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October 4, 2018

Ms. Marlene H. Dortch
Secretary
Federal Communications Commission
445 12th Street, SW
Washington, District of Columbia 20554

RE: *Promoting Telehealth for Low-Income Consumers Notice of Inquiry, WC Docket No. 18-213*

Dear Ms. Dortch:

Mayo Clinic respectfully submits the following response comments in support of the Federal Communications Commission's (FCC) efforts to address the growing need for interconnectivity in the healthcare industry. Below are our comments regarding the goals of the pilot program and eligible providers.

Improve Telehealth Connectivity through Broadband Access

We recommend that FCC's pilot program focus on strengthening broadband access in rural geographic areas.

Telehealth has great potential to expand access and improve health care for residents in rural geographic areas—namely it can reduce residents' burden of travel to receive specialty care, improve patient monitoring, and timeliness of care. However, in order to fully realize these services, a strong infrastructure of high speed broadband and cellular coverage must be built in geographic areas lacking such coverage. In Minnesota alone, only 52.88 percent of households in rural areas have wireline speeds of 100 Mbps/20 Mbps or more.

In addition to this lack of connectivity, we continue to see a growing age and income disparity between rural and urban areas. According to the U.S. Census Bureau's 2016 American Community Survey, adults in rural areas had a median age of 51, making them older than the comparable adult cohort in urban areas with a median age of 45. While rural residents had lower rates of poverty (11.7 percent compared with 14.0 percent of their urban counterparts), rural households had lower median household income than those in urban areas. In Arizona, one of Mayo Clinic's other campuses, only 78 percent of Arizonans have access to the internet in their home. Approximately 898,724 Arizona citizens—mostly in rural and tribal communities—have limited or no access to high-speed internet, creating a digital divide between communities that can or cannot participate in opportunities for better education and health care. Thirteen percent of Arizona's total population still does not have broadband access; of the population lacking such access, 410,794, or 63 percent, reside in rural areas. Meanwhile, 95 percent of the tribal population has no broadband access at all.

We believe that a key goal of the FCC's commitment to promoting telehealth for low-income consumers should include a clear focus on reducing geographic inequities in broadband and cellular access. This access will benefit all constituents of a region.

Include Health Systems among Eligible Health Care Providers

In addition to improving the broadband infrastructure in rural counties across the U.S., the FCC should also focus on mobilizing both providers with existing telehealth infrastructure and providers that are part of a larger health care system. By leveraging health care systems with established telehealth service lines, wide networks and broad service areas, the pilot program can maximize its reach and sustainability.

Mayo Clinic is just one of several integrated health systems that brings together a network of hospitals, clinics and providers in order to provide health care service to broad geographic areas. With more than 3,600 physicians and 60,000 employees, Mayo Clinic cares for more than 1,000,000 people from all 50 states and 140 countries who travel to Mayo Clinic to receive the highest quality care at sites in Minnesota, Arizona and Florida. In addition, Mayo Clinic Health System, a family of clinics, hospitals and health care facilities, serves communities in Iowa, Minnesota and Wisconsin.

Mayo Clinic's Center for Connected Care is the centralized base for Mayo Clinic's digital health service lines and platforms. The Center for Connected Care uses multiple technologies to bring the healthcare delivery model into a modern digital healthcare framework. The Center for Connected Care provides the infrastructure and tools to practice medicine in convenient, cost-effective and innovative ways for providers and patients. In this way, the Center for Connected Care through Mayo Clinic providers can engage Mayo Clinic patients so they can be continuously involved with their own care. Additionally, the Center for Connected Care works with Mayo Clinic specialists and medical professionals to extend Mayo Clinic's services and expertise through communication technologies to other professionals and their patients across all 50 states and worldwide, which is particularly important for patients living in non-urban area with limited or no access to specialized health services and expertise.

Mayo Clinic has several digital health service lines that directly connect patients to health care services. With improved broadband and cellular coverage, Mayo would be able to greatly improve access to the following services in rural areas:

- a. **Patient Online Services**, a web and mobile-based patient portal that allows patients to view their health care information as well as communicate with healthcare providers. This portal allows patients to see their records and results soon after a visit, manage appointments with updated schedules and instructions, and review information from a treating provider with convenient online clinical notes.
- b. **Express Care Online** is a store-and-forward clinical service in which a patient provides symptom information via an online questionnaire that is routed to a care team for evaluation, diagnosis, and treatment. Mayo Clinic Express Care Online offers quick, convenient care for 14 common minor acute conditions for patients ages 18 months through 75 years, unless otherwise noted. Most Express Care Online visits for minor acute illnesses can be completed without any further interaction with the healthcare system. Networking

and connectivity issues significantly impede a patient's ability to utilize this convenient, time-saving , cost-effective care option because the service is made available through an online patient portal. Therefore, if the patient cannot access the internet to complete the online questionnaire and then re-access the internet to review the medical advice from the care provider, the patient cannot utilize the service.

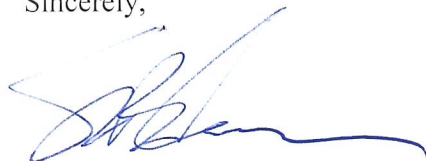
- c. **Remote Patient Monitoring** programs move care outside the traditional hospital and clinic setting by utilizing technology to closely monitor a patient's health while the patient is located at home. These programs improve clinical outcomes while reducing hospital readmission rates and chronic care costs. Mayo Clinic Remote Patient Monitoring programs combine technology and software to monitor a patient's biometrics outside the hospital and clinic setting. These services allow for early detection of trends that could result in life-threatening and costly adverse health events as well as allow problems to be solved quickly, with less costly and less serious interventions.
- d. **Video Visit Direct to Patient Services** are health care provider consultations provided to the patient while the patient is located at home, work, or other location outside of a health care organization. Mayo Clinic Video Visit Direct to Patient Services are primarily provided to established Mayo Clinic patients for purposes of follow-up care. These visits offer patients a more convenient, accessible, low-cost option and for some patients in rural areas the only access to highly specialized medical providers.

All of the above services provide patients increased convenience and the ability to minimize time away from work or school while they continue to receive appropriate care, guidance and interventions when clinically appropriate.

In summary, to ensure the greatest effectiveness of the FCC's pilot project, we recommend that the Commission prioritize projects that directly enhance the broadband connectivity in rural geographic areas as well as projects that leverage health systems across the U.S. that encompass wide networks and include established telehealth service lines.

Thank you for your commitment to improving connected care services for all Americans. If you would like additional information, please contact Megan Olson at olson.megan1@mayo.edu or 507-284-5282.

Sincerely,



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