Consequences of mandated cuts to KUMC line items
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As the Senate-House budget conference committee seeks ways to achieve cost savings, KUMC recommends allowing agencies the latitude to determine which reductions to make rather than identifying specific line items. Below are some examples of mandates in House Bill 2383 that would severely damage our educational and research mission.

A cut in excess of $900,000 to membership dues and subscriptions

Membership dues at KU Medical Center are crucial to maintaining the Medical Center’s accreditation. Our $54,884 annual membership dues to the Association of American Medical Colleges supports the activities of the organization that allows us to operate as an accredited medical school. The AAMC co-sponsors the Liaison Committee on Medical Education, the national accrediting body for MD programs in the United States.

Other membership dues support equally critical academic infrastructure. Our $45,000 annual membership fee to KanREN (the Kansas Research Education Network) supports a network that provides Internet connectivity and other technological services to educational institutions throughout the state, providing dedicated bandwidth specifically for research and education purposes.

Subscriptions at an academic Medical Center such as the University of Kansas Medical Center are crucial to our success. Our teachers, scientists, researchers and clinicians must be able to keep up on the most current advances in their fields. They do this by reading scientific journals and other research and health care publications.

Subscriptions to scholarly journals, research databases and e-books are critical to the basic functions of a university. KUMC’s Dykes Library licenses, or purchases by subscription, approximately 21,979 scholarly journals and 96 research databases. We use these resources to teach students in our School of Medicine, School of Nursing and School of Allied Health, to conduct research that leads to new treatments and cures and to provide clinical care for patients.

What “subscriptions” mean at KUMC

KUMC pays subscription fees to vendors such as EBSCO, Harrassowitz and Swets Information Services to manage 5,244 journals or databases used in teaching, research and clinical care. The annual cost for these services:

- **EBSCO**
  - $952,564 annual subscription fee
- **Harrassowitz**
  - $215,189
- **Swets Information Service**
  - $81,011

KUMC pays McGraw-Hill Companies $48,370 for 73 different E-books used in first- and second-year medical education.

We pay more than $77,000 for a subscription to UpToDate, a clinical database with articles for health care providers, third- and fourth-year medical students; residents; clinical years in nursing and allied health. It provides information on best practices and new protocols for healthcare.
An $800,000 cut in annual IT expenditures for infrastructure

Layered on top of the 13 percent across-the-board cuts already taken by the KUMC technology departments over the last three years, an $800,000 reduction in annual Information Technology expenditures would severely constrain the Medical Center’s ability to teach students, conduct research and treat patients.

Such a cut would impact all of the Medical Center’s core infrastructure: network, servers, storage and security, as well as the technology that enables us to monitor and manage each of them. Virtually everything we do would become less reliable and more prone to failure: key business systems (financial, human resources, payroll, grants administration); teaching and learning systems; file storage; email; web and Internet services; collaboration systems; the clinical trials system; clinical and business data warehouses; as well as the security systems that protect all of them from unauthorized access and data theft.

Eliminating 50 percent of the KUMC cell phones paid for by State General Funds

At KUMC, state general funds pay for 51 cell phones. Eliminating half of them would compromise the safety and security of the campus. For example, 26 of these phones are assigned to KUMC Police, who provide security to The University of Kansas Hospital as well as the Medical Center. Officers must be in constant contact with the Executive Vice Chancellor, other senior staff and Public Affairs personnel. Most of the remaining phones are assigned to individuals whose duties take them away from the main campus, where they provide continuing education and other services such as telemedicine throughout the state.

Deletion of Kan-Ed funding

Telemedicine involves caring for patients from a distance, using live, interactive consultations over high-definition videoconference systems and medical devices such as electronic otoscopes and stethoscopes. These video systems require reliable, high quality, secure Internet bandwidth to work effectively and facilitate health care to underserved Kansans. Kan-ed has been the only network in Kansas that provides these important elements.

Our doctors have used the Kan-ed network to provide treatment for pediatric epilepsy, cancer, and mental illness. Kan-Ed is a critical component of the telemedicine services provided through the Midwest Cancer Alliance. Our latest initiative, Kansas TeleStroke, is literally a lifesaving neurology service that will use the Kan-ed network at participating hospitals, allowing rural Kansas stroke patients to “see” a KUMC vascular neurologist from their local emergency department via telemedicine and receive urgent stroke treatment.

Kan-ed reduces patients’ travel costs while helping local hospitals and clinics retain revenue. Because telemedicine increases access and patients are able to see physicians sooner, it may also help prevent more expensive health care treatment at a later time. The Kan-ed network plays an integral role in all of these health and economic benefits.

Find more information about the University of Kansas Medical Center at kumc.edu.