

MEMORANDUM OF UNDERSTANDING

Between

Iowa Health-Des Moines

And

Clarke County Hospital  
Partner Organization

**PURPOSE:** The purpose of this MOU is formalize our working agreements and to apply for a grant from the Broadband Technology Opportunities Program – Sustainable Broadband Adoption (BTOP-SBA) that is designed to support collaborative rural projects that expand the adoption of broadband technologies. The ultimate goal of the project is to build a continually self-sustaining rural telehealth network in Iowa, focusing on expanding the access to quality affordable healthcare in our rural communities and to ultimately improve the health outcomes in our rural population through the adoption of telehealth technologies.

Some anticipated outcomes of supporting this project include:

- enhancing the continuum of care in rural communities
- providing services to the under- and uninsured populations in rural communities;
- achieving economies of scale and cost efficiencies of certain administrative functions across partner organizations;
- increasing the financial viability of network members;
- sharing of staff and expertise across network members;
- ensuring continuous quality improvement of the care provided by network members;
- enhancing workforce recruitment and retention efforts; and
- improving access to capital and new technologies

**Iowa Health-Des Moines agrees to:**

1. Take the lead role in establishing the project partnership
2. Be the Applicant Organization for BTOP-SBA Grant Program.
3. Provide the grant writing support for the grant program.
4. Support the partner sites with all aspects of developing the grant proposal

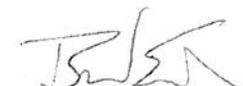
**Clarke County Hospital, Partner Organization agrees to:**

1. Demonstrate a strong and measurable commitment to the proposed partnership
2. Identify a leader within your organization to work with IH-DM in developing the grant proposal and, if successful, in implementing the proposal
3. Provide data specific to your organization that will be required for the grant submission
4. Obtain letters of support from key community leaders to submit with the grant proposal

By signing this agreement the agencies acknowledge they will actively abide by its terms.

  
\_\_\_\_\_  
Authorizing Representative, IH-DM

3/11/10  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Authorizing Representative, Partner Organization

3/8/10  
\_\_\_\_\_  
Date

MEMORANDUM OF UNDERSTANDING  
Between

Iowa Health-Des Moines  
And  
Greene County Medical Center  
Partner Organization

**PURPOSE:** The purpose of this MOU is formalize our working agreements and to apply for a grant from the Broadband Technology Opportunities Program – Sustainable Broadband Adoption (BTOP-SBA) that is designed to support collaborative rural projects that expand the adoption of broadband technologies. The ultimate goal of the project is to build a continually self-sustaining rural telehealth network in Iowa, focusing on expanding the access to quality affordable healthcare in our rural communities and to ultimately improve the health outcomes in our rural population through the adoption of telehealth technologies.

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- sharing of staff and expertise across network members;
- ensuring continuous quality improvement of the care provided by network members;
- enhancing workforce recruitment and retention efforts; and
- improving access to capital and new technologies

**Iowa Health-Des Moines agrees to:**

1. Take the lead role in establishing the project partnership
2. Be the Applicant Organization for BTOP-SBA Grant Program.
3. Provide the grant writing support for the grant program.
4. Support the partner sites with all aspects of developing the grant proposal

**Greene County Medical Center, Partner Organization agrees to:**

1. Demonstrate a strong and measurable commitment to the proposed partnership
2. Identify a leader within your organization to work with IH-DM in developing the grant proposal and, if successful, in implementing the proposal
3. Provide data specific to your organization that will be required for the grant submission
4. Obtain letters of support from key community leaders to submit with the grant proposal

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\_\_\_\_\_  
Authorizing Representative, IH-DM

3/11/10  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Authorizing Representative, Partner Organization  
Greene County Medical Center

3-26-10  
\_\_\_\_\_  
Date

MEMORANDUM OF UNDERSTANDING

Between

Iowa Health-Des Moines

And

Guthrie County Hospital

**PURPOSE:** The purpose of this MOU is formalize our working agreements and to apply for a grant from the Broadband Technology Opportunities Program – Sustainable Broadband Adoption (BTOP-SBA) that is designed to support collaborative rural projects that expand the adoption of broadband technologies. The ultimate goal of the project is to build a continually self-sustaining rural telehealth network in Iowa, focusing on expanding the access to quality affordable healthcare in our rural communities and to ultimately improve the health outcomes in our rural population through the adoption of telehealth technologies.

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- enhancing the continuum of care in rural communities
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- improving access to capital and new technologies

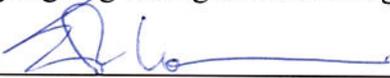
**Iowa Health-Des Moines agrees to:**

1. Take the lead role in establishing the project partnership
2. Be the Applicant Organization for BTOP-SBA Grant Program.
3. Provide the grant writing support for the grant program.
4. Support the partner sites with all aspects of developing the grant proposal

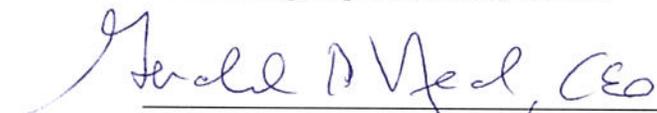
**Guthrie County Hospital, Partner Organization agrees to:**

1. Demonstrate a strong and measurable commitment to the proposed partnership
2. Identify a leader within your organization to work with IH-DM in developing the grant proposal and, if successful, in implementing the proposal
3. Provide data specific to your organization that will be required for the grant submission
4. Obtain letters of support from key community leaders to submit with the grant proposal

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\_\_\_\_\_  
Authorizing Representative, IH-DM

3/11/10  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Authorizing Representative, Partner Organization

3/11/2010  
\_\_\_\_\_  
Date

MEMORANDUM OF UNDERSTANDING

Between

Iowa Health-Des Moines

And

Grundy County Memorial Hospital (GCMH)

**PURPOSE:** The purpose of this MOU is formalize our working agreements and to apply for a grant from the Broadband Technology Opportunities Program – Sustainable Broadband Adoption (BTOP-SBA) that is designed to support collaborative rural projects that expand the adoption of broadband technologies. The ultimate goal of the project is to build a continually self-sustaining rural telehealth network in Iowa, focusing on expanding the access to quality affordable healthcare in our rural communities and to ultimately improve the health outcomes in our rural population through the adoption of telehealth technologies.

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- providing services to the under- and uninsured populations in rural communities;
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- increasing the financial viability of network members;
- sharing of staff and expertise across network members;
- ensuring continuous quality improvement of the care provided by network members;
- enhancing workforce recruitment and retention efforts; and
- improving access to capital and new technologies

**Iowa Health-Des Moines agrees to:**

1. Take the lead role in establishing the project partnership
2. Be the Applicant Organization for BTOP-SBA Grant Program.
3. Provide the grant writing support for the grant program.
4. Support the partner sites with all aspects of developing the grant proposal

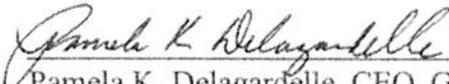
**Grundy County Memorial Hospital agrees to:**

1. Demonstrate a strong and measurable commitment to the proposed partnership
2. Identify a leader within your organization to work with IH-DM in developing the grant proposal and, if successful, in implementing the proposal
3. Provide data specific to your organization that will be required for the grant submission
4. Obtain letters of support from key community leaders to submit with the grant proposal

By signing this agreement the agencies acknowledge they will actively abide by its terms.

  
\_\_\_\_\_  
Authorizing Representative, IH-DM

3/11/10  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Pamela K. Delagardelle, CEO, GCMH

02/25/2010  
\_\_\_\_\_  
Date

## BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors.  
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Eric Crowell

POSITION TITLE President and CEO

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
University of Minnesota	Masters	1982	Hospital Administration
Iowa State University	B.S.	1980	Industrial Administration
Grandview College		1976- 1977	

### **A. Positions and Honors**

### **B. Positions and Employment**

Iowa Health – Des Moines, IA - President and CEO	2001 – Present
Iowa Health System, Des Moines, IA - Senior Vice President	1999 – Present
Trinity Regional Health System, Rock Island, Moline and Davenport President and Chief Executive Officer	1992 – 2001
Franciscan Medical Center, Rock Island, IL – President and CEO	1989 – 1992
Franciscan Medical Center, Rock Island, IL – VP of Professional Serv.	1986 – 1989
Hunterdon Medical Center, Flemington, NJ – VP of Ancillary Serv.	1983 – 1986
Hunterdon Medical Center, Flemington, NJ – Assistant Administrator	1982 – 1983
Hunterdon Medical Center, Flemington, NJ – Administrative Resident	1981 – 1982
Gillette Children’s Hospital, St. Paul, MN – Administrative Clerkship	1981 – 1981

### **C. Other Positions and Professional Membership**

Board Member, Greater Des Moines Partnership (Chamber)	2002 – Present
Executive Committee Member, Greater Des Moines Partnership	2004 – Present
Board Member, United Way of Des Moines	2004 – Present
Board Member, Grandview College	2003 – Present
Treasurer, Grandview College	2004 – 2006

Finance Committee Vice-Chair, Grandview College	2004 – Present
Board Member, Downtown Alliance	2002 – Present
Board Member, Iowa Hospital Association, IHERF	2003 – 2006
Board Member, Iowa Hospital Association	2005 – Present
Board Member, Health Alliance Planning Board	2002 – Present
Adjunct Faculty, University of Iowa, Program in Healthcare Administration	1994 – Present
Adjunct Faculty, Iowa State University, MBA Program	2004 – Present
Past Chair, Des Moines Area Consortium, GME, University of Iowa, VA Medical Center, Broadlawns Medical Center	
Board Member, Iowa Health Foundation	2001 – Present

#### **D. Honors**

East Des Moines Chamber of Commerce Citizen of the Year	2010
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## BIOGRAPHICAL SKETCH

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NAME	POSITION TITLE
Tracy Warner	Director, Rural Health Resources Iowa Health-Des Moines

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
University of Kansas	BS	1989	Business Administra

### A. Positions and Honors

### B. Positions and Employment

Iowa Health-Des Moines	
Director, Rural Health Resources	11/2005-present
Iowa Hospital Association	
Vice President, Finance Policy	7/1998-11/2005
Director, Policy and Issue Development	12/1993-6/1998
Finance Coordinator	6/1993-12/1993
Asst. to Vice President, Finance	12/1991-6/1993

### C. Other Positions and Professional Membership

Healthcare Financial Management Association (HFMA)  
1997-present  
Iowa chapter membership chair, treasurer, secretary, vice president, president, past president, hospital association liaison, bylaws chairperson and historian  
Chair, Iowa Medical Assistance (Medicaid) Advisory Council  
Medicare Technical Advisory Group (MTAG) on Outpatient Issues  
American Hospital Association (AHA) Model Practices Group  
Office of Rural Health Policy Hospital Issues Group

### D. Honors

## BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors.  
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Karen Bossard, BSN, MPH, FACHE

POSITION TITLE Chief Executive Officer

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Broadlawns School of Nursing Des Moines, IA	RN	1963	Nursing
Upper Iowa University Fayette, IA	BSN	1980	Bachelors in Science a Nursing
University of Minnesota St. Paul, MN	MPH	1985	Masters in Public Heal
Iowa State University Ames, IA		2001	Secondary Teaching Certificate

**A. Positions and Honors:** Hospital and Clinic Nursing 1963 -1971

**B. Positions and Employment**

Central Community Hospital, Elkader, IA	Nursing Administration	1972 – 1989
Greene County Medical Center, Jefferson, IA	Nursing Administration,	1989- 1994
Greene County Medical Center, Jefferson, IA,	Hospital and Nursing Home Administration/ CEO	1989-Present

**C. Other Positions and Professional Membership**

Iowa Hospital Association rural representative on the IOWA HIPAA SNIP  
 Iowa Hospital Association HIPAA Committee Co-Chair  
 Iowa Hospital Association Board of Trustees  
 State of Iowa Preventative Health Advisory Board Member  
 State of Iowa Trauma System Advisory Council Member  
 Iowa Examining Board for Nursing Home Administrators,  
 Iowa Board of Behavioral Science  
 American Hospital Association Small and Rural Hospital Council member  
 American Hospital Association Regional Policy Board Region Six Alternate  
 Jefferson Area Chamber of Commerce ex-officio board member (current)  
 Jefferson Chamber of Commerce (Past President)  
 Rotary Club of Jefferson (Served in all capacities of the board)  
 Rotary Club of Jefferson (Past President)  
 Iowa Hospital Association Council of Advocacy and Representation  
 Iowa Association of Hospitals and Health Systems Y2K Task Force 1998-2000  
 Economic Development Task Force, now Economic Enhancement  
 Iowa Central Community College Area Planning Council  
 Iowa Central Community College Nursing Advisory Council, Past Chair

Greene County Emergency Medical Services Area Council 1989-1993  
Jefferson SAFE Committee, Health Care Systems Chairperson  
Iowa Commission of Substance Abuse, Commissioner and Chair,  
Iowa Hospital Association LINC Steering Committee 1993-1997  
Legislative Work Group, subcommittee on Long Term Care  
Association of Iowa Hospitals and Health Systems Telecommunications Network  
Task Force, Co-Chair Applications Committee  
University of Iowa NDECC Research Team  
University of Iowa NMMDS Research Team  
Iowa Department of Public Health Healthy People 2010 committee, Co-Leader  
Chapter 8 Education and Community-Based Services  
Iowa Rural Health Organization Board of Directors  
Iowa Organization of Nurse Executives, Past Chair  
American College of Healthcare Executives  
American Organization of Nurse Leaders  
National Rural Health Association  
Iowa Rural Health Association  
Iowa Organization of Nurse Executives Past President, Board Member, Executive  
Council, Past Treasurer and Past Secretary  
Iowa Nurses Association, Convention planning committee  
University of Minnesota Alumni Association  
Institute for Quality Healthcare Council, Chair  
Rotary International, Jefferson Rotary Club, Information and Magazine Chair,  
Program Chair, Board of Directors, President  
Iowa Nurses Association, Legislative Committee  
Iowa Nurses Association, RN/MD Liaison  
Iowa Tri Council

**D. Honors**

Evaluation Committee, Iowa Health System Fiberoptic Project  
Steering Committee, Iowa Health System Fiberoptic Project  
CPC Enhancement Committee, Health Care Expert Systems  
Task Force For HCFA To Review Organ Donor Rules  
Advanced Cardiac Life Support Instructor – Iowa Heart Association  
Basic Life Support Instructor Trainer – Iowa Heart Association  
Presented at Healthcare Computing seminar "Bedside Pen Based Documentation  
Systems"  
Chaired Users Group for PACE Information System

## BIOGRAPHICAL SKETCH

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NAME: Cynthia L. Kail, RN, ARNP, MSN  
POSITION TITLE: Associate Administrator/Public Health Dir

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Iowa State University, Ames, IA	Secondary Occupational Teaching License Preparation	2001	Education
Clarkson College, Omaha, NE	MSN	1993	Nursing Administration
University of Iowa, Iowa City, IA	Nurse Practitioner	1989	Pediatrics
University of Iowa, Iowa City, IA	BSN	1977	Nursing

### **A. Current Positions**

1/95 to present	Associate Administrator & Director, Public Health Greene County Medical Center Jefferson, IA
1/00 to present	Health Occupations Coordinator and Faculty, Iowa Central Community College with: Jefferson-Scranton High School East Greene High School Paton-Churdan High School

### **B. Other Positions and Employment**

1998 to 2005	Independent Contractor as a Denver II Faculty Trainer
4/93 to 1998	Denver II Faculty Iowa Department of Public Health
1996	Medicaid Administrative Claiming Instructor Iowa Department of Public Health
7/91 to 1995	Faculty

Educational Resources  
Shawnee Mission, KS

***Experienced in using Fiber Optics for educational sessions***

2/89 to 1/95	Director, Public Health Department Greene County Medical Center Jefferson, IA
9/87 to 2/89	Supervisor, Public Health Department Greene County Medical Center Jefferson, IA
9/85 to 9/87	Administrator Webster County Public Health Fort Dodge, IA
10/79 to 9/85	Public Health Nurse and Assistant Administrator (1980-85) Webster County Public Health Fort Dodge, IA
8/77 to 10/79	Staff Nurse – OB, Med-Surg, and SCU Greene County Medical Center Jefferson, IA

**C. Professional Membership**

Member, Sigma Theta Tau  
Member, Iowa Public Health Association

Co-Chair, 2008 Iowa Public Health Director's Advisory Committee  
Member, 2008 Governor's Task Force on Direct Care Workers  
Member, 1993 Governor's Task Force on Immunizations  
Member, 1991 Iowa Department of Public Health Task Force on Enhanced Services for  
Maternal Health Medicaid Clients  
Member, 1990 Governor's Task Force on Maternity Care  
Past Board Member, American Red Cross, Greene County Chapter  
Past Board of Directors, Home Care Iowa, Inc.  
Past Board President, Cedar Lane Estates, Inc. residential facility

**D. Honors**

Named as one of "100 Great Iowa Nurses" in the first year of existence in Iowa, May 2005.

## BIOGRAPHICAL SKETCH

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NAME Brian Evans

POSITION TITLE CEO

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
American College of Healthcare Executives	Fellowship	2007	
Harvard School of Public Health	Certification	1996	Executive program in Health policy & Management
St Ambrose University	MBA	1988	Business Administration
University of Iowa	BBA	1981	

### **A. Positions and Honors**

### **B. Positions and Employment**

Central Iowa Hospital Corporation CEO, Clarke County Hospital Iowa Health – Des Moines Director, Rural Health Resources Clinic Administrator, Urbandale Family Physicians	1999-Present
Mercy Clinic Inc. Clinic Manager, Mercy Urbandale Medical Clinic	1991-1999
The Service Master Company Master Coordinator	1982-1991

### **C. Other Positions and Professional Membership**

Osceola Rotary Club  
Board of Directors, Clarke County Development Corporation  
Board of Directors, Osceola Chamber Mains Street  
Chairman, Business Improvement Committee  
United Way Campaign Steering Committee (Urbandale)  
Past-Chairman, Central Iowa Chapter Rocky Mountain Elk Foundation

### **D. Honors**

## BIOGRAPHICAL SKETCH

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NAME Vicki Irvin

POSITION TITLE

Chief Nurse Executive

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
College of St. Francis, Joliett, Illinois	MS	1994	Health Care Administration
Drake University, Des Moines, IA	BSN	1991	
Allen Memorial Hospital School of Nursing, Waterloo, IA	RN	1978	

### **A. Positions and Honors**

- Analytical understanding of management/financial reports, including where the data comes from and how can quantify impact through changes in practice to these reports.
- Prepared for certification reviews, compliance to standards developed with ADA, JCAHO, and ACOS.
- Served as chairperson for multiple hospital and unit committees.
- Continual data analysis for trend identification/recognition.
- Maintained understanding of patient care operations at unit level.
- Approved policies and procedures only after discussion with front end care givers for functionality and appropriateness.
- Instilled organizational mission and philosophy committing all staff to common goals and objectives.

## **Quality Improvement**

- Chaired house wide documentation committee, creating multidisciplinary documentation forms for standardization and preparation for computerized documentation.
- Tracking inpatient costs to external benchmarks including cost, LOS/DRG, and opportunity identification.
- Physician benchmarking opportunity for cost and quality improvement.
- Analysis of current continuum of care for specific patient populations, with subsequent strategic planning in identified areas for quality improvement including patient satisfaction.
- Worked collaboratively with Unit Directors in planning and evaluation of patient care quality improvement activities on patient care units.
- Conducted on going brainstorming sessions with Unit Nursing Directors challenging new ways of providing care and services. Promoting thinking out of the box in planning sessions, discouraging status quo care.

## **B. Positions and Employment**

- Clarke County Public Hospital, Osceola, IA 2003 - Present
- Self-Employed 2000 - 2003
- Mercy Medical Center, Des Moines, IA  
Director, Oncology Service Line 1998 - 2000  
Administrative Director of Nursing:  
Medical-Surgical, Telemetry, Oncology, Diabetes Institute, Mercy Cancer Center 1988-1998  
Unit Nursing Director, Pediatrics/PICU  
Unit Nursing Director, Progressive Cardiac Unit/Progressive Cardiac Recovery 1983 - 1987  
Assistant Head Nurse, ICU 1980 - 1981  
Clinical Nurse 111, ICU 1980 - 1981
- Staff Nurse, ICU 1978 – 1980

## **C. Other Positions and Professional Membership**

## **D. Honors**

## BIOGRAPHICAL SKETCH

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NAME Michael Thomas Thilges

POSITION TITLE Chief Financial Officer

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Iowa State University, Ames, IA		1991	Bachelor of Business Administration, major Accounting

### **A. Positions and Honors**

### **B. Positions and Employment**

Clarke County Hospital, Chief Financial Officer	2003 – Present
Denman and Company, LLP, Manager	1992 – 2003

### **C. Other Positions and Professional Membership**

Hospital Financial Management Association (HFMA), AICPA, IACPA, IMA

### **D. Honors**

## BIOGRAPHICAL SKETCH

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NAME	POSITION TITLE
Gerald D. Neal	CEO
Guthrie County Hospital, Guthrie Center, IA	

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Drexel University, Philadelphia, PA	BS	1971	Mathematics
Wharton School, Univ. of Penna., Phila., PA	MBA	1973	Business

### **A. Positions and Honors**

### **B. Positions and Employment**

CEO Guthrie County Hospital, Guthrie Center, IA since 2003  
Vice President, Cerner Corporation, Kansas City, MO, 2000 to 2002  
TriCity Health Centre, Dallas, TX 1997 to 2000  
Other healthcare CEO positions, 1982 to 1997  
CFO, Methodist Hospitals of Dallas, Dallas, TX 1977 to 1982

### **C. Other Positions and Professional Membership**

American College of Healthcare Executives

### **D. Honors**

Fellow, American College Healthcare Executives, 2007  
CPA, American Institute of Certified Public Accounts, 1975 (not active)

## BIOGRAPHICAL SKETCH

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NAME

Danielle Navarro

POSITION TITLE

Chief Nurse Officer

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Southwestern Community College, Creston, IA	AND	1985	Nursing
Drake University, Des Moines, IA	BSN	1994	Nursing
Des Moines University		1996	Health Administratio
Kennedy Western University		2003	MBA

### A. Positions and Honors

### B. Positions and Employment

Chief Nursing Officer; Guthrie County Hospital	2000 – current
Patient Care Coordinator; Dallas County Hospital	1999 – 2000
CQI / Risk Manager; Madison County Hospital	1997 – 1999
Staff Nurse; Des Moines University Surgery Center	1990 – 1997
IV Therapy Nurse; Iowa Lutheran Hospital	1987 – 1990
ED Staff Nurse; Madison County Hospital	1985 - 1987

### C. Other Positions and Professional Membership

Iowa Organization of Nurse Leaders	member since 2000
Iowa Association of Healthcare Quality	member since 1997

### D. Honors

## BIOGRAPHICAL SKETCH

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NAME

Melinda Alt

POSITION TITLE

Chief Financial Officer

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
University of Northern Iowa	Bachelors	6/1997	Accounting

### A. Positions and Honors

### B. Positions and Employment

Gronewold, Bell, Kyhnn and Co P.C. – Senior Auditor- 6/1997-10/2003

Wickman Chemical- Controller- 10/2003-8/2007

Guthrie County Hospital – CFO – 9/2007-

### C. Other Positions and Professional Membership

AICPA, IACPA, HFMA

### D. Honors

## BIOGRAPHICAL SKETCH

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NAME	POSITION TITLE
Pamela K. Delagardelle	CEO

EDUCATION/TRAINING (Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)

INSTITUTION AND LOCATION	DEGREE (if applicable)	YEAR(s)	FIELD OF STUDY
Mount Mercy College Cedar Rapids, Iowa	BSN	1984	Nursing and Biology
University of Iowa Iowa City, Iowa	MSN	1997	Nursing, Business and Hospital Administration

### **A. Positions and Employment**

#### **CEO, Grundy County Memorial Hospital Grundy Center, Iowa (March 2003-present)**

Leading a 25 bed, Critical Access Hospital with 55 bed Long Term Care. Collaborated with GCMH Board of Commissioners, Grundy County Board of Supervisors, GCMH hospital staff and physicians, and the community to complete a \$6 M outpatient modernization and expansion project FY 2004-2006. Constructing a \$13.5 M inpatient facility and \$5 M medical office building scheduled for completion June, 2010. Recruited over 117 new medical specialists and primary care physicians since 2003 to offer surgery and specialty clinic services. Implemented patient and family-centered care model while standardizing care processes around evidence-based best practices. Increased workforce from 90 employees to 188 to accommodate growth in business and market share. Implemented hospital-wide clinical and financial information system in 2005. Worked with Foundation Board to raise over \$2.8 million dollars in the "Touch a Life" campaign to support the hospital modernization projects. Continuously leads efforts to improve the quality, patient safety and customer service at GCMH. Actively participates in efforts to improve the health of the people in the communities served by the hospital.

#### **Clinical Integration Coordinator Allen Hospital, Waterloo, Iowa (May, 2001-March 2003)**

Responsible for leading clinical implementation of TSI Decision Support System and upgrade to SDSM Silver and Gold applications, training and support of SDSM clinical users, and development and utilization of on-line physician reporting tools. Worked with decision support staff to develop and implement hospital performance dashboard, clinical indicators, phase of care and episode of care strategies, and resource protocols to support performance improvement. Assisted in the development of a service line management strategy. Facilitated 8 clinical integration teams and various process re-engineering work groups. Collaborated with clinical leaders, physicians and interdisciplinary team members to develop and deploy evidence-based practice guidelines, analyze opportunities, prioritize performance improvement activities, measured and shared outcomes data. Assisted in development and implementation of AMH Associate

health and wellness incentive program and patient safety executive walk-arounds. Supported managed care and self-funded plan initiatives. Precepted and mentored MSN students, oversaw Allen College student projects.

#### **Managed Care Coordinator**

##### **HCF, Inc., St. Luke's Hospital, Cedar Rapids, Iowa (June, 2000-May, 2001)**

Worked with physicians, health providers, third party payors, employers and community leaders to manage the health care of defined populations and ultimately improve outcomes. Analyzed cost and clinical data. Identified opportunities and implemented evidence-based practice guidelines. Designed and deployed strategies to assist health plan members to improve their health and decrease unnecessary interactions with the health care system.

#### **Assistant Professor**

##### **Allen College, Waterloo, Iowa (January, 2000-May, 2001)**

Lectured in BSN and MSN programs and performed as clinical and skills lab instructor. Developed initial leadership curriculum for nursing administration track, MSN program. Consulted with program chairs and faculty regarding curriculum changes. Collaborated with MSN faculty to identify potential mentoring opportunities and student projects. Precepted MSN students/projects related to clinical design, managed care and decision support.

#### **Clinical Design/Outcomes Management System Leader**

##### **Covenant Health System-Iowa, Wheaton Franciscan Services, Inc. (March, 1997-July, 1999)**

Collaborated with physicians and interdisciplinary teams to develop processes, methods and tools to improve the health status of the community while responding to the needs of individuals (e.g. life long care plans, collaborative pathways, medical guidelines, health risk appraisals, and tools to measure clinical, functional status, well-being, satisfaction and cost outcomes). Responsible as senior analyst of clinical decision support for implementation of Transition Systems Inc. (TSI) clinical assessment software and prioritization of clinical design across the health system. Worked closely with physicians and health providers, third party payors, and community leaders to manage the care of defined populations with the community and ultimately improve outcomes.

#### **Managed Care Facilitator**

##### **Covenant Health System – Iowa, Waterloo, Iowa (January 1996-March 1997)**

Worked as corporate liaison to create common understanding with regard to Community Based Individually Coordinated Care (CBICC) throughout Covenant Health System. Responsible for facilitating interdisciplinary research and design teams with the aim of standardizing and improving the delivery of care to defined populations (e.g. diabetes, asthma, congestive heart failure, joint replacement, pneumonia)

#### **Manager of Occupational Health**

##### **Covenant Medical Center, Waterloo, Iowa (November, 1992-January, 1996)**

Developed Covenant At Work program and collaborated with business leaders to establish a complete range of occupational health services to meet the needs of the Cedar Valley area. Responsible for program development, long and short range planning, supervision and coordination of Occupational Health Services. Worked collaboratively with physicians, physical therapists, rehab psychologists, wellness coordinators and vocational rehab specialists to administer comprehensive worker injury management services. Acted as an employer liaison to develop healthcare programs based on client need. Experiences include fiscal control of the program, marketing and sales, research, quality improvement, grantsmanship, authoring a book, contact with the media and legislators, public speaking, and expanded clinical activities. Knowledge in areas of occupational and agricultural safety and health, case management, industrial hygiene, toxicology, ergonomics, worker injury management, and personal protective equipment.

#### **Director of Occupational Health Services**

##### **Sartori Memorial Hospital, Cedar Falls, Iowa (February, 1988-February, 1992)**

Responsible for development; supervision, and coordination of Occupational Health Services, including Health Works, Farm Partners and Employee Health Clinics. Performed in similar capacity to position above.

#### **Director of Patient Care/House Supervisor**

##### **Covenant Medical Center, Waterloo, Iowa (February, 1986-February, 1988)**

Served as administrative liaison of the hospital in the absence of administrators and department directors. Evaluated and monitored patient conditions and care delivery. Assigned nursing personnel based on patient census, acuity and staffing resource. Responded to emergency situations and performed other related duties as needed.

#### **Charge Nurse**

##### **Sartori Memorial Hospital, Cedar Falls, Iowa (July, 1984-February, 1986)**

Employment as RN at this hospital included experience in the ER, OR, PACU, and ASU. Charge 3-11, 11-7 in ER. Responsibilities included triage, assessment and intervention of both emergency and non-acute conditions, fielding phone emergency and non-acute conditions, fielding calls from public, providing medical control of paramedic actions in the field via radio, etc.

#### **Staff Nurse**

##### **Schoitz Medical Center, Waterloo, Iowa (June, 1983-July, 1984)**

Worked weekends and school vacations as LPN on general medical and oncology floor, floating to other units as needed. Responsible for patient care, passing medications and patient education.

## **B. Professional Membership**

Iowa Hospital Association, District B (2003-present) Chair 2007  
Iowa Hospital Education and Research Foundation Board, (2005-present) Chair 2008-2010  
Iowa Health System Community Network, (2003-present) Chair 2007  
American College of Healthcare Executives, Member (2004-present)  
HealthNet Connect Board (2009-present) President 2010-present, Vice Chair 2009-2010  
Grundy Center Kiwanis Club, (2003-present) Chair 2007-2008  
Grundy Center Rotary Club, Membership Committee Chair (2003-present)  
Grundy County Memorial Hospital Foundation Board, Member (2003-present)

## **C. Honors**

#### **2008 Iowa Hospital Association Excellence in Leadership Award**

Awarded by the Iowa Hospital Association to one hospital administrator each year for "outstanding commitment, dedication, and inspirational leadership".

#### **HOSPITAL AWARDS**

- **2009 Press Ganey Summit Award for Patient Satisfaction in Outpatient Services**  
Presented to a hospital that attains the highest levels of performance in patient satisfaction and sustains this extraordinary success for a period of three years.
- **2009 Cedar Valley Top 20 Employers of Choice Award**  
Nominated by GCMH Associates as an Employer of Choice; the hospital was chosen as a 2009 Cedar Valley Top 20 Employer of Choice from over 200 businesses nominated.
- **2008 Gold Standard Performing Critical Access Hospital**  
Identified in *2008 Gold Standard Institute Report on Critical Access Hospitals* by LarsonAllen through a rigorous analysis of Medicare Cost Reports and other publically available information for 2005-2007. GCMH was recognized as a top performing hospital; a benchmark for financial and operating performance. Identified as one of thirty five top performing hospitals in the country.

- **2009 Iowa Gold Standard Performing Critical Access Hospital**  
Contacted in November 2009 by Iowa Hospital Association as a top performing hospital in the state of Iowa. Is being used as an Iowa benchmark for financial and operating performance.
- **2009 Grundy Center Business of the Year**
- **2009 IAHSA Quality First Award**  
Recognized by Iowa Association of Homes and Services for the Aging for significant strides in quality improvement in the areas of falls prevention and medication errors.

## BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors.  
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME Jennifer A. Havens

POSITION TITLE  
Chief Clinical Officer  
Grundy County Memorial Hospital

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Crichton College, Memphis, TN	BBA	2005-07	Business/Org Management
Jackson School of Nursing	AA	1987-89	Nursing

### **A. Positions and Employment**

#### **GRUNDY COUNTY MEMORIAL HOSPITAL**

**June 2009-Present**

##### **Chief Clinical Officer**

- Develop goals and objectives, establish policies and procedures, and participates in strategic planning.
- Promote a team atmosphere for the organization.
- Provide fiscal management by assisting departments in development of operating budget and ensuring compliance. Assist with evaluation and justification of equipment, supplies, and purchases. Select and purchase equipment/supplies as budgeted.
- Contributes to team efforts and uses appropriate conflict management skills proactively to resolve intradepartmental and interdepartmental grievances and concerns.
- Demonstrates leadership required to successfully lead Associates through change to successful outcomes.
- Clearly communicates and quantifies expectations. Provides timely and consistent feedback.
- Select, motivates, and guides Patient Care Services Team in the achievement of hospital's Strategic Plan.
- Works in tandem with the Executive Team to create a collaborative multidisciplinary environment. Takes administrative responsibility for the hospital in the absence of the hospital Administrator.
- 

#### **LEBONHEUR CHILDREN'S MEDICAL CENTER**

**March 2007-June 2009**

##### **Service Line Administrator, Neuroscience Institute**

**Oct 07-June 09**

- Provides strong leadership and direction in establishing a nationally recognized Center of Excellence for the pediatric neuroscience service line that is the leading provider in the region.
- Leads and facilitates the effort to integrate all aspects of neuroscience into a single service line. Plans, organizes, develops, and implements operations to meet the needs of neuroscience patients, their families, and physicians and to meet corporate and departmental goals while directing, coordinating, and developing policies, procedures, and processes for the neuroscience Service Line.
- Creates a clear vision of the pediatric neuro Service Line and communicates that vision to constituents at all levels within/without the organization. Develops a strategic plan that will clarify steps for implementing the vision and reflects an understanding of the pediatric Neuro Service Line market including threats, opportunities and industry trends in positioning the service line for success.

- Translates system level business tactics into operational goals at service line level.
- Builds strong relationships that create coalitions across department lines.
- Creates a strong service culture.
- Accepts responsibility for a professional and collegial relationship with Medical Staff and ancillary departments.

**Manager, Neuroscience Institute**

**Mar 07 –Oct 07**

- Coordinates activities and operations to meet goals, objectives, and scope of care of the Neuroscience Institute located at LeBonheur Children's Medical Center.
- Tracks and provides reports for specific operational, volume, and financial data for the pediatric Neuroscience Institute.
- Works with national organizations to solicit grants in order to advance clinical practices
- Promotes the effective flow of information by establishing, promoting, utilizing and maintaining effective communication strategies/systems within and outside the department.
- Promotes family centered care throughout the continuum of care for all neuroscience patients and families.

**ST. JUDE CHILDREN'S RESEARCH HOSPITAL**

**1989-March 2007**

**Coordinator, Brain Tumor Program**

**June 1992-Mar 2007**

- Report to co-leader of brain tumor program; responsible for managing all aspects of new patient accrual
- Instrumental in the development and implementation of first-ever parent-directed website, resulting in 35% increase in patient accrual over 5 years
- Successfully recruit and plan for 150+ new patients annually
- Collaborate closely across departments, institutions, and other brain tumor facilities
- Implement and manage 24/7 website system to deliver prompt response and parent satisfaction
- Provide patient/family education before arrival and assist with the development of new patient materials
- Triage and organize over 200 formal consults yearly
- Serve as a founding board member of the Brain Tumor Network, a national, non-profit organization

**R.N., Ambulatory Care Unit**

**1990-1992**

- Responsible for the daily coordination of primary patient care activities throughout the ACU
- Worked closely with staff to assess and document patient care needs, providing direct nursing care when indicated
- Patient/family education

**R.N., Inpatient Unit**

**1989-1990**

- Provide patient care through nursing assessment and delivery of chemotherapy, blood products, IV meds
- Develop individual nursing care plans and learning needs of patients/families
- Collaborative assessment with physicians for optimal patient care

**B. Other Positions and Professional Membership**

Iowa Organization of Nurse Leaders, District B, Secretary/Treasurer and By-laws Committee Representative

American Organization of Nurse Executives

## BIOGRAPHICAL SKETCH

Provide the following information for the key personnel and other significant contributors.  
Follow this format for each person. **DO NOT EXCEED FOUR PAGES.**

NAME

Nick Betts

POSITION TITLE

IT Manager

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, and include postdoctoral training.)*

INSTITUTION AND LOCATION	DEGREE <i>(if applicable)</i>	YEAR(s)	FIELD OF STUDY
Hawkeye Community College	AA	2007-2008	General Studies
Hawkeye Community College	AAS	2002-2004	Network Admin/Engineer

### **A. Positions and Employment**

#### **IT Manager, September 2008 to Present**

##### **Grundy County Memorial Hospital, Grundy Center, IA**

- Responsible for all aspects of Information Technology for the hospital. Provide support of all network, server, and PC systems. Responsible for IT budget and policies.
- Provide on-call after hours support for system down issues.
- Projects: Designed and implemented healthcare grade enterprise network and unified communications system. Designed enterprise grade server virtual environment. Aided in the testing and launch of HealthNet connect, a fiber network connecting hospitals throughout Iowa.

#### **Infrastructure Analyst, November 2006 to September 2008**

##### **The CBE Group, Inc, Waterloo, IA**

- Performed a variety of network and server administration duties such as: network support and design, system and user administration, telephony and VoIP support, network wiring, data backup, software support, and IT security administration in a 1000+ user environment spread across five offices in three states.
- Provided on-call after hours support for system down issues.
- Provided backup and escalation support for Technical Services/Help Desk team.

#### **Network Support Technician, March 2006 to November 2006**

##### **The Solution, Cedar Falls, IA**

- Performed on-site and off-site support for clients, duties include: PC support, server and backup support, network and firewall design and support, software support and routine maintenance of clients equipment.
- Aided in the design and support of redundant "hot site" that included multiple web servers, DNS servers, and files servers synchronized between clients site and off-site data center.
- Provided support for FDIC certified financial institutions, that includes support for firewalls, intrusion detection/prevention systems, Active Directory systems, and e-mail systems.
- Provided support for a VPN mesh that includes 14 sites terminated with Cisco PIX firewalls.

Technical Services Support Specialist, September 2003 to March 2006

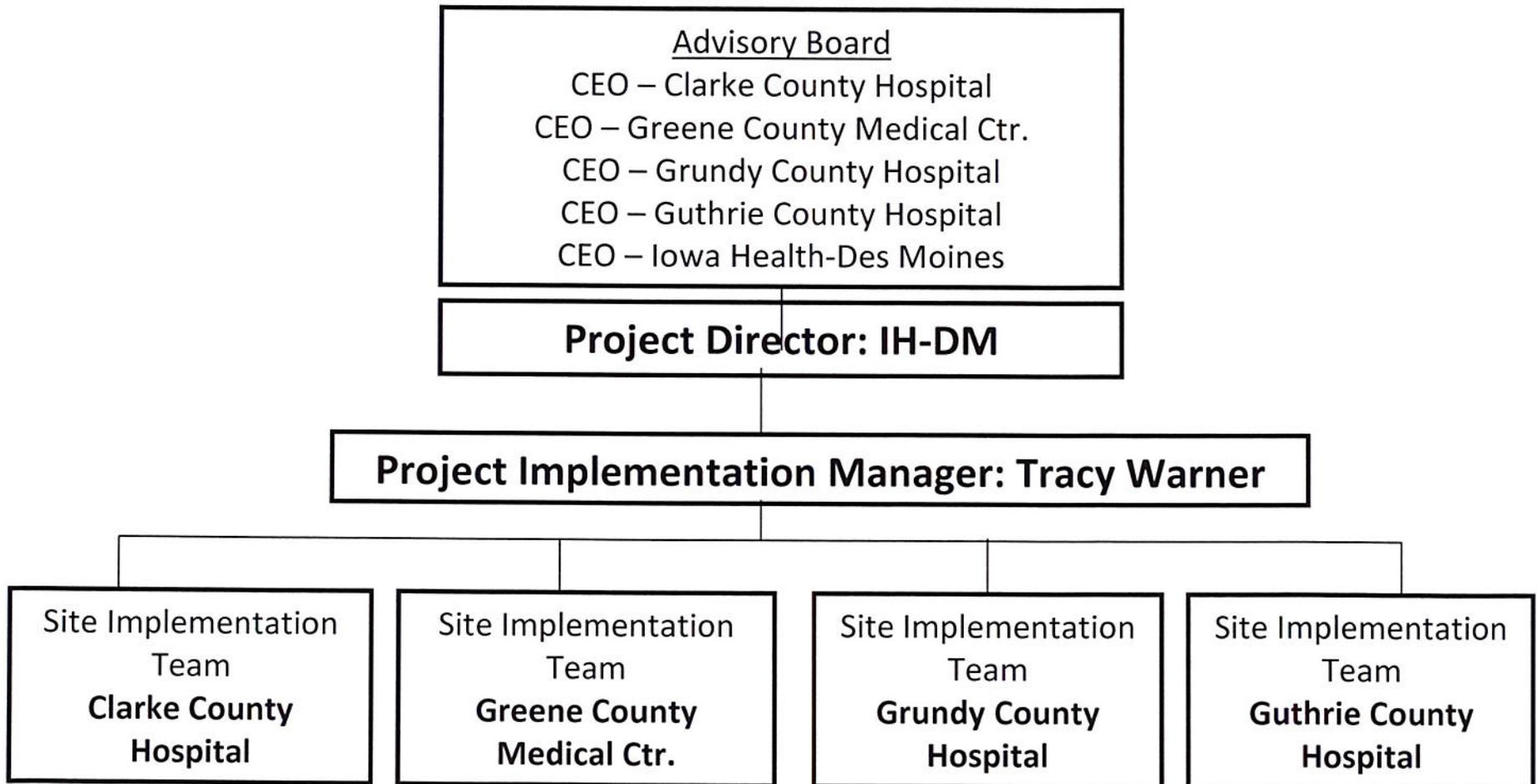
**The CBE Group, Inc, Waterloo, IA**

- Performed a variety of network and PC administration duties such as: network support and design, system and user administration, PC support, network wiring, software support, and help desk support for 700+ users and workstations spread across three offices.
- Led in the design, implementation, and support of an enterprise level Cisco routing and switching infrastructure, which includes multiple VLANs, Multi-Layer Routing, and many other advanced technologies throughout the enterprise.
- Led in the design, implementation, and support of an enterprise level Microsoft Active Directory infrastructure.

**B. Professional Membership**

- a. Member of the Board of Advisors for the Information Technology Program at Hawkeye Community College

# Rural Iowa Telehealth Initiative – Organizational Chart



**BUDGET INFORMATION - Non-Construction Programs**

OMB Approval No. 0348-0044

**SECTION A - BUDGET SUMMARY**

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. BTOP2-SBA	11.557	\$	\$	\$ 8,321,815.00	\$ 5,445,104.00	\$ 13,766,919.00
2.						0.00
3.						0.00
4.						0.00
5. Totals		\$ 0.00	\$ 0.00	\$ 8,321,815.00	\$ 5,445,104.00	\$ 13,766,919.00

**SECTION B - BUDGET CATEGORIES**

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)		
a. Personnel	\$ 1,717,801.00	\$ 754,475.00			\$ 2,472,276.00
b. Fringe Benefits	312,254.00	355,261.00			667,515.00
c. Travel	129,057.00	18,989.00			148,046.00
d. Equipment	5,918,321.00	4,149,438.00			10,067,759.00
e. Supplies	179,382.00	17,703.00			197,085.00
f. Contractual					0.00
g. Construction		85,959.00			85,959.00
h. Other	65,000.00	63,279.00			128,279.00
i. Total Direct Charges (sum of 6a-6h)	8,321,815.00	5,445,104.00	0.00	0.00	13,766,919.00
j. Indirect Charges					0.00
k. TOTALS (sum of 6i and 6j)	\$ 8,321,815.00	\$ 5,445,104.00	\$ 0.00	\$ 0.00	\$ 13,766,919.00
7. Program Income	\$	\$	\$	\$	\$ 0.00

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<b>SECTION C - NON-FEDERAL RESOURCES</b>					
(a) Grant Program	(b) Applicant	(c) State	(d) Other Sources	(e) TOTALS	
8. Rural Iowa Telehealth Initiative	\$ 5,445,104.00	\$	\$	\$ 5,445,104.00	
9.				0.00	
10.				0.00	
11.				0.00	
12. TOTAL (sum of lines 8-11)	\$ 5,445,104.00	\$ 0.00	\$ 0.00	\$ 5,445,104.00	
<b>SECTION D - FORECASTED CASH NEEDS</b>					
	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ 2,533,773.00	\$ 776,594.00	\$ 862,592.00	\$ 468,531.00	\$ 426,056.00
14. Non-Federal	2,964,928.00	1,159,095.00	608,637.00	305,682.00	891,514.00
15. TOTAL (sum of lines 13 and 14)	\$ 5,498,701.00	\$ 1,935,689.00	\$ 1,471,229.00	\$ 774,213.00	\$ 1,317,570.00
<b>SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT</b>					
(a) Grant Program	FUTURE FUNDING PERIODS (Years)				
	(b) First	(c) Second	(d) Third	(e) Fourth	
16. Rural Iowa Telehealth Initiative	\$ 5,498,701.00	\$ 5,792,647.00	\$ 2,475,571.00	\$	
17.					
18.					
19.					
20. TOTAL (sum of lines 16-19)	\$ 5,498,701.00	\$ 5,792,647.00	\$ 2,475,571.00	\$ 0.00	
<b>SECTION F - OTHER BUDGET INFORMATION</b>					
21. Direct Charges:			22. Indirect Charges:		
23. Remarks:					

## INSTRUCTIONS FOR THE SF-424A

Public reporting burden for this collection of information is estimated to average 180 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0044), Washington, DC 20503.

**PLEASE DO NOT RETURN YOUR COMPLETED FORM TO THE OFFICE OF MANAGEMENT AND BUDGET. SEND IT TO THE ADDRESS PROVIDED BY THE SPONSORING AGENCY.**

### General Instructions

This form is designed so that application can be made for funds from one or more grant programs. In preparing the budget, adhere to any existing Federal grantor agency guidelines which prescribe how and whether budgeted amounts should be separately shown for different functions or activities within the program. For some programs, grantor agencies may require budgets to be separately shown by function or activity. For other programs, grantor agencies may require a breakdown by function or activity. Sections A, B, C, and D should include budget estimates for the whole project except when applying for assistance which requires Federal authorization in annual or other funding period increments. In the latter case, Sections A, B, C, and D should provide the budget for the first budget period (usually a year) and Section E should present the need for Federal assistance in the subsequent budget periods. All applications should contain a breakdown by the object class categories shown in Lines a-k of Section B.

### Section A. Budget Summary Lines 1-4 Columns (a) and (b)

For applications pertaining to a *single* Federal grant program (Federal Domestic Assistance Catalog number) and *not requiring* a functional or activity breakdown, enter on Line 1 under Column (a) the Catalog program title and the Catalog number in Column (b).

For applications pertaining to a *single* program *requiring* budget amounts by multiple functions or activities, enter the name of each activity or function on each line in Column (a), and enter the Catalog number in Column (b). For applications pertaining to multiple programs where none of the programs require a breakdown by function or activity, enter the Catalog program title on each line in *Column* (a) and the respective Catalog number on each line in Column (b).

For applications pertaining to *multiple* programs where one or more programs *require* a breakdown by function or activity, prepare a separate sheet for each program requiring the breakdown. Additional sheets should be used when one form does not provide adequate space for all breakdown of data required. However, when more than one sheet is used, the first page should provide the summary totals by programs.

### Lines 1-4, Columns (c) through (g)

*For new applications*, leave Column (c) and (d) blank. For each line entry in Columns (a) and (b), enter in Columns (e), (f), and (g) the appropriate amounts of funds needed to support the project for the first funding period (usually a year).

*For continuing grant program applications*, submit these forms before the end of each funding period as required by the grantor agency. Enter in Columns (c) and (d) the estimated amounts of funds which will remain unobligated at the end of the grant funding period only if the Federal grantor agency instructions provide for this. Otherwise, leave these columns blank. Enter in columns (e) and (f) the amounts of funds needed for the upcoming period. The amount(s) in Column (g) should be the sum of amounts in Columns (e) and (f).

*For supplemental grants and changes* to existing grants, do not use Columns (c) and (d). Enter in Column (e) the amount of the increase or decrease of Federal funds and enter in Column (f) the amount of the increase or decrease of non-Federal funds. In Column (g) enter the new total budgeted amount (Federal and non-Federal) which includes the total previous authorized budgeted amounts plus or minus, as appropriate, the amounts shown in Columns (e) and (f). The amount(s) in Column (g) should not equal the sum of amounts in Columns (e) and (f).

**Line 5** - Show the totals for all columns used.

### Section B Budget Categories

In the column headings (1) through (4), enter the titles of the same programs, functions, and activities shown on Lines 1-4, Column (a), Section A. When additional sheets are prepared for Section A, provide similar column headings on each sheet. For each program, function or activity, fill in the total requirements for funds (both Federal and non-Federal) by object class categories.

**Line 6a-i** - Show the totals of Lines 6a to 6h in each column.

**Line 6j** - Show the amount of indirect cost.

**Line 6k** - Enter the total of amounts on Lines 6i and 6j. For all applications for new grants and continuation grants the total amount in column (5), Line 6k, should be the same as the total amount shown in Section A, Column (g), Line 5. For supplemental grants and changes to grants, the total amount of the increase or decrease as shown in Columns (1)-(4), Line 6k should be the same as the sum of the amounts in Section A, Columns (e) and (f) on Line 5.

**Line 7** - Enter the estimated amount of income, if any, expected to be generated from this project. Do not add or subtract this amount from the total project amount, Show under the program

## INSTRUCTIONS FOR THE SF-424A (continued)

narrative statement the nature and source of income. The estimated amount of program income may be considered by the Federal grantor agency in determining the total amount of the grant.

### Section C. Non-Federal Resources

**Lines 8-11** Enter amounts of non-Federal resources that will be used on the grant. If in-kind contributions are included, provide a brief explanation on a separate sheet.

**Column (a)** - Enter the program titles identical to Column (a), Section A. A breakdown by function or activity is not necessary.

**Column (b)** - Enter the contribution to be made by the applicant.

**Column (c)** - Enter the amount of the State's cash and in-kind contribution if the applicant is not a State or State agency. Applicants which are a State or State agencies should leave this column blank.

**Column (d)** - Enter the amount of cash and in-kind contributions to be made from all other sources.

**Column (e)** - Enter totals of Columns (b), (c), and (d).

**Line 12** - Enter the total for each of Columns (b)-(e). The amount in Column (e) should be equal to the amount on Line 5, Column (f), Section A.

### Section D. Forecasted Cash Needs

**Line 13** - Enter the amount of cash needed by quarter from the grantor agency during the first year.

**Line 14** - Enter the amount of cash from all other sources needed by quarter during the first year.

**Line 15** - Enter the totals of amounts on Lines 13 and 14.

### Section E. Budget Estimates of Federal Funds Needed for Balance of the Project

**Lines 16-19** - Enter in Column (a) the same grant program titles shown in Column (a), Section A. A breakdown by function or activity is not necessary. For new applications and continuation grant applications, enter in the proper columns amounts of Federal funds which will be needed to complete the program or project over the succeeding funding periods (usually in years). This section need not be completed for revisions (amendments, changes, or supplements) to funds for the current year of existing grants.

If more than four lines are needed to list the program titles, submit additional schedules as necessary.

**Line 20** - Enter the total for each of the Columns (b)-(e). When additional schedules are prepared for this Section, annotate accordingly and show the overall totals on this line.

### Section F. Other Budget Information

**Line 21** - Use this space to explain amounts for individual direct object class cost categories that may appear to be out of the ordinary or to explain the details as required by the Federal grantor agency.

**Line 22** - Enter the type of indirect rate (provisional, predetermined, final or fixed) that will be in effect during the funding period, the estimated amount of the base to which the rate is applied, and the total indirect expense.

**Line 23** - Provide any other explanations or comments deemed necessary.

114 N. Chestnut

Jefferson, Iowa 50129

October 16, 2009

Governor Chester Culver  
Iowa Capitol Building  
Des Moines, IA 50129

Dear Governor Culver

**RE: Prioritizing the Iowa Health Rural Hospital Telemedicine Consortium proposal for grant dollars as a necessary and worthwhile project in Iowa.**

On behalf of the Greene County Board of Supervisors, I would like to express our county's support to the Iowa Health Rural Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). I understand the Consortium's mission is to help bring Iowa citizens and health care professionals the best available health care and education in the most professional, timely and convenient manner possible. This project will address a number of issues currently faced by our rural communities, the least of which include healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural America.

The population of Greene County is 10,000 people. Being a county hospital and supported by tax dollars, health care is not denied to residents of Greene County, however access to specialty care, particularly mental health, is often not readily accessible to residents in the County without traveling many miles. Patients often have to rely on assistance from family and friends to receive these specialty services. The telehealth program would make it possible to have specialists available at all times of the day for consultation via videoconferencing and other technology proposed in the grant. This technology makes it possible to continue to receive much of the care with the expertise of the specialist, without having to travel. It will have a positive economic impact on Greene County because residents will not be traveling out of the county to shop for gas, entertainment and other items they can purchase locally.

As a county concerned with improving the status of rural, underserved Iowans, we clearly understand, value and support the need to develop, expand access, coordinate and improve the quality of essential health care services and enhance the delivery of health care in rural areas. The Consortium's proposal, to use video conferencing and telemedicine as a solution to the issues we face, will benefit Greene County by making it possible to provide better service to our patients, have consultation of specialist available for our primary care physicians, and have better access to continuing education for our providers.

We support the Consortium in its efforts to apply for BTOP grant funds to provide access to specialty health care services via telemedicine to our community, as well as others across the state, because it is an innovative project that will promote broadband equipment usage, particularly among vulnerable populations where broadband technology has been underutilized. We are pleased that the Consortium has taken the lead in addressing the healthcare access needs in our rural communities and are confident that the collaborative effort of the partners in this project will result in improved, accessible and cost-efficient health care to the rural populations of Iowa. **We hope that you will make this a priority project for the state. Thank you for your consideration.**

Sincerely,



Guy Richardson, Chair  
Greene County Board of Supervisors  
Jefferson, IA 50129



# City of Jefferson

October 16, 2009

220 N. Chestnut  
Jefferson, IA 50129 - 1900  
515-386-3111

Eric Crowell  
Iowa Health – Des Moines  
Des Moines, IA 50129

Dear Mr. Crowell

On behalf of the City of Jefferson, I would like to express our community's support to the Iowa Health Rural Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). I understand the Consortium's mission is to help bring Iowa citizens and health care professionals the best available care and education in the most professional, timely and convenient manner possible. This project will address a number of issues currently faced by our rural communities, the least of which include healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural America.

Jefferson is a rural community with a population of 4,800 residents of the approximate 10,000 residents in Greene County. Access to specialty care is often not readily accessible to residents in Greene County, without relying on assistance from family and friends. Greene County Medical Center provides primary care, and must refer patients to specialists out of the community. The telehealth program would make it possible to have specialists available at all times of the day for consultation over the technology proposed in the grant. This technology makes it possible to continue to receive much of the care with the expertise of the specialist, without having to travel. It will have a positive economic impact on Jefferson and Greene County because residents will not be traveling out of the county to shop for items they can purchase locally.

As a community concerned with improving the status of rural, underserved Iowans, I clearly understand, value and support the need to develop, expand access, coordinate and improve the quality of essential health care services and enhance the delivery of health care in rural areas. The Consortium's proposal, to use video conferencing and telemedicine as a solution to the issues we face, will benefit our community by making it possible to provide better service to our patients, have consultation available for our primary care physicians, and have better access to continuing education for our providers.

We support the Consortium in its efforts to apply for BTOP grant funds to provide access to specialty health care services via telemedicine to our community, as well as others across the state, because it is an innovative project that will promote broadband equipment usage, particularly among vulnerable populations where broadband technology has been underutilized. We are pleased that the Consortium has taken the lead in addressing the healthcare access needs in our rural communities and are confident that the collaborative effort of the partners in this project will result in improved, accessible and cost-efficient health care to the rural populations of Iowa. We hope that Governor Culver will make this a priority project for the state.

Sincerely,

Craig Berry  
Mayor of Jefferson  
Jefferson, IA 50129

# IOWA STATE UNIVERSITY

## University Extension

Greene County Extension  
104 West Washington  
Jefferson, Iowa 50129-1920  
515 386-2138  
FAX 515 386-3884  
E-mail [xgreene@iastate.edu](mailto:xgreene@iastate.edu)

October 16, 2009

Eric Crowell, CEO  
Iowa Health  
Des Moines, IA

Dear Mr. Crowell,

On behalf of Greene County Extension, I would like to express our organization's support of the Iowa Health Rural Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). We understand the Consortium's mission is to help bring Iowa citizens and health care professionals the best available care and education in the most professional, timely and convenient manner possible. This project will address a number of issues currently faced by our rural communities, the least of which include healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural America.

Greene County Extension provides educational opportunities to residents of Greene County and is the front door of Iowa State University Extension. Our mission: Greene County Agricultural Extension District fosters positive change in the lives of Greene County citizens. We believe in providing visionary, educational leadership for: Human Development – in all stages of life . . . and their families; Community Development . . . ; Business Development . . .

As an organization concerned with improving the status of rural, underserved Iowans, Greene County, clearly understands, values and supports the need to develop, expand access, coordinate and improve the quality of essential health care services and enhance the delivery of health care in rural areas. The Consortium's proposal, to use video conferencing and telemedicine as a solution to the issues we face, will benefit the clients served by Greene County Extension.

We support the Consortium in its efforts to apply for BTOP grant funds to provide access to specialty health care services via telemedicine to our community, as well as others across the state, because it is an innovative project that will promote broadband equipment usage, particularly among vulnerable populations where broadband technology has been underutilized. We are pleased that the Consortium has taken the lead in addressing the healthcare access needs in our rural communities and are confident that the collaborative effort of the partners in this project will result in improved, accessible and cost-efficient health care to the rural populations of Iowa.

Sincerely,



Kraig Tweed  
Chairman  
Greene County Extension Council

# GREENE COUNTY MEDICAL CENTER

1000 West Lincolnway  
Jefferson, Iowa 50129  
Phone: 515-386-2114  
Fax: 515-386-3695



nothing's more important than your health™

October 15, 2009

Eric Crowell  
Iowa Health – Des Moines  
Des Moines, IA 50129

Dear Mr. Crowell

On behalf of Greene County Medical Center, I would like to express our organization's commitment to the Iowa Health Rural Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). We understand the Consortium's mission is to help bring Iowa citizens and health care professionals the best available care and education in the most professional, timely and convenient manner possible. This project will address a number of issues currently faced by our rural communities, the least of which include healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural America.

Greene County Medical Center is a Critical Access Hospital in Jefferson, IA. The nearest referral hospital is in Ames, 45 miles from Jefferson. Access to specialty care is often not readily accessible to residents in Greene County, without relying on assistance from family and friends. Greene County Medical Center provides primary care, and often refers patients to specialists. The telehealth program would make it possible to have specialists available at all times of the day for consultation over the technology proposed in the grant. This technology makes it possible to continue to receive care with the expertise of the specialist, without having to travel.

As an organization concerned with improving the status of rural, underserved Iowans, Greene County Medical Center, clearly understands, values and supports the need to develop, expand access, coordinate and improve the quality of essential health care services and enhance the delivery of health care in rural areas. The Consortium's proposal, to use video conferencing and telemedicine as a solution to the issues we face, will benefit our organization by making it possible to provide better service to our patients, have consultation available for our primary care physicians, and have better access to continuing education for our providers.

We stand ready to support the Consortium in its efforts to apply for BTOP grant funds to provide access to specialty health care services via telemedicine to our community, as well as others across the state, because it is an innovative project that will promote broadband equipment usage, particularly among vulnerable populations where broadband technology has been underutilized. We are pleased that the Consortium has taken the lead in addressing the healthcare access needs in our rural communities and are confident that the collaborative effort of the partners in this project will result in improved, accessible and cost-efficient health care to the rural populations of Iowa.

Sincerely,

A handwritten signature in cursive script that reads "James Schleisman". The signature is written in black ink and is positioned to the left of the typed name.

Jim Schleisman  
Chairman, Board of Trustees  
Greene County Medical Center  
Jefferson, IA 50129

**GREENE COUNTY**  
**PUBLIC HEALTH DEPARTMENT**  
**Jefferson, IA**

10/16/09

Governor Chester Culver  
Capitol Building  
Des Moines, IA

Dear Governor Culver,

**I would like to encourage you to prioritize the Iowa Health Rural Hospital Telemedicine Consortium's proposal as a necessary and worthwhile project in Iowa.**

The Iowa Health Rural Hospital Telemedicine Consortium is preparing a grant through the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). This project will help bring Iowa citizens and rural health care professionals the needed technology to provide the best available care to rural citizens. Additionally, the project will allow for professional, timely and convenient education of health care and emergency workers in an efficient manner, giving them access to resources now only available in the metro areas. This project will address a number of issues currently faced by our rural communities, the least of which include healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural America.

The Public Health Department is charged with conducting a Community Health Needs Assessment and Plan in Greene County. Our most recent assessment indicated the paucity of certain types of medical specialists for outpatient care in our community. The project not only will provide timely access to specialists for outpatient appointments, it will also allow for simultaneous assessment of OB, ER, and inpatients by a specialist in a remote location. Further, the project seeks to provide home care staff with technology to remotely monitor elderly and medically fragile patients at home to reduce unnecessary hospitalizations and improved health.

As an organization concerned with improving the status of rural, underserved Iowans, the Greene County Public Health Department clearly understands, values and supports the need to develop, expand access, coordinate and improve the quality of essential health care services and enhance the delivery of health care in our county. The Consortium's proposal, to use video conferencing and telemedicine as a solution to the issues we face, will benefit our organization by ensuring access to specialty medical services, allowing for remote monitoring of persons at home, and provide excellent opportunities for distance education for our staff. Additionally, there is potential to connect all communities in our county for emergency response communications.

**Thank you for your consideration of this grant project as a high priority in Iowa.**

Sincerely,



Cynthia Kail, RN, ARNP, MSN  
Director



**Midland**  
Power Cooperative

October 16, 2009

Karen Bossard  
Greene County Medical Center  
1000 W. Lincolnway  
Jefferson, IA 50129

On behalf of Midland Power Cooperative, I would like to express our organization's commitment to the Iowa Health Rural Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). We understand the Consortium's mission is to help bring Iowa citizens and health care professionals the best available care and education in the most professional, timely and convenient manner possible. This project will address a number of issues currently faced by our rural communities, the least of which include healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural America.

Midland Power Cooperative an electrical distribution cooperative serving 13 counties, over 10,000 meters in central Iowa. As a commitment to the communities we serve, Midland Power donates time and resources to area causes, helps recruit industry and jobs to the local area, educates youth and the general public about using electricity efficiency and safety. Our mission is to provide safe reliable, cost efficient and environmentally responsible electric service to a well-informed membership and enhance the quality of life in our area through community activities and economic development. To assist us in our mission a viable, healthy visionary hospital, health clinic is a must to attract new business and assist in maintain our current employment.

As an organization concerned with improving the status of rural, underserved Iowans, Midland Power Cooperative clearly understands, values and supports the need to develop, expand access, coordinate and improve the quality of essential health care services and enhance the delivery of health care in rural areas. The Consortium's proposal, to use video conferencing and telemedicine as a solution to the issues we face, will benefit our organization by assisting us in our health screening program; in turn we receive discount ratings for our program, assisted by our local health care team. It is essential to have an emergency team available during the unforeseen and unfortunate time of serious accidents. We need a reliable team locally on hand with the ability to connect to specialist with the ability to respond to immediate care. Burn injuries, treated properly can reduce recover time immensely.

*a member owned cooperative*

1005 East Lincolnway, Jefferson, Iowa 50129

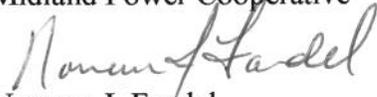
A Touchstone Energy® Cooperative 

Phone 515-386-4111

Fax 515-386-2385

We stand ready to support the Consortium in its efforts to apply for BTOP grant funds to provide access to specialty health care services via telemedicine to our community, as well as others across the state, because it is an innovative project that will promote broadband equipment usage, particularly among vulnerable populations where broadband technology has been underutilized. We are pleased that the Consortium has taken the lead in addressing the healthcare access needs in our rural communities and are confident that the collaborative effort of the partners in this project will result in improved, accessible and cost-efficient health care to the rural populations of Iowa.

Sincerely,  
Midland Power Cooperative

A handwritten signature in cursive script that reads "Norman J. Fandel".

Norman J. Fandel  
Director of Marketing  
& Member Services



JOHN P. (JACK) KIBBIE

OFFICE OF THE  
**PRESIDENT OF THE SENATE**

STATE CAPITOL  
DES MOINES, IOWA 50319  
515-281-3811

October 6, 2009

To whom it may concern:

On behalf of Clarke County Hospital, I would like to express my commitment to the Iowa Health Rural Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). I understand the Consortium's mission is to help bring Iowa citizens and health care professionals the best available care and education in the most professional, timely and convenient manner possible. This project will address a number of issues currently faced by our rural communities, the least of which include healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural America.

As the president of the Iowa Senate, I applaud Clarke County Hospital's commitment to embarking on this new path of telemedicine. I stand in strong support of Clarke County Hospital and its mission and vision for the future.

As Senate President, I am concerned with improving the status of rural, underserved Iowans, and I value and support the need to develop, expand access, coordinate and improve the quality of essential health care services and enhance the delivery of health care in rural areas. The Consortium's proposal, to use video conferencing and telemedicine as a solution to the issues we face, will benefit the people of Clarke County and southern Iowa.

I stand ready to support the Consortium in its efforts to apply for BTOP grant funds to provide access to specialty health care services via telemedicine to our community, as well as others across the state, because it is an innovative project that will promote broadband equipment usage, particularly among vulnerable populations where broadband technology has been underutilized. I am pleased that the Consortium has taken the lead in addressing the healthcare access needs in our rural communities and are confident that the collaborative effort of the partners in this project will result in improved, accessible and cost-efficient health care to the rural populations of Iowa.

Sincerely,

Sen. Jack Kibbie  
Iowa Senate President

Chris Dorsey  
Foundation Development-Public Relations-Marketing  
Clarke County Hospital  
800 S. Fillmore  
Osceola, Iowa 50213  
(641) 342-5231

Senator Kim Reynolds  
Forty-eighth District  
Statehouse

Home



## The Senate

STATE OF IOWA  
*Eighty-third General Assembly*  
STATEHOUSE  
Des Moines, Iowa 50319

### Committees

Economic Growth  
Environment & Energy Independence  
Local Government, *Ranking member*  
Rebuild Iowa  
Transportation

Economic Development Appropriations  
Subcommittee

October 15, 2009

The Honorable Governor Chet Culver  
Des Moines, IA

Dear Governor Culver,

On behalf of the Clarke County Hospital and Greater Regional Medical Center, I am extremely pleased to offer my commitment and support to the Iowa Health Rural Hospital Telemedicine Consortium's application to the Department of Commerce National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). The Consortium's mission is to bring Iowa citizens and health care professionals the best available care and education in the most professional, timely and convenient manner possible. This project will not only assist constituents in Clarke and Union counties by addressing challenges such as healthcare shortages, rising cost of living, budgetary constraints, increased access to technology and declining services to rural Iowa, but will lead the way in providing all Iowans access to specialty health care regardless of where they live.

As a lawmaker whose priority is improving the status of rural and underserved Iowans I believe telemedicine can play a defining role in meeting that goal by expanding access, supporting primary care providers and sustaining our local hospitals as a major economic contributor in each of our communities. I commend the vision demonstrated by Clarke County Hospital, Greater Regional Medical Center and the Consortium for being a leader in utilizing technology and innovation to improve the quality and delivery of essential health care to rural areas of our state.

I believe that the Consortium, through the collaborative effort of those partnering in this grant, will produce results where broadband technology has been underutilized, and will improve accessibility and cost-efficient health care to the rural populations of Iowa. I respectfully ask for your support of the Consortium as a priority project for BTOP funding.

Sincerely,  
Kim Reynolds  
Iowa State Senator, District 48

**Michael J. Reasoner**  
STATE REPRESENTATIVE  
*Ninety-Fifth District*  
Statehouse: (515) 281-3221  
e-mail - [mike.reasoner@legis.state.ia.us](mailto:mike.reasoner@legis.state.ia.us)

HOME ADDRESS  
[REDACTED]



**House of Representatives**  
State of Iowa  
*Eighty-Third General Assembly*  
STATEHOUSE  
Des Moines, Iowa 50319

**ASSISTANT MAJORITY LEADER**

**COMMITTEES**  
Administration and Rules  
Agriculture  
Commerce  
Ways and Means

October 9, 2009

To whom it may concern:

I would like to express my support on behalf of Clarke County Hospital for the Iowa Health Rural Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). I understand the Consortium's mission is to help bring Iowa citizens and health care professionals the best available care and education in the most professional, timely and convenient manner possible. This project will address a number of issues currently faced by our rural communities, the least of which include healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural America.

As a state representative, I have witnessed firsthand Clarke County Hospital's commitment to providing excellent healthcare and staying on the cutting edge by offering the latest technology. I support Clarke County Hospital and its mission and vision for the future.

As a lawmaker concerned with improving the status of rural, underserved Iowans, I clearly understand, value and support the need to develop, expand access, coordinate and improve the quality of essential health care services and enhance the delivery of health care in rural areas. The Consortium's proposal, to use video conferencing and telemedicine as a solution to the issues we face, will benefit my constituents in Clarke County and southern Iowa.

I support the Consortium in its efforts to apply for BTOP grant funds to provide access to specialty health care services via telemedicine to our community, as well as others across the state, because it is an innovative project that will promote broadband equipment usage, particularly among vulnerable populations where broadband technology has been underutilized. I am pleased that the Consortium has taken the lead in addressing the healthcare access needs in our rural communities and are confident that the collaborative effort of the partners in this project will result in improved, accessible and cost-efficient health care to the rural populations of Iowa.

Thank you for your time and consideration.

Sincerely,

A handwritten signature in cursive script that reads "Mike Reasoner". The letters are fluid and connected, with a prominent loop at the end of the word "Reasoner".

Mike Reasoner  
State Representative  
District 95



# City of Osceola

County Seat of Clarke County

115 North Fillmore Street  
P.O. Box 465  
Osceola, Iowa 50213  
(641) 342-2377  
FAX (641) 342-4005  
osceolaia.govoffice2.com

To whom it may concern:

On behalf of Clarke County Hospital, I would like to express the city of Osceola's commitment to the Iowa Health Rural Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). We understand the Consortium's mission is to help bring Iowa citizens and health care professionals the best available care and education in the most professional, timely and convenient manner possible. This project will address a number of issues currently faced by our rural communities, the least of which include healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural America.

The Clarke County Hospital plays a vital role in the city of Osceola. And, the addition of telemedicine is very advantageous to the residents of our city and county, especially when it comes to making medical travel arrangements when they are unable to drive, or see a specialist without driving up to two hours round trip.

As an organization concerned with improving the status of rural, underserved Iowans, the city of Osceola, clearly understands, values and supports the need to develop, expand access, coordinate and improve the quality of essential health care services and enhance the delivery of health care in rural areas. The Consortium's proposal, to use video conferencing and telemedicine as a solution to the issues we face, will benefit our city by expanding new health care services and enhancing services currently in place.

We stand ready to support the Consortium in its efforts to apply for BTOP grant funds to provide access to specialty health care services via telemedicine to our community, as well as others across the state, because it is an innovative project that will promote broadband equipment usage, particularly among vulnerable populations where broadband technology has been underutilized. We are pleased that the Consortium has taken the lead in addressing the healthcare access needs in our rural communities and are confident that the collaborative effort of the partners in this project will result in improved, accessible and cost-efficient health care to the rural populations of Iowa.

Sincerely,

A handwritten signature in cursive script, appearing to read "Fred Diehl".

Mayor Fred Diehl  
City of Osceola



October 2, 2009

To whom it may concern:

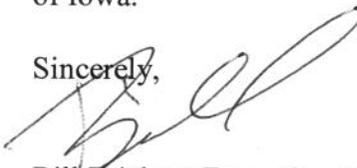
On behalf of Clarke County Hospital, I would like to express the Clarke County Development Corporation's commitment to the Iowa Health Rural Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). We understand the Consortium's mission is to help bring Iowa citizens and health care professionals the best available care and education in the most professional, timely and convenient manner possible. This project will address a number of issues currently faced by our rural communities, the least of which include healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural America.

The Clarke County Development Corporation is dedicated to strengthening the economic development of southern Iowa through the growth of our existing business and industry and the addition of new industry.

As an organization concerned with improving the status of rural, underserved Iowans, the Clarke County Development Corporation, clearly understands, values and supports the need to develop, expand access, coordinate and improve the quality of essential health care services and enhance the delivery of health care in rural areas. The Consortium's proposal, to use video conferencing and telemedicine as a solution to the issues we face, will benefit our organization by improving communication capabilities with all communities in the county in the event of an emergency, natural disaster or utilized for educational purposes. Having this equipment in Clarke County also assists our organization in development efforts as health care facilities rank high on our prospects' priority lists.

We stand ready to support the Consortium in its efforts to apply for BTOP grant funds to provide access to specialty health care services via telemedicine to our community, as well as others across the state, because it is an innovative project that will promote broadband equipment usage, particularly among vulnerable populations where broadband technology has been underutilized. We are pleased that the Consortium has taken the lead in addressing the healthcare access needs in our rural communities and are confident that the collaborative effort of the partners in this project will result in improved, accessible and cost-efficient health care to the rural populations of Iowa.

Sincerely,



Bill Trickey, Executive Director  
Clarke County Development Corporation

PO Box 425  
115 E. Washington  
Osceola, IA 50213



phone: 641-342-4200  
fax: 641-342-6353  
ocms@lowatelecom.net

To whom it may concern:

On behalf of Clarke County Hospital, I would like to express Osceola Chamber MainStreet's commitment to the Iowa Health Rural Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). We understand the Consortium's mission is to help bring Iowa citizens and health care professionals the best available care and education in the most professional, timely and convenient manner possible. This project will address a number of issues currently faced by our rural communities, the least of which include healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural America.

Osceola Chamber MainStreet is dedicated to provide support for investors, promote business, historic preservation, economic growth and community betterment. Our organization stands in strong support of Clarke County Hospital and its mission and vision for the future.

As an organization concerned with improving the status of rural, underserved Iowans, Osceola Chamber MainStreet, clearly understands, values and supports the need to develop, expand access, coordinate and improve the quality of essential health care services and enhance the delivery of health care in rural areas. The Consortium's proposal, to use video conferencing and telemedicine as a solution to the issues we face, will benefit our organization by becoming a stronger healthcare facility in Clarke County and southern Iowa. The addition of the new telemedicine equipment is great for our business community, our residents and the hospital.

We stand ready to support the Consortium in its efforts to apply for BTOP grant funds to provide access to specialty health care services via telemedicine to our community, as well as others across the state, because it is an innovative project that will promote broadband equipment usage, particularly among vulnerable populations where broadband technology has been underutilized. We are pleased that the Consortium has taken the lead in addressing the healthcare access needs in our rural communities and are confident that the collaborative effort of the partners in this project will result in improved, accessible and cost-efficient health care to the rural populations of Iowa.

Sincerely,

Lacey Nish, Executive Director  
Osceola Chamber-MainStreet



**Iowa Department of Public Health**  
Promoting and Protecting the Health of Iowans

---

Thomas Newton, MPP, REHS  
Director

Chester J. Culver  
Governor

Patty Judge  
Lt. Governor

March 8, 2010

To whom it may concern:

On behalf of the Iowa Department of Public Health, I would like to express our organization's commitment to the Rural Iowa Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP).

Our Office of Rural Health is interested in the successful funding of this proposal as the project will address a number of issues currently faced by our rural communities, the least of which include high level job creation, healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural America.

Additionally, IDPH is interested in collaborating with these rural hospitals and public health agencies to explore the use of videoconferencing to set up a virtual unified command system to aide in the response, mitigation, and recovery from emergencies at the local level.

As an organization concerned with improving the status of rural hospitals and public health agencies, IDPH clearly understands, values and supports the need to develop, expand access, coordinate and improve the quality of essential health care and emergency response services in rural areas so that all Iowans can expect to receive similar services throughout our state.

We stand ready to support the Consortium in its efforts to apply for BTOP grant funds because it is an innovative project that is possible by promoting the use of broadband technology. We are pleased that the Consortium has taken the lead in addressing the healthcare access needs and emergency response capabilities in our rural communities and are confident that the collaborative effort of the partners.

Sincerely,

A handwritten signature in black ink that reads "Thomas Newton". The signature is fluid and cursive, with the first name being particularly prominent.

Tom Newton, MPP, REHS  
Director



**David A. Tjepkes**  
**State Representative**  
*Fiftieth District*  
**E-mail:** [david.tjepkes@legis.state.ia.us](mailto:david.tjepkes@legis.state.ia.us)

March 7, 2010

To Whom It May Concern

Re: Federal Broadband Technology Grant

Dear Sirs,

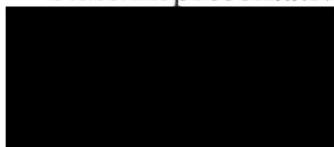
I applaud and lend my total support to the Greene County Medical Center along with Iowa Healthcare System, Clarke County Hospital, Guthrie County Hospital, and Grundy County Hospital in their application for a grant to enable the use of broadband technology in the delivery of health care services in Iowa.

The delivery of those services to rural Iowa is an especially critical need.

I sincerely appreciate your consideration of this most worthwhile endeavor.

Respectfully,

s/Dave Tjepkes  
State Representative



STEVE KING  
5TH DISTRICT, IOWA

Congress of the United States  
House of Representatives  
Washington, DC 20515-1505

COMMITTEES:

AGRICULTURE

JUDICIARY

POLICY

SMALL BUSINESS

March 8, 2010

Department of Commerce  
1401 Constitution Avenue NW  
Washington, D.C. 20230

Dear Friend,

I have received a letter from Clarke County Hospital located in Osceola, Iowa and the Iowa Health Rural Hospital Telemedicine Consortium, regarding a request to obtain Broadband Technology Opportunities Program grant funding. I would like to express my support for this grant application, and ask that you give it all due consideration. Any information or assistance you could provide me with respect to this issue would be greatly appreciated.

Thank you for your time and effort on this matter. If I may be of any assistance with this application, please contact Laura Hartman in my Creston office at 641-782-2495.

Sincerely,



Steve King  
Member of Congress

SK\ LH2

COUNCIL BLUFFS OFFICE  
40 PEARL STREET  
COUNCIL BLUFFS, IA 51503  
(712) 325-1404  
FAX: (712) 325-1403

CRESTON OFFICE  
PO BOX 601  
CRESTON, IA 50801  
(641) 782-2495  
FAX (641) 782-2407

SIOUX CITY OFFICE  
528 NEBRASKA STREET  
SIOUX CITY, IA 51101  
(712) 224-4692  
FAX (712) 224-4583

[HTTP://WWW.HOUSE.GOV/STEVERKING/](http://www.house.gov/steveking/)

SPENCER OFFICE  
P.O. BOX 650  
SPENCER, IA 51301  
(712) 590-1754  
FAX (712) 590-3054

STORM LAKE OFFICE  
300 ONEIDA ST., SUITE A  
STORM LAKE, IA 50568  
(712) 732-4197  
FAX (712) 732-4317

WASHINGTON, D.C. OFFICE  
1809 LONGWORTH  
WASHINGTON, D.C. 20515  
(202) 225-4426  
FAX: (202) 225-3193

Congress of the United States

House of Representatives

Washington, DC 20515-1505

AGRICULTURE

JUDICIARY

POLICY

SMALL BUSINESS

March 10, 2010

Mr. Anthony Wilhelm
Director BTOP
Office of Telecommunications and Information Applications
National Telecommunications and Information Administration
US Department of Commerce
1401 Constitution Ave., NW HCHB Rm. 4887
Washington, D.C. 20230

Re: Gerald Neal, Guthrie County Hospital and Iowa Health Systems

Dear Mr. Wilhelm,

I have enclosed information that I have received from Gerald Neal, CEO of Guthrie County Hospital located in Guthrie Center, Iowa, regarding his application to obtain Broadband Technology Opportunities Program (BTOP) grant funding.

I am writing to express my support for this grant application and ask that you give it full and fair consideration. Guthrie County Hospital is a critical access hospital that employs 120 people and serves several rural communities, with particular importance to the area's elderly population.

Any information or assistance you may provide the applicant would be greatly appreciated.

If I may be of assistance with this application, please call my Sioux City office at 712 224-4692.

I appreciate your attention to this important matter.

Sincerely,

Handwritten signature: Steve King

Steve King
Member of Congress

SK/ish

Enclosures

Cc: Melinda Alt
Tracy Warner

LEONARD L. BOSWELL  
3rd DISTRICT, IOWA

OFFICES:  
1427 LONGWORTH HOUSE OFFICE BUILDING  
WASHINGTON, DC 20515  
(202) 225-3806

300 EAST LOCUST STREET  
SUITE 320  
DES MOINES, IA 50309  
(515) 282-1909

TOLL FREE IOWA NUMBER  
1-888-432-1984

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Congress of the United States  
House of Representatives  
Washington, DC 20515-1503

COMMITTEES:  
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INFRASTRUCTURE  
SUBCOMMITTEE ON HIGHWAYS AND TRANSIT  
SUBCOMMITTEE ON AVIATION  
SUBCOMMITTEE ON RAILROADS, PIPELINES  
AND HAZARDOUS MATERIALS

March 5, 2010

Pamela Delagardelle  
Chief Executive Officer  
Grundy County Memorial Hospital  
201 East J Avenue  
Grundy Center, IA 50638

Dear Ms. Delagardelle:

I would like to give you my support for Grundy County Memorial Hospital's grant application for the Broadband Technology Opportunities Program (BTOP) to implement telehealth strategies. This is a great program for rural hospitals and will enhance broadband capacity for the future of Iowa.

If approved, this project will lead to job creation and economic growth that is immeasurable in this community. In the last five years at Grundy County Memorial Hospital the workforce has grown from 90 employees to 200. Through the use of broadband technology, telehealth will provide improved access to specialty and life-saving healthcare for our rural residents.

The approval of the application would provide job growth, economic growth and better health care for rural residents of Iowa and Grundy County. If you have any questions regarding the support of this project please do not hesitate to contact me or my staff at my district office at 515-282-1909.

Sincerely,



Leonard L. Boswell  
Member of Congress

LLB: cl

706 G Ave., Grundy Center, IA 50638

Phone: 319-824-5813

Mark A. Schildroth, Chairman  
District #4

Barbara L. Smith, Vice Chairman  
District #5

James Ross  
District #1

Harlyn Riekema  
District #2

Charles Bakker  
District #3

March 5, 2010

To whom it may concern:

On behalf of the Grundy County Board of Supervisors, we are writing to support the Grundy County Memorial Hospital and the Rural Iowa Telehealth Initiative's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). We understand that the purpose of the project is to promote sustainable broadband adoption in our rural communities through implementation of a statewide telehealth program that seeks to deliver quality, affordable healthcare in our most rural and medically underserved communities.

The Rural Iowa Telehealth Initiative is important to the people of Grundy County because this project will lead to job creation and improve economic growth in our area. The Hospital is a vital part of Grundy County. With a staff of 200, it is one of the county's largest employers. The expansion and modernization of the Grundy County Memorial Hospital (GCMH) has led to the creation of 110 new jobs over the last seven years.

According to Iowa Hospital Association statistics, GCMH has an estimated economic impact of over \$23.8 million for the county each year. If the health sector increases or decreases in size, the medical and economic health of our county are greatly affected. For the attraction of industrial firms, businesses, and retirees, it is crucial that the area have access to quality healthcare.

We believe that the Grundy County Memorial Hospital will optimize the use of broadband technology to improve access to cost-effective specialty and life-saving healthcare for our rural residents. We urge your support of this grant application.

Thank you for your consideration,

Sincerely,



Mark A. Schildroth  
Board Chairman



204 West Madison  
Jefferson, IA 50129

Superintendent: (515) 386-4168  
Fax Number: (515) 386-3591

Business Office: (515) 386-4599  
District E-Mail: [jscs@jefferson-scranton.k12.ia.us](mailto:jscs@jefferson-scranton.k12.ia.us)

*The Jefferson-Scranton Community School District, in partnership with its communities,  
March 4, 2010 will provide the foundation for lifelong learning.*

To whom it may concern:

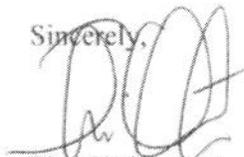
On behalf of Jefferson-Scranton Community School District, I would like to express our organization's commitment to the Iowa Health Rural Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). We understand the Consortium's mission is to help bring Iowa citizens and health care professionals the best available care and education in the most professional, timely and convenient manner possible. This project addresses issues currently faced by our rural communities, including healthcare shortages, the rising cost of living, budgetary constraints, increased access to technology, and declining services to rural Iowa.

Jefferson-Scranton Community School District is one of three school districts in the county serving grades pre-K through 12. We currently are in sharing arrangements with the other two districts in the county to provide quality educational services.

As an organization concerned with improving the status of rural, underserved Iowans, the Jefferson-Scranton Community School District clearly understands, values and supports the need to develop, expand access, coordinate and improve the quality of essential health care services and enhance the delivery of health care in rural areas. The Consortium's proposal, to use video conferencing and telemedicine as a solution to the issues we face, will benefit our organization by: providing health care and education services to our students. As education funding is shrinking in Iowa, we have needed to reduce our school nursing staff. The video conferencing and telemedicine technology will allow our clerical staff support in assessing ill children and supervision of medication monitoring. The video conferencing will also be used to connect the school to the Greene County Medical Center to provide preparatory educational classes to students to enable them enter into health care professions. Additionally, the project will strengthen the local health care system allowing us to be more successful in hiring top candidates for teaching positions in our district.

We stand ready to support the Consortium in its efforts to apply for BTOP grant funds to provide access to specialty health care services via telemedicine to our community, as well as others across the state, because it is an innovative project that will promote broadband equipment usage, particularly among vulnerable populations where broadband technology has been underutilized. We are pleased that the Consortium has taken the lead in addressing the healthcare access needs in our rural communities and are confident that the collaborative effort of the partners in this project will result in improved, accessible and cost-efficient health care to the rural populations of Iowa.

Sincerely,

  
Tim Christensen  
Superintendent



Fort Dodge Center • One Triton Circle • Fort Dodge, Iowa 50501 • (515) 576-7201  
1-800-362-2793 • Website: [www.iowacentral.edu](http://www.iowacentral.edu)

March 2, 2010

To Whom It May Concern:

On behalf of Iowa Central Community College, I would like to express our organization's commitment to the Rural Iowa Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). We are interested in partnering with one of the consortium members to explore how we can use broadband technology to provide health professional education to rural Iowans in the most professional, timely and convenient manner possible.

We support the Consortium in its efforts to apply for BTOP grant funds to provide access to specialty health care services and education because it is an innovative project. We are pleased that the Consortium has taken the lead in addressing an increase in access to healthcare professional education in rural communities.

Sincerely,

A handwritten signature in cursive script that reads "Marlene McComas".

Dr. Marlene McComas  
Vice President of Instruction  
Iowa Central Community College



**MIDWEST PARTNERSHIP DEVELOPMENT CORPORATION**

*(Adair, Audubon, Greene and Guthrie counties)*

**PO Box 537; 615 S. Division St.**

**Stuart, IA 50250**

**Phone: 515-523-1262**

**Fax: 515-523-1397**

**info@midwestpartnership.com**

[www.iowadevelopment.com](http://www.iowadevelopment.com)

March 2, 2010

Jerry Neal, CEO  
Guthrie County Hospital  
710 N 12th Street  
Guthrie Center, IA 50115

Re : BTOP Grant

To whom it may concern:

The Midwest Partnership Development Corporation is the non-profit, collaborative, economic development organization for the Iowa counties of Adair, Audubon, Guthrie and Greene. The purpose of this letter is to offer our support to the Guthrie County Hospital for the BTOP grant.

The Guthrie County Hospital has a large economic impact in our region. Simply put, as a leading employer with over 120 jobs, the health of our region and the health of our region's economy depend on the hospital. This statistic supports the Iowa Hospital Association (IHA) statewide study, indicating that Iowa hospitals provide more than 74,000 jobs that pay more than \$3.6 billion in salaries and benefits. This makes hospitals the ninth largest non-agricultural employer in Iowa.

The hospital not only directly provides jobs, but provides other indirect benefits. First, the hospital creates jobs by purchasing goods and services from other businesses. Further, companies that want to relocate or expand demand access to comprehensive, high-quality health care services. Finally, to expand and attract business, keep young people and families in our state, and ensure the future of our small communities, hospitals must be a central part of our economic plan.

The BTOP grant will support the deployment of broadband infrastructure in unserved and underserved areas, enhance broadband capacity at public computer centers, and encourage sustainable adoption of broadband service. Through this support, BTOP will also advance the area to spur job creation and stimulate long-term economic growth and opportunity.

We urge reviewers of the Hospital's grant application to offer favorable consideration of the request.

Sincerely,

Jason E. White  
Executive Director

# GREENE COUNTY SHERIFF'S OFFICE

THOMAS F. HEATER, SHERIFF

theater@greencountysheriff.net

204 South Chestnut  
Jefferson, IA 50129-2204  
Phone 515/386-2136  
FAX 515/386-3911

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Russell C. Hoffman, Chief Deputy  
rhoffman@greencountysheriff.net  
Karen White, Administrative Assistant  
kwhite@greencountysheriff.net

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March 8, 2010

To whom it may concern:

On behalf of the Greene County Sheriff's Office, I would like to express support to the Rural Iowa Hospital Telemedicine Consortium's proposal to the Department of Commerce, National Telecommunications and Information Administration, Broadband Technology Opportunities Program (BTOP). We understand the Consortium's mission is to help bring Iowa citizens and health care professionals the best available health care in the most professional, timely and convenient manner possible.

As the Greene County Sheriff, I oversee the county jail. The grant proposal seeks to use broadband videoconferencing equipment for two purposes at the Greene County Law Enforcement Center. First, it would allow for the assessment of inmate health concerns by nurses and physicians without the added expense or flight risk to transport inmates to the hospital or clinic for assessment. Secondly, the project seeks to connect the hospital, public health into the county's primary incident command post and allow a virtual system of unified command in the response, mitigation, and recovery from local emergencies.

We stand ready to support the Consortium in its efforts to apply for BTOP grant funds to use technology for remote access to health services, and integration of community partners into unified command for emergencies. We are pleased that the Consortium has taken the lead in addressing the healthcare access needs in our rural communities and are confident that the collaborative effort of the partners in this project will result in improved, accessible and cost-efficient health care and emergency response in rural Iowa.

Sincerely,

A handwritten signature in black ink, appearing to read "Thomas F. Heater", with a long horizontal line extending to the right.

Thomas F. Heater  
Sheriff  
Greene County Sheriff's Office