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June 12, 2001

Magalie Roman Salas, Secretary
Federal Communications Commission
445 12th Street, S.W., TW-A325
Washington, D.C. 20554

Re: *ET Docket No. 00-221*
AHA Task Force on Medical Telemetry
Ex Parte Presentation

Dear Ms. Salas:

This letter serves as notification that on behalf of the American Hospital Association Task Force on Medical Telemetry ("AHA Task Force"), Mary Beth Savary Taylor of the American Hospital Association and Kathryn Zachem, Larry Movshin and Tim Cooney of Wilkinson Barker Knauer LLP met with the following members of the staffs of the Office of Engineering and Technology and Wireless Telecommunications Bureau to discuss the above-captioned rulemaking proceeding: Lisa Gaisford, Kathleen Ham, Geri Matisse, Ira Keltz, Tom Derenge, John Borkowski, Tim Maguire, Brian Marengo and Zenji Nakazawa. The representatives of the AHA Task Force addressed the following issues affecting the allocation of spectrum to the Wireless Medical Telemetry Service ("WMTS") in the 1.4 GHz band:

- The AHA Task Force (and WMTS users in general) were gratified by the FCC's June 2000 decision in ET Docket No. 99-255 allocating the following frequency bands to WMTS on a primary basis: 608-614 MHz (TV Channel 37), 1395-1400 MHz, and 1429-1432 MHz. In making this allocation of 14 MHz of spectrum, the FCC recognized that all 14 MHz would not be available to WMTS in all locations, because of radio astronomy quiet zones, broadcasters' use of adjacent TV channels 36 or 38 (affecting the 608-614 MHz band), continuing federal government protection requirements in the two 1.4 GHz bands until at least 2004 or longer in some areas,

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and because some spectrum diversity was needed to accommodate potential two-way uses of WMTS devices.

- In ET Docket No. 00-221 issued just a few months after the WMTS allocation decision, the FCC solicited comment on options for re-allocation or sharing of various segments of the 1.4 GHz band, including the “upper 3 MHz” of the WMTS allocation at 1429-1432 MHz. In each of the options identified by the FCC, WMTS would be required to share its “upper 3 MHz” allocation with utility telemetry on a co-primary basis either at 1427-1430 MHz or at 1429-1432 MHz.
- The AHA Task Force filed comments explaining that WMTS cannot share 3 MHz with utility telemetry on a co-primary basis in the same geographic area because utility telemetry systems utilize at least 2 MHz of spectrum, are higher powered, and can interfere with low power WMTS receivers operating on the same or nearby channels.
- The AHA Task Force emphasized that it needs 3 MHz of upper band spectrum as the exclusive primary user (to ensure the reliability of WMTS devices), preferably at 1427-1430 MHz (next to radio astronomy, thereby minimizing the need for a guard band on the lower side) but at least at its current exclusive allocation of 1429-1432 MHz. Without a firm allocation of frequencies that are known to be available at 1.4 GHz, WMTS manufacturers will postpone development of WMTS devices to be used in that band, and the migration of medical telemetry devices out of the 460-470 MHz band (used by private land mobile radio services) inevitably will be delayed.
- The AHA Task Force held technical discussions with representatives of the “Little LEO” non-geostationary mobile satellite service and has concluded that sharing the same band would not be feasible. The Little LEOs would use all or part of the “upper 3 MHz” band of the current WMTS allocation for satellite downlinks, and any deviation from the maximum power flux density levels proposed by the Little LEOs would cause interference to patient safety-critical WMTS operations throughout the entire United States.
- The AHA Task Force developed a band plan to share the 5 MHz in the 1427-1432 MHz band on a geographic basis with utility telemetry. Under the band plan, WMTS and utility telemetry each would operate on 2.5 MHz of spectrum on a primary basis and operate in the other service’s 2.5 MHz on a secondary basis. We understand that the band sharing plan is endorsed by UTC and other utilities.
- The proposed band sharing plan for 5 MHz at 1427-1432 MHz would provide WMTS more useable spectrum than the current exclusive allocation at 1429-1432 MHz. If WMTS retained its exclusive allocation at 1429-1432 MHz, the AHA Task Force

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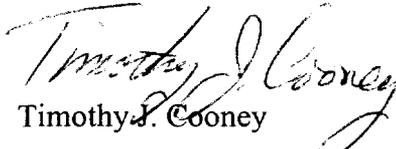
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assumes WMTS would be surrounded by higher power land mobile operations, requiring WMTS users to deploy a "guard band" on both sides of the allocation. Under the band sharing plan for 1427-1432, on the other hand, WMTS would be next to passive government radio astronomy and/or fixed utility telemetry transmitters, reducing the need for guard bands (for purposes of frequency coordination and resolution of interference incidents, WMTS users greatly prefer trying to identify fixed rather than mobile sources of interference). Moreover, under the sharing plan WMTS would have access to additional spectrum on a secondary basis.

Pursuant to Section 1.1206 of the FCC's rules, an original and one copy of this letter is submitted to the Secretary's office. Please call the undersigned counsel for the AHA Task Force if you have any questions.

Sincerely,


Timothy J. Cooney

cc: Lisa Gaisford
Kathleen O'Brien Ham
Geraldine Matise
Ira Keltz
Thomas Derenge
John Borkowski
Tim Maguire
Brian Marengo
Zenji Nakazawa