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To: House Health Committee
From: Kristopher Mathews,
Date: February 16, 2021
Re: HB 2261 – Rural Emergency Hospital Act

I am Kristopher Mathews, COO from Decatur Health in Oberlin, KS. I appreciate the opportunity to provide comments in support of HB2261 which creates the Rural Emergency Hospital.

My hospital is a 18 bed Critical Access Hospital, with 2 bay Emergency Room, Out-Patient Therapy, Endoscopy Suite, and joining Family Practice Clinic.

Kansas hospitals are struggling. There are many factors contributing to this struggle. Some are specific to health care and others more general in nature.

- The way we delivery health care has changed. Many common procedures no longer require an overnight hospital stay. Current data shows that 37 Kansas hospitals have fewer than two patients staying overnight on any given day. Technology and specialists needed for complex procedures are delivered at a regional level rather than locally.
- Health care finances are different than many industries. The biggest sources of revenue to rural hospitals (Medicare and Medicaid) do not reimburse at a level that covers the cost of delivering the services. Medicare only covers 99% of the allowable cost and Medicaid only covers 55%. Some commercial payers don't reimburse to a level to help cover that gap, and then to add uncompensated care, the gap grows even bigger.

As the Kansas Hospital Association has been working on this project, they shared information about an opportunity for us to host a conversation with the residents of Oberlin about our health needs, concerns and potential options for the future. In March of 2020, we had over 80



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members participate in our event. As the conversation progressed, they came to realize that change can be challenging and even scary, but finding stability is critically important. The people appreciated us reaching out to them, getting them involved, and having input into ideas that help maintain access to care in Decatur County

I was pleased to see the recent action taken at the federal level to create the Rural Emergency Hospital which is almost identical to the concepts KHA discussed with our community. This model offers a sustainable option for rural areas.

- A place where 24/7 emergency care is available. Farming accidents and other health emergencies where time is critical to their outcome should be available in rural Kansas.
- Keeping a proactive approach to the health services that refocuses on keeping people healthy, so they do not need in-patient acute care.

While the REH may not be the right fit for all communities, it is important that we all have options available as we approach the future. It would be very unfortunate for a community interested in this approach to learn that is not available due to our statutes not being up to date with federal regulations.

Access to health care is something that every Kansans should have. Kansas hospitals are committed to working on efforts that provide flexibility for rural communities while sustaining access to care.

Best regards,

Kristopher Mathews
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