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DEPARTMENT OF HEALTH AND ENVIRONMENT

Division of Health

## **Testimony on Senate Bill 148**

To

## **Senate Commerce Committee**

## By Chris Tilden Director, Office of Local and Rural Health

## Kansas Department of Health and Environment

**February 6, 2007** 

Chairperson Brownlee and Vice Chair Jordan, and members of the Committee, I am pleased to appear to provide comments on Senate Bill 148. I am Chris Tilden, Director of the Office of Local and Rural Health at KDHE. The Kansas Department of Health & Environment (KDHE) supports this bill, which seeks to provide access to the broadband KAN-ED network to the Department of Corrections and the state health department. KAN-ED currently connects schools, libraries and hospitals across the state.

The Kansas Department of Health and Environment has had a long-standing interest in development of the KAN-ED network, insofar as the use of broadband technology is important to healthcare providers in the state of Kansas. Broadband technology is critical to the success of Kansas's growing telemedicine networks and to ensuring access to distance education. Given the ever-tightening budgets of rural health providers around the state, use of televideo for medical consultation and education will become increasingly important. The use of telemedicine for prison-based health is a rapidly growing trend around the country. We support providing KAN-ED access to the Department of Corrections, which will give correction facilities access to medical specialists without the need to transport inmates long distances for care.

KAN-ED access would also be incredibly beneficial to KDHE. KDHE not only regulates, but also provides funding, technical assistance and education to hospitals and other healthcare providers across the state, in a variety of areas including emergency preparedness, trauma, and quality improvement.

KDHE would be able to provide much of its educational content to health care providers through televideo on the KAN-ED network and would save achieve substantial savings by eliminating hourly ISDN charges.

In addition, many of the small, rural hospitals in Kansas are finding it increasingly difficult to afford staff time out of the office to attend important continuing education, and travel expenses are a significant burden as well. By delivering programs over the KAN-ED network, KDHE could train health care providers in their home communities, decreasing travel expenses and minimizing the time health care workers are away from their jobs, providing needed health care to their patients.

Thank you for the opportunity to testify on this bill.