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Trade group: More Government Action Needed On E-Health

An ISP trade group says government regulation ensures health initiatives get transmission priority.

Grant Gross

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U.S. lawmakers should avoid passing net neutrality laws as a way to help electronic-health initiatives move forward, an Internet provider trade group said Tuesday. E-health and telemedicine applications will need to have priority routing over broadband networks in order to function properly, said David McClure, president and CEO of the U.S. Internet Industry Association (USIIA), which represents broadband providers and other Internet-based companies. Any legislation that would prohibit providers from prioritizing network traffic would be detrimental to e-health initiatives, he said.

“We need to be able to prioritize emergency information,” McClure added. “If not, [e-health applications] have to compete with downloads from YouTube or peer-to-peer networks.”

McClure’s comments about net neutrality came during a press conference to announce USIIA’s new report on ways to accelerate e-health programs. The trade group also called on the U.S. government to enter into more partnerships with private companies, and to reform the U.S. Rural Utility Service loan program that helps bring broadband to rural areas.

Consumer advocacy groups such as Public Knowledge and Free Press have pushed the U.S. Congress to pass net neutrality rules in recent years. Net neutrality rules would prohibit broadband providers from blocking or slowing Web content from competitors. Net neutrality advocates say large broadband providers shouldn’t be able to give priority to an e-health application from a partner company and not give the same bandwidth to a competing e-health application.

Art Brodsky, spokesman for Public Knowledge, called USIIA’s concerns “nonsense.” “What net neutrality strives to prohibit is favoritism,” Brodsky said in an e-mail. “We don’t want Kaiser (to pick one at random) to be the exclusive health-care provider of AT&T, so that customers of Aetna can’t get the same monitoring services and the same emergency priority.”

Asked if USIIA would accept a net neutrality law if it had a carve-out for e-health prioritization, McClure said e-health companies wouldn’t be the only ones asking for an exception. Others would call for carve-outs of 911 emergency dialing voice traffic, or other content, he said.

“How many carve-outs do we have to have?” he said.

The USIIA report says e-health programs are moving forward, but they could progress faster with some additional government actions and resources. The U.S. government can drive e-health standards forward for a medical industry that’s “entrenched” in old practices, McClure said. At the same time, new technologies need a legislative push, he said.

“As the medical arts have advanced, so has their need for bandwidth,” the report says. “Medical records have become more extensive, and need to be accessed by more parties simultaneously. Digital images have become clearer, but also larger.”