A 7/13/2011 interview by John Stritt with Rick Golden and Tom Rolfes about the Nebraska State Telehealth Network (NSTN)

John Stritt: What is the involvement of the Health community on Network Nebraska?

Rick Golden - I kind of look at "Network Nebraska" as having three different legs. One is state agencies (OCIO managed), one is education (CAP managed) and the third is telehealth (telehealth governing board managed). Each has their own processes and management with very little overlap. Tom Rolfes - The Nebraska Telehealth Network is managed by UNCSN but all their videoconferencing is on their private T-1 network, not on Network Nebraska.

John: Does some of the equipment that is being supported by K-20 also support the telehealth network?

Rick - No. There may be a small amount of UNCSN/University equipment that supports telehealth, but none of the Network Nebraska--Education K-20 equipment does.

Tom - Not that I know of but I'm running this question past Rick Golden and Leona Roach.

John: How about personnel?

Rick - Yes, some of the same CSN networking personnel that are involved in the k-20 network are also involved in the Telehealth network (not Ben though). Their telehealth time is not billed to Network Nebraska--Education, though.

Tom - Some of the UNCSN operations and support team serves K-20, the University of Nebraska, and Telehealth.

John: What about bandwidth?

Rick - Telehealth does not use any of the Network Nebraska Education bandwidth and Network Nebraska Education does not use any of the Telehealth bandwidth. FCC/E-rate restrictions prevent open sharing. There is hope that eventually the hospitals will be able to have sessions with the schools (like the school nurse), but for now it is not allowed. If there are any connections, it would be using an open Internet bandwidth (i.e. a person at Good Sam hospital may look at ESU 10's web site through their respective internet connections). The NN Telehealth network does not support providing internet services to the hospitals. They must have their own internet service. There is one other caveat to this statement. There are State Health Department agencies on the telehealth network. They are allowed to do just about anything that is a part of their mission. Although I am not aware of it, that may include having a video session with a K-12 school.

Tom - If "bandwidth" refers to statewide backbone or Internet, there is no crossover between telehealth and K-20. In the future, in some areas of the state, it's possible that some community fiber connections may serve virtual private networks for both education and health care.

John: What about Internet2 services?

Rick - The telehealth network is not allowed to access commodity internet across NSTN. At this time, that includes Internet 2. There is a special telehealth/Internet 2 membership, but NSTN is not looking at it right now (don't remember exactly, but may be \$100k+). NSTN may want to look at using connections to GPN (regional multi state network if UNL would allow it).

Tom - There is a new, limited service relationship between Internet2 and the national rural health care pilot project in that they are allowing health care to ride Internet2 for the first time (in addition to University-based research hospitals). However, most state networks do not serve health care, but that trend is changing. Remember the U.S. UCAN Task Force I'm serving on? As you can see by the attached pdf, there are approximately 10,460 hospitals and clinics in the

United States, with 227 of them in Nebraska. Although Nebraska state statute is mum on Network Nebraska serving telehealth (N.R.S. 86-5,100 only lists K-20 education, state and local government, which could include state and county hospitals), it's possible that Network Nebraska could serve telehealth or at least allow their network to peer with Network Nebraska in Omaha or Lincoln, so that they could ride Internet2 to Kansas City.

John: Do the telehealth and K20 network share services and also share budgetary responsibility?

Rick - For the most part, the two networks are completely separated. UNCSN and our NOC are used to manage both networks, how ever our time is also separated between the two projects. We do not charge telehealth time to education and we do not charge education time to telehealth. Tom - Right now, there is no sharing of services, no sharing of transport or Internet and no sharing of costs. We do know that the Nebraska State Telehealth Network receives approximately \$950,000 per year from the Nebraska Universal Service Fund, of which K-20 education pays in 6.95% of every telecom dollar expended. [rough estimate of educational contributions = \$840,000/year)

John: We know that the telehealth group has some restrictions but if we have equipment that can benefit both on NN, we should be using it and also sharing the costs.

Rick - The telehealth network is currently based on all T1 circuits. The FCC/E-rate pays for most of their circuit costs and they get additional funding from the Public Service Commission for equipment. The hope is that the FCC/Erate process will be changed to allow a more general usage of common infrastructure between telehealth and education. For now it has been easier to keep them separate and not manage all of the usage paperwork that would be necessary to share facilities. Tom - Telehealth has similar restrictions to K-12 about use of their bandwidth to remain eligible for the federal universal service fund and the Nebraska Universal Service Fund. Coincidentally, I just had a conversation yesterday with Anne Byers, NITC Manager for eHealth, about the possibility of telehealth collaborating with Network Nebraska. She and I will begin discussions

John: From web development and design, we also feel it would be good to have telehealth linked to the NN site.

with Brenda Decker, State CIO, the week of August 15.

Tom - Right now, there is no statutory link between telehealth and Network Nebraska (see reference below), only the cooperative management service provided by UNCSN, but I'm definitely in favor of opening up the discussions of cooperation between Network Nebraska and telehealth, and also possibly public safety and local government, as suggested by the U.S. UCAN project. Neb.Rev.Stat. 86-5,100: *The Chief Information Officer, in partnership with the University of Nebraska, shall develop and maintain a statewide, multipurpose, high capacity, scalable telecommunications network to be called Network Nebraska. The network shall consist of contractual arrangements with providers to meet the demand of state agencies, local governments, and educational entities as defined in section <u>79-1201.01</u>.*

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