Telehealth and Telemedicine: Putting the Pieces Together

Commission Roundtable Update

As a long-standing partner with the health care community, providers and all those it serves, the Legislative Commission on Rural Resources – in conjunction with the Senate and Assembly Health and Insurance Committees – sponsored a telehealth/telemedicine roundtable on January 9, 2012, “Telehealth and Telemedicine: Putting the Pieces Together.” (continued on page 4)
Looking Back and Forging Ahead: Commission Accomplishments and New Bills

The Commission on Rural Resources promoted a number of measures important to rural New York during the 2011 Legislative Session. Two Commission bills, one each related to environment and health, were signed into law in 2011. As for two other measures which passed both the Senate and Assembly, Commission language was included in a larger mandate relief package (municipal bidding), while the other is being considered as part of the Medicaid Redesign Team (MRT) efforts (critical access hospitals).

New York Ocean and Great Lakes Ecosystem Conservation Council Membership – Chapter 363, L. 2011

Adds the Chair of the State Soil and Water Conservation Committee, the Commissioners of Health and Education and the President of the Environmental Facilities Corporation to the membership of the New York Ocean and Great Lakes Ecosystem Council.

Health Occupation and Workplace Demonstration Program – Chapter 444, L. 2011

Extends eligibility for the Demonstration Program to licensed home care services agencies, and allows providers to apply to the Health Department to obtain regulatory and administrative waivers to develop, implement and evaluate programs to test innovative methods for the organization and delivery of services.

Municipal Bidding

Authorizes municipalities to utilize contracts for public works services which have already been let out to bid by the county in which the political subdivision or district is located, or through any county within the State. (S.4360 Y oung/A.5830 Gunther, Passed Both Houses)

Critical Access Hospitals

Provides that outpatient services for the state’s 13 rural critical access hospitals are reimbursed by Medicaid in the same manner that Medicare reimburses for these services – on the basis of reasonable cost. (S.5431-A Young/A.5366-B Russell, Passed Both Houses)
Looking Back and Forging Ahead: Commission Accomplishments and New Bills

(continued from page 2)

In the 2012 legislative session, the Commission is promoting several new measures including:

- **Marketing Retail Farm Operations** – includes retail farm operations, such as roadside stands and on-farm markets, in the definition of “farm operation” for the purposes of encouraging direct-to-consumer sales;

- **Farm Woodland Assessments** - increases the farm woodland acreage that is eligible for an agricultural assessment from 50 to 100 acres;

- **RPT for Physicians in Shortage Areas** – permits communities, which so choose, to enact a local law or resolution to offer a partial tax exemption for real property purchased by a physician who resides in and works in an area designated by the Commissioner of Health as experiencing a physician shortage;

- **Farmland Restoration Tax Credit (biomass personal income tax credit)** – creates a refundable 25% personal income and business franchise tax credit, up to a maximum of $50,000, for expenses of soil improvement and/or farmland improvement projects on farmland to be used in the production of perennial crops;

- **Telehealth Credentialing Act** – permits patient site hospitals to rely on information from a distant site hospital in granting or reviewing the credentials of a health care provider based in such hospital who is providing telehealth services to the patient site;

- **Telehealth Parity Act** – requires insurers and Medicaid to provide coverage for the provision of telehealth services; and

- **New York State Telehealth/Telemedicine Development Act** – coordinates and focuses State policy and program planning for telehealth and telemedicine.

Please feel free to contact our office with any questions on these bills.
Telehealth and Telemedicine: Putting the Pieces Together

The roundtable brought together leading experts representing a broad cross-section of the health care industry, from home care to telepsychiatry to niche markets – all with the goal of identifying barriers to the implementation of a statewide telehealth network, while simultaneously highlighting successes and working models.

Some participants spoke about the availability of health technology services in specific regions of New York, but it was clear that the majority of the funding to develop health technology has traditionally been invested in large-capacity health care centers (medical research facilities, university research centers, etc.) in the State’s urban and metropolitan areas. Although some suburban areas may have the capacity to tap into neighboring health technology systems, the vast majority of rural areas have been responsible for developing their own systems and models that, while successful, have not received the proper funding to help build them into a cohesive statewide health technology network.

While there are proven telehealth partnerships operating across New York State, Senator Young and Assemblywoman Gunther, in acknowledging these successes, sought feedback related to barriers faced by industry providers and organizations in their telehealth/telemedicine efforts. Several participants spoke of the need for increased funding for telehealth/telemedicine, and it was acknowledged and largely agreed that lack of access or gaps in broadband coverage, particularly in rural areas, was detrimental to implementation efforts. In addition, the following barriers were noted as being the most difficult to address: the lack of systematic funding or reimbursement for claims; problems with credentialing; paying for non-physician (RN) time; identifying the correct provider to receive information; and identifying and authenticating the patient.

Despite these barriers, the health care community is clearly committed to the idea of bringing telehealth/telemedicine services to rural areas. Most roundtable participants agree that:

- Telehealth/telemedicine results in decreased hospital stays, facilitates translation/breaks down language barriers and makes more counselors available for mental health services;
- Rural hospitals which may have no intensive care doctors can use telehealth in place of ICU;
- Telehealth/telemedicine has helped with workforce shortages, increased medication compliance and increased successes for diabetic patients – which results in better disease management;
- Telemedicine studies are small, but results show that telemedicine saves money, particularly in transportation costs and emergency room visits, some showing a 22% reduction in ER visits; and
- Telehealth allows a greater percentage of Visiting Nurse patients to stay at home, suggesting that mandatory or required telehealth as a standard part of Long Term-Care treatment be included.
Existing Statewide Programs and Successes

Proven statewide telehealth partnerships do exist across New York State, such as: Western New York Rural Broadband Health Network (WNYRBHN)/Western New York AHEC; Fort Drum Regional Health Planning Organization (FDRHPO); North Country Telemedicine Project; Finger Lakes Community Migrant Health; Rochester General Health; At Home Care, Inc.; and Visiting Nurse Services of Rochester and Monroe County, Inc., each serving different populations, but all with the same goal of bringing health care to rural New Yorkers.

Recommendations

In light of ideas and suggestions presented at the January roundtable, the Commission has introduced three bills which address the following issues:

- Credentialing – permits patient site hospitals to rely on information from a distant site hospital in granting or reviewing the credentials of a health care provider based in the hospital which is providing telehealth services to the patient site;

- Reimbursement parity – requires health insurers and Medicaid to provide coverage for the provision of telehealth services; and

- State policy – establishes the “New York State Telehealth/Telemedicine Development Act,” to coordinate and focus state policy and program planning for telehealth and telemedicine (S.662/A.3793, Valesky/Morelle).

In addition to other measures currently being drafted, a bill to permit communities to offer a partial real property exemption for physician residences in designated rural shortage areas will be introduced in the 2012 Legislative Session.

New York State’s health technology landscape is a patchwork system suffering from medical coverage gaps and overlapping services. A shift in focus from isolated, regional systems is needed in order to move forward in building a robust statewide health technology infrastructure which brings health care to rural areas – and to the patients they serve.
Regional High Schools: Exploring and Expanding Opportunities

While school districts across New York State continue to struggle in light of the newly enacted property tax cap, dwindling enrollments and declines in federal and state aid, state legislators and educators alike are studying broad efforts to save money while maintaining and even increasing academic and extracurricular opportunities for students. Studies into the concept of creating regional high schools are being seriously considered as school districts work to fund academic programs, while standard operating costs and mandated and contractual expenses continue to rise.

Creating regional high schools rather than consolidating districts is considered an efficient way to combine resources, increase efficiencies, save money and improve overall education offerings. Likewise, as parents, students, faculty and staff by nature feel loyal to their own school districts, regionalization is often a less threatening and more palatable option than consolidation.

The regional high school concept is gaining strength, and it has the backing of many legislators, as well as BOCES superintendents, the State Board of Regents, the Rural Schools Association of New York State (RSA) and the New York State Commission on Government Efficiency and Competitiveness. In addition, since 2005, New York’s Department of State has awarded about 50 grants to school districts to study the regional high school issue.

New York State allowed the regional high school model until 1944, yet the only operating regional high school in New York State is in Suffolk County. In response to educators in several Western New York school districts who have been discussing the idea of a regional high school since the mid 1980s, legislation has been proposed that would allow the formation of regional high schools in that area.

The bill was requested by Chautauqua County school districts Chautauqua Lake, Westfield, Brocton and Ripley and the regional BOCES; each of these schools works hard to provide quality education in the face of shrinking enrollments and tax bases that make it more difficult every year. Specifically, the bill calls for an open process requiring a public vote, after which local school boards would be given the authority to enter into regional high school contracts. Contracts would need to show improved and expanded academic offerings along with projected cost savings, and would be subject to final approval by the State Education Commissioner. Comprehensive plans for curriculum, finances, staffing, special education, building use, enrollment, cost savings, transportation, athletics and extracurricular activities would also be required.

Senator Young, who represents Chautauqua County, recently invited Senator John Flanagan – Chair of the Senate Education Committee, recognized education policy expert and representative of Suffolk County – to tour a potential regional high school site at Chautauqua Lake Central School. The existing building is attractive, up-to-date and large enough to accommodate all of the students with few renovations.

The New York State Rural Schools Association (RSA) has encouraged consolidation efforts for several years, and is also supportive of the regional high school concept. RSA believes that regional high schools
can enrich opportunities for secondary students by offering full curricular, co-curricular and interscholastic programs, and supports the approach of having either a hosting district or BOCES administer the programs because it keeps regional high schools within existing governance structures and does not create new layers of school governance.

Regional high schools can be a solution to expanding excellent academic opportunities for our young people, especially in rural areas. Technology, advanced placement and other courses, team sports and extracurricular activities have the potential to be added and enhanced, as administrators and educators creatively work to meet students’ needs while operating at maximum efficiency.

Cornell Program on Applied Demographics (PAD)

Cornell University’s Program on Applied Demographics (PAD) brings skills in demographics, economics, statistics, data gathering and data analysis together to provide a variety of organizations with data, information and advice. PAD works closely with the New York State Department of Economic Development, the U.S. Census Bureau and other organizations to assist them in their activities.

PAD activities relating to New York State schools include interactive maps, enrollment projections, the latest American community Survey school district profiles, recent trends and demographic enrollment data. New York counties data, including maps, projections, county profiles, recent trends and historic trends, are valuable tools which are available at http://pad.human.cornell.edu/

PAD is part of the Bronfenbrenner Life Course Center, a center within the College of Human Ecology at Cornell University.
Restoring the Rural Economy
One Street at a Time

“Communities can be shaped by choice, or they can be shaped by chance. We can keep on accepting the kind of communities we get, or we can start creating the kind of communities we want” – Richard Moe, National Trust for Historic Preservation

New York’s countryside was the inspiration for many early American novels, poems and other works of art. Not only did it provide a beautiful aesthetic, but it was prime land for the prospective yeoman farmer settling in the Northeast. A drive through any of the 43 New York State rural counties now, though, reveals a landscape dotted with vacant buildings, encroaching suburban sprawl and strip malls, pedestrian unfriendly roadways and an overall drift from small town charm and historic aesthetic. A number of factors have contributed to the gradual wearing-away of our rural communities, but one thing is certain - rural residents have grown accustomed to higher rates of chronic disease, traffic accidents and emissions and pollution, and have seen agribusiness and tourism decline.

Communities supported by agribusiness historically tend to maintain the most even-tempered markets during times of national economic crisis. Statewide budget cuts and tax increases meant to sustain programs outside the realm of rural life in New York have stripped rural communities of their most reliable, profit-based resources. The extra economic burdens have, at best, interrupted rural business systems and stifled communities’ opportunities for development. The effect on rural New York has been widespread; small local businesses have been forced to close, commercial buildings and properties are deteriorating, home values have decreased, access to healthcare is inadequate and stable infrastructure has weakened.

Downtown declines have spurred private sector activity in rural parts of New York State, however, as private developers have recognized the vital role downtowns once played - and they long to reestablish those connections in the wake of big box stores. One such developer, Greg O’Connell, has made a dramatic statement in the lives of many residents of the Red Hook District of Brooklyn, where he found abandoned or underutilized properties, bought them for very little and infused the area with hundreds of new businesses, jobs and desirable places to live. Turning a crime-ridden, largely vacant and abandoned industrial area into a vibrant waterfront community, Mr. O’Connell found business owners and other developers eager to collaborate with him on this and another project in Mount Morris – population 3,000 – where he inspired an entire Main Street makeover.

Mr. O’Connell - in collaboration with local entrepreneurs and his alma mater, SUNY
Geneseo, as well as with the help of state grants - established a variety of new businesses on the Mount Morris Main Street, including an Italian restaurant, a bakery, several antique dealers, an event planning office and a barbershop. As of 2010, he had bought and restored 19 buildings and created 28 second floor apartments – all resulting in increased real estate values and more sales tax to the locality.

The position of Main Street Manager was created to manage the activity occurring on Main Street, all with the goal of helping businesses grow, providing better quality of life, attracting outsiders to shop and visit and creating job opportunities.

Inspired by private entrepreneurs like Mr. O’Connell and municipalities like Livingston County, the idea of bringing in business and giving local entrepreneurs a fresh start was the impetus for a new law designed to spur private sector investment. Passed in 2011, Chapter 545 provides a tool for local governments to motivate reinvestment efforts and reinvigorate rural upstate communities and their downtown business centers.

Modeled on the Red Hook District, this initiative came out of a 2009 meeting involving local taxing bodies in Livingston County. Each taxing entity agreed to support legislation that authorized the adoption of a tax abatement program, at local option, in recognition of the need for investment in revitalization. Through the newly enacted program, municipalities can grant real property tax abatements in defined redevelopment areas for new and substantially rehabilitated buildings with an affordable housing component.

Tax abatements have traditionally proven successful in attracting investors for revitalization efforts. While a tax exemption takes away existing revenue generated by a property, tax abatements do not change existing tax payments, but governments agree to take less than 100% of new revenue generated through property investment, repair and renovation.

Initiatives such as Chapter 545 – and inspirations like Greg O’Connell – have drawn the attention of lawmakers, advocates, and concerned citizens who acknowledge that the best solution to problems facing our country is a proactive multi-faceted approach. Rural communities across New York State, and throughout the country, are coming together to refocus their collective mindset on a more positive asset-based style of community planning and development. After all, rural communities will begin to regain stability and see better outcomes when initiatives are well-informed and comprehensive. The scale of such efforts will ultimately be defined by the availability of funds, but sustainability stretches far beyond the limitations of money.

See the following link for more information on the tax abatement program:

Northeast Telehealth Resource Center

Medical Care Development, Inc. (MCD), a Maine non-profit, recently received a notice of a grant award from the Office for the Advance-ment of Telehealth of the U.S. Health Resources and Services Administration to establish a Tele-health Resource Center for New England and rural New York. The award for the Northeast Telehealth Resource Center is $325,000/year for the next three years, and started in September 2011. The Center will promote telehealth in the six New England states and New York, and will be housed at MCD in Augusta, ME, in partnership with Fletcher Allen Health Care Telemedicine program at the University of Vermont. Telehealth has many advantages including getting people to health care services who cannot travel, and with new techniques for monitoring and communicating, it can sustain access in rural communities with aging populations and shortages of specialty health care providers. Telehealth is more economically and technically feasible than ever before, thanks to changes in health care payment reform and better access to high speed broadband in rural areas, and will coordinate with a myriad of broadband providers. The mission of Medical Care Development is to improve the health and general well being of people nationally and internationally, in concert with communities, organizations and governments. MCD has a long history of success-fully developing and demonstrating improved health through best practice applications in a range of areas including: chronic disease self management; clinical office systems; and prac-tice improvement and communication. They were also one of the first rural health development organizations, conducted one of the first blood pressure screening programs and assisted in the creation of the early rural health centers in Maine and the Maine Dartmouth Family Prac-tice Center. More information on this program is available at http://www.northeasttrc.org.

Community Paramedic Program: Medical Care at Home, Not the Emergency Room

Rural Colorado has developed a new community paramedic program that will give people the opportunity to be visited by emergency medical personnel in their own homes. Montezuma County, according to the US Department of Health and Human Services, is an underserved area where it is difficult to find primary health care providers. To remedy this, the role of emergency medical personnel has been expanded. In this program, paramedics check on patients with serious illnesses, who do not require constant care, regularly. These visits often prevent declines in health that result in expensive ambulance rides and trips to the emergency room. The community paramedic program in Western Eagle County will cost $1.5 million in five years, but Christopher Montera, chief of the Western Eagle County Ambulance District, estimates it will save $9.9 million.

2011 National EMS Assessment

According to the 2011 National EMS assessment released by the National Highway Traffic Safety Administration Emergency Medical Services Division, in 32 states, the majority of 911 response Emergency Medical Services (EMS) exist in rural areas. In 31% of states surveyed, the majority of first responder EMS agencies function in rural areas. However, 56.8% of States surveyed have no EMS agencies with specialty care transport air agencies in a county considered rural, and 63.6% have no EMS with emergency medical dispatch center agencies in rural counties.
Ohio State Receives $1.4 million to Develop Emerald Ash Borer Resistant Tree

The Emerald Ash Borer (EAB), an import from Asia, is an insect that has killed all ash trees within a 31 mile radius of its original infestation in Southeastern Michigan. Ash trees from the insects’ native land have defense proteins that save them from the EAB, but Native American ash trees have no such resistance. EABs attack the phloem – the living tissue where water and nutrients are transported – and eventually choke the tree. U.S. Department of Agriculture’s Animal and Plant Inspection Service has recently provided funds to Ohio State University’s Agriculture Research and Development Center to create a Native American ash tree resistant to the EAB. The project began in 2003 with Ohio State, Wright State University, Michigan State University and the U.S. Forest Service all participating. Asian-North American Ash tree hybrids have already been created, and they will be planted and evaluated next autumn. The three year grant is worth $1.4 million, and according to Dan Herms, the project leader, “By the end of this three-year grant, we anticipate being at the phase where we have selected and bred resistant genotypes… then we will pick the best for further breeding — those trees with the highest resistance to EAB and the most desirable growth features.”

Broadband and Personal Computers Aimed at Low-Income Families

The federal government has unveiled a major expansion of its initiative to get low-cost computers and high speed Internet service into the homes of low income students and families. Time Warner Cable and other Internet service providers plan to offer $9.95 monthly broadband service to households eligible for school-lunch aid, and personal computer refurbishing company Redemtech will sell 150 monitors, laptops and desktop PCs with monitors. This initiative is part of a steeped-up effort by the Federal Communications Commission to roll out fast Internet connections to an estimated 100 million Americans who lack broadband and are in danger of falling behind in a technology driven economy. The percentage of Americans who use broadband Internet at home rose to 68% in 2011, yet a persistent digital divide continues in many of our rural communities.

As part of the FCC’s “Connect to Compete” public-private initiative, Microsoft will donate 250 laptops and desktops aimed at low-income students and families. Students and families can apply for micro loans to help with the cost, and Morgan Stanley is developing a program that incorporates local lenders. According to FCC Chairman Julius Genachowski, broadband is the key to economic and educational opportunity, and the FCC has created the “Connect to Compete” plan with the goal of increasing digital literacy. Training will be provided at Best Buy stores and libraries, along with online learning provided by Microsoft and websites such as monster.com.

The program is scheduled to kick off in Spring 2012 in 10 to 15 pilot cities, expanding nationwide in Fall 2012. The $9.95 monthly service will be good for two years to families with at least one child in a free lunch program. Redemtech’s PCs will be specifically designed for first time users and include preloaded educational and careers content.

More information is available at info@connect2compete.org.
**Mobile EMS Lab Improves Critical Care in Nevada**

Humboldt General Hospital Emergency Medical Services, located in the desert and remote region of northern Nevada, responds to a motor vehicle accident call. The paramedics quickly perform a trauma exam to detect internal bleeding or blockages with a handheld analyzer which returns diagnostic laboratory results in two minutes. It is concluded that the critically injured patient requires immediate surgery, and based on this, the HGH-EMS heads to Reno’s trauma center. Providing ultrasound equipment and a portable lab into the field, Humboldt General Hospital Emergency Medical Services can get trauma patients to a trauma center and into surgery faster, bypassing the local smaller hospital. The result is that the patient is more likely to survive using this expedited health care technology.

Five years ago, Humboldt General Hospital, a critical access hospital in Winnemuca, Nevada, approved an expansion of their emergency medical services to a critical care paramedic ground system which required major upgrades in ambulances, equipment and staff training. Using ground ambulances or a combination of ground and helicopter, patient times have been dramatically reduced by an average of two hours by ground or ground/air as compared to an average of 3.5 hours by hospital. In these fiscally challenging times for small rural hospitals across the United States, transportation costs dropped from $7.8 million to $1.4 million a year and patient survival rates have been astounding.

By adopting an aggressive community and patient education program, HGH-EMS has not only improved patient outcomes but also met the community’s needs by providing education and safety programs such as best practices for bicycle helmets and clinics for the installation and usage of car seats. By maximizing resources in lieu of their 2,000 emergency medical service calls per year, they can integrate their staff into the hospital and use community resources as efficiently as possible.

New York State has 13 critical access hospitals which serve remote and isolated regions and provide viable operating and financial solutions in these fiscally challenging times. For more information regarding Humboldt General Hospital Emergency Medical Services, contact HGH EMS Rescue Director Pat Songer at (775) 623-5222, ext. 260.

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**Immigration Proposal Could Ease Ag Labor Woes**

Federal regulations require immigrants to leave the country while their paperwork is being processed. However, the United States Passport, Immigration & Citizenship Agency plans to make it easier for undocumented immigrants to apply for visas. According to the Federal Register, immigrants with close relatives in the United States would be allowed to apply to remain in the United States while their application is processed. (Consular processing could take up to 10 years.) If this proposal is passed, it will help ease agricultural labor concerns, because it would allow laborers to continue working while getting their visas.

**Biosecurity Board Asked Journals Not to Publish Bird Flu Research**

Members of the science community are avidly researching Type A H5N1 influenza, also known as the bird flu. People may contract the bird flu when they come into contact with infected birds, and more than 50% of those infected do not survive. The National Institute of Health (NIH) conducted research in two universities, studying how the disease may be transmitted. The results were submitted to two journals, *Science* and *Nature*, but the National Science Advisory Board for Biosecurity (NSABB) requested the
Rural Counties Added 300,000 Jobs in 2011

The unemployment rate in America is slowly decreasing, and according to information from the Bureau of Labor Statistics (BLS), rural counties are gaining jobs at the same rate as the rest of the country. Unemployment in November of 2011 in rural counties was 8.1%, and it was 8.3% in urban areas. Exurban areas, or metropolitan locations with at least half of their populations living in rural areas, had an unemployment rate of 7.7%. The rural unemployment rate has not been this low since only one year after the recession began, December 2008, when it was 7.6%. Rural counties gained 300,000 jobs total in 2011, with North Carolina contributing 24,000 and rural Alabama contributing 14,000 jobs. South Carolina gained 8,000 jobs, with rural South Carolina’s unemployment rate still the second highest at 11.6%. The state with the highest rural unemployment rate in November was California, and states in the Great Plains had the lowest, followed closely by rural New Hampshire.

Group Rearing of Calves Gaining Traction

Many United States dairy producers are considering using group rearing to raise their calves. Neil Anderson, who gave this movement momentum when he spoke at the Countryside Veterinary Clinic in Lowville, NY six years ago, advocates housing calves in groups and feeding them from bulk units. “Acidified” milk, preserved with formic acid, would be fed to the calves, a process that is reported to require less labor and raise healthy calves. Those not in favor of the plan worry about communicable diseases and heifer-calves cross-suckling in the group housing. However, the group housing promotes nutrition in a natural way, and those who use group housing report fewer health issues. The plan also makes it easier to give the cows enhanced nutrition, which Cornell University dairy scientist, Mike Van Amburgh, maintains studies show that enhanced nutrition before weaning increases the first lactation milk yield by 1,700 pounds. Also according to Anderson, “group housing and feeding reduces hunger in calves, eliminates gorge feeding, keeps abnormal pH levels steady, and promotes social behavior among calves, supporting their natural herd instincts.” With his system, calves are fed seven times daily for an average of seven minutes. This satisfies the cows need to suckle and prevents the cross suckling of navels and ears.

Journals not publish information concerning how to make the disease transmissible between ferrets, the mammal most similar to humans. According to Bruce Alberts, the editor-in-chief of Science, this the first time the NSABB has asked a journal to withhold details for security reasons, despite the fact that this research is part of an effort to create a vaccine for the bird flu. Dr. Philip Campbell, Nature’s editor-in-chief, says the journal is currently discussing how “appropriate access to the scientific methods and data could be enabled.”
Jobs, Economic Impact of Animal Agriculture Identified in Study

One of the main topics discussed by hopeful presidential candidates is job creation, but jobs related to animal agriculture have not been mentioned. According to the Animal Agriculture Economic Analysis, a report from Promar International, in 2010, 1.85 million jobs came from animal agriculture, and animal agriculture contributes $289 billion to the total output of the economy. It also contributes $51 billion to household incomes, $13 billion to income taxes paid, and $6 billion to property taxes paid. The company that paid for this study, The United Soybean Board, did so because animals consumed 30 million tons of soybeans in 2010, and animal agriculture is the primary source of soybean sales.

Rural Health Networks Continue to Gain National Attention

Rural health networks have captured the attention of health care providers and policy makers alike for not only improving access to health care services for rural populations but also for their potential to improve health care quality. In states such as Michigan and Montana, critical access hospitals which have voluntarily united under their state’s rural health network have demonstrated measurable quality improvement (QI) results. As provided by the federal Office of Rural Health Policy, networks can be a great tool for hospitals to improve outcomes and achieve program goals and increase the effectiveness of network member institutions. Network formations vary widely, some serving certain regions in a state, some statewide and some multi-state. The National Rural Health Resources Center projects more networks transcending state lines, working together on joint initiatives and sharing products and service lines. It is also believed that networking is vital to the success and viability of rural and critical access hospitals. More information on this can be accessed at www.raconline.org/newsletter/fall11/feature.php.

New Applications Help Patients, Doctors Battle Cancer

New and innovative ways to combine mobile technology with health care are being studied nationwide. Recently, success has been found in the “Healthy Apps Challenge,” a competition to design the best mobile app that combined accessibility and a “fun factor.” Contestants could enter into three categories. The first category was nutrition: contestants designed applications that would help people make quick and healthy meals. The second was integrative health, where contestants could design applications that combined healthy habits such as sleeping habits and lifestyle changes. The third category included applications aimed at people who do not exercise regularly. The judges, selected by U.S. Surgeon General Regina Benjamin, looked for apps that would be accessible all over the country, even in rural areas lacking sources of wellness information. Some examples of winning applications include Ask Doryl, which supplies information regarding clinical trials for cancer, My Cancer Genome, which allows doctors to access a list of therapeutic options for cancer treatment that may be found based on tumor gene mutations, Health Owl, which helps patients understand the cancer screening process and a Cancer App that provides participants with information about reducing risk of cancer.
California Cantaloupe Growers Want State Marketing Order

Steve Patricio, the Chairman of the California Cantaloupe Advisory Board, recently announced at a cantaloupe food safety press conference that “the California Cantaloupe Advisory Board is pledging today to move forward to establish a mandatory state marketing order with government oversight to focus on food safety in the production of California cantaloupe.” The California cantaloupe industry has been working on ways to ensure their product is safe for a long while. They have worked with government agencies to create “Commodity Specific Guidelines for Melons.” The Advisory Board will work quickly to pass the mandatory state marketing order before the next harvest.

Hospital Lures Rural Doctors with Unusual Offer

Hospitals in rural America have had many problems attracting health care providers. To remedy this, a hospital in Ashland, Kansas found an interesting solution. Eight weeks of the year, the hospital pays employees to do missionary work, or volunteer work in Christian publications and Catholic-run medical schools. The Ashland Hospital that was previously unable to find a doctor now employs a chief medical officer, a medical technologist, a nursing director, and a nurse practitioner, along with other staff. This plan’s inspiration came from the Via Christi medical program where health care providers spent three years completing their residency and then have the opportunity to spend a fourth year in a underdeveloped country. According to the program’s recruiter, Dr. Scott Stringfield, interest in mission work has increased from 16% to 33% of applicants. Benjamin Anderson, the Ashland Hospital administrator, says “rural Kansas and rural Zimbabwe struggle with some of the same challenges — they just look different.” Both areas struggle with access to health care, have issues with housing and feel isolated in their communities. According to Dr. Dan Shuman, a doctor at Ashland, "Everywhere in the country we have problems with health care, but this was a place that was really seeking to make a difference."

FDA Says Low Fungicide Levels in Imported Juice are Acceptable

Orange juice suppliers in the United States are breathing easier after the FDA released results of EPA tests conducted on both foreign and domestic orange juice for unsafe levels of a fungicide, carbendazim, which is currently not approved for use on oranges in the US. More aggressive testing was initiated after some shipments of orange juice from Brazil tested positive for the fungicide in late January. Carbendazim has been cleared to be used on crops in most parts of the world. However, the EPA has not approved its use on oranges. The fungicide is not banned in Brazil and is legal under their laws; it is used there to control a fungus known as black rot, which can destroy citrus products.
SAVE THE DATES!

New York State Public Health Association
2012 Annual Meeting & Conference
April 18 - 19, 2012
Hilton Garden Inn, Troy, NY
www.nyspha.org

New York State Grange Legislative Conferences
April 21, 2012 Regional Conference, Ontario County
June 9, 2012 Regional Conference, Otsego County
http://www.nysgrange.org/legislativeissues.html

New York Rural Water Association
33rd Annual Technical Conference & Exhibition
May 21 - May 24, 2012
Turning Stone Resort, Verona, NY
http://www.nyuralwater.org/conference/main-index.cfm

2012 Rural Schools Association Conference
“Sustaining Quality Rural Schools”
July 8 – 10, 2012
Otesaga Hotel, Cooperstown, NY
http://education.cornell.edu/rsa/conference.html

Energy in the 21st Century
8th Annual Symposium
April 27, 2012
The Links, East Syracuse, NY
http://www.energy21symposium.org