typically diagnosed between the ages of 20 and 50, when most are raising families, advancing careers and maximizing their earnings, yet many must scale back their work and life activities due to disease progression. Studies show that only 40% are in the workforce ten years after their diagnosis, many losing access to their employer-based insurance.

Expanding KanCare would also benefit people living with MS who are currently on Medicare. KanCare expansion will allow more people access to the benefits of "dual eligibility". Allowing more people with MS to stay in or to enter the workforce, increase their earnings, and receive home and community-based services. In fact, people with disabilities in Medicaid expansion states are significantly more likely to be employed than those in non-expansion states.

Multiple Sclerosis is a disease that impacts the entire family, and MS caregivers are also more likely to lack health insurance coverage due to time out of the workforce. These burdens and health risks can hinder caregivers' ability to provide care, lead to higher healthcare costs and affect the quality of life of



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both the caregiver and care receivers. More than one-third of caregivers continue to provide intense care to others while suffering from poor health.

In closing, I would like to respectfully urge the committee to support SB 252, allowing the debate and conversation surrounding KanCare expansion to continue. It is vital that people living with MS in Kansas are provided a similar possibility of health care access that is afforded to people living with MS in the 37 states and districts that have opted for some form of expanded eligibility.

Sincerely,

Laura Hoch

Laura Hoch
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National MS Society