

**KANSAS DEPARTMENT OF ADMINISTRATION**

**Moderator: Miranda Steele**  
**June 25, 2013**  
**10:00 a.m. CT**

Operator: Good morning. My name is (Holly) and I will be your conference operator. At this time I would like to welcome everyone to the Monthly Public Health 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. I would now turn the conference over to Ms. Miranda Steele. You may begin.

Miranda Steele: Thank you, (Holly), and good morning everyone for calling into the June Public Health call.

This is a continuation of KDHE's monthly statewide public health call along with the regional preparedness contacts call with the Bureau of Community Health System.

I'm going to run through the agenda this morning so we can get started with our speakers and then we'll have an opportunity for live questions and answers.

First on the agenda will be our secretary, (Robert Moser) who's also the state health officer as you all know. He's going to provide updates on KanCare and the ongoing conversation about impacting population health in Kansas.

Next will our state epidemiologist, Charlie Hunt. And then I will provide a few items from the communications front before turning it over to Jane Shirley from our Office of Local Public Health. So with that, I will turn it over to (Dr. Moser).

(Robert Moser): Thank you Miranda and good morning everyone. Again, thanks for participating in our monthly public health call. I wanted to give you an update on some events taking place. I know everybody is very busy with school out and holidays and harvest and everything else and obviously lots of annual meetings from a variety of groups.

Today we have a KanCare post-award forum and following it will be our KanCare advisory council meeting. What this is, after being awarded the Section 1115 demonstration contract from CMS, we have terms of conditions on this contract that we'll publicly review and talk about how the implementation went. This will allow for public comment on that implementation.

There'll be more coming out on that and if you're interested, you can go to the KanCare Website and all of the material like quarterly reports, these events, the activities that we're currently involved in are posted there as well.

I did want to mention, for those of you who've been engaged with the rapid response calls, when we were approaching the roll out of KanCare on January the 1st, we started with the rapid response calls on December the 26th and those went pretty much daily and then tapered off gradually after our final enrolment date of April the 4th.

And actually we've gotten to the point where participation in those calls has dropped significantly, so our last rapid response call will be this Thursday.

That doesn't mean you don't get the same attention to issues as before. You have contacts with your provider, representative from the three MCOs, the ombudsman and then of course with KDHE's division of health care finance – they can resolve any concerns or issues you may have going forward.

But I would say stay tuned to the KanCare Website for any other additional information or updates and we still are very interested in hearing from providers and folks who see any issues that tend to be reoccurring issues that you don't feel are getting resolved.

We still provide oversight to this contract, and want to make sure that there're no systemic issues.

I also want to talk about the impacting population health summit. I know Jane Shirley our director of the Office of Local Health will have more on this, but we had the large summit on June the 11th here in Topeka and it was attended by I think around 87 folks, a really great turnout, great discussions that came out of that.

Looking at the importance of addressing population health to improve the quality of life and improve our communities at the local level, but obviously requiring a great deal of collaboration and new innovative strategies to how we go about accomplishing, improving health and the quality of life in our communities.

And we covered a lot about what are the barriers that we see to accomplishing this, what are some of the opportunities, and we reviewed some successes from rural settings all the way to large urban settings.

We have regional meetings coming up through the summer and I know Jane will go through those dates and places with you and I really want to encourage you to attend a meeting. I know how it is taking on new initiatives and the challenges; we think, you know, it'd be nice if we had a lot of money to start this process.

But don't let finances serve as the barrier to prevent any movement of the effort to at least start with because I think having these conversations across the state particularly the regional perspective is very important as we look at how we impact and improve population health going forward.

So that's really it in a nutshell of what we've been up to and I'm sure there's quite a bit more, but I'll be around at the end of the call for any question that you may have. I'll turn it back over to Miranda.

Miranda Steele: Thank you (Dr. Moser). Now we'll have our monthly update from the state epi, Charlie Hunt.

Charlie Hunt: Thank you very much and good morning everyone. I have several things I'd like to talk with you this morning. First of all I want to say welcome to Jodie Smith, our new EpiTrax and Trisano coordinator for disease surveillance at the health department. You'll get to know Jodie and we're certainly glad to have her on board. She started with us just yesterday.

The next thing I want to cover is just a brief update on blood lead surveillance. As many of you may know, we've undergone a little bit of a transition with respect to our approach for blood lead surveillance in the state. Right now KDHE is receiving a copy, of course, of all blood lead laboratory reports for both children and adults tested in the state.

And if the child is elevated, which is a test result of 10 (micrograms) per deciliter or greater, then we're actually entering that case on EpiTrax now and all adults regardless of their level are also being entered on EpiTrax.

We would like to make these results available to local health department so that they can see the cases of children with elevated blood lead levels as well as the levels for adults in their jurisdictions. This would be similar to the way we currently deal with infectious disease cases which are entered in EpiTrax and then assigned to a local health department.

The health departments will only be able to access information for residents of their own jurisdictions and we do recognize the extent to which cases can be managed to be dependent upon the resources of various health departments but at least we want you to have the information available to you.

Case management would essentially entail identifying the person or persons at the health department who is responsible for environmental health.

If that person in your health department does not currently have access to EpiTrax please give us a call or send us an e-mail at [epitraxadmin@kdheks.gov](mailto:epitraxadmin@kdheks.gov) and we can get you set up or again you can contact Jodie Smith.

We are establishing partnerships with Children's Mercy Hospital and the KU Hospital Poison Control Center. They're going to be helping us with investigation and case management for persons with elevated blood lead exposure, so that will be a great help for us.

So if you have any questions please give us a call. Also I wanted to just briefly go over or just mention that we have issued several KS-HAN notices during the past month - particularly on June 12th we issued a notice regarding the nationwide shortage of doxycycline and this included resources for providers and recommendations for patient care and this is significant in particular because just during this last month we have seen an increase in spotted fever rickettsiosis, or Rocky Mountain spotted fever as what it used to be called.

For example, as of June 11 we had 13 cases reported in the state. By June 17 that had gone up to 21 cases and then as of June 25 that had gone up to 35 cases and of course doxycycline remains the drug of choice for suspected rickettsial infections including Rocky Mountain spotted fever, ehrlichiosis and anaplasmosis.

So again, we issued that KS-HAN notice on June 12 and it has a lot more details so I urge you to go back and review that notice if you have additional questions or need more information.

On June 21 we also issued an advisory. We actually passed along the advisory from CDC regarding recommendations for laboratory testing for Acetyl Fentanyl associated with IV drug users. On June 21 we also issued an advisory on TB control and national INH shortage for treatment of tuberculosis. And then finally we provided an update on June 10 on the MERS-CoV which is a novel coronavirus infection.

As of June 24th, there were 70 cases reported internationally and 39 of those patients had died and so again there's additional information on that. We then urge health providers if they have a suspected case of MERS-CoV, which very briefly entails someone who has an acute respiratory infection with recent travel to the Middle East countries, and again, all those countries are detailed in the KS-HAN notice that we had posted, so please review that as well.

And then finally, Thursday is National HIV Testing Day and I think our communications office and our bureau of disease control and prevention is planning on initiating the news release for that so please be looking for that.

And that's all for me.

Miranda Steele: OK. Thank you, Charlie. Just a few items from the office of communications, the focus areas for us here lately and going into the future for this summer.

First, Move Across Kansas. You all may remember earlier this month we joined Blue Cross and Blue Shield Foundation for an announcement about this individual fitness tracker program that KDHE developed using a model that Blue Cross and Blue Shield has for their own employee wellness program. Again it's called Move Across Kansas.

And it officially launches July 1 statewide and this is for any Kansan who would like to participate, not just state of Kansas employees. So I just would like for you to look out for that news release with the URL so that you can help us promote this web tool.

We're going to announce that website address either this afternoon or tomorrow so that there will be some time for individuals to get registered before the July 1 route begins. And if you'll remember with the Move Across Kansas program it will allow participants to enter the times that they've exercised in a day's time and, you know, the recommended amount for that is 30 minutes a day, five days a week.

And if you're doing that and you're tracking it in this Move Across Kansas application, you will see a map that will take you virtually across the state of Kansas with a different route beginning every month, on the first of the month.

We hope that this program will be able to run year-round. So again, it starts July 1 and there will be a different route every month and points of interest along that route when you can click on a city that can take you to more information about that city so that you could learn more about the state in which you live.

The next item here also has to do with fitness. It's an initiative of the Governor's Council on Fitness and it's the annual health champions award. This is an award that the governor presents each year to one individual and one organization.

The call for nomination for these awards went out in May and the deadline for that, I want to remind everyone, is June 28.

So if you know of an individual or an organization in Kansas that would be deserving of a health champion award, the deadline for that is June 28 and the nomination form can be found on the Governor's Council on Fitness Website and that Web address is [kansasfitness.org](http://kansasfitness.org), I think. Let me see, yes. OK. Yes. [www.kansasfitness.org](http://www.kansasfitness.org). Again, the deadline is June 28.

Next is an update on blue-green algae in our Kansas lakes. The last update for public health advisories and warnings on blue-green algae was issued on June 13th, so that was about two weeks ago. We did not have an update last week. There were no lakes added to the list. There is some water sampling taking place this week so look for an update on the advisories and warnings to be issued later this week.

And, you know, as always, with blue-green algae advisories, we do put that out through KS-HAN. You know, we hope – we try to do that at least an hour before the press release goes out so that our local health departments, hospitals and other public health officials are aware of any lakes within their region that are affected by toxic blue-green algae.

And the last thing that I'll update on is some information about boil-water advisories. I don't know if we've talked about this much on these calls but when there is a boil-water advisory issued for a public water supplier, KDHE is not always the entity that announces that boil-water advisories.

Some of those will come actually from the supplier at the local level and if that supplier has means to notify their customers, you know, if it's a small group, or if they have means to notify their customers through the news media, they will do that themselves, so it's not always KDHE.

However, if we know about a boil-water advisory, if we're not issuing a news release on behalf of the public water supplier we will try to share that information through social media.

And I say all of that to just remind our local partners that it's very important for the public water supplier and whether it's a hospital, local health department, other health facility, to have that, relationship with the public water supplier and we are going to ask through our bureau of water that the public water suppliers do make sure that they're notifying the hospitals and local health departments when there is a boil-water advisory.

So that's a little bit of communication activity there that I think we just need to follow through with and we'll try to do a better job of that on this end. And that's all I have so I'll turn it over to Jane.

Jane Shirley: Thank you, Miranda. Just a couple of comments about recruiting you all to consider attending one of our regional listing sessions around the topic of impacting population health that (Dr. Moser) spoke of earlier.

The information, the flier and the instructions for registering can be found on the KDHE local public health page. We have a button on our page that says recent news, events and documents. If you go there you'll find the flier that lists the dates, locations and how to register.

Our audience that we are hoping will attend these sessions includes local public health, mental health providers, community hospitals, safety net clinic administrators and definitely our private medical provider audience.

We would like to encourage you to think about your community and who would be the appropriate individuals to attend and then encourage them to join one of those meetings so that you can learn about the topic further, what we're talking about here in Kansas, the discussions about potential opportunities, about perceived challenges and strategies that we can consider for operationalizing this across the state of Kansas and our community.

If you have any questions at all, please feel free to contact me, [jshirley@kdheks.gov](mailto:jshirley@kdheks.gov) and we hope that we'll see you at one of those sessions. The other thing I wanted to mention is that KDHE continues down the road towards accreditation.

We will be hosting a (PHAB) the Public Health Accreditation Board consultants and representatives from ASTHO, the Association of State and Territorial Health Officials in July.

They will be joining us to conduct an accreditation readiness review and health session. We are, I hope you all realize, committed to ongoing work across the Kansas public health infrastructure and those experts are going to be working with the accreditation team to conduct the self-assessment and gap analysis work.

We're pretty excited about this opportunity because I think it will target our work for continuing to demonstrate the work is needed to achieve accreditation and to gather the documentation that will be necessary when we are at that point and ready to apply.

I think that's all I've got, Miranda. Thanks very much.

Miranda Steele: Thank you Jane. OK. So (Holly) if we can, let's ask the callers if they have any questions for this first segment that we just concluded.

Operator: Certainly. If you do have a question, please press star then the number one on your telephone keypad.

And again, if you do have a question please press star then the number one on your telephone keypad.

We don't have any questions from the phone lines.

Miranda Steele: OK. Thank you. So now we'll begin the second portion of the monthly call with the Bureau of Community Health Systems Preparedness Program. And so at this point I will turn this over to Dave Meek, our preparedness director.

Dave Meek: Thank you. Good morning everyone. It's good to be with you again since I'm relatively new in this position. I want to start off today thanking all of the people out there who were very quick in responding to our request as far as use of grant dollars and if you weren't going to use it, to let us know.

That really helped us out toward the end of the grant cycle as well as our fiscal year and we really appreciate those partnerships and your work to quickly let us know if you weren't going to be able to use any of those dollars so they could go towards other projects that we had pending here.

Of course there's a new grant cycle starting July 1st, so be thinking about different ways that perhaps you can utilize that grant money. They will be coming out after July 1st. More will come detail-wise on that. We're also very excited to announce that we have filled our Medical Countermeasures Program Manager position.

Zac Graves will be starting on July 8, taking over as program manager, and Zac comes to us with quite a bit of valuable experience including working actual disasters with FEMA including the Joplin tornado during the recovery phase, so we're very excited to have Zac coming on board and hopefully all will get a chance to meet and speak with him in the coming months.

Also of course our very well-known Fred the Preparedness Dog is going to be very active and we're going to be focusing on September as being preparedness month including the state fair where we'll have a booth down at

the state fair for preparedness day and I believe it's been confirmed that Fred is going to join us and he might even bring Michael with him. I'm not sure.

We all love Fred and we also have some real interesting handouts coming out because again that allows us to focus on the young members of our state and getting them to start thinking about preparedness, even at a very young age.

And finally, I'd like to mention of course we're coming into our summer season and we'd be thinking about water safety with all our fellow Kansans. Unfortunately we've already has several tragic events in our lakes where we lost some Kansans due to drowning and so when you do have that chance to remind people about water safety as well as storm. We need to keep our population aware of those hazards that are out there on a fairly regular basis.

We sometimes get a little lax about that in Kansas. I know, I love to swim in the summer time and cool off on those hot muggy Kansas days, so we must be thinking maybe about ways when we see people we can impact people in thinking about water safety especially with children. And I think that's all I've got for an update for now.

Miranda Steele: OK. Thanks, Dave. And before we go to question and answer on that, I want to turn the floor back over to Jane Shirley for some more information she wanted to add.

Jane Shirley: I neglected to mention, thank you Miranda, I neglected to mention the dates so that you won't have to go online to get those for the regional listing sessions on impacting population health. We'll be in Wichita tomorrow. I also mentioned these are all from five o'clock to 8:30 in the evening.

Our intention on scheduling them in the evenings was to try to attract those individuals who simply cannot get away from their work day. So tomorrow in Wichita; Monday, July 1st in Chanute; Monday, July 8 in Garden City; Tuesday, July 16th in Salina; Thursday, August 1st in Colby; and Tuesday, August 6th back here in Topeka. Registration is on Kansas-TRAIN and that course number is 1044011. Thanks, Miranda.

Miranda Steele: OK. And back to preparedness. Dave has another update.

Dave Meek: Yes, that gave me a chance to think, I want to remind everybody, it just kind of came across my desk this morning, there is going to be webinar tomorrow, I know it's short notice, from 12:00 to 1:00 on emergency management public health. So we'll try to send out a link on how to register for that for anybody who might be interested. That was it.

Miranda Steele: Is that a KDHE-sponsored Webinar?

Dave Meek: No. It's, I believe –

Female: (NACCHO).

Dave Meek: – yes, I think (NACCHO) I think is how you pronounce it, is the one. Yes, a lot of new acronyms I'm learning so bear with me if I say them really in a strange way.

Miranda Steele: That's all right. OK. (Holly) are there any questions on the line?

Operator: And once again, if you do have a question, please press star then the number one on your telephone keypad. We don't have any questions from the phone lines.

Miranda Steele: OK. Well, I think it's been a great informative call this morning. Thank you everyone for joining us. As always, if you have any questions at any time give us a call, send us an e-mail and we hope that the information that we share each month is beneficial and keeps us in contact with one another. So with that, I will adjourn the call and hope everyone has a great rest of the week.

Operator: Thank you for joining today's conference. You may now disconnect.

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