

# **Exhibit B**

**DECLARATION OF KIMBERLY KOBERSMITH**

1. My name is Kimberly Kobersmith. I am competent and making this declaration on my own behalf. If called as a witness, I would testify consistent with the following:

2. I am 47 years old and live in Berea with my husband, Dave, and our two sons, Sayer, who is 14 and Cavan, who is 12. My husband is 58. My husband and I both work part-time so we can jointly home school and care for our sons.

3. I have a B.A. in communications from Southwestern University in Georgetown, Texas. Since 2014, I have been working as a freelance writer for local newspapers and magazines and have written promotional materials for a non-profit group. I currently work about 10 to 12 hours each week doing this work. For the past two summers, I have run a week long day camp for kids focusing on positive conflict resolution. This is a contract job, and I work one week full-time and about 2 hours a week the rest of the year, which averages out to about 3 hours a week. Since 2011, my husband has worked 20 hours a week as an administrator at the Union Church in Berea.

4. My income is roughly \$375 to 450 per month or approximately \$4800 per year. My hours and income fluctuate substantially throughout the year. My husband's income is approximately \$1878 per month. In addition to earned income, my husband and I receive an Earned Income Tax Credit and a Child Tax Credit. Our annual combined income is approximately \$27,336, which is 109% of the federal poverty level for a family of four (\$25,100).

5. We spend approximately \$2200 on our family expenses each month, including utilities, clothing, gas, food, taxes, insurance, savings, charity and miscellaneous household needs. Since I am self-employed, I have to pay all employment taxes out of my income.

6. With Medicaid coverage, my husband and I can get the medical treatment and services we need, including preventative health care. I had gestational diabetes with one of my pregnancies, and a couple of years ago my doctor found that I was pre-diabetic. With exercise and improved diet, I was able to improve this condition. My husband sees a urologist several times a year, and sees a chiropractor once every two months for back issues. Dave and I both get an annual check-up and go to the dentist at least once a year. According to our MCO and Medicaid, my husband has been determined to be medically frail. Our children get all the recommended well-child check-ups, dental check-ups and vision check-ups.

7. My husband and I enrolled online for Medicaid in 2014. We enrolled online through kynect, but we had to make several phone calls to make sure we were doing it right. Before Medicaid, we had several high-deductible, catastrophic coverage health insurance plans. Only one of these paid for any preventive care. There was always a shadow about what would happen if one of us got sick. We would have copays, and we knew that at any time a serious medical issue could become a financial disaster. Our children were enrolled in KCHIP in 2011, but are now on Medicaid.

8. On June 9, 2018, the Medicaid agency sent us a notice that says I will have a \$15 premium and will be required to work 80 hours a month. The notice states that Dave will be covered under the state plan, will have a \$15 optional premium and will not be subject to the 80 hours a month work requirement. (Attached) We received a subsequent notice in light of the June 29 court order. (Attached) This year, my husband's income has gone down about

\$4500, so paying a premium will be harder. If we do not pay the premium, I will be locked out of Medicaid. If I lose Medicaid, and later reapply, any medical bills incurred during the gap period will not be covered, since there will be no retroactive coverage under the waiver.

9. We will both have a *My Rewards* account under the waiver. My husband and I both wear glasses. Right now, Medicaid pays for my eye exam and my dental check-ups. I will not have any dental or vision coverage at all unless I earn dollars in this account.

10. I am also concerned that if I have to go to the emergency room, and Medicaid doesn't think it was an emergency, they will deduct \$20 from my *My Rewards* account. This amount would go up with each emergency room visit.

11. I work only 13 to 15 hours per week, but according to benefind notices I will be required to work 80 hours a month. I will have to document my hours every month on my Citizen Connect account, but it is unlikely that I will be able to comply with the rule. I am concerned that I could lose Medicaid if I fail to work 80 hours a month, if I fail to report any change of income timely, or if we fail to recertify in time. These reporting requirements will be difficult for me because my hours are different every week. My income also fluctuates widely during the year. I don't know how I would be able to verify my work hours or income. Because I am self-employed, and only pay taxes annually, there is no ongoing record of my time or income. If I lose coverage and then reapply, I could end up with uncovered medical bills during the gap period.

12. My biggest concern personally about the waiver is the reporting requirements, which will be very difficult for me. I am afraid I could lose Medicaid because I am not able to report every change of income or prove my work hours or income. More broadly, I believe that

this waiver will punish individual people for a health care system that is broken. I am not sure how the government thinks low-income people should access health care. While some employers provide insurance, a lot don't or don't provide affordable insurance. Most low income people will not have health insurance through work. Rather than figuring out a system that covers everybody, the state has chosen to implement this waiver which will punish those who don't have coverage.

13. I have agreed to be named as a plaintiff and to participate in this lawsuit as a class action representative. I am doing this not just because I need Medicaid, but because I want to help other individuals and families who are in danger of losing Medicaid if this waiver is not stopped.

14. I declare under penalty of perjury that the above information is true and correct.

Dated this 19 day of September, 2018

Kimberly Kobersmith  
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