Nov. 5, 2020

Application Window for FCC's Connected Care Pilot to Open Tomorrow

Two years after the FCC began considering its Connected Care Pilot Program in an initiative spearheaded by Commissioner Brendan Carr, the application window for the program will open tomorrow at noon and will close at 11:59 p.m. on Dec. 7, the FCC announced today.

Successful applicants for the three-year $100 million Connected Care Pilot Program will receive universal service support equal to 85% of their projects' qualifying costs. Applicants must seek competitive bids for the services for which they seek program support, the FCC's Wireline Competition Bureau explained in a public notice released today in WC docket 18-213 announcing the opening of the application window.

The bureau said that applicants "are strongly encouraged to submit applications as soon as possible after the window opens, to ensure complete and accurate applications before the close of the application filing window; applicants bear full responsibility for complete, accurate and *timely filed* applications."

Applications should be filed through an online system that will be activated on the Universal Service Administrative Co.'s website tomorrow. Applicants must use login credentials provided by the FCC when their FCC Form 460 eligibility and registration form was approved, and all sites included in an application must have been approved as eligible, the bureau noted. "Health care provider sites that USAC has already determined are eligible to participate in the Commission's Rural Health Care Program or the COVID-19 Telehealth Program are already eligible to participate in the Connected Care Pilot and need not file an additional FCC Form 460 for an eligibility determination for the Pilot Program," it added.

After the close of the application window, timely filed applications will be publicly available in the FCC's electronic comment filings system (ECFS) under WC docket 18-213.

The bureau also said that funding actions under the program will give "particular emphasis [to] providing connected care to low-income and veteran patients." The order establishing the pilot program last spring had said that "in selecting applications, we have a strong preference for pilot projects that can demonstrate that they will primarily benefit veterans or low-income individuals."

Funding for the program will come from a new Universal Service Fund pot, separate from the existing high-cost, low-income, E-rate, and rural health care allocations. "To secure the funds for the Pilot Program, we direct USAC to separately collect funds for the Pilot Program each quarter beginning with the demand filing for the fourth quarter of 2020. USAC should collect necessary funds up to the amount of the budget over the entire three-year period in order to minimize any impact on the contribution

factor. We anticipate this collection schedule would increase the quarterly contribution factor by approximately 0.11%," the FCC said in the order establishing the pilot program.

According to the order, eligible costs are costs for "(1) patient broadband Internet access services, (2) health care provider broadband data connections, (3) other connected care information services, and (4) certain network equipment." Today's public notice indicates that the third category includes services for connected care that "capture, transmit (including video visits), and store health care data for connected care," such as telehealth solutions, telehealth video services, telehealth information services, connected care information services, and integration of existing electronic health or medical records systems with pilot-supported information services. The last category includes "network equipment necessary to make a supported broadband service functional."

"The Pilot Program will not fund devices, including end-user connected devices (e.g., tablets, smart phones, or remote patient monitoring equipment), medical equipment, health care provider administrative costs, personnel costs (including, but not limited to medical professional costs), or other miscellaneous expenses. The Pilot Program also will not fund network deployment, the construction of networks between health care providers, or connectivity services between health care provider sites," the public notice adds.

The pilot program was established in April in the same order that established the COVID-19 Telehealth Program to quickly distribute $200 billion appropriated for that purpose in the Coronavirus Aid, Relief, and Economic Security (CARES) Act (*TR Daily,* April 2).

At that time, Commissioner Mike O'Rielly had urged that the establishment of the two programs be bifurcated into separate agency actions, to allow more time to consider issues such as the agency's source of authority for the pilot, the lack of criteria for judging competing applications, the "neither here-nor-there" funding source, and the decision to adopt an across-the-board funding level of 85% of a project's eligible costs (*TR Daily,* April 1). Commissioner Jessica Rosenworcel also expressed about the lack of "clear performance metrics" to assess the program at the end of the pilot period, as well as the failure to focus the program on a specific health care problem, such as maternal mortality (*TR Daily,* April 2).

In a statement today, FCC Chairman Ajit Pai said, "In the past year, connectivity has become an increasingly critical component of delivering health care services in our country. Spearheaded by Commissioner Carr, our Connected Care Pilot Program explores how universal service support can provide next-level health care to our nation's most vulnerable populations, including low-income Americans and veterans. With the opening of this application window, the FCC affirms its commitment to driving the future of health care delivery and supporting innovative pilot projects across the country."

Commissioner Carr said, "This new initiative is the healthcare equivalent of shifting from Blockbuster to Netflix. With smartphones, tablets, and connected healthcare devices, patients no longer need to travel to brick-and-mortar facilities or meet in person with a doctor to receive high-quality care. I am excited to get this program going because it will improve patient outcomes while cutting healthcare costs."

He added, "When we first sought comment on expanding the FCC's telehealth programs to support the delivery of high-quality care directly to Americans, we couldn't have fully appreciated how important providing care at a distance would become. But supporting this trend in telehealth has proven more important than ever before. The FCC's new Connected Care initiative can ensure that Americans receive

quality care while continuing to maintain physical separation. And it can be used to treat a wide range of health conditions—such as opioid dependency, diabetes, heart disease, mental health conditions, and high-risk pregnancy. Focusing this initiative on low-income Americans and veterans will ensure that everyone has a fair shot at the benefits that this new trend in telehealth can deliver." —Lynn Stanton, lynn.stanton@wolterskluwer.com