High-Speed Telemedicine Network Gaining Steam in California

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SACRAMENTO, Calif. — Rural health-care providers will soon have their own broadband network for the practice of telemedicine in California, according to Christine Martin, executive director of the California Telemedicine & eHealth Center (CTEC).

Martin gave an update on the status of telehealth in California on Tuesday, May 10, at Government Technology Conference West 2011, an annual gathering of state IT officials and employees. The conference is hosted by e.Republic Inc., *Government Technology* magazine's parent company.

Martin revealed that 300 rural sites will be on a secure, high-speed medical grade network by the end of 2011, as part of the California Telehealth Network's Rural Health Care Pilot Program. Potentially more than 850 rural sites will be able to use the network. Telehealth and telemedicine are terms used interchangeably to refer to clinical care provided to a patient from a distance, using live video conferencing or digital imagery.

CTEC is working with the California Telehealth Network to develop a statewide broadband system with speeds up to 45 Mbps for improving health-care access and emergency services. The network would be on a private medical cloud, allowing data to be transmitted securely.

"Connectivity has been a huge issue around telehealth because you have to have substantial broadband to be able to do video conferencing at the quality you need to do a medical examination," said Martin. "It's one thing to do video conference on a laptop and the audio isn't synchronized. But if you are trying to diagnose something, you need a picture at a quality where a clinician [is] comfortable making a diagnosis."

The network is being funded by approximately \$39 million in grants from the FCC, the California Emerging Technology Fund, the California Public Utilities Commission, and the federal government's Broadband Technology Opportunities Program.

An additional \$5 million in matching funds is also being provided by the National Coalition for Health Integration, United HealthCare, California HealthCare Foundation and University of California, bringing the total to \$44 million, according to the network's website.

Sites that apply to be a part of the network and meet FCC eligibility requirements will receive the service at a reduced monthly cost and will incur no installation charges through July 2016.

Martin touted the benefits of home video monitoring of patients, another aspect of telehealth. CTEC's executive director said the use of home monitoring is expected to blossom within the next five years, which will help reduce significantly the number of emergency room visits.

Joining Martin in the session was Dr. Linette T. Scott, deputy director of health information and strategic planning for the California Department of Public Health. Scott is also the interim deputy secretary for health IT at the California Health and Human Services Agency. Scott briefed attendees on the history of health IT development in California, calling the state "at the point of readiness and very involved."

Scott went over the process of how medical providers can be a part of the Centers for Medicare and Medicaid Services Electronic Health Records (EHR) Incentive Program. Under the program, physicians implementing EHRs who can demonstrate meaningful use of the systems can receive reimbursements up to \$65,000 from Medicaid, or as much as \$44,000 from Medicare.

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