

City of Bloomington: Bloomington Digital Underground Advisory Committee

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Summary

Bloomington Digital Underground Advisory Committee meeting held Thursday, March 6 at 4:00 p.m. in the McCloskey Conference Room of City Hall at Showers.

401 N. Morton St.

Bloomington, Indiana

Roll Call

Committee Members Present

Eric Ost, Telecommunications Council

Greg Travis

Mark McMath, Bloomington Hospital

Vacancy

Brian Kleber

City of Bloomington Staff Present

Rick Dietz, Director, Bloomington ITS

Guests Present

Dr. Mike Sullivan Bloomington E-Health Collaborative

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i. Staff Report

- a. Rick Dietz (RD): We have been working with the MCCSC recently on the technology high school project at the old Rogers facility. The city has been talking to them about how we could possibly facilitate their connectivity needs there because we have conduit existing at that intersection.
- b. Greg Travis (GT): Are there cost savings in combining the MCCSC and the city of Bloomington Internet Access?
- c. RD: That is a possibility but they use several other providers for their dark fiber and they also have a much larger demand for bandwidth. I will look into it though.

ii. BCAT

- a. RD: There has been discussion recently with about getting the PEG programming included in the ATT&T Uverse network which is rolling out in Bloomington right now. They have not started providing PEG programming yet. The platform they are using treats PEG programming differently than traditional cable. The PEG programming is basically in a separate application. They also do not currently pass through local emergency notifications. They are petitioning the FCC right now so that they don't have to implement the emergency alerts yet. By the national and state law the current system they are rolling out is in violation of the law. We have been working on a solution and right now we are proposing a neutral meeting point at the telecom hotel. The local PEG delegates will deliver the programming via fiber and then the video provider would be responsible for picking up the signal.
- b. GT: Does the Uverse not have the same regulatory requirements as cable?
- c. Eric Ost (EO): Both Comcast and ATT&T have requested a certificate under Indiana law. That means that they are required to carry the same number of PEG channels as there were in 2006. ATT&T has just never picked them up. Comcast has continued what they were doing and they are still in compliance. There are also federal regulations about the PEG programming. ATT&T is currently not required to carry local emergency alerts. They have asked for an extension until July.
- d. RD: With a statewide franchise like we have now, we are starting to see ATT&T begin to build out in high margin areas. The incumbent provider has already built their infrastructure covering the entire municipality. They end up competing on unfair terms.
- e. EO: Many cities don't have PEG. Bloomington and Indianapolis do, but they don't seem to care.

iii. **Update on the Bloomington E-Health Collaborative/ HealthLINC**

- a. Mike Sullivan (MS): First of all, the name of the E-Health collaborative has been changed to HealthLINC.
- b. EO: Does the INC stand for incorporated?
- c. Mark McMath (MM): No, the last 4 letters are an acronym.
- d. RD: It has recently been incorporated though?
- e. MM: Yes. We will be filing for 5013C. Like a charitable organization.
- f. RD: How many board members?
- g. MM: We are working on that right now, the first board meeting for prospective board members is April 1st. I'm not sure exactly how many board members they are looking at right now.
- h. MS: I think it is roughly a dozen or so...
- i. MM: It is still pretty fluid. There has been a operating committee and they are guiding the development of this next phase. I don't think they have made any final decisions though.
- j. RD: What is your sense of buy in with the various health care entities? How do you keep everybody involved?
- k. MM: Well VIM is one of the early organizations to come up with the partnership between Smithville digital and the city. They have now shut off paper. They're saving time for the employees and they are saving money on supplies. It is helping us save time as a results sender. They can reduce the time for the follow up visit as well. They can route results within the office annotating the results along the way. I think that the initial results will continue to grow. We are now 6 practices in and we are starting to look for practices that are using electronic medical records and how to connect them.
- l. RD: So the partnership with Healthbridge is working out well?
- m. MM: I think so. This is all new territory but it seems to be going well. We just finished the legal work defining the relationship between the practices HealthLINC and HealthBridge.
- n. MS: The HealthBridge model that is being implemented now in Bloomington seems to have the best chance of success among the big RIOs. The relationship between Bloomington and HealthBridge puts us in kind of a unique position. IU is also currently having discussions with HealthBridge about another project centered on developing a Personal Health Record which could end up being a nice spinoff.

- o. EO: Does HealthBridge offer a PHR?
- p. MS: No, there is interest at IU Bloomington Health Center. They would like to come up with a PHR that can be used worldwide.

iv. FCC Update

- a. MM: The board met this morning today in Indy. The executive director of the Indiana Rural Healthcare Association was elected mayor of Bedford. Her replacement is going to be Don Kelso and he has already made that transition. He is now the chair of that board.
- b. RD: What is the name of that board?
- c. MM: I refer to it as the FCC advisory board. At this point the 15% matching funds is still a question. The Legislature is waiting for the federal government to rule on the grant before they put the appropriation request through. They are planning on putting out an RFP for a network analysis which should be done by June. In the meantime there must be more detailed discussions with the critical access CEOs and their tech people so we can build those needs into the requirements. We also need to decide if we want a 3rd party to come in and determine how the network should be built. Otherwise the providers will bid based on the way they want to build the network.
- d. RD: I am concerned because the entire structure of the proposal was built around the local small providers remaining in control. That is why ours was so unique compared to everyone else.
- e. MS: There are two main ways you can spend this money. You can spend it subsidizing the ongoing monthly fees but at the end of three years we are back where we are now. The other alternative is spending it on construction that will facilitate delivering that bandwidth in the future at a lower rate. So if providers are bidding on the project and they are using the existing infrastructure for the bid, there is no additional buildout going on.
- f. RD: The group should have the end goal in mind whether it is to connect all the critical access hospitals or to connect all the healthcare entities in the state.
- g. EO: We need to look at the additional benefits of building this infrastructure. The win win situation for providers like Smithville is that once this infrastructure is in the ground they don't have to build that either.
- h. MS: If the money is used for construction then that should be accompanied by the requirement that the fiber be open access. It is funded with public funds so it must be open.

- i. RD: There could even be an agreement that is exclusive in the short term as long as it remains open in the long term, unencumbered by individual interests.
- j. MS: I suspect that to make it affordable to build out the fiber, some of the investment in that would come from the telecom companies. They would anticipate that some of the fiber could be used to service other customers.
- k. RD: Is there a meeting scheduled for the FCC advisory board?
- l. MM: Yes, it is the 1st Thursday of the month. The dates are April 4th, then May 1st in Indianapolis. There are also several working groups. They are pretty open to additional membership in the working groups.

RD: I Think the next meeting group is peering in here so we will adjourn and continue this next time.