Public reporting burden for this collection of information is estimated to average 15 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 (0348-0042), 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.

NOTE: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the Awarding Agency. Further, certain Federal assistance awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant, I certify that the applicant:

- Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
- 2. Will give the awarding agency, the Comptroller General of the United States and, if appropriate, the State, the right to examine all records, books, papers, or documents related to the assistance; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
- 3. Will not dispose of, modify the use of, or change the terms of the real property title, or other interest in the site and facilities without permission and instructions from the awarding agency. Will record the Federal awarding agency directives and will include a covenant in the title of real property acquired in whole or in part with Federal assistance funds to assure non-discrimination during the useful life of the project.
- 4. Will comply with the requirements of the assistance awarding agency with regard to the drafting, review and approval of construction plans and specifications.
- 5. Will provide and maintain competent and adequate engineering supervision at the construction site to ensure that the complete work conforms with the approved plans and specifications and will furnish progress reports and such other information as may be required by the assistance awarding agency or State.
- 6. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
- 7. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.

- Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§4728-4763) relating to prescribed standards for merit systems for programs funded under one of the 19 statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
- 9. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§4801 et seq.) which prohibits the use of lead-based paint in construction or rehabilitation of residence structures.
- 10. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§1681 1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. §§290 dd-3 and 290 ee 3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. §§3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) underwhich application for Federal assistance is being made; and, (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.

- 11. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal and federally-assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
- Will comply with the provisions of the Hatch Act (5 U.S.C. §§1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
- Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§276a to 276a-7), the Copeland Act (40 U.S.C. §276c and 18 U.S.C. §874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§327-333) regarding labor standards for federally-assisted construction subagreements.
- 14. Will comply with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
- 15. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the

National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§1451 et seq.); (f) conformity of Federal actions to State (Clean Air) implementation Plans under Section 176(c) of the Clean Air Act of 1955, as amended (42 U.S.C. §§7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended (P.L. 93-523); and, (h) protection of endangered species under the Endangered Species Act of 1973, as amended (P.L. 93-205).

- Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
- Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. §470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. §§469a-1 et seq).
- Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act Amendments of 1996 and OMB Circular No. A-1 33, "Audits of States, Local Governments, and Non-Profit Organizations."
- Will comply with all applicable requirements of all other Federal laws, executive orders, regulations, and policies governing this program.

Gable Rome

Vice President of Government Relations

*SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL	*TITLE 0.00		
*APPLICANT ORGANIZATION	*[DATE SUBMITTEI	D
Iowa Health System, Inc.	3	3/24/10	0.00

SF-424D (Rev. 7-97) Back

FORM CD-511 (REV 1-05)

CERTIFICATION REGARDING LOBBYING

Applicants should also review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 15 CFR Part 28, "New Restrictions on Lobbying." The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Commerce determines to award the covered transaction, grant, or cooperative agreement.

LOBBYING

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 15 CFR Part 28, for persons entering into a grant, cooperative agreement or contract over \$100,000 or a loan or loan guarantee over \$150,000 as defined at 15 CFR Part 28, Sections 28.105 and 28.110, the applicant certifies that to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress in conncection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying." in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure occurring on or before October 23, 1996, and of not less than \$11,000 and not more than \$110,000 for each such failure occurring after October 23, 1996.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

In any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure occurring on or before October 23, 1996, and of not less than \$11,000 and not more than \$110,000 for each such failure occurring after October 23, 1996.

As the duly authorized representative of the applicant, I hereby certify that the applicant will comply with the above applicable certification.

NAME OF APPLICAN	лт	AWARD NUMBER AND/OR PROJECT NAME
lowa Health Syste	m	Iowa Healthcare Plus Broadband Extension Project
PRINTED NAME AN	D TITLE OF AUTHORIZED REPRESENTATIVE	
Sabra K. Rosener	Vice President, Government Relations	
SIGNATURE	Gable Come	DATE
	funce point	5-9-10

FORM CD-512 (REV 12-04)

CERTIFICATION REGARDING LOBBYING LOWER TIER COVERED TRANSACTIONS

Applicants should review the instructions for certification included in the regulations before completing this form. Signature on this form provides for compliance with certification requirements under 15 CFR Part 28, "New Restrictions on Lobbying."

LOBBYING

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 15 CFR Part 28, for persons entering into a grant, cooperative agreement or contract over \$100,000 or a loan or loan guarantee over \$150,000 as defined at 15 CFR Part 28, Sections 28.105 and 28.110, the applicant certifies that to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure occurring on or before October 23, 1996, and of not less than \$11,000 and not more than \$110,000 for each such failure occurring after October 23, 1996.

Statement for Loan Guarantees and Loan Insurance

The undersigned states, to the best of his or her knowledge and belief, that:

In any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the undersigned shall complete and submit Standard Form-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions.

Submission of this statement is a prerequisite for making or entering into this transaction imposed by section 1352, title 31, U.S. Code. Any person who fails to file the required statement shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure occurring on or before October 23, 1996, and of not less than \$11,000 and not more than \$110,000 for each such failure occurring after October 23, 1996.

As the duly authorized representative of the applicant,	I hereby certify that the applicant will comply with the
above applicable certification.	

NAME OF APPLICANT	AWARD NUMBER AND/OR PROJECT NAME
Iowa Health System	Iowa Healthcare Plus Broadband Extension Project
PRINTED NAME AND TITLE OF AUTHORIZED REPRESENTATIVE	
Sabra. K Rosener, Vice President, Government Relations	
SIGNATURE GUMA HOM	DATE
furthe point	5-9-10

U.S. Department of Commerce Broadband Technology Opportunities Program Authentication and Certifications

- 1. I certify that I am the duly Authorized Organization Representative (AOR) of the applicant organization, and that I have been authorized to submit the attached application on its behalf.
- 2. I certify that I have examined this application, that all of the information and responses in this application, including certifications, and forms submitted, all of which are part of this grant application, are material representations of fact and true and correct to the best of my knowledge, that the entity(ies) that is requesting grant funding pursuant to this application and any subgrantees and subcontractors will comply with the terms, conditions, purposes, and federal requirements of the grant program; that no kickbacks were paid to anyone; and that a false, fictitious, or fraudulent statements or claims on this application are grounds for denial or termination of a grant award, and/or possible punishment by a fine or imprisonment as provided in 18 U.S.C. §1001 and civil violations of the False Claims Act.
- 3. I certify that the entity(ies) I represent has and will comply with all applicable federal, state, and local laws, rules, regulations, ordinances, codes, orders and programmatic rules and requirements relating to the project. I acknowledge that failure to do so may result in rejection or deobligation of the grant or loan award. I acknowledge that failure to comply with all federal and program rules could result in civil or criminal prosecution by the appropriate law enforcement authorities.
- 4. I certify that the entity(ies) I represent has and will comply with all applicable administrative and federal statutory, regulatory, and policy requirements set forth in the Department of Commerce Pre-Award Notification Requirements for Grants and Cooperative Agreements ("DOC Pre-Award Notification"), published in the Federal Register on February 11, 2008 (73 FR 7696), as amended; DOC Financial Assistance Standard Terms and Conditions (Mar. 8, 2009); the Department of Commerce American Recovery and Reinvestment Act Award Terms (Apr. 9, 2009); and any Special Award Terms and Conditions that are included by the Grants Officer in the award.
- 5. I certify that any funds awarded to the entity(ies) I represent as a result of this application will not result in any unjust enrichment of such entity(ies) or duplicate any funds such entity(ies) receives under federal universal service support programs administered by the Universal Service Administrative Corporation (USAC).
- 6. I certify that the entity(ies) I represent has secured access to pay the 20% of total project cost or has petitioned the Assistant Secretary of NTIA for a waiver of the matching requirement.

March 19, 2010

Gabra Bone

Authorized Organization Representative Signature

<u>Sabra Rosener</u> Print Name

_Vice President of Government Relations_____ Title

Date



BTOP Application Attachment Instructions Management Team and Organization Chart

Provide the resumes of the senior management team and project team members significant to the project's success. Please identify their years of experience and relevant expertise with projects of similar size, scope, and complexity. Please identify specific prior (or current) projects, dates, and outcomes that showcase the management team's track record as relevant to executing the project. In addition, provide an organizational chart that details the structure of your organization, including any parent, subsidiary, affiliate, or partner organizations.

It is recommended that you provide these documents in PDF format when submitting a copy of your application on an appropriate electronic medium, such as a DVD, CD-ROM, or flash drive.



Management Team Resumes

Starting in 2005, IHS acquired and now operates one of the largest privately owned fiber optic networks in the USA. The network includes more than 2,170 route miles of fiber, connecting healthcare entities in South Dakota, Iowa, Nebraska and Illinois. The IHS management team and project team member resumes are as follows:

- William Leaver, President and Chief Executive Officer, IHS. Mr. Leaver joined IHS in 2001 as President and Chief Executive Officer of TRHS and Senior Vice President of IHS. Mr. Leaver became President and Chief Executive Officer of IHS on January 1, 2008. Mr. Leaver has a Master's Degree in Health Services Administration from the University of Michigan, Ann Arbor. Mr. Leaver previously held executive positions at Munson Medical Center in Traverse City, Michigan, River District Hospital in St. Clair, Michigan, and St. John Hospital and Medical Center in Detroit, Michigan.
- Kevin E. Vermeer, Executive Vice President/Chief Financial Officer, joined IHS in 2000 as Chief Financial Officer of AHS. Mr. Vermeer became Chief Financial Officer of TRHS in 2003 and was named to his current position in May 2009. Mr. Vermeer holds a Master's Degree in Management from New England College in Henniker, New Hampshire, and a Bachelor's Degree in Business Administration from the University of Nebraska, Lincoln. Mr. Vermeer previously held executive positions at Centura Health, Denver, Colorado, and Precedent Health Center, Denver, Colorado.
- Joy M. Grosser, Vice President/Chief Information Officer, joined IHS in May 2009. Ms. Grosser holds a Master's Degree in Healthcare Administration from Washington University, St. Louis, Missouri, and a Bachelor's Degree in Political Science and Health Economics from Stanford University, Stanford, California. Ms. Grosser previously held executive positions at The University of California Irvine Health Sciences System in Orange, California; Loyola Health System, Maywood, Illinois; Health Midwest, Kansas City, Missouri; and Research Medical Center, Kansas City, Missouri. Ms. Grosser manages a HIT staff of over 250.
- Alan S. Kaplan, M.D. Vice President/Chief Medical Officer, joined IHS in June 2009, and also serves as President of IHP. Dr. Kaplan has a Master's Degree in Medical Management from Carnegie Mellon University, Pittsburgh, Pennsylvania, and is residency trained and boardcertified in emergency medicine. Dr. Kaplan earned his Medical Degree at Rush Medical College, Chicago, Illinois. Prior to joining IHS, Dr. Kaplan served for over 14 years as a senior executive at Edward Hospital, Naperville, Illinois, and was in a full-time clinical practice before then.
- Sabra K. Rosener, Vice President of Government Relations, joined IHS in February 2003. Ms. Rosener has a J.D. from Drake University law school and a Bachelor's Degree in English from the University of Northern Iowa.

Ms. Rosener has previously held positions as a healthcare attorney in the lowa Health System Law Department, at Wellmark Blue Cross Blue Shield of Iowa, and the Iowa Court of Appeals.

IHS will continue to utilize the professional services of Fiberutilities for management of the network anticipated by this project. Fiberutilities Advisory Board and Executive Team members bring an average of 20 years of communications experience each spanning all operational disciplines. Fiberutilities has provided services to Fortune 500 companies, school consortiums, healthcare entities (including two successful grant recipients under the FCC's Rural Healthcare Pilot Program) and various public and private business entities. Fiberutilities now operates and manages over 8000 miles of private fiber optic networks for its clients including fiber rings in Chicago and Denver and interconnections with major carriers, National Lambda Rail and Internet2. The resumes of the senior management team and project team are listed on the company's website and are reproduced below.

- o Scot J. Eberle President
 - Scot Eberle brings 20 years of business experience, including extensive success in the Telecommunications arena, to his role as President of the Fiberutilities Group. A tested leader of successful teams, Mr. Eberle has held a variety of executive level positions within the communications industry with MCI Communications, McLeodUSA, 3M and Lanier.
- o David Lunemann Vice President, Client Services
 - Dave Lunemann is an experienced Sales and Marketing leader and Co- Architect of Opportunity Iowa, the nation's largest organized initiative to establish municipal communications utilities in Iowa.
 - Mr. Lunemann has held a number of executive and senior management positions in the communications industry including Group Vice President of Sales & Marketing for McLeodUSA, one of the largest CLECs in the nation. Charged with leading the national sales efforts in the competitive communications industry, Mr. Lunemann demonstrates a successful track record in establishing highly effective sales and marketing organizations. He is experienced in a variety of related fields including "triple-play" service delivery, equipment and infrastructure management and competitive telecommunications.
- o Kent J. Van Metre Vice President, Asset Management Division
 - Kent Van Metre is a seasoned communications professional with 19 years of key management experience in the communications industry spanning the wireless, data, CLEC, interconnect and cable television sectors.
 - Mr. Van Metre's marketing experience includes positions as Director of Marketing for the Western United States for Sprint Cellular and as Director of Marketing for advanced

telecommunications services for McLeodUSA. Mr. Van Metre's leadership roles include serving as the Iowa General Manager for Sprint and for Inter-Tel Technologies, GM and Director of Market Operations of Ohio with 360° Communications, and as Vice President and General Manager for McLeodUSA.

- o Gerald Horst Vice President, Network Services Division
 - Gerald Horst has been providing information technology and communications infrastructure expertise for more than 18 years. He has broad experience in deploying and managing telecom operational support systems (OSS), business support systems (BSS), and outside plant GIS engineering systems.
 - As one of the key operational partners, Mr. Horst manages numerous facets of network design, management and operations at the Fiberutilities Group including outside plant, NOC and network architecture services.
- o Lee C. Seydel Vice President, Network Services Division
 - Lee Seydel brings over 25 years of innovative network and technology management experience to Fiberutilities Group. Mr. Seydel has extensive software development experience with leading companies such as Texas Instruments, Xerox, DSC and TelecomUSA. Mr. Seydel has served as Director of Intelligent Distributed Network Architecture for MCI, as Vice President of Network Services for McLeodUSA and Vice President of Emerging Technology for Americable Inc.
 - As founder and President of LEC Services, Mr. Seydel has a wealth of management and operations experience. Innovative network design, architecture and management solutions comprise the core competencies Mr. Seydel offers.

			Approved by OMB	
Complete this form	g activities pursuant		0348-0046	
I	(See reverse for put			
1. Type of Federal Action:	2. Status of Federal Action:		3. Report Type:	
b a. contract		ffer/application	a a. initial fil	
^L ^J b. grant	^b . initial	award	b. material change	
c. cooperative agreement	c. post-	award	For Material Change Only:	
d. loan				quarter
e. loan guarantee			date of las	st report
f. loan insurance		1		
4. Name and Address of Reporting Entity:		5. If Reporting Entity in No. 4 is a Subawardee, Enter Name		
► Prime Subawardee		and Address of	Prime:	
, Tier,	if known:	N/A		
Iowa Health System				
1200 Pleasant Street				
Des Moines, IA 50309				
Congressional District, if known	: IA-All		District, if known:	
6. Federal Department/Agency:		7. Federal Progra	m Name/Descripti	on:
Department of Commerce / National		Recovery Act - Broadband Technology Opportunities Program (BTOP)		
Telecommunications and Information	n Administration	CFDA Number, i	f applicable: <u>11.55</u>	7
8. Federal Action Number, if know	n:	9. Award Amount, if known:		
RIN: 0660-ZA28		\$		
10. a. Name and Address of Lobb	ying Registrant	b. Individuals Per	forming Services	(including address if
(if individual, last name, first n	ame, MI):	different from N	lo. 10a)	
Rosener, Sabra K.		(last name, first	t name, MI):	
Iowa Health System				
1200 Pleasant Street				
Des Moines, IA 50309		1		
		Ca	My, UTMI	
11. Information requested through this form is authorize		Signature:	and putter	
upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and		Print Name: Sabra K. Rosener		
		Title: Vice President, Government Relations, Iowa Health System		
not more than \$100,000 for each such failure.		Telephone No.: 51	15-241-3390	Date: <u>5-9-10</u>
Federal Use Only:				Authorized for Local Reproduction
				Standard Form LLL (Rev. 7-97)

INSTRUCTIONS FOR COMPLETION OF SF-LLL, DISCLOSURE OF LOBBYING ACTIVITIES

This disclosure form shall be completed by the reporting entity, whether subawardee or prime Federal recipient, at the initiation or receipt of a covered Federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. section 1352. The filing of a form is required for each payment or agreement to make payment to any lobbying entity for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with a covered Federal action. Complete all items that apply for both the initial filing and material change report. Refer to the implementing guidance published by the Office of Management and Budget for additional information.

- 1. Identify the type of covered Federal action for which lobbying activity is and/or has been secured to influence the outcome of a covered Federal action.
- 2. Identify the status of the covered Federal action.
- Identify the appropriate classification of this report. If this is a followup report caused by a material change to the information previously reported, enter the year and quarter in which the change occurred. Enter the date of the last previously submitted report by this reporting entity for this covered Federal action.
- 4. Enter the full name, address, city, State and zip code of the reporting entity. Include Congressional District, if known. Check the appropriate classification of the reporting entity that designates if it is, or expects to be, a prime or subaward recipient. Identify the tier of the subawardee, e.g., the first subawardee of the prime is the 1st tier. Subawards include but are not limited to subcontracts, subgrants and contract awards under grants.
- 5. If the organization filing the report in item 4 checks "Subawardee," then enter the full name, address, city, State and zip code of the prime Federal recipient. Include Congressional District, if known.
- 6. Enter the name of the Federal agency making the award or loan commitment. Include at least one organizationallevel below agency name, if known. For example, Department of Transportation, United States Coast Guard.
- Enter the Federal program name or description for the covered Federal action (item 1). If known, enter the full Catalog of Federal Domestic Assistance (CFDA) number for grants, cooperative agreements, loans, and loan commitments.
- Enter the most appropriate Federal identifying number available for the Federal action identified in item 1 (e.g., Request for Proposal (RFP) number; Invitation for Bid (IFB) number; grant announcement number; the contract, grant, or loan award number; the application/proposal control number assigned by the Federal agency). Include prefixes, e.g., "RFP-DE-90-001."
- 9. For a covered Federal action where there has been an award or loan commitment by the Federal agency, enter the Federal amount of the award/loan commitment for the prime entity identified in item 4 or 5.
- 10. (a) Enter the full name, address, city, State and zip code of the lobbying registrant under the Lobbying Disclosure Act of 1995 engaged by the reporting entity identified in item 4 to influence the covered Federal action.
 - (b) Enter the full names of the individual(s) performing services, and include full address if different from 10 (a). Enter Last Name, First Name, and Middle Initial (MI).
- 11. The certifying official shall sign and date the form, print his/her name, title, and telephone number.

According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is OMB No. 0348-0046. Public reporting burden for this collection of information is estimated to average 10 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 (0348-0046), Washington, DC 20503.

Iowa Healthcare Plus Broadband Extension Project Commonly Used Acronyms

AAA	American Arbitration Association
ARRA	American Recovery and Reinvestment Act
BIP	Broadband Initiatives Program
BTOP	Broadband Technology Opportunities Program
CAI	Community Anchor Institutions
	Comprehensive Community Infrastructure
CCI CDC	
	Centers for Disease Control
	Chief Information Officer
COPD	Chronic Obstructive Pulmonary Disease
CT Scan	Computed Tomography Scan
CWDM	Coarse Wavelength Division Multiplexing
DSL	Digital Subscriber Line
DWDM	Dense Wavelength Division Multiplexing
EHR	Electronic Health Records
FCC	Federal Communications Commission
FG	Fiberutilities Group, LLC
FTE	Full Time Equivalent
GIS	Geographic Information System
GFRC	Glass Fiber Reinforced Concrete
HIE	Health Information Exchange
HIT	Health Information Technology
HRSA	Health Resources and Services Administration
ICU	Intensive Care Unit
IRR	Internal Rate of Return
IEEE	Institute of Electrical and Electronics Engineers
IFMC	Iowa Foundation for Medical Care
IP	Internet Protocol
ICN	Iowa Communications Network
IRU	Indefeasible Right of Use
IHS	Iowa Health System
LAN	Local Area Network
LMAP	Last Mile Access Points
LP	Logic Programming
MRI	Magnetic Resonance Imaging
NAP	Network Access Point
NPV	Net Present Value
NTIA	National Telecommunications and Information Administration
NOC	Network Operations Center
NOFA	Notice of Funding Availability
OADM	Optical Add-Drop Multiplexer
POP	Points of Presence
REC	Regional Extension Center
RHCPP	Rural Healthcare Pilot Program
SBA	Sustainable Broadband Adoption project
SNAP	State Network Access Point
UPS	Uninterruptible Power Supply
VLAN	Virtual Local Area Network
WAP	Wireless Access Point
WAN	Wide Area Network Worldwide Interoperability for Microwave Access



CHESTER J. CULVER GOVERNOR

OFFICE OF THE GOVERNOR

PATTY JUDGE LT. GOVERNOR

June 8, 2009

Dr. Bernadette McGuire-Rivera Associate Administrator Office of Telecommunications and Information Applications National Telecommunications and Information Administration U.S. Department of Commerce 1401 Constitution Avenue, N.W. Washington, D.C. 20230

Re: American Recovery and Reinvestment Act of 2009 ("ARRA") Broadband Technology Opportunities Program ("BTOP")

Dear Dr. McGuire-Rivera:

I am writing to express my support of the BTOP grant application that is being submitted by Iowa Health System (IHS). Award of the grant application will benefit our state immediately by bringing hundreds of high tech jobs to the state and by accomplishing the goals of the Obama Administration in achieving interconnectivity of health care providers across our State.

IHS is an Iowa-based, not-for-profit regional health care provider serving a geographically dispersed rural population across Iowa, Illinois and Nebraska. IHS is the largest healthcare system in Iowa. Its participating hospitals (including rural hospitals in 14 Iowa communities), physician clinics and community network care for approximately one-third of Iowa's population.

IHS is a unique non-profit healthcare provider because it has already invested in and activated a 2170 route mile fiber optic network to serve as the backbone for connecting its health care facilities. IHS is applying for BTOP grant funds to extend its existing fiber network infrastructure to serve a range of community anchor institutions, including non-profit and for-profit health care facilities.

I strongly support IHS' BTOP grant application for the following reasons:

(1) Over the past several years, IHS has taken a strong leadership position in Iowa to accomplish many of the goals Congress has sought to achieve by enactment of the ARRA and creation of the BTOP Program. For example, IHS has already undertaken significant efforts to ensure that "strategic institutions" and "community anchor institutions" in Iowa, Illinois and Nebraska such as rural hospitals, which provide



incalculable rural health care and public safety benefits, and which create jobs, have broadband connections to support access to Tele-Health initiatives and medical records and imaging transfers.

(2) IHS has already invested more than \$17.4 million of its own funds in its fiber network infrastructure and access connections to rural hospitals under its recent HealthNet Connect initiative.

(3) IHS is seeking National Telecommunications and Information Administration support to extend the reach of its existing HealthNet Connect initiative, to provide connectivity to as many rural health care provider entities as funds will permit.

(4) IHS is focused on increasing the quality and availability of health care to predominantly rural areas which are unserved by broadband access connections that can adequately support Tele-Health initiatives such as telemedicine, transmission of advanced imaging and diagnostic services, and access to research and educational institution resources.

(5) IHS is willing to make its backbone network available to all health care related entities in its geographic region.

(6) The IHS project will help stabilize and enhance the economic vitality of rural lowa by reducing the "distance disadvantage" for health care and other services.

(7) Finally, IHS and its "HealthNet Connect" program has been recognized by the FCC in April, 2009 by being awarded funds to promote rural health services under its Rural Health Care Pilot Program ("RHCPP"). The purpose of the grant is to link additional rural hospitals to the IHS network, Internet 2 and National Lambda Rail through broadband access connections. IHS' BTOP grant application will seek to build upon this success and expand its broadband infrastructure to unserved and underserved areas to support rural health care facilities and other community anchor institutions.

The U.S. healthcare system is vast and complex—not interconnected or sufficiently integrated. Access to health care is too often limited by geographical or distance limitations, or the degree to which health care facilities have access to the latest health care technologies or information networks.

The ARRA, including the BTOP program, as I understand it, is designed to address these rural health issues. Providing broadband access, equipment and support to "medical and healthcare providers...to facilitate greater use of broadband service by or through these organizations" or by "public safety agencies" are specific goals of the BTOP program. The application presented by IHS shows the leadership, the value and the commitment to advancing rural health care through broadband infrastructure that IHS has already demonstrated. Approval of IHS' application will enhance service for health care delivery, education or children to the greatest population of users in the state of Iowa.

I hope you will give every consideration to this grant application. Please direct any correspondence regarding this matter to Kate Walton (kate.walton@iowa.gov and 515-281-4495) in my Des Moines office. Thank you for the opportunity to express my views.

Sincerely,

Chester J. Culver Governor of Iowa



Get your business up to speed.

The Honorable Lawrence E. Strickling Assistant Secretary for Communication and Information National Telecommunications and Information Administration U.S. Department of Commerce 1401 Constitution Ave., N.W. Washington, DC 20230

March 23, 2010

Mr. Strickling

Dynamic Broadband, Inc has been delivering wireless broadband solutions in Iowa to Fortune 500 companies, small / medium size enterprise customers as well as both urban and rural residential customers for the past 10 years.

We would like to offer our support for the efforts of the Iowa Health System to expand broadband capabilities in Iowa not only by extending middle mile network reach to Community Anchor Institutions but by even deeper extensions of broadband capabilities through the placement of tower and radio components to bridge the last mile.

Dynamic Broadband, Inc would like to express our interest in utilizing any tower and radio capabilities made available through this expanded network. Our interest in expanding service to users encompasses all the wireless markets contemplated by the proposed network.

We look forward to working directly with Iowa Health System as they make these new wireless capabilities available for us to serve the broadband needs of both new and existing customers.

Sincerely

Mike J. **B**rown President Dynamic Broadband, Inc. Cedar Rapids, IA

2750 Ist Avenue NE Suite 200 Cedar Rapids, IA 52402 Phone: 319-363-4300 Fax: 319-363-4633 www.dybb.com



William B. Leaver President/CEO 1200 Pleasant Street Des Moines, Iowa 50309 TEL: (515) 241-6347 FAX: (515) 241-6220

March 23, 2010

Dr. Bernadette McGuire-Rivera Office of Telecommunications and Information Applications National Telecommunications and Information Administration U.S. Department of Commerce 1401 Constitutional Avenue, N.W. Washington, D.C. 20230

RE: BTOP Round 2 Applications – Iowa Communications Network and Iowa Health System

Dear Dr. McGuire-Rivera:

On behalf of Iowa Health System (IHS), I wholeheartedly support the Iowa Communications Network (ICN) application to expand broadband coverage throughout the State of Iowa. In a collaborative effort, IHS and ICN have submitted linked applications to maximize the strengths of our combined 5,000-mile broadband infrastructure to substantially upgrade broadband access for Community Anchor Institutions (CAI) in Iowa. By combining infrastructure in our private network with the ICN's public network, high-speed broadband can become a reality for Iowans throughout the state.

Our two networks represent purpose-built connectivity geared to serve Iowa's healthcare facilities, community colleges, K–12 schools, libraries, public safety locations and state government facilities. While each application benefits Iowans, it is a combined effort that will maximize federal funds. BTOP funding will enable our networks to interconnect, to fill existing coverage gaps, and offer both fiber and wireless Middle Mile service across the state. One example of the synergies created through the linked applications is simply access to existing infrastructure – ICN with its potential to reach over 650 additional CAI will gain access to IHS instate fiber routes, wireless towers, and Chicago and Denver connectivity; IHS with our potential to reach an additional 1800 CAI will gain access to ICN fiber. Ultimately, it is the residents of Iowa who will enjoy improved healthcare, more job opportunities and overall economic growth.

IHS is lowa's first and largest integrated healthcare system with nearly 20,000 employees located throughout lowa and western Illinois. We are privileged to provide healthcare services to nearly one of every three patients in lowa. Our system also includes three colleges which train healthcare professionals. As a large employer, healthcare provider and educator, we recognize the impact of high-speed broadband for quality and efficient health care as well as for overall economic growth.

I urge your favorable consideration of the lowa broadband initiatives set forth in the ICN and IHS applications. BTOP funding will enable lowa to develop a sound broadband infrastructure to offer affordable broadband service in support of healthcare, education and economic / workforce goals.

Sincerely,

Bleaver

William B. Leaver

MIKE GRONSTAL STATE SENATOR *Fiftieth District* Pottawattamie County Office: (515) 281-4610 Fax: (515) 281-3361

HOME ADDRESS 220 Bennett Avenue Council Bluffs, Iowa 51503 Home: (712) 328-2808



The Senate

State of Iowa Eighty-second General Assembly STATEHOUSE Des Moines, Iowa 50319

michael.gronstal@tegis.state.ia.us Des Moines, Iowa 50319 Dr. Bernadette McGuire-Rivera, Associate Administrator Office of Telecommunications and Information Applications National Telecommunications and Information Administration U.S. Department of Commerce 1401 Constitution Avenue, N.W. Washington, D.C. 20230 SENATE MAJORITY LEADER

Rules and Administration, Chair

RE: BTOP Round 2 Applications - Iowa Health System and Iowa Communications Network

Dear Dr. McGuire-Rivera:

I am pleased to support the linked applications submitted by the Iowa Communications Network (ICN) and Iowa Health System (IHS) to expand broadband coverage throughout the State of Iowa. In particular, the ICN and IHS fiber-based communications networks are coordinating their NITA grant applications (BTOP2) in a collaborative effort to substantially upgrade their comprehensive coverage of Community Anchor Institutions in Iowa. This meaningful public/private partnership will provide needed broadband infrastructure throughout Iowa.

These two networks represent purpose-built connectivity geared to serve Iowa's healthcare facilities, community colleges, K–12 schools, libraries, public safety locations and state government facilities. By adding core capacity and end point reach (both wire line and wireless) to both of these Iowa networks in a collaborative manner, it not only allows each network to best serve their primary users but also positions Iowa to most efficiently serve the broadest possible group of constituents (including underserved areas). This cooperative initiative to enhance the state's middle mile core capacity is also highly complementary to the numerous private wire line and wireless telecommunications companies who will be providing access connections to users.

BTOP support would greatly benefit the State of Iowa. Due to the rural nature of our state, access to highspeed broadband access is limited. According to Speed Matters (a project of the Communications Workers of America), Iowa ranked 35th in the nation for internet download speeds in 2009. These enhancements would also serve as an economic springboard, not only in terms of jobs created in support of building and maintaining this infrastructure, but in supporting information technology advancements in our businesses and communities.

I enthusiastically support this initiative by the ICN and IHS both individually and collectively as a way to continue to advance both broadband requirements and economic goals of Iowa's community anchor education, health care and public safety institutions.

Sincere

Mike Gronstal - Iowa Senate Majority Leader



March 22, 2010

Dr. Bernadette McGuire-Rivera, Associate Administrator Office of Telecommunications and Information Applications National Telecommunications and Information Administration U.S. Department of Commerce 1401 Constitution Avenue, N.W. Washington, D.C. 20230

RE: BTOP Round 2 Applications - Iowa Health System and Iowa Communications Network

Dear Dr. McGuire-Rivera:

I am pleased to support the linked applications submitted by the Iowa Communications Network (ICN) and Iowa Health System (IHS) to expand broadband coverage throughout the State of Iowa. In particular, the ICN and IHS fiber-based communications networks are coordinating their NITA grant applications (BTOP2) in a collaborative effort to substantially upgrade their comprehensive coverage of Community Anchor Institutions in Iowa. This meaningful public/private partnership will provide needed broadband infrastructure throughout Iowa.

These two networks represent purpose-built connectivity geared to serve Iowa's healthcare facilities, community colleges, K–12 schools, libraries, public safety locations and state government facilities. By adding core capacity and end point reach (both wire line and wireless) to both of these Iowa networks in a collaborative manner, it not only allows each network to best serve their primary users but also positions Iowa to most efficiently serve the broadest possible group of constituents (including underserved areas). This cooperative initiative to enhance the state's middle mile core capacity is also highly complementary to the numerous private wire line and wireless telecommunications companies who will be providing access connections to users.

BTOP support would greatly benefit the State of Iowa. Due to the rural nature of our state, access to highspeed broadband access is limited. According to Speed Matters (a project of the Communications Workers of America), Iowa ranked 35th in the nation for internet download speeds in 2009. These enhancements would also serve as an economic springboard, not only in terms of jobs created in support of building and maintaining this infrastructure, but in supporting information technology advancements in our businesses and communities.

I enthusiastically support this initiative by the ICN and IHS both individually and collectively as a way to continue to advance both broadband requirements and economic goals of Iowa's community anchor education, health care and public safety institutions.

Sincerely,

Kist Mon

Kirk Norris President/CEO



March 25, 2010

The Honorable Lawrence E. Strickling Assistant Secretary for Communication and Information National Telecommunications and Information Administration U.S. Department of Commerce Washington, DC 20230

RE: National Telecommunications and Information Administration (NTIA), Broadband Technology Opportunities Program Round 2 (BTOP2), Comprehensive Community Infrastructure (CCI) Projects

In 2008, the multi-stakeholder e-Health Executive Committee and Advisory Council was established within the Iowa Department of Public Health (IDPH) as part of a comprehensive health reform bill (2008 Iowa Acts, Chapter 1188). The Iowa e-Health Executive Committee and Advisory Council represent the collaborative effort to promote the adoption and use of electronic health records (EHRs) and to establish a statewide health information exchange (HIE). Iowa Communications Network (ICN) and Iowa Health System (IHS) are members of the Iowa e-Health Executive Committee and Advisory Council and serve on several e-Health workgroups.

Iowa e-Health is pleased to support the ICN and IHS coordinated NTIA BTOP2 CCI Projects. This collaborative effort to substantially upgrade comprehensive coverage of Community Anchor Institutions in Iowa aligns with the goals and objectives being defined in Iowa's strategic and operational plans for the Office of the National Coordinator for Health Information Technology's (ONC) state HIE cooperative agreement program. For example:

• Goal 3: Enable the electronic exchange of health information technology Objective 3.1: Support the enhancement of network capacity and access to allow providers to connect and exchange information through the HIE

The proposed ICN and IHS CCI Projects will represent purpose-built connectivity geared to serve Iowa's health care facilities, community colleges, K-12 schools, libraries, public safety locations and state government facilities. By collaboratively adding core capacity and end point reach (both wire line and wireless) to both the ICN and IHS networks, it not only allows each network to best serve their primary users but also positions Iowa to most efficiently serve the broadest possible group of stakeholders and underserved areas. This coordinated initiative to enhance Iowa's middle mile core capacity is complementary to the numerous private telecommunications companies who will provide access connections to users and is critical to the vision and goals of Iowa e-Health.

The Iowa e-Health Executive Committee and Advisory Council are dedicated to working collaboratively with public-private partnerships that have shared missions of using health information technology to improve health care quality, assure patient safety, and increase efficiency in health care delivery. With aligned priorities and teamwork of Iowa e-Health, the e-Health Executive Committee is please to support this initiative by ICN and IHS, both

individually and collectively, as a way to advance broadband connectivity and the economic goals of Iowa's community anchor education, health care and public safety institutions.

Sincerely,

Tom Newton, MPP, REHS Director, Iowa Department of Public Health

On behalf of the Iowa e-Health Executive Committee:

- Louise Billmeyer, Federation of Iowa Insurers (Principal Financial Group)
- Jane Brokel, PhD, RN, Iowa Nurses Association (University of Iowa College of Nursing)
- Lee Carmen, University of Iowa Hospitals and Clinics
- Joy Grosser, Iowa Health System
- Cheryll Jones, ARNP, CPNP, Consumer / State Board of Health
- Robert Lee, MD, Iowa Medical Society
- Joe Smith, Iowa Hospital Association Rural Hospital Representative (Boone County

Hospital)

- Jim Green, Mercy Medical Center-Des Moines
- Rob Frieden, Genesis Health System

1001 Grand Avenue West Des Moines, IA 50265-3502 515 223-1401 • 800 747-3070 Fax 515 223-0590 www.iowamedical.org

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March 22, 2010

Dr. Bernadette McGuire-Rivera, Associate Administrator Office of Telecommunications and Information Applications National Telecommunications and Information Administration U.S. Department of Commerce 1401 Constitution Avenue, N.W. Washington, D.C. 20230

RE: BTOP Round 2 Applications – Iowa Health System and Iowa Communications Network

Dear Dr. McGuire-Rivera:

The Iowa Medical Society (IMS) would like to express its strong support for the BTOP grant application that is being submitted by Iowa Health System (IHS). IMS' core purpose is to "assure the highest quality of health care in Iowa through our role as physician and patient advocate." As part of this mission, IMS physicians have had a long-standing commitment to promoting health information technology in Iowa. Specifically, IMS has worked for several years to advance an innovative health care environment that employs the electronic health record as a tool for improving quality, safety and value with an emphasis on interoperability within the community. Award of the BTOP grant to Iowa Health System will benefit our state by furthering this goal of interconnectivity of healthcare providers across the state. I am pleased to support the linked applications submitted by the Iowa Communications Network (ICN) and IHS to expand broadband coverage throughout the State of Iowa. In particular, the ICN and IHS fiber-based communications networks are coordinating their NITA grant applications (BTOP2) in a collaborative effort to substantially upgrade their comprehensive coverage of Community Anchor Institutions in Iowa. This meaningful public/private partnership will provide needed broadband infrastructure throughout Iowa.

These two networks represent purpose-built connectivity geared to serve Iowa's healthcare facilities, community colleges, K-12 schools, libraries, public safety locations and state government facilities. By adding core capacity and end point reach (both wire line and wireless) to both of these Iowa networks in a collaborative manner, it not only allows each network to best serve their primary users but also positions Iowa to most efficiently serve the broadest possible Dr. Bernadette McGuire-Rivera March 22, 2010 Page 2

group of constituents (including underserved areas). This cooperative initiative to enhance the state's middle mile core capacity is also highly complementary to the numerous private wire line and wireless telecommunications companies who will be providing access connections to users.

BTOP support would greatly benefit the State of Iowa. Due to the rural nature of our state, access to high-speed broadband access is limited. According to Speed Matters (a project of the Communications Workers of America), Iowa ranked 35th in the nation for internet download speeds in 2009. These enhancements would also serve as an economic springboard, not only in terms of jobs created in support of building and maintaining this infrastructure, but in supporting information technology advancements in our businesses and communities.

I enthusiastically support this initiative by the ICN and IHS both individually and collectively as a way to continue to advance both broadband requirements and economic goals of Iowa's community anchor education, health care and public safety institutions.

Sincerely,

michael Kitchell

Michael Kitchell, MD President

IOWA *life* | changing*

August 6, 2009

Dr. Bernadette McGuire-Rivera Associate Administrator Office of Telecommunications and Information Applications National Telecommunications and Information Administration U.S. Department of Commerce 1401 Constitution Avenue, N.W. Washington, D.C. 20230

Re: American Recovery and Reinvestment Act of 2009 ("ARRA") Broadband Technology Opportunities Program ("BTOP")

I write, on behalf of the Iowa Department of Economic Development, ("IDED") to support the application being submitted by Iowa Health System (IHS) and to explain the process by which, if awarded federal funds, IHS would be able to access available state match funding.

First, this department supports the award of this grant to IHS because it will benefit our state immediately by bringing hundreds of high tech jobs to the state and accomplishing the goal of the Obama Administration to achieve inter-connectivity of health care providers, including primary care physicians and other rural health care providers across our State. Iowa Health System has been a technology leader in our state in the Health IT sector, and our Governor fully supports expanded deployment of transfer of electronic health records statewide through innovative projects such as this one proposed by Iowa Health System.

Next, in regard to the process for obtaining state matching funds, during the 2009 legislative session, the legislature enacted, and on May 14, 2009, the Governor of Iowa signed the "I-JOBS" bill. Relevant to the BTOP broadband infrastructure funding, the bill provides \$25 million in funding for the deployment and sustainability of high-speed broadband access. It is the intention that these Iowa state funds be used to access any federal broadband stimulus funds that are made available to qualified applicants. The funds are being directed by a 15-member governance board that has been selected jointly by the Iowa Utilities Board, the IDED Board, and the Iowa Telecommunications and Technology Commission. The first board meeting of this group was convened on Friday, July 24, 2009 at 9:30 a.m. at our offices.

At this time our board is in the process of establishing a competitive grant process for the disbursement of funds made available for the deployment and sustainability of high-speed broadband. The governance board can only consider applications from entities seeking to use funds for projects that are sustainable. Priority will be given to applications submitted by qualified private providers of high-speed broadband services. Public entities may participate through partnerships involving qualified private providers and public entities. The plan must also allow for the participation of public entities to accomplish the purposes of this project in areas of the state which remain unserved or underserved as a result of a lack of private sector investment.

We have met with representatives of Iowa Health System about its planned request for \$3 Million in Iowa state local match funding for its proposed BTOP middle mile infrastructure project in Iowa. IHS will have access to these funds, as will other entities that receive federal grant funds under the BTOP program.

Sincerely,

Muchael Z. Trominotina

Michael Tramontina Director

Chester J. Culver, Governor

IOWA DEPARTMENT OF ECONOMIC DEVELOPMENT

Patty Judge, Lieutenant Governor

1ST DISTRICT, IOWA

TRANSPORTATION AND INFRASTRUCTURE COMMITTEE Vice-Chairman, Highways and Transit Subcommittee

OVERSIGHT AND GOVERNMENT REFORM COMMITTEE

SMALL BUSINESS COMMITTEE CHAIRMAN, CONTRACTING AND TECHNOLOGY SUBCOMMITTEE Congress of the United States House of Representatives Washington, DC 20515

August 11, 2009

Dr. Bernadette McGuire-Rivera Associate Administrator Office of Telecommunications and Information Applications National Telecommunications and Information Administration U.S. Department of Commerce 1401 Constitution Avenue, N.W. Washington, D.C. 20230

Dear Dr. McGuire-Rivera,

I am writing to express my support for a grant application submitted by Iowa Health System for funding under the Broadband Technology Opportunities Program. The grant will be used to connect health care providers across the state of Iowa.

I believe this project merits funding from the Office of Telecommunications and Information Applications. The intent of the grant is to expand HealthNet, a fiber optic network that enables health care providers to communicate medical information instantaneously across the state. HealthNet services 11 of Iowa Health System's largest hospitals and some network rural hospitals. The expansion of HealthNet's existing fiber network infrastructure would serve a broader range of community institutions, including non-profit and for-profit physician's clinics and other health care facilities.

I hope you will give every consideration to this project. Please direct any correspondence regarding this matter to my grants office in Waterloo. Thank you for this opportunity to express my views.

Sincerely,

Bruce Braley Member of Congress

WASHINGTON, DC OFFICE

1408 Longworth Building Washington, DC 20515 (202) 225-2911 Fax (202) 225-6666

http://www.house.gov/braley

WATERLOO DISTRICT OFFICE

501 Sycamore St., Suite 623 Waterloo, IA 50703 Phone: (319) 287-3233 Fax: (319) 287-5104

DAVENPORT DISTRICT OFFICE

209 W. 4th St., Suite 104 Davenport, IA 52801 Phone: (563) 323-5988 Fax: (563) 323-5231

DUBUQUE DISTRICT OFFICE

350 W. 6TH ST., SUITE 222 Dubuque, IA 52001 Phone: (563) 557-7789 Fax: (563) 557-1324 REPLY TO:

- 135 HART SENATE OFFICE BUILDING WASHINGTON, DC 20510–1501 (202) 224–3744 e-mail: grassley.senate.gov/contact.cfm
- 721 FEDERAL BUILDING
 210 WALNUT STREET
 DES MOINES, IA 50309–2140
 (515) 288–1145
- 150 1ST AVENUE NE SUITE 325 CEDAR RAPIDS, IA 52401 (319) 363–6832

United States Senate

CHARLES E. GRASSLEY WASHINGTON, DC 20510–1501

August 6, 2009

REPLY TO:

- 103 FEDERAL COURTHOUSE BUILDING 320 6TH STREET SIOUX CITY, IA 51101–1244 (712) 233–1860
- 210 WATERLOO BUILDING 531 COMMERCIAL STREET WATERLOO, IA 50701–5497 (319) 232–6657
- 131 WEST 3RD STREET SUITE 180 DAVENPORT, IA 52801–1419 (563) 322–4331
- 307 Federal Building 8 South 6th Street Council Bluffs, IA 51501–4204 (712) 322–7103

Dr. Bernadette McGuire-Rivera Associate Administrator Office of Telecommunications and Information Applications National Telecommunications and Information Administration U.S. Department of Commerce 1401 Constitution Avenue, N.W. Washington D.C. 20230

RE: Iowa Health System Broadband Technology Opportunities Program Grant Application

Dear Dr. McGuire-Rivera:

It has come to my attention that Iowa Health System (IHS) is applying for a grant through your Broadband Technology Opportunities Program (BTOP). IHS is an Iowa-based, not-for-profit regional health care provider serving a geographically dispersed rural population across Iowa, Illinois and Nebraska. Its participating hospitals (including rural hospitals in 14 Iowa communities), physician clinics and community network, care for approximately one-third of Iowa's patient population.

HealthNet Connect is a fiber optic network that enables health-care providers the ability to communicate medical information instantaneously across the state. Its current fiber optic network provides services to IHS' 11 largest hospitals and network rural hospitals. The BTOP grant funds would enable HealthNet Connect to expand its existing fiber network infrastructure to serve a broader range of community anchor institutions. Your full and fair consideration of this application and proposal is greatly appreciated.

Sincerely,

Chuck Grassley

Charles E. Grassley United States Senator

RANKING MEMBER, FINANCE Committee Assignments:

BUDGET JUDICIARY AGRICULTURE CO-CHAIRMAN, INTERNATIONAL NARCOTICS CONTROL CAUCUS

PRINTED ON RECYCLED PAPER

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Patty Judge LT. GOVERNOR

March 25, 2010

Dr. Bernadette McGuire-Rivera Office of Telecommunications and Information Applications National Telecommunications and Information Administration U.S. Department of Commerce 1401 Constitutional Avenue, N.W. Washington, D.C. 20230

RE: BTOP Round 2 Applications - Iowa Communications Network and Iowa Health System

Dear Dr. McGuire-Rivera,

On behalf of Iowa Communications Network (ICN), I support the Iowa Health System (IHS) application to expand broadband coverage throughout the State of Iowa. In a collaborative effort, ICN and IHS have submitted linked applications to maximize the strengths of our combined 5,000-mile broadband infrastructures to substantially upgrade broadband access for Community Anchor Institutions (CAI) in Iowa. By combining ICN's public network to IHS's private network, high-speed broadband can become a reality for Iowans throughout the state.

This collaborative infrastructure will connect over 100 Iowa hospitals and clinics and provide more accessibility for patient resources, employment opportunities, and staff training/retraining possibilities. Providing rural Iowans with local access to the right healthcare, in the right place, at the right time improves their quality of life, helps contain healthcare costs, and assists in sustaining rural communities. Iowa hospitals are local community employers; provide a significant economic impact to the areas they serve by directly employing 72,220 people and creating another 76,876 jobs outside the hospital sector.

Our two networks represent purpose-built connectivity geared to serve Iowa's healthcare facilities, community colleges, K–12 schools, libraries, public safety locations and state government facilities. While each application benefits Iowans, it is a combined effort that will maximize federal funds. BTOP funding will enable our networks to interconnect, to fill existing coverage gaps, and offer both fiber and wireless Middle Mile service across the state. Ultimately, it is the residents of Iowa who will enjoy improved healthcare, more job opportunities and overall economic growth.

The ICN is committed to continued enhancement of distance learning and providing Iowans with convenient, equal access to education and government utilizing its fiber-optic network. The network makes it possible for Iowans, physically separated by location, to interact in an efficient, creative, and cost-effective manner. ICN's current authorized users include: K-12 schools, higher education, hospitals, state and federal government, National Guard armories, and libraries.

Ensuring each community has the appropriate increased infrastructure capacity and broadband speeds is critical. The benefits are endless for healthcare workers and local citizens as broadband deployment drives all aspects of providing a modernized healthcare infrastructure including: transmission of various image files, remote radiology reads, specialty consultations, administrative (e.g. billing) and various patient portals, clinical and non-clinical education and training programs provided on a network-wide basis (distance learning).

Iowa Communications Network March 25, 2010 Page 2

I enthusiastically support this initiative by the ICN and IHS as a way to continue to advance broadband requirements and economic goals of Iowa's community anchor education, health care and public safety institutions. BTOP funding will enable Iowa to develop a sound broadband infrastructure to offer affordable broadband service in support of healthcare, education and economic/workforce goals.

Sincerely,

Dave Lingren Interim Executive Director Iowa Communications Network

Proposed Middle Mile Service Offerings



4 Pages Withheld in their entirety pursuant to FOIA Exemption 4 (5 U.S.C. § 552 (b)(4))