

May 3, 2018

Marlene H. Dortch, Secretary

Federal Communications Commission

445 12th street, SW

Room TW-A325

Washington, D.C. 20554

# Re: Rural Health Care Program: Request to Promptly Approve Emergency Petition for Waiver of the Funding Cap Pending Conclusion of the Open Rulemaking

Dear Ms. Dortch,

The PATHS Community Medical Center is writing to strongly urge the Commission to approve the Emergency Petition for Waiver of the Rural Health Care Program (RHCP) Funding Cap Pending Conclusion of the Open Rulemaking, which was recently filed by the Schools, Health & Libraries Broadband (SHLB) Coalition.

*PATHS has five Community Health Centers and provides services to over 40,000 patients. Our offices are located in the City of Martinsville, VA; Chatham, VA; Danville, VA; South Boston, VA and Boydton, VA.*

*All of our charting is done using an EHR, when you have 30 plus providers and over 150 employees accessing the EHR at the same time it is of utmost importance that we have high speed internet services. While some of our offices are on Fiber, we have several offices where we struggle to receive the same high speed internet. During the Tornado that recently came through Virginia, the only tower that provides high speed internet to the town of Chatham, VA was damaged and MBC (MidAtlantic Broadband Communications) does not have any plans to replace this tower. This is not acceptable to keep our offices operating to its fullest and to be able to provide access to care to our patients.*

*We have so many programs that have been put on Health Centers to meet quality measures and be able to share patient data electronically in a timely manner. Not getting help with funding for high speed internet will put an even heavier burden on our rural Health Centers.*

# PATHS strongly urges the FCC to promptly approve the Emergency Petition for Waiver of the RHCP Funding Cap Pending Conclusion of the Open Rulemaking, for the following reasons:

* The reductions in FY2017 RHCP payments to rural FQHCs are in direct contradiction to Congress’ and HHS’ long-standing efforts to expand EHRs and telehealth in rural communities.
* The reductions in FY2017 RHCP payments to rural FQHCs are significant, unexpected and largely-retroactive – and particularly difficult for small safety-net providers to absorb.
* Given the size of the FY2017 reductions – and the unpredictability of future payment amounts – many rural FQHCs are considering giving up activities that require broadband access, despite significant pressure from Congress and HHS to engage in these activities.
* Both the $400 million cap and FCC oversight of the RHCP are outdated, and rural safety-net providers should not be penalized while waiting for the FCC to complete its updates of both.
* Given that rural providers and carriers are presently determining if -- and under what terms -- they will participate in the RHCP in FY18, the FCC should approve the emergency waiver promptly.

Thank you for your attention to this request, and for your efforts to increase access to care for medically underserved patients in rural areas. Please feel free to contact me directly if you would like additional information.

Sincerely,

***Wanda A. McCullough***

***PATHS***

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