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Health Reform Column:

Systems changes to enhance quality of health care in Kansas

The following is a column by Connie Hubbell, Senior Vice President for the Kansas Foundation for Medical Care and Chair for the Kansas Health Policy Authority Board, regarding efficiency in health care as it relates to health care costs in Kansas. The Health Policy Authority is a state agency created to develop and maintain a coordinated and data-driven health policy agenda, and it was tasked this year with reforming health care delivery in Kansas. On November 1, 2007, the Board will report to the Governor and Kansas Legislature health reform options aimed at improving the health and health care system in Kansas.

The State of Kansas ranks in the second quartile for providing quality health care – with Medicare patients reporting high satisfaction with their care and recent success in improving our immunization rates for young children. But there is more that Kansas can do to improve health, increase efficiency and advance quality of care – and save health care costs in the process.

Americans pay more than 15% of our gross domestic product (GDP) on health care – about \$1.8 trillion dollars. To put that into perspective, only five other countries have GDPs for their entire country that are larger. Yet our health outcomes are ranked 37th by the World Health Organization for overall system performance.

Kansas should build on what's working in our current health care system and look for ways to improve what's not. In developing health reform options KHPA is asking questions of Kansans all over the state. What can we do to improve our health system that is cost effective? What quality improvement changes can we make? How can we promote personal responsibility for our health and health care? Whatever changes we make need to improve health, enhance health care quality, and focus on cost control.

In efforts to change our system, we need to move in the direction of preventing disease before it begins, and providing coordinated care through a primary care “medical home” for those with chronic disease. An increasing number of Kansans are being diagnosed with chronic diseases and these patients often see several doctors in order to meet their health care needs. According to the 2006 Quality of Care Survey conducted by the Commonwealth Fund, around 74% of adults with a “medical home” report that they always receive the care they need when they need it compared to 52% of adults with no “medical home.” Yet it was found that over 15% of Kansans do not have access to primary care. In addition, less than 60% of special needs children ages 0-18 received coordinated and ongoing care within a “medical home” during 2005. Improving communication and coordination among doctors and encouraging self-care can improve health outcomes.

KHPA members are traveling across the state talking with Kansans to listen and learn about health reform. We encourage your comments and suggestions as we look for ways to improve quality, promote primary care coordination through a medical home, and encourage prevention. Please visit us at www.khpa.ks.gov.

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