

# Viewpoints: High-speed Net improves health care

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Our ability to connect through high-speed Internet access – referred to generically as broadband – is improving our lives in many ways. It is helping us share information and images, research and apply for jobs, stay in touch with loved ones, and access entertainment and news.

Broadband saves consumers time and money, increases productivity in the economy, and reduces impacts on the environment. And, now, broadband will even help save lives and improve health care in California.

Clinics and hospitals in rural communities and underserved urban neighborhoods will be connected through the California Telehealth Network, or CTN, to major medical centers, trauma facilities and specialty care and, thus, able to access health and medical expertise remotely. This will both expand access to critical services and improve quality of health care. And, it has the potential to help control costs.

CTN facilities will be able to better serve patients by providing access to specialists and other health care professionals in different locations, sharing X-rays and other diagnostic tests instantaneously, and even viewing treatments and procedures from afar in distant emergency rooms or surgical centers as they happen. They will have access in real time to the best and most up-to-date information and practitioners in university teaching hospitals and other medical centers across California and the nation.

Also, all the data about patient health and outcomes can be collected and shared simultaneously to assure appropriate and effective treatment regimes for the individual patient.

Finally, with ubiquitous broadband use by all Californians, in the not-too-distant future patients will be able to be monitored at home or work for both acute episodes of illness and longer-term chronic diseases – which will save time and money for both consumers and providers by reducing unnecessary visits to medical facilities, keeping people out of hospitals, promoting efficiency in health care, and linking fragmented segments of the health care system.

For example, pediatricians in the Neonatal Intensive Care Unit at the UC Davis Medical Center in Sacramento will be able to consult via the California Telehealth Network with several rural hospitals to save lives of high-risk newborns. UCD neurosurgeons will be able to assist emergency room physicians in rural hospitals treat accident trauma victims without delay.

And, Sutter Hospital specialists in internal medicine will be able to support rural clinics in caring for patients with advanced cardiovascular disease.

The California Telehealth Network is being made possible by a \$22.1 million grant from the Federal Communications Commission with \$3.6 million match funding from the California Emerging Technology Fund, capitalized by both AT&T and Verizon through an agreement with the California Public Utilities Commission.

The University of California is currently managing the first phase of development of CTN on behalf of a

consortium of state agencies, provider and stakeholder organizations, and foundations.

Initially, more than 860 facilities will be connected, including some of the most remote rural areas and tribal lands in the state.

An application is pending before the federal government for funding from the American Recovery and Reinvestment Act to expand CTN to approximately 2,000 sites – about a third of the sites in medically underserved communities, spotlighting the enormous need statewide. That is why the state of California and other funders, such as the California HealthCare Foundation, United Health Group/PacifiCare and the National Coalition for Health Integration, also have stepped forward to support CTN to harness technology to work for both patients and taxpayers.

The California Telehealth Network is a bold idea that will transform the delivery of health care – extending resources and saving lives. It will be a signature component of health care reform in California – to improve access and quality of medical care while helping control costs.

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