



February 12, 2013

To: Committee on Health and Human Services

From: Karen S. Schell DHSc, RRT-NPS, RPFT, RPSGT, AE-C, CTTS

RE: HB 2184

Thank you for the opportunity to speak to you concerning HB2184. I am a Respiratory Therapist who has worked with patients suffering from Chronic Obstructive Disease for more than 30 years. I have experienced the effects of the disease physically, emotionally, and financially on my patients and their families. COPD is the third leading cause of death in the United States. The Global Initiative for Chronic Obstructive Lung Disease of 2009 reports a direct relationship exists between the severity of COPD and the cost and distribution of costs as the disease progresses.

Chronic Obstructive Pulmonary Disease (COPD) is a progressive disease that accounts for a significant burden on the health care system. Hospitalization is among the most expensive forms of health care and evidence suggests that hospitalization itself contribute to the decline of the patient health status and impacts the patient quality of life. Evidence also indicates that by improving the processes of care in patients with chronic diseases hospitalization can be reduced or avoided. Early diagnosis and monitoring of individuals with the disease can prevent or decrease patient decline and alter the disease process.

Hospital readmission rates are increasingly being monitored and will be tied to reimbursement. Payment penalties for providers will be put into place to reduce the rate of rehospitalizations. Cuts in Medicare reimbursement will begin in hospitals with excessive readmission rates. The focus of health care in the United States is rapidly shifting from one of reaction and treatment to one of pro-action and prevention. Engaging patients in their health, wellness, and medical decisions with education is important in reducing admission and emergency room visits to the hospital while slowing the progression of the disease and improving the quality of life.

Patient education plays a vital role in wellness, chronic disease management, and reduced readmission rates. Addressing the patient's understanding of the disease process, signs and symptoms, causes, and treatment can improve their ability to manage the disease at home. Individual education and identifying intervention points for changing individual behavior and social environment can help improve and maintain health, reduce risk, and manage disease. Early intervention improves the patient's quality of life, prevents costly exacerbations, and decreases readmission rates.

COPD awareness and prevention, treatment options, and the seriousness of the disease remain low among the general public. Patients and families need to be aware of the associated risks factors, symptoms, management, and treatment of COPD. HB 2184 is a step in the right direction to bring the devastating disease into the public arena so that it can be properly addressed and funded to improve the health of the residents of Kansas.