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October 23, 2001

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

Re: *Ex Parte Presentation, ET Docket No. 00-221,
American Hospital Association Task Force on
Medical Telemetry*

Dear Ms. Salas:

This letter filed electronically serves as notification that on October 23, 2001, the following representatives of the American Hospital Association Task Force on Medical Telemetry ("AHA Task Force"), Larry Movshin, Jonathan Cohen and Tim Cooney of Wilkinson Barker Knauer, LLP; Mary Beth Savary Taylor, Director, Executive Branch Relations, American Hospital Association; and Caroline A. Campbell, Director of Biomedical Engineering at the Washington Hospital Center, met with Paul Margie, legal advisor to Commissioner Michael J. Copps. The AHA Task Force representatives discussed their views on the pending reallocation of spectrum in the 1.4 GHz band, as summarized in the attached handout provided to Mr. Margie at the meeting.

Please call the undersigned if you have any questions.

Sincerely,

WILKINSON BARKER KNAUER, LLP

By:


Timothy J. Cooney

cc: Paul Margie (Via Facsimile)

**AMERICAN HOSPITAL ASSOCIATION
TASK FORCE ON MEDICAL TELEMETRY ("AHA")
EX PARTE PRESENTATION IN ET DOCKET NO. 00-221
OCTOBER 23, 2001**

- The FCC created the Wireless Medical Telemetry Service ("WMTS") in 2000 because of the demonstrated need to protect patient-critical medical telemetry devices from harmful interference. 3 MHz of the 14 MHz allocated to WMTS on a primary basis is at 1429-1432 MHz. The need for WMTS spectrum has not abated, and the FCC must now reaffirm the allocation of spectrum for WMTS in the 1427-1432 MHz band.
- The medical community (represented by AHA) and the utility telemetry ("UT") community (represented by Itron, Inc.) jointly developed an allocation plan for the 1427-1432 MHz band by which WMTS is generally the primary radio service in the 1427-1429.5 MHz band and UT is generally the primary radio service in the 1429.5-1432 MHz band. These two services would not share the same spectrum on a primary basis in any geographic area. Under this plan, WMTS will be able to satisfy its anticipated needs using 2.5 MHz of spectrum rather than the 3 MHz initially allocated, because the neighboring radio services (passive radioastronomy below 1427 MHz and UT above 1429.5 MHz) are designed in a manner that is more compatible with WMTS technical characteristics.
- In making the allocation decisions regarding the 1427-1432 MHz band in this docket, the FCC should focus on three key elements:
 - **Assure compatible neighbors for WMTS.** Having a compatible neighboring radio service like Utility Telemetry is **critical** to the WMTS's ability to reduce the amount of its primary allocation from 3 MHz to 2.5 MHz because (1) the two services anticipate compatible technical specifications that allow for efficient operation by each radio service in a smaller allocation and (2) relatively few UT systems are likely to be operating in a particular market, allowing for quick identification and resolution of any potential interference to a WMTS-equipped medical facility.
 - **Adopt All Key Elements of AHA-Itron Proposal.** The Commission must incorporate as much as possible of the band allocation plan developed by AHA-Itron into the FCC rules; in particular, since the parties have agreed to a "band-flip" to accommodate existing UT systems in the lower 2.5 MHz, it is essential that the rules expressly identify those few geographic areas in which the primary allocations in the 1427-1432 MHz band are "flipped" on a permanent basis. Without such a rule, WMTS operations may be effectively precluded in the 1.4 GHz band in several significant geographic areas or existing UT systems will have to migrate quickly out of the newly allocated WMTS spectrum. Neither situation would serve the public interest.
 - **Reconfirm Commitment to WMTS.** Since a separate proceeding is expected in which service rules for these services will be adopted, the FCC should reconfirm its commitment to protect WMTS licensees from harmful co-channel and adjacent channel operations when it proposes and adopts technical rules, such as power levels for UT or other neighboring radio services. Unless restrictions such as those included in the AHA-Itron proposal are adopted, WMTS cannot meet its anticipated requirements in less than 3 MHz of spectrum in the 1427-1432 MHz band.