Federal Communications Commission Rural Health Care Pilot Program
Wyoming Network for Telehealth (WyNETTE) Quarterly Data Report
29 October 2012

1. *Project Contact and Coordination Information*

a. Identify the project leader(s) and respective business affiliations.

Dr. Rex Gantenbein, University of Wyoming (Associate Project Coordinator)
Larry Biggio, Wyoming Health Information Organization

b. Provide a complete address for postal delivery and the telephone, fax, and e-mail address for the responsible administrative official.

Dr. Dorothy C. Yates, Associate VP for Research and Economic Development
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c. Identify the organization that is legally and financially responsible for the conduct of activities supported by the award.

University of Wyoming

d. Explain how project is being coordinated throughout the state or region.

A consortium of state agencies, private health organization and professional and community organizations exists to coordinate the network development with other telehealth-related activities in Wyoming. Members were appointed by the Director of the Wyoming Department of Health. The group meets monthly, and reports on this project are given at each meeting. In lieu of developing a separate advisory committee, the consortium has assumed the responsibility of developing the governance and financial structure for the network in cooperation with the University.

Project and fiscal management has been provided by staff at the University of Wyoming, through funding from a HRSA ORHP Rural Health Care Network Development grant. This grant ended in April 2011; however, funding from a HRSA Office of Health Information Technology grant was used to continue support for a skeleton staff, consisting of the project manager and a technician. The project manager has resigned to take another position, and the technician has been assigned other duties. No staff other than the PI remain to manage the project.

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

A list of facilities in the state participating in the project is provided in Attachment A. Several sites, as shown in the attachment, have voluntarily withdrawn from the project, as they found the network underutilized and/or insufficient for their connectivity needs.

3. Network Narrative.

a. Brief description of the backbone network of the dedicated health care network

The network, as implemented, consists of an ATM-based “cloud” through which all participating sites will be connected. The selected vendor is providing the equipment, lines, and management of the network as part of their contract.

b. Explanation of how health care provider sites will connect to (or access) the network, including the access technologies/services and transmission speeds

Hospitals with more than 25 beds were connected with dual T1 connections; all other sites were connected with single T1 connections. All sites were provided with routers to connect to the network as part of the project.

c. Explanation of how and where the network will connect to a national backbone such as NLR or Internet2

A collection point was established at the Division of Information Technology at the University of Wyoming as part of the project. The University has a redundant connection to Internet2 via the Front Range Gigapop that has been available to the sites.

d. Number of miles of fiber construction, and whether the fiber is buried or aerial

No fiber was installed as part of this project. All connections used existing copper wire.

e. Special systems or services for network management or maintenance (if applicable) and where such systems reside or are based

All network services and maintenance are being managed by the vendor.

4. List of Connected Health Care Providers.

See Appendix A. The network is being used for a small number of healthcare operations (see item 10 below).

5. Identify the following non-recurring and recurring costs, where applicable, shown both as budgeted and actually incurred for the applicable quarter and funding year to-date.

An invoice was paid by USAC in January in the amount of $435,642.99 to cover recurring and non-recurring charges through August 2011. Three line items in the original invoice were not allowed due to inconsistencies with the documented costs. A new invoice in the amount of $15,286.44 was sent to the vendor in March 2012 to cover these three items. To date, the invoice has not been submitted by the vendor to USAC.

The matching funds paid to the vendor total $79,575.78. This represents 15% of the amounts sent on invoices to the vendor thus far.

A new invoice covering monthly recurring charges from September 2011 through January 2012 is in preparation. However, discrepancies between the amounts billed and those allowed in the NCW are delaying this invoice. See item 8a below.

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

a. Explain how costs are identified, allocated among, and apportioned to both eligible and ineligible network participants.

Costs were specified in the vendor contract. The contract indicates that costs will be distributed equally among the participants that receive the same services (T1 or dual T1 connectivity). The actual costs as invoiced in November vary widely depending on the service provider and the location, but the total costs thus far are less than the contracted amount for both the non-recurring and recurring

costs.

b. Describe the source of funds from eligible and non-eligible participants.

The community mental health/substance abuse centers in the state continuing to participate in the project have pledged 15% matching funds to the project, once the initial matching funds have been expended (see next section).

c. *Show contributions from all other sources.*

The project has received $115,000 in matching funds from the Wyoming Department of Health through its Division of Emergency Preparedness ($100,000) and the State Office of Rural Health ($15,000). Funding from the latter account has been fully expended, but a balance remains in the former. Based on the most recent costs, these funds are estimated to be expended when invoices are submitted for February through April 2012. A meeting with the remaining sites was held in October 2012 and invoices are being prepared for the matching funds.

d. Explain how the selected participant's minimum 15 percent contribution is helping to achieve both the selected participant's identified goals and objectives and the overarching goals of the Pilot Program.

The matching funds demonstrate a commitment to developing telehealth capacity in Wyoming from both the State and private healthcare providers. Such commitment is necessary to ensure its adoption and sustainability.

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

No ineligible entities are currently participating.

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

a. The project's current leadership and management structure and any changes to the management structure since the last data report.

Responsibility for the invoicing process with WyNETTE and other projects involving the same vendor has been transferred to the vendor's main offices in Louisiana. A recent discussion with vendor staff there and in the Cheyenne office (also included were USAC representatives from the RHCPP) uncovered a revised contract that was sent by the vendor to the University's administrative offices in October 2010 without notifying the project management. This revised contract more closely matches the actual amounts being billed, but there are still some variations that need to be resolved before additional invoices can be submitted. The vendor is reviewing the costs vis-à-vis this contract.

b. The project schedule.

We intended continue invoicing for the remaining sites until the allocated funds have been expended. Based on current costs and assuming the willingness of the sites to provide matching funds, we anticipate this to happen in June 2013.

TASK	DEADLINE
Complete network design	29 August 2008 (completed)
Collect Letters of Agency	30 October 2008 (completed)

Submit Form 465 for informal review	15 November 2008 (completed)
Revise Form 465 and submit	10 April 2009 (completed)
Review responses to Form 465	10 June 2009 (completed)
Execute vendor contract	15 March 2010 (completed)
Submit Form 466A	30 May 2010 (completed)
Deploy network	30 November 2010 (completed)
Submit Form 467/FCL received	9 November 2010 (completed)
Begin invoicing	15 November 2011 (completed)

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

   A formal sustainability plan was submitted as part of the Form 466A process. It was accepted by the FCC prior to the issue of the Funding Commitment letter. A copy of this plan was previously provided and has not changed.

   As noted in previous reports, all hospitals and primary clinics initially connected to the network have requested to be disconnected from the network. This was accomplished in January 2012. The state telehealth consortium is currently working with these sites to transfer them to the regular Rural Health Care program. With the loss of these sites from the network, we are working with the remaining sites (largely mental health and substance abuse centers) and the vendor to make changes to the network that will lead to sustainability.

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

    The remaining sites in the network are using the connections to provide mental and behavioral health services to distant sites. Many of the sites that have discontinued participation are also providing primary and specialty care to other locations through alternative communication mechanisms.

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

    The network has not addressed these 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.*

    At this time, this coordination has not taken place.

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ATTACHMENT A: Health care facilities participating in the Wyoming Network for Telehealth
NOTE: Highlighted sites were disconnected from the network as of January 2012, as discussed in previous reports.

Facility Name	Address	County	RUCA	Phone #	Facility Type	Eligible for RHCPP Funding
Big Horn Clinic (Hot Springs County Memorial Hospital)	156 N 6th Street, Basin WY 81410	Big Horn	10	307-568-2499	Public, non-profit rural health clinic	YES: certified by State of Wyoming
Campbell County Memorial Hospital	501 S. Burman Ave., Gillette WY 82717	Campbell	4	307-688-1551	Public, non-profit hospital	YES: certified by State of Wyoming
Crook County Medical Services District	713 Oak Street, Sundance WY 82729	Crook	10	307-283-3501	Public, non-profit hospital	YES: certified by State of Wyoming
Hot Springs County Memorial Hospital	150 E. Arapahoe, Thermopolis WY 82443	Hot Springs	7	307-864-3121	Public, non-profit hospital	YES: certified by State of Wyoming
Hulett Clinic (Crook County Medical Services District)	122 Main Street, Hulett WY 82720	Crook	10.5	307-467-5281	Public non-profit rural health clinic	YES: certified by State of Wyoming
Ivinson Memorial Hospital	255 North 30th St., Laramie WY 82070	Albany	4	307-742-2141	Public, non-profit hospital	YES: certified by State of Wyoming
Johnson County Memorial Hospital	497 West Lott, Buffalo WY 82834	Johnson	7	307-684-5521	Public, non-profit hospital	YES: certified by State of Wyoming
Memorial Hospital of Carbon County	2221 West Elm Street, Rawlins WY 82301	Carbon	7	307-324-8213	Public, non-profit hospital	YES: certified by State of Wyoming

Memorial Hospital of Converse County	111 S. Fifth Street, Douglas WY 82633	Converse	7	307-358-1454	Public, non-profit hospital	YES: certified by State of Wyoming
Moorcroft Clinic (Crook County Medical Services District)	101 West Crook, Moorcroft WY 82721	Crook	10.5	307-756-3414	Public, non-profit rural health clinic	YES: certified by State of Wyoming
North Big Horn Hospital District	1115 Lane 12, Lovell WY 82431	Big Horn	10	307-548-5200	Public, non-profit hospital	YES: certified by State of Wyoming
Platte Valley Medical Clinic	1208 S. River St., Saratoga WY 82331	Carbon	10.6	307-326-8381	Public, non-profit rural health clinic	YES: certified by State of Wyoming
Powell Valley Healthcare	777 Avenue H, Powell WY 82435	Park	7	307-754-2267	Public, non-profit hospital	YES: certified by State of Wyoming
South Big Horn County Hospital District	88 South US Hwy. 20, Basin WY 82410	Big Horn	10	307-568-3311	Public, non-profit hospital	YES: certified by State of Wyoming
South Lincoln Medical Center	711 Onyx Street, Kemmerer WY 83101	Lincoln	7	307-877-4401	Public, non-profit hospital	YES: certified by State of Wyoming
Star Valley Medical Center	910 Adams Street, Afton WY 83110	Lincoln	10	307-885-5800	Public, non-profit hospital	YES: certified by State of Wyoming
Univ. of Wyoming College of Health Sciences	236 Health Sciences Center, Laramie WY 82071	Albany	4	307-766-6556	State university offering health care education	YES: other eligible entity

West Park Hospital	707 Sheridan Avenue, Cody WY 82414	Park	7	307-578-2488	Public, non-profit hospital	YES: certified by State of Wyoming
West Park Hospital Cathcart Medical Office Building	424 Yellowstone Highway, Cody WY 82414	Park	7	307-578-2488	Public, non-profit hospital (new location)	YES: certified by State of Wyoming
Weston County Health Services	1124 Washington, Newcastle WY 82701	Weston	7	307-746-4491	Public, non-profit hospital	YES: certified by State of Wyoming
Wyoming State Hospital	831 Highway 150 South, Evanston WY 82930	Uinta	4	307-789-3464	Public, non-profit hospital	YES: State-operated facility
Big Horn Basin Counseling Service	116 South 3rd St., Basin WY 82410	Big Horn	10	307-568-2020	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services
Big Horn Basin Counseling Service	1114 Lane 12, Lovell WY 82431	Big Horn	10	307-548-6543	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services
Carbon County Counseling Center	112 E. Bridge, Saratoga WY 82331	Carbon	10.6	307-324-7156	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services

Central Wyoming Counseling Center	1430 Wilkins Circle, Casper WY 82601	Natrona	1	307-237-9583	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services
Fremont Counseling Service: Lander	748 Main Street, Lander WY 82520	Fremont	7	307-332-2231	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services
Fremont Counseling Service: Riverton	1110 Major Ave, Riverton WY 82501	Fremont	4	307-856-6587	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services
High Country Behavioral Health	389 Adams, Afton WY 83110	Lincoln	10	307-885-9883	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services
High Country Behavioral Health	821 Sage Avenue, Kemmerer WY 83101	Lincoln	7	307-877-4466	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services

High Country Behavioral Health	24 Country Club Lane, Pinedale WY 82941	Sublette	10	307-367-2111	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services
Jackson Hole Community Counseling Center	640 E. Broadway, Jackson WY 83001	Teton	4	307-733-2046	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services
Northern Wyoming Mental Health Center: Buffalo	521 W. Lott St, Buffalo WY 82834	Johnson	7	307-684-5531	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services
Northern Wyoming Mental Health Center: Newcastle	420 Deanne Ave., Newcastle WY 82701	Weston	7	307-746-4456	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services
Northern Wyoming Mental Health Center: Sheridan	1221 West 5th Street, Sheridan WY 82801	Sheridan	4	307-674-4405	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services

Northern Wyoming Mental Health Center: Sundance	420-1/2 Main St., Sundance WY 82729	Crook	10	307-283-3636	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services
Northern Wyoming Mental Health Center: Supported Independence Program	1701 West 5th Street, Suite C, Sheridan WY 82801	Sheridan	4	307-674-5534	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services
Yellowstone Behavioral Health Center	2538 Big Horn Avenue, Cody WY 82414	Park	7	307-587-2197	Public, non-profit mental health clinic/ substance abuse center	YES: provides core outpatient services