

Quarterly Data Report: March 31, 2012

Sanford Collaboration and Communication Channel (SC3)

The SC3 project includes Sanford Health entities and those closely affiliated with Sanford Health. The project is being coordinated under the leadership of Sanford Health.

Project Coordinator

Daryl Bouma
Technology Director
Sanford Health
5300 S Broadband Lane
Sioux Falls, SD 57108
Phone 605-328-7375
daryl.bouma@sanfordhealth.org

Alternate Project Coordinator

Scott Sylliaasen
Network and Security Manager
Sanford Health
5300 S Broadband Lane
Sioux Falls, SD 57108
Phone 605-328-7364
scott.sylliaasen@sanfordhealth.org

Organization legally and financial responsible

Sanford Health
1305 West 18th Street
Sioux Falls, SD 57117-5039

2. Identify all health care facilities included in the network

The following is a list of health care facilities that are included in the network. We believe all facilities under discussion meet section 254 of the 1996 Act's definition of an eligible health care provider as defined by section (v) not-for-profit hospital or (vi) rural health clinic.

Facility	Address	County	Phone number	Census Tract Code	RUCA Primary	RUCA Secondary
Douglas County Memorial Hospital	Armour, SD 57313	Douglas	605-724-2159	9696.00	10	10.1
Sanford Clinic Acute Care 34th & Kiwanis	2701 S. Kiwanis Ave. Sioux Falls, SD 57105	Minnehaha	605-332-8883	0012.00	1	1.0
Sanford Womens Health Plaza 57th & Western	5001 S Western Ave Sioux Falls SD 57108	Minnehaha	605-328-9700	0101.00	1	1.0
Sanford Children's Clinic Mitchell	1200 S. Burr Street, Suite B Mitchell, SD 57301	Davison	605-328-9041	9629.00	4	4.0

Sanford Clinic Family Medicine 49th & Oxbow	3401 W. 49th St. Sioux Falls, SD 57106	Minnehaha	605-328-9042	0011.01	1	1.0
Sanford Clinic Family Medicine 26th & Sycamore	4405 E. 26th St Sioux Falls, SD 57103	Minnehaha	605-332-2883	0018.02	1	1.0
Sanford Clinic Behavioral Health	1621 S. Minnesota Avenue Sioux Falls, SD 57105	Minnehaha	605-328-4700	0015.00	1	1.0
Sanford Hospital Canton-Inwood	400 N. Hiawatha Dr. Canton, SD 57013	Lincoln	605-987-2621	0102.00	7	7.1
Sanford Clinic Acute Care 69th & Minnesota	6110 S Minnesota Avenue Sioux Falls, SD 57108	Lincoln	605-328-5800	0101.01	1	1.0
Sanford Clinic Acute Care 41st & Sertoma	7210 W. 41st Street Sioux Falls, SD 57106	Minnehaha	605-328-9600	0011.03	1	1.0
Sanford Hospital Deuel County	701 3rd Ave. S. Clear Lake, SD 57226	Deuel	605-874-2141	9537.00	10	10.0
Sanford Clinic Family Medicine 4th & Sycamore	600 N. Sycamore Sioux Falls, SD 57110	Minnehaha	605-328-2999	0004.03	1	1.0
Sanford Clinic Clark	117 West 1st St. Clark, SD 57225	Clark	605-532-3676	9556.00	10	10.0
Sanford Mid Dakota Medical Center	300 S. Byron Blvd. Chamberlain, SD 57325	Brule	605-234-5511	9732.00	10	10.0
Sanford Vermillion Medical Center	20 S. Plum Vermillion, SD 57069	Clay	605-624-2611	9657.00	4	4.0
Sanford Hospital Webster	1401 West 1st Street Webster, SD 57274	Day	605-345-3336	9528.00	10	10.0
Sanford Clinic Lake Norden	511 Main Ave. Lake Norden, SD 57248	Hamlin	605-785-3633	9552.00	10	10.5
Sanford Clinic Family Medicine Brandon	1200 E Holly Blvd Brandon, SD 57005	Minnehaha	605-582-5920	0105.00	2	2.0
Pioneer Memorial Viborg Clinic	315 N. Washington St. Viborg, SD 57070	Turner	605-326-5161	9652.00	10	10.4
Sanford Clinic Watertown	901 4th Street NW Watertown, SD 57201	Codington	605-866-1578	9543.00	4	4.0
Sanford Clinic Ear, Nose, and Throat Watertown	600 4th Street NE Watertown, SD 57201	Codington	605-882-1672	9543.00	4	4.0
Women's Health	401 E. 8th St. Sioux Falls, SD 57103	Minnehaha	605-334-5099	0005.00	1	1.0

Sanford Clinic Dakota Plains	640 E. Sioux Ave. Pierre, SD	Hughes	605-224-2010	9779.00	4	4.0
Sanford Clinic Watertown Imaging	891 14th Ave NW Aberdeen, SD 57201	Codington	605-886-4180	9543.00	4	4.0
Sanford Children's Clinic – Aberdeen	3015 3rd Ave SE Aberdeen, SD 57401	Brown	605-725-6700	9518.00	4	4.0
Sanford Clinic Family Medicine Huron	433 Kansas Ave SE Huron, SD 57350	Beadle	605-352-2117	9569.00	4	4.0
Sanford Hospital Luverne	1600 Kniss Avenue Luverne, MN 56156	Rock	507-283-2321	9702.00	7	7.0
Sanford Adrian Care Center	601 Louisiana Avenue Adrian MN 56110	Nobles	507-483-2668	9902.00	10	10.5
Sanford Tracy Medical Center	251 Fifth St E Tracy MN 56175	Lyon	507-274-6121	9607.00	10	10.5
Sanford Clinic Worthington	1680 Diagonal Road Worthington, MN 56187	Nobles	507-372-3840	9904.00	4	4.0
Sanford Regional Hospital Worthington	1018 6th Ave Worthington, MN 56187	Nobles	507-372-2941	9905.00	4	4.0
Sanford Clinic Windom	308 10 Street Windom, MN 56101	Cottonwood	507-427-3332	9704.00	7	7.0
Ortonville Area Health Service	450 Eastvold Ave Ortonville, MN	Big Stone	320-839-2502	9503.00	10	10.6
Data Center Sites						
Peterson Center	5300 S Broadband 57108	Minnehaha	605-328-7364	0101.00	1	1.0
Sanford Medical Center	1305 W. 18th Street 57117	Minnehaha	605-328-7364	0013.00	1	1.0

3. Network Narrative

- a. The network is a MPLS network.
- b. The various sites connect to the MPLS network with speeds varying from 5 Mbps to 25 Mbps. The speed is based on the need of the location and the sustainable cost. The two data center sites are connected to the network with bandwidth adequate to support the incoming data traffic.
- c. The SC3 network is not connect to NLR or Internet2.
- d. The MPLS network consist entirely of provisioned services.
- e. N/A

4. List of Connected Health Care Providers

As of March 31, 2012 thirty three sites are connected to the network. This is down two from the thirty five that were included in our initial application. These two sites were closed and no longer require service. The following is a list of the sites that are connected.

1. Sanford Womens Health Plaza 57th & Western
2. Sanford Clinic Behavioral Health
3. Sanford Clinic Acute Care 69th & Minnesota
4. Sanford Clinic Acute Care 41st & Sertoma
5. Sanford Clinic Family Medicine 49th & Oxbow
6. Sanford Clinic Acute Care 34th & Kiwanis
7. Sanford Children's Clinic – Aberdeen
8. Ortonville Area Health Service
9. Peterson Center
10. Sanford Medical Center
11. Sanford Vermillion Medical Center
12. Sanford Clinic Dakota Plains
13. Sanford Clinic Watertown
14. Sanford Hospital Webster
15. Sanford Hospital Canton-Inwood
16. Sanford Hospital Luverne
17. Sanford Regional Hospital Worthington
18. Sanford Hospital Deuel County
19. Sanford Tracy Medical Center
20. Sanford Clinic Windom
21. Sanford Clinic Family Medicine 26th & Sycamore
22. Sanford Clinic Family Medicine 4th & Sycamore
23. Sanford Adrian Care Center
24. Sanford Mid Dakota Medical Center
25. Sanford Clinic Worthington
26. Sanford Family Medicine Brandon
27. Pioneer Memorial Viborg Clinic
28. Douglas County Memorial Hospital
29. Sanford Clinic Lake Norden
30. Sanford Clinic Clark
31. Women's Health
32. Sanford Children's Clinic Mitchell
33. Sanford Clinic Ear, Nose and Throat Watertown

5. Non-Recurring and Recurring Costs

- a. There were not any costs related to network design.
- b. There were not any costs related to network equipment.
- c. There were not any costs related to infrastructure deployment / outside plant.
- d. There will not be any costs associated to connections to Internet2, NLR or the public internet.
- e. The project costs have been established and approved. Recurring costs will be 789,983.51 over the term of the project and non-recurring cost will be \$22,009.90.
- f. We are not anticipating any costs related to network management.
- g. We are not anticipating any other costs.

6. Cost Apportionment

- a. The network provider charges a monthly fee specific to each of the locations connected to the MPLS network. The matching portion of this cost is allocated to that particular location. The cost for the connections to the two data centers is shared by all connecting locations and is allocated based on the percentage of the entire bandwidth allocated to that particular facility. For example if a location has a 10 mbps connection and the cumulative bandwidth for the entire network is 500 mbps, that particular location is allocated $10/500^{\text{th}}$ of the cost of the data center connections.

- b. All of the locations connected to the network are eligible participants. Each of these locations will be expected to pay their matching portion of the actual cost.
- c. We are not anticipating contributions from other sources.
- d. The 85% contribution by the rural health pilot program is making bandwidth affordable to facilities that otherwise would not be able to afford it. The additional bandwidth will allow for telehealth capabilities that up to this point were not feasible because of the limited bandwidth. The additional bandwidth also allows for better support of the electronic health record.

7. Ineligible Entity Requirements

Three of the hospital locations have small adjoining Long term care facilities, the bandwidth requirements have been kept separate from this project.

8. Project Management Plan

The project's core team consists Sanford Health's Technology Director (Daryl Bouma) and Network and Security manager (Scott Sylliaasen).

Tasks completed this quarter

1. None

Tasks targeted for completion during next quarter

1. Plan for transition of these circuits back to the traditional program.

Tasks scheduled for completion beyond next quarter

1. In December 2012 we will work on transitioning the site back to the traditional program.

9. Sustainability

Funding for the unreimbursed portion of the project:

Sanford Health and the other member of the SC3 group understand that a portion of the project will not be reimbursed by the project. We understand that the Rural Health Pilot Program requires a 15% match. In addition, we understand that the funding received from the Rural Health Pilot program will not be sufficient to fund the entire project. All sites have been evaluated and those sites that are not part of the SC3 project continue to be funded by the traditional USF program. Because our project is an upgrade to existing T1 circuits, we have found that the total network cost will actually decrease during the term of the Rural Health Pilot program. Our budget for the fiscal year ending June 30, 2012 has sufficient funds to support the project. Budget for the upcoming fiscal year has been approved. Our project will continue for approximately another 11 months and then will transition back to the traditional USF program. I have included the costs for this transition in our 5 year budget forecast and anticipate adequate funding.

The following chart illustrates 3 of our network locations. You will notice that in all three cases, the monthly costs will decrease during the term of the Rural Health Pilot program. Now that the program has been completed, we have found this illustration to be accurate.

Location	Current # of T1s	Proposed Upgrade	Current Monthly Costs			Anticipated during pilot program			Anticipated after pilot program		
			Total*	USF Reimb	Sanford	Total	Pilot Pgm Share	Sanford Share	Total	USF	Sanford
Vermillion	2	25 Mb	1,207.00	728.00	479.00	800.00	680.00	120.00	800.00	290.00	510.00
69th & Minnesota	3	10 Mb	317.00	0.00	317.00	357.00	303.45	53.55	357.00	0.00	357.00
Mitchell Clinic	1	5 Mb	788.00	534.00	254.00	350.00	297.50	52.50	350.00	44.00	306.00

* Includes Router maintenance cost

Sanford and the other SC3 members are committed to Sustaining the network after the Pilot Program:

As we looked at upgrading bandwidth at the various locations, we considered the financial impact that the upgrade would have after the conclusion of the pilot program. We have upgrade bandwidth only at the locations that can justify the increased costs and who are committed to sustaining the upgraded connections. At the conclusion of the Rural Health Pilot Program our plan is to move the upgraded circuits to the current USF program. You have our commitment that SC3 has viewed this project with a focus on the long term. As with all technologies, we expect the cost of Ethernet services to continue decreasing. Two years from now, the cost of the Ethernet service may be very much in line with current T1 costs. We believe this further adds to our case that we will have no problems sustaining the network. This program has been very positive for SC3 and we are hoping that the traditional USF program adopts some of the funding attributes to the Rural Health Pilot program.

Use of the Network by Non-Eligible Entities:

A handful of the locations have long term care facilities attached to the hospital. We understand that long term care facilities are not eligible under this program. We have evaluated each of these facilities on a case by case basis. We have made arrangements to keep the bandwidth separate from the Rural Health Pilot program.

10. Telemedicine Benefits

The integration of these remotes sites into our electronic medical records has been the first priority of the SC3 project and any of its partner sites. As we have built out our network we have focused on how this new infrastructure and partnerships have improved the delivery of care. This infrastructure creates the bridge that have allowed all participating sites to communicate and collaborate more efficiently and effectively. By leveraging the infrastructure provided by the funding and the telemedicine equipment currently available, our regional partners have access to services that had not been previously provided in their communities. Our goal will be to explore the ways this new “bridge” to our partner sites has improved healthcare delivery.

11 & 12. Compliance

As we have migrated sites, we have done so in compliance with the HHS health IT initiatives.