

Date: March 6, 2019
To: House Committee on Insurance
Re: SB 32 – Kansas Farm Bureau Health Plans

Good afternoon Mr. Chairman and members of the Committee. I am Tim Franklin from Goodland, Kansas. My wife Katherine and I returned to northwest Kansas in 2011 after nearly 6 years of flour milling with General Mills in both Des Moines, Iowa and Buffalo, New York. We grow wheat and corn on my family's 4th generation farm in Sherman County. Since coming home we've added three children to the population; John Isaac who turned 5 in February, Elizabeth who was 3 in November, and Noah who is 5 months old.

To say that providing workable and affordable health coverage for our family is challenging is a bit of an understatement. The first several years we held a group policy that essentially covered our family. In 2017 the ACA altered the definition of sole-proprietorship resulting in our carrier canceling our group coverage. The logic was that we didn't qualify for the group plan because we didn't have employees. My parents are involved in our farm but operate separately and we don't have non-family employees that would qualify us to form a new group.

We went to the Marketplace to see if we qualified for a subsidy, since we thought that option might cover 30-50% of the monthly premium. Only after filling everything out did we learn that we used the wrong line item on our Form 1040, and we wouldn't qualify to receive any help. Given the very limited options and providers, we continued purchasing coverage through the Marketplace for 2018, hopeful we might receive some help, which we have never qualified for or received.

For 2019 we purchased an individual policy directly from one of the Kansas providers. It is the same plan and same cost as the Marketplace but we don't have to deal with the Marketplace to make changes to our plan (childbirths, etc.).

Our premiums and deductibles have historically increased annually. While costs go up coverage weakens:

2019 (Directly purchased individual policy):

12mos @ \$1998.85
Annual Premium = \$23,986.20 estimated
Deductible = \$1500 individual / \$3000 family
Max out of pocket = \$3000 individual / \$7000 family

2018 (Marketplace):

9mos @ \$1532.34
3mos @ \$1857.14 (3rd child added to policy)
Annual Premium = \$19,363.08
Deductible = \$1500 individual / \$3000 family
*Max out of pocket = \$3000 individual / \$7000 family

*We maxed out in 2018 due to Noah being born and Isaac having a broken arm that required surgery.

Previous years totaled as followed:

2017 \$10,269.60 May-Dec (8 months) Moved to Jan 1 renewal from May after removed from Group plan

2016 \$12,099.48

2015 \$9,806.16 Lizzy Born

2014 \$10,095.26 Isaac Born

2013 \$5,980.08

2012 \$5,647.92

2011 \$5,814.00

Beyond the affordability concerns we have also experienced challenges with adequate in-network/out of network coverage. Our youngest son Noah needs to see a Pediatric Urologist and finding an approved in-network provider has been a challenge. While we have coverage in Kansas it took months of working for approval to see specialists in either Denver, or Johnson and Wyandotte Co., even though they are part of our state.

We're grateful that your committee is considering this important issue and this bill which will offer more options at affordable rates to Kansans like us who want coverage for our family but struggle to find workable solutions.

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