How the Health Care Law is Making a Difference for the People of Kansas

For too long, too many hardworking Americans paid the price for policies that handed free rein to insurance companies and put barriers between patients and their doctors. The Affordable Care Act gives hardworking families in Kansas the security they deserve. The new health care law forces insurance companies to play by the rules, prohibiting them from dropping your coverage if you get sick, billing you into bankruptcy because of an annual or lifetime limit, or, soon, discriminating against anyone with a pre-existing condition.

All Americans will have the security of knowing that they don’t have to worry about losing coverage if they’re laid off or change jobs. And insurance companies now have to cover your preventive care like mammograms and other cancer screenings. The new law also makes a significant investment in State and community-based efforts that promote public health, prevent disease and protect against public health emergencies.

Health reform is already making a difference for the people of Kansas by:

Providing new coverage options for young adults
Health plans are now required to allow parents to keep their children under age 26 without job-based coverage on their family coverage, and, thanks to this provision, 3.1 million young people have gained coverage nationwide. As of December 2011, 25,000 young adults in Kansas gained insurance coverage as a result of the health care law. For more details on these numbers, visit here.

Making prescription drugs affordable for seniors
The health care law includes benefits to make Medicare prescription drug coverage more affordable. In 2010, 41,352 Medicare who hit the donut hole began receiving a 50 percent discount on covered brand-name drugs and a discount on generic drugs. Since the law was enacted, Kansas residents with Medicare have saved a total of $49,388,115 on their covered brand-name prescription drugs when they hit the donut hole. This discount has resulted in an average savings of $615 per person, and a total savings of $14,093,359 in Kansas in 2012. By 2020, the law will close the donut hole.

Covering preventive services with no deductible or co-pay
In 2011, 286,156 people with Medicare in Kansas received free preventive services – such as mammograms and colonoscopies – or a free annual wellness visit with their doctor. And in the first nine months of 2012, 208,203 people with Medicare received free preventive services.

Because of the law, 54 million Americans with private health insurance gained preventive service coverage with no cost-sharing in 2011, including 529,000 in Kansas. And for policies renewing on or after August 1, 2012, women can now get coverage—without cost-sharing—of even more preventive services they need. Approximately 47 million women, including 450,915 in Kansas will now have guaranteed access to additional preventive services without cost-sharing.

Providing better value for your premium dollar through the 80/20 Rule
Under the new health care law, insurance companies must provide consumers greater value by spending generally at least 80 percent of premium dollars on health care and quality improvements instead of overhead, executive salaries or marketing. If they don’t, they must provide consumers a rebate or reduce premiums. This means that 67,512 Kansas residents with private insurance coverage will benefit from $4,139,506 in rebates from insurance companies this year. These rebates will average $91 for the 45,300 families in Kansas covered by a policy.

Scrutinizing unreasonable premium increases
In every State and for the first time under Federal law, insurance companies are required to publicly justify their actions if they want to raise rates by 10 percent or more. Kansas has received $1,000,000 under the new law to help fight unreasonable premium increases.

Removing lifetime limits on health benefits
The law bans insurance companies from imposing lifetime dollar limits on health benefits – freeing cancer patients and individuals suffering from other chronic diseases from having to worry about going without treatment because of their
lifetime limits. Already, 1,021,000 residents, including 374,000 women and 279,000 children, are free from worrying about lifetime limits on coverage. The law also restricts the use of annual limits and bans them completely in 2014.

Creating new coverage options for individuals with pre-existing conditions
As of August 2012, 464 previously uninsured residents of Kansas who were locked out of the coverage system because of a pre-existing condition are now insured through a new Pre-Existing Condition Insurance Plan that was created under the new health reform law. To learn more about the plan available in Kansas, check here.

Supporting Kansas's work on Affordable Insurance Exchanges
Kans has received $32,537,465 in grants for research, planning, information technology development, and implementation of Affordable Insurance Exchanges.

$1,000,000 in Planning Grants: This grant provides Kansas the resources needed to conduct the research and planning necessary to build a better health insurance marketplace and determine how its exchange will be operated and governed. Learn how the funds are being used in Kansas here.

$31,537,465 in Early Innovator Grants: These grants are being used to help a group of “Early Innovator” states design and implement the information technology (IT) infrastructure needed to operate Affordable Insurance Exchanges. Using these funds, the Early Innovator states will develop exchange IT models that can be adopted and tailored by other states. Learn how the funds are being used in Kansas here.

Preventing illness and promoting health (Last Updated: March 15, 2012)
Since 2010, Kansas has received $6,000,000 in grants from the Prevention and Public Health Fund created by the Affordable Care Act. This new fund was created to support effective policies in Kansas, its communities, and nationwide so that all Americans can lead longer, more productive lives.

Increasing support for community health centers
The Affordable Care Act increases the funding available to community health centers nationwide. In Kansas, 16 health centers operate 45 sites, providing preventive and primary health care services to 147,489 people. Health Center grantees in Kansas have received $38,421,554 under the Affordable Care Act to support ongoing health center operations and to establish new health center sites, expand services, and/or support major capital improvement projects.

Strengthening partnerships with Kansas (Last Updated: March 15, 2012)
The law gives states support for their work to build the health care workforce, crack down on fraud, and support public health. Examples of Affordable Care Act grants to Kansas not outlined above include:

$150,000 to support the National Health Service Corps, by assisting Kansas in repaying educational loans of health care professionals in return for their practice in health professional shortage areas.

$5,700,000 for health professions workforce demonstration projects, which will help low income individuals receive training and enter health care professions that face shortages.

$1,900,000 for school-based health centers, to help clinics expand and provide more health care services such as screenings to students.

$220,000 to support outreach to eligible Medicare beneficiaries about their benefits.

$286,700 for Family-to-Family Health Information Centers, organizations run by and for families with children with special health care needs.

$2,100,000 for Maternal, Infant, and Early Childhood Home Visiting Programs. These programs bring health professionals to meet with at-risk families in their homes and connect families to the kinds of help that can make a real difference in a child’s health, development, and ability to learn - such as health care, early education, parenting skills, child abuse prevention, and nutrition.

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Back to Map