



Opposing sides discuss closing Kan. rehab center

The Associated Press | 11 Feb 2011 | 12:05 PM ET

TOPEKA, Kan. - The fate of 156 profoundly disabled Kansans is at the center of a debate over Gov. Sam Brownback's proposal to close the Kansas Neurological Institute in Topeka, with supporters and opponents divided over whether the residents would suffer or benefit from the move.

The governor wants to move the residents into community-based facilities in July, as part of his efforts to reduce the state's budget deficit. A House committee approved the plan on Tuesday, but it still must pass the full House and Senate.

Officials with Stormont-Vail Regional Health Center on Thursday told the editorial board of The Topeka Capital-Journal that KNI is the best place to provide the specialized care the patients need. If the institute closes, acute care hospitals would face "astronomical" costs to care for the patients, they said.

At KNI, 98 percent of the patients have severe or profound mental disabilities, 83 percent can't speak, 76 percent have a seizure disorder, 68 percent can't walk and 33 percent receive nutrition through tubes. The median age is 47, with 94 percent having lived at KNI for more than 10 years, the Capital-Journal reported.

The hospital isn't equipped to provide highly specialized services that are required by KNI patients, said Maynard Oliverius, president and chief executive officer of Stormont-Vail Regional HealthCare. He said the amount of care needed for a KNI patient could strain the hospital's ability to care for other patients.

In 2010, Stormont-Vail had 67 admissions from KNI, with a Medicaid reimbursement of \$1.02 million. The hospital absorbed \$500,000 in losses that Medicaid didn't cover.

If the institute closes, "there simply isn't adequate care" for the patients in community-based facilities, Oliverius said. "We just do not believe there is anyone in the state to adequately take care of this population" other than KNI.

But Rocky Nichols, executive director of the Disability Rights Center of Kansas, said closing KNI would be best for the residents, if money used to treat them follows them into the community and cost savings are applied to the 3,500 people statewide who are on a waiting list for developmental disability care.

Nichols, whose group advocates for the legal and civil rights of the disabled, said it costs about \$177,000 per year to treat each patient at KNI, and moving them to community-based care would reduce that cost to about \$100,000 per patient. Those leaving KNI would receive needed services because federal law ensures funding follows patients from an institution into the community, he said. Residents of KNI would move ahead of the other 3,500 people on the waiting list for development disability services.

"They will have to be served in the community," Nichols said. "They will be served, and they will be served well."

Nichols said the closing 13 years ago of the Winfield State Hospital, which moved residents to community-based homes, proved that the state is able to care for disabled people. He said independent studies have shown former Winfield patients have an improved quality of life.

"The position we would like to take is, what happens after KNI closes?" Nichols said. "We understand people are opposed to KNI closing. We get that. But the question is, what happens next?"

"Everyone needs to be on board with money following people into the community."

Information from: The Topeka Capital-Journal, <http://www.cjonline.com>

Copyright 2011 The Associated Press. All rights reserved. This material may not be published, broadcast, rewritten or redistributed.

URL: <http://www.cnbc.com/id/41533540/>

© 2011 CNBC.com