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**Broadband Is Critical To E-Health Work, Study Finds**  
by Heather Greenfield

A trade association that promotes high-speed Internet deployment released a study Tuesday that recommends ways to encourage the development of e-health initiatives.

U.S. Internet Industry Association President Dave McClure said e-health initiatives would reduce healthcare costs, but most prescriptions are still written by hand and medical records are kept in files in primary care offices. "Document retrieval and storage is really critical and broadband is going to play a role there," McClure said.

Among USIIA's recommendations to ready cyberspace for the spread of e-health is a rejection of any network neutrality laws that would make it illegal to alter the Internet's current content-neutral status for traffic.

Net neutrality is predicated on the belief that broadband providers might create a tiered system on the Internet and charge select content providers more to speed their traffic. The controversial issue has been widely debated on Capitol Hill and at the FCC.

Privately, those lobbying for the concept, like Internet users and the online retailer Amazon.com, or against the concept, like the big telecommunications and cable companies, admit middle ground is a likely outcome on net neutrality rules. Medical information or emergency telephone service are seen as strong arguments by both sides to prioritize at least some Web traffic.

USIIA recommended a rejection of any net neutrality protections, saying critical medical monitoring and health care should not be "on the same footing as music and video downloads or non-critical communications."

McClure said he would rather not see "carve-outs" to just boost the speed of 911 or medical traffic ahead of video downloads because the exceptions list could grow too long.

The USIIA study also noted that another obstacle to the spread of e-health is a large, bureaucratic medical industry.

"They don't see a lot of incentives to move to new technology even though the benefits are well-documented," McClure said. He said there needs to be ways to "incentivize" them to switch.

McClure said the federal government has a role to play that should go beyond the "piecemeal" approach of some state legislatures. Ideas include overhauling the Rural Utilities Service loan program, incentives for healthcare providers to adopt administrative and clinical solutions, more public-private broadband deployment partnerships, and a federal role in setting technical standards to ensure that systems can work together.

"Those systems have to be able to talk to each other," McClure said. "Our belief is the medical industry now is not equipped to take on that role in an effective manner."

McClure said the FCC, FTC and Health and Human Services Department all have processes to set standards and allow industry and consumers to comment.

One issue not listed in the study as an obstacle to e-health is privacy concerns. Asked about it later, McClure said more laws are not needed to safeguard privacy, but more should be done to implement the existing privacy rules.