

HOUSE INSURANCE AND PENSIONS COMMITTEE

TESTIMONY RULES

1 electronic copy of testimony submitted to: H.Insurance@house.ks.gov

- Send it as a pdf (**Do not** scan cover letter)
- Name it Date (01.12.18), Subject (HB2000), Last name (Smith)
(Example: 1.12.18 HB 2000 Smith)

30 hard copies - no later than 24 hours before the hearing

- 1 (just one) cover sheet on stack of testimonies
- Check boxes – Proponent, opponent or neutral and oral or written only
- 20 for committee members & staff
- 10 for audience

Thank you, I am looking forward to working with you this session.

Carol Robertson, Committee Assistant

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COMMITTEE TESTIMONY COVER LETTER

Please use this as a cover letter when submitting testimony.

BILL #: 2825

Date of Testimony: 3/18/2024

Name of person testifying: Jim Blackwell

Agency Represented: GPHA

Phone Number: 620-292-7701

Email: jblackwell@gpha.com

PLEASE CHECK ONE:

- Proponent _____
- Neutral _____
- Opponent X

PLEASE CHECK ONE:

- Speaking & written Testimony X
- Written only Testimony _____

TO: House Insurance Committee

FROM: Jim Blackwell, Regional Vice President Great Plains Health Alliance

DATE: March 18, 2024

RE: HB 2825 Opponent Testimony

Mr. Chairman and Members of the House Insurance Committee,

I am Jim Blackwell, Regional Vice President Great Plains Health Alliance. Today, I appear before you to oppose House Bill 2825.

I see each and every day how hard our Kansas hospitals work to meet the requirements from the federal government to be in compliance with the transparency act. This work includes up front investments, ongoing maintenance, and continued compliance updates needed upon review of the Centers of Medicare and Medicaid Services.

As a result of the investments, and commitment of our Kansas hospitals, no hospitals have received fines for non-compliance, but that doesn't mean we haven't continued to work to increase transparency.

But the truth is that it takes a lot of time and effort to adequately estimate costs. We are dealing with patients. Patients who need individualized care based on the situations they are in, the diagnosis that they have received, and the treatments that they may need. All of those changing as the patients change and have individual needs. We want care to be specific to a patient's needs at any given time, that's hard in a situation where we are sometimes providing complex surgeries that require us to do things differently than our medical professionals may originally plan.

This bill is just more government oversight, for an industry that has so much government bureaucracy that continually adds to costs. These unfunded mandates are taking an additional toll on already strained hospitals across the state.

Additionally, this bill does nothing more for consumers than what is currently happening today. So its purpose seems to only open hospitals up for additional financial losses by increasing compounding fines, and allowing additional hurdles to collect payments.

I would urge the committee not to recommend HB 2825 as it is more government where it's not needed, it's not going to help consumers more than what's already out there, and it only stands to jeopardize those already struggling small rural hospitals.

Thank you for the opportunity to testify.