



PUBLIC NOTICE

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FEDERAL COMMUNICATIONS COMMISSION ANNOUNCES THIRD SET OF PROJECTS SELECTED FOR THE CONNECTED CARE PILOT PROGRAM

WC Docket No. 18-213

By the Commission: Acting Chairwoman Rosenworcel and Commissioners Carr and Starks issuing separate statements.

1. In this Public Notice, as part of its ongoing efforts to promote and support connected care technologies and services, the Commission announces a third set of Pilot projects that have been selected for the Connected Care Pilot Program. The Connected Care Pilot Program was established to provide up to \$100 million in Universal Service Funds to help eligible health care providers defray the costs of providing connected care services to their patients and study how the Universal Service Fund (USF) can help support the continuing trend toward connected care services.

2. The additional projects selected today represent a broad array of geographic areas and a diversity of provider types, involve patients in underserved communities, and will address a range of health conditions. Selected Pilot Program participants each demonstrated sufficient experience or expertise necessary to provide connected care services as proposed in their applications, and in supplemental materials, which should enable them to implement their projects and enable patients to experience the benefit of connected care services. Funding these projects will enable selected Pilot Program participants to treat a large number of low-income and veteran patients with connected care services. These projects will also address public health epidemics, opioid dependency, mental health conditions, maternal health/high-risk pregnancy, and chronic or recurring conditions—all conditions that are the focus of the Pilot Program. Funding these projects will help bring connected care services to rural, and other underserved areas nationwide. Supporting these projects will also help the Commission ascertain how USF support can enable providers to use connected care to help improve health outcomes, with an emphasis on low-income and veteran patients.

I. BACKGROUND

3. The Pilot Program will make available up to \$100 million over a three-year period for selected Pilot projects for qualifying purchases necessary to provide connected care services, with a particular emphasis on providing connected care services to low-income and veteran patients.¹ The Pilot Program is open to eligible non-profit or public health care providers that fall within the enumerated categories in section 254(h)(7)(B) of the Telecommunications Act until the three-year duration of the Pilot Program ends.² For purposes of the Pilot Program, eligible health care providers and their patients

¹ See *Promoting Telehealth for Low-Income Consumers; COVID-19 Telehealth Program*, WC Docket No. 18-213, Report and Order, 35 FCC Rcd 3366, 3369-97, paras. 5, 55 (2020) (*Connected Care Report and Order*).

² See *id.* at 3368-69, para. 55 (noting that the categories of eligible nonprofit and public health care providers are: (1) post-secondary educational institutions offering health care instruction; teaching hospitals, and medical schools; (2) community health centers or health centers providing health care to migrants; (3) local health departments or

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may be located in rural or non-rural areas, and eligible non-rural health care providers are not required to be part of a majority rural consortium.³

4. Pilot projects selected to participate in the program will receive universal service support to offset 85% of qualifying costs incurred in connection with the Pilot Program. The remaining 15% share of the costs of eligible services must be paid by the selected Pilot project recipients from eligible sources, and participating health care providers must also pay the costs of any ineligible expenses associated with their respective projects.⁴ Health care providers whose Pilot projects are selected to participate in the program also must seek competitive bids for the eligible services for which they intend to seek Pilot Program support.⁵

5. On January 15, 2021, the Commission announced the initial set of Pilot projects, which included 14 applicants requesting \$26.5 million.⁶ On June 17, 2021, the Commission announced a second set, approving 36 separate applications requesting \$31.3 million.⁷ Shortly after that announcement, on June 21, 2021, the Commission released a Report and Order offering additional guidance to Pilot program participants on eligible services, competitive bidding, data reporting, and the invoicing process.⁸

II. SELECTED PROJECTS

6. Following further review of the applications on file, the Commission, working with the Bureau and others,⁹ today announces a third set of Pilot projects, totaling \$15,337,689. Selected projects are listed in the Appendix. Today's selections, combined with the first two rounds of selections, amount to approximately \$69.3 million in funding for Pilot projects.¹⁰

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agencies; (4) community mental health centers; (5) not-for-profit hospitals; (6) rural health clinics; (7) skilled nursing facilities; and (8) consortia of health care providers from one of the preceding seven categories). 47 U.S.C. § 254(h)(7)(B). *See also Connected Care Report and Order*, 35 FCC Rcd at 3393, para. 51 (describing the Pilot Program's focus on low-income and veteran patients).

³ *See Connected Care Report and Order*, 35 FCC Rcd at 3384, para. 38.

⁴ *See id.* at 3388-89, para. 43. *See also* 47 CFR § 54.611(b)(1) ("Eligible sources include the applicant or eligible health care provider participants, state grants, appropriations, or other sources of state funding; federal funding, grants, loans or appropriations except for other federal universal service funding, or other sources of federal funding; Tribal government funding; and other grants, including private grants."); 47 CFR § 54.611(b)(2) ("Ineligible sources include (but are not limited to) in-kind or implied contributions from health care providers; direct payments from service providers, including contractors and consultants to such entities; and for-profit entities."). Additionally, all applicants participating in the Connected Care Pilot Program are subject to the Commission prohibition on gifts from service providers. *See Connected Care Report and Order*, 35 FCC Rcd at 3412, para. 76.

⁵ *Connected Care Report and Order*, 35 FCC Rcd at 3411-13, paras. 75-76. The *Connected Care Report and Order* outlines limited exemptions to the competitive bidding requirements. *Id.* at 3412-13, para. 76.

⁶ *Federal Communications Commission Announces Initial Projects Selected for the Connected Care Pilot Program*, WC Docket No. 18-213, Public Notice, 36 FCC Rcd 593 (2021) (*January Selection Public Notice*).

⁷ *Federal Communications Commission Announces Second Set of Projects Selected for the Connected Care Pilot Program*, WC Docket No. 18-213, Public Notice, FCC 21-71 (June 17, 2021) (*June Selection Public Notice*).

⁸ *See Promoting Telehealth for Low-Income Consumers*, WC 18-213, Second Report and Order, FCC 21-74 (rel. June 21, 2021) (*Second Connected Care Report and Order*).

⁹ *Connected Care Report and Order*, 35 FCC Rcd at 3412, para. 74.

¹⁰ This aggregate total reflects today's selections, as well as adjustments for two health care providers that have opted to withdraw from the Pilot Program since the previous announcement: Mountain Valleys Health Centers and Central Peninsula Hospital. *See* Letter from Ryan Palmer, Chief, Telecommunications Access Policy Division, Wireline Competition Bureau, FCC to Shannon Gerig, RN, CEO, Mountain Valleys Health Centers, WC Docket No. 18-213, DA 21-1146, <https://docs.fcc.gov/public/attachments/DA-21-1145A1.pdf> (Sept. 13, 2021); Letter from Ryan Palmer, Chief, Telecommunications Access Policy Division, Wireline Competition Bureau, FCC to Rick

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7. As with the previous sets of selections, projects in this third set of selections represent several different geographic areas and provider types, will involve patients in underserved communities and will address a range of health conditions. The Commission designed the Pilot Program with a particular emphasis on providing connected care services to low-income and veteran patients, and these projects would all target one or both of these populations. As such, these projects will advance the goals of the Pilot Program by helping the Commission to determine how universal service support provided to health care providers for the costs associated with providing connected care services can enable them to: (1) improve health outcomes through connected care; (2) reduce health care costs for patients, facilities and the health care system; and (3) support the trend towards connected care everywhere.¹¹

8. Each of the projects in this third set of selections will treat a number of patients in the target populations with eligible services. Further, these projects will address a number of critical health conditions such as high-risk pregnancy/maternal health, mental health conditions, opioid dependency, COVID-19, and chronic conditions. Supporting these projects will help us ascertain how USF support can enable providers to use connected care to help improve the health outcome of the patients. Likewise, we expect that using connected care to treat these conditions will reduce costs and increase the quality of care. And, because these projects will treat many patients in areas of great need across the nation, selecting these projects will enable the Commission to better understand how USF funding can support the trend towards connected care everywhere.

9. Selected participants announced in this Public Notice must file their initial request for funding to the Universal Service Administrative Company (USAC), the Administrator of the Universal Service programs, within 6 months of today's selection announcement, using FCC Form 462.¹² In addition, Pilot Program participants must seek bids for the services they intend to procure in accordance with the competitive bidding rules for the Healthcare Connect Fund Program.¹³ USAC will review Requests for Funding and make final determinations regarding the eligibility of the services requested before committing funding to each Pilot project.¹⁴

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Davis, CEO, Central Peninsula Hospital, WC Docket No. 18-213, DA 21-1145, <https://docs.fcc.gov/public/attachments/DA-21-1146A1.pdf> (Sept. 13, 2021). Mountain Valleys Health Centers was selected in the *January Selection Public Notice* and requested \$550,800. *See January Selection Public Notice*, Appendix, at 6. Central Peninsula Hospital was selected in the *June Selection Public Notice* and requested \$3,300,839. *See June Selection Public Notice*, Appendix, at 5.

¹¹ *Id.* at 3416, para. 83.

¹² *See Second Connected Care Report and Order* at 9, para. 26.

¹³ *See Connected Care Report and Order*, 35 FCC Rcd at 3411-12, paras. 75-76.

¹⁴ Services and equipment eligible for support include: (1) patient broadband Internet access services, (2) health care provider broadband data connections, (3) other connected care information services, and (4) certain network equipment. *See id.* at 3397-3402, paras. 55-64. End-user devices are not eligible for support in the Pilot Program. *See id.* at 3402-03, para. 65. *See also Wireline Competition Bureau Announces Connected Care Pilot Program Application Filing Window Opening*, WC Docket No. 18-213, Public Notice, 35 FCC Rcd 12751, 12751-52 (WCB 2020) (providing examples of service eligible for support in the Pilot Program).

III. ADDITIONAL INFORMATION

10. For further information regarding this Public Notice, please send an email to ConnectedCare@fcc.gov. Additional information concerning the Pilot Program will be posted at the following link: <https://www.fcc.gov/wireline-competition/telecommunications-access-policy-division/connected-care-pilot-program>.

11. Action by the Commission, October 26, 2021.

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APPENDIX

Selected Pilot Program Projects

The Commission makes the following selections of 26 entities filing 36 separate Pilot project applications for the Connected Care Pilot Program:¹

- *Adult MH & SA Outpatient Services, Barrow, AK.*² Adult MH & SA Outpatient Services seeks \$557,366 in Pilot Program funding to provide connected care service, such as video visits, to patients for various treatments, including treatment for mental health conditions and substance abuse disorders. Adult MH & SA Outpatient Services estimates serving 9,872 patients, more than 80% of whom are expected to be low-income or veterans. It is located in Barrow, Alaska, which is an extremely rural area, and its service area includes Healthcare Professional Shortage Areas and Medically Underserved Areas. Adult MH & SA Outpatient Services' Pilot project was selected because of its focus on expanding the availability of and access to connected care services primarily to low-income patients and veterans in extremely remote, underserved regions in Alaska.
- *Charles Judd Community Health Center, Honolulu, HI.*³ Charles Judd Community Health Center in Honolulu, Hawaii, seeks \$82,535 in Connected Care support to provide a health maintenance program for senior citizens virtually. Through its Pilot project, Charles Judd Community Health Center would remotely monitor health conditions (including high blood pressure, diabetes, and cancer) and monitor mental health, including anxiety and depression, in participating patients. Charles Judd Community Health Center's pilot would serve an estimated 300 senior patients, 100% of whom are low-income. Charles Judd Community Health Center seeks a video platform, hotspots, and Internet access to help its patients access its health services virtually. Charles Judd Community Health Center's project was selected because of its focus on serving low-income patients, all of whom are senior citizens.
- *Children with Special Health Needs Branch-State Dept. of Health, Honolulu, HI.*⁴ Children with Special Health Needs Branch's Pilot project would use \$316,219 in Connected Care support to provide remote treatments, video visits, and imaging diagnostics services primarily to low-income and veteran patients suffering from chronic conditions and those needing maternal health services. The Pilot project would reach an estimated 1,000 patients across Hawaii, more than 75% of whom would be veteran or low-income patients. This project was selected because of its potential positive impact on maternal health.

¹ The per project dollar amounts listed in this Appendix reflect an evaluation of each project's proposed budget, including removal of costs for clearly ineligible items. Selection of a project in this Public Notice does not constitute a funding commitment and does not guarantee funding for any specific items included in the applications for the Pilot Program. Selected projects are required to submit a formal Request(s) for Funding to USAC for their pilot project, USAC will review the Requests for Funding and make final determinations regarding the eligibility of the services requested before committing funding to each pilot project.

² See Adult MH & SA Outpatient Services, Application No. CCPP20200000401 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214279249727>.

³ See Charles Judd Community Health Center, Application No. CCPP20200000398 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214047675187>.

⁴ See Children with Special Needs Branch-State Dept. of Health, Application No. CCPP20200000209 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/121470857436>.

- *Christian Family Solutions - Mankato, MN; Christian Family Solutions - Lakeville, MN; Christian Family Solutions - Waukesha, WI.*⁵ Wisconsin Lutheran Child & Family Service, Inc., d/b/a Christian Family Solutions, filed three separate applications that requested a combined total of \$412,666 in Connected Care Pilot Program support. Christian Family Solutions (CFS) will use the funding to provide patients with mental health services via video visits/consults for telepsychiatry, adult dual diagnosis intensive outpatient programs, outpatient counseling, children's therapeutic services and support, adolescent DBT skills groups, and adolescent day treatment. CFS will treat an estimated 1,570 patients, 25% of whom are low-income. This project was selected because of its focus on mental health services.
- *Circare, Syracuse, NY.*⁶ Circare seeks \$133,246 for patient connectivity, network equipment and upgraded bandwidth to provide video visits and remote treatment to patients requiring mental health services. Circare estimates that its Pilot project will directly impact 100 patients, all of whom are low-income. Circare was selected because of its focus on low-income patients.
- *Conway Medical, Conway, SC.*⁷ Conway Medical's Pilot project would use \$1,018,449 in Connected Care support to provide patient-based video visits, imaging diagnostics, and remote treatment services primarily to low-income patients suffering from chronic or long-term conditions. Conway Medical's Pilot project would serve an estimated 2,000 patients, 18% of whom are low-income, in Conway, South Carolina. Conway Medical was selected because of its plan to expand telehealth access to patients residing in rural and underserved areas.
- *Cooper Health System, Camden, NJ.*⁸ Cooper Health System's Pilot project would use \$62,900 in Connected Care support to provide remote patient monitoring and virtual visits to veteran patients suffering from COVID-19, mental health conditions, diabetes, cancer, and cardiac conditions. Cooper Health System's Pilot project would serve an estimated 50 patients, 100% of whom are veterans. Cooper Health System was selected because of its commitment to serve the local veteran population.
- *Covington County Hospital, Collins, MS.*⁹ Covington County Hospital's Pilot project seeks \$162,860 in Connected Care support to provide remote treatment and video visits primarily to low-income patients suffering from chronic conditions, infectious diseases, and opioid dependency. Covington County Hospital's Pilot project would serve an estimated 800 patients, 25% of whom would be either low-income or veteran patients. Covington County Hospital's project was selected because of its potential impact on an extremely rural area.

⁵ See Christian Family Services - Mankato, MN, Application No. CCPP20200000027 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214017512710>; Christian Family Solutions - Lakeville, MN, Application No. CCPP202000000370 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214131460485>; Christian Family Solutions - Waukesha, WI Health System, Application No. CCPP202000000345 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/121437957392>.

⁶ See Circare, Application No. CCPP20200000235 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214223414764>.

⁷ See Conway Medical, Application No. CCPP20200000113 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/121445432349>.

⁸ See Cooper Health System, Application No. CCPP20200000109 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/12140652005624>.

⁹ See Covington County Hospital, Application No. CCPP20200000169 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/12142430330584>.

- *Crisp Regional Hospital, Cordele, GA.*¹⁰ Crisp Regional Hospital seeks \$849,720 in Pilot Program funding to provide connected care services, including remote patient monitoring, primarily to low-income patients suffering from chronic or long-term conditions, including diabetes, hypertension, congestive heart failure, and chronic obstructive pulmonary diseases. Crisp Regional Hospital's Pilot project would serve approximately 1,000 patients, an estimated 89% of whom would be low-income. Crisp Regional Hospital is located in Crisp County, Georgia, a rural area with a high incidence of chronic illness. Crisp Regional Hospital's application was selected because of its primary focus on providing connected care services to low-income patients with chronic conditions, and its potential impact on patients in rural Georgia.
- *Forensics, Salt Lake City, UT; Valley EPIC Outpatient, Taylorsville, UT; Highland Springs Specialty Clinic Holladay, Salt Lake City, UT; Highland Springs Specialty Clinic American Fork, American Fork, UT; Carmen Pingree Autism Center of Learning, Salt Lake City, UT; Kids Intensive Day Services, Midvale, UT; CORE Recovery Management Outpatient Services, Salt Lake City, UT; Valleywest, West Valley City, UT; Children's Outpatient Services, Salt Lake City, UT.*¹¹ These sites filed separate applications for similar Pilot projects. Collectively, these projects seek \$5,550,146 in Pilot Program support to offer increased video visits and enhanced telehealth experience to patients dealing with chronic and mental health conditions. These projects would reach 23,239 patients, 96% of whom would be low-income patients. These projects were selected because of the potential impact on low-income patient communities.
- *Friend Health, Chicago, IL.*¹² Friend Health's Pilot project would use \$606,900 in Connected Care support to provide remote patient monitoring and remote treatments to primarily low-income patients suffering from chronic conditions, high-risk pregnancies, infectious diseases (including COVID-19), mental health issues, and opioid dependency. Friend Health's Pilot project would serve an estimated 39,000 patients in Chicago, 86% of whom are low-income. Friend Health's application was selected for its plan to engage low-income patients in connected care services and thus optimize preventive care and more effectively manage chronic conditions and COVID-19.
- *Long Island Select Healthcare, Inc., a consortium with five sites in Long Island, NY.*¹³ Long Island Select Healthcare seeks \$306,000 in Connected Care support to provide patient connectivity for video visits and consults and other remote treatment. Long Island Select Healthcare's Pilot project would serve an estimated 5,700 patients who reside in group homes, 100% of whom are low-income. Long

¹⁰ See Crisp Regional Hospital, Application No. CCPP20200000402 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214134608765>.

¹¹ See Forensics, Application No. CCPP20200000308 (submitted Dec. 5, 2020), <https://www.fcc.gov/ecfs/filing/1214405009428>; Valley EPIC Outpatient, Application No. CCPP20200000311 (submitted Dec. 5, 2020), <https://www.fcc.gov/ecfs/filing/121445767624>; Highland Springs Specialty Clinic Holladay, Application No. CCPP20200000312 (submitted Dec. 5, 2020), <https://www.fcc.gov/ecfs/filing/121444881567>; Highland Springs Specialty Clinic American Fork, Application No. CCPP20200000318 (submitted Dec. 5, 2020), <https://www.fcc.gov/ecfs/filing/12140407003819>; Carmen Pingree Autism Center of Learning, Application No. CCPP20200000319 (submitted Dec. 5, 2020), <https://www.fcc.gov/ecfs/filing/121449008457>; Kids Intensive Day Services, Application No. CCPP20200000320 (submitted Dec. 5, 2020), <https://www.fcc.gov/ecfs/filing/1214614001144>; CORE Recovery Management Outpatient Services, Application No. CCPP20200000321 (submitted Dec. 5, 2020), <https://www.fcc.gov/ecfs/filing/121493922471>; Valleywest, Application No. CCPP20200000322 (submitted Dec. 5, 2020), <https://www.fcc.gov/ecfs/filing/12142561230621>; and Children's Outpatient Services, Application No. CCPP20200000323 (submitted Dec. 5, 2020), <https://www.fcc.gov/ecfs/filing/1214821724752>.

¹² See Friend Health, Application No. CCPP20200000399 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214383504738>.

¹³ See Long Island Select Healthcare, Inc., Application No. CCPP20200000193 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/121401581404>.

Island Select Healthcare would leverage Pilot Program funding to expand access to care for its patients who reside in group homes, including patients with intellectual and developmental disabilities. Long Island Select Healthcare's Pilot project was selected because of its focus on expanding access to care and addressing broadband access issues for a significant number of vulnerable, low-income patients residing in Long Island.

- *Marion General Hospital, Marion, IN.*¹⁴ Marion General Hospital seeks \$34,230 in Connected Care funding for patient broadband and telehealth platform licenses to provide remote patient monitoring, video visits, and remote treatment to treat patients with chronic illnesses (such as diabetes, and high blood pressure), infectious diseases (including COVID-19), and opioid dependency. Marion General Hospital's Pilot project would serve 345 patients, including 25 directly served by requested patient broadband, an estimated 45% of whom are low-income. Marion General Hospital's service area includes rural areas and Medically Underserved Areas. Marion General Hospital would leverage Pilot Program funding to expand its connected care services to treat additional conditions. Marion General Hospital's Pilot project was selected because of its focus on expanding the availability of and access to connected care services to underserved high-risk patients with chronic conditions, opioid dependency, and infectious diseases.
- *Metro Health, Washington, DC.*¹⁵ Metro Health seeks \$297,517 in Pilot Program support to provide remote patient monitoring and video visits to treat patients with chronic diseases, including diabetes, cardiovascular disease, and HIV/AIDS. Metro Health's Pilot project would serve an estimated 1,450 patients, including 200 directly served by patient broadband, 100% of whom are low-income. Metro Health's service area includes Health Professional Shortage and Medically Underserved Areas. Metro Health's Pilot project was selected because of its focus on addressing patient connectivity barriers and providing enhanced video visits for low-income patients.
- *MFA 2150 C-19, Washington, DC.*¹⁶ MFA 2150 C-19's (GW Medical Faculty Associates') Pilot project would use \$454,809 in Connected Care support to provide remote patient monitoring and virtual visits to primarily low-income patients suffering from chronic conditions including heart disease, diabetes, atopic dermatitis, and COVID-19. MFA 2150 C-19's Pilot project would serve an estimated 1,100 patients in the District of Columbia, 80% of whom are low-income patients. MFA 2150 C-19's Pilot project was selected because of its focus on improving access to care for a large percentage of low-income patients in Washington, DC.
- *New York Psychotherapy and Counseling Center - Bronx Child and Family Mental Health Center, Bronx, NY.*¹⁷ New York Psychotherapy and Counseling Center's Pilot project would use \$636,650 in Connected Care support to provide video visits or consult services to low-income patients suffering from mental health conditions. New York Psychotherapy and Counseling Center's Pilot project would serve an estimated 10,000 patients in Bronx, New York, 100% of whom are low-income patients. New York Psychotherapy and Counseling Center was selected because it would expand mental health access to a large patient population that is 100% low-income.

¹⁴ See Marion General Hospital, Application No. CCPP20200000351 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214076392272>.

¹⁵ See Metro Health, Application No. CCPP20200000246 (submitted Dec. 4, 2020), <https://www.fcc.gov/ecfs/filing/1214044405945>.

¹⁶ See MFA 2150 C-19, Application No. CCPP20200000383 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/121493487206>.

¹⁷ See New York Psychotherapy and Counseling Center - Bronx Child and Family Mental Health Center, Application No. CCPP20200000122 (submitted Nov. 30, 2020), <https://www.fcc.gov/ecfs/filing/1214294418247>.

- *North County Health Services (NCHS), San Marcos, CA.*¹⁸ North County Health Services seeks \$334,887 in Connected Care support for health care provider broadband and telehealth video licenses to provide patient-based Internet connected remote monitoring and virtual visits and consults. Through this funding, North County Services' Pilot project will provide primary care services, COVID-19 screening, routine and urgent care, behavioral health, women's health, and dental services to patients, and will treat chronic and long-term conditions, high-risk pregnancy and maternal health conditions, infectious disease, and opioid dependency. North County Health Services would treat 30,000 patients in San Diego County, 96% of whom are low-income patients. North County Health Services was selected because of its focus on increasing access to comprehensive healthcare for low-income and underserved individuals.
- *Norwegian American Hospital, Chicago, IL.*¹⁹ Norwegian American Hospital's Pilot project seeks \$203,065 in Connected Care support to provide patient broadband and telehealth software to increase the use of telehealth visits with its patients. Norwegian American Hospital's Pilot project would serve approximately 675 patients, 100% of whom would be low-income. Norwegian American Hospital was selected because of its 100% low-income patient population and plans to provide those patients with broadband service for telehealth visits.
- *NY Community Broadband Partnership, consortium with sites in Sodus, NY; Port Byron, NY; Geneva, NY; Bath, NY; Newark, NY; Penn Yan, NY; Ovid, NY; and Dundee, NY.*²⁰ NY Community Broadband Partnership seeks \$126,480 in Connected Care support to build out its telehealth resources and better serve the migrant community of the Finger Lakes region. The project would target chronic health conditions, mental health conditions, opioid dependency, and infectious diseases, which have been treated by the participating sites for more than 20 years. The project would reach 24,227 patients, 100% of whom would be low-income. The project was selected because of its potential regional impact addressing a diverse set of health conditions for low-income patients.
- *One Brooklyn Health System, consortium with sites in Brooklyn, NY.*²¹ One Brooklyn Health System is a consortium comprised of three sites across Brooklyn. One Brooklyn Health System's Pilot project seeks \$882,401 in Connected Care support to provide video visits and other services to low-income individuals suffering from chronic or long-term conditions, high-risk pregnancy/maternal health, infectious disease, including COVID-19, mental health conditions and opioid dependency. One Brooklyn Health System's Pilot program would reach an estimated 68,000 patients, 80% of whom would be low-income. One Brooklyn was selected because of its potential impact on a large low-income population.
- *Parkview Consortium, consortium with seven sites in Indiana and Ohio.*²² Parkview Consortium will use \$642,600 in Connected Care support to provide remote patient monitoring to treat low-income and veteran patients who suffer from diabetes. Parkview will serve an estimated 350 patients, 18% of whom are estimated to be low-income or veterans, at 7 sites in Indiana. Parkview Consortium was chosen for its plan to extend connected care services for diabetes management to rural patients.

¹⁸ See North County Health Services (NCHS), Application No. CCPP20200000197 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214296075829>.

¹⁹ See Norwegian American Hospital, Application No. CCPP20200000324 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/121468010127>.

²⁰ See NY Community Broadband Partnership, Application No. CCPP20200000189 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214069225984>.

²¹ See One Brooklyn Health System, Application No. CCPP20200000261 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214952915442>.

²² See Parkview Consortium, Application No. CCPP20200000387 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214254912044>.

- *Sky Lakes Medical Center, Klamath Falls, OR.*²³ Sky Lakes Medical Center seeks \$193,673 in Pilot Program funding to treat patients with chronic or long-term conditions, high-risk pregnancy/maternal health, mental health conditions, and opioid dependency. Sky Lakes Medical Center would serve an estimated 150 chronically ill, isolated patients, in rural Oregon, all of whom are low-income. Sky Lakes Medical Center would leverage Pilot Program funding to provide patients with broadband connections to participate in video visits. Sky Lakes Medical Center was selected because of its focus on expanding access to care for chronically ill, isolated patients in rural areas.
- *Trinity Health Consortium, Darby, PA, and Langhorne, PA.*²⁴ Trinity Health Consortium's Pilot project would use \$652,800 in Connected Care support to provide remote patient monitoring and video visits and consults for primarily low-income patients suffering from chronic conditions, mental health issues, and opioid dependency. Trinity Health Consortium's Pilot project would serve approximately 80,000 patients, approximately 65% of whom are either low-income or veterans, in the Philadelphia, Pennsylvania, metro area. Trinity Health Consortium's proposal was selected for its proposal to treat and monitor chronic health conditions, mental health conditions, and opioid dependency for a sizeable low-income and veteran patient group.
- *Western New York Rural Area Health Education Center, Inc., consortium with 13 sites in Erie County, NY; Niagara County, NY; and Genesee County, NY.*²⁵ Western New York Rural Area Health Education Center, Inc.'s, Pilot project would use \$373,320 in Connected Care support to provide remote treatment and video consults to primarily low-income patients who require mental health and opioid-dependency services. Western New York Rural Area Health Education Center, Inc.'s, Pilot project would serve an estimated 15,000 patients in western New York, an estimated 73% of whom are low-income and 5% veterans. Western New York Rural Area Health Education Center's Pilot project was selected for its plan to provide connected care services to a large Medicaid population with mental health and opioid-dependency requirements.
- *Winchester Medical Center, Winchester, VA.*²⁶ Winchester Medical Center seeks \$367,200 in Connected Care Pilot Program funding to provide patient broadband and connected care services, including remote patient monitoring, and video visits and consults, to treat patients for infectious diseases, opioid dependency, chronic conditions, mental health conditions, and high-risk pregnancy/maternal health in Virginia and West Virginia. Winchester Medical Center would serve an estimated 338 patients, all of whom are low-income. Winchester Medical Center's service area includes rural areas, as well as Health Professional Shortage Areas and Medically Underserved Areas. Winchester Medical Center was selected because of its potential impact on rural and underserved areas, and its focus on increasing access to care for high-risk, low-income patients.
- *Youth Outreach Services, a consortium of three sites in Chicago, IL.*²⁷ Youth Outreach Services seeks \$79,050 to provide mental health and substance abuse disorder services remotely. Youth Outreach Services' Pilot project would treat an estimated 12,000 at-risk youth in the greater Chicago area, 90% of whom are low-income patients. Youth Outreach Services' Pilot project was selected because of its focus on providing mental health services to a large number of low-income children and young adults.

²³ See Sky Lakes Medical Center, Application No. CCPP20200000361 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/1214553305714>.

²⁴ See Trinity Health Consortium, Application No. CCPP20200000353 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/121419528751>.

²⁵ See Western New York Rural Area Health Education Center, Inc., Application No. CCPP20200000177 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/121433002349>.

²⁶ See Winchester Medical Center, Application No. CCPP20200000262 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/121455878828>.

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²⁷ See Youth Outreach Services, Application No. CCPP20200000269 (submitted Dec. 7, 2020), <https://www.fcc.gov/ecfs/filing/12142487030018>.

**STATEMENT OF
ACTING CHAIRWOMAN JESSICA ROSENWORCEL**

Re: *Promoting Telehealth for Low-Income Consumers*, WC Docket No. 18-213, Third Selection Public Notice (October 26, 2021).

These are days when public health is front and center. The reason is obvious. This pandemic has struck so many of our communities and upended so much in our daily life. But these times have also revealed that we are resilient. That's because when new threats come along, we develop new ways to get along.

You see this very clearly with healthcare. When this cruel virus first visited us, our nation's healthcare providers did something extraordinary. They pivoted—fast—to telemedicine. This made it possible for so many of us to stick with our providers, keep up with our appointments, and seek diagnoses—safely.

I'm proud that the Federal Communications Commission has been able to support this effort on multiple fronts. First, thanks to the CARES Act, this agency provided \$200 million in support for telehealth projects when the pandemic first swept across the country last year. Second, building on this earlier effort, Congress gave us an additional \$250 million to develop the COVID-19 Telehealth program to assist health care facilities during this crisis. And now here, today, we offer even more support with an additional round of funding in our Connected Care Pilot Program.

The Connected Care Pilot Program is a \$100 million effort to fund a range of healthcare providers, including community health centers and rural health clinics, to deliver telehealth services directly to their patients, with a special focus on low-income and veteran patients. The program focuses on a number of conditions, including maternal health and high-risk pregnancy, infectious diseases such as COVID-19, mental health and opioid dependency, and chronic conditions like diabetes and HIV/AIDS.

Today, we announce the third round of selections for this program, funding 36 applications seeking over \$15 million in funding. Over the first three rounds of this program, we have selected 93 projects seeking \$69 million in funding, in 35 states and the District of Columbia. Today's selected applicants include a diverse group of providers. But I'm particularly excited to see a number of applicants focusing on maternal health, including the Children with Special Health Needs Branch of the Hawaii Department of Health. It's an area where we sorely need to improve outcomes in the United States—and there is evidence that expanded use of remote treatment, video visits, and imaging services can help.

A big thank you is in order to the healthcare providers who are embracing the possibilities of telemedicine during these pandemic days. I'm pleased that this agency can be a small part of helping them do so. For today's effort, special thanks goes to Matt Baker, Bryan Boyle, Adam Copeland, Rashann Duvall, Abdel Eqab, Veronica Garcia-Ulloa, Trent Harkrader, Clint Highfill, India McGee, Kris Monteith, Kiara Ortiz, Nick Page, Ryan Palmer, Negheen Sanjar, Joe Schlingbaum, and Hayley Steffen of the Wireline Competition Bureau and Michele Ellison, Elizabeth Lyle, and Bill Richardson of the Office of General Counsel.

**STATEMENT OF
COMMISSIONER BRENDAN CARR**

Re: *Promoting Telehealth for Low-Income Consumers*, WC Docket No. 18-213, Third Selection Public Notice (October 26, 2021).

For years, the FCC has supported the buildout of high-speed Internet connections to brick-and-mortar health care facilities. That is important work, and the FCC will continue its efforts on this front because it ensures that patients inside a connected facility can access the highest quality of care.

But several years ago, we identified an emerging trend in telehealth. The delivery of high-tech, high-quality care is no longer limited to the confines of connected, brick-and-mortar facilities. With remote patient monitoring and mobile health applications that can be accessed right on a smartphone or tablet, health care workers now have the technology to deliver high-quality care directly to patients, regardless of where they are located. And this trend towards connected care picks up exactly where the FCC's existing support programs have left off because it enables patients to continue to receive high-quality care even when they walk out the doors of a health care facility.

I first learned about this new trend back in 2018 and asked my FCC colleagues to launch a proceeding that culminated in our decision to adopt both the Connected Care Pilot Program and the Emergency COVID-19 Telehealth initiative. Since then, I have had the opportunity to visit 44 different health care facilities across 22 states to learn more about this trend towards connected care. One thing these visits have brought home is the unprecedented spike in telehealth visits we've seen. In Parsons, Kansas, I recently met with a health care provider that saw telehealth visits jump from close to zero before the pandemic to about 1,200 each month. At the University of Michigan, I met with doctors that saw a 75-fold increase in telehealth visits per month—increasing from 400 a month pre-pandemic to more than 30,000 at its height. Just this month, in Florida, I met with a pediatrics department that told me that their telehealth visits grew from 25 a day to 1,800 a day.

All of these visits have helped inform my approach to the Connected Care Pilot Program. Today, we take another important step by announcing a third set of projects that will receive funding from the Commission's successful Connected Care program. With today's vote, we will have awarded a total of nearly \$70 million to more than 80 entities in 35 states and the District of Columbia. And I am pleased that these projects will focus on providing services to low-income and veteran patients facing a range of different health conditions in underserved communities.

But our work is not done. Three weeks ago, I testified before the U.S. Senate Commerce Committee at a subcommittee hearing focused on the topic of telehealth. At the hearing, it was clear that there is bipartisan support for telehealth and for specific legislative measures that could keep the success of these programs going. We have made too much progress on expanding telehealth offerings over the last year to dial these services back now.

For one, we need to work with stakeholders on a long-term solution to funding these types of initiatives. Any such solution likely requires further action by Congress, but the FCC can and should play an important role in those discussions. The Connected Care Pilot Program for instance is a three-year initiative. One goal for the program is to provide additional evidence regarding the value that flows from connected care technologies. In my view, the portions of the health care industry that benefit from these technologies and their associated reductions in health care costs should be the ones that support them in the long run. Now is the time to work towards that transition.

I would like to thank the staff of the Wireline Competition Bureau for their work on this item and for their continuing efforts to ensure that the Connected Care Pilot Program is a success. The item has my support.

**STATEMENT OF
COMMISSIONER GEOFFREY STARKS**

Re: *Promoting Telehealth for Low-Income Consumers*, WC Docket No. 18-213, Third Selection Public Notice (October 26, 2021).

I am pleased to approve today's Order announcing the Connected Care Pilot Program's third set of projects. During the last year-and-a-half, the COVID-19 pandemic has confirmed the importance of telehealth in our country's healthcare system. Through today's projects and the many others already selected, the Pilot Program will promote innovation in telehealth and more patient access, particularly in underserved communities. Several of the projects we select today—including those proposed by the Charles Judd Community Health Center, Long Island Select Healthcare, Metro Health, New York Psychotherapy and Counseling Center and Bronx Child and Family Mental Health Center, Norwegian American Hospital, and NY Community Broadband Partnership—will serve patient populations that are 100 percent low-income. I thank the Commission's staff for their hard work making the Pilot Program a success, and I look forward to hearing about these programs' results.