

## Testimony in Support of HB2118 House Insurance Committee February 7, 2017

Mister Chairman and Members of the House Insurance Committee, my name is Denise Cyzman. I am the Executive Director of the Kansas Association for the Medically Underserved (KAMU). Thank you for the opportunity to present written testimony in support of HB 2118.

As the federally-designated Primary Care Association of Kansas, KAMU has the honor to serve 44 primary care safety net clinics. KAMU and its members believe Kansas should be a state where all individuals have access to comprehensive, affordable, and quality health care. In 2016, KAMU member clinics served more than 261,000 patients through approximately 786,000 visits.<sup>1</sup>

These safety net clinics, or “charitable health care providers” as defined in the bill, provide many health care services within their scope of practice. Most of these services are covered under the Federal Tort Claims Act (FTCA) which provides malpractice insurance by the federal government. However, some clinics provide services outside of this scope, such as providing care in nursing homes. These services are not covered under FTCA. Under current law, “charitable health care providers” are not allowed to purchase additional insurance, often referred to as gap coverage, to protect the provider in these situations. They are not allowed to have dual coverage for services protected under FTCA.

As stated in Section 3(e), the amendment to the current statute would allow insurance companies to issue professional liability policies that exclude coverage for claims against charitable health care providers and also claims against health care providers who are covered under the Federal Tort Claims Act. What this means is that safety net clinics could purchase additional insurance for providers, but it would not exist as dual coverage, as the plan would only cover those services which are not included under FTCA.

With the ability to purchase additional insurance, HB 2118 would allow clinics to the ability to expand their services into the community, strengthening the health care system and providing more Kansans access to care. We support this bill and ask for your support and vote.

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<sup>1</sup> KAMU Quality Reporting System, State Grantee Preliminary Data, 2016. Accessed on 1.29.17.