

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

**Moderator: Aimee Rosenow
April 22, 2014
11:00 a.m. ET**

Operator: Good morning. My name is Suzanne and I will be your conference operator today. At this time, I would like to welcome everyone to the Statewide Population Health conference call.

All lines have been placed on mute to prevent any background noise. After the speakers' remarks, there will be a question-and-answer session. If you would like to ask a question during this time, simply press star then the number one on your telephone keypad. If you would like to withdraw your question, press the pound key. Thank you.

Aimee Rosenow, you may now begin your conference.

Aimee Rosenow: Thank you, Suzanne. Good morning, everyone. Welcome to the April Statewide Population Health call. We have another packed agenda this morning with a lot of great information. We'll start with Secretary and State Health Officer, Dr. Moser; we'll also hear from Charlie Hunt, our State Epidemiologist; and we'll have some updates from the Bureau of Family Health. And we have a couple of updates from our Bureau of Community Health Systems from Jane Shirley and Sara Roberts. Our Bureau of Health Promotion will provide some updates as well from Ginger Park. And then we have some communications office updates to give you. And then we'll here from our Preparedness Program.

I'd like to turn it over at this time to Dr. Moser.

Robert Moser: Thank you, Aimee. Good morning, everyone. I appreciate you taking time to join us on the call again this month. As you know, the legislature is out of town on a break at the present time. We still have a few bills that we're interested in that have yet to be completely read and addressed. Since Nathan is not available today, I'll probably cover that as well.

But we have a lot of activity going on across the KDHE in the state as you would imagine. As I'm sure all of you are also experiencing between prepping up school season and still dealing with some late season illnesses across the state and such that – in KDHE, it's also a busy time with a multitude of various grants and reports due.

I do want to announce that we have a new communications director. I'm very happy that Sara Belfry has joined us as our communications director. So, you'll be hearing more about her, I'm sure, a little bit later.

As far as the legislative issues that we still have outstanding, we have the Child Death Review Board bills, Senate Bill 259 and House Bill 2767. We are still waiting hopefully on discussions with some of the legislators around some remaining issues on that particular bill. If you're interested, please feel free to pull those up on the [Kansas legislative website](#), take a review and speak to your legislator if you have any particular viewpoint on that or any of these others.

We also have the still-birth certificate, House Bill 2613, which we felt the original bill certainly has a lot of merit. Part of the problem with that is that they've added on reporting all miscarriages type of responsibility to providers and hospitals. And that's rather onerous and doesn't necessarily provide us with the type of information that we'd hoped to gain out of that as far as is there an environmental impact and maybe leading to such cause to warrant further investigation. There are a couple of other jurisdictions that have tried miscarriage monitoring and it's not worked out quite as hoped. So, I don't think we'd like to go that direction as to the fact that there probably are some other public health priorities that will rank a little higher on our workload.

Finally then, we have the Student Data Privacy Act. As you know, we obviously gained a great deal on public health assessment through a number of survey mechanisms, the Behavioral Risk Factor Surveillance Survey, the Youth Risk Behavior Survey and the Youth Tobacco Survey are a few of those. And so, we're kind of concerned about limited access to being able to really survey our younger population to determine any public health needs or issues that should be addressed. So we've had some good hearings on those bills. But there are still some issues that remain on those that we'd like to have addressed and get the right type of final statute down.

So, that's really all I have at this time. I'll turn it back over to Aimee.

Aimee Rosenow: Thank you, Dr. Moser. Now, we'll hear from our State Epidemiologist, Charlie Hunt, with some updates from our Bureau of Epidemiology and Public Health Informatics.

Charlie Hunt: Thank you, Aimee, and good morning, everyone. The first issue that I would like to cover is baby poultry and *Salmonella*. Some of you hopefully saw our news release that we issued last Friday to remind everyone about the potential risk of *Salmonella* especially with the baby poultry.

Kansas was one of many states in the U.S. last year that experienced *Salmonella* cases associated with baby chicks and other baby poultry. We did put out some information in our [February Epi Updates newsletter](#). And so, again, this is just a reminder regarding potential risks so please refer back to that newsletter for additional information. They have a lot of good resources on that article.

Also, I wanted to discuss some issues related to rabies. With warmer weather, animal rabies cases typically starts to increase this time of year. And with that, of course, the animal bites and potential rabies exposure is increased. And one of the issues that we frequently get questions about when we're working with local health department and physician offices, etc., is about animal bite investigations, the process for testing the animals at the Kansas State University of Veterinary Diagnostic Laboratory and also about how to ship those specimens. And just a reminder that the state rabies lab at K-State

does offer a \$6 flat rate shipping option that can be used if the shipping of the specimen is less than 15 pounds. The option provides guaranteed overnight delivery from anywhere in Kansas to the lab via UPS. To purchase the labels, you can contact the K-State laboratory at – the phone number is 866-512-5650. Again, that's 866-512-5650. And there are more details about this in our rabies [investigation guideline](#) on our website. So, if you can please refer to that.

The next issue I want to talk about is West Nile virus. Of course with warm weather that we're starting to experience also brings increase in mosquito activity. And we'll start to see the risk of West Nile virus increased throughout the next few months. As you all may recall, West Nile virus activity was very high in 2012 and 2013. Once again, this year we will be concentrating on mosquito surveillance activities in and around Wichita. And we'll be publishing information about the results of the past human case surveillance, etc. and deaths that occur as well. And probably within the next couple weeks, we'll be putting out a news release regarding general mosquito warning and tick-borne disease prevention. So, please be looking for that.

The next item I'd like to cover is a reminder about the occupational exposure regulation that I've mentioned on several of these calls over the last few months. Kansas Administrative Regulation 28-1-23 went into effect on April 11, 2014. And just as a reminder, this is providing for management of occupational exposures to blood and other potentially infectious material.

The regulation was implemented in response to a bill that passed in the 2013 legislative session and has provisions for reporting exposures to the blood and other potentially infectious materials to the designated infection control officer of the entity and also for managing how the testing should occur among those, the source patient or person. The regulation is posted on our [bureau webpage](#). So, please take a look at that as well.

And then, I just wanted to mention a few things about outbreak investigations. Norovirus is hanging on this year. We have several norovirus or suspected norovirus outbreaks; including Marion County. Tabor College had experienced an outbreak. Some of you may have seen that in the media. We

have about 70 persons that were ill from that outbreak. They have one positive norovirus specimen from that. Scott County right now has a suspected norovirus outbreak. And we're also dealing with an outbreak here in Shawnee County at a long-term care facility.

I want to mention these outbreaks in particular because of the importance of getting specimens to help in terms of the cause of these outbreaks. So, the CDC standards are that we have to have at least two positive specimens for an outbreak cause to be determined. So, some of these, even though they're large outbreaks and they involved a lot of cases from us, if there's only one positive specimen we are not able to confirm the cause. So, we really like to push everyone to get several specimens so we can confirm the cause of these outbreaks. So, please provide some assistance with us regarding that.

And then finally, just want to mention again the EpiTrax infectious disease and blood lead surveillance system. We did implement enhanced security features on the sign-in process. We have put out a lot of information about that; we had a couple of webinars. We stepped up authentication process with username and password. And so, hopefully, you're all familiar with that process or not experiencing any difficulties.

With that, I'll conclude and turn back things over to Aimee.

Aimee Rosenow: Thank you very much, Charlie. Now, we'll hear from Jane Shirley with our Bureau of Community Health Systems Center for Population Health.

Jane Shirley: Thanks, Aimee. I just have a couple of things. Once again, I'm the calendar reminder for some activities that are under way. First, the Regional Impacting Population Health Meetings, connecting local priorities with Healthy Kansas 2020. Our first meeting for that will be in Chanute this Thursday, on April 24th. For all of these, for the seven planned meetings, there are still seats available. And I would encourage any listener or partners of listeners who you could recruit to consider attending. The next date following that one will be May 7th in Hutchinson; then May 15th in Oakley; May 28th in Beloit; June 10th in Topeka; and June 12th in Kansas City in Olathe.

Our plans for these meetings will be to have some discussions in that local area about those local health priorities that are identified in community health assessment improvement plans and other strategies that have been going on in local communities to define the needs in that area and how those relate to or connect with or possibly don't relate to the priorities that have been determined for the state health assessment and improvement plan.

We're hoping to have a nice diverse audience so that we can have robust conversation there in that local area. So, again, please consider registering and joining us. Dr. Moser will be attending all of those meetings and providing some content and expertise about the state health improvement planning process and the results of Healthy Kansas 2020.

The other thing I just want to remind everyone about is the [Governor's Public Health Conference](#) that's coming up, April 29th to May 1st again, there is still time to register, if you have not, and we hope that we'll see you all there.

Thanks, Aimee.

Aimee Rosenow: Thank you, Jane. And now, we'll hear from Sara Roberts, also with the Bureau of Community Health Systems for Primary Care and Rural Health.

Sara Roberts: Good morning. A couple of announcements of opportunities for those who operate in a primary care clinic or provide primary care services. So, I want to let people know about the National Service Corps new site application cycle is now open. It is open for any new applicants through June 16th at midnight.

The National Service Corps is a federal program that has many opportunities for those who become approved sites. To become approved site, you have to go through an application process to show your eligibility. The benefits of being a National Service Corps site is that any loan repayment or scholarship program providers, physicians, physician assistants, dentist, those type of providers, that are looking for a place to be employed will, must go to a National Service Corps approved site.

As a National Service Corps site, you also have access to the National Service Corps job center which is a search engine profile place to look at various openings with about 20,000 different unique visitors each month to that website. In addition, you are accessible to the virtual job fair program that is available on to the National Service Corps.

There is eligibility to – must be a primary care outpatient facility or a CMS-certified critical access hospital providing medical, dental, or mental and behavioral health services. Those facilities could be a certified (inaudible) health clinic, a state or local health department, a community outpatient facility that's affiliated or not affiliated with hospitals. It could be a private practice, or it could even be a school-based clinic.

The site must also utilize a qualified discount (sliding) fee schedule. The site must not deny services to an individual based on inability to pay or enrolment to Medicare and Medicaid. And the site must (provide) a (credential process) with a minimum reference review and licensure verification.

The process is for a site that's interested in becoming on as new. There's a different time line and schedule for those who need to renew. To be an approved site, you are approved for a total of three years. The process is involved using a portal that the National Service Corps has in submitting documentation. Anyone who is interested in learning more about the national health service corps and becoming a site can participate in a technical assistance conference call that will be held May 1st at noon, Central Time or 1 p.m. Eastern Time. We will send that information out, how you can register and access that information. But I can give you the dial-in number here. It's 1-888-391-7045. The pass code will be 2240736. And again, this is a conference call. It does not require registration upfront.

The second item I wanted to mention to most, if you are currently going to Medicare or Medicaid, or to other private insurance companies, you may be aware of the transition that has been working on by many including the Centers for Medicaid and Medicare for ICD-10. And earlier this month, in April, there was a bill that was passed at the federal level which delays the transition from ICD-9 to ICD-10. And originally, the time line was set up that

the transition would occur by October 1, 2014. The bill in passing delayed that transition to October 1, 2015.

And many of those who are either at a hospital or might receive support from funding through our office, we have priorities around transitions for ICD-10. And our Federal office has indicated that those priorities will remain ICD-10 over the next year, and that we encourage folks to continue looking at that transition because it does involve planning those with health informatics with your billing and coding staff. And it does require potential transition with those system and software activities as well as training.

CMS – as soon as we receive more information from CMS about the guidelines and guidance from, about how this delay will occur, we will send those out through our (ship) hospital (LISTSERV). But we can also provide that information through our other partners, through both local health department and primary care clinics to make, find this information useful.

We do have three online courses that are available on [Kansas TRAIN](#) related to ICD-10. One is called Introduction to World of Coding. This is a great course that will be useful. It's 10 to 15 minutes for anyone in your clinic or in your health department that needs to understand the basics about what is ICD-10 and why it is important that we go through this transition.

The other two courses are Coding, Basic Courses that are available free, again, to anyone who is involved with the billing and coding aspect related to ICD-10.

Last but not least, Kansas TRAIN is also the place or the site that's working with the Kansas Health Information Management Association who has been hosting and will continue to host various ICD-10 and ICD-9 training courses across the state. And that registration process is being managed through Kansas TRAIN.

So, in short, if you're looking for some ICD-10 training both online or in-person, be sure to check out Kansas TRAIN and simply do a quick search with ICD-10 or ICD. And we will hopefully find you some opportunities that you can take remotely or in-person.

Aimee Rosenow: Thank you , Sara. And now, we'll hear from Ginger Park with our Bureau of Health Promotion.

Ginger Park: Thanks, Aimee. I have several events that are happening this week and next that I just want to brief you on. The first one is Denim Day. April is Sexual Assault Awareness Month. And one way the Kansas Department of Health and Environment is recognizing this month is by participating in Denim Day on Wednesday, April 23rd. Denim Day is a response to a 1999 Italian Supreme Court ruling that overturned a rape conviction because the victim wore tight jeans. Since then wearing jeans on Denim Day has been a symbol of support for victims of sexual violence and protest against the idea that a victim could cause their own rape. For more information on Denim Day, go to the kdheks.gov/rpe.

Then on Saturday, we're having [Safe Kids Day](#) here in Topeka. And there are several coalition events throughout the state. This is an awareness event and opportunity for fund raising to support Safe Kids Childhood Injuries Prevention program. Safe Kids Day events, as I said, are being held throughout the state. They've already been held in Marion County in Wichita. Johnson County will hold the event April 27th, Finney County will hold the event May 3rd, and Douglas County event is May 10th.

The Topeka event this Saturday, April 26th, will bring together partners in health and safety. There's education and entertainment throughout the day. And more than 200 bike helmets will be fitted and distributed to kids attending the event. For information about this, go to safekidskansas.org.

Then next week, we have [Kansas Kids Fitness Day](#) on May 2nd. Third graders around the state will participate in fitness and safety events. These are being held in 29 locations across the state including at the Governor's Mansion here in Topeka.

And then the last thing I want to mention relates to Healthy Kansas 2020. By the end of this week, we will have the Kansas health assessment and improvement plan available for public comment. And you will all receive an

email through Jane notifying you when this is ready and how you can comment.

Thanks, Aimee.

Aimee Rosenow: Thank you, Ginger. And now, we're going to give an update from the communications office. We have a few things, a few events and observances coming up that we want to let you know about.

First of all, a seasonal update; we're now in blue-green algae season. So, our office will be providing updates, usually on a weekly basis, on the bodies of water that are under advisory or warning for harmful algal blooms or HABs as we call them. This information will also be sent through the [Kansas Health Alert Network](#) or Kansas HAN. So, if you want to receive that information, please check out Kansas HAN and get registered for that. You can find the link on our Bureau of Community Health Systems webpage. News releases will also be posted to share with the communities, and we'll be posting some information on social media and our webpage as well.

On the webpage, you'll find some information on how to identify blue-green algae or HABs. And you'll also find forms for the reporting of the possible presence of HABs in any bodies of water and for reporting animal and human HAB-related illnesses. So, all of those forms are available on our Bureau of Environmental Health webpage at kdheks.gov/beh. And we'll also post our advisories and warnings for public bodies of water where HABs are present and present a public health risk. So, definitely check out that information as we prepare for blue-green algae season.

May 17th through the 23rd is National Safe Boating Week. We'll be sharing information on water safety through our social media account. Safe Kids Kansas and the Kansas Department of Wildlife Parks and Tourism will also be sharing some information on water safety. Check out the Kansas Department of Wildlife and Tourism Wear It Kansas! campaign where they emphasize the use of lifejackets while boating. You can find that information at kdwpt.state.ks.us and click on their Boating tab. We just want to make sure

that everyone knows that wearing a life vest in a boat is as important as wearing a seatbelt in a car.

April 26th through May 2nd is National Infant Immunization Week. The Kansas Immunization program is asking you all to help share what you're doing to promote National Infant Immunization Week. You can send your stories or photos to us at communications@kdheks.gov. And we'll be posting your photos and stories to be highlighted in our What's Happening Wednesday newsletter and also on our Facebook and Twitter account. If your organization already uses Twitter, please feel free to share your posts to [@KDHE](https://twitter.com/KDHE) and use the #ImmunizeKS.

And now, I want to introduce you to our new communications director, Sara Belfry for an update.

Sara Belfry:

Hello, everyone. I am – my name is Sara Belfry and I am the new communications director here. Just to give you a little bit of background on me. I started my career in the state over the at the Department on Aging. So, I have a fair amount of background on KanCare and the state Medicaid program. And I'm excited to learn more about the public health side of things and excited to work with you all.

The one thing that I do want to share with you all, I have a very open door policy. So, please let us know if I can ever help you with anything. We want to make sure that the communications shop is here to really be a resource for you. I know that many of you don't have communications people in your county health department. So, if you have big things that are, you know, in state-wide media, diseases, any big health or environmental concerns, please feel free to contact us and ask us for support or help if you need it. Again, you can reach us at communications@kdheks.gov, or you can call us at 785-296-0461.

Aimee Rosenow: Thank you, Sara. And now, I think we're ready for our question-and-answer session. So, Suzanne, if you could open up the lines for our Q&A?

Operator: At this time, I would like to remind everyone, in order to ask a question, press star then the number one on your telephone keypad. We'll pause for a just moment to compile the Q&A roster.

Aimee Rosenow: Suzanne, I'd like to allow our Bureau of Community Health Systems director, Mindee Reece to share an update before we take our first question.

Operator: Certainly.

Mindee Reece: Hi, everyone. This is Mindee Reece. And actually this is the Preparedness Program update. I'm going to have Emily Farley start and then I'll have a few updates of my own to share.

Emily Farley: Good morning, everyone. I would like to provide an update about K-SERV, which is the Kansas System for the Early Registration of Volunteers, and CRMCS, which is the state-wide badging and accountability system for personnel and equipment.

For the personal accountability section in CRMCS, all health and medical first responders are to register in K-SERV which then we, as a state, will verify and provide an emergency credential level to professional health and medical licenses or certificates. When you register in K-SERV, it is important that you fill out your profile completely and include your license information. If we don't have your license information in K-SERV, we're unable to provide a credential level to your license type. This will actually cause an issue when you need to get a CRMCS badge, as you will not show up in CRMCS.

Also, we want to emphasize that K-SERV utilizes a volunteer registry in case of an emergency. If we need to activate K-SERV, we will send out a notification to a specific type of volunteer. Being in K-SERV, though, does not obligate you to volunteer in case of a disaster. It's strictly on a voluntary basis. If you have questions or concerns about K-SERV, always feel free to contact me or you can contact Michael McNulty. My email is efarley@kdheks.gov. My phone number is 785-296-5201.

Mindee Reece:

This is Mindee again. I want to give you all an update on where we are with development of the Hospital Preparedness Program and Public Health Emergency Preparedness Program cooperative agreement application which will fund the state, regional, and local preparedness activities for the time period that starts July 1, 2014, and runs through June 30, 2015.

As we've previously announced, the public health emergency preparedness funding actually increased by 3.3 percent, which was a pleasant surprise. And counter to that, the hospital preparedness program funding for Kansas decreased by 36.19 percent. So, that definitely posed some challenges in figuring out how to sustain the critical capability and capacity we've built in the hospital systems throughout the state for preparedness.

Last week, our staff met with the Kansas Association of Local Health Department's Preparedness team members, staff from the Kansas Hospital Education and Research Foundation, and the Regional Hospital Coordinators. We reviewed the proposed state regional hospital and the regional public health, and local health department and community hospital work plans for 2014- 2015.

It was a very productive discussion. We covered the proposed budget for both the hospital program and the public health program. We're currently factoring inputs from that meeting into our cooperative agreement application and the work plans. Our application to the Department of Health and Human Services and Centers for Disease Control and Prevention is due May 7th. So, we're putting the finishing touches on that.

Last week, we also met with the Kansas Association of Local Health Department board of directors for a similar discussion about the public health portions of the cooperative agreement application, and the regional and local health department work plans. Basically, we received approval on the local health department work plan and the allocations proposed for the health departments and the public health preparedness regions. We are doing more work on the public health preparedness regional work plan based on input

from the discussion, but we are happy to announce that the KALHD Board did provide a letter of concurrence for our cooperative agreement application, based on a vote of the board of directors.

We are putting together the final details about the 2014-2015 funding allocations for the community and regional hospitals, the local health departments, and the public health preparedness regions. We hope to share that in the near future.

In an effort to improve transparency between the state and our partners at the local and regional levels, the Preparedness Program is in the process of developing a summary of how the 2014-2015 hospital preparedness program and public health emergency preparedness program funds will be allocated to KDHE, and how we will use those funds to support our state level work plan. So, we're going to show you where the money is going within the department and what work products are tied to the grant requirements. We should have that ready to go in the near future and we'll be sharing that with the hospitals and the health departments through their respective organizations.

I am happy to announce that the 2014 local technical assistance reviews for each of the state's 10 cities readiness initiative counties are complete. Those counties in the Wichita Metropolitan Statistical Area include Sedgwick, Butler, Harvey, and Sumner. And, the Kansas City, Kansas Metropolitan Statistical Area includes Wyandotte, Johnson, Leavenworth, Franklin, Miami, and Linn Counties. Each of those counties either maintained or increased their score, which demonstrates strong levels of preparedness for receiving and dispensing medication.

The Kansas composite score is 99.7 percent out of 100 percent, which is excellent. I think the counties have done an amazing job of building from past experience and continue building their capabilities in this area. So, super news for Kansas.

As far as staffing in the Preparedness Program, I want to let you know that we do have a new position. It's a program consultant position that will be our primary outreach person working with health departments and hospitals across

the state. We are reviewing the applications received for the position and plan to conduct interviews in the near future.

We also have a departing staff person, Zac Graves, who is our Medical Countermeasures Program Manager. He has accepted a position in our Department's Bureau of Air, and this Friday is his last day. Paperwork has been submitted to request permission to begin recruitment for that position. And as I mentioned in the last call, the Program Director position is on hold at this time. So, I am wearing that hat on an interim basis.

I think that's everything we have for Preparedness; we're happy to answer any questions folks have during the Q& A session.

Aimee Rosenow: OK. Thank you so much, Mindee. Suzanne, if are there any questions, we'll open the lines and take those at this time.

Operator: Again, if you would like to ask a question, press star then the number one on your telephone keypad.

There are no questions at this time. Ms. Rosenow, I'll turn the call back over to you.

Aimee Rosenow: OK. Thank you. Again, thank you all so much for joining us this morning for a lot of really great updates from our public health programs here at KDHE. And we just want to let you know that the transcript of our call is posted on our website. So, you can go to kdheks.gov, to the Bureau of Community Health Systems page and it's under Local Public Health.

Our next meeting, because it's scheduled to take place the day after Memorial Day, we're looking at possibly rescheduling that. So, we will send around a date and a time for our next Statewide Population Health call for May.

Again, thank you all for joining us today

Operator: This concludes today's conference call. You may now disconnect.

END