

Healthcare InfoTech

A Biomedical Business International Weekly Publication

FRIDAY, JUNE 4, 1999 • VOL. 2, No. 22 • PAGE 1 OF 7

Business Report

Experts: Genetic data should not be treated differently than general medical information

A Healthcare InfoTech Staff Report

Genetic experts at a recent conference issued a call to action to public policy makers to raise the bar in protecting all medical records to protect an individual's privacy and guard against discrimination.

Hosted by St. Jude Children's Research Hospital (Memphis, TN), the conference brought together a group of prominent ethicists and genetic experts who argued that information about human genetic make-up should be considered only as one contributing factor to our future health and should not be a barrier to employment.

"We should think of our genes not as a pre-determined medical destiny, but as an indicator of future obstacles we may encounter in our lives," said Thomas Murray, PhD, president of the Hastings Center (Garrison, NY), a member of the National Bioethics Advisory Commission and
See Genetic, Page 3

Y2K update

FDA planning Year 2000 audit of selected medical devices

A Healthcare InfoTech Staff Report

To ensure that electronic medical devices will not malfunction in the year 2000 due to the Y2K computer bug, FDA officials told members of a House committee last week that the agency plans to audit a sample of medical devices.

William Hubbard, acting deputy commissioner for policy at the FDA, told the Subcommittee on Health and the Environment and Oversight and Investigations – a subcommittee of the House Commerce Committee – that the agency is seeking funding to audit the data of 60 manufacturers that make what would be considered "high risk" devices – that is, devices critical to patient health or safety if they malfunction this coming Jan. 1.

Up until now, the FDA has maintained that there is
See Y2K, Page 4

Could end up in hands of HHS

Congress still racing to meet looming privacy law deadline

A Healthcare InfoTech Staff Report

Congressional efforts to beat this summer's deadline for passing medial record confidentiality legislation suffered a setback last week when the Senate Committee on Health, Education, Labor and Pensions postponed consideration of the issue until June 9.

That gives Congress only a few short weeks before and after the July 4th recess to settle outstanding issues. If Congress fails to pass a bill, the Health Insurance Portability and Accountability Act (HIPAA) of 1996 will pass the torch to the Department of Health and Human Services (HHS), which would have until next year to come up with final regulations on its own.

Don Asmonga, government relations director at the Washington office of the American Health Information Management Association (Chicago), said, "They are busy drafting those regulations as we speak."

A major stumbling block that surfaced last week was an effort by Sen. Ted Kennedy (D-MA) to make it harder for healthcare investigators to acquire patient medical records. "The current drafts still allow law enforcement to use tools that don't require judicial oversight, such as an administrative subpoena," explained Kennedy aide Jim Manley. "There are also no limitations on the use of the information that is gathered."

The Department of Justice (DOJ) is trying to avoid those restrictions. John Bentivoglio, special counsel for health care fraud at DOJ, recently told the same committee that in many cases DOJ's ability to investigate and prosecute serious crimes – including healthcare fraud – will turn on its ability to obtain "individually identifiable health information in a timely and appropriate manner."

As an example, he cited the need to conduct "a comprehensive review of patient medical charts" in a potential investigation of a hospital suspected of billing health insurance plans for services that were never provided.

Among the three bills currently vying for the top spot, only the one sponsored by Sen. Patrick Leahy (D-VT) would require law enforcement officers to obtain a court
See Privacy, Page 5

INSIDE INFO:	VENEZUELAN TELEMEDICINE EFFORT LAUNCHED	3
	STANDARD REGISTER SETS INNOVATOUR '99	4

ACQUISITIONS & AGREEMENTS

• **Agile Software** (San Jose, CA) has formed a development partnership with **Versal Technologies** (Boston) to create new versions of Agile's Validation Protocol Pak. The Pak allows medical device manufacturers using the Agile software products to validate their change processes as compliant with current FDA good manufacturing practices.

• **Coram Healthcare** (Denver) will take Coram Prescription Services and its nearly \$80 million mail order and pharmacy benefit management division online later this year. The company will use **Mediaconsult.com Inc.** (Bermuda) to provide content and promotion for the new site. Coram will be the exclusive prescription and over-the-counter product provider to Mediconsult.com's visitor base.

• **FCG International** (Yardley, PA) has been acquired by **Healthway Communications International** (Austin, TX). FCG develops publication programs, symposia, speakers' bureaus, and accredited continuing education programs for nurses, nurse practitioners, physician assistants, pharmacists, and physicians.

• **GE Medical Systems** (Milwaukee, Wisconsin) has acquired **Appicare Medical Imaging** (Zeist, the Netherlands), a privately-held developer of systems that archive and transmit electronic medical images and information. Financial terms of the transaction were not released. Appicare designs and produces a range of PC/NT-based systems for picture archiving (PACS) and tel-radiology. PACS allow medical providers to electronically archive, display, and transmit images created by ultrasound, magnetic resonance, computed tomography, X-ray, and other imaging devices throughout a networked health care system. GE Medical said it will fulfill an Appicare contract to supply components to IBM as part of a major PACS project with the U.S. government. And Appicare will continue to supply PACS components through its existing

OEM channels. Appicare's existing management team will join GE, and its headquarters operations will remain in Zeist.

• **IMS Health's** Enrisco Managed Care Technologies unit (London) and **Cognizant Technology Solutions** (West Teaneck, NJ), have formed an alliance to develop products and services for information technology in managed care organizations. The goal is to enable managed care organizations to deploy software and technology quickly and economically, with greater flexibility and interoperability.

• **Lifetime Online** (New York), a source of information for women, and **InteliHealth** (Blue Bell, PA), an online consumer information source, have agreed to share health content and develop new applications relating to women. The new information sources will have features such as Lifetime Online's "Breast Cancer Update," which will include a chat forum and library of information, and InteliHealth's "Ask the Doc" area.

• **Molecular Applications Group** (Palo Alto, CA) has completed development of its Stingray Expression Analysis System. The tool will allow researchers using products from **Affymetrix** (Santa Clara, CA) to broaden their scientific reach with access to gene sequence and function information, helping to identify and select drug targets.

• **Molecular Simulations** (San Diego) products have been selected for use by **Cytoclonal Pharmaceuticals** (Dallas). The company will install its Catalyst, Cerius2, and Insight II products for Cytoclonal's rational drug design efforts to improve diagnostics and therapeutics for cancer and infectious diseases, such as HIV.

• **Paradigm Genetics** (Research Triangle Park, NC) and **PE Biosystems** (Foster City, CA) have signed a research agreement to develop bioinformatics software for functional genomics. The collaboration is intended to allow the organization of databases and analysis of function data associated with gene sequences. The goal is to develop a scaffold and query tools for organizing access-

See A&A's, Page 3

Healthcare InfoTech Business Report® is published every Friday by the BioWorld® and Biomedical Business International® Publishing Group, a division of American Health Consultants®, 3525 Piedmont Road, Building Six, Suite 400, Atlanta, GA 30305. Opinions expressed are not necessarily those of this publication. Mention of products or services does not constitute endorsement. *Healthcare InfoTech Business Report*® is a trademark of American Health Consultants®, a Medical Economics Company. Copyright © 1999 American Health Consultants®. All Rights Reserved. No part of this publication may be reproduced without the written consent of American Health Consultants®. (GST Registration Number R128870672)

ATLANTA NEWSROOM: Associate Publisher/Executive Editor: **Jim Stommen**
Managing Editor: **Don Long**. Senior Editor: **Amy Wesolowski**.
Contributing Editor: **Arthur Gasch**. Production Editors: **Amy Ghiz, Daren Wang**.

BUSINESS OFFICE: Vice President/Group Publisher: **Donald R. Johnston**.
Marketing Manager: **Chris Walker**.
Account Representative: **Bob Sobel**. Reprints: **Steve Vance**.

SUBSCRIBER INFORMATION

Please call **(800) 879-8790** to subscribe or if you have fax transmission problems. Outside U.S. and Canada, call **(404) 262-5526**. Our customer service hours are 8:30 a.m. to 6:00 p.m. EST.

EDITORIAL

Jim Stommen **(404) 262-5402**
Don Long **(404) 262-5539**

GROUP PUBLISHER

Donald R. Johnston **(404) 262-5439**

INTERNET

www.ahcpub.com

BRIEFLY NOTED

Venezuelan telemedicine effort launched

WorldCare Ltd. (Cambridge, MA), a developer of international telemedicine services, technology and insurance, said its WorldCare International Ltd. subsidiary has joined with **General de Seguros SA**, one of the largest insurance companies in Venezuela, to form **Corporacion WorldCare Venezuela**. The new company will promote telemedicine services nationwide and provide consumers with telemedicine insurance and managed access to specialists and sub-specialists at the WorldCare Consortium of U.S. medical centers, including Partners HealthCare System, which includes Massachusetts General Hospital, Brigham and Women's Hospital and Dana-Farber Cancer Institute, the Cleveland Clinic Foundation, Duke University Health System and Johns Hopkins Medicine.

Nasser Menhall, CEO of WorldCare and Armando Del Bosque, managing director of WorldCare International, Latin America, issued a joint statement saying, "These services are designed not to compete with, but to complement the high-quality health care already delivered in Venezuela . . . patients throughout Venezuela, covered by General de Seguros, will be able to secure the very latest U.S. medical expertise at no additional cost as a benefit of enrollment."

Superior Consultant Forms E-Health Division

Superior Consultant Holdings (Southfield, MI), a provider of management and IT consulting services to the healthcare industry worldwide, has launched an e-Health division to help healthcare enterprises realize cost reductions and reposition their organizations to utilize the Internet. Superior's services include workflow redesign, interactive brand development and e-commerce transformation services, combined with offerings from Internet firms such as drkoop.com, WebMD and Healtheon.

Superior said it has combined its Enterprise Consulting Group subsidiary with the services advanced by Superior's new alliance with Microsoft to form the Enterprise Solutions Division of Superior Consultant Co.

A&A's

Continued from Page 2

ing, and analyzing large amounts of information associated with gene sequence.

- **PE Corporation** (Norwalk, Connecticut) has completed the sale of its Analytical Instruments Division to **EG&G** (Wellesley, Massachusetts), the value of the deal approximately \$425 million. PE said it sold the division in order to concentrate on enhancing its position as a supplier of products, services, and information in the life sciences. As part of the deal, the rights to the Perkin-Elmer

brand name were transferred to EG&G. PE shareholders approved a recapitalization proposal that was previously announced in which the company was reorganized as PE Corporation, and two new common stocks were issued: PE Biosystems Group and Celera Genomics Group. PE Corporation currently comprises two operating groups. PE Biosystems Group develops and markets instrument-based systems, reagents, software, and contract-related services to the life science industry and research community. Celera Genomics Group intends to become the definitive source of genomic and related medical information.

- **SGI** (Mountain View, CA) has signed an agreement with the **National Aeronautics and Space Administration** (Washington) to collaborate on advanced super-computer technology development. The agreement provides for a wide range of information technology uses, such as computational modeling for astrobiology and virtual surgery for long-duration space missions.

- **Systems Consulting Co.** (Portland, ME) and **Clarkston-Potomac** (Durham, NC) have formed a development partnership to deliver CARS/ERP Xchange, a standard interface. It will facilitate the exchange of critical contract management information between Clarkston-Potomac's SAP National Implementation Partner enterprise backbone, and Systems Consulting's flagship CARS/IS solution.

- **VIDAR Systems** (Herndon, VA) has signed a value-added reseller agreement with **META Solutions** (Linthicum, MD). META will include VIDAR products in its products for teleradiology and PACS.

Genetic

Continued from Page 1

speaker and moderator of the conference's first plenary session.

"Other factors – like a predisposition toward skydiving or riding a motorcycle without a helmet – are equally relevant in our health," Murray said.

Murray and his colleague, Mark Rothstein, JD, director of the Health Law and Policy Institute at the University of Houston, argued that laws created in many states to protect against genetic discrimination are ineffectual. They fail to work because employers have the legal right to obtain a wide variety of general medical information about their employees and prospective employees – even under the Americans With Disabilities Act. "It doesn't make sense for employers to classify an entire class of people as unemployable because of their genetic predisposition to certain illnesses," said Rothstein. "Why penalize them and their families before they become ill?"

Rothstein noted that genetics, and our perspective about it, will go through a process of evolution. As a parallel, he noted the development of fair hiring practices, such as outlawing the right to ask a woman if she was pregnant in a hiring interview. Thirty years ago, he said, a question such as this was common practice. ■

Standard Register launches InnovaTOUR '99 workshops

Document management company Standard Register (Dayton, Ohio) has launched what it terms an initiative "to educate key healthcare professionals how to use technical innovation to improve efficiency and reduce the cost of paperwork." Called InnovaTOUR '99, the program will consist of six interactive workshops that will feature a "virtual hospital" that guides participants through critical advancements in document automation and workflow.

The virtual hospital is designed to give full perspective to ways to move information electronically, and advance patient care toward the use of computerized patient records. Ted Valentini, Standard Register director of healthcare program implementation, said that workshop attendees will be shown how to move information faster – thus providing more time and attention toward patient care.

"We've developed a forum that not only teaches

healthcare professionals how our technologies work," Valentini said, "but also how to tailor solutions to reap maximum benefits in achieving specific departmental and organizational goals."

Upon entering the virtual hospital, bar-coded medical ID cards will be scanned, triggering document-related activity within hospital departments including admissions, nursing, ancillary departments, a business office, satellite facility and medical records.

A team of experts in engineering, development and service then guides each virtual patient through the system while sharing a variety of applications for formatting and outputting documents at various locations throughout hospitals. Demonstrations include those of advanced technologies that enable hospitals to communicate efficiently with less paper through bar codes, print on demand, electronic forms and document kitting.

The first workshop will be held June 15 in Philadelphia, with subsequent workshops held in Dayton, OH; the Newark/New York area, Chicago, Detroit, and Memphis, TN, through July 20. ■

Y2K

Continued from Page 1

no great need to verify the information on Y2K readiness provided by device makers, and they have said, even if it were necessary, the agency does not have the resources to check all devices.

That position, however, has been challenged by the General Accounting Office (GAO; Washington). The GAO has charged that some hospitals have tested devices posted on FDA's web site – and recorded as being Y2K ready – but found that they malfunctioned when dates were advanced to Jan. 1, 2000.

Testifying at the hearing, Joel Willemsen, the GAO's point man on Y2K, said, "We continue to believe that organizations such as FDA can provide medical device users with a greater level of confidence that their equipment is Y2K compliant through independent reviews of manufacturers' compliance test results." Willemsen said he believed the FDA's proposed audit would satisfy his agency's concerns.

Tom Shope, special assistant to the director of science and technology for the Center for Devices and Radiological health, emphasized that the FDA will not be testing any medical devices. Rather, he said, after identifying those high-risk device, the agency will select a sampling of companies and look closely at their manufacturing practices and procedures, similar to the process used in original device approvals.

The entire audit should be completed by the end of the summer, Shope told *Healthcare InfoTech*, a goal that would provide additional time for the agency to

follow up if problems are found suggesting significant non-Y2K compliance.

What if those problems are found? "If we find a problem here, it means there's a problem with our whole regulatory structure," said Shope. And he added that this, in turn, "would cause a lot of soul searing in a lot of different quarters." Specifically, he said that the identification of compliance problems would probably result in the agency using "a triage process – focusing on the type of products we need to look at and figure out what we can do in the time we have left."

In written testimony provided the subcommittee, Hubbard continued to take the position that the medical device problem is not as serious as many have claimed.

Hubbard said the FDA "believes that the information received to date confirmed our original expectation that the year 2000 problems with medical devices will not be significant or widespread if facilities take appropriate actions to address this issue."

He added that "there will be specific problems that need correction; however, the current assessment is that they are much more likely to disrupt patient care rather than be of direct danger to patients."

Last week, the FDA also placed on its web site a new guidance document titled "MDR Reporting Guidance for Date-Related Problems, Including Y2K." While outlining the guidelines for reporting "date-related medical problems," it outlines certain exemptions for "recurring date events."

The full document is available at www.fda.gov/cdrh/manualremedial.html. ■

INSTALLATIONS

• **IDX Systems** (Burlington, VT) has signed an agreement with Kansas University Physicians Inc. (Lawrence, KS) for a wide range of applications and consulting services. IDX will team with Medaphis (Atlanta) to provide billing and collection services. IDX also will be providing systems for billing, accounts receivable, enterprise-wide scheduling, editing, and managed care applications.

• The Baylor College of Medicine (Houston) has rolled out the Logician electronic medical record system from **MedicalLogic** (Beaverton, OR). When fully deployed the system will be used by faculty physicians and residents in the Baylor network of more than 100 primary care and specialty practices.

• **Mecon** (San Francisco), a provider of healthcare operational and clinical benchmarking data and cost management tools, has been chosen by Advocate Health Care (Oak Brook, IL), as its provider of benchmarking information. Mecon will implement its new web-based Mecon-PEERnext Operations Benchmarking Database in its eight system hospitals in Advocate Health Care. The PEERnext Operations Benchmarking Database enables a healthcare client to create and analyze benchmarking reports to their specifications online and obtain a real-time response from

the Mecon data warehouse. Advocate Health Care owns and operates eight acute-care hospitals and numerous related facilities.

• **Paracel** (Pasadena, CA) a developer of bioinformatics tools, reported that its latest generation genomic analysis system, GeneMatcher, has been installed at Paradigm Genetics (Research Triangle Park, NC). Paradigm is using the system to enable high-throughput gene annotation and to augment its genomics-based approach to engineering agricultural products. "GeneMatcher provides a versatile tool for high-speed DNA and protein searches that would have been impossible only two years ago," said Craig Liddell, director of informatics for Paradigm Genetics. GeneMatcher is a massively parallel genetic data analysis engine for high-throughput search and annotation.

• **Spacenet**, a subsidiary of Gilat Satellite Networks Ltd. (Rockville, MD), reported that AccentHealth (McLean, VA), a leading health information services, will implement a two-way, broadband satellite communications network provided by Spacenet to transmit its video programming to more than 9,000 healthcare facilities nationwide. AccentHealth delivers healthy lifestyle TV information to more than 20 million medical waiting room visitors per month and more than 50,000 healthcare professionals at their offices. AccentHealth will use the SkyBlaster VSAT network to transmit video content to its subscriber base of more than 9,000 medical waiting rooms.

Privacy

Continued from Page 1

order before gaining access to medical records. Leahy's bill would also prohibit law enforcement agencies from using medical records as part of any centralized law enforcement database. The other two front-runners – bills sponsored by Sen. Robert Bennett (R-UT) and Sen. Jim Jeffords (R-VT) – would give law enforcement much wider latitude.

But that's not the only issue that has Congress stymied. Another question is whether or not the bill passed by congress should override existing state privacy laws. The bills sponsored by Bennett and Jeffords would essentially blast existing state laws, but Leahy's bill would not.

Multi-state health care providers say a patchwork of state and federal regulations in this area would spell disaster. Already, they point out, the draft bills each approach 100 pages. And that's before HHS turns those laws into regulations.

A third issue is "private right of action," says Asmonga. "The Democrats want a private right of action where somebody could sue an institution for wrongful disclosure of health information," he reports. "But that is something that is going to be a tough sell in the Republican conference."

Doug Peticord, a health care information expert with Health Advocates (Washington), reports that a new feature added to the Senate's privacy bill is the requirement for an Information Protection Officer. "This would mean that every hospital and provider group would have to designate a person with the authority and obligation to establish and maintain safeguards over the confidentiality of patient information," he said.

"I think it is a good idea for every institution to have somebody assume this role right now if they have not already done so," Peticord added. "Even if this concept gets dropped from the bill itself, it is a step that makes a lot of sense."

Bob Gelman, of Gelman & Associates (Washington), said that security requirements providers will have to live by have already been outlined under HIPPA regulations. "Institutions don't have to wait for that to become final because those regulations are probably not going to be much different than the draft regulations," he said. "That is where a lot of time and money and effort will be required."

As of now, it seems to be anyone's guess whether Congress will sort these issues out in time to meet the Aug. 21 deadline. If it doesn't, federal lawmakers might try to extend their deadline until the end of the year, but the Clinton Administration could always eliminate that option with a presidential veto. ■

\$2.5M from fund is part of \$6.5 refinancing for CMHC

CMHC Systems (Dublin, OH), a provider of integrated information management technology for the behavioral health and human service industry, has executed a \$2.5 million investment agreement with River Cities Capital Fund II (Cincinnati) as part of a \$6.5 million refinancing package that includes funds from Finova Mezzanine Capital, Silicon Valley Bank, and Provident Bank.

CMHC will use the funds to accelerate its product development and marketing programs and pursue select acquisitions.

River Cities is a \$145 million family of venture capital funds which invests in information technology, healthcare and telecommunications companies in the Midwest and Southeast." ■

PEOPLE IN PLACES

• Calvin Wiese has been named chief executive officer of **HealthMagic** (Columbia, South Carolina) and Mardian Blair has been named chairman of the board. Wiese founded HealthMagic in 1995 and has been chairman of the board since the company was incorporated in 1996. Blair is president of Adventist Health System and has been the vice chairman of the board of HealthMagic since its inception. HealthMagic is a privately held, web-based technology company that develops information management products for the healthcare industry.

• Barbara Dunlavy has been named vice president of conferences for the **Information Technology Association of America** (Arlington, Virginia). Dunlavy will direct the planning and marketing of ITAA meetings and conferences, focusing on expansion and strategic planning. Dunlavy, a certified meeting professional since 1995, brings 10 years of meeting, trade show and special events planning for associations and corporations to ITAA. Most recently, she was director of educational programming for the National Association of Health Underwriters. ITAA consists of 11,000 direct and affiliate members throughout the U.S. which produce products and services in the IT industry. The association plays a major role in public policy issues of concern to the IT industry, including taxes and finance policy, intellectual property, telecommunications law, encryption and critical infrastructure protection, securities litigation reform, and human resources policy.

PRODUCT BRIEFS

• **Innovative Medical Services** (El Cajon, CA) has introduced the pager-sized ScanMaster as a plug-in enhancement to its Fillmaster 1000e computerized pharmaceutical water dispenser. Users scan a prescription's NDC bar code and the Fillmaster 1000e displays the product name and required water quantity. The prescription is then dispensed with a simple button touch. The ScanMaster's database contains proprietary and generic oral drug types from various manufacturers.

• **Lexicon Genetics** (The Woodlands, TX) has launched a subscription Internet program that allows commercial and academic institutions to access OmniBank, the company's genomics library and database. The site includes information on 50,000 mouse clones, a collection of knockout mouse embryonic stem cells and gene sequence information that can provide predictive information on the action of potential therapeutic drug candidates and the validity of their targets.

• **New Medicine** (Lake Forest, CA) has updated its web site to include a demonstration of its oncology knowledgeBase, a CD-ROM resource developed for executives working in the oncology field. The site includes a database with more than 1,300 records of drugs in development, drug targets, or enabling technologies for treating cancer and complications associated with the disease.

• **Planar Systems** (Beaverton, Oregon) has released the 12.1-inch LC800.600.31-121 model active-matrix, liquid-crystal, flat-panel display in SVGA color with integrated touchscreen for embedded display systems in applications such as patient monitoring, anesthesia, blood analysis, imaging, arthroscopic surgery and cardiology. The LC-121 has a wide viewing angle of 140 degrees horizontally and 110 degrees vertically and is part of Planar's line of extended-performance color products suited to demanding medical and other applications. The product's field-replaceable backlight generates up to 1,000 units of brightness, with a circuit that assures consistent luminance over product life. Its contrast ratio tops 200:1 in a darkroom environment and 50:1 in daylight conditions.

• **Siemens Medical Systems** (Iselin, NJ) has reported that its 3DVirtuoso workstation can now reconstruct Digital Subtraction Angiography images in three dimensions, allowing physicians to view vascular structures in depth from any angle. Originally designed to allow instant access to CT and MR data in three dimensions, the 3DVirtuoso workstation can now automatically transform conventional X-ray images acquired by Siemens' Multistar Plus, Angiostar Plus and Neurostar Plus systems, converting them into 3-D images in approximately five minutes. The 3DVirtuoso workstation displays vascular structures as a 3-D volume in real time, eliminating the need to acquire a multiple series of two-dimensional images and providing improved applications flexibility.

WEB SIGHTINGS

- **AccentHealth** (Tampa, FL), has launched a web site (www.accenthealth.com) and a two-way, broadband satellite network, with the two new services complementing the company's healthy lifestyle television programming produced by CNN and its print magazine, both delivered to doctors' offices and waiting rooms. Further, the company said it has formed nearly a dozen strategic partnerships with technology and content providers to increase the diversity and depth of its healthcare information, tools and resources. Under the terms of a five-year contract, Spacenet (Washington), a subsidiary of Gilat Satellite Networks, will provide AccentHealth with the use of its SkyBlaster IP-based, Very Small Aperture Terminal (VSAT) satellite network. The joint product, slated for delivery to AccentHealth's 10,000 sites and 50,000 medical practitioners by the end of the year, will be the largest commercial VSAT network in the nation. Gilat, in conjunction with MCI, also operates the largest governmental VSAT network for the U.S. Postal Service.

- **Lexicon Genetics** (The Woodlands, TX) has launched its subscription Internet program enabling commercial and academic/non-profit institutions to access OmniBank, the company's proprietary genomics library and database. Through **Lexicon's** web site, at www.lexgen.com, subscribers can reach 50,000 mouse clones, the world's largest collection of knockout mouse embryonic stem (ES) cells and gene sequence information, which can provide valuable predictive information on the action of potential therapeutic drug candidates and the validity of their targets.

- **Matria Healthcare** (Marietta, GA) has launched NetNurse, a 24-hour service that offers healthcare information and immediate answers to healthcare questions from nurses. Each nurse specializes in certain areas of interest. The fee-based service will initially focus on pregnancy-related issues but will later include women's health, pediatrics, diabetes, and respiratory-related issues. The site is at www.netnurse.com.

- **Micro Laboratories** (Johnston, RI) has launched an online health and nutritional e-commerce site. The site features Micro Laboratories products, nutritional information, interaction with health experts, and a chat format. The site is at www.vitaminkingdom.com.

- **Medscape** (New York) has launched a Money & Medicine Internet site which provides financial information and interactive tools designed for physicians and other healthcare professionals. Users can review government healthcare policies, read about managed care issues, access stock quotes, check the present value of their investment portfolio, and access Dow Jones Business News healthcare stories.

- **Upland Global** (Minneapolis) has announced an

agreement with Honeybee Technology (Montreal) for Honeybee to develop and manage a new service for the sale of Upland Global's alternative health care products over the Internet. The announcement follows Upland Global's recent announcement of an e-Commerce agreement with HeartlandAmerica.com. *Uplanddirect.com* will provide direct Internet access to Upland Global's health and wellness product information and to make online purchases using e-Commerce credit card payments. *Uplanddirect.com* has an expected launch date of July 1. *Uplanddirect.com* will initially offer cutting-edge innovations in alternative healthcare products. The online product line will be expanded by marketing feedback from Uplanddirect.com's customers.

- The Cyberprise business of **Wall Data** (Kirkland, WA) has launched an Internet community for healthcare executives, <http://healthcare.cyberprise.com>, specifically created to link chief medical officers, chief information officers and chief financial officers of hospitals with information to improve the quality of care within hospitals. The community is designed to help healthcare use Internet technologies to improve healthcare management and efficiency. It also addresses how Internet technologies can improve physician-to-hospital connectivity, integration of clinical and financial systems and electronic medical records. In addition, the healthcare Web site provides links to key industry journals and publications, useful facts, news and additional resources from leading healthcare publications. Wall Data's Cyberprise Internet business (www.cyberprise.com) focuses on integrating and managing enterprise information assets via Cyberprise Corporate Information Portal, which provides a personalized view of corporate information.

Biosensor changes name to Biotel; stock split is okayed

Biosensor (Minneapolis, Minnesota) has changed its name to Biotel Inc. and has authorized increasing its shares of common stock to 10 million and the authorized shares of preferred stock to 2 million. Stockholders approved splitting the company's common stock, one share for each eight shares outstanding.

Biosensor makes Holter monitors, ultrasound imagers, other medical instruments, and the associated Windows and Internet software for processing medical data. In a statement, the company said that the name change "reflects the broadening nature of our business and our acquisition strategies, which include plans to expand our involvement in the emerging field of biomedical telecommunications using the Internet, satellite, and cellular networks for improved patient monitoring."

The trade names Advanced Biosensor and Diagnostic Monitoring will continue to be used by the company's newly formed subsidiary, Advanced Biosensor. ■