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August 25, 2021

The Honorable Nancy Pelosi Speaker United States House of Representatives Washington, D.C., 20515

The Honorable John Yarmuth Chairman U.S. House Committee on the Budget Washington, D.C., 20515 The Honorable Charles Schumer Majority Leader United States Senate Washington, D.C., 20510

The Honorable Bernard Sanders Chairman U.S. Senate Committee on the Budget Washington, D.C., 20510

Dear Speaker Pelosi, Leader Schumer, Chairman Yarmuth, and Chairman Sanders,

I write today to respectfully urge that you include provisions to close the Medicaid coverage gap in non-expansion states in the upcoming budget resolution and reconciliation process. Twelve states have not yet expanded Medicaid, including Kansas, despite strong economic and public health pressure to do so. That is why I request that both additional financial incentives for states to expand Medicaid and a federal strategy to close the coverage gap are included in the Build Back Better Plan.

Medicaid was created to ensure that the most vulnerable among us are afforded access to health care, including low-income families, people with disabilities, and seniors. Throughout the pandemic, these have also been the groups most at-risk to lose their jobs, health insurance coverage, and, tragically, their lives. And in 12 states, those individuals are at an even greater disadvantage, as they cannot rely on affordable health care access through Medicaid. This includes 165,000 Kansans who would receive health care coverage if state legislators voted to accept the federal incentives and expand the program. It is unacceptable that people are suffering solely because partisan actors have chosen repeatedly to leave money on the table at the expense of their constituents' health and their state's economy.

The American Rescue Plan Act (ARPA) included significant incentives for states that choose to expand Medicaid, which I've fought for throughout my time in Congress, allocating more than \$16 billion for states, including Kansas, to expand the program and provide affordable health care to 4.4 million Americans.¹² ARPA made it essentially cost-free for states to expand Medicaid for the next two years by increasing the federal match rate—but even as COVID-19 devastated the health and

¹ https://www.kff.org/medicaid/issue-brief/new-incentive-for-states-to-adopt-the-aca-medicaid-expansion-implications-for-state-spending/

² https://www.rwjf.org/en/library/research/2021/05/marketplace-pulse-lets-close-the-coverage-gap.html

economic well-being of our nation, the remaining non-expansion states have refused to take advantage of these incentives, prioritizing partisan ideology over the lives of those they are elected to represent.

I urge you to both continue the ARPA-level incentives for Medicaid expansion in the upcoming budget resolution and reconciliation package, and to include a federal strategy that would close the coverage gap, such as the proposed legislation to create a Medicaid look-alike program out of the Centers for Medicare and Medicaid Services (CMS), or other similar federal actions. I have signed on in support of such legislation, as have several of my colleagues in the House and Senate, because we recognize our duty to explore another avenue to expand Medicaid after years of incentives and public pressure have proved fruitless.

We have lost far too many loved ones before their time this year. It is urgent that we use every tool at our disposal to ensure that all Americans can access affordable health care, regardless of where they live.

Sincerely,

Representative Sharice Davids Member of Congress