### Health and Human Services Committee May 17, 2017

#### [CONFIRMATION]

The Committee on Health and Human Services met at 1:00 p.m. on Wednesday, May 17, 2017, in Room 1510 of the State Capitol, Lincoln, Nebraska, for the purpose of conducting a public hearing on appointments to the State Board of Health and the Rural Health Advisory Commission. Senators present: Merv Riepe, Chairperson; Sue Crawford; Mark Kolterman; and Matt Williams. Senators absent: Steve Erdman, Vice Chairperson; Sara Howard; Lou Ann Linehan.

SENATOR RIEPE: Thank you very much. We're going to get into our hearings. This is the Health and Human Services Committee and the public agenda is available. And the first thing that I would like to do is I would like to have the members of the committee introduce themselves and then we will kind of go from there. Senator Kolterman.

SENATOR KOLTERMAN: I'm Senator Kolterman from Seward: York and Polk Counties, District 24.

KRISTEN STIFFLER: Kristen Stiffler, legal counsel.

SENATOR CRAWFORD: Good afternoon. Senator Crawford from District 45, which is eastern Bellevue and eastern Sarpy County and Offutt.

SENATOR WILLIAMS: Matt Williams, Legislative District 36: Dawson, Custer, and the north parts of Buffalo Counties.

CLERK: Tyler Mahood, committee clerk.

SENATOR RIEPE: And we have Brianne back here, who is from Simi Valley, California. And she's been with us all year and has done a great job. We appreciate her, and sometimes Jordan is with us as well. We have Dr. Joel Bessmer here today, I happen to know Dr. Bessmer. And I would ask you if you would come forward and we're going to ask you to state your name, spell your name, and then tell us a little bit about your interest in terms of serving on the State Board of Health.

JOEL BESSMER: (Exhibit 1) So Joel Bessmer, J-o-e-l, last name is B-e-s-s-m-e-r. I was asked by a friend to serve on the State Board of Health. Governor Ricketts asked if I would put in an application to serve and I agreed to do so. I look forward to helping. I certainly have 15 years of experience in academic medicine, running a residency program. And during that time, served on

### Health and Human Services Committee May 17, 2017

our credentials committee for 15 years, which really is...I think there are very similar turf battles and all those kinds of things that occur and get to take part in. And I very much look forward to participating in those again. [CONFIRMATION]

SENATOR RIEPE: Yes. I'm going to open this to questions, I might have a few of my own. Senator Crawford, did I see your hand fly any? [CONFIRMATION]

SENATOR CRAWFORD: No. [CONFIRMATION]

SENATOR RIEPE: You must be pure as the driven snow, seeing no one has any questions. But you have been...you have been on the faculty at the University of Nebraska Medical Center, I think, for a number of years? [CONFIRMATION]

JOEL BESSMER: That is correct. So I did...I got to be out in beautiful Kearney State College, when it was still Kearney State, and then went to medical school at UNMC. Started there in '89, finished in '93. Did an internal medicine residency from '93 to '96. Served as chief resident with Jim Armitage from '96 to '97. Was asked to join the faculty and start some new clinics for them, so I kind of headed up the primary care joint venture after my chief residency year and helped us recruit primary care physicians. And I myself practiced in Plattsmouth, Nebraska, for three years. Six months into my tenure at Plattsmouth, Nebraska, I was asked to come back and run the residency program with Jim Odell, and then did that for the next 11 years, 12 years with Jim. I stepped away from the university in 2010. You may or may not be aware, in 2007 I started the personal service medical practice at UNMC. We took that through the board of regents and it passed, and so we started a concierge medicine program at UNMC and I was asked to head that program by the dean and the chancellor. So I ran our personal service medical practice for three years on the university's campus. And after three years, both the dean, the chancellor, and myself felt it was in the best interest to take that off campus. I actually offered ownership to the university for my share of setting up the business and they declined. So with the help of a couple of private investors, Mike Cassling and Mike Simmons, we started Members.MD. Probably four years into the business, my wife and I bought the investors out, and we own that business today. [CONFIRMATION]

SENATOR RIEPE: Great. I think you have also been engaged in something that's close to my heart, which is direct primary care. [CONFIRMATION]

JOEL BESSMER: So I don't know if you guys were made aware, but when Pete asked me to serve and be on the State Board of Health, I said, well, Pete, I will do that, but only under one condition. And that is within three years, when Strada Healthcare is taking care of every state employee through direct primary care, is that going to be seen as a conflict of interest? So

### Health and Human Services Committee May 17, 2017

supposedly that was run through and everything is fine there. But my wife and I have started a new business, Strada Healthcare, with Clint Flanagan, that you guys know well, that testified also about LB817. And so Clint is also an owner in our business and we've started Strada Healthcare here in Nebraska. And we are just getting ready. Come January 1 we will start on-boarding new patients by the thousands because the businesses are going to be converting. So our solution is a little bit different, Merv, than a lot of people and a lot of docs have done with direct primary care. Most docs doing direct primary care just convert patient by patient and family by family. Having served at the academic world and been involved in residency and medical student education, I actually feel compressed that in the next five years, if we don't do this and do this well, that we will not have a future in primary care for physicians. So we're going to go after patients by the thousands because the businesses are the ones that pay the benefits. So we are locking this on to a high-deductible health insurance plan through many brokers in our area. And the brokers are going and selling it to the businesses because we can save them thousands of dollars. [CONFIRMATION]

SENATOR RIEPE: Being as you've been kind enough to make the trip here, I'd also like to have you...and you're obviously engaged in the entire health delivery model. [CONFIRMATION]

JOEL BESSMER: Yes. [CONFIRMATION]

SENATOR RIEPE: Just give us a little bit of read of where you think we're going at a national level with the House bill and the Senate bill. [CONFIRMATION]

JOEL BESSMER: You know, I'll know...I think I'll know more about that in about a month from now. We've got the DPC summit is in Washington, D.C. But I just spent some time with Jay Keese, who works with us and along with us out in San Francisco, about two weeks ago. And I don't know what to tell you about the new healthcare bill, from a standpoint of the chance of it passing with everything that's going on right now. I just think that there has...you know, we're spending so much time putting out little fires that don't matter, that we're not taking care of the business of the country right now. And I think somehow or another we need to hit a reset button on that. But I will say direct primary care is going to survive, I think, one way or another. The only way I see direct primary care not taking over the primary care of our country is if somehow or another somebody passes legislation that outlaws it. Because otherwise there is nothing that can stop this movement. It is better for the doctors, it is better for the patients, it is better for the businesses, and it is better for our country. So I don't see anything stopping the momentum. [CONFIRMATION]

SENATOR RIEPE: I kind of had to hold back saying "amen." [CONFIRMATION]

### Health and Human Services Committee May 17, 2017

JOEL BESSMER: You know, it's...when I sit down with the CFO and the CEOs of the businesses and we talk about doing this, I sit there and say it is the first time that I'll put all of us on the rowboat and we'll row in the same direction. Because we're all trying to accomplish the same thing: we want the employee healthy. We want you spending less money in health insurance and in healthcare benefits, and it's finally a solution that can provide that.

[CONFIRMATION]

SENATOR RIEPE: I did have a bill that I introduced this session, I asked them to hold it over in Revenue, which established HSAs. [CONFIRMATION]

JOEL BESSMER: Very much aware, and I'd love to discuss that with you. I don't think we should have held it over, but... [CONFIRMATION]

SENATOR RIEPE: Okay, I'll (inaudible). [CONFIRMATION]

JOEL BESSMER: But my concern...so I'm familiar with your bill and I love the idea. So it's basically...it would set aside that the state of Nebraska would allow us to use healthcare spending money to pay for direct primary care. [CONFIRMATION]

SENATOR RIEPE: That's right. [CONFIRMATION]

JOEL BESSMER: We need that, it has to happen. Because I promise we may not get that fixed at the federal level because of all the little fires and we're not doing the business we need to do. And so rather than waiting for a federal fix, if we fix this at a state level and then you allow us to show you what we can now do with that, it will allow us then to show the federal government how this really should be done. And it will be one of the times where we, in the middle of the country, finally show the edges of the country how really the country ought to be run from a healthcare perspective. [CONFIRMATION]

SENATOR RIEPE: Senator Crawford...or Kolterman, sorry. I'm thinking this way and looking that way. [CONFIRMATION]

SENATOR KOLTERMAN: Yeah. Thank you very much, Senator Riepe. My background is health insurance. [CONFIRMATION]

JOEL BESSMER: Beautiful. [CONFIRMATION]

### Health and Human Services Committee May 17, 2017

SENATOR KOLTERMAN: And I worked really hard with Senator Riepe to get direct primary care implemented. And we do sell a lot of group insurance. [CONFIRMATION]

JOEL BESSMER: Yes. [CONFIRMATION]

SENATOR KOLTERMAN: I agree wholeheartedly that the answer to this is direct primary care tied together with a high-deductible health plan. [CONFIRMATION]

JOEL BESSEMER: Yes. [CONFIRMATION]

SENATOR KOLTERMAN: But how...and I don't think we're going to have the opposition from the insurance companies, because they won't... [CONFIRMATION]

JOEL BESSMER: I don't think so either. Everybody is losing money in primary care. They don't want it. [CONFIRMATION]

SENATOR KOLTERMAN: Exactly. [CONFIRMATION]

JOEL BESSMER: They don't want it either. So everybody is losing money. We finally figured out a way, and that is get rid of all the paperwork in the middle. [CONFIRMATION]

SENATOR KOLTERMAN: So is Spectrum...is that... [CONFIRMATION]

JOEL BESSMER: And let's put the doctor and the patient back together. [CONFIRMATION]

SENATOR KOLTERMAN: Spectrum, is that a private corporation, or is that through the Med Center? Or how do you plan to roll that out? [CONFIRMATION]

JOEL BESSMER: Strada Healthcare, you mean? [CONFIRMATION]

SENATOR KOLTERMAN: Yeah. [CONFIRMATION]

JOEL BESSMER: So Strada is already in existence. We're presently taking care of about 350 patients. But our problem was we didn't get our...it would have been perfect if we could have started our business about September or October of last year because most businesses roll their

### Health and Human Services Committee May 17, 2017

benefits and renew in January. And nobody is interested in spending more money right now, right? [CONFIRMATION]

SENATOR KOLTERMAN: Exactly. [CONFIRMATION]

JOEL BESSMER: Even though we can document the savings for them. So almost all of the businesses that we're talking to and are getting ready to convert are going to be a January 1. We have a few that are getting ready for a September 1, we have one that we were working with for a June 1, but they turned us down at first and then they got their 25 percent increase from BlueCross BlueShield and they came back. And so they're going to do that for three months and then convert with us. Because you're right, it is an answer. And once again, I don't think the insurance companies will oppose us because they're losing money in primary care. This is a solution for them. They can be right in the boat rowing with us. [CONFIRMATION]

SENATOR KOLTERMAN: So do you see an emergence of residents that want to work in the family practice arena? [CONFIRMATION]

JOEL BESSMER: Honestly, I haven't had time to get to that level. But I absolutely understand what they want, and what they want is a relationships with their patients, right? They don't want all the in-between fights that we have right now. I mean, a majority of my nurse's times in clinic are not spent taking care of patients, it's spent filling out paperwork day in and day out. And it's a miserable job for them to do it. And that goes away in this. And so and all of a sudden now, you can bring those doctors in and say, listen, all I need you to do is take care of about 1,200 patients; develop a great relationship; and communicate with them on a HIPAA-compliant app. And all of a sudden, this becomes really easy again, because it's just about healthcare. I mean, there are no preauthorizations, there are no "what is on your formulary?" All of that goes away. [CONFIRMATION]

SENATOR KOLTERMAN: Appreciate it, thank you. [CONFIRMATION]

SENATOR RIEPE: Senator Williams. [CONFIRMATION]

SENATOR WILLIAMS: Thank you, Senator Riepe. And thank you, Doctor, for being here. Two questions, one follow-up on what Senator Kolterman said. Do you feel there's going to be enough docs available to fill what you've got? And the second part of the question, related to that, is the rural areas of our state... [CONFIRMATION]

JOEL BESSMER: Yes, yes. They need this badly. [CONFIRMATION]

### Health and Human Services Committee May 17, 2017

SENATOR WILLIAMS: ...and your concept on how we roll that out statewide. [CONFIRMATION]

JOEL BESSMER: Yes, yes. So for your first question. I mean, it is probably one of the most common, you know, for lack of a better term, complaints or issues I hear about. Well, Joel, if you're really talking about trying to take a family physician and say they really can only take care of about 1,200 to 1,400 patients, whereas right now they're probably managing 3,500 to 4,000, the math doesn't work. You need a lot more doctors. But the problem is I have to create the opportunity for them first, right? Because if we don't fix the problem first, we're still back at an insanity level. We're still back trying to say we're going to do the same things over and over again and expect medical students and residents to choose this as a career. I have been in front of the medical students in the primary care field that are interested in primary care, and I've discussed this movement with them. It was before we even passed LB817. And we need to get back in front of them again to talk about this. But they are the future. We need to make family practice great again, right? And this does that. This puts family practice as a kingpin. I'm an internist, I'm not a family physician. But my training was very different. I actually did our primary care joint venture training. So I did, during my residency in internal medicine, I did family medicine the entire time. I did both a family medicine and an internal medicine residency at the same time, so during my training, I was seeing kids. No internist does that, right? And so when all of the sudden now I'm trying to relate to a family physician, I totally get their job. I understand what they're doing, and I also understand the rewards of that. And yes, I do believe that we can make this attractive to the medical students and the residents again, which then allows us to increase the number of doctors serving in these areas. In between, doctors are going to have to fill both roles. So what we actually talk about are hybrid practices. So when you say how do we do this in rural Nebraska, it's the Nextera version. Nextera is what Clint Flanagan is doing up and down the entire front range of Colorado. And that is doctors are serving in both roles. They're doing direct primary care and they're serving in a traditional practice. But I guarantee you, every one of those doctors wants to be serving DPC full-time. It's just a matter of we've got to get the patients there. [CONFIRMATION]

SENATOR RIEPE: Senator Cassidy at the national level, I think, is working on--correct me where I'm wrong here--with trying to get direct primary care available to Medicare patients. [CONFIRMATION]

JOEL BESSMER: That is correct. We're involved in that. [CONFIRMATION]

SENATOR RIEPE: Okay. [CONFIRMATION]

### Health and Human Services Committee May 17, 2017

JOEL BESSMER: So there is Brian Forrest. Brian is a direct primary care...what's the name of his business, do you remembers? It doesn't matter. Brian Forrest is a direct primary care doc that sent that grant in and is running the study. And Strada is a part of that study. And basically what it is, is it is...it allows us to enroll Medicare patients and then we send Medicare the data. And really, it's just one more option that Medicare is looking at for options of care for their enrollees. And once again, I think it could serve a very valuable role. [CONFIRMATION]

SENATOR RIEPE: I would think in rural markets that the prepayment might be stability of revenue coming in. It might be attractive to those physicians. [CONFIRMATION]

JOEL BESSMER: That's absolutely right. And once again, imagine you're a rancher in Valentine and you have your strep throat again, or it's allergy season again and you just need to know what to do. Today, we have a sick healthcare system. The doctor can only be rewarded when that patient comes in and says I am sick. Well, see, we flip that completely the other direction. As I tell doctors, your commodity is your time. So we want you rewarded because your patients are healthy and they're not in your clinic. So send me a picture of your strep throat, yeah. That looks like exudates to me. You have a fever and you have exudates; you need antibiotics. I don't care what I see in the clinic room. So if we can start to harness that ability, we now make those doctors much more efficient for their time in clinic. And they're really seeing the sick patients that they need to see, but not wasting their time seeing those patients that are their highest revenue generators because it takes them 1 minute and they bill the same amount for that patient they need to go spend 20 minutes with. So we flip that the other direction instead and say let's just pay all that up front. And you're still rewarded for not seeing that patient.

[CONFIRMATION]

SENATOR RIEPE: Do you think that it would be helpful if I had some red hats made that said "make primary care great again?" [CONFIRMATION]

JOEL BESSMER: I think it would help us. I think...well, maybe. Maybe not, with all that's going on right now. [CONFIRMATION]

SENATOR RIEPE: Well, maybe not. Maybe not. Maybe that was (inaudible). [CONFIRMATION]

JOEL BESSMER: But we are working hard at making primary care great again. [CONFIRMATION]

### Health and Human Services Committee May 17, 2017

SENATOR RIEPE: Okay. Well, great. I'd love to talk. And sometime maybe when Dr. Flanagan gets back again. Either way, but I (inaudible) [CONFIRMATION]

JOEL BESSMER: I'm a good talker. [CONFIRMATION]

SENATOR RIEPE: I'm excited about it. No, you're excited, and I appreciate that very much. Are there other questions? Thank you so much for coming down. [CONFIRMATION]

JOEL BESSMER: Thank you. [CONFIRMATION]

SENATOR RIEPE: I hope that you'll take your bride to late lunch. [CONFIRMATION]

JOEL BESSMER: That's the goal. [CONFIRMATION]

SENATOR RIEPE: Good. Thank you so very much. Do you have questions of us? [CONFIRMATION]

JOEL BESSMER: I do not. [CONFIRMATION]

SENATOR RIEPE: Okay. Are there any that want to speak in favor, in support? Any in opposition? Any neutral? Hearing none, that concludes this hearing. Thank you so very much. Good to see you again. [CONFIRMATION]

JOEL BESSMER: Thank you all. Thank you for serving. [CONFIRMATION]

SENATOR RIEPE: Thank you. Our next appointee, and we have some time here, is...we're going to do this via phone, right? It's Dr. Klay-mer (phonetic)? [CONFIRMATION]

SENATOR KOLTERMAN: Klah-mer (phonetic). [CONFIRMATION]

SENATOR RIEPE: How is it? [CONFIRMATION]

SENATOR KOLTERMAN: Klammer. [CONFIRMATION]

SENATOR RIEPE: Okay. [CONFIRMATION]

### Health and Human Services Committee May 17, 2017

SENATOR KOLTERMAN: I just happen to know his aunt, I went to school with her. [CONFIRMATION]

SENATOR CRAWFORD: Nice. [CONFIRMATION]

SENATOR RIEPE: Okay, that's great. He is an applicant for the Nebraska Rural Health Advisory Commission, so this is an important one as well. Do we have... [CONFIRMATION]

SENATOR CRAWFORD: New appointee. [CONFIRMATION]

SENATOR RIEPE: New appointee? Do we have him on the phone? [CONFIRMATION]

TYLER MAHOOD: Just a second, please. He is calling, but he says the line is busy. Okay, I think I figured out the issue. [CONFIRMATION]

SENATOR RIEPE: Doctor...is it Klah-mer (phonetic), you said? Are you there, doctor? [CONFIRMATION]

KYLE KLAMMER: Yeah, I'm here. [CONFIRMATION]

SENATOR RIEPE: Okay, thank you very much. I'm going to ask our panel to introduce themselves, so that you know who is all here. And we'll be asking you to then present yourself. But I'm going to start with a gentleman I think that maybe you know, or he knows your aunt, anyway, is Dr. Kolterman (sic)...or Senator Kolterman. [CONFIRMATION]

KYLE KLAMMER: Okay. [CONFIRMATION]

SENATOR KOLTERMAN: Dr. Klammer, this is Mark Kolterman from Seward, Nebraska. [CONFIRMATION]

KYLE KLAMMER: Okay. [CONFIRMATION]

KRISTEN STIFFLER: Kristen Stiffler, legal counsel. [CONFIRMATION]

SENATOR CRAWFORD: Good afternoon. Senator Crawford from Bellevue area. [CONFIRMATION]

### Health and Human Services Committee May 17, 2017

SENATOR WILLIAMS: Good afternoon. Senator Williams from Gothenburg. [CONFIRMATION]

TYLER MAHOOD: And Tyler Mahood, committee clerk. [CONFIRMATION]

SENATOR RIEPE: And we have our page, Brianne, here, who is a great help. What we're going to ask you, doctor, is if you would to just give us your name and spell it for the record. And then tell us a little bit about yourself and tell us why you have an interest in the Nebraska Rural Health Advisory Committee. [CONFIRMATION]

KYLE KLAMMER: (Exhibit 1) Okay. Well, this is...I'm Kyle Klammer, that's K-y-l-e K-l-a-m-m-e-r. (Speaker malfunction)...call my hometown. I graduated there in 2008, went to Chadron... (speaker malfunction). [CONFIRMATION]

SENATOR RIEPE: Okay. Doctor are you still there? I think...Doctor? [CONFIRMATION]

KYLE KLAMMER: Hello? [CONFIRMATION]

SENATOR RIEPE: Are you still there? [CONFIRMATION]

KYLE KLAMMER: Yeah, I'm still here. Can you not hear me? [CONFIRMATION]

SENATOR RIEPE: Something happened. We stepped on the wrong pedal or something. If you would continue on, please. [CONFIRMATION]

KYLE KLAMMER: Sure. I went to Chadron State College for my undergraduate training, was a member of the Rural Health Opportunities Program through Chadron State. Attended UNMC following that, starting in 2012, for my medical school training. And then just graduated from that last spring, 2016. And I am a member of...or part of the advanced rural training track for the University of Nebraska family medicine residency program. Just a little bit about me personally, I guess. I'm married. My wife, Hilary, is a school psychologist. We have a one-year-old German short-hair that we like to go pheasant hunting with. And yeah, I guess I do a lot of hunting and fishing, those are kind of my two main hobbies. Otherwise, I guess...why do I want to be a member of the Rural Health Advisory Commission? It's basically just because, you know, I'm from a rural area. I love rural Nebraska, love everything about it. I just want to, I guess, do my part to help those communities out. I definitely see myself back in a rural community, you know, sometime very soon, as soon as I'm done with residency here. And I just very much enjoy being

### Health and Human Services Committee May 17, 2017

able to be a part of something like the Rural Health Advisory Committee (sic: Commission). [CONFIRMATION]

SEVERE WEATHER ADVISORY [CONFIRMATION]

SENATOR RIEPE: We are pausing because we're having a weather alert. Okay, doctor, we're back. I hope that you're in a safe place as well. [CONFIRMATION]

KYLE KLAMMER: Yeah, I am. Is there something going on there? [CONFIRMATION]

SENATOR RIEPE: A little tornado watch or something like that. [CONFIRMATION]

KYLE KLAMMER: Oh, I got you. [CONFIRMATION]

SENATOR RIEPE: I think Senator Kolterman may have a question. [CONFIRMATION]

KYLE KLAMMER: Sure. [CONFIRMATION]

SENATOR KOLTERMAN: Senator (sic: Dr.) Klammer, how much time do you have left in your residency? [CONFIRMATION]

KYLE KLAMMER: I have two years left, starting July 1. [CONFIRMATION]

SENATOR KOLTERMAN: So you just got into the residency program at the Med Center? [CONFIRMATION]

KYLE KLAMMER: Yeah, yeah. So I'm a part of the maybe...training track. So UNMC has a program where basically you start...you sort of start residency your fourth year of medical school and then you graduate, of course, that year and then essentially do three more years, like a normal family (speaker malfunction). [CONFIRMATION]

SENATOR RIEPE: Well, you sound like an ideal ambassador for us. [CONFIRMATION]

SENATOR CRAWFORD: Yes. [CONFIRMATION]

SENATOR KOLTERMAN: Are you still there? You're cutting out on us. [CONFIRMATION]

### Health and Human Services Committee May 17, 2017

KYLE KLAMMER: Sorry. [CONFIRMATION]

SENATOR RIEPE: It's okay. I want to see if we have...do we have a follow-up question or do we have other questions? Senator Crawford is going to have a question here. [CONFIRMATION]

SENATOR CRAWFORD: Thank you, Doctor. And I really appreciate you being willing to serve on this commission, especially since you came out of the RHOP program. And I just wondered if you would indicate if that was a critical part of your decision to stay in Nebraska, or how that helped you in your career path. [CONFIRMATION]

SEVERE WEATHER ADVISORY [CONFIRMATION]

KYLE KLAMMER: I'll hold off for a second. [CONFIRMATION]

SENATOR CRAWFORD: Thanks. [CONFIRMATION]

KYLE KLAMMER: As far as the RHOP, you know, it was a wonderful program. And it, you know, definitely I guess, just helped solidify my want to return to rural Nebraska more than anything, I guess. Just being able to go to, you know, a small college like that in another small town similar to the one that I grew up in essentially, and just learning to love every aspect of that town as well. And then after contrasting that with being in Omaha, you know, it's definitely a stark change and just kind of further solidifies my thoughts and feelings just towards wanting to be back in rural Nebraska, you know, in a couple years I guess, so... [CONFIRMATION]

SENATOR CRAWFORD: Great. Thank you so much for being willing to serve. [CONFIRMATION]

KYLE KLAMMER: Um-hum, you're welcome. [CONFIRMATION]

SENATOR RIEPE: Good Senator Kolterman has a follow-up question. [CONFIRMATION]

SENATOR KOLTERMAN: Dr. Klammer, I'm just curious, is your dad still in practice up in Bassett? [CONFIRMATION]

KYLE KLAMMER: As far as...I don't think I...sorry, I don't understand the question for sure. My dad is not a physician. [CONFIRMATION]

### Health and Human Services Committee May 17, 2017

SENATOR KOLTERMAN: Oh, I thought he was. Okay. [CONFIRMATION]

KYLE KLAMMER: No. My uncle was a physician at one time. [CONFIRMATION]

SENATOR KOLTERMAN: Okay. Your uncle is who I'm thinking of. [CONFIRMATION]

KYLE KLAMMER: Okay, yeah. Tim Klammer, yep. He was an ob-gyn and lived in Wausau, Wisconsin, for most of his practicing time, so... [CONFIRMATION]

SENATOR RIEPE: Is it safe to assume you're primary care? [CONFIRMATION]

KYLE KLAMMER: Yeah, family medicine. [CONFIRMATION]

SENATOR RIEPE: God bless you. Okay, are there other questions? Do you have any questions of us? [CONFIRMATION]

KYLE KLAMMER: Yeah. I guess just as far as, you know, what...I mean, I kind of read...obviously I've read quite a bit about the Rural Health Advisory Commission. And, I mean, essentially, you know, it's made up of 13 members and the goals and everything. What is primarily just expected of, you know, of members of the commission essentially?

[CONFIRMATION]

SENATOR KOLTERMAN: Show up and learn. [CONFIRMATION]

KYLE KLAMMER: Sounds good to me. Okay. [CONFIRMATION]

SENATOR RIEPE: I think that they will set their own agenda. You will participate in that. And obviously you're going to have more issues than trying to uncover issues. They will be coming at you real hard and fast because we have a lot of manpower issues in this state, we have access issues in this state. We're going to have to talk about what happens at the national level or what happens at the state level to try to do...to get access to healthcare and not just more so than insurance to healthcare to everyone in the state if we can, as we can. And that's real goal to work for. But so there will be no shortage of work, I can guarantee you that. And I think and hope that it will be a very good experience for you as well, as making your contribution. [CONFIRMATION]

KYLE KLAMMER: Definitely. I look forward to it. [CONFIRMATION]

### Health and Human Services Committee May 17, 2017

SENATOR RIEPE: Okay. Well, thank you for being with us. While you're still on I'm going to see that we have an empty room here, other than us at the hearing table, but I'm going to ask if there are any proponents? Seeing none, any opponents? Seeing none, seeing any neutral? Seeing none, that concludes this hearing. I simply had to do that for the record. So thank you, Doctor. Have a great day. And we are very happy that you are a primary care doctor who wants to practice in the western part of our state. [CONFIRMATION]

KYLE KLAMMER: Well, thanks for having me, guys. And I appreciate chatting with all of you, so... [CONFIRMATION]

SENATOR RIEPE: Okay. Thank you very much. [CONFIRMATION]

KYLE KLAMMER: All right, thank you. You guys have a wonderful day. [CONFIRMATION]

SENATOR RIEPE: Thank you. [CONFIRMATION]