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Testimony from
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Good morning Chairman Olson, members of the committee. My name is Eve-Lynn Nelson and I direct telemedicine at the University of Kansas Medical Center. I want to emphasize that the perspectives in this testimony represent the views of the Center for Telemedicine and Telehealth and do not represent the official policy of the University of Kansas Medical Center or the views of university administration. My focus today is on real-time videoconferencing to deliver services which has benefited from broadband access. I am here today to provide a telemedicine update specific to our center and highlight a few of our current projects.

As you may recall from Dr. Spaulding's previous briefings, the Center for Telemedicine & Telehealth has been active in telemedicine in Kansas for over 20 years, not only providing telemedicine services but also conducting research and serving as a telehealth resource for stakeholders in Kansas, other states and even other countries. We generally use high speed internet access to accomplish our activities, which has improved over these years from expensive phone lines. We are fortunate that most of our telemedicine partners have ready access to broadband. In my own telemedicine practice, I see children and families who otherwise would go without specialty care or have to drive hours to receive services, missing school and work. Our experience mirror national results reflecting both high satisfaction and promising outcomes.

Last year the Center provided clinical telehealth services to patients and family members from across the state from numerous specialties, from teleautism to telewoundcare. Among our most active outpatient-focused specialties include cancer care and behavioral health services. Innovative statewide projects include a growing Telestroke program. In short, there are many telehealth activities taking place in Kansas and growing interest and creativity in videoconferencing technologies. We truly believe that this is just the beginning of a more rapid advancement of the field, partly driven by the ability of telemedicine to provide health care access and to help address health professional shortages, while also providing economic benefits to patients and community hospitals.

We continually seek to implement and better understand telehealth services and their benefits. New telementoring educational approaches with telehealth technologies are also on the horizon. We continue to have interest in addressing policy and insurance issues that may enhance telemedicine growth and access for more Kansas residents. When used strategically, telemedicine can be a cost-effective approach to improving access to health care and reducing health professional shortages.

Thank you for the opportunity to address the committee, I'll be pleased to answer any questions.