

This application is being amended to correct the **Estimate of Network's total costs for each year:** (Page 2)

Corrections:

Estimate of network's total cost for each year is \$1,529,000 for Year 1 and \$1,105,800 for year 2.

The budget increase is the result of one rural health provider's request to be included in the program after the narrative of the application had been completed. The itemized Estimated Costs (Budget) is correct as originally submitted to FCC because it included the additional public health provider costs.

Also, support letters for the application are being submitted. Support letters are provided by U.S. Senator Saxby Chambliss, U.S. Senator Johnny Isakson, U.S. Congressman Jack Kingston, Georgia State Senators Greg Goggans and Tommie Williams, and Georgia State Representatives Tommy Smith and Larry (Butch) Parrish.

RURAL HEALTH CARE PILOT PROGRAM APPLICATION

Organization that will be legally and financially responsible for conduct of activities supported by the fund:

The organization that will be legally and financially responsible for conduct of activities supported by the fund is the Bacon County Health Services, Inc., Alma, Georgia.

Goals and Objectives of the proposed network:

The goals of the proposed network are to eliminate health disparities of persons living in rural areas of Southeast Georgia by creating a regional broadband network dedicated to health care that connects public and non-profit health care providers in rural and urban locations; and to develop leadership in the development, coordination and rationalization of health care services.

The objectives of the proposed health care network includes:

- Create a consortia of public and non-profit health care providers located in rural Southeast Georgia that will be connected by broadband network so that they will have improved access to advanced telemedicine, telecommunications and information.

This broadband network will bring innovative telehealth services to residents of this rural region of Georgia.

- Provide critically needed medical specialists such as cardiologists, pediatricians, and radiologists through telehealth network without patients leaving their communities.
- Link this regional network to Peachnet in Savannah, Georgia. Peachnet provides connectivity to nationwide backbones such as Internet2 or National Lambda Rail for connectivity to government research institutions as well an academic, public and private health care institutions that provide valuable resources for medical expertise and knowledge. Peachnet also provides connectivity to the Medical College of Georgia.
- Provide resources for health care providers to continue their education and research in their own community through the use of the network.
- Enhance a rapid and coordinated response by health care providers in the event of a national crisis through this nationwide network.

Residents of Southeast Georgia live in a precarious environment. Plant Hatch, a nuclear energy plant is located in Appling County and within 10 to 50 miles of participants in this application. Residents of this area are especially vulnerable at times of threats to our national security. After the tragic 911 events, Plant Hatch and all emergency management personnel was placed on “high” alert.

Estimate of network’s total costs for each year:

Estimate of network’s total cost for each year is \$1,468,400 for Year 1 and \$1,045,200 for Year 2.

Describe how for-profit network participants will pay their fair share of the network costs:

There are no for-profit network participants included in this rural Georgia network group.

Identify the source of financial support and anticipated revenues that will pay for costs not covered by the fund:

Sources of financial support and anticipated revenues that will pay for costs not covered by the FCC Pilot Program funds include contribution of 15 percent of network cost by consortia participants according to services subscribed to by the health care provider.

List the health care facilities that will be included in the network:

List of health care facilities that will be included in the network are:

Bacon County Health Services, Inc. including

- Family Medical Center
- Rural Health Clinic

Satilla Regional Medical Center, Inc. including

- Satilla Rehabilitation
- Waycross Orthopedics
- Satilla Institutional Pharmacy
- Doctors offices

Coffee Regional Medical Center, Inc. including

- Walk-in Clinic

Wayne Memorial Hospital

Southeast Health District including

- Southeast Health District Office
- Atkinson County Health Department
- Appling County Health Department
- Bacon County Health Department
- Brantley County Health Department
- Bulloch County Health Department
- Candler County Health Department
- Charlton County Health Department
- Clinch County Health Department
- Coffee County Health Department
- Coffee County Wellness Center
- Evans County Health Department
- Jeff Davis County Health Department
- Pierce County Health Department
- Tattnall County Health Department – Glennville Location
- Tattnall County Health Department – Reidsville Location
- Tattnall District Office
- Toombs County Health Department
- Ware Health Clinic
- Ware Wellness Center
- Wayne County Health Department
- Wayne Wellness Center
- Valdosta District Office

Hospitals will be connected to their correspondent urban hospitals by VPN. A VPN will use existing bandwidth across an urban hospital's connection for access by the rural hospital. This is efficient networking because all applications can share the same bandwidth. All hospital communications could take place over one connection.

Provide the address, zip code, Rural Urban Community Area (RUCA) code and phone number for each health care facility participating in the network:

- Bacon County Health Services, Inc., 302 S. Wayne Street, Alma, GA, 31510, RUCA 4, (912) 632-8961
- Satilla Regional Medical Center, Inc., 410 Darling Avenue, Waycross, GA, 31501, RUCA 8, (912) 283-3030
- Coffee Regional Medical Center, Inc., 1101 Ocilla Road, Douglas, GA, 31533, RUCA 7, (912) 384-1900
- Wayne Memorial Hospital, 856 S. First Street, Jesup, GA, 31545, RUCA 4, (912) 427-6811
- Southeast Health District Office, 1101 Church Street, Waycross, GA, 31510, RUCA 10, (912) 287-4890

- Atkinson County Health Department, 818A East Austin Avenue, Pearson, GA, 31642, RUCA 10, (912) 422-3322
- Appling County Health Department, 34 Walnut Street, Baxley, GA, 31515, RUCA 7, (912) 367-4601
- Bacon County Health Department, 101 North Wayne Street, Alma, GA, 31510, RUCA 7, (912) 632-4712
- Brantley County Health Department, 115 Florida Avenue, Nahunta, GA, 31553, RUCA 10, (912) 462-6165
- Bulloch County Health Department, 1 West Altman Street, Statesboro, GA, 30458, RUCA 4, (912) 764-3800
- Candler County Health Department, 428 N. Rountree Street, Metter, GA, 30439, RUCA 7, (912) 685-5765
- Charlton County Health Department, 1209 N. 3rd Street, Folkston, GA, 31537, RUCA 7, (912) 496-2561
- Clinch County Health Department, 405 Sweat Street, Homerville, GA, 31634, RUCA 7, (912) 487-2199
- Coffee County Health Department, 1111 W. Baker Highway, Douglas, GA, 31533, RUCA 5, (912) 389-4450
- Coffee County Wellness Center, 200 Doctors Drive, Suite 222, Douglas, GA, 31533, RUCA 4, (912) 383-6988
- Evans County Health Department, 4 North Newton Street, Claxton, GA, 30417, RUCA 7, (912) 739-2088
- Jeff Davis County Health Department, 30 East Sycamore Street, Hazlehurst, GA, 31539, RUCA 7, (912) 375-2425
- Pierce County Health Department, 715 Ware Street, Blackshear, GA, 31516, RUCA 5, (912) 449-2033
- Tattnall County Health Department – Glennville Location, 1000 N. Downing Musgrove Highway, Glennville, GA, 30427, RUCA 7, (912) 654-5290
- Tattnall County Health Department – Reidsville Location, 200B South Main Street, Reidsville, GA, 30453, RUCA 10, (912) 557-7850
- Tattnall District Office, 200B South Main Street, Reidsville, GA, 30453, RUCA 10, (912) 557-7850
- Toombs County Health Department, 714 NW Broad Street, Lyons, GA, 30436, RUCA 7, (912) 526-8108
- Ware Health Clinic, 604 Riverside Avenue, Waycross, GA, 31501, RUCA 4, (912) 283-1875
- Ware Wellness Center, 709 Knight Avenue, Waycross, GA, 31510, RUCA 4, (912) 287-2711
- Wayne County Health Department, 240 Peachtree Street, Jesup, GA, 31545, RUCA 4, (912) 427-2042
- Wayne Wellness Center, 162 Memorial Drive, Jesup, GA, 31545, RUCA 4, (912) 588-2511
- Valdosta District Office, 312 N. Patterson Street, Valdosta, GA, 31603, RUCA 1, (229) 333-5290

Indicate previous experience in developing and managing telemedicine programs:

Bacon County Health Services, Inc. (BCHS) will be the lead management and fiscal agent for the FCC Rural Health Care Pilot Program. Bacon County is now participating in a limited experimental telemedicine program funded by Blue Cross-Blue Shield (BCBS) Insurance Company. BCHS has no assurance that the equipment provided by BCBS will remain in the clinic for use by Bacon County health care providers. This is an experimental program that has a time limit of one year. However, use of this equipment for about one year has proven to be beneficial to local residents and physicians. As a condition of their BCBS grant, BCHS must prepare and submit monthly reports to BCBS. BCHS is also responsible for promoting use of the equipment and security of the equipment.

During past years, BCHS has received federal and state funds that have specified usage. BCHS has never failed to comply with terms and conditions of the funding sources. Likewise, the other participating network health care providers have experience in implementing and managing various programs that require accountability for use of funds.

An important link in the telehealth network is the Medical College of Georgia Center for Telehealth (MCG). Ongoing collaboration between MCG and the Georgia Rural Health Network (GRHN) insure that GRHN will have the benefit of expertise offered by MCG in telehealth. Consultation between MCG and GRHN can include clinical services as well as patient data management and health care finance administration.

Provide a project management plan outlining the project's leadership and management structure, as well as its work plan, schedule and budget:

An informal consortia known as Georgia Rural Health Network (GRHN) comprised of representatives of all participating non-profit hospitals, rural public health providers, and the Southeast District Health Office will form the nucleus of the network. These health care professionals realize the need for a "binding together" to form a strong networking organization if these community, safe-net non-profit hospitals and other public health care providers are to provide quality health care services that are needed by the 411,966 persons in the network area.

Bacon County Health Services, Inc. will be the applicant and fiscal agent for this Pilot Program. Bacon County Health Services will comply with all regulations pertaining to fiscal management of the FCC Rural Health Care Pilot Program. Each health care provider has an Information Technology (IT) specialist who has participated in the planning of this project that will connect these health care providers to regional, state and national dedicated health network.

Each health care provider will determine the specific network element that will address the particular health issues where telehealth and/or telemedicine will enhance health services. Budgets for each health care entity reflect these individual issues. Each networking participant will pay its itemized cost according to services provided.

Participants from each health care provider will work together to develop, investigate and implement telecommunication and information technologies that will:

- Enhance access to health care in underserved rural and urban areas
- Facilitate research and analysis of telehealth applications
- Facilitate health-related educational services and applications
- Support efforts aimed at disaster preparedness and the availability of disaster-related services

As soon as this application is approved, network participants will develop specifications that outline needs of each health care provider.

ATC Broadband, LLC is located in Alma, Georgia and currently has fiber transmission facilities in most participant locales. For network connectivity outside the ATC service area, other broadband service providers will be asked to join the network. ATC will design networks to meet each participant's health needs. In order to use the local, rural broadband company, a waiver of competitive bidding is requested. This waiver to allow ATC Broadband, LLC to be the provider of the network will greatly reduce construction cost of fiber network and allow for a rapid implementation of network services.

As part of this network, all participants would be connected to ATC's COLO room. This COLO has emergency power and UPS. Some of the participants have their backup equipment located at the ATC site.

The budget shown as Georgia Rural Health Network Estimated Costs is provided on each participating health care provider. This budget is shown on Attachment A.

Indicate how the telemedicine program will be coordinated throughout the state or region:

Participating health care providers will have networking connectivity with each other, their corresponding urban medical facilities such as Savannah Memorial and Jacksonville Baptist, Peachnet and Internet2 or National Lambda Rail.

ATC Broadband, LLC is corresponding with the Medical College of Georgia, Center for Telehealth to research opportunities to link these Southeast Georgia health care providers to the Center for Telehealth. The opportunities for improved health services for rural residents of Southeast Georgia are unlimited with this connectivity to the Center for Telehealth.

Telemedicine at the Center for Telehealth supports numerous clinical functions, including both initial and follow up consultations, established specialty clinics, and emergency consultations. The majority of requested medical specialties are pediatrics, psychiatry, pulmonology, hematology/oncology, family medicine, dermatology, infectious diseases and neurology. The majority of non-physician consultations are occupational therapy, speech pathology, pediatric nutrition, and physical therapy. Because of teleconsultation, more than 98% of telemedicine patients are able to remain in their local communities while receiving necessary specialty care previously only accessible via patient transportation to the specialist.

The Medical College of Georgia Department of Pediatrics and the Telemedicine Center contracted with the Children's Medical Services (CMS) Program of the Georgia Department of Human Resources to provide a pilot clinical service for children with special health care needs through specified sites using the Georgia Statewide Telemedicine Program (GSTP). The CMS Program employed specially trained registered nurses to work with local primary physicians and health care providers. In this project, the CMS nurses were trained in the procedures and protocols of the GSTP. They functioned as the attending health care professionals at the remote CMS telemedicine sites and presented patients to specialist consultants at a tertiary telemedicine site. This allowed the children to remain in the care of local primary care providers in their communities, enhancing continuity of care.

The Medical College of Georgia (MCG), the Georgia Institute of Technology (GIT) and the Eisenhower Army Medical Center (EAMC) collaborated to develop and evaluate a proof-of-concept system capable of delivering medical care to patients in their residences. The goal is to improve the management of chronic medical conditions through the application of low cost telemonitoring and telesurveillance in combination with a reduced need for on-site care. This integration of telecommunication and human resources should promote wellness and medical stability. In turn, a reduced utilization of high cost in-hospital and emergency resources would be anticipated.

The Medical College of Georgia Telemedicine Center contracted with the Biomedical Interactive Technology Center at the Georgia Institute of Technology to create a data management software program for the GSTP. The Patient Data Management System (PDMS) simplifies and organizes the collection of all consult-related information, tracking administrative details, such as the time of the consult, the patient and providers' names and the names of the sites involved. Patient images

and heart and lung sounds associated with telemedicine consultations can be captured and added to the patient's electronic record.

These are just a few examples of the benefits to be derived by a telemedicine program that can be coordinated through the region and state.

Indicate to what extent the network can be self-sustaining once established:

A start-up budget has been prepared that incorporates the needs of each participating health care provider. The budget is separated into costs for “Monthly Recurring” and “Non-recurring” items.

The monthly recurring networking expenses are not sufficient increases to the participating health care providers’ annual budget. After a two-year experience with the telemedicine that supports numerous clinical functions and patient data, it is anticipated that the benefits of the network will certainly justify the monthly recurring expense.

The 15 percent non-federal cost of the network is a very small cost for each participant and can be included in annual operating budgets. In some situations, this new network will cost participants less than the limited internet services that they current use. For example, a point to point local T-1 (1.54)mbs costs \$250, at T-1 from Waycross to Alma would cost \$600. A gigabit connection is 1000mbs, which is to be priced at \$1,500 for 2. The value of this service is such that it will be self-sustaining.

The major health issues for rural Georgia residents are heart disease, hypertension, strokes, diabetes, cancer and childhood obesity. Modern medical technology and rapid response to life-threatening situations for persons suffering from these health conditions can be the difference between life or death. Rural health care providers must be willing to develop, investigate and implement telecommunication and information technologies that will:

- Enhance access to health care in underserved rural and urban areas
- Facilitate research and analysis of telehealth applications
- Facilitate health-related educational services and applications
- Support efforts aimed at disaster preparedness and the availability of disaster-related services