



Community Health Center of Southeast Kansas

Testimony – HB 2206

House Health and Human Services Committee – February 16, 2017

Jason Wesco, Executive Vice-President

Mr. Chairman and members of the Committee, thank you for allowing me to provide testimony in support of HB 2064.

Background

My organization provides access to primary medical, dental, behavioral health and related services to all individuals regardless of ability to pay with the goal of improving the overall health of the communities we serve. Last year we cared for more than **43,000 patients** during nearly **160,000 visits** to clinics located in Baxter Springs, Coffeyville, Columbus, Independence, Iola, Parsons and Pittsburg.

Our patients are overwhelmingly of modest means. Over **96% of our patients are considered low-income** with earnings below 200% of the Federal Poverty Level (about \$40,000 for a family of three or less). Directly related to income is insurance status: more than **15,000 of our patients are uninsured**. Inseparable from socioeconomic and insurance status is overall health. According to the annual County Health Rankings report, the nine counties of southeast Kansas have an **average Health Factors* ranking of 93 of 101 counties ranked**. Our healthiest county ranked 77, our unhealthiest 100.

And because many of our patients have lacked access to care – some for much of their lives – they often come to us with multiple and severe health conditions that should be managed in consultation with one or more specialists. Specialists that due to lack of resources or geographic barriers are not available to many of our patients.

Access to Specialty Care

At CHC/SEK, and in CHC's across Kansas, primary care providers often serve as a stand-in specialist — researching, consulting specialists who will talk with them and doing as much as possible — for critically ill and uninsured patients who cannot afford to see one.

“It’s very hard to know that because of a lack of resources, someone will die.— CHC/SEK Physician

Tele-specialty Care

Given these challenges, **CHC/SEK has made a strategic commitment to expanding access to specialty care a top priority in 2017**. The primary way we intend to achieve this goal is through a partnership with Viglias – a Wichita-based multi-specialty telehealth based practice. This partnership will allow us to bring multiple specialists to our patients first through our clinic in Pittsburg and then throughout our system. Not only will this partnership bring direct care to our patients, Viglias has also agreed to make their providers available to provide continuing education to our primary care providers to improve their skills and make them better able to manage patients facing multiple and complex health conditions. The future of access to care in rural Kansas looks none too bright if we do not take immediate action.



Community Health Center of Southeast Kansas

A weakening healthcare infrastructure, pervasive workforce shortages, socioeconomic challenges, poor health outcomes and a declining population base create looming crisis not only in access to care but in the viability of rural communities. While we know that expanded access to tele-health services for all individuals of all payor types is not a magic bullet, we do believe that expanded access to innovative models of care will lead to further innovations that will benefit all individuals.

And, in terms of access to specialty care, in many rural Kansas communities everyone – rich or poor, insured or not – are underserved. Requiring payors to fully compensate providers and sites for services is critical to helping ensure that some of our sickest fellow Kansans will have the opportunity to access much needed care in their home communities or in a community within a reasonable distance.

On behalf of the board, staff and most especially the patients of the Community Health Center of Southeast Kansas, I ask for your support of this important piece of legislation.

Thank you for considering my testimony. Best wishes as you deliberate on this matter.