Turnin ical Weight Loss Solutions

ST. FRANCIS HEALTH CENTER • TALLGRASS SURGICAL SPECIALISTS

January 18, 2012

Dear Senator Schmidt and Senate Public Health and Welfare Committee Members;

Tallgrass General, Vascular and Bariatric Surgery has been performing laparoscopic minimally invasive bariatric (weight loss) surgery in Topeka, Kansas since 2002. We are encouraged by the opportunity to provide this life-saving and life-altering surgery to Kansas citizens currently covered by Medicaid. The benefits provided by bariatric surgery are well documented to reduce health care costs because of reductions in the severity and morbidity of the medical diseases (diabetes, hypertension, heart disease, sleep apnea, and cancer, to name but a few) that accompany morbid obesity. It is our firm belief, based upon scientific and insurance company data, that the state of Kansas will recognize significant savings in long and short term health care costs by providing bariatric surgical benefits to qualified Medicaid patients.

Tallgrass General, Vascular and Bariatric Surgery is part of Center of Excellence (as certified by the Society for Metabolic and Bariatric Surgery) designations at St. Francis Health Center and Tallgrass Surgical Center. This certification requires that providers meet stringent quality standards. All of our patients are entered into a national database, so that our results are known, and our complication rates are measured. We first received certification from the ASMBS in 2008, and recertified in 2011. We were one of the first programs in Kansas to receive this designation.

As a comprehensive bariatric surgery practice, we offer five surgical options for our morbidly obese patients: laparoscopic Roux-en-Y gastric bypass, laparoscopic gastric sleeve resection, laparoscopic bilio-pancreatic diversion with duodenal switch, placement of laparoscopic adjustable gastric band, and revisional surgery. We feel that all five surgical procedures should be made available, as each person's situation is unique and we are committed to helping the patient choose the appropriate procedure for them.

Page 2

Since 2002, we have performed 422 laparoscopic adjustable gastric band placements, 1 open gastric band placement, 1,255 laparoscopic RNY gastric bypass procedures, 24 open RNY gastric bypass procedures, 66 laparoscopic gastric sleeve resections, 1 open gastric sleeve resection, 89 laparoscopic bilio-pancreatic diversions with duodenal switch, and 13 open bilio-pancreatic diversions with duodenal switch. We also perform laparoscopic revisional surgeries for patients who have had other weight loss procedures that have failed, or for patients who have encountered complications with a previous procedure. Counting revisions, we have performed in excess of 2,000 bariatric surgical procedures from the commencement of our program to the present.

Weight loss surgery is not an 'easy fix' for morbid obesity. The actual surgery itself is the easy part. The overall success of each patient is determined by many factors, but begins with a truly motivated patient who understands the surgery and is committed to fully participate in the program to prepare for surgery, as well as aftercare. As part of the preparation for surgery, a program to include the following would be our recommendation: 1) Participation in a medically-supervised weight-loss program for a period of no less than (3) three months; 2) Pre-operative nutritional assessment and counseling regarding pre- and post-operative nutrition, eating and exercise; 3) Psychological clearance for weight loss surgery to assess the patient's ability to understand and adhere to pre- and post-operative requirements; 4) Patient must not have smoked within the past six (6) months prior to surgery; 5) Patient must not have been treated for substance abuse for one (1) year prior to surgery.

As responsible citizens and taxpayers in the state of Kansas, we believe the provision of bariatric surgery benefits to qualified Medicaid recipients through Center of Excellence approved programs will save the Kansas taxpayer and the state of Kansas by reducing Medicaid health costs incurred from obesity and by increased tax revenues as our patients disabled by obesity may return to working, productive lives.

Respectfully submitted,

Tallgrass General, Vascular and Bariatric Surgery

Bernita Berntsen, MD, FACS, FASMBS	Carlyle M. Dunshee II, MD, FACS, FASMBS
James J. Hamilton Jr., MD, FACS	Sidney Y. Hu, MD, FACS
David A. Cancelada, MD, FACS	Jennifer D. McAllaster, MD, FACS