

The Patriots' Truth

Flint Hills TEA Party News

ON OUR CALENDAR

MEDIA COMMITTEE MEETING – MCALISTER'S EVERY WED AT 5:30PM

Everyone is welcome – we ARE the Working Group

October 11 - Office of the Repealer Meetings (see below)

Manhattan – 11am – Public Library Auditorium;

Junction City – 1pm – Devins Ctr for Ed. & Support Board Room.

Abilene – 3pm – Abilene Public Library Ciy Commission Room.

October 22 – Regular Monthly Meeting – 9:30AM - Manhattan .

Library Aud. – Date change due to KSU home FB game

October 22 – SOCK (Stop Obama Care in Kansas) meeting at

Manhattan City Library at 1:30 in the Auditorium

October 25 – Health Oversight Committee in the Capital Bldg. at

9:30am – WE NEED TO FILL THE CHAIRS IN THE ROOM!!

The FHTP Moderator just received this announcement from Congressional Representative Tim Huelskamp's office: **Office of the Repealer Announces More Tour Stops**

Topeka – Kansas Office of the Repealer Secretary Dennis Taylor announced today the details of more stops on his tour of the state of Kansas.

Secretary Taylor, who began his tour today, is traveling across the state to discuss proposed repeals and collect input from Kansans on rules and regulations they believe should be repealed.

In January, Governor Sam Brownback signed Executive Order 11-01 establishing the Office of the Repealer within the Kansas Department of Administration. The Governor tasked the Office of the Repealer with investigating the system of governance of the state including its laws and regulations to determine instances in which those laws and regulations are unreasonable, unduly burdensome, duplicitous, or contradictory.

As part of the investigative process, Executive Order 11-04 also charged the Repealer with establishing a system for receiving public recommendations suggesting various laws and regulations to be considered for repeal. In addition to attending one of the tour stops, Kansans may submit their ideas to the office's online website at: <http://repealer.ks.gov/>

Editors Thought: We have not received much advance notice on these meetings, however, it may be a once in a lifetime opportunity. Get your "rules and regulations" you DON'T like together and go to the meeting of your choice – or go to all of them. This is our chance!! Tell them how you feel about Obama Care (get Federal & State out of Health care); Kansas excepting Federal Education Assistance; repeal Assisted Living for all anyone who isn't incapacitated, elderly, youth, requiring tests to qualify for any assistance. Those are the ones I quickly thought of. What are your thoughts?

Hi, All, I'm putting in my 2 cents worth because this is **extremely important!! This is not a TEA Party Issue only – This is a, “You better pay attention and do something before it’s too late” issue.** Do YOU want ObamaCare to control your health/your life? Do you want **politicians** NOT **physicians** deciding which prescriptions you will and **will NOT** receive or even **IF** you can **SEE** your Doctor? State Representative Charlotte O’Hara, representing Johnson Co, wrote the 4 articles following. She is a Freshmen Representative of Kansas Legislature. Rep O’Hara, unlike many, took her responsibility seriously and immediately stepped up and began looking deep into what our Governor and Insurance Commissioner were doing **behind our backs.** Governor Brownback **IS INSTALLING OBAMACARE IN KANSAS** at this time. Lt. Gov. Colyer is the one who is actually working with, Insurance Commissioner Sandy Praeger. Together they have been working on **this “Healthcare”** in Kansas since prior to 2008. Yes, your right, Gov. Brownback & Ins. Com. Praeger stated they sent back \$31.5M of ObamaCare funds. What you haven’t been informed of is that in the next breath they applied for and accepted 4 times that amount, \$135M, in another name, KEES, previously known as K-MED which is the same thing as Obama Care. Please, for your sake and mine, carefully read the following **AND ACT on it NOW, as in TODAY.**

Your already at your computer – send email **demanding the KEES (K-MED) monies be sent back to the Feds; make the suggested phone calls; write letters, email, fax, snail mail. Do, at least, one of these. Calling Lt. Gov. Colyer’s office at 785-296-2214 is extremely important.** If each of you did even 1, yes, one, of these things many contacts would be made? Then if you did 2, 3, or all 4 of these contacts, these offices would be receiving enough messages that they **would** get the message. Tell them, to listen to the Kansas Citizens on this issue or they won’t have the opportunity to listen and act in your behalf after the next election. **MAKE them listen: CALL, FAX, EMAIL, MAIL!! NO ONE ELSE CAN STOP THEM NOW!! DON’T PUT YOUR ACTIONS OFF – DO IT TODAY!!**

(Health Exchanges in Kansas)

Dear Friends,

Ah, early January 2011 the Republicans ride into Topeka on a vote that swept the Democrats out and placed them (the Republicans) in charge of government in the State of Kansas! One of the prime targets for the Republicans moving into power was to derail the enactment of the dreaded Affordable Care Act aka Obama Care.

Hitting the road running by January 19th our State Attorney General, Derrick Schmidt, won the approval from a federal judge in Florida to join the group of states challenging the constitutionality of Obama Care. Kansas Attorney General, Derrick Schmidt stated, “Kansas is now among the majority of states challenging this unprecedented federal power grab. We will be part of this historic decision that will define the relationship between the federal government, the states and individual citizens for years to come.”

Fast forward to June 1, 2011. Governor Sam Brownback signs into law the Kansas Health Freedom Act that passed the Senate on a vote of 38 to 1 and the House on a vote of 107 to 14. This act states, “A resident of this state has the right to purchase health insurance or refuse purchase health insurance. The government shall not interfere with a resident’s right to purchase health insurance or with a resident’s right to refuse to purchase health insurance. The government shall not enact a law that would restrict these rights or that would impose a form of punishment for exercising these rights. No provision of this section shall render a resident of this state liable for any punishment, penalty, assessment, fee or fine as a result of such resident’s failure to procure or obtain health insurance coverage or participate in any health care system or plan.”

With Kansas joining the lawsuit challenging Obama Care and the Governor signing Kansas Health Freedom Act, you would think that Kansas must be one of the best states in union as far as being protected from implementation of Obama Care. But wait, what is happening at the Insurance Commission, headed by Republican Sandy Praeger and KHPA (Kansas Health Policy Authority) headed by Dr. Andrew Allison?

Well, it seems while the Attorney General, the Kansas House, the Kansas Senate and the Governor have been busy fighting the good fight against Obama Care, the good folks at the Insurance Commission and KHPA have been extremely busy spending a \$31+ million federal grant awarded to the Insurance Commission

and a \$25 million combination of a federal grant and other federal matching funds awarded to KHPA for.....the implementation of the Affordable Care Act aka Obama Care. Oh, my, all is not as it seems.

Just a side note here, "Let the Madness Begin" is a song written by Ben Juneau from the CD "Let The Madness Begin" on Enneagram Records, www.enneagramrecords.com, a local label that I am also signed with. Yes, I'm also a singer/song writer. Anyway when I started to dig through this massive amount of documentation I contacted Ben to ask his permission to use his song title because it absolutely fits, in my opinion, what is happening in Kansas.

The following documentation is for the ketchup bottle readers in the crowd, lengthy, but extremely informative. If you have a tendency toward high blood pressure, perhaps you should take your medication before proceeding further.

The following two federal grants were requested by and awarded to the Kansas Insurance Commission.

Kansas Health Benefits Exchange Planning Grant—KID received a \$1 million grant from HHS to begin statewide planning process through September 2011 to identify issues and make decisions related to a **Kansas state-based health insurance exchange** (*part of the implementation requirements under Obama Care, I mean Affordable Care Act*), which begins in January 2014. The link to the grant is:

http://www.ksinsurance.org/consumers/healthreform/EXCHANGE_PLANNING_GRANT_APPLICATION_NARRATIVE_08-31-2010.pdf

Early Innovator Grant--\$31.5 million from HHS—for use in building a technology system to provide eligibility services for both Medicaid/CHIP and **Kansas Health Benefits Exchange**.

The grant is one of five, two-year grants awarded to states that submitted **early innovator exchange implementation proposals**.

Kansas is in an advanced state of readiness to serve as an early innovator

The expanded K-MED project supported by the grant will provide a one-stop, single door determining eligibility for a **health benefits exchange**.

The grant will work to coordinate the efforts of the Kansas Insurance Department and the Kansas Medicaid and CHIP systems (through KHPA/KDHE).

The application for the grant was submitted in December, with encouragement from the Kansas Legislature's Joint House-Senate Health Policy Oversight Committee.

The health exchange approach is something that Kansas has been looking at for more than 10 years.....

The link to this grant is: <http://www.ksinsurance.org/consumers/healthreform/MedicalEligibility-ExchangeGrant.pdf>

Information provided by: *Cindy Hermes, Director of Public Outreach and Health Care Consumer Ombudsman Kansas Insurance Department*

This is the piece from KHPA (Kansas Health Policy Authority) for K-Med.

Bid Event ID Number: EVT0000186 Kansas Medical Eligibility Determination (K-MED) Software with Associated Integration Services and Ongoing Operational Support the K-MED System shall feature the following high-level functionality:

8. The new system must be highly scalable to allow medical assistance programs to grow, including the **necessary changes to support the full implementation of the Affordable Care Act (aka Obama Care) as required by federal law**.

Access to Care – Every Kansan should have access to patient-centered health care and public health services ensuring the right care, at the right place, and the right price. Health promotion and disease prevention should be integrated directly into these services. **Quality and Efficiency in Health Care** – The delivery of care in Kansas should emphasize positive outcomes, safety, and efficiency and be based on best practices and evidence-based medicine. **Affordable and Sustainable Health Care** – The financing of health care and health promotion in Kansas should be equitable, seamless, and sustainable for consumers, providers, purchasers, and government. **Promoting Health and Wellness** – Kansans should pursue healthy lifestyles with a focus on wellness — to include physical activity, proper nutrition, and refraining from tobacco use — as well as a focus on the informed use of health services over their life course. **Stewardship** – The Kansas Health Policy Authority will administer the resources entrusted to us by the citizens and the State of Kansas with the highest level of integrity, responsibility, and transparency. **Education and Engagement of the Public** – Kansans should be educated about health and health care delivery to encourage

1.2.2 Current Business Processes – Kansas Medical Programs KHPA administers over 20 individual medical assistance programs, serving over 400,000 Kansans annually. Programs include Medicaid,

CHIP, MediKan, AIDS Drug Assistance Program (ADAP), Healthy Kids, and several state funded programs. Different rules are applicable for the various programs. The K-MED System will support eligibility determination for all medical programs as well as the State Supplemental Payment Program. It shall also have the functionality to expand to additional medical programs quickly and easily as necessary, especially programs and changes related to the **Affordable Care Act**.

Implement New Initiatives – With the Affordable Care Act implementation on the horizon, KHPA anticipates the need for a flexible eligibility system when implementing the new rules and operational requirements. The ability to quickly implement new programs will also enable KHPA to take advantage of recent federal options and improvements available for health care programs, including Express Lane Eligibility and expansion of Presumptive Eligibility. The K-MED System will set the foundation for the addition of other means tested programs.

1.5.2 Bid Event ID Number EVT0000186 Page 31 of 297 K-MED Procurement Schedule K-MED PROCUREMENT SCHEDULE 1. State Releases K-MED RFP October 7, 2010 2. Pre-Bid Vendor Conference October 14, 2010 12:00 noon Central Time 3. Deadline for Submitting Written Questions Requesting Clarifications November 2, 2010 12:00 noon Central Time 4. Deadline for State to Post Final Responses to Written Questions December 9, 2010 **5. Proposal Submission Deadline (RFP Closing Date) January 4, 2011 2:00 pm Central Time** 6. Notification of Vendors Selected for Software Demonstrations and/or Discovery March 17, 2011 7. Product Demonstrations and/or Discovery Sessions March 21 to April 8, 2011 8. State Issues a Call for Revised Offers April 11, 2011 9. Deadline for Vendor Revised Offer Responses April 19, 2011 10. State Conducts Evaluation of Revised Offers April 20 to May 3, 2011 11. Evaluation Committee Recommendation to the Procurement Negotiating Committee (PNC) May 4, 2011 12. Vendor Notified of Selection May 6, 2011 13. Contract Negotiations May 9 to 20, 2011 14. Award / Contract Signed May 20, 2011 15. Detailed Project Plan Approved by Kansas Information Technology Office (KITO) June 20, 2011 16. Project Execution Date / Project Kick-off Meeting June 22, 2011

2.9.1 The Affordable Care Act (ACA) (Obama Care) The implementation of the **Affordable Care Act (Obama Care)** will introduce new complexities and challenges to KHPA. Although many details of the implementation of the new provisions remain unknown, it is absolutely essential that the K-MED application support not only the additional workflows, processes, and rules that will come about, but also the tremendous increase in the number of members that are served and the culture change that will occur as a result of this landmark implementation. The K-MED System must support the expansion of Medicaid under the **Affordable Care Act (Obama Care)**, and will likely provide the necessary single entry point for the insurance exchange as well. While the supporting policies and rules are not yet determined, the general functionality provided by the K-MED System must have sufficient flexibility to easily include these new processes and rules via contract change order. K-MED is expected to have sufficient capacity to **support a large increase in the number of members served by medical assistance programs**, including subsidies and premium assistance members added due to the implementation of the **Affordable Care Act (Obama Care)**

An initial estimate of the number of additional members to be served can be found on the KHPA website at the following locations:

<http://www.khpa.ks.gov/board/download/05182010/5-18-10%20Health%20Reform%20Preliminary%20Estimates.pdf> http://www.khpa.ks.gov/board/download/05182010/5-18-10%20SRHealth%20Presentation%20-%20KHPA_FHCR_Prelim%20Cost%20and%20Coverage_Board%20Mtg_2010%2005%2017_FINAL.pdf <http://www.khpa.ks.gov/board/download/05182010/5-18-10%20Impact%20of%20Federal%20Health%20Reform%20on%20Kansas%20-%20Dr.%20Allison%20presentation%20Final%2005-17-10.pdf>

9. As noted earlier, KHPA expects the K-MED System to serve as the single point of entry for the Exchange as well as for existing KHPA programs. How will the proposed solution ensure that the K-MED System can serve as the single medical assistance eligibility determination system supporting determinations for Medicaid, CHIP, subsidies, tax credits, premium assistance, state only coverage and any other medical assistance benefit? Will the proposed solution be capable of providing an immediate response to applicants regarding eligibility and facilitate immediate enrollment action to the **Exchange**, MMIS or other entity? **10. Does the proposed solution provide other additional services or features necessary to support full implementation of the Affordable Care Act (Obama Care) that KHPA may wish to consider?** **11. ACA (Affordable Care Act) (Obama Care)** provides many new opportunities and challenges for every State. Because of the KATCH grant,

KHPA is in a unique position to release an RFP for a complete medical eligibility system replacement very early in the health care reform implementation process. Many other States with similar legacy technology may find it difficult to implement health care reform on time because replacing their systems or performing significant modernization and modification to the legacy systems as well as developing new eligibility processes will take more time than is available before States must begin serving the additional populations in January 2014. To compound the problem, States will not only need new processes and new capabilities, but they will need significantly more capacity as well. **Many States may not be able to handle the sudden increase in potential customers with the technology they currently possess**. While it is not likely that one solution will work for every State, it may be desirable, if not necessary, for States to have some pre-defined options from which to choose. KHPA would like to explore the possibility of using the solution selected as a result of this RFP as one of the potential short or long term solutions to other States' current challenges. Potentially, access to this solution could be offered to other States in something similar to a "software as a service" model.

KHPA will carefully consider Proposals that creatively address how their technical solution will support the Affordable Care Act implementation. Although KHPA fully understands many unknowns exist with the Affordable Care Act implementation, the proposal shall provide a detailed explanation of how the solution will meet the future model created by the Affordable Care Act (see RFP Section 3.4.10.5 – Future Direction). Preliminary recommendations regarding portions of the Affordable Care Act as issued by the Enrollment Workgroup of the Health Information Technology Policy Committee at the U. S. Department of Health & Human Services may be of interest to the Proposer. Follow this link to the Enrollment Workgroup's August 19, 2010 meeting:

<http://healthit.hhs.gov/portal/server.pt?open=512&mode=2&objID=2004&PageID=18539>.

State of Kansas October 7, 2010 **2.10** Bid Event ID Number EVT0000186 Page 51 of 297 **RESOURCES TO BE PROVIDED** The estimate of the number of staff FTEs to be provided by KHPA is 23 FTE and their intended roles or activities on the project are as follows: **Project Roles** Project Director Project Management Team, Technical Team Manager Technical Team, QA System Testing Manager, QA Systems Testing Team, Contract Management, Contract and Project Change Management Communications Team Training Team, Business Functional Team Manager Business Functional Team.

So, according to this documentation, on June 22, 2011 (however, I spoke with Dr. Andrew Allison and that date has been pushed back a week or two) the KPHA (Kansas Policy Health Authority) will have their K-Med Project Kick-Off meeting and Kansas will be off to the races as an Innovator state for ACA, Affordable Care Act aka Obama Care, in lock step with projects going forward at the Insurance Commission. I wonder, how many signatures would it take to recall our elected Insurance Commissioner, Republican Sandy Praeger?

Something that really troubles me is through all of this documentation I kept reading about the enormous increase in use of public funded health care, so why the name Affordable Care Act? Ah, yes, Let the Madness Begin. Thanks Ben for allowing me to use your song title to get this message out to the good people of Kansas. Pitchforks anyone?

Please keep me in your prayers.

Respectfully yours,
Charlotte O'Hara

P.S. Here is the link to videos with Jim Sullinger interviewing me after the session. <http://www.youtube.com/user/repcharlotteohara27?feature=mhee>

Costs of K-Med (Obama Care in Kansas)

Dear Friends,

I was curious as to what KHPA's (Kansas Health Policy Authority) estimate on costs were to implement K-Med (Obama Care's Health Exchange). So I asked the question to Dr. Andrew Allison, the head of KHPA. Here is his response, remember the blood pressure medication before reading this. It's an alarming example of why we, the taxpayers, can no longer afford government as usual.

Rep. O'Hara,

We truly don't know that K-MED's total cost will be yet, although I believe it will be higher than the roughly \$25-\$30 million we originally estimated when we submitted the HRSA/SHAP grant application in June 2009.

My best guess for K-MED's costs is probably around **\$50 million**, but we won't know until negotiations are complete (not all of those costs are the vendor contract itself). Depending on the success of the project and terms of payment (both are subject to the ongoing negotiations), I would expect these costs to be spread over three state fiscal years: FY 12-14.

Yes, we will need funding to make up for the lost HSRA/SHAP dollars, but we won't need to replace all of those lost dollars. Some of the \$30 million we no longer expect to receive from the HSRA/SHAP grant would have been used for outreach, not K-MED, and we are not obligated to continue those activities, and do not plan to use SGF for that purpose. Based on my \$50 million speculation about costs above, and the available HSRA/SHAP and Early Innovator dollars we have committed, we could be short in the neighborhood of \$2M. That is the state's 10% share of the remaining gap (the Feds would pay for 90% of the gap).

To sum up, if all of these assumptions are correct and no other source of federal or state funding becomes available to us, that would leave us as much as \$2M total for the state to come up with over the course of the next three fiscal years. These funds might come through SGF, combined agency IT resources (e.g., SRS and KHPA), private donations, use of in-kind resources, etc. I hope that helps.

Andy

O.K., Andy, so you have no idea what this K-Med monster is going to cost, not to mention what the ongoing costs will be?

Now, let me explain the HSRA/SHAP grant application. KHPA was awarded a \$40 million dollar grant, but that was cut to \$9.5 million. So basically, KHPA is scrambling around trying to replace \$30.5 million for K-Med.

If I went to my banker and laid out this wonderful business plan for expansion with an estimate of let's say \$5 million dollars. Then I came back and told my banker, well, I believe, can't really be sure, but I believe the costs are now going to be more in the range of \$10-12 million and oh, by the way, 60% of my financing has fallen through, but I still want to go forward, he would call for transport to Osawatomie State Hospital for me with lights and sirens full on. But, hey this is **OUR** government at it's finest.

Now just to assure you that all of the madness is not just contained in the government sector, I want to share with you an email that I received in response "Let the Madness Begin, Health Exchanges in Kansas" from the Kansas State Chamber of Commerce. I would suggest more blood pressure medication and perhaps, just in case, paramedics close by.

Eric Stafford, Senior Director of Government Affairs for the Kansas Chamber, ".....our previous legislative agendas (Kansas Chamber) have included a provision under Health Care which stated that the Kansas Chamber supports equal access for employers to purchase insurance through exchanges."

Stafford goes on to state "....this is actually a conservative plan (Stafford sounds like Newt) with the intent of fostering an environment of competition." He continues, "While Obama Care has many faults, I would question whether the exchange-if properly built for the consumer-in one of those pieces that should be repealed." And finally he states, "I'm sure you're aware that if we don't establish our own exchange, the federal government will come in and make one for us. I would like the business community in Kansas to have a say in how our exchange should operate-not have one forced down our throats."

This is the same old worn out excuse that we hear in Topeka, especially in Insurance Committee hearings, if we don't do this, then the feds are going to come in and do it for us. What a bunch of hogwash.

First, under what authority and second when is ANYBODY going to stand up to the federal government and explain that states have sovereign powers granted and guaranteed in our U.S. Constitution. Of course, we have sold our sovereignty by taking not 30 pieces of silver, but billions of them, so we do have that dilemma to deal with.

And just one more piece of information that is not cheering, but it needs to be brought out very clearly.

Go to this [article](#) that ran in Politico back in March. It appears that Governor Brownback is allowing our Republican Insurance Commissioner, Sandy Praeger, to go forward with the implementation Obama Care in Kansas through K-Med. Hmmm signing the Health Care Freedom Act in June and allowing the K-Med project kickoff in June.....I know that I'm a simple woman, but does this add up to duplicity? Webster's definition of duplicity:

1: contradictory doubleness of thought, speech, or action; especially : the belying of one's true intentions by deceptive words or action

Could be that the shoe fits. Anyway, that's the update, we desperately need to stop the implementation

of K-Med, but unless you, the good folks of Kansas decide to rise up in rebellion against the federal government usurping our state's sovereignty through Obama Care (K-Med in Kansas), America will no longer be the American that we grew up knowing and loving. You can listen to "Where's My America" a song that I wrote which reflects this sentiment by [clicking here](#).

Again, hold me in your prayers as we fight to bring sanity back to the process of governing. Oh, by the way I just received another email from Dr. Andrew Allison in response to my question if a vendor has already been selected for K-Med.

Rep. O'Hara

No. Selection of a vendor is complete only when a contract has been signed. We expect to sign a contract toward the end of this month.

Andy

We still have time to stop this, but time is extremely short.

Sincerely yours,

Charlotte O'Hara

OBAMACARE IN KANSAS, PART 2

Dear Friends,

Well, I continue to dig into the details of the "new" 90/10 CMS (Center for Medicare and Medicaid Services) grant for IT development Lt. Gov. Jeff Colyer announced on August 31st which would not require Kansas to build a Health Exchange.

Actually this 90/10 funding has been in place and according to Dr. Andrew Allison (in an email he sent to me in June) an additional funding source the administration had planned to utilize prior to the return of the Early Innovator Grant. That pretty well shreds the "new" funding source narrative of the Brownback administration's "new" KEES plan. (Note: I have provided links at the end of the newsletter for documentation.)

Well, I can't call KEES new, since in all of the documentation for the contract with ACCENTURE refers to K-Med instead of KEES. I can't even call this a recycled RFP (request for proposal) since, as far as I can see, only language specifically calling out health exchanges has been removed, which modified the K-Med contract that was to be paid for by the Early Innovator Grant so slightly that the administration was not required to resubmit the RFP for new bids!!! So, not recycled, simply regurgitated.

Basically, it's as though the administration was building a car, but refused to call it a car because they were only going to build the chassis, body, drive train, wheels, tires, etc. etc. but they were not going to install the engine, therefore it's not a car! Same thing is true with KEES and health exchanges. The IT infrastructure that is being built in the contract with ACCENTURE complies with the IT requirements in SECTION 2201 of PPACA (Obamacare). But, according to the Brownback administration, with this grant money they are not building a Kansas health exchange. Am I missing something or has Sam simply been in Washington too long????

However, Sandy Praeger, Kansas Insurance Commissioner, is continuing down the road of developing a health exchange in Kansas with her \$1 million dollar Health Exchange federal grant and has publicly stated that she could not develop a health exchange without the IT infrastructure that will be provided by KEES. Whew, are you as confused as I am or is this just full-blown duplicity??

I have requested from Legislative Research the actual grant application and award from CMS, Centers for Medicare and Medicaid Service, but have not received those as of yet, so I don't know if the Topeka boys actually have their hands on the grant money or not. Since it's been such a short time span, I'm thinking no. However, they have signed the contracts with ACCENTURE, hope there's a funding escape clause in the KEES contract in case something happens to the grant money.

Oh, and there is one more "little wrinkle" in the requirements of this "new" grant called Presumptive Eligibility found in section 2202 of PPACA (Obamacare). I was alerted to this little gem by Budget Director, Steve Anderson, as he was telling me how much damage I had done by blowing the whistle on the Early Innovator Grant. He was more than a little cranky on that subject.

Anyway, Presumptive Eligibility allows hospitals, without any documentation to presume someone is eligible for Medicaid. You read that right, hospitals. But in PPACA (Obamacare), it's optional, however, it is required in this grant and noted on lines 132, 997 and 998 of the KEES contract attachment B.

Oops, I thought the whole reason for [KATCH/K-Med/KEES](#) was to fight fraud. OK, so we'll fight fraud at

the front door through the application process with all of the new IT infrastructure in KEES or KATCH or K-Med whatever we finally decide to call it, while we open a brand new back door for rampant fraud abuse through Presumptive Eligibility.

As Budget Director, Steve Anderson, stated to me, the State of Kansas will be forced to find the fraud after the fact.

So, it appears the Brownback Administration is in violation of the Resolution passed Aug. 13th at the Republican Summer State Committee meeting (I wonder if the ink on that resolution is even dry?) on at least two counts, section 2201 and 2202 of PPACA as they continue to implement PPACA (Obamacare) in Kansas.

I'm really disappointed and my confidence in the Brownback Administration is in tatters.

I simply don't understand why the Brownback Administration would so blindly continue down this road when the good folks of Kansas and the State Committee men and women of the Republican Party have spoken so clearly on this issue.

So, what can we do? Call Lt. Gov. Jeff Colyer's office, 785-296-2214 and again demand the return of the CMS (Center for Medicare and Medicaid Services) 90/10 Grant. Let the message be clear, Kansas wants no part of ANY implementation of PPACA (Obamacare) in Kansas.

If you don't live in my district it would be helpful if you would contact your State Representative and State Senator to encourage them to ask the administration to send this CMS grant back and stop implementing Obamacare in Kansas.

Again, please hold me in your prayers.

Respectfully yours,

Charlotte O'Hara

P.S. I just found out today that the Health Exchange Steering Committee encouraged Insurance Commissioner, Sandy Praeger, to continue work on Health Exchanges for Kansas in their August 24th meeting. I have provided a [link](#) for you to see the entire list of who is on the committee, but a couple stood out; Lt. Gov., Jeff Colyer and Representative Brenda Landwehr. Interesting to say the least. Duplicity anyone?

<http://www.da.ks.gov/purch/KEES/default.htm> <http://www.cms.gov/Medicaid-Information-Technology-MIT/>
<http://www.cms.gov/Medicaid-Information-Technology-MIT/Downloads/exchangemedicaidguidance.pdf>

Dear Friends,

Wow, what an amazing turn of events that has occurred since my first newsletter, "Let The Madness Begin" on the implementation of the Affordable Care Act (ObamaCare) in Kansas.

First of all, I applaud Governor Brownback's courageous decision to send the \$31.5 million Early Innovator Grant back to HHS Secretary Kathleen Sebelius. His determination that he had been ill advised in his acceptance of the grant in February shows that he is willing to listen to the good folks in Kansas. And yes, it appears that the grassroots in Kansas is alive and well!

Here's a big thank to all of you who took the time to contact your Representative, call the Lt. Governor's office or shared my newsletters with your friends, whatever action you took to help encourage the Republican leadership in Topeka to reconsider their actions on this most important issue facing our state and nation, again thank you.

I took some hits for taking a public stand on opposing the acceptance of the Early Innovator Grant. I was told that I should "work behind the scenes". Because I did not heed that advice and after being interviewed on the Greg Knapp show and the Kris Kobach show on 710 Radio I was removed from the Insurance and Financial Institutions Interim Committee by Speaker O'Neal. You may read our email conversation from July 7th when I requested an appointment on the committee to July 20th when I was removed by going to this [link](#)

I still have concerns and they are as follows:

According to Legislative Research there are millions of dollars worth contracts pending that were to be paid for by the Early Innovator Grant. My question, what is the status of those contracts and if they are to be awarded before the next legislative session, from what revenue sources are they being funded? In other words, have we simply changed the name, but not the game?

Insurance Commissioner, Sandy Praeger, must return the "**Kansas Health Benefits Exchange Planning Grant** from which the Kansas Insurance Department received a \$1 million grant from HHS to begin statewide planning process through September 2011 to identify issues and make decisions related to a **Kansas state-based health insurance exchange** part. of the implementation requirements under the Affordable Care Act (Obama Care) which begins in January 2014"

http://www.ksinsurance.org/consumers/healthreform/EXCHANGE_PLANNING_GRANT_APPLICATION_NAR

[RATIVE_08-31-2010.pdf](#)

So, there's still work to be done and vigilance must be maintained. I am convinced that change in our state and nation will not and really cannot come from inside, too much business as usual attitude. It's up to each of us to continue to put pressure on all our elected officials to make the right policy decisions.

Please keep me in your prayers and I want to share scripture that has sustained me in this battle, Isaiah 40:31 But they that wait upon the LORD shall renew their strength; they shall mount up with wings as eagles; they shall run and not be weary; and they shall walk, and not faint.

Sincerely,

Charlotte O'Hara

P.S. I've capitulated and joined Facebook, so if you want to "friend" me, just note in your friend request that you're on my newsletter list. I like to know how I'm connected to folks who I'm "friends" with on Facebook.

CONTACT INFORMATION FOR LEGISLATORS AND GOVERNOR

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"Freedom is never more than one generation away from extinction. We did not pass it to our children in the bloodstream. It must be fought for, protected, and handed on for them to do the same, or one day we will spend our sunset telling our children and our children's children what it was once like in the United States where men were free." ..RONALD REAGAN

Air Force General blows whistle on Obama, but media deaf

Jim Kouri, Law Enforcement Examiner, September 17, 2011 - Like this?

"If a tree falls in a forest and no one is around to hear it, does it make a sound?"

"If an Air Force general blows the whistle on the Obama White House, does anyone in the media hear the corruption?"

A United State Air Force general is blowing the whistle on another alleged White House scandal, but few in the news media seem to be listening.

According to General William Shelton, the commanding officer of U.S. Air Force's space command, he was told to alter his testimony before the House of Representatives' Subcommittee on Strategic Forces regarding an Obama White House attempt to award a defense contract to the Lightsquared firm.

Lightsquared is a high-tech company doing business in Virginia that's owned by billionaire Philip Falcone, an Obama friend and campaign contributor.

According to the National Legal and Policy Center, Phil Falcone had visited the White House and made large cash contributions to the Democratic Senatorial Campaign Committee. Soon after, the Federal Communications Commission (FCC) granted his Lightsquared a highly unusual waiver that allows the company to build out a national 4G wireless network on the cheap.

Republican lawmakers say that after Falcone's visit, the Obama White House allegedly tried to push through a Lightsquared's proposed wireless network regardless of the objections emanating from military commanders who believed the project could disrupt key U.S. satellite systems.

At a hearing on Thursday, lawmakers on strategic forces subcommittee, especially the Republican

chairman, Michael Turner, requested that the House Oversight Committee investigate if Falcone's company garnered any type of special treatment from the White House or from Obama appointees.

The hearing came after a report by a blogger on a news and commentary web site alleged that the Obama White House pressed General Shelton to downplay his concerns about the proposed Lightsquared system.

According to the National Legal and Policy Center, Phil Falcone had visited the White House and made large cash contributions to the Democratic Senatorial Campaign Committee. Soon after, the Federal Communications Commission (FCC) granted his LightSquared a highly unusual waiver that allows the company to build out a national 4G wireless network on the cheap.

"Under extremely unusual circumstances, the Federal Communications Commission (FCC) recently granted a company called LightSquared the right to use wireless spectrum to build out a national 4G wireless network. LightSquared will get the spectrum for a song, while its competitors have to spend billions," according to NLPC's Ken Boehm.

President Obama's underlings deny any wrongdoing, and officials at Lightsquared denied the charges that it is receiving preferential treatment from President Obama or his staff.

Republican staff members on the subcommittee say that the decorated General Shelton told the lawmakers that Obama administration officials urged the general to describe Lightsquared's system favorably during his congressional testimony.

During the hearing, General Shelton told committee members that the wireless broadband network manufactured by Lightsquared would have a negative impact on the current Global Positioning System (GPS) relied on by both the U.S. military and private sector users of the GPS.

General Shelton told the committee members: *Tests with Defense Department experts, civilian agencies and others "indicate the LightSquared terrestrial network operating in the originally proposed manner poses significant challenges for almost all GPS users."*

The general insisted through his spokesperson on Friday that he had not "watered down his testimony due to alleged White House pressure."

According to a source familiar with the Lightsquared probe, many officers at the Pentagon are highly suspicious of the President, the White House staff and even Obama's appointees at the Defense Department.

Another occurrence being probed is that the allegation that Lightsquared at first offered to sell satellite phones on its network, however the Federal Communications Commission allegedly issued a special waiver to the firm thus allowing sell terrestrial-based wireless service to other companies.

Department of Defense officials, such as General Shelton, in the past have raised concerns about interference with GPS users, and the FCC would then promise to disallow a firm to begin operating their network until after intense testing is carried out to ensure there is no disruption to satellite navigation.

The head of the FCC declined to appear before the committee on Thursday, which the chairman, Turner, called an "affront" to the panel.

Meanwhile, Falcone and Lightsquared executives are taking the offensive by giving Obama-friendly journalists at Politico exclusive interviews.

LightSquared CEO, Sanjiv Ahuja, and its billionaire backer, Phil Falcone, denied all allegations that the wireless company used its political pull with the Obama administration to secure approval of its business plans with the Defense Department.

"It's just very disappointing that people are not seeing the facts here, and [that] this has become a real political issue," Falcone, a senior executive at the hedge fund firm Harbinger Capital, said during his Politico interview. "It's not a function of being a Democrat or a Republican, it's about trying to be an innovator. ... It's very disappointing and frustrating that we are getting stonewalled like this. ... I kinda scratch my head every single day and say I can't believe this is happening."

Falcone and Ahuja denied receiving special treatment from the White House or the FCC in their ongoing quest to become the nation's first wholesale wireless broadband provider, according to Politico.

But some observers see things differently. Mike Baker, a political strategist and a former military officer, believes that this investigation needs to be taken to wherever or whomever it leads. He's like to see a special prosecutor appointed.

"This is a very important national security issue, not some politically-motivated witch hunt like the Valerie Plame-CIA case. But we all know that with the news media protecting this president, the chances of

anything being done are slim or none," he quipped.

"First of all, we know what motivates politicians and big business. In the middle you have a career officer who is a four-star general. Whom would you believe? What's in it for General Shelton to make up stories?" Baker asks.

"Let's hope General Shelton sticks to his guns and that more Pentagon and Justice Department officials decide enough is enough from this administration," Baker added.

Continue reading on Examiner.com [Air Force General blows whistle on Obama, but media deaf - National Law Enforcement | Examiner.com](http://www.examiner.com/law-enforcement-in-national/air-force-general-blows-whistle-on-obama-but-media-deaf?CID=examiner_alerts_article#ixzz1YEbfJ43) http://www.examiner.com/law-enforcement-in-national/air-force-general-blows-whistle-on-obama-but-media-deaf?CID=examiner_alerts_article#ixzz1YEbfJ43

FAIR TAX

FairtaxKC.org

The FairTax Act of 2011 H.R.25/S.13 is good for American

Americans need jobs--The FairTax will attract \$5 trillion of offshore capital to return to the U.S. the first 12 months, creating millions of jobs without government stimulus

We cannot afford to pay for the government using the Income Tax

- The SBA says the cost of Tax Compliance for small businesses with less than 20 employees is at least \$1,584 per employee, per year.
- The SBA study also shows the cost of taxes and tax compliance for a family of four is more than \$37,962 per household.
- The Tax Foundation studies estimates the Cost of Compliance is at least 22% of the tax collected. This was about \$462 billion for FY2010.
- Congress now used the Income Tax to support an enormous "Tax Avoidance" infrastructure amounting to billions of dollars of waste, fraud and corruption.

The Income Tax method of funding the government is ridiculous

- Over 85% of the revenue collected is from individuals and employers using the payroll tax system.
- Employers are forced to collect these taxes and then fund the government operation until they can recover these funds from customers buying their products/services.
- The taxes and the cost to collect them are passed onto the next business until finally the individual consumer pays for all of it in the final price paid.

When the Income Tax is repealed and replaced with the FairTax

- There will be no individual income tax to pay or report.
- Businesses will not be required to collect taxes nor report their income.
- Wage earners will receive a full paycheck with no federal deductions.
- Family farms and businesses will be passed on without the government taxes.
- The IRS will be phased out in three to four years.
- The FairTax will be collected only on new personally consumed products and services.
- The States and retailers will manage the tax collection at the Retail Point of Sale and be paid to do it.
- Foreign origin profits amounting the \$13trillion of capital held offshore will be re-invested in 5 years in the U.S.
- Obamacare will not be implemented because it depends on the Income Tax to pay for it.
- U.S. producers will experience drastic reductions in cost, making American made products more competitive all around the world.
- Business will focus on conducting profitable businesses and creating jobs instead of finding ways to avoid paying taxes.
- Congress can no longer use the Tax Code for the "Favor Factory" where "back room" deals are made in exchange for campaign donations and political favors.
- State government that "piggy bank" on the Federal Income Tax will need to use their other tax methods to raise revenue, State government tax collection will be much simpler, fairer and less expensive.
- Every family of American citizens will receive a "Family Consumption Allowance", a payment each month to pay the sales tax up to the "poverty level" for essential goods and services.
- Deficit reduction of \$1.5 trillion, the goal of the Joint Select Committee, will start immediately.
- Social Security and Medicare trust funds will flow into real "lock boxes" and not be mixed into the General Fund where the money is spent today.

Additional information: <http://www.fairtax.org> Contact: Earl Long FairTaxKC@EverestKC.net

If you would like to forward this Newsletter as is on to others – be my guest.

If you would like to send comments to the editor – be my guest.

If you have an editorial to submit – be my guest.

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