Applicant Name: ARNETT DEVELOPMENT GROUP LLC
Project Title: HEALTH & WEALTH CARE INITIATIVE for Vermont and New Hampshire
Project Type: Sustainable Broadband Adoption

Executive Summary

a. Telehealth can improve health outcomes, save healthcare costs, and increase Patient Reported Outcomes (PRO). However, many elderly are not comfortable with technology, especially internet communications. With hand and eye impairments, elderly are less able to utilize standard PC keyboards and screens. Older IT workers - trained in legacy systems - do not have training in current IT practices (4G, cloud-based services, etc) used by telehealth and internet IT users. If trained, they can be hired by healthcare tech system providers. b. Approach and Innovations: The Health & Wealth Care Initiative will provide a comprehensive range of services to these two groups - elderly and older job-seekers - utilizing both high-tech and "high-touch" services. Once healthcare improvements and cost-savings are demonstrated, the users and their families, their healthcare providers and their insurers will ensure sustainability. Services are being delivered in a three-tier system of priorities, based upon needs. This allows for a small, core group (200) to receive an extensive package of eight services, and larger group (800) to receive six services, and a much larger group (5,000+) to receive two services. The 50 Job-seekers will all receive a full-featured, customized package, much of it delivered via broadband. Because of the bulk acquisition of iPad (or similar) equipment, the standardization of software and service, and web-based training, there are several points where grant-funded equipment and services can be sold to these selected users for 15% to 90% of their cost to the Initiative, to raise private cash match. Also, the training materials will be underwritten by healthcare and computer product sponsors. Healthcare cost savings, patient reported outcomes, and health outcomes will all be measured, analyzed and evaluated as part of the Health & Wealth Care Initiative by the Dartmouth Institute. The Institute is a nationally recognized healthcare innovator and system research center. Its data has often been used as the basis for healthcare reform as proposed by the Obama Administration. The Health & Wealth Care Initiative will "piggy-back" on the tri-state Dartmouth-Hitchcock Medical Center [DHMC] and its 2010 roll-out of a system-wide Electronic Medical Records (EMR) service:'MyChart'. This will help identify elderly from the poorest Census Tracts in Vermont and New Hampshire. With over 500,000 clients/patients in its system, the Initiative will be able to identify more than the 5,000 targeted beneficiaries, while allowing these "high-touch" services to be delivered for an average of $500 per elderly patient served; great "bang-for-the-buck". c. This Initiative was a 1st Round application. It made it into-through the Due Diligence stage, but was rejected because of its high cost-per-beneficiary, then to $4,500 per beneficiary. This redesign drops that to $500 per beneficiary, by utilizing the DHMC efforts. d. The introduction of the iPad and competing tablet internet devices can be of great assistance to elderly telehealth users. The flexible screen formats will allow for oversized keyboards or "swipe" movements. The screens can be magnified for sight impaired, as well as voice-over for the hearing impaired. These devices are much less
intimidating, and less expensive to buy or maintain than laptops or net books. Standardized, very-simple software designed by DHMC and its IT vendor, a strong customer-service support system, and a novel "Tech Mentor" system will ensure high and sustainable use. e. Older IT workers need new training to move from legacy training to internet-4g technologies. Healthcare providers are increasingly looking for new-tech IT workers. The state's Community College - New Hampshire Tech Institute or NHTI - provides certificate and degree transition services for this 50-65 year old worker. The Initiative will link the job-seekers, telehealth employers, and the tech trainers. It will utilize economic development, Chamber and government resources from both states to recruit post-50 IT job-seekers, and tech employers, allowing a leveraging of existing job-training funds and efforts. To accommodate this older worker - that needs peer discussion and cross-learning - the Initiative includes a series of Peer Group meetings. f. DHMC's main Center is located in Lebanon, NH which is on the Vermont-NH border. DHMC has clinics and hospitals throughout both states, including in the portions of both states where household income - especially for elderly - is low. Between the two states there are 2+ million people. DHMC's two-state client/patient base is well over 10% of that population, across both states. g. The applicant is a certified small business that has extensive experience in Project Management, including technology and economic development (Arnett Development Group LLC). The Group's owner and Project Implementer (Stuart Arnett) was the founding Chair of NH's Telecom Initiative and the state Economic Development Director for 3 Governors, including state and federal grant management and grant issuance duties. The Group consists of seven core subject-matters experts, including two that formerly managed statewide public IT systems. h. The NHTI is the state's Community College, and is successfully retraining displaced workers. It has a special affinity for the older (50+) IT worker that is legacy-trained. They have both existing certificate and degree programs available, but not funded by existing workforce-unemployment programs. i. The Dartmouth-Hitchcock system will be the primary subcontractor or sub recipient. DHMC administers millions of federal grants annually, and provides training and education system-wide in highly regulated areas like HIPPA, and in life-saving skills. Their IT and client base will ensure that the target populations - elderly and job-seekers from poorer census tracts - are identified in a confidential manner. It is a national leader in Telehealth innovations, and it's affiliated Institute is a national leader in health measurement and evaluation. j. The Initiative will utilize the existing data networks of its contractors and the states(2) to identify possible Aggregation Areas. The Initiative reserves funds to identify these areas, bundle the demand, and be the expert interface with the ISP industry.