

**Bloomington Digital Underground Advisory Committee**  
**June 5, 2008**

**Members in Attendance:**

Mark McMath  
Mike Lucas –IU  
Matt Davy  
Marty Donnelly

**Staff in Attendance:**

Rick Dietz  
Rick Routon

**Agenda**

**Staff Reports**

- **MCCSC**
- Our part is done, just waiting for them to contact JDH – to know what pairs to slice into, and extended our reach to the new tech H.S.

**eHealth Topics**

- **Health link**
- Recently incorporated, the board as met twice. It has grown out of a local collaboration of health providers into formulating an electronic health care community. They are in the process of forming bylaws and all the initial steps of forming a new organization. Another federal grant was awarded as part of a demonstration program of the national information healthcare network. Healthlink is developing a continuity of care record for this region, which will be essentially an executive summary of your medical records, and can be shared among providers.
- **Federal Demonstration Project** – an exchange of information between Cincinnati, Ohio, Indianapolis, Bloomington, and Batesville. Meeting will take place in August.
- **Federal Grant** – provide thru the FCC, at a state wide level. It will work out collaboration with the city, Healthlink, and others on the board. They have hired a project manager. Their intent is to have an infrastructure built out of broadband access to critical access hospitals in 34/35 hospitals across the state. The technology committee is to draft a request for information and request a proposal. This will all be discussed at the Rural Healthcare Association meeting in June. Where the group will set down with CEO's from critical access hospitals and get their input as well get them engaged to help. A vendor forum will also take place in July or August in Indianapolis, to request information from interested telecom providers, and get their input as well. An issue was raised as to what IU's role in all of this will be. It was reported that David Gent and his team had been met with. They have expressed wanting to be advisors to the project instead of direct consultants. The board

felt that even though IU has a great deal of capability, because there is a gray zone of potentially being a provider, as well a public university with a great deal of technical knowledge that being advisors would be fine. The board worked with David, RHA, to get that set up, along with the president of ITA. They are also looking to engage a consultant to assist with the technology communication. Question: Is that plan to start around healthcare or just a matter of the info-structure that will be spread out? Answer: Geared on the grant application, to start with healthcare but then be engineered and architecture in such a way with both in mind.

- **E-Health Area** – Grant FCC.
- **Dr. Sullivan** has been more involved with the federal office national coordinator, putting the national info-structure in place. He is also working with health-bridge the Cincinnati, OH exchange, Health-link in Bloomington, and Indianapolis exchange to develop these summary records relative to the developing federal standards. Then also setting up how this will all be exchanged electronically. They are expecting a proto-type by next week.
- **Dr. Rollins** - He is working the rolling out of clinical messaging in this region. This is technology that allows physicians rather than signing on to look up information, to push tech, more of an inbox, email system for physicians. It gets every physician on some kind of electronic exchange of information.
- **Digital Health Records** – Considering participation! **Question:** As the system moves forward, does Bloomington hospital intend essentially being one of the parties to adopt this for their own staff, as an institution? **Answer:** That is what they have been asking us, to become a participant as a large corporate group in the community, and allow staff members to establish profiles. This has not been discussed much; it's just in the beginning phase.

## **Plan for 2009/2010**

### **General Discussion about direction of the group:**

#### **Observations made:**

- Board has limited bandwidth, focus on a couple of tasks that we could actually affect the outcome or produce a result, then just being at 50,000 feet where everything looks the same.
- Focus on specific items
- What things do we focus on? Fiber assets in the ground.
- What's the future? Reviewing what's there or specifically what isn't there.
- Comments from local providers as the quality of what's there and the inability to access it.
- What are the specific issues from local providers?
- Primary consumers are county, city, and local school corporation.
- Making these things more useful through the telecom hotel.
- If you are going to use fiber, you have to be able to get to someone who can make it useful. If Smithville is the only provider, their interest is providing the whole piece to the premise. If only one provider you'll see limited use of the fiber.

- Interested in proposal for pay channels, that requires providers to come to the telecom hotel. It would give more of a presence there.
- Seek discussions with other providers about video service.
- Collaboration with other groups
- Unmet demand in rural areas for pipes but they don't know how to get it.
- Care, feeding and promoting of collaborations
- Platform that can produce other things, economic development

**Next meeting** falls on July 3<sup>rd</sup>, changed to July 10<sup>th</sup> due to the holiday.

### **Hospital Merger with Clarion**

- It will bring a lot more cooperation on this end of the state
- Better healthcare, more optimal services
- Better balance, better serve the needs of the people
- Still at the discussion phase
- Vote on the 16<sup>th</sup>
- Steps: Letter of intent, 18 month planning phase, create a model
- More efficiency, lower cost, and more purchasing power