February 13, 2018

*Submitted electronically to the Federal Communications Commission’s website:* [*https://www.fcc.gov/ecfs/*](https://www.fcc.gov/ecfs/)

*Re:* [WC Docket Nos. 17–287, 11–42, 09–197; FCC 17–155]

Dear Commissioners:

We the undersigned, representing health plans that serve millions of Medicaid enrollees through managed care organizations, are writing to express our serious concerns about the direction of proposed rule “*Bridging the Digital Divide for Low-Income Consumers; Lifeline and Link Up Reform and Modernization; Telecommunications Carriers Eligible for Universal Service Support,*” released on November 16, 2017 with a comment period extended to February 17, 2018. Our member health plans have partnered with states to improve the health and well-being of their members who rely upon the Medicaid program.

A number of the Medicaid Managed Care Organizations work with Lifeline wireless providers to provide phones to Medicaid beneficiaries. These phones are used to deliver vitally important health messages and provide support designed to address many of our nation’s key population health goals and health disparities for families with young children to the very frail elderly. These phones also help connect Medicaid beneficiaries to critical health services as well as the supports provided by their health plan.

The Lifeline program was enacted to ensure that telephone service is available to address the critical needs of the most vulnerable members of society. Making Lifeline mobile phone service available to validated Medicaid beneficiaries and leveraging those phones to provide direct access to health care providers as well as deliver crucial health education, monitoring and support that is proven to improve critical health outcomes for Medicaid families achieves that aim.

We believe that the proposed changes and actions under consideration including implementing a benefit limit that restricts the amount of support a household may receive or the length of time a household may participate in the Lifeline program, applying a maximum discount level above which households would bear the cost of the service, limiting Lifeline support for facilities based broadband service and discontinuing Lifeline support for non-facilities-based services and resellers would have a direct and detrimental impact on the health and lives of low-income individuals enrolled in Medicaid.

Although we support the Commission’s stated goal of reducing potential fraud and abuse in the program, we do not support the proposed means by speeding up implementation of the National Verifier initiative. This methodology will only impede enrollment in the program and prevent individuals from taking advantage of the positive health outcomes associated with the Lifeline program. Instead, we recommend the Commission take direct enforcement action against those providers who may be abusing the program and allow health plans who receive eligibility data directly from the state Medicaid programs to confirm eligibility at the time of enrollment in the Medicaid program.

In addition, we do not support reducing Tribal Lifeline support to exclusively rural areas. The goal of the Lifeline program is to ensure access to telecommunication services to low-income individuals who could not afford to otherwise access the service. This need is no less acute in urban areas. We believe concentrating only on rural areas is shortsighted and will deny critical benefits to needy individuals in Tribal lands that are designated as urban.

Finally, while we support the move to allowing Medicaid beneficiaries to utilize the Lifeline benefit to access broadband capable phones, speeding up the ban on voice only phones does not recognize that some individuals, especially older individuals, are not comfortable utilizing advanced technology and should be able to continue to utilize voice only plans. Otherwise, these individuals may no longer be able to utilize the phone to call their doctors and health plans or receive vital text reminders and health promotion messages.

In summary, we oppose any changes that would restrict access to the Lifeline program for eligible individuals. We encourage the Commission to recognize the critical role the Lifeline program plays in sustaining and supporting the health and well-being of Medicaid beneficiaries and allow this vital support to continue without unnecessary and harmful impediments to access. And, we thank the Commission for his opportunity to comment on this important proposal.

Sincerely,

Association for Community Affiliated Plans

Blue Cross Blue Shield Association

Medicaid Health Plans of America