

## MINUTES OF THE HOUSE KANSAS FUTURES COMMITTEE

The meeting was called to order by Chairman Carlos Mayans at 1:30 p.m. on March 8, 2001 in Room 526-S of the State Capitol.

All members were present except: Representative David Huff - excused  
Representative Carl Krehbiel - excused  
Representative Mike O'Neal - excused  
Representative Valdenia Winn - excused

Committee staff present: April Holman, Legislative Research Department  
Lois Hedrick, Committee Secretary

Conferees appearing before the committee:  
Dale Bloomquist, Chief Operating Officer, Kansas Care Inc., Salina  
Gail Conroy, Regional Business Manager, American Telecare,  
Eden Prairie, MN 55344

Others attending: See attached list

Kansas Care, Inc.

Mr. Bloomquist described Kansas Care as a regional home care company, headquartered in Salina, with branch offices in Concordia, McPherson, and Lyons. Its service area consists of 30 counties. The company staffs a professional clinical team of licensed registered nurses to provide skilled nursing services as ordered by physicians; including medication administration and monitoring, dressing changes, wound care, IV therapy and other clinical procedures.

Other services of the company provided by staff members include personal care services of bathing, grooming, dressing and hygiene; assistance with exercising, transferring, and positioning; meal preparation and clean up; light housekeeping and laundry; and grocery shopping. Mr. Bloomquist stated employees are required to undergo complete physical examinations, and given criminal, driving and background investigations. Care employees are closely supervised, bonded and covered by workers compensation. Kansas Care receives payments for services rendered through Medicare, Medicaid, private insurance, managed care plans, or private pay.

Home Telecare

Mr. Bloomquist and Ms. Conroy then demonstrated the home telecare equipment Kansas Care utilizes. The clinician, at a central healthcare station, communicates visually, audibly and through medical peripherals with the patient at home on a PC-based computer system with Telecare's patient record software. Data from peripherals is uploaded to the PC as measurements are taken by or for the patient. The patient station is a small unit with a telephonic stethoscope, blood pressure/pulse meter, and the ability to interface other medical peripherals according to need. It is a one-button interface. A small video camera is moveable and contains a special macro lens for extreme close-up shots. Ms. Conroy indicated that the system can retrieve any image in the archive file and print it. Each client's record is stored for 60 days and then sent to the physician who develops a new plan of care.

Ms. Conroy stated the system is capable of graphing results taken at different times; that the stethoscope clearly articulates sounds at a higher range than a doctor is able to hear in a hospital setting. (The stethoscope is like ones used on NASA's Space Shuttles.) The average Telecare visit is 9 minutes.

Ms. Conroy stated her company introduced home telecare in 1999. It is a bottom-line approach that allows personal visits to patients in their homes, with a complete, real time picture of the patient's condition, concerns and compliance with treatment protocols. The system improves early detection and intervention for the chronically ill, home-based or high-cost patients which, in turn, reduces the number of clinic, emergency room and hospital visits resulting in savings of healthcare dollars. The system improves quality of care and clinical

## CONTINUATION SHEET

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outcomes, provider productivity, and the financial efficiency of healthcare organizations.

Chairman Mayans asked if the Telecare system has been marketed to school districts. Ms. Conroy indicated Greenville, South Carolina invested in a teleschool program for asthmatic children. Some schools in Kansas have been contacted, especially in rural areas. At this point schools want to do it over the internet. She indicated internet transmission is not as clear as the telephone line.

Mr. Bloomquist indicated of 1,200 patients, 99% of their reimbursements are from Medicaid. Currently, Medicaid (by state regulation) pays \$43.50 for one visit per day, and \$6.75 for each approved additional visit.

Representative Miller asked about Telecare equipment costs. Mr. Bloomquist indicated the central unit cost is around \$10,000; the home unit is about \$5,300. Currently the caseload for Kansas Care is 20 per day.

The next meeting is scheduled for March 13, 2001.