

Rural Health Care

April 2006 Nor West Newspaper

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Welcome

The staff of Nor'West Newspapers feels that health care is one of the most vital components of keeping our towns alive and well. Access to good health care can mean the difference between our towns living or dying.

The subject is of interest to older people, who see their health declining and are looking for someplace nearby to get the care they will need. This year the seniors have been wrestling with the question of whether or not to enroll in the medicare Part D prescription drug program.

Families and young people don't want to settle in communities without good hospitals, clinics and access to emergency medical treatment. Technology continues to expand the ability of the small hospitals to stay up with the latest treatments and bringing the doctor

closer to the patient.

If our communities are to succeed, we need good, affordable health care nearby.

We found health care is available and mostly affordable, and although our hospitals and clinics are struggling, they are surviving and growing and serving their communities.

Specialists, once found only in the cities, are coming to their patients, and smaller hospitals are willing to send those with special needs on to larger, more specialized facilities. The government is trying to compensate rural hospitals more fairly, but Medicare cuts make it difficult to balance budgets.

Like most things in the High Plains, people are working together to solve their health care problems.

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Prevention: County health priority

By Sharon Corcoran

The Goodland Star-News

County health departments are all about prevention — prevention of disease, of hunger and of unplanned pregnancies, even prevention of death from terrorist attacks.

Northwest Kansas health departments all say their goal is to evaluate, monitor, protect, restore and improve the health of everyone in the county. They provide health, environmental and educational services to promote healthy lifestyles.

Health departments provide these things for low fees, and if someone is unable to pay even that, they won't be turned away. Some services are done on a sliding fee scale, where what a person pays is based on their income and family size, while other services are available only to people of a certain age. But most are available to people of all ages and incomes.

Providing information is also an important role for the departments.

"Public awareness and information is key," said Dorendo Harrel, administrator of the Sherman County Health Department. "Dr. Julie Gerberding, director of the Centers for Disease Control, is quoted as saying, 'The best antidote to fear is information' — that's a good way to put it."

Services available at most health departments include family planning, immunizations, tuberculosis tests, hearing and vision screening, physicals for adults and children and screenings for blood pressure, blood sugar, hemoglobin, urine and blood lead. They do hemocult, pregnancy and tuberculosis tests.

Health departments don't diagnose conditions, Harrel said; when a test indicates a problem, the person is referred to a doctor. But the tests are done at a low cost, she said, so if someone is just checking on their health, they can avoid paying higher fees until a test indicates something is wrong.

Health departments administer the federal supplemental nutrition program for Women, Infants and Children; license and register day care centers; provide mammograms to women 50-64 who meet the income requirements; and work on bioterrorism plans.

Some health departments provide cholesterol and glucose screening, blood draws, allergy shots and even foreign travel immunizations. Several will fill pill boxes for elderly people who need help remembering which pills to take, how many and on which days.

Vaccinations available include hepatitis B; tetanus and diphtheria (with or without a whooping cough vaccine); polio, haemophilus influenza Type B; measles,



CAROL GUYER, A REGISTERED NURSE, filled a syringe for a vaccination at the Sherman County Health Department.

Photo by Sharon Corcoran/The Goodland Star-News

mumps and rubella; varicella; and pneumonia. And health departments can tell you when you and your children should be vaccinated.

Family planning programs include pregnancy tests, Pap smears, Depoprovera injections and birth control pills and counseling and information on sexually transmitted diseases. Some health departments hold women's clinics a couple of times a year, when nurse practitioners do breast exams, Pap smears and pelvic exams.

Early Detection Works, paid for by grants from the Kansas Department of Health and Environment, promotes the early detection of cancer in women ages 50-64. If cancer is detected, Harrel said, the health department helps them get a medical card. Women have to be diagnosed through that program to receive treatment through it, she said.

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Prevention top priority

COUNTY, from Page 3

The Maternal and Infant Program provides support, education and counseling by a nurse, nutritionist and social worker to pregnant women through the Thomas County Health Department for seven counties, Sherman, Wallace, Thomas, Rawlins, Sheridan, Logan and Decatur.

The program is two-fold, said Kathy Ryan, a registered nurse and certified lactation counselor at the Thomas County Health Department, paying for prenatal care for women who have no insurance and couldn't get a medical card and paying for education for all women.

When the program started, she said, it was directed toward teenage moms, but now it is for all mothers, even those who have had children before.

Things change, she said, and sometimes through research a better, healthier way to do things is discovered.

Health departments in Sherman, Cheyenne

and Sheridan counties offer cholesterol and glucose screening. Decatur County offers allergy shots, B-12 shots, ear and throat checks, nail trimming and blood draws twice a year.

Cheyenne County offers limited travel vaccinations and car seat distribution, and Sheridan offers foreign travel immunizations. Logan offers allergy injections, nail care, ear wash and suture removal, draws blood for lab work and offers home services that includes bathing and dressing care.

Sherman County administers the SHARE program (self help and resource exchange) in which people sign up for a monthly food package in exchange for two volunteer hours and a small fee. There are no income, age or family-size requirements.

Sherman also provides foot care, Early Detection Works and the Maternal and Infant Program and cosponsors an annual health fair with the Kansas State University Research and Ex-

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Area health departments

Sherman County: 1622 Broadway, Goodland, Kan. 67735; Phone: (785) 890-4888; web site: shcounty@st-tel.net; Hours: 8 a.m.-5 p.m. Mountain Time Monday-Friday.

Decatur County: 902 W. Columbia; Oberlin, Kan. 67749; Phone: (785) 475-8143; Hours: 7:30-11:30 a.m. and 12:30-4:30 p.m. Central Time Monday-Friday

Norton County: 801 N. Norton St.; Norton, Kan. 67654; Phone: (785) 877-5745; Hours: 8 a.m.-12:30 p.m. and 1-4:30 p.m. Central Time Monday through Thursday and 8 a.m.-12:30 p.m. Friday.

Cheyenne County Main Clinic: 221 W. First St.; St. Francis, Kan. 67756; Phone: (785) 332-2381; Hours: 9 a.m.-4:30 p.m. Central Time Tuesday-Thursday.

Satellite Clinic: 221 W. Bressler St.; Bird City, Kan. 67731; Phone: (785) 734-2200; Hours: 9-4:30 p.m. Central Time Monday.

Wallace County: 313 Main; Sharon Springs, Kan. 67758; Phone: (785) 852-4272. Hours: 8 a.m.-noon and 1-5 p.m.

Mountain Time Tuesday-Thursday.

Thomas County: 350 S. Range Ave., Suite 2; Colby, Kan. 67701; Phone: (785) 460-4596; Cell: (785) 443-0375; Pager: (785) 443-4150; Hours: 8 a.m.-5 p.m. Central Time Monday-Thursday and 8 a.m.-4 p.m. Friday.

Logan County: 216 Maple Ave.; Oakley, Kan. 67748; Phone: (785) 672-4502; Hours: 9 a.m.-5 p.m. Central Time Monday-Thursday.

Sheridan County: 940 Eighth St.; Hoxie, Kan. 67740; Phone: (785) 675-2101; Hours: 8:30 a.m.-12:30 p.m. and 1-5 p.m. Central Time Tuesday and Thursday and 8:30 a.m.-12:30 p.m. Wednesday.

Rawlins County: 607 Main; Atwood, Kan. 67730; Phone: (785) 626-3968; Hours: 8 a.m.-4 p.m. Central Time Monday-Thursday and 8 a.m.-noon Friday.

Information on Cheyenne, Decatur, Sheridan and Logan counties can be found at the Kansas Association of Local Health Departments web site at www.kalhd.org.



KAREN SATTLER, A REGISTERED NURSE at the Scott City Health Department, gave a Grant Junior High Student a tetanus, diphtheria, pertussis shot at the mass immunization clinic at the Goodland Elks Lodge on April 5. Marla Williams, a secretary at the Scott County department helped with the clinic, a practice exercise for immunizing a lot of people in a short time. Area health departments keep plans in place to work together in the event of large-scale emergencies.

Photo by Sharon Corcoran/The Goodland Star-News

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Health care business has more impact

By Tisha Cox

Colby Free Press

Health care in northwest Kansas is big business. It is one of the largest employers in the area and also puts money back into the local economy.

For example, at Citizens Medical Center in Colby, administrator Janice McCart said, while it isn't the biggest employer in Thomas County, the hospital certainly has an impact.

More than 250 people work at the hospital, its clinic, the Family Center for Health Care and at the Prairie Senior Living Complex.

"I have the largest payroll in Thomas County," McCart said.

She said most of that money — about \$7 million — goes back into the county in one form

or another.

Chris Sramek, economic development director for Rawlins County, said health care is probably the second-largest employer in the Atwood area behind the school district.

"It's actually very important," he said.

Health care, Sramek said, keeps older people in a community, and if they have access to the services they need, they will stay in town.

It all ties together, he said, health care, a good school system and more, to make a community healthy and viable. All are necessary for long-term sustainability.

"Lose one or the other and you stop being competitive," Sramek said.

He added a hospital is more than just an employer and provider of health care. With com-

munity development, endowments and other programs, hospitals make a difference in the overall community.

Scott Focke, director of Family Center for Health Care in Colby, said the number of doctors in a community affects how many support staff need to be hired.

Generally, he said, it takes four employees to support one provider. His clinic has 15 employees and shows the 4-1 ratio.

He said that's barely a scratch on the surface when you look at the ancillary services like physical therapy or pharmacy.

Usually, when someone comes to the doctor, they will be referred elsewhere for the other services.

That also means more money for a community, Focke said.

Instead of money just recirculating, it means an influx of money from outside, such as insurance or Medicaid or Medicare.

"We're the backbone of the health care system," he said.

McCart said a rural community needs four things to be successful — education, retail, health care and agriculture. She said this area has those things, and an asset in the Colby Community College. It draws nursing students from around the area, and many get jobs nearby once they complete their degrees.

McCart said Citizens hired seven out of the last graduating class.

She said health care is a profession that allows people to live where they want and work around their lifestyle. Many people choose to come to northwest Kansas or decide to stay.

Nursing is one example, she said, and it's a career that takes a relatively short time to train for. She said it only takes two years to get a degree to become a registered nurse, so the training can have an immediate impact in the field.

Prevention top priority

COUNTY, from Page 4

tension Office, Goodland Activities Center, Goodland Regional Medical Center and Goodland Lions Club.

The county is a member of the Western Pyramid Regional Group with Finney, Greeley, Hamilton, Kearny, Lane, Wichita and Wallace counties. Members of the group share supplies and resources and meet for strategic planning to be prepared in case of a bioterrorism attack.

The Sherman County Health Department also meets with a planning group that includes law enforcement, the hospital and dispatch to develop, practice and fine tune plans for emergencies, everything from terrorist attacks to a tornado.

The Decatur County Health Department is part of the Northwest Public Health Alliance for Public Health Emergency Preparedness, along with seven other counties.

Health departments work with Homeland Security and the Centers for Disease Control, Harrel said, planning, preparing and implementing emergency plans and seeing what changes need to be made.

In a disaster, a Strategic National Stockpile of "pushpacks" of medical supplies can be requested through the Kansas Emergency Man-

agement Services, Harrel said, when local and regional resources have been depleted.

The government has them stored so they can ship them out when needed, she said. They have supplies for chemical, radiological and biological emergencies, and health departments would call the state to get them.

If Homeland Security or the Federal Emergency Management Agency decides they are needed, she said, supplies are supposed to arrive within 12 hours.

The health departments also administer a farm worker program and environmental services. Farm workers can apply for help with acute care services, Harrel said.

Certain health care providers participate in the program, she said, and farm workers and their families who qualify by income can get vouchers to pay for the services they need. Covered services include clinic and outpatient services, dental, vision, pharmacy, immunizations and prenatal care.

Environmental services provided through the health department include water well and septic system inspections, which are done by a field man from the Local Environmental Protection Group out of Colby. He checks wells in rural areas, Harrel said; city wells are taken care of by the city.

Health Tip

Bug Bites & Stings : After removing the stinger by scraping it off and not pulling it out, (Because of squeezing the stinger will pump more venom into the site) apply a cut open onion to the site. Onions contain an enzyme that breaks down the response to the sting. Another

good remedy is meat tenderizer (monosodium glutamate) moisten some with water and make a kind of paste and apply to sting area. (IMPORTANT) Watch out for the signs of Anaphylactic Shock, a deadly allergic reaction.

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New drug program mired in maze

By Tom Betz

The Goodland Star-News

Seniors face questions, confusion and a May 15 deadline to decide to enroll in the new Medicare Part D drug plan.

The program was part of a Medicare Reform bill President George W. Bush signed in 2003. The new prescription drug coverage began in January.

Pressure has been mounting to delay the May 15 enrollment deadline for seniors already eligible for Medicare, but Bush said in February, "I signed Medicare reform proudly, and any attempt to limit the choices of our seniors and to take away their prescription drug coverage will meet my veto."

Sign-up for the new Part D prescription coverage began in November, and the new program began operating in January. Seniors eligible for the drug coverage have until May 15 to enroll without paying a penalty.

Congressman Jerry Moran, a Kansas Republican, said Medicare is one of the main issues he heard about during his tour of his 69-county district between December and February. He said he did not vote for the Medicare Reform but is trying to help seniors find the coverage they need and work through the problems as smoothly as possible.

Moran said the seniors he talked to were frustrated with the wide number of plans they were asked to compare and the difficulty in finding a plan to cover all their needs.

"This program was intended to help seniors, but with the complexity and confusion surrounding it, that has not been the case," Moran said. "I have been hearing from seniors across Kansas about this issue, and this legislation is a comprehensive approach to improving this program."

A bill Moran introduced in February would extend the enrollment deadline through December, require insurance companies to register with state insurance departments, authorize the Department of Health and Human Services to negotiate with drug manufacturers for better prices and provide more money for outreach and education.

"Efforts by local volunteers need to continue, but they must have resources in order to do this,"



PHARMACIST CESAR MILLER, an independent store owner in Goodland, handed Virginia Morton her prescription at the Goodland Medical Arts Pharmacy.

Photo by Tom Betz/The Goodland Star-News

Services authority to change the deadline. The amendment had no specific date, but the secretary could pick one he believes is appropriate.

Stueve said the amendment did not get through the budget process so far, but Congress recessed without passing the budget.

"We will have to wait until after Easter to know if this was included in the budget," she said.

Stueve was a county coordinator for Senior Health Insurance Counseling for Kansas, which provides information for Kansans on Medicare issues. The program, sponsored by the Department of Aging, is available all over the state. She said they have a toll-free number (800) 860-5260, and a web site www.agingkansas.org/shick/.

"These are people who have had training and experience with the programs," Stueve said, "and can help get the word out about the best plans."

There are 41 drug plans available to seniors in Kansas, she said, adding that one of the best things to do is find out what plans your pharmacist is offering.

Cesar Miller, owner of Medical Arts Pharmacy in Goodland, said he isn't really supposed to recommend any of the prescription drug plans but can tell you which program he will accept.

Miller said he went to a special school about all the plans and decided very quickly that many of the plans were not good for his independent pharmacy.

"Independent pharmacies are struggling," Miller said, "and I got the first Medicare Part D

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Moran said. "Now is not the time to turn our backs on this problem. Kansas seniors need help."

Moran is a member of the steering committee of the House Rural Health Care Coalition.

Lea Stueve, Moran's health and education legislative assistant in Washington, said the bill was referred to a committee, and with the Easter recess, she does not know if it will get out.

Moran introduced an amendment to the budget to give the secretary of Health and Human

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Medicare prescription program mired in maze

DRUGS, from Page 7

check in March for January. We were told it was going to be every two weeks, but it will get better if they are only 15-20 days behind.”

“Nothing good I can say about it,” said Rusty Addleman, owner of Addleman Drug Store in Oberlin. “It is confusing. I believe the companies that are running it are crooked. They mislead people or don’t always tell people what the facts are.

“As far as the drug store end, we are hurting for cash flow. We cannot pay bills because the system is running so slow. We have heard this is true for many other drug stores.

“Get people into a plan, and once they are signed up, they are stuck with it until the fall. It’s a very confusing program. Some of the letters I have seen from my senior customers make it seem that people think everyone over 65 has a computer and is Internet literate.

Miller said he looked at the plans and decided to stick with one company, Community Care, provided through MemberHealth, Inc.

“I feel it is a good balance,” Miller said. “I called around to see what plans other pharmacists were using, and found that the same plan was accepted in McCook, Atwood, St. Francis, Tribune, Colby and Burlington, Colo. I wanted to be sure the plan was something my customers could use even if they don’t come to my store for their prescriptions.”

Miller said the best thing for seniors to consider is how much they spend on medicine now and what they could anticipate spending before the end of the year.

He said if the person spends \$1,000 or more in a year, they probably should get a prescription card. If they spend under \$800 a year, they will probably spend more for the plan than the benefits they will get.

The American Association of Retired Persons printed a special section in November explaining the new drug plan, and answering questions about what is covered and what is not.

The basic Medicare Benefit costs about \$32 a month (\$384 per year) for the premium, and there is a \$250 deductible. The plan pays 75 percent of the next \$2,000, but then there is cov-

erage gap — known as the doughnut — where there is no coverage for the next \$2,850. At this point, the person’s out-of-pocket cost is \$3,600. Beyond the \$5,100 cost for drugs, though, coverage is 95 percent. The person pays 5 percent or a \$2 copay for generic drugs and \$5 copay for band name drugs.

For seniors with drug expenses under the cost of the basic plan of \$634 (\$384 premium plus \$250 deductible), the only reason to enroll is to have a card. The only drawback is that eligible seniors who do not enroll by May 15 will pay a 1 percent per month penalty if they decide to enroll later. Those seniors who have drug costs over \$800, but under \$2,250, will get about \$1,116 in benefit compared to their total out of pocket cost of \$1,134 (\$384 in premium, \$250 in deductible and \$500 for drugs up to the \$2,250 level).

Miller said he decided on the Community Care plan because the monthly premium was about the same as the basic Medicare Benefit, and had a broad list of drugs that were covered.

Addleman said he is recognizing all but three of the 41 plans at his store in Oberlin.

“The three we won’t accept,” he said, “are Humana, basically that is a Wal-Mart plan, and we would lose money on every prescription. Aetna and Cigna are the other two because they are high dollar

“They see them advertised on television and see the television stars, and think they must be good. Then they find out they are paying high dollar.”

Miller agreed the Humana is basically a Wal-Mart plan and said the drug card has the Wal-Mart logo along with a couple of other national companies.

Humana advertises the lowest premium price of \$9.48 per month, but with options to lower the \$250 deductible, that premium can be as high as \$54.20 per month.

Aetna’s premiums range from \$34.97 to \$60.83 per month depending on whether the deductible is \$250 or less. Cigna’s premium range is \$34.27 to \$47.22 per month.

“There is lots of emphasis on generics,”



Addleman

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BasicMath

The Standard Medicare Benefit

If your total drug costs in calendar year 2006 are:

Medicare drug plan pays:

And you pay (assuming no other drug coverage):

\$0–\$250 (deductible)

\$0

Up to \$250 *

\$251–\$2,250 (initial coverage)

75%, up to \$1,500

25%, up to \$500

\$2,251–\$5,100 (coverage gap)

\$0

100%, up to \$2,850 *

Maximum payments at this level >

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95%

5% or \$2 copay/generic \$5 copay/brand name

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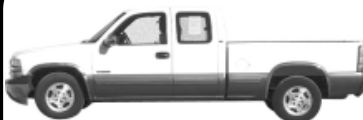
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