

Broadband USA Applications Database

Applicant Name: Georgia Partnership for Telehealth, Inc.

Project Title: Georgia Partnership for Telehealth, SBP

Project Type: Sustainable Adoption

Executive Summary

Need:

The largest state east of the Mississippi River, Georgia is a land of great geographic diversity. Its rural communities are spread across five major geographic regions: the Blue Ridge Mountains in the northeast, the Ridge and Valley Province and the Cumberland Plateau in the northwest, the Piedmont across Georgia's center, and the Coastal Plain in the south.

In Georgia's rural counties, the story of rural health has been one of high rates of death and disease, along with persistent poverty, low literacy, and inadequate health care services. Rural Georgians are older, poorer, and sicker than their urban counterparts, which makes rural health critically important to the state's overall health. Rural communities bear a greater burden of cardiovascular disease, cancer, diabetes, obesity, and mental health issues than their urban counterparts.

Georgia also has higher rates of uninsured and fewer physicians per 100,000 residents. These pressing needs, compounded by an ever shrinking pool of financial resources, pose formidable challenges for rural health planning. Establishing and improving broadband service adoption to provide access to healthcare is essential.

Approach:

Given the rurality and remoteness of these counties, we have the following approaches for enhancing and expanding the delivery of care in rural hospitals using broadband:

- Equip partnering healthcare facilities with the capability of using broadband for telehealth consultations
- Promote awareness of care of chronic conditions through education and prevention programs, and conducting disease prevention activities to decrease the incidence of chronic illnesses;

- Equip partnering healthcare facilities with the capability of using broadband for telehealth consultations therefore will
- Deliver optimal care for the patients in rural communities by preventing unnecessary travel and related costs by the use of real-time broadband telemedicine consults provided at rural hospitals and clinics;
- Provide rural clinicians with distance education tools to do access CME and clinical grand-rounds, and meet State and Federal mandated educational requirements through the use of the technology infrastructure;
- Improve communication and coordination between providers of specialty care and related agencies and serve in an advisory board to the community health providers, the State Department of Health, and the Rural Health Commission;
- Build a robust model of evaluative measures for the program that includes industry-standard outcome measures, timely and accurate data collection and analysis, and the eventual reporting of these measures to gauge the success of the program and to identify the weaknesses.

Areas to be Served:

The consortium of Georgia Partnership for Telehealth (GPT) and partnering healthcare facilities proposes establishment of a BTOP SBA program to add rural clinics and hospitals to the existing GPT Telemedicine Network that will extend health care in underserved rural areas of the State. Among the counties, most are designated Primary Care Health Professional Shortage Areas (HPSA), Mental Care HPSAs, and Medically Underserved Areas/Medically Underserved Populations. It is anticipated that the network of 35 partners will provide access to healthcare to a targeted area of over 400,000 rural citizens.

Qualifications and Experience:

The statewide Georgia Telemedicine Program began in 2005 through a generous grant from WellPoint, Inc. Negotiations with Commissioner Oxendine for Anthem and WellPoint Merger resulted in the Commissioner Oxendine's Rural Health Initiative and \$11.5 Million over 3 years for a Statewide Telemedicine Program. The Georgia Partnership for Telehealth, Inc. (<http://www.gatelehealth.org/>) was formed in 2007 to continue the successes of the telemedicine program after Wellpoint's 3 year commitment.

The Georgia Telemedicine Program was built based on advances in the continually evolving telecommunications and computer industries, and on successes and lessons learned from other Telemedicine programs. The hallmark of Georgia Telemedicine is the Open Access Network, which is a

web of statewide access points based on strategic partnerships with successful existing Telemedicine programs, and the creation of new Telemedicine locations, to maximize opportunities for timely healthcare services. The Telemedicine program implemented the Internal Program Collaboration Website to centralize scheduling of consultations. By tracking open appointment times for panel physicians anywhere in the state, physician consults via Telemedicine can now be requested 24 hours a day, and scheduled statewide in a matter of days or even hours, instead of weeks or months.

We have seen expansion to include 105 sites. We have seen clinical utilization climb exponentially. While January, 2006 we had a mere 8 encounters, we had 9,973 encounters for 2008 and anticipate over 15,000 encounters for 2009. We now have over 85 specialists, representing over 45 specialties, participating in the network. Providing access to specialties via telemedicine has proven to cut costs on travel, work time and provides earlier access to care therefore preventing the large costs of untreated healthcare problems.

The private Georgia Partnership for Telehealth (GPT) network - designed in 2005 built using dedicated T-1 lines leased from regulated telecommunications carriers in the state of Georgia - has been very reliable, provides a quality bandwidth and creates a highly secure private internet. For access to the internet, there is a single highly protected broadband access point at the hub location in Thomasville.

The overall cost of the project is \$1,749,638. Our request to BTOP is for \$1,399,711.