



January 28, 2025

Senator Fagg, Chair
Senate Committee on Utilities
Opponent, SB387

The American Heart Association (the Association) exists to be a relentless force for a world of longer healthier lives, advancing health and hope for everyone, everywhere by removing barriers and giving everyone an opportunity for a longer, healthier life. It is for that reason that the Association respectfully opposes SB 387, as every Kansan is not guaranteed lifesaving telecommunicator CPR phone instruction leaving participation entirely voluntary.

Every year, more than 350,000 Americans fall victim to out-of-hospital cardiac arrest (OHCA). Statistics for Kansas are not entirely known. While there is data in the SB 11 Workgroup Report, it is likely underreported, minimizing the incidents of OHCA. The Association's recent CPR guidelines have been updated to include CPR administration in cases of suspected opioid overdose likely not captured in the report. We also do not have a comprehensive cardiac arrest data collection system in Kansas.

What is known is that only about 1 in 10 victims survive this traumatic event. For every minute that passes without CPR, survivability decreases by 10%. Seven in 10 people in America say they feel powerless to act in the face of a cardiac emergency. As a result, less than half of all people who need this lifesaving skill receive CPR from bystanders before professional help arrives. That's why we introduced SB 11 in this committee last year, which would have improved these odds for all Kansans giving many of them additional decades of life. In comparison, SB 387 fails to provide the same hope for survival.

Early access to 9-1-1, along with early lay rescuer CPR can double or triple the chances of survival. These are the first two links in the "Chain of Survival" providing the foundation for subsequent treatment and are critical for successful resuscitation. Telecommunicators are truly the "first- first responders" that's why it is essential that all 911 medical dispatchers be required to receive specialized training to assist anyone calling 911 to perform CPR. In bypassing this lifesaving training requirement, Kansas fails to join 22 other states where help is guaranteed. These states include Oklahoma, Nebraska, Georgia, Texas, Florida, among others.

The Association also believes that supporting local democracy and decision-making is important to health. We have taken many positive steps in Kansas to improve the health of people across the state by working at the local level. We want to make sure cities, towns, and counties continue to have the option to build on local progress and pass laws to help their communities thrive. However, SB 387 fails to establish a floor for basic 911 health and safety response. It fails to protect Kansans when the lives of their loved ones hang in balance.

- 47% of Kansas' land area does not have TCPR coverage.
- 43% of state highways and 33% of state/U.S. Corps parks does not have TCPR coverage.
- EMS response times in Kansas can be as long as 27 minutes.

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As it stands, the availability of T-CPR varies widely across Kansas, with many rural Kansans needlessly being denied lifesaving intervention. SB 387 maintains existing barriers to access. The SB 11 Workgroup Report affirms that TCPR could be and should be available for all Kansans, however, without the establishment of a minimum standard, SB 387 continues to leave rural Kansans behind. Where you live should not determine IF you live.

Sincerely,

Kari Rinker
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American Heart Association