

To: House Insurance Committee, Representative Jene Vickrey, Chairman
From: Daniel Korber, farmer in Nemaha County Kansas
Date: Wednesday, March 6, 2019
Re: Proponent, written-only, SB 32: Testimony regarding my experience with health care costs and options for self-employed individuals.

The increased cost and reduced options for the health care needs of a self-employed individual such as myself has become a rising concern over the past few years. Currently I am a self-employed full-time farmer who purchases his own health coverage. Historically, being located on the Kansas-Nebraska border, my family has always benefited from the option of using health care providers and specialists in both states, depending on the needs at the time.

Previous to 2017, I was able to purchase a **business health care plan** which provided decent health coverage for both myself and any potential employees. Being a 35-40 year old individual during this time period, I averaged between \$200-250/month in premium costs with a \$1,000 deductible and access to in-network providers in both states.

Beginning in 2017, I was required to change health care plans to an **individual plan** which averaged a little over \$400/month in premium costs with a \$6,500 deductible. With this plan I paid a premium to continue to access out of state providers, which were now out of network and required an additional \$6,500 deductible. This was important to me because my primary care physician was located in Nebraska.

In 2018, my health care plan was **discontinued**. Because of this cancelation, I changed my primary care physician to a doctor in Kansas due to the fact that no health care plans offered access to out of network/out of state providers. My current plan has averaged between \$400-440/month in premium costs with a \$6,500 deductible, with limited to no access to out of network services.

With respect to health care, over the past couple years, my health care premium costs have basically doubled, my deductible has significantly increased, and I have had to change my approach to meeting health care needs with limited access to out of network providers and specialists. Many of which became out of network in the past couple of years.

Fortunately, I haven't had any major health care issues thus far, but in my opinion, specific to my needs, I continue to pay more for health care coverage that provides decreasing benefits and services. I believe SB 32 creates the necessary authority for additional health care options to be created. These products may serve my needs better than the options available today. I encourage the committee to favorably report out SB 32.

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