FCC Rural Health Care Pilot Program WC Docket No. 02-60
Quarterly Report for the Period July 1, 2010 – September 30, 2010
Submitted by
Iowa Rural Health Telecommunications Program
October 28, 2010

Changes from the prior quarterly report are in ***bold.***

1. Project Contact and Coordination Information:

No change from the prior quarterly report

Project Coordinator: Arthur J. Spies, Senior Vice President, Iowa Hospital Association
Address: 100 East Grand Avenue Des Moines, Iowa 50309
Telephone: 515-288-1955
Fax: 515-283-9366
E-mail address: spiesa@ihaonline.org

2. Identify all health care facilities included in the network.

Changes from the prior quarterly report are in bold.

2a. Facility Name	Address & Phone	County	RUCA	Census Tract	2b. Hospital Characteristics
Monroe County Hospital	6580 165th St Albia, IA 52531 641-932-2134	Monroe	7	9701.00	public not-for-profit and eligible provider due to Iowa hospital license
Kossuth Regional Health Center	1515 S. Phillips St Algona, IA 50511 515-295-2451	Kossuth	7	9504.00	public not-for-profit and eligible provider due to Iowa hospital license
Audubon County Memorial Hospital	515 Pacific St Audubon, IA 50025 712-563-2611	Audubon	10	9702.00	public not-for-profit and eligible provider due to Iowa hospital license
Davis County Hospital	507 North Madison Bloomfield, IA 52537 641-664-2145	Davis	10.5	9802.00	public not-for-profit and eligible provider due to Iowa hospital license

Boone County Hospital	1015 Union St Boone, IA50036 515-432-3140	Boone	4.2	0203.00	public not-for-profit and eligible provider due to Iowa hospital license
Hancock County Memorial Hospital	532 1st St NW Britt, IA 50423 641-843-5000	Hancock	10.6	9703.00	public not-for-profit and eligible provider due to Iowa hospital license
St Anthony Regional Hospital	311 S. Clark Carroll, IA 51401 712-792-3581	Carroll	7	9604.00	non-public not-for-profit eligible provider due to Iowa hospital license
Mercy Medical Center – Cedar Rapids	701 10th St SE Cedar Rapids, IA 52403 319-398-6011	Linn	1	0027.00	non-public not-for-profit eligible provider due to Iowa hospital license
Mercy Medical Center – Centerville	One St. Joseph's Dr. Centerville, IA 52544 641-437-4111	Appanoose	7	9503.00	non-public not-for-profit eligible provider due to Iowa hospital license
Lucas County Health Center	1200 N. 7th St Chariton, IA 50049 641-774-3000	Lucas	7	9504.00	public not-for-profit and eligible provider due to Iowa hospital license
Floyd County Memorial Hospital	700 11th St Charles City, IA 50616 515-228-6230	Floyd	7	9805.00	public not-for-profit and eligible provider due to Iowa hospital license
Cherokee Regional Medical Center	300 Sioux Valley Drive Cherokee, IA 51012 712-225-5101	Cherokee	7	9801.00	non-public not-for-profit eligible provider due to Iowa hospital license
Clarinda Regional Health Center	823 South 17th St, PO Box 217 Clarinda, IA 51632 712-542-2176	Page	7	9904.00	public not-for-profit and eligible provider due to Iowa hospital license
Mercy Medical Center-Clinton	1410 N. Fourth St Clinton, IA 52732 563-244-5555	Clinton	4	0006.00	non-public not-for-profit eligible provider due to Iowa hospital license
Alegent Health Mercy Hospital	603 Rosary Drive Corning, IA 50841 641-322-3121	Adams	10	9502.00	non-public not-for-profit eligible provider due to Iowa hospital license
Wayne County Hospital	417 S. East St Corydon, IA 50060 641-872-2260	Wayne	10	9701.00	public not-for-profit and eligible provider due to Iowa hospital license
Alegent Health-Mercy Hospital	800 Mercy Drive Council Bluffs, IA 51503 712-328-5000	Pottawattamie	1	0311.00	non-public not-for-profit eligible provider due to Iowa hospital license

Jennie Edmundson Hospital	933 East Pierce St Council Bluffs, IA 51503 712-396-6000	Pottawattamie	1	0311.00	non-public not-for-profit eligible provider due to Iowa hospital license
Regional Health Services of Howard County	235 Eight Ave West Cresco, IA 52136 563-547-2101	Howard	7	9601.00	public not-for-profit and eligible provider due to Iowa hospital license
Genesis Health System Genesis Medical Center	1227 East Rusholme St Davenport, IA 52803 563-421-1000	Scott	1	0116.00	non-public not-for-profit eligible provider due to Iowa hospital license
Genesis Medical Center Genesis Plaza	2535 Maplecrest Rd. Bettendorf, IA 52722 563-421-1000	Scott	1	0137.04	non-public not-for-profit eligible provider due to Iowa hospital license
Genesis Medical Center Genesis-Bettendorf Imaging Center	4017 Devils glen Rd. Bettendorf, IA 52722 563-421-1000	Scott	1	0137.04	non-public not-for-profit eligible provider due to Iowa hospital license
Winneshiek Medical Center	901 Montgomery St Decorah, IA 52101 563-382-2911	Winneshiek	7	9503.00	public not-for-profit and eligible provider due to Iowa hospital license
Crawford County Memorial Hospital	2020 First Ave South Denison, IA 51442 712-263-5021	Crawford	7	9704.00	public not-for-profit and eligible provider due to Iowa hospital license
Mercy Medical Center – Mercy Capitol	603 East 12th St Des Moines, IA 50309 515-243-2584	Polk	1	0051.00	non-public not-for-profit eligible provider due to Iowa hospital license
Mercy Medical Center – Des Moines	1111 Sixth Ave Des Moines, IA 50314 515-247-3121	Polk	1	0049.00	non-public not-for-profit eligible provider due to Iowa hospital license
Genesis Medical Center – Dewitt	1118 11th St DeWitt , IA 52742 563-659-4200	Clinton	7.3	0009.00	non-public not-for-profit eligible provider due to Iowa hospital license
Mercy Medical Center – Dubuque	250 Mercy Drive Dubuque, IA 52001 563-589-8000	Dubuque	1	0007.02	non-public not-for-profit eligible provider due to Iowa hospital license
Mercy Medical Center – Dyersville	1111 3rd St SW Dyersville, IA 52040 563-875-7101	Dubuque	7.3	0105.00	non-public not-for-profit eligible provider due to Iowa hospital license
Central Community Hospital	901 Davidson St NW Elkader, IA 52043 563-245-7000	Clayton	10	9703.00	non-public not-for-profit eligible provider due to Iowa hospital license

Palo Alto County Health System	3201 First St Emmetsburg, IA 50536 712-852-5500	Palo Alto	7	9603.00	public not-for-profit and eligible provider due to Iowa hospital license
Avera Holy Family Health	826 North Eighth St Estherville, IA 51334 712-362-2631	Emmet	7.4	9704.00	non-public not-for-profit eligible provider due to Iowa hospital license
Jefferson County Hospital	400 Highland Ave Fairfield, IA52556 641-472-4111	Jefferson	7	9904.00	public not-for-profit and eligible provider due to Iowa hospital license
Fort Madison Community Hospital	5445 Avenue O Fort Madison, IA 52627 319-376-2250	Lee	4	9901.00	non-public not-for-profit eligible provider due to Iowa hospital license
Adair County Memorial Hospital	609 S. E. Kent Greenfield, IA 50849 641-743-2123	Adair	10	9603.00	public not-for-profit and eligible provider due to Iowa hospital license
Grape Community Hospital	2959 Highway 275 Hamburg, IA 51640 712-382-1515	Fremont	10.4	9703.00	non-public not-for-profit eligible provider due to Iowa hospital license
Franklin General Hospital	1720 Central Ave Hampton, IA 50441 641-465-5000	Franklin	7	9602.00	public not-for-profit and eligible provider due to Iowa hospital license
Hawarden Community Hospital	1111 11th St Hawarden, IA 51023 712-551-3100	Sioux	10.6	9704.00	public not-for-profit and eligible provider due to Iowa hospital license
Horn Memorial Hospital	701 East Second St Ida Grove, IA 51445 712-364-3311	Ida	10	9903.00	non-public not-for-profit eligible provider due to Iowa hospital license
Buchanan County Health Center	1600 First St East Independence, IA 50644 319-334-6071	Buchanan	7.3	9505.00	public not-for-profit and eligible provider due to Iowa hospital license
Mercy Iowa City	500 East Market St. Iowa City, IA 52245 319-339-0300	Johnson	1	0011.00	non-public not-for-profit eligible provider due to Iowa hospital license
University of Iowa Hospitals & Clinics	200 Hawkins Drive Iowa City, IA 52242 319-356-3945	Johnson	1	0023.00	public not-for-profit and eligible provider due to Iowa hospital license
Ellsworth Municipal Hospital	100 Rocksylvania Ave Iowa Falls, IA 50126 641-648-4631	Hardin	7	9802.00	public not-for-profit and eligible provider due to Iowa hospital license

Keokuk Area Hospital	1600 Morgan St Keokuk, IA 52632 319-524-5317	Lee	4	9907.00	non-public not-for-profit eligible provider due to Iowa hospital license
Van Buren County Hospital	304 Franklin St, Box 70 Keosauqua, IA 52565 319-293-3171	Van Buren	10.6	9501.00	public not-for-profit and eligible provider due to Iowa hospital license
Knoxville Hospital & Clinics	1002 South Lincoln St Knoxville, IA 50138 641-842-2151	Marion	7.3	0304.01	non-public not-for-profit eligible provider due to Iowa hospital license
Stewart Memorial Community Hospital	1301 West Main St Lake City, IA 51449 712-464-3171		10.6	9504.00	non-public not-for-profit eligible provider due to Iowa hospital license
Floyd Valley Hospital	714 Lincoln St NE, Hwy 3 East Le Mars, IA 51031 712-546-7871	Plymouth	7.3	9701.00	public not-for-profit and eligible provider due to Iowa hospital license
Regional Medical Center	709 West Main St Manchester, IA 52057 563-927-3232	Delaware	7	9503.00	public not-for-profit and eligible provider due to Iowa hospital license
Manning Regional Healthcare Center	410 Main St Manning, IA 51455 712-655-2072	Carroll	10.6	9606.00	non-public not-for-profit eligible provider due to Iowa hospital license
Marengo Memorial Hospital	300 West May St Marengo, IA 52301 319-642-5543	Iowa	10.4	9902.00	public not-for-profit and eligible provider due to Iowa hospital license
Marshalltown Medical & Surgical Center	3 South 4th Ave Marshalltown, IA 50158 641-754-5181	Marshall	4	9509.00	non-public not-for-profit eligible provider due to Iowa hospital license
Mercy Medical Center – North Iowa	1000 Fourth St SW Mason City, IA 50401 641-422-7000	Cerro Gordo	4	9503.00	non-public not-for-profit eligible provider due to Iowa hospital license
Alegent Health Community Memorial Hospital	631 North 8th St Missouri Valley, IA 51555 712-642-2784	Harrison	7.1	9904.00	non-public not-for-profit eligible provider due to Iowa hospital license
Ringgold County Hospital	211 Shellway Drive Mount Ayr, IA 50854 641-464-3226	Ringgold	10	9502.00	public not-for-profit and eligible provider due to Iowa hospital license
Henry County Health Center	407 South White Mount Pleasant, IA52641 319-385-3141	Henry	7	9703.00	public not-for-profit and eligible provider due to Iowa hospital license

Story County Medical Center	630 Sixth St Nevada, IA 50201 515-382-2111	Story	2	0103.00	public not-for-profit and eligible provider due to Iowa hospital license
Mercy Medical Center – New Hampton	308 North Maple Ave New Hampton, IA 50659 641-34-4121	Chickasaw	7	9704.00	non-public not-for-profit eligible provider due to Iowa hospital license
Burgess Health Center	1600 Diamond St Onawa, IA 51040 712-423-2311	Monona	7.3	9603.00	non-public not-for-profit eligible provider due to Iowa hospital license
Orange City Area Health System	1000 Lincoln Circle SE Orange City, IA 51041 712-737-5225	Sioux	7	9706.00	public not-for-profit and eligible provider due to Iowa hospital license
Mitchell County Regional Health Center	616 North Eighth St Osage, IA 50461 641-732-6000	Mitchell	7.4	9603.00	public not-for-profit and eligible provider due to Iowa hospital license
Mahaska Health Partnership	1229 C Ave East Oskaloosa, IA 52577 641-672-3100	Mahaska	4	9504.00	public not-for-profit and eligible provider due to Iowa hospital license
Ottumwa Regional Health Center	1001 Pennsylvania Ave Ottumwa, IA 52501 641-684-2300	Wapello	4	9604.00	non-public not-for-profit eligible provider due to Iowa hospital license
Pella Regional Health Center	404 Jefferson Pella, IA 50219 641-628-3150	Marion	7	0302.00	non-public not-for-profit eligible provider due to Iowa hospital license
Dallas County Hospital	610 Tenth St Perry, IA 50220 515-465-3547		7.3	0503.00	public not-for-profit and eligible provider due to Iowa hospital license
Baum Harmon Mercy Hospital	255 North Welch Ave Primghar, IA 51245 712-957-2300	O'Brien	10.6	9902.00	non-public not-for-profit eligible provider due to Iowa hospital license
Sanford Hospital Rock Rapids	801 South Greene St Rock Rapids, IA 51246 712-472-2591	Lyon	10.4	9502.00	non-public not-for-profit eligible provider due to Iowa hospital license
Hegg Memorial Health Center	1202 21st Ave Rock Valley, IA 51247 712-476-8000	Sioux	7	9703.00	non-public not-for-profit eligible provider due to Iowa hospital license
Sanford Sheldon Medical Center	118 North 7th Ave Sheldon, IA 51201 712-324-5041	O'Brien	7	9903.00	non-public not-for-profit eligible provider due to Iowa hospital license

Shenandoah Medical Center	300 Pershing Ave Shenandoah, IA 51601 712-246-1230	Page	7	9903.00	non-public not-for-profit eligible provider due to Iowa hospital license
Osceola Community Hospital	Ninth Ave North Sibley, IA 51249 712-754-2574	Osceola	7	9601.00	non-public not-for-profit eligible provider due to Iowa hospital license
Sioux Center Community Hospital & Health Center	605 South Main Ave Sioux Center, IA 51250 712-7221271	Sioux	7	9707.00	non-public not-for-profit eligible provider due to Iowa hospital license
Mercy Medical Center – Sioux City	801 Fifth St Sioux City, IA 51102 712-279-2010	Woodbury	1	0016.00	non-public not-for-profit eligible provider due to Iowa hospital license
Spencer Hospital	1200 First Ave East Spencer, IA 51301 712-264-6198	Clay	4	9802.00	public not-for-profit and eligible provider due to Iowa hospital license
Virginia Gay Hospital	502 North Ninth Ave Vinton, IA 52349 319-472-6200	Benton	7.3	9803.00	non-public not-for-profit eligible provider due to Iowa hospital license
Washington County Hospital & Clinics	400 East Polk St Washington, IA 52353 319-653-5481	Washington	7.3	9604.00	public not-for-profit and eligible provider due to Iowa hospital license
Veterans Memorial Hospital	40 First Ave SE Waukon, IA 52172 563-568-3411	Allamakee	7	9603.00	public not-for-profit and eligible provider due to Iowa hospital license
Waverly Health Center	312 Ninth St SW Waverly, IA 50677 319-352-4120	Bremer	7.3	0042.00	public not-for-profit and eligible provider due to Iowa hospital license
Hamilton Hospital	800 Ohio St Webster City, IA 50595 515-832-9400	Hamilton	7	9604.00	public not-for-profit and eligible provider due to Iowa hospital license
Great River Medical Center	1221 South Gear Ave W. Burlington, IA 52655 319-768-1000	Des Moines	4	0008.00	non-public not-for-profit eligible provider due to Iowa hospital license
Palmer Lutheran Health Center, Inc.	112 Jefferson Street West Union, IA 52175 563-422-3876	Fayette	10	9801.00	non-public not-for-profit eligible provider due to Iowa hospital license
Madison County Health Care System	300 West Hutchings St Winterset, IA 50273 515-462-2373	Madison	7.1	0602.00	public not-for-profit and eligible provider due to Iowa hospital license

Skiff Medical Center	**204 N 4th Ave E Newton, IA 50208 641-792-1273**	**Jasper**	**4**	**0405.00**	**public not-for-profit and eligible provider due to Iowa hospital license**
Lakes Regional Healthcare	**2301 U.S. 71 Spirit Lake, IA 51360**	**Dickinson**	**4**	**9505.00**	**public not-for-profit and eligible provider due to Iowa hospital license**

Lakes Regional Healthcare in Spirit Lake and Skiff Medical Center in Newton re-joined IRHTP.

3. Network Narrative:

(A & B)

The Outside Plant Fiber Optic Cable RFP will provide last mile fiber connection for **82** Iowa hospitals at **84** sites to the ICN's closest appropriate Point of Presence (POP). The Network Electronics RFP acquired all necessary electronics to provide an engineered solution for a dedicated statewide broadband health care network. A preliminary design was developed taking into account current assets, network topology, fiber constraints, available technology, and service requirements. The proposed network design requires an Ethernet/MPLS Edge Switch with a one (1) gigabit trunk connecting the hospital to the closest appropriate ICN POP. Optics either within the Edge Switch or at the ICN POP will provide a Course Wave Division Multiplexing (CWDM) wavelength which is then multiplexed onto a CWDM transport network. The CWDM wavelength services may pass through multiple regeneration sites or may terminate directly at one of eighteen (18) core switching sites. At the core switching sites, all CWDM traffic is de-multiplexed and terminated on an MPLS Core Switch. The Core Switch aggregates all data flows and tunnels data as appropriate through multiple ten (10) gigabit MPLS trunks. Each of the eighteen (18) MPLS Core Switches is interconnected via a Dense Wave Division Multiplexing (DWDM) infrastructure to form a resilient statewide health care backbone.

(C.) Connection to the ICN provides access to Internet2.

(D.) The **84** last mile connections require 133 miles of fiber construction. **The split between aerial and in ground is being determined with each build out.**

4. List of Connected Health Care Providers:

IRHTP has completed the competitive bidding, contracting and 466A award/FCL processes and construction began in October 2009. The network core is not in place therefore no providers have been connected to the envisioned dedicated broadband network. ***The network core became operational in August 2010.***
The following table lists hospitals that have had the last mile fiber connection completed and those that have had necessary hospital and pathway electronics installed.

Connected Health Care Providers

Hospital	City	Last Mile Connection	Electronics Installed	Applications
Dallas County Hospital	Perry	Fiber in ground	YES	Internet connectivity & image transmission
Ringgold County Hospital	Mount Ayr	Fiber in ground		
Clarinda Regional Health Center	Clarinda	Fiber in ground		
Alegent Health Mercy Hospital – Corning	Corning	Fiber in ground		
St. Anthony Regional Hospital	Carroll	Fiber in ground		
Floyd County Medical Center	Charles City	Aerial and in ground fiber		
Boone County Hospital	Boone	Fiber in ground	YES	Internet connectivity & image transmission
Genesis Imaging Center	Bettendorf	Fiber in ground		
Genesis Plaza	Bettendorf	Fiber in ground		
Alegent Health Community Memorial Hospital	Missouri Valley	Fiber in ground		
Virginia Gay Hospital	Vinton	Aerial fiber		
Great River Medical Center	West Burlington	Fiber in ground		
Central Community Hospital	Elkader	IRU		
Osceola Community Hospital	Sibley	IRU		
Spencer Hospital	Spencer	IRU		
Davis County	Bloomfield	IRU		
Sanford Sheldon Medical Center	Sheldon	IRU		
Hegg Memorial Health Center	Rock Valley	IRU		
Hospital	City	Last Mile Connection	Electronics Installed	Applications
Sanford Hospital Rock Rapids	Rock Rapids	IRU		

Hospital	City	Last Mile Connection	Electronics Installed	Applications
Orange City Area Health System	Orange City	IRU		
Floyd V alley Hospital	Le Mars	IRU		
Sioux Center Community Hospital/Health Center	Sioux Center	IRU		
Palmer Lutheran Health Center, Inc.	West Union	Fiber in ground		
Regional Medical Center	Manchester	Aerial fiber		
Mahaska Health Partnership	Oskaloosa	Fiber in ground		
Hamilton Hospital	Webster City	Fiber in ground	YES	Internet connectivity
Cherokee Regional Medical Center	Cherokee	Fiber in ground		
Van Buren County Hospital	Keosaqua	Fiber in ground		
Regional Health Services of Howard County	Cresco	In ground and aerial fiber	YES	Image transmission and system administrative services
Mercy Medical Center – Des Moines	Des Moines	Fiber in ground		
Audubon County Memorial Hospital	Audubon	In ground and aerial fiber		
Burgess Health Center	Onawa	Aerial fiber		
Buchanan County Health Center	Independence	Fiber in ground		
Wayne County Hospital	Corydon	Existing aerial and in ground fiber	YES	System administrative services

Ineligible sites connected to the IRHTP network

Site	City	Last Mile Connection	Electronics Installed	Applications
Iowa Hospital Association	**Des Moines**	**Fiber**	**YES**	**Internet connectivity & hospital data receipt and data transmission**

5. Identify the following non-recurring and recurring costs:

This project has non-reoccurring (one time) capital costs. IRHTP has completed the competitive bidding, contracting and 466A award/FCL processes and construction began in October 2009. Several invoices for fiber installation, leased facilities or tariffed services (IRU) and network core electronics have been paid.

Contract awards made and costs that have been invoiced and paid by **June 30, 2010** are as follows.

Cost Category	Total Contract Awards	Total Cost Invoiced	FCC 85%	Hospital 15%
Outside Plant Fiber Installation	**$5,919,377**	**$1,346,884.56**	**$1,144,851.87**	**$202,032.69**
Leased Facilities or Tariffed Services – 20 Years IRUs	$862,783	**$307,300**	**$261,205**	**$46,095**
Network Electronics	**$3,516,313**	**$3,016,872.03**	**$2,564,341.22**	**$452,530.81**
Total Awards	**$10,298,473**	**$4,671,056.59**	**$3,970,398.09**	**$700,658.50**

6. Describe how costs have been apportioned and the sources of the funds to pay them.

IRHTP has completed the competitive bidding, contracting and 466A award/FCL processes with construction starting in October 2009. This project has non-reoccurring (one time) capital costs of which the FCC Rural Health Care Pilot Program will pay 85 percent of the costs and each participating hospital will pay the remaining 15 percent. There are no other sources of funding at this time. The cost of fiber construction or an IRU and the network electronics for each participating hospital were obtained though the competitive bidding process.

The following table identifies the source of funds for each contract award.

Vendor	Total Award	FCC FCL	Hospital 15% Share
Adesta	$213,789	$181,720.66	$32,068.34
COMTEC	**$3,010,555**	**$2,558,971.75**	**$451,583.25**
MasTec	**$1,601,681**	**$1,361,436.54**	**$240,244.46**
Communication Innovators	$925,352	$786,359.63	$138,992.37
Alcatel – Lucent	**$3,516,313**	**$2,988,865.63**	**$527,447.37**
Alpine	$20,000	$17,000	$3,000
Citizens Telephone	$34,000	$28,900	$5,100
Hospers Telephone Company (HTC)	$78,000	$66,300	$11,700
Mutual Telephone Company	$147,300	$125,205	$22,095
Spencer Municipal Utilities	$48,000	$40,800	$7,200
Access Integration Specialists	$168,000	$142,800	$25,200
PAETEC	$535,483	$455,160.55	$80,322.45
Total	**$10,298,473**	**$8,753,518.76**	**$1,544,954.24**

Changes in awards occurred because Lakes Regional Healthcare in Spirit Lake and Skiff Medical Center in Newton re- joined IRHTP. Because the hospitals were part of the initial bid, adjustments to contractor agreements and a new FCC 466 award package was completed and FCLs were obtained.

To facilitate payment, the Iowa Hospital Association collected participating hospital's 15 percent share for hospitals scheduled to be built out in 2009 and 2010 prior to the beginning of construction and collected each participating hospital's 15 percent share of the network core electronics prior to ordering the core electronics and components. The cost of the shared core was allocated equally to each participating hospital. **In 2011 the hospital's 15 percent share will be collected prior to the build out to facilitate payment.**

7. Identify any technical or non-technical requirements or procedures necessary for ineligible entities to connect to the participant's network.

Any ineligible entities will pay 100 percent of the connectivity and monthly operational costs. **The Iowa Hospital Association (IHA) paid 100% of the connectivity, site and pathway electronics and pays the monthly circuit and Internet fees billed by the ICN and the monthly maintenance ($329) and equipment replacement costs ($265) billed by IHA.**

8. Provide an update on the project management plan, detailing:

a. The project's current leadership and management structure:

One change from the last quarterly report

The Iowa Hospital Association (IHA) is functioning as the project coordinator and administrator for the Iowa rural Health Telecommunications Program (IRHTP), which is a consortium of 80 not for profit and public rural and urban Iowa hospitals and 2 ineligible organizations. The project coordinator is Arthur J. Spies Senior VP with the Iowa Hospital Association (contact information is listed in #1).

The Iowa Hospital Association (IHA) was asked by the workgroup in December of 2006 to facilitate the development of a proposal to the FCC Rural Health Care Pilot Program. IHA facilitated the process and submitted the IRHTP proposal on behalf of participating Iowa hospitals. The Iowa hospital Association has and will continue to have responsibility for the general project administration / management that includes:

- Meeting logistics for the IRHTP steering committee (face to face and conference calls)
- Communication with IHA Board and participating hospitals
- Serving as IRHTP project coordinator
    - Manage the administrative aspects of the build-out of the approved network
    - Complete and submit program forms and supporting documentation; sign off on certifications, invoices, etc.
    - USAC payment management
    - Serve as primary point of contact for the project
    - Communicate any requirements / requests to participating entities
    - Assure administrative project documentation
    - Maintain project files
    - Prepare for any audits

The IHA Board appointed a steering committee in December 2007 made up of IRHTP participating hospital CEOs, administrative staff, CIOs, and IT staff for the purpose of:

- Reviewing and approving consortium bid requirements
- Awarding contracts and prioritizing project phases
- Monitoring and directing the project build-out.

IRHTP steering committee members are:

Name	**Title**	**Hospital/Organization**	**City, State**
Steven Baumert	President/CEO	Jennie Edmundson Hospital	Council Bluffs, IA
Martin Blind	Information Services director	Virginia Gay hospital	Vinton, IA
Daryl Bouma	Chief Technology Officer	Sanford Health	Sioux Falls, SD

James Burkett Jr.	Director Technology Services	Avera Health	Sioux Falls, SD
Lee Carmen	Assoc. VP Information systems	U of Iowa Hospital and Clinics	Iowa City, IA
Scott Curtis	Administrator/CEO	Kossuth Regional Health center	Algona, IA
Fred Eastman	Director	MRTC Telemedicine Project	Des Moines, IA
Robert Frieden	CIO/VP Information Services	Genesis Health System	Davenport, IA
Randy Haskins	Site Director	Mercy Medical Center-North Iowa	Mason city, IA
David Hickman	Dir. Clinical Integration	Mercy Health Network	Des Moines. IA
Joseph LeValley	Senior VP Planning	Mercy Medical Center-Des Moines	Des Moines, IA
Michael Myers	CEO	Veterans Memorial Hospital	Waukon, IA
~~**Kim Norby**~~	~~**CIO**~~	~~**Burgess Health Center**~~	~~**Onawa, IA**~~
Kirk Norris	President	Iowa Hospital Association	Des Moines, IA
Donald Patterson	CEO	Washington County Hospital and Clinics	Washington, IA
Michael Trachta	CEO	Waverly Health Center	Waverly, IA

Kim Norby is now the executive director of the Iowa e-Health Project and is no longer the CIO at Burgess Health Center.

The ICN has been a participant and involved from the very first "what if" meeting in October 2006 and in each step or phase of the project as follows:

- Participated on the planning committee December 2006 – May 7, 2007 when the IRHTP proposal was submitted to the FCC.
- Developed and contributed the technical design and specifications, maps and drawings, materials lists, and timeline for the IRHTP proposal.
- Currently is functioning as the project manager and developed the fiber build-out and electronics RFPs, staffed the bidders conferences, helped evaluate the bids received, assisted the IRHTP steering committee in making awards, and currently monitors the build-out, serves as a contractor contact for build-out issues, **installing core, pathway and hospital electronics,** and will assist in assuring the build-out and installation is complete.

b. A detailed project plan and schedule:

The Iowa Rural Health Telecommunications Program (IRHTP) developed the necessary documents (Form 465, attachments, letters of agency and the fiber and electronics RFPs) and submitted the various documents to the FCC/USAC competitive bidding process. The Outside Plant Fiber Optic Cable RFP 08-001 and the Network Electronics RFP 08-002 were posted on August 1, 2008.

The Iowa Rural Health Telecommunications Program steering committee met on November 12, 2008 and completed its evaluation of the bid proposals received for the fiber installation, quality assurance inspection services and network electronics RFPs. The steering committee approved contract awards for network electronics to Alcatel-Lucent for turnkey network electronics, management and web portal and to AT&T for other needed equipment (UPS).

Fiber build-outs and/or 20 years indefeasible right of use (IRU) were awarded to:

- Comtec – fiber builds
- Mastec – fiber builds
- Communications Innovators – fiber builds
- Adesta – one fiber build and confirming and negotiating the 2 IRUs (see McLeod USA Telecommunications Services d/b/a PAETEC Business Services below)
- Alpine Communications – 1 IRU
- Citizens Mutual Telephone COOP – 1 IRU
- Hospers Telephone Company (HTC Communications) – 2 IRUs
- Mutual Telephone Company – 5 IRUs, and
- Spencer Municipal Utilities – 1 IRU
- McLeod USA Telecommunications Services d/b/a PAETEC Business Services – *2 IRUs (assigned by Adesta)*

The IRHTP steering committee did not approve an award for quality assurance inspection services, because both bids exceeded any remaining funds available for the project.

Since the awards were approved by the IRHTP steering committee on November 12, 2008, the following steps have been taken:

- Provided each participating hospital with the actual cost (15% share) for final approval.
- Developed the IRHTP sustainability plan with approval received in June 2009,
- Planed the sequencing of the build-out.
- Form 466A award packages have been submitted to USAC for approval for fiber installation awards to Adesta, COMTEC, MasTec, and Communication Innovators; electronics award to Alcatel – Lucent; and IRU awards to Hospers Telephone Co. (HTC), Mutual Telephone Co, Spencer Municipal Utilities, Alpine Communications, and Citizens Mutual Telephone Cooperative.
- Funding Commitment Letters (FCLs) have been received for each contract.
- Form 467 has been sent in for each contract and has been acknowledged.
- The Quality Assurance Inspection Service RFP has been rebid through the USAC/FCC competitive bidding process. Two bids were received from Adesta and Access Integration Specialists. The steering committee reviewed the bid evaluations and approved an award to Access Integration Specialists for quality assurance inspection services. The 466A awards process has been completed with receipt of the FCL. Form 467 has been filed and acknowledged.
- With receipt of the funding commitment letters, each of the fiber installation contractors and the ICN staff have been scheduling and making site visits to the

36 hospitals initially scheduled to be built out in 2009. Engineering and permitting for these sites are well underway. The actual fiber build out began in October 2009.

- Eleven 466A award packages submitted with funding commitment letters received from FCC/USAC. Form 467 has been submitted and acknowledged.
- IRU agreement with PAETEC for Dyersville and DeWitt finalized and signed. The 466A package was developed and submitted to USAC/FCC for approval on April 20, 2010.
- Fiber contractors are in permitting, engineering and material procurement with actual construction completed in Perry, Clarinda, Corning, Carroll, Charles City, Council Bluffs, Mount Ayr, Boone, Missouri Valley, Vinton and Marshalltown. Testing and acceptance remains. Construction has begun in Bettendorf/Davenport and Des Moines. Contractors are mobilizing to Cresco, Washington, Manning, Keosauqua, Hamburg and West Burlington.
- Last mile connection through an IRU completed at Elkader, Sheldon, Sibley, Spencer and Bloomfield. Testing and acceptance remains.
- The core network electronics from Alcatel – Lucent have been delivered and the ICN has received, prepared, delivered and set up the core network electronics at the eighteen merged areas across the state.
- All of the 10 gigabit link segments to each merged area have been completed the week of April 19 – 23, 2010. Additional configuration and testing of the core will now occur. The network core should be operational by June 2010.
- Electronics for hospitals to be built out in 2009 have been ordered and received. Electronics for the hospitals to be built out in 2010 have been ordered. First order of 2010 electronics has been received. The next shipment is scheduled for June 1. Installation will occur when the network core is operational and the last mile connection has been completed.
- To facilitate construction, Iowa hospitals to be built out in 2010 have been sent an invoice for the balance of their 15% share. This will allow progress payments to contractors as actual construction occurs and the purchase of the hospital electronics to complete the connection.
- Estimated network build-out cost from IRHTP proposal $11,704,632
- FCC award $9,948,937
- Have made contract awards totaling $10,098,439.
- To date, twelve 466A award packages submitted with funding commitment letters received from FCC/USAC. Form 467 has been submitted and acknowledged.
- To date $3,833,197.43 has been invoiced (see question 5).
- Lakes Regional Healthcare in Spirit Lake and Skiff Medical Center in Newton will join IRHTP. Because the hospitals were part of the initial bid, adjustments to contractor agreements, the FCC 466 award package and FCLs will be made.
- Fiber contractors are in permitting, engineering and material procurement with actual construction completed in Perry, Clarinda, Corning, Carroll, Mount Ayr, Boone, Missouri Valley, Vinton, Manchester, and West Union. Some testing and acceptance remains. Construction has begun in Independence, Keosauqua, Marengo (railroad permit), Hamburg (DOT permit issue) Washington (ready to splice the fiber), Bettendorf (needs to terminate end at EICC and route clean up),

Charles City and Council Bluffs (have to hang the fiber), and Marshalltown (new splice point in Marshalltown) and Des Moines.

- Contractors are mobilizing to Davenport (permit on 7/14), Cresco, Manning, Oskaloosa, Onawa, Mount Pleasant, Fairfield and West Burlington.
- Last mile connection through an IRU completed at Rock Valley, Orange City, Le Mars, Rock Rapids, Elkader, Sheldon, Sibley, Sioux Center, Spencer and Bloomfield. Testing and acceptance remains.
- The core network electronics from Alcatel – Lucent have been delivered and the ICN has received, prepared, delivered and set up the core network electronics at the eighteen merged areas across the state. All of the 10 gigabit link segments to each merged area have been completed. Now addressing hardware, configuration, provisioning and software issues identified as the network is turned on. The core network should be operational in July 2010.
- Electronics for hospitals to be built out in 2009 have been ordered and received. Electronics for the hospitals to be built out in 2010 have been ordered. The March 1 order of 2010 electronics has been received and the June 1 order is being received. The next shipment is scheduled for August 1. Installation of hospital electronics will occur when the network core is operational and the last mile connection has been completed.
- IHA is prepared to begin invoicing connected hospitals for the monthly maintenance costs and replacement of network core electronics. The ICN will bill hospitals for the circuit fee and internet access.

Thru the period July 1, 2010 thru September 30, 2010 the following activities have occurred.

- ***To date, fourteen 466A award packages submitted with funding commitment letters received from FCC/USAC. Form 467 has been submitted and acknowledged.***
- ***We have made contract awards totaling $10,298,473. To date $4,671,056.59 has been invoiced.***
- ***Actual construction completed in 23 locations (Perry, Clarinda, Corning, Carroll, Mount Ayr, Boone, Missouri Valley, Vinton, Manchester, Charles City, Bettendorf, West Burlington, Des Moines, Washington, Onawa, Independence, Webster City, Keosauqua, Cherokee, Oskaloosa, Audubon and West Union) with some testing and acceptance and receipt of pole attachment agreements remaining.***
- ***Construction has started in Manning, Mount Pleasant, Fairfield, Fort Madison, Davenport, and Mason City. Permitting has begun in Nevada and Waukon.***
- ***Construction started but is pending in four locations; Marengo (DOT permit), Hamburg (DOT permit issue), Council Bluffs (pole attachment agreement), and Marshalltown (new splice point in Marshalltown).***
- ***Contractors have scheduled construction in 15 other sites for 2010 (Waverly, Dewitt, Dyersville, Decorah, Cedar Rapids, Iowa City, Albia, Greenfield, Pella, Ida Grove, Lake City, Chariton, Dennison, Keokuk, and Estherville). Newton and Spirit Lake will be added if possible in 2010.***

- ***The core network electronics from Alcatel – Lucent have been delivered and the ICN has received, prepared, delivered and set up the core network electronics at the eighteen merged areas across the state. All of the 10 gigabit link segments to each merged area have been completed and tested. The network core is operational. Four hospitals are connected to the network (Boone County Hospital in Boone, Dallas County Hospital in Perry, Hamilton Hospital in Webster City and Wayne County Hospital in Corydon) as well as IHA.***
- ***Electronics for hospitals to be built out in 2009 and 2010 have been ordered and received. Installation of hospital electronics will occur when the last mile connection has been completed, tested and accepted.***
- ***IHA has begun invoicing connected hospitals for the monthly maintenance costs and replacement of network core electronics. The ICN will bill hospitals for the circuit fee and internet access.***
- ***The RFP and the 465 competitive bidding package for 20 years broadband lit capacity IRU to Sioux Falls, South Dakota is under development.***
- ***ICN-IRHTP/IHA operations and maintenance MOU is under review.***

Construction activity began in the fall of 2009 with completion of the build-out of the dedicated network by December 2011. The anticipated time table for the build out follows.

Year	Number of Hospitals/Sites
2009	9
2010	***57***
2011	***18***

Additional detail will be provided in future quarterly reports as progress is made.

9. Provide detail on whether network is or will become self sustaining. Selected participants should provide an explanation of how network is self sustaining.

No change from the quarterly report submitted on July 30, 2009

The Iowa Rural Health Telecommunications Program (IRHTP) is a joint effort consisting of a consortium of **82** Iowa rural and urban hospitals, the Iowa Hospital Association (IHA) and the Iowa Communications Network (ICN).

The Iowa Hospital Association is functioning as the project coordinator and administrator for IRHTP and is acting on behalf of the **82** Iowa hospitals. The Iowa Hospital Association (IHA) is a voluntary institutional membership organization representing hospital and health system interests to business, government and consumer audiences. IHA informs and helps shape health policy; fosters new forms of health care delivery; gathers and analyzes clinical, utilization and financial data and monitors health care

payment systems. Currently, all one hundred seventeen (117) short-term acute care Iowa hospitals are members of IHA. IHA is a voluntary (501-c (6)) nonprofit corporation that exists to serve the public by serving hospitals and integrated health systems. The association and its membership are bonded by a common goal – the promotion, attainment and maintenance of the health and well-being of Iowa people and communities. The mission of IHA is to represent Iowa hospitals and support them in achieving their missions and goals. IHA's vision is to be Iowa's most trusted, respected and influential leader in health policy and advocacy as well as a valued resource for information and education. The IHA works with member hospitals to improve delivery, organization and management of health care services.

The Iowa Communications Network (ICN) is a state owned common carrier providing broadband services to a statutorily limited pool of eligible users on a state of the art restricted access network. The ICN was created by Iowa statute, (Iowa Code Chapter 8D) is funded by user fees and is governed by Chapter 7 (751) of the Iowa Administrative Code. The only authorized users of the ICN are hospitals and physician clinics, along with educational entities (K-12 schools, colleges and universities), libraries, US Postal Service, and state and federal government. The ICN fiber network is a statewide network, with Points of Presence (POPS) in all 99 Iowa counties. The ICN owns and maintains many of the connections to the ICN network. ICN's statutory authorization allows the connection of Iowa hospitals to the ICN for the provision of telemedicine and health care services. Given its specific statutory mission and focus, the ICN was in a unique position to play the role of the IRHTP's technical advisor and to guide the design and development of the RFPs so that the resulting last mile facilities can seamlessly interoperate with the ICN. There is no other backbone provider with a similar mission or scope of functionality throughout Iowa.

The FCC Rural Health Care Pilot Program will fund 85% of the cost for the fiber and electronics build-out and implementation of any 20 years indefeasible right of use (IRUs) contracts. The remaining 15% will be paid for by each participating hospital. Other users (ineligible providers) will pay 100% of the costs to connect to the IRHTP network and will pay a fair share of the core electronics costs. Once the fiber and electronics are installed, tested, documented and accepted, through an agreement between IRHTP/IHA and the ICN, the ICN will maintain, operate and manage all fiber links and transport systems. With the completion of the fiber and electronics build-out and acceptance and payment by the hospitals and the FCC, the IRHTP project using FCC Rural Health Care Pilot Program funds is complete.

With acceptance of the fiber link and transport systems IRHTP participating hospitals initial use of the broadband network is anticipated to include simple point to point connectivity. Potential applications developed and initiated by IRHTP participating hospitals and systems may include: transmission of various image files, PACS consolidation, remote radiology reads, specialty consultations (e.g. cardiology, dermatology and psychiatry), remote ICU and pharmacy monitoring (e-ICU, e-pharmacy), administrative (e.g. billing) and clinical data (e.g. EMR) transmission, various patient portals, healthcare Intranet, clinical and non-clinical education and

training programs provided on a network-wide basis (distance learning) and consolidation or centralization of various back office and IT functions (remote server hosting, remote server back-up and storage, health IT service, centralized billing and accounting). Enterprise activities of hospitals in the same system will initiate similar applications but just for their system hospitals. As applications are initiated greater amounts of bandwidth will be needed and used by participating hospitals.

Through an agreement with the ICN for administration, operation and maintenance of the dedicated network, use of the network will be initiated by hospitals contracting with the ICN for broadband service. The cost of maintaining the new last mile fiber connections, network electronics, co-location fees and wavelength service fees will be covered by standardized monthly connection and bandwidth fees. Under Iowa statute, the monthly circuit fees (rates) charged by the ICN for broadband usage must cover the costs of operating and maintaining the dedicated health care network. Standardized circuit fees based on broadband usage will provide a sustainable operational model for all members of the consortium. The FCC Universal Services Rural Health Care Program may be used by IRHTP eligible rural hospitals to help pay for circuit fees. At a minimum, eligible rural hospitals should be able to take advantage of the 25% discount for internet support but hope that the circuit fees charged by the ICN for broadband usage will be eligible for the urban/rural discount model provided for telecommunications services. Even without this RHCP support IRHTP rural hospitals circuit fees will be paid by the hospitals themselves and do not constitute a barrier to sustainability.

There are three types of costs associated with the network which are:

- Operation and maintenance of the fiber and network,
- Future replacement of the electronics, and
- Provision of circuits.

These costs are recognized as allowable costs and will be incorporated into each hospital's payment by various third party payers (e.g. Medicare, Medicaid, commercial insurance companies and health plans) for the care provided to patients. The IRHTP program has 61 critical access hospitals that are reimbursed by Medicare at 101% of allowable costs attributable to acute inpatient, outpatient and swing bed care.

The maintenance and operation costs are based on actual experience of the ICN in maintaining fiber and electronics. The monthly maintenance fees will be adjusted annually based on actual experience of the IRHTP network. The monthly maintenance fee is estimated to be $329 per connected user.

Funding for future replacement is achieved through depreciating the assets over their useful life and funding (saving) the reimbursed depreciation expense. The monthly equipment replacement fee is $265. The Iowa Hospital Association will administer the equipment replacement fund on behalf of the participating hospitals and other users.

The circuit fees were developed and based on the cost incurred by the ICN to provide circuits. The fees are determined on the bandwidth used and the distance from the

network core. The longer the distance from the network core the higher the fee. In January 2009, the Iowa Telecommunications and Technology Commission (ITTC), as required by Iowa statute, approved the following rate structure for any user of the IRHTP network closest to the core.

Iowa Communications Network
January 2009
Ethernet Circuit Fees – IRHTP Network

Service B/W - Ethernet	0 - 30 Meg	31 – 60 Meg	61 – 100 Meg	101 – 200 Meg	1 Gigabit
Ethernet Service	$ 350	$ 425	$ 500	$ 625	$ 2150

Monthly fees for bandwidth, maintenance and equipment replacement will be collected from each user of the network. The following table summarizes the revenue and expenses of the IRHTP network for the first ten years of operation.

Iowa Rural Health Telecommunications Program
Revenue and Expense Projections

	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Network Revenue										
Fiber and Electronics Maintenance	$85,305	$277,242	$358,282	$358,282	$358,282	$358,282	$358,282	$358,282	$358,282	$358,282
Circuit Fees	137,217	445,956	576,313	576,313	576,313	576,313	576,313	576,313	576,313	576,313
Electronics Replacement	68,340	222,105	287,028	287,028	287,028	287,028	287,028	287,028	287,028	287,028
Total Revenue	$290,862	$945,303	$1,221,623	$1,221,623	$1,221,623	$1,221,623	$1,221,623	$1,221,623	$1,221,623	$1,221,623
Network Expense										
Fiber and Electronics Maintenance	$85,305	$277,242	$358,282	$358,282	$358,282	$358,282	$358,282	$358,282	$358,282	$358,282
Circuit Fees	137,217	445,956	576,313	576,313	576,313	576,313	576,313	576,313	576,313	576,313
Total Expense	$222,522	$723,198	$934,595	$934,595	$934,595	$934,595	$934,595	$934,595	$934,595	$934,595
Revenue over Expense	$68,340	$222,105	$287,028	$287,028	$287,028	$287,028	$287,028	$287,028	$287,028	$287,028

The table reflects 20 hospitals connected in 2009, 65 hospitals connected in 2010 and 84 sites in 2011.
The excess of revenue over expense each year will be the equipment replacement fund administered by the Iowa hospital Association on behalf of the participating hospitals.

The IRHTP sustainability plan was approved on June 30, 2009.

10. Provide detail on how the supported network has advanced telemedicine benefits:

IRHTP has completed the competitive bidding, contracting and 466A award/FCL processes and construction began in October 2009. ***The network core electronics were installed, tested and became operational in August 2010 with four hospitals connected to and using the network by September 30, 2010. Image transmission, administrative data transmission, system administrative services and Internet connectivity are the principle uses at this time.***

11. Provide detail on how the supported network has complied with HHS health IT initiatives:

IRHTP has completed the competitive bidding, contracting and 466A award/FCL processes and construction began in October 2009. ***The network core electronics were installed, tested and became operational in August 2010 with four hospitals connected to and using the network by September 30, 2010. The IRHTP network provides the broadband infrastructure*** **for connected hospitals to comply with HHS health IT initiatives.**

12. Explain how the selected participants coordinated in the use of their health care networks with the Department of Health and Human Services (HHS) and, in particular, with its Centers for Disease Control and Prevention (CDC) in instances of national, regional, or local public health emergencies (e.g., pandemics, bioterrorism). In such instances, where feasible, explain how selected participants provided access to their supported networks to HHS, including CDC, and other public health officials.

IRHTP has completed the competitive bidding, contracting and 466A award/FCL processes, construction began in October 2009. ***The network core electronics were installed, tested and became operational in August 2010 with four hospitals connected to and using the network by September 30, 2010. The IRHTP network provides the broadband infrastructure*** **for connected hospitals** ***to communicate with or provide access to the envisioned network. An agreement with the Iowa Department of Public Health and Iowa Homeland Security will be explored and pursued if needed in 2011.***