



## OHN requests RHCPP deadline extension

### Continuation of pilot program past June 30 would boost participation

*Contributed by Courtney Freitag*

With the Rural Health Care Pilot Program slated to end on June 30, 2011, Oregon Health Network has submitted a formal request to the Federal Communications Commission to extend the deadline.

To guarantee inclusion of your site by the current RHCPP deadline of June 30, 2011, the OHN RFP deadline was set for December 17, 2010. However, OHN has formally requested a six-month extension

to the June 30, 2011 deadline, which if approved, would allow more time for sites to participate in the program. An additional \$46.2 million for deployment was also formally requested.

“Until that request is approved or denied,” said OHN Executive Director Kim Lamb, “OHN is working under the initial June 30, 2011 deadline and timeline.”

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*The Progress Report is a publication of the Oregon Health Network and is published bi-monthly. If you have a story idea, please send them to [cfreitag@oregonhealthnet.org](mailto:cfreitag@oregonhealthnet.org).*

*Our vision is clear. Everyone should have access to the best possible care, regardless of where they live in the state.*

## UC Davis Develops Telemedicine Education Courses

### OHN staff take part in a 2-day workshop on telehealth technology, operations

*Contributed by Courtney Freitag*

The Center for Health and Technology at the University of California, Davis has developed an internationally acclaimed, hands-on classroom-based telemedicine and eHealth training curriculum, and has trained over 1,600 community-based health providers and administrators. Last November, Peter Trnavskis, OHN’s IT project manager, traveled to the California campus to attend a 2-day training and workshop.

Subjects included telemedicine effectiveness; technological infrastructure needed to support telemedicine applications; identifying challenges; revenue opportunities and cost-sharing strategies; defining telemedicine from a legal and policy perspective; and much more.

“I found this course to be incredibly valuable,” Trnavskis said. “The presenters were all among the top in their perspective fields and the class was structured in a way that provided an in-depth look into all of the aspects of implementing a Telehealth program.”

Day one focused on the social, clinical, business and legal issues that surround the use of Telemedicine. As a project manager, Trnavskis said broad background knowledge is essential to understanding the full scope of an issue along with

great insight into some of the challenges OHN members may face when implementing a program of their own.

UC Davis has been a pioneer in the telemedicine field with a very mature program. Learning from their experience, and pitfalls, was a valuable lesson.

“It was interesting to see how they have overcome some of the many real world issues that crop up when implementing a telehealth program as well as the cost savings measures they have implemented to make this type of program affordable to almost anyone,” Trnavskis said.

Many of the clinics that UCD provides telemedical consults to are small and rural and results are immediately apparent, allowing patients and general practitioners to consult a UCD specialist without the 5+ hour commute. The facility has also successfully used these video consults in emergency situations where the knowledge of a specialist is critical to achieving a positive patient outcome. In many cases this has saved lives.

Day two of the seminar had break-out sessions discussing in-depth technical systems with a thorough focus on logical design, implementation, installation, system and equipment

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# Fire destroys OHN provider site on the north coast

Mental health clinic in Astoria reconnected at temporary location with help from community

*Contributed by Courtney Freitag, OHN Marketing Coordinator*

Employees of the Clatsop Behavioral Healthcare clinic in Astoria are slowly picking up the pieces and trying to get back to serving patients after a devastating fire destroyed the entire office building on December 16. The clinic is part of Greater Oregon Behavioral Health, an OHN provider site. The group is currently working with members of the community to identify a new permanent location, however their broadband connection was reconnected at a temporary site by their telecom vendor, Charter Communications.

“With pulling some quick calls to our internal staff, everyone from our local techs, our construction coordinator, project manager, and provisioning engineers that were still supporting the rest of Charter in Oregon all jumped in and made this service happen,” said Keith Grunberg, major accounts executive of Charter.

Charter’s quick action is only one demonstration of the tight-knit community as businesses large and small jump in to help.

**“Columbia Memorial Hospital and many other residents wanted to provide as much assistance as possible.”**  
 —Erik Thorsen, CEO of Columbia Memorial Hospital

“Columbia Memorial Hospital (CMH) was deeply saddened by the fire that struck our close knit community on December 16,” said Erik Thorsen, CMH chief executive officer. “CMH and many other residents of the community wanted to provide as much assistance as possible.”

Thorsen realized what an integral part of the community Clatsop Behavioral Healthcare was to the area and worked hard to find a temporary

location. CMH and a local physician, Dr. Sonny Park, were able to offer enough office space for the mental health clinic to begin the enormous task of rebuilding

their headquarters.

The mental health clinic was on the first floor of the building and one of 27 businesses burned along the Astoria Waterfront at No. 10 Sixth Street. Estimates of damage are exceeding \$5 million. Community business and development

leaders are working to rally the north coast residents. A website has been established to advertise available space, post-fire resources, discussion forums, office equipment, and other shared resources for those businesses needing a new location. The website is: [astoriafire.wordpress.com](http://astoriafire.wordpress.com).

For questions or to schedule appointments at Clatsop Behavioral Health, please call 503-325-6103.



**Firefighters assess the damage at No. 10 Sixth Street in Astoria after a fire destroyed the building December 16. Clatsop Behavioral Health, an OHN provider site, was one of 27 businesses lost along the waterfront.**  
 (Photo courtesy of Coast River Business Journal).

**UC Davis, continued from page 1**

purchasing decisions, configuring a variety of end-points and much more.

Another break-out session focused on Clinical Operations, examining a systematic approach to guidelines and clinic development. Several objectives included implementation issues, working with patients and physicians, capacity planning, operational differences between in-patient, out-patient and emergent telemedicine services.

The University of California, Davis, Health System is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. For more information on upcoming educational opportunities, visit <http://www.ucdmc.ucdavis.edu/cht/services/education>.

“One of the greatest aspects of the UCD program is that most of these

video consults have been realized with bandwidth challenged sites, many of which have only a single T-1 connection,” Trnavskis said. “I certainly enjoyed learning from everyone down there and I’m excited to apply some of my new knowledge and experience to help our members achieve the same positive outcomes that UCD has seen using Telemedicine.”

*Each issue, we feature an OHN participant and how their OHN connection is helping make a difference in the communities they serve.*

# First tribal clinic joins OHN as provider site

## Siletz Community Health Clinic serves 11 counties in Oregon

*By Courtney Freitag, OHN Marketing Coordinator*

Remote locations, limited finances and lack of staff resources often leave tribal clinics yearning for a better way to treat patients and give access to quality care. For the Siletz Indian People, that access is closer to reality.

The Siletz Community Health Clinic is the first tribal clinic to join the Oregon Health Network, making a large difference in the quality and access to care they can provide to the 11 counties they serve. The clinic, part of the Confederated Tribe of Siletz Indians (CTSI), encourages other tribal clinics to take advantage of the financial opportunity the Rural Health Care Pilot Program (RHCPP) provides.

“Tribes have been hoping for more help from IHS so that tribal populations can have greater access to care, but IHS, state and local budgets face financial limitations,” says CTSI Health Director Judy Muschamp. “We would encourage other tribes to take advantage of this

opportunity to get funding for the broadband infrastructure and the 85 percent support funding for up to five years.”

CTSI is a self-governance tribe with approximately 4,770 enrolled tribal members. One of the programs that CTSI funds and manages is the Siletz Tribal Health Care Program—the delivery of comprehensive health care to the Siletz Indian People and their dependants within their 11-county service area in western Oregon. Services are provided through a combination of direct care, contracts and referral to appropriate agencies. Patients are offered health and wellness, dental, laboratory, radiology, alcohol and drug treatment, mental health, optometry and more.

With limited bandwidth, real-time digital sharing or reaching specialists to transmit records was nearly impossible—but critical.

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The Confederated Tribes of Siletz Indians (CTSI) is a self-governance tribe with nearly 4,800 members.

The Siletz Tribal Health Care Program is funded and managed by CTSI. The clinic delivers comprehensive care to the Siletz Indian People and their dependents.

The clinic opened in 1991 and demand for services required expansion in 1994.

In 2010, CTSI opened a state-of-the-art 46,000-square foot environmentally friendly facility with increased technology, larger waiting and exam areas, lab and dental services and the ability to serve many more patients.

The clinic also serves other Indian Health Services (IHS) eligible Native Americans and Alaska Natives.

**Siletz Community Health Clinic opened the doors of its new clinic in mid-2010. The provider site is the first tribal clinic to join the Oregon Health Network.**



**Siletz Community Health Clinic**, *continued from page 3*

“Providers need access to up-to-date information so they can give their patients the best of health care and discuss all options,” Muschamp says. “We hope that the increased speed of internet access will save many valuable minutes and provide additional educational opportunities for our patients.”

The clinic provides comprehensive family practice and outpatient medical services to federally recognized Native Americans and other eligible clients. They see patients for diagnosis, treatment, child care, immunizations, family planning (birth control), minor surgical procedures and preventative care.

“We are excited about our providers finally gaining on-line secure access to their patients’ diagnostic images and reports via the Samaritan Health Services group and hopefully other inpatient and outpatient organizations,” Muschamp added. “And we hope to be able to supply needed medical information directly to the specialist or facility when we refer a patient for care.”

The clinic currently sends medical x-ray images out for “virtual radiology” and dental services access an IHS

**Providers need access to up-to-date information so they can give their patients the best of health care and discuss all options.**

—Judy Muschamp, Health Director of the Siletz Community Health Clinic

orthodontia modeling site. WebEx is used for conferences and training. However, having high-speed, reliable broadband access, especially peer-to-peer access to other medical facilities, is a great beginning.

“It would be helpful if OHN members could share experience to help us all save time and learn how to share patient information securely,” says Sunshine Keck, Siletz Community Health Clinic site manager and information technology technician.

Keeping patients in the community, using their increased bandwidth to provide the best possible care to their patients, and making connections with larger hospitals will help Siletz Community Health Clinic use the latest technology with OHN’s help.

“We appreciate the persistence and expertise that OHN staff have shown in helping us apply for the broadband access grant, the bidding process, and overcoming communication issues with the vendor,” Muschamp said. “In addition, the training from concept to invoice payment details has been thorough and supportive.”

## OHN in 2010: A year of growth, changes and acknowledgement

By OHN Staff

Oregon Health Network had a healthy 2010 and has put in place several goals for the upcoming year. With many Rural Health Care Pilot Programs (RHCPP) being unsuccessful around the nation, OHN stands out as a top leader in administering the program with an anticipated 166 sites to be on our network as a result of the RHCPP subsidy. Of those, nearly 95 percent are fiber connections, 2 percent copper (metro Ethernet) and nearly 5 percent wireless.

“2010 marked the space in time when we officially transitioned from being a theory to being our state’s first state-wide telehealth network,” said OHN Executive Director Kim Lamb.

Identified by the Universal Services Administrative Commission (USAC) as perhaps the top leader of the RHCPP, OHN was asked to speak as a

best practices leader at their national conference in Salt Lake City. USAC compliments OHN’s marketing and outreach approach, ability to bring on as many participants as we have, obtaining matching funds, development of internal processes and systems, and a scalable business model.

Many things have contributed to this success.

From the beginning, OHN has benefitted greatly from having core support across multiple industries, including health care, telecommunications, economic and workforce development, and much more. It’s these collaborations that have led to increased partnership and sharing of ideas and information. In response to the FCC’s National Broadband Plan, OHN teamed up with the Telehealth Alliance of Oregon (TAO) to submit comments to

the FCC on their Notice of Proposed Rule Making (NPRM) for the broadband plan, earning OHN a reputation as a trusted thought and program leader.

To streamline processes, OHN staff implemented a new board governance advisory structure, moving from the initial six advisory committees to the current three. Overseen by the new board advisory Planning Committee, the newly formed Stakeholder Council helps OHN garner the insight, ideas, and expertise from thought leaders around the state in various fields to identify the needs and future uses of the network. As of January 3, only \$112 million of the original \$417 million FCC RHCPP funds had been committed. Therefore, in December, OHN submitted a formal request for a 6-month extension to amend the original June 11, 2011

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deadline, as well as \$46.2 million for additional RHCPP deployment dollars. The proposed increased funding would allow OHN to bring on additional eligible provider sites onto the network, continue monthly recurring cost support through 2019 and provide the opportunity to expand bandwidth for participating providers.

To better serve our provider sites, OHN teamed up with our outsourced information technology experts, Cogent IT, to develop and launch our web-based portal system. A Microsoft Sharepoint portal solution, this portal system allows provider sites to log on to their own web-based portal page to review documentation, review and process invoices, obtain Network Operations Center (NOC) reports, collect information to assist with an audit, track their progress in the RHCPP process, and much more.

With a focus on customer service, OHN also developed an educational webinar orientation series for current and future participants and vendors, focused on key areas throughout the complex RFP process. From an overview of the network and invoicing, to going live and leveraging the most of the new connection, provider sites (and vendors) are able to join monthly webinars, download a PDF of the presentations or request a one-on-one training for specific issues.

To complement our training webinars, staff developed a comprehensive Welcome User Guide to provide resources and education to our new provider sites. The packet is located on our website at [http://www.oregonhealthnet.org/sites/ohn.osuosl.org/files/ohn\\_welcomeuserguide\\_110107.pdf](http://www.oregonhealthnet.org/sites/ohn.osuosl.org/files/ohn_welcomeuserguide_110107.pdf). There is information on getting ready for your install, to using the site portal, how you can make the most of your new high speed connection, and how to prepare for an FCC audit.

A revamp and expansion of the OHN website was completed in 2010, adding many forms, features, documents, articles and links to industry information. With continued public relations efforts throughout the year, OHN received national and local news coverage of our new provider sites. These news releases along with industry articles are located in our website's News section: <http://www.oregonhealthnet.org/resources/news>

The ever-evolving national and state landscape has brought its challenges and opportunities. Some national opportunities include:

- Obama administration's support of technology, broadband, economic development and health care, and the development of the first nationwide IT and HIT strategy.
- FCC National Broadband Plan with its genuine intent to address health care infrastructure needs and improve upon existing strategies, programs, and processes.

Within the state, Oregon's new business plan and its four "cluster priorities" are well supported by OHN's value and infrastructure; find a link to the actual plan at [www.oregonbusinessplan.org](http://www.oregonbusinessplan.org) as a reference. In line with this effort, there is a growing public and private collaborative culture, improving inter-agency organization collaboration to reduce waste and leverage existing and future resources.

There is also clear and direct state support of OHN, including the governor's office, HITOC, Department of Human Services/ Oregon Health Authority, Oregon Department of Education, Oregon Business Development, Community College and Workforce Development, and more. OHN must continue to build on this support and collaboration to overcome many of challenges that the State faces, particularly surrounding our economic recovery, health care delivery/cost reduction, and education.

With the strongest scalable RHCPP model in the country and an estimated 166 participating provider sites, OHN is poised to enter 2011 strong and well positioned to continue to strengthen its relationship with USAC and the FCC by supporting broadband policy work. Our organization will effectively and efficiently advocate and monitor the effects of OHN's policy recommendations on the FCC Broadband Plan thus to ensure the current and future network is supported.

With or without the 6-month extension, OHN will secure the best participant base and network infrastructure possible. OHN has a goal of securing administrative and operational funding to bring on over 300 sites to the network and gain greater state and federal awareness and involvement. This financial support will allow OHN to be viewed as a core health "utility" that providers cannot be without. Additionally, a goal of securing \$46.2 million in unspent RHCPP dollars would allow urban and rural participants to increase bandwidth and continue receiving monthly recurring costs through the FCC RHCPP through 2019.

The organization is highly respected as problem-solvers, providing unique solutions and has built the relationship throughout the inception of the RHCPP. OHN will continue to draw on its qualified committees and staff and its transparent approach to consistently meet or surpass industry best practices, effectively leveraging all resources possible to ensure every active provider site is using the network. Research is planned to consider new partnerships or organization consolidation models and strategies that support the vision and mission of OHN. Finally, a goal of securing grant funding from the RWJ Foundation (Pioneer Grant) to bring on 25 strategically selected non-profit radiology clinics, physician practices and long-term care facilities. At the heart of it all, OHN stands ready to help simplify the complexity of this ever changing landscape, and to collaborate with all those involved for the benefit of all.

# Understanding rural health care beneficiary audits

## Helpful flier details preparing for an audit and using the portal to store and track documents

Some provider sites become wary of using their new connection to OHN due to confusion on what is allowable use. If you are audited by the Federal Communications Commission (FCC), there are some key points to understand.

First, the primary purpose of audits are to ensure compliance with FCC rules and ensure that RHCPP participants are experiencing the greatest value and benefit from the network that is possible. But as with any federal subsidy, you will be required to prepare for an audit of your new connection.

When selected for an audit, the auditee’s designated contact person will be contacted by a member of the USAC Internal Audit Division. In addition, an announcement letter will be sent detailing the purpose and scope of the audit, identifying the personnel who will be performing the audit, making a request for pertinent data, and stating the date upon which the data is due.

We have created a helpful document that outlines how USAC conducts its audits, using the portal to track and document your OHN paperwork and retaining copies of all payments and invoices. Be sure to use the portal and review the documents carefully. If you believe that there is documentation missing, please contact us so we can work together to insure complete and accurate documentation.

For a full overview of FCC audits regarding the Rural Health Care Pilot Program (RHCPP) can be found on our website: <http://www.oregonhealthnet.org/sites/ohn.osuosl.org/files/Understanding%20Rural%20Health%20Care%20Beneficiary%20Audits%20%282%29.pdf>.

## Oregon Regional Extension Center partners with BridgeFront for online education training

OCHIN has teamed with BridgeFront, a company that provides online education for healthcare, government, business and education. Together, the two organizations will develop a library of more than 50 online courses to address challenges of complying with meaningful use criteria.

Through BridgeFront’s Online Education Center, 3,000 members of OCHIN and O-HITEC will be able to access the free online training on topics such as HIPAA compliance, revenue cycle, customer communications, leadership development and much more.

“The BridgeFront partnership will help us to deliver educational tools and systems that help Oregon primary care providers achieve the federal definition of meaningful

use,” said Clayton Gillett, director of O-HITEC, in a press release. “We’re confident BridgeFront’s expertise in online education development and delivery will complement our mission by offering our membership an immediate and positive value through this relationship.”

The new library of courses will cover key topics such as e-prescribing, evidenced-based best practice and decision support, and a variety of practice management courses. Compliance with these standards makes it possible for individual providers to qualify for up to \$44,000 in Medicare or up to \$64,000 in Medicaid incentive payments from the Center for Medicare and Medicaid Services.

For more information, visit [www.bridgefront.com](http://www.bridgefront.com).

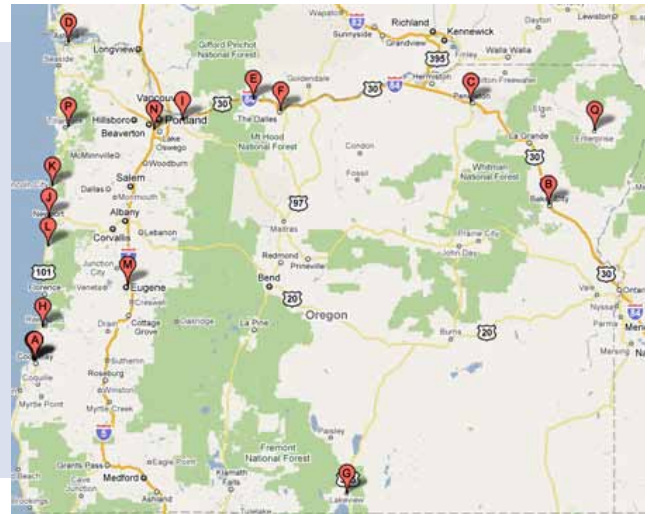
Don't forget to download our helpful Welcome User Guide, full of information to get the most use out of OHN.



## Additional sites live on network

OHN continues to add to its participating site list. There are 96 sites that have received funding commitment and are awaiting turn-up to the Network Operations Center. Of those, 48 are already live on the NOC and being monitored 24/7/365.

The sites around the state represent hospitals, urban and rural clinics, FQHC's and tribal clinics in the RHCPP \$20.2 million subsidy awarded to OHN in 2007.



## UPCOMING Industry Events

If you have an industry or community event to share, please email it to [cfreitag@oregonhealthnet.org](mailto:cfreitag@oregonhealthnet.org). We have an active calendar on our website's home page that is updated regularly with local and national meetings, educational opportunities, trainings and much more.

Visit [www.oregonhealthnet.org](http://www.oregonhealthnet.org) to see what's coming up.

### UC Davis Telemedicine Education Course

**February 9-10, 2011**

Sacramento, California; UC Davis Center for Health and Technology

<http://www.ucdmc.ucdavis.edu/cht/services/education>

### American Telemedicine Association International Meeting & Expo

**May 1-3, 2011**

Tampa Convention Center, Tampa, Florida

<http://www.americantelemed.org>

### American Telemedicine Association (ATA) Mid-year Meeting

**September 18-20, 2011**

Anchorage, Alaska

<http://www.americantelemed.org>

### Meaningful Use of EHR: First Steps to Improved Patient Outcomes

**Webinar ongoing through October 22, 2011**

<https://www.ciscohealthpath.com/web/guest/home>