

Greater Minnesota Telehealth/e-Health Broadband Initiative (GMTBI)



Building a Dedicated Network for Rural Health Care

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FCC Rural Health Care Pilot Project



In November 2007, FCC authorized \$417 million for construction of statewide or regional broadband networks to:

- 1. Support health information exchange and telehealth for rural providers**
- 2. Connect rural providers to urban providers regionally and nationally**

FCC Rural Health Care Pilot Project



- **Covers costs for construction, hardware, and recurring circuit connections for 3 years**
- **Health care facility pays 15% cost**
- **Telco Vendors paid 85% costs directly by USAC**
- **Large urban providers could participate if they connect with rural providers**

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Five health care networks participated in 2007 application:

- Minnesota Telehealth Network
 - North Region Health Alliance (MN and ND)
 - Medi-Sota (SW MN)
 - Minnesota Assn Community Mental Health Programs
 - SISU Medical Systems
- Minnesota was authorized for \$5.4 million in USAC subsidies**
- Program recently extended through June 2012**

GMTBI pilot project: What did we imagine?



- Minnesota network for statewide telehealth and health information exchange
- Improved access to patient care in rural Minnesota
- Elimination of barriers: costs, border issues, bridging
- Reliable and secure connectivity
- Network of networks
- Any provider connecting to any other provider
- Development beyond the pilot sites and across state boundaries

What does a managed dedicated health care broadband network do?



- Improves connectivity to allow for Quality of Service (QOS) for reliable telehealth services
- Protects personal health information
- Connects all sites under open architecture (MPLS “cloud”)
- Maintains independence for connection service decisions
- Leverages pooled resources for purchasing
- Provides service and support for complex connections

What is the value of a dedicated rural health care broadband network ?



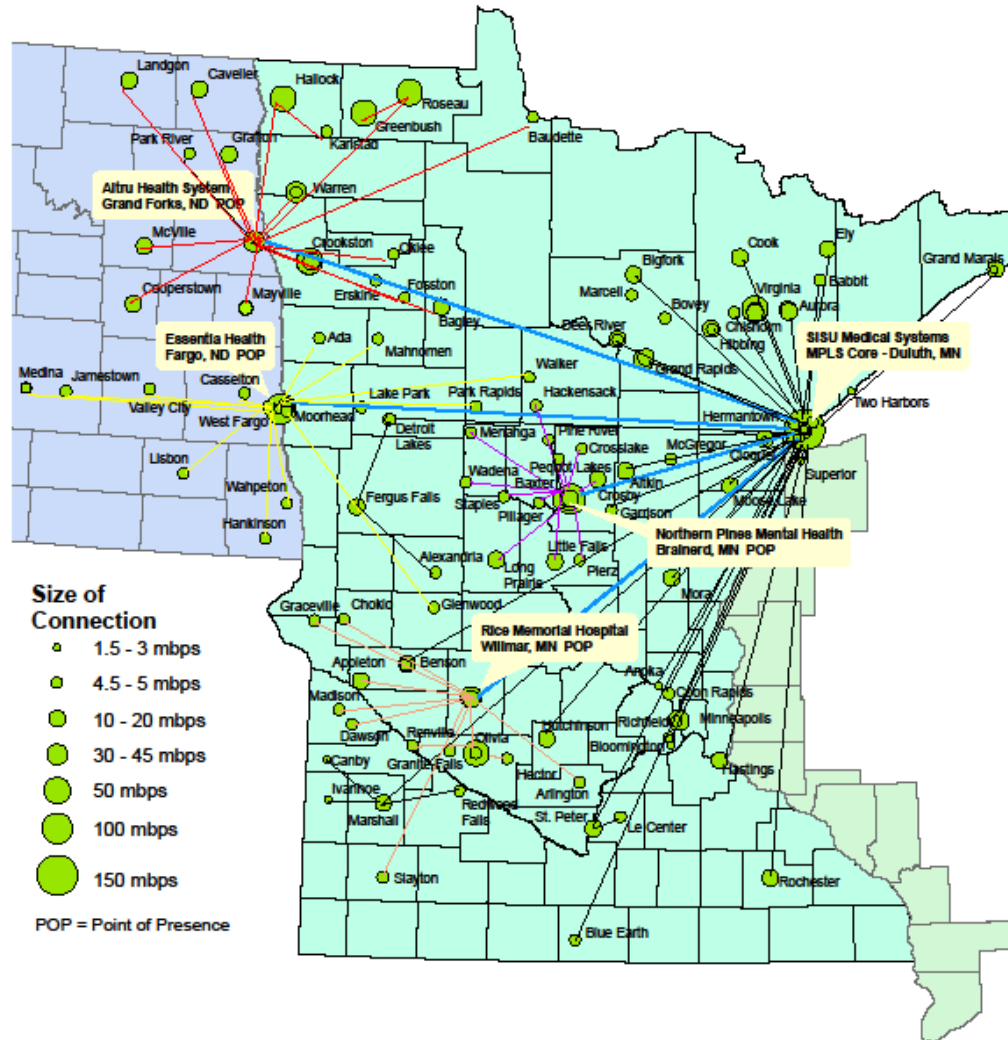
- Telehealth provides improved access to care for rural patients
- Supports rural provider recruitment and retention
- Facilitates health information exchange
- Keeps patients and revenues in rural communities
- Supports new business relationships
- Expert assistance in communicating and negotiating with telecom carriers
- Expert assistance in using the USAC program

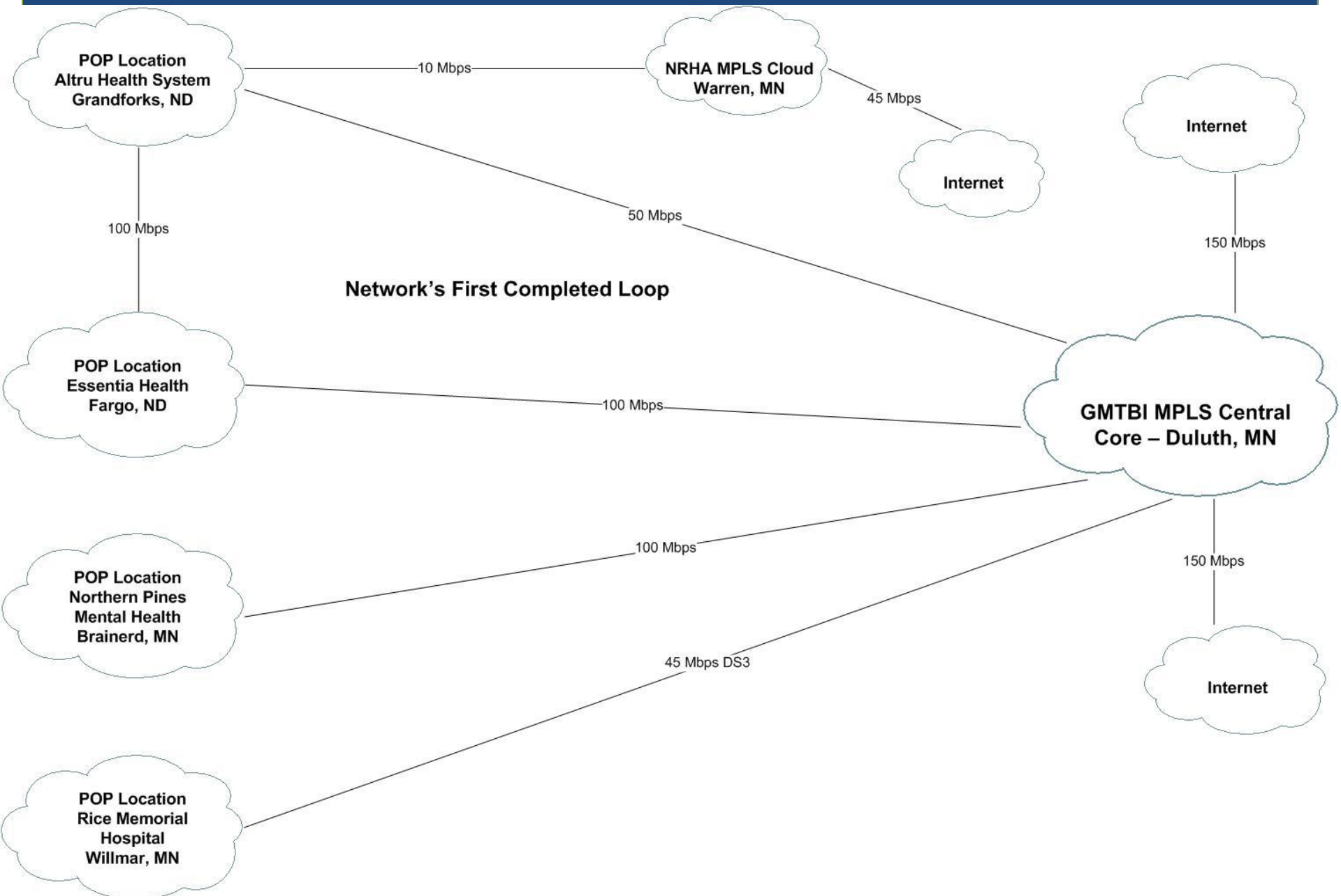
GMTBI network project to date



- Centrally managed broadband hub: SISU Medical Systems
- Points of Presence (POPs) in strategic regional locations: currently Duluth, Brainerd, Willmar, Grand Forks, and Fargo
- 144 participating health care provider sites (hospitals, clinics and mental health centers)
- Steering committee for all project decisions

Greater MN Telehealth/e-Health Broadband Network (MPLS "Cloud") March 2011





Network's First Completed Loop

Beyond the pilot project: what's next?



- “Minnesota Health Network”?
- Formally incorporated membership organization with representative governance
- Broad statewide advisory board
- Tiered membership pricing for managed network services based upon size of facilities and businesses
- Growth of network to include additional health care providers, such as public health agencies, home health, community clinics, long term care, prisons, etc.
- All health care providers are connected

FCC Proposed Changes to “Rural Health Care Support Mechanism” (USAC)



- NPRM July 15, 2010. Awaiting final rule.
- Extending features of Pilot Program to provide permanent support for rural health care broadband networks
- Continuation of 85% subsidy for network infrastructure building
- Large urban site participation
- 50% support for Internet service

How can you participate?



- Become involved in development of Minnesota's new network through advisory committee participation
- Stay tuned for the FCC final ruling (ORHPC newsletters and web site)
- Consider joining the expanded network

Questions? Contact:



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