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Chairman Adam Smith, Vice-Chairman Ron Highland, Ranking Minority Jason Probst, Members of the Rural Revitalization Committee

I would like to thank Chairman Smith, Vice-Chair Highland, Ranking Minority Member Probst and the members of the Rural Revitalization Committee for allowing me to come testify this morning.

I am Dr. Craig Concannon. I am a physician from Beloit, Kansas and currently serve as vice-chairman of the Advisory Committee on Trauma.

I am here today to testify in **support of HB 2527** which is intended to continue protection of healthcare providers from disclosure during peer review performance improvement in the trauma system.

Trauma injury is the leading cause of death and injury in persons ages 1 – 44 years and ranks as the 3rd leading cause of death across all age groups. Reduction of traumatic death as well as injury with its resultant disability is the mission of any trauma system. A robust and coordinated trauma system is essential to the health and safety of each Kansan.

In 1999 the Kansas legislature established the Advisory Committee on Trauma (ACT) and designated the Kansas Department of Health and Environment to administer and develop a statewide trauma system.

The statewide trauma system is divided into 6 regional trauma councils each of which is responsible to facilitate implementation of trauma care throughout their region in conjunction with direction with the ACT. The ACT is responsible to facilitate effectiveness and direction of the entire statewide trauma system whose mission is primarily 3-fold: 1) to reduce the number of preventable deaths, 2) improve outcome and reduce disability from traumatic injury and 3) reduce medical costs through the appropriate use of resources.

Peer review is a key process within the trauma system where there is critical assessment of trauma system access and function, incident care delivery as well as monitoring of the implementation of site-specific trauma protocols as trauma care evolves. Without protection, healthcare providers across the state would decline participation in any performance improvement activities both at the regional and state levels.

Peer review protections set to expire with current legislation are essential to the function of the entire trauma system without which the viability and survival of the system would be in question.

HB 2527 is intended to continue already existing protection of healthcare providers from disclosure during peer review for performance improvement for the trauma program. We are in support of and encourage passage of the proposed amendments contained in HB 2527.

Craig A. Concannon MD, FACP Vice-Chairman Advisory Committee on Trauma

