

August 29, 2019

Ms. Marlene H. Dortch  
Secretary  
Office of the Secretary  
Federal Communications Commission  
445 12th Street SW  
Washington, DC. 20554

Submitted electronically via FCC.gov

*Re: Promoting Telehealth for Low-Income Consumers (WC Docket No. 18-213)*

Dear Secretary Dortch,

We appreciate the Federal Communications Commission's (FCC) intent to create a three-year \$100 million Connected Care Pilot Program to better understand the value of connected care services and the relationship between affordability of internet services and access to healthcare. Doctor on Demand believes that through the wider deployment and use of broadband connectivity, key elements of virtual care – from home-based video visits, to ongoing remote monitoring, to secure online access to patient records – are enabled and collectively provide higher quality care to a wider and more diverse population of patients.

Doctor on Demand is an HITRUST and NCQA Certified virtual medical provider that makes available affordable, accessible, and quality healthcare services to patients in all 50 states and DC. As the fastest growing national virtual health organization in the U.S., Doctor on Demand offers patients access to secure, on-demand and scheduled video visits with U.S.-licensed primary care physicians, psychiatrists, psychologists and other integrated health service professionals. A patient using Doctor on Demand also gets the unique benefit of care continuity with easy follow-ups with the same providers they have previously seen, and access to integrated labs, their EHRs, and a referral network of local specialists that they can choose to see in-person.

While we encourage this investment, we also support a smarter role for public investment to expand the delivery of connected care services to a broad range of patients who lack access to sustained, quality care. With this in mind we have outlined thoughtful recommendations for this new pilot program to ensure effective, ongoing quality care delivery and also ensure broad and inclusive program participation.

#### **Scope of Pilot**

The Commission should reconsider the scope of its pilot funding to also include costs related to end-user devices as well as engineering, IT, and health care personnel. Given the proposed focus of the pilot on health conditions that typically require at least several months or more to treat,

healthcare providers will need to develop adequate workflows and integrate the appropriate technologies to ensure clinically appropriate tech-enabled interventions.

Additionally, broadening the scope of your pilot will impact indirect cost avoidance related to patient travel and work or school absenteeism and productivity. According to the Altarum Center for Value in Health Care travel and wait times to see a health provider have not improved in 11 years and costs patients \$89 billion annually.

### **Eligible Health Care Providers**

We support the Commission's intent to design a pilot program that incentivizes participation from a wide range of eligible health care providers. Unfortunately, the proposed definition of eligible health care providers would leave patients underserved and virtual care practices that provide home-based preventive and chronic care management services unable to participate. We encourage the Commission to permit applications from any health care provider as defined in section 1171(3) of the Social Security Act ("any other person or organization who furnishes, bills, or is paid for health care in the normal course of business"), regardless of geographic location or provider setting, to ensure a more inclusive pool of proposals that the Commission can evaluate.

Research shows that physician shortages, in addition to a potential maldistribution of doctors have contributed to access burdens. The National Council for Behavioral Health Care states that nearly 75 percent of Americans who are looking for mental health care believe that it is inaccessible. Moreover, healthcare outcomes and costs in the U.S. are strongly linked to the availability of primary care physicians and a continuum of care. Nevertheless, 30 percent of American adults and 45 percent of millennials lack a primary care physician. Virtual doctor-patient engagement overcomes this divide and drives broader access to care via the opportunity for early intervention and treatment that yields lower costs for high-value coverage.

We appreciate the opportunity to provide comments for the FCC's proposed Connected Care Pilot Program. We welcome any opportunity to work more closely with the FCC to ensure that we reduce access burdens that inhibit the availability of quality and affordable health services.

Sincerely,

A handwritten signature in black ink, appearing to read "Latoya S. Thomas".

Latoya S. Thomas  
Director of Policy and Government Affairs  
Doctor On Demand