

staff

electrocardiograph testing, ultrasound, magnetic resonance imaging, the emergency room and in August internal medicine.

"We have services not found in surrounding areas," Miller said.

In September, a new CT scanner was installed in the radiology department. The 16 slice General Electric scanner allows doctors to see internal tissue and bone and can do a torso scan in 13 seconds, said Director of Radiology Mitch Bartels.

Miller said the scanner cost \$350,000.

The hospital also has a new cardiac monitoring system and plans to switch to electronic records soon.

"Our goal is to have electronic records by the time the new clinic is constructed," he said. "We have a big investment in it."

Next year, Miller said, he hopes to bring digital mammography to the hospital.

The administrator said last year the hospital recorded 47 births, 269 surgical procedures, 4,445 in-patient days, 45,801 outpatient procedures and 15,124 doctor visits.

The hospital provides meals for the Meals on Wheels program and Norton County Jail, chemotherapy administration, telemedicine capabilities with hospitals in Hays and Kearney, Neb., and offers services from 20 visiting physicians. Their specialties include: cardiology, urology, orthopedic, podiatry and ear nose and throat.

Norton Health Department participates

By Erica Bradley

The Norton Telegram
ebradley@nwkansas.com

Norton County's Health Department is one of 30 in the nation taking part in a program to create a voluntary accreditation system for public health agencies.

Gina Frack, county health administrator, said department services vary by state and even by county.

"If you've seen one health department," she said, "you've seen one health department."

Frack said every state is different, with some having a regional system and some having home rule, with counties making their own decisions. Kansas is a home-rule state, meaning control of health departments rests with commissioners. Nebraska is regionalized, meaning health departments mostly cover more than one county.

"Every state is different," she said. "A lot of people don't realize that."

The national accreditation program includes 19 health departments, eight state health agencies and three tribal health departments. Norton County is the smallest, she said.

"This is huge," the administrator said. "Norton is the voice for rural America, and public health is changing."

Frack said 65 percent of health departments across the country serve rural populations,

covering an estimated 12 percent of the population.

Frack said 26 states follow what Kansas does with public health. The state has 103 health departments, with a few counties sharing services.

"There are pros and cons to both models," Frack said. "I think the Kansas model has definite benefits by having a local presence."

While there are no standard guidelines for health departments across the country, she said, the federal Centers for Disease Control and Prevention lists essential services, including monitoring to identify and solve community health problems; diagnose and investigate health problems; inform, educate and empower people about health issues; mobilize partnerships and action to identify and solve health problems; develop policies and plans that support health efforts; enforce laws and regulations that protect health and ensure safety; link people to personal health services; assure a competent public and personal healthcare workforce; evaluate effectiveness, accessibility and quality of health services; and research new insights and innovative solutions to health problems.

Services are different from county to county, she said. In Norton County, the health department offers immunizations, the Women, Infants and Children program, family planning, home visits before and after a baby is born,

blood pressure checks, infant and children physicals, maternal and infant programs, twice-a-year blood screenings, hearing checks, Salvation Army donations, disease prevention, tuberculosis skin tests, lead testing, fluoride varnish application for teeth, dental hygienist services, free HIV testing and counseling, and some and community-based services.

The home health service offers nursing and health aide visits. These include wound care, injections, disease and medication education, infant visits and others. The health aide provides laundry, shopping, housekeeping and other help.

Norton County also runs neighboring Decatur County's WIC program, and has recently taken some patients from the Graham County after the home health agency there closed in January.

Frack said declining population and budget are affecting county health departments across the state.

"It's getting harder to manage a health department in every county," she said.

County Commissioner John Miller said the county has one of the only full-service health departments in the region.

"We have a great health department, and a great director," he said.

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Back row: Betty Pelkey, Angie Hankins; front row: Tammy Howard, Cheryl Lee; not pictured: Bonnie Doggett.

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Citizens



- Beds — 25 as critical access hospital.
- Budget 2009 — Revenue \$36,044,102.
- Profit 2009 — \$175,949.
- County money — None. Citizens Medical Center is a private, nonprofit hospital.
- Doctors — Five physicians, six midlevel providers, and 55 consulting.
- Administrator — Janice McCart.
- Phone — (785) 462-7511.

Phase one of the expansion to the Citizens Medical Center building is underway. The addition to the northwest corner of the building will house an expanded physical therapy department as well as the hospital's heating and cooling system.

— Photo by Kevin Bottrell/Colby Free Press

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Medical Center adds building, doctor

By Aubrey Spencer

Colby Free Press
aspencer@nwkansas.com

Citizens Medical Center in Colby continues to expand, adding a new building, another doctor and additional services this year.

"We have a lot more services than what you would expect for a 25-bed hospital," said Janice McCart, president and chief executive officer. "That's a big part of what sets us apart from other rural hospitals."

But Citizens, with a \$36 million budget, is three to five times larger than other area hospitals. Another distinction: it's the only privately run (not county owned) hospital in this part of Kansas and receives no city or county subsidy.

This past year, the radiology department added a nuclear medicine camera, McCart said. The service, once available only from a mobile unit, is now available here five days a week. This diagnostic tool is used to scan parts of the body such as bones, the thyroid and the gall bladder. McCart said they will have an echocardiogram machine available five days a week by the end of the summer.

"Our technology is far above," said Kevan Trenkle, vice president and chief financial officer. "Patients don't have to wait for a truck to

come by for what they need."

Other in-house technology includes mammography equipment, a Magnetic Resonance Imaging machine (MRI), a full-time cardiopulmonary department and a 16-cut Computed Tomography scanner (CT scan).

With added technology comes the need for added space, and the organization has grown over the last year.

"We completed the CMCI Annex in December," McCart said, "which added an additional 5,400 square feet."

The new financial annex, located south of the ambulance garage along Franklin Avenue, houses medical records, transcription and accounting departments.

McCart said phase one of the center's their renovation plan – an addition to the front and west sides of the hospital – will add 5,700 square feet to the main building by September. It includes enlarged areas for laundry and rehab services, as well as mechanical and electrical upgrades.

McCart said the board decided the mechanical/electrical areas needed the update since they were the original systems, and the hospital will be 28 years old this year. They wanted to get energy-efficient equipment and be able to bid out and get a good price.

Other additions and improvements included finishing the basement at the Family Center for Health Care, the hospital's clinic, adding 1460 square feet; cement work in front of the Prairie Senior Living Complex, the hospital-run nursing home on Franklin; and putting up a gazebo out front so residents can watch the cars drive by on Franklin Avenue.

Under the Citizens umbrella, the private, nonprofit corporation operates Citizens Medical Center, a 25 bed critical access hospital; the clinic and the nursing home, a 68-bed nursing facility. The private operation is unique in this area; other hospitals are county owned.

The medical staff includes three family practice physicians, Dr. Darren Matchell, Dr. Brewster Kellogg and Dr. LaDonna Regier; an orthopedic surgeon, Dr. Mekki El Saba; four nurse practitioners, Luetta Flanagan, Tina Jallow, Trish Carney and Jenny Niblock; and two physician assistants, Andy Rose and Brian Unruh. Citizens will welcome a new family practice physician, Dr. Steven Bear, in August.

McCart said another thing that sets the operation apart is their people. They have great staff physicians, she said, and the 55 consulting physicians are a huge asset.

"We probably have more (doctors who deliver babies) than any other hospital in the area other

than Hays or Denver," Trenkle said, "and all the specialists that come to Colby help to keep people here. They don't have to travel out of town to find what they need," he said.

The organization has 274 employees, and McCart said last year's turnover rate of 22 percent was low, "a huge success."

"That's throughout our entire organization," McCart said. "That says a lot for the people we have here."

McCart also added that the staff wouldn't be as successful without their many volunteers.

"We have wonderful volunteers who make a difference in people's lives and our organization," she said. "They add that special touch."

Citizens has no plans to slow its expansion, McCart said. They are working on the plans for Phase 2 of the renovation, which will include joining the hospital to the clinic and moving the hospital's entrance to make it easier for patients to maneuver through. McCart said the floor plan has yet to be laid out, so no completion date has been set.

"The clinic is growing, too," McCart said, "so we'll probably add on to that in the future as well."

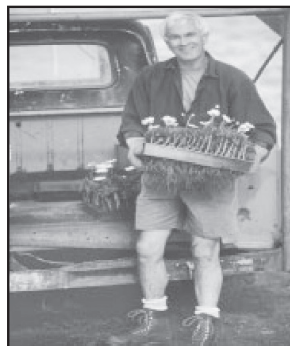
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Sarah Samuelson helped a patient get ready for physical therapy to speed recovery from knee surgery. The physical therapy department is full to running over most days and is looking forward to an expansion project made possible by a vote to issue bonds and increase the county tax levy for hospital improvements.

– Photo by Vera Sloan/Colby Free Press

Bond approved

By Vera Sloan

Colby Free Press
vsloan@nwkansas.com

With a positive nod from the voters on April 6, Logan County approved \$3.75 million bond issue, the Logan County Hospital can proceed with plans for a 14,800-square-foot free-standing rehabilitation center next to the hospital.

The property tax levy to support the project will expire when all costs associated with the financing, including repayment of the bonds, are paid.

The center will include an indoor therapy and lap pool, community event room, rehabilitation department for physical and occupational therapy treatment, wound care treatment area, five treatment rooms, a cardiac rehab area and a community wellness “fit for life” center.

Occupancy at Oakley Manor, the county’s nursing home, stands at 41 out of 46 available beds.

Services not normally associated with a hospital include the 20 independent living apartments located in a separate wing. All are filled. No services are provided except the availability of three meals a day.

Services added the past year include direct-access lab services in a newly remodeled lab, where patients can get services without a doctor’s order as long as they agree to pay.

A new “fit for life” exercise program, open

LOGAN COUNTY HOSPITAL

- Beds — 25 as Critical Access Hospital, 46 long-term care.
- Revenue 2010 — \$11,500,000, \$7.8 million after write offs.
- Loss 2009 — \$147,000.
- County Money — Hospital \$200,000 for 2009, nursing home, \$70,000 .
- Doctors — Three physicians, one nurse practitioner, one Colby doctor.
- Oakley Manor Nursing Home, 46 long-term beds.
- Administrator — Darcy Howard.
- Phone — (785) 672-3211.

to the public, attracts a constant stream of old and young to exercise equipment not available anywhere else in town.

Plans for the new wellness center will include space for 15 to 20 pieces of exercise equipment, including treadmills, recumbent bikes,

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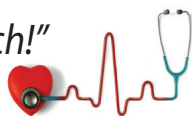
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recumbent steppers, arm ergometers, elliptical machines, a weight machine, free weights and resistance bands. All participants at the wellness center will go through an initial screening.

The planned pool, with "zero-depth" entrance that is wheel chair accessible, will be 45 feet by 15 feet, with three lanes for laps and an area reserved for therapy.

Jeannie Roemer, Fit for Life director, said the program has gotten to be a real social event for many, who come to visit while they exercise. She noted she has even gotten to know some of the older clients favorite television programs, and has the channel tuned and ready for their normal time.

Speciality clinics include visiting doctors for cardiology, ophthalmology, orthopedics, and podiatry. Visiting surgeons come from Garden

City for eye surgery and from Hays for general surgery. Weekly ultrasound and monthly mammography are provided by mobile service.

Logan County Hospital has integrated electronic chart documentation for record keeping and began phasing it into the system for doctors in 2009.

Due to loss of state Department of Social and Rehabilitation Services offices in small towns, the hospital has a social services person with an office in the hospital.

Physical, occupational and respiratory therapy are slated for future major improvements to expand overcrowded treatment areas.

The motto for the Logan County Hospital is to make every move count, and to move forward, according to their publicity materials.

Health department fills needs

Logan County's health department, at 216 Maple in Oakley, is next door to New Frontiers Clinic.

Staffed with two full-time and one part-time registered nurse, the department's mission is to evaluate, monitor, protect, restore and improve the health of people in the county.

The department provides health and educa-

tional services that promote a healthy lifestyle for families in the county.

The first face you'll see when you open the door is that of Rhonda Sperber, office manager. Her duties include scheduling and answering phones, as well as answering questions.

Gorgetta Schoenfield, a registered nurse,

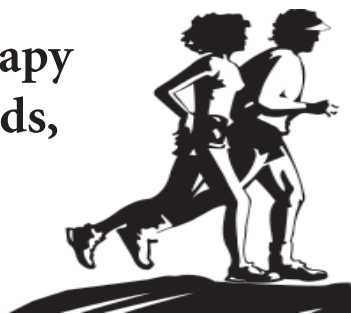
See LOGAN, Page 36



The laboratory at the Logan County Hospital is staffed by three technicians who assist doctors and do direct-access testing for individuals. The lab manager is Nick Zerr.

- Photo by Vera Sloan/Colby Free Press

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Sheridan adds electronic records keeping

By Vera Sloan

Colby Free Press
vsloan@nwkansas.com

Sheridan County Health Complex, a critical access facility, is joining growing ranks of hospital across the nation to make the change from records to electronic records.

By networking with a media technician out of Hays, hospital officials say, they are getting close to 50 percent completion and in 2012, the hospital will implement the doctors-order entry part of the changeover.

The hospital has been without a doctor, but was expecting Dr. Paul Schoenbrun, a general practitioner, to arrive May 1. He has experience in many areas of general medicine.

Two advanced nurse practitioners, Kaylee Watkins and Kerri Schippers, and nurse practitioner Pam Pope see patients under the supervision of Dr. Brewster Kellogg of the Family Center for Health Care in Colby. Dr. Kellogg is serving as Chief of Staff for the hospital.

The county has a rural health clinic housed in the hospital, and for the past two years they have offered a satellite clinic in Selden that sees patients from 8:30 a.m. to 4:30 p.m. each Wednesday.

Other services include sonography, lab work, a CT scanner, a mobile magnetic resonance imager and nuclear medicine imaging, plus physical and occupational therapy. Outpatient IV therapy surgery, as well as mobile mammography and bone density testing, round out the services

Three surgeons travel to Hoxie from Hays and Kearney, Neb., to perform general surgery. A visiting cardiologist comes from Hays, Dr. Kellogg comes from Colby to see patients once a week, on Thursdays, in the clinic. The hospital



Shaylin Sealock of the Hoxie Community Health Complex dietary department made sure residents of the long-term living center have what they need when it come meal time. The center's kitchen is known for the good food it puts out to its residents and guests. — Photo by Vera Sloan/Colby Free Press



- Beds — 18 as Critical Access Hospital, 38 long-term nursing care, eight assisted living.
- Revenue 2010 — \$6,168,000.
- County money — \$405,202 from property tax, \$75,000 sales tax.
- Profit 2009 — \$174,540.
- Doctors — One physician spring 2010, three nurse practitioners.
- Administrator Steve Granzow
- Phone — (785) 675-3281.

works closely with Citizens Medical Center in Colby.

Meals on Wheels are available to homebound people through the hospital's dietary department. The department prepares meals for patients, the long-term care, or nursing home, and assisted living centers, the county jail and for eight to 12 people at home.

Chief Executive Officer Steve Granzow said the staff is proud of the new interactive teleconferencing system which allows them to do education and consultations while offering services in Hoxie.

He said the hospital is looking at ways to bring in an orthopedic surgeon and other doctors as they become available and as space allows.

"Work is under way to improve the physical and mechanical areas of the hospital," Granzow said, "plus upgrades in radiology, so it will be computerized. We are working to become more involved in the community and have applied to

the Kansas Department of Commerce to offer tax credits."

A new hospital auxiliary has raised money for a new wellness center in the basement of the hospital, which is open to the public.

Granzow said the hospital provided the space in its basement and through the efforts of area residents. It is equipped with treadmills, several pieces of elliptical equipment and eight weight stations. It is well used by the public, with 25 to 35 people using the exercise center every day.

"All the funds were raised in the community," he said, "and memberships are very reasonable with a family membership costing \$24 a year and \$15 a year for a single membership."

The family clinic houses six medical exam rooms in the hospital, which also houses the long-term care center and the assisting-living complex, so all the services are in a single location.

Known for its homelike atmosphere, the long-

term care unit gives preference for admissions to residents of Sheridan County, but does take those who live outside the county. The 38 beds are generally spoken for, which speaks well for the facility.

Jan Moore, activities director, brings out the creative side of the patients. She said her philosophy is that not everyone may be able to do crafts, but everyone can be creative. The center holds an art show every year to display some of the amazing creations the residents have come up with.

Residents of the assisted-living area have the best of both worlds. They can choose to eat in a private dining room, or those who prefer to cook can make their own meals in their apartment.

Officials say they want to foster caring relationships and bonding among staff and residents in all the services.

Future holds promise, challenges for center's

**Goodland
Regional
Medical
Center**

- Beds — 25 as critical access hospital.
- Revenue 2009 — \$19.3 million (combined with Goodland Family Health Center clinic).
- Loss 2008 — \$80,641
- County money — \$393,000 from property taxes. (By resolution every three years, the county can levy up to 6 mills. Presently at 5.79 mills.)
- Doctors — Four physicians, one nurse practitioner, one physician assistant and 40 consulting physicians.
- Phone — (785) 890-3625.

By Tom Betz

*The Goodland Star-News
nt.betz@nwkans.com*

The future holds promise for Goodland Regional Medical Center with a planned expansion of the telemedicine program, but the hospital board is beginning the process for a feasibility study on what to do with the 38-year-old building.

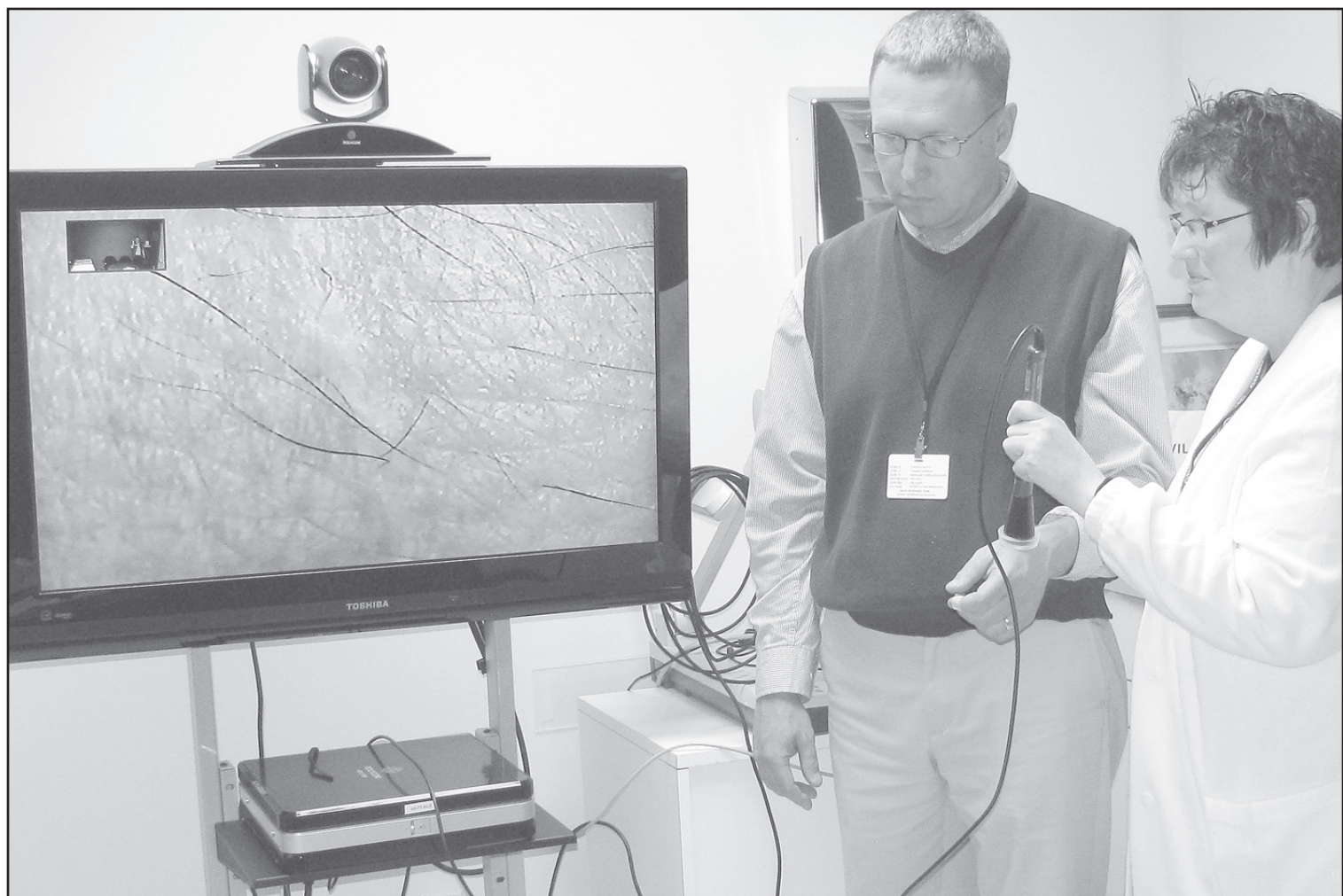
Administrator Jay Jolly talked about the hospital and what federal health reform might mean for Sherman County. A lot of what health reform does is going to take 10 years, if it all comes out as it was planned, Jolly said, and things are going to change over the years.

"For us here in Sherman County, I mentioned a few years ago that critical care hospitals were the way to go," he said. "The hospital made that change, and we were able to secure a guarantee of 101 percent of Medicare's share of costs. That was at risk in the health reform legislation, but we did keep that. We kept reasonable cost for lab services and that is a good thing.

"Medicaid (the federal-state program covering the poor) is a mixed bag. Right now, Medicaid can't even handle the caseload to enroll people, but nationally the law expanded the program to 133 percent of the poverty level.

"The problem is there is no guarantee the physicians or specialists who come out will see those patients. The eligibility might be there, but the provider may not. One of the challenges we have with our specialists coming out of Colorado is they don't want to accept Kansas Medicaid because the state system has not been a good payer and only pays 37 cents on the dollar.

"Another good thing that came out is that in the past, as a county hospital, we did not had access to some of the drugs we would give to Medicaid patients. That is now going be avail-



Brenda Cunningham, an oncology nurse, and Kevin Sanderson, director of information technology, demonstrated one of the ancillary high definition video devices used during telemedicine appointments at Goodland Regional Medical Center.

— Photo by Tina Goodwin/Goodland Regional Medical Center

able.

"There a lot of future possibilities in the law, but they don't have them now, and it is not certain they will roll out in the coming years, at least as written."

One of the things Jolly sees coming is some sort of bundling for payment.

"Right now, Medicare pays the doctor for what they do, the hospital for what they do and everyone gets a separate check," he said. "Medicare is looking for a way to bundle those and pay one entity and let them worry about who gets what. Looks like they are going to use the Accountable Care Organizations. For that to work, you have to have a close network so every step of the process, no matter what the patient needs, you have thought through all the care, and that is a huge challenge for this industry."

He said health reform did not include any delivery system reform, and that is where a lot of the changes will need to occur.

"The biggest piece of that is they have not aligned the incentives between the doctors, the hospital and the insurance company," he said. "You have to have clinical case management going on where the doctor is in charge, and at the same time you have to have case management for the other two to make sure things are aligned, and that is not in the health reform.

"The biggest problem I have with the health-

reform bill is it has not differentiated between the financial side and the delivery side. That is a problem, because you can only incentivize some things on the financial side. We have not recognized that in how we operate our health care system.

"We are stuck in the old models and assumptions.

"I do not see much consumer and insurance accountability, and that may get changed. There will be more push back on the insurance mandate. My take on that is if the insurance is a bad thing, then if you don't buy insurance and need medical care, are you going to expect the health care system to take care of you? Because the rest of us are paying for that. If you have an expectation that you can get the care, it seems there should be some expectation that you help pay for it.

"There hasn't been any discussion of the \$20 billion group of alternative therapies. herbs and chiropractors and all the different things that are out there. Some of them work and some don't, but they aren't part of the discussion, and there are some legitimate therapies there that are less expensive and would benefit people.

"We have a long way to go in fixing our health care system."

Jolly said the hospital was built in 1972 as a 60-bed facility. Now it's licensed for 25 beds as

a critical care hospital. It is Medicare certified and the clinic is certified as a rural health clinic for Medicare.

He said the hospital partners with St. Anthony Hospital in Denver as a critical care network partner. The hospital partners with the University of Kansas Medical Center for telemedicine and the Midwest Cancer Alliance for cancer treatment,

The core of the primary care is family medicine, pediatrics and emergency room care, he said.

When the hospital was built, most of the need was for inpatient care, he said, but today 80 percent of the care is outpatient, with people going home after treatment.

"The hospital has a license for 25 beds, and the average is about six to eight on a given day," he said. "This is a sign of the times."

He said ancillary services include laboratory, diagnostic imaging and pharmacy.

"We couldn't handle skilled care without the physical and respiratory therapy programs," he said.

He said the newest entry into that area is telemedicine.

"Right now, we have extensive capabilities in this area," he said, "and one of the barriers we have is that other hospitals we work with don't have our level of capability. We are ahead of the

telemedicine program

curve on that.

"We have a high-definition telemedicine program capability. Some hospitals may have some telemedicine capability, but we have actually had to encourage KU to move ahead on this. The high definition gives you a clinical-quality image when you are looking at a patient and trying to provide care."

He said the specialty clinics are busy. The largest one is in retinology, which is working with the retina of the eyes. He said in terms of volume and income, the doctor handling retinology generates more than half the income of the specialty clinics.

"That would not be most people's guess," he said. "It wasn't mine when he first came to town."

He said the Midwest Cancer Alliance, which is about 2 years old, is an important part of what the hospital is doing.

"Before this we were dependent on one provider who was out here about every six weeks or so," Jolly said. "With oncology through KU, we have access to therapies and support we would not have any other way. It is a huge advantage, and KU has been a partner in developing our telemedicine and chemotherapy goes along with that."

He said Goodland has the only pediatrician between Hays and Denver, and Sarah Linton is the only trained diabetic educator he knows of in the area.

Occupational therapy is a full-time service, with Maj. Larissa Coon, a reservist who spent a

year in Iraq. Speech therapy is another full-time program, he said.

He said the fixed-wing air ambulance service Eagle Med has based in Goodland is the busiest in their system, and a great benefit to the community.

He said the hospital is looking into handling dialysis with DaVita closing its facility in Burlington, Colo. He said there are a lot of issues with this, and providing the service is not going to be easy or cheap.

The hospital's economic impact on Sherman County is about \$7.03 million a year, according to 2007 figures, he said, and the hospital budget accounts for about half of the health sector. The hospital creates 148 jobs, 38 percent of those in the health sector.

The hospital spends about \$1.2 million a year with local vendors, Jolly said, and that is about 20 percent of health spending. The total impact of the hospital is about \$10 million, he added.

"Goodland Regional Medical Center is the health-care 'hub,' operating 24 hours a day, 365 days a year," Jolly said. "It is an expensive thing to maintain, but a critical part of the community. At some point, we are all going to need it."

"One nice thing about having a hospital is they attract physicians, and if you can attract physicians, you can do a lot of things in your community you wouldn't be able to do otherwise."

"A lot of that other 50 percent of the health dollars would not be here if we did not have the hospital."

Sherman County services cover breadth of fields

Health services available in Sherman County cover a breadth of fields, including a hospital, clinics, pharmacies, dental, eye care, chiropractic, exercise and long-term nursing care facilities.

Goodland Regional Medical Center, 220 W. Second, a 25-bed critical access hospital, has a specialty clinic featuring about 40 visiting doctors in 20 fields. Specialists come from Denver, Colorado Springs, Garden City, Hays and Kansas City.

The areas covered include mental health, allergy, autism and developmental disabilities, heart, ear-nose-throat, endocrine, gastric and intestinal, general surgery, nerve, birth and women's health, cancer and blood disease, eye, bone, foot, lung, urinary and pathology services.

The hospital has a dietician, Sarah Linton; occupational therapist, Larissa Coon; social worker, Mindy Greene; and a speech therapist, Crystal Schultz. A radiologist from Professional Radiology Services, based in Dodge City, reads X-rays on week days.

To make an appointment with a visiting doctor, call the specialty clinic (785) 890-6030.

The hospital operates the Sherman County ambulance service as Northwest Kansas Emer-

gency Medical Services and moves patients by fixed-wing airplane with Eagle Med at Renner Field, the Goodland municipal airport. For emergency medical help, call 911.

The Goodland Family Health Center, operated by the hospital, has three family-practice doctors, David Younger, Travis Daise and Mo Shafei; an internist and a pediatrician, Dr. Lisa M. Unruh and a nurse practitioner, Jacque Jorgensen.

Jack Lucas provides physical therapy out of the hospital.

Two nurse practitioners, Sondra Krayca and Janna Eisenbart, have their offices at Pioneer Health, 910 Main. Their number is (785) 890-7950.

Medical Arts Pharmacy, 202 Willow Road near the hospital, offers full prescription services and a drive-up window. Owner Cesar Miller is the main pharmacist. The store is open from 9 a.m. to 6 p.m. Monday through Friday and the number is (785) 890-5111.

Goodland Walmart SuperCenter, 2160 Commerce Road, has a pharmacy with three pharmacists open Monday through Saturday from 9 a.m. to 6 p.m. Call (785) 899-2266.



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