



Arlington  
Dear Mr. Chairman,

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Sincerely,

A handwritten signature in cursive script that reads 'Debra C. Oliver'.

**Debra Collette Oliver**  
Director of Communications

Virginia Hospital Center  
email: [doliver@virginiahospitalcenter.com](mailto:doliver@virginiahospitalcenter.com)

☎ Office: 703.558.6364 - ☎ Fax: 703-558-6990 - ☎ Cell: 571-215-3147

Virginia Hospital Center Main #: 703-558-5000

Virginia Hospital Center Website: <http://www.virginiahospitalcenter.com>

# St. Joseph Medical Center

October 21, 2008

Dear Mr. Chairman,

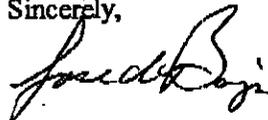
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Sincerely,



Jose deBorja



*GEORGETOWN UNIVERSITY SCHOOL OF MEDICINE*

*Dean for Medical Education  
The Joseph J. Bateman Professor of Medical Education*

October, 21, 2008.

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Sincerely,

A handwritten signature in black ink that reads "Jeanne Walther".

Jeanne Walther, MA  
Senior Associate Dean for  
Administration and Registrar

*Educating Tomorrow's Doctors... Since 1851*

*Med-Dent Building NW106 Box 571416 Washington DC 20057-1416  
202.687.3922 Fax 202.687.2792*



**GOVERNMENT OF THE DISTRICT OF COLUMBIA  
DEPARTMENT OF MENTAL HEALTH**

October 21, 2008

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Sincerely,

Toni S. Bacote  
Information Services  
Telecommunications Office



*Serving Children and Their Families Since 1870*

111 Michigan Avenue, N.W.  
Washington, D.C. 20010-2970  
www.dccchildrens.com

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Sincerely,



8118 Good Luck Road  
Lanham, Maryland 20706-8596  
301-652-8118

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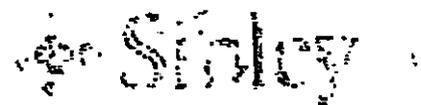
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Sincerely,



**Sibley  
Memorial  
Hospital**

5275 Loughboro Road NW  
Washington DC 20016-2905  
Telephone 202.772.4000  
www.sibley.org

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Sincerely,

  
Novia E. Minto  
Communications Manager



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Sincerely,

A handwritten signature in cursive script that reads "Diane M. Hott".

Diane M. Hott, CMRP  
Purchasing Manager  
Greater Baltimore Medical Center



**SOUTHERN MARYLAND  
HOME HEALTH SERVICES, INC.**  
10403 Hospital Drive, Suite G-09  
Clinton, MD 20735  
(301) 856-3192 or (800) 819-3007

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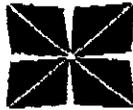
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Sincerely,

A handwritten signature in cursive script that reads "Stephanie Lubberger".

Stephanie Lubberger  
Billing/IT Manager



## Dimensions Healthcare System

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Sincerely,

A handwritten signature in black ink, appearing to read "Wayne Chesson", written over a horizontal line.

Wayne Chesson  
Telecom Manager



**Mt. Washington Pediatric Hospital**  
*Advancing the care of children. A jointly owned corporate affiliate of*  
*The University of Maryland Medical System and*  
*The Johns Hopkins Health System*

1708 West Rogers Avenue  
Baltimore, Maryland 21209-4596  
410-578-8600

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Sincerely,

*Mark Jones*



2401 West Belvidere Avenue  
Baltimore, MD 21215-5271

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Sincerely,

A handwritten signature in cursive script that reads "Patricia A. Kenon".

Patricia A. Kenon  
Corporate Manager, Telecommunications  
(410) 601-5773  
[pkenon@lifebridgehealth.org](mailto:pkenon@lifebridgehealth.org)



Northwest Hospital Center  
6401 Old Court Road  
Randallstown, MD 21133-5185  
410-521-2200  
410-521-2531 TTV

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**JOHNS HOPKINS**  
UNIVERSITY**Telecommunications Services**

5801 Smith Avenue, Suite 3110B  
Baltimore MD 21209  
410-735-6620 / Fax 410-735-4775

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Deborah Contrella, Director  
Johns Hopkins Telecommunications



**BON SECOURS HOSPITAL**  
Bon Secours Baltimore Health System

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10/20/2008

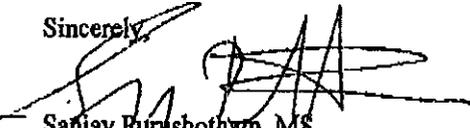
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Sanjay Purushotham, MS  
Executive Director of Information Systems  
Bon Secours Baltimore Health System  
(410) - 362-3411 (office)  
(410) - 207-3613 (mobile)  
(410) - 362-3577 (fax)  
E-mail - Sanjay\_Purushotham@bshsi.org

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# MEDICAL FACULTY ASSOCIATES

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THE GEORGE WASHINGTON UNIVERSITY

October 17, 2008

Dear Mr. Chairman,

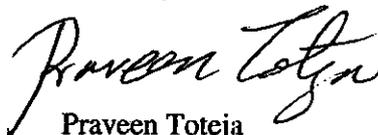
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Praveen Toteja  
CIO  
Medical Faculty Associates  
George Washington University

INFORMATION TECHNOLOGY AND SERVICES

2150 PENNSYLVANIA AVENUE, NW, SUITE 5-110 • WASHINGTON, DC 20037 • 202-741-3636 • FAX 202-741-3640

# CHARLOTTE FIRE DEPARTMENT



Communications Division  
228 East 9<sup>th</sup> Street  
Charlotte, NC 28202  
704-336-7598

October 22, 2008

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Our organization relies heavily on paging services for our emergency response and public safety communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs we, or our communication partners, will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that public safety and interoperability could be adversely impacted.

We are in the business of public safety. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause for public safety issues.

Sincerely,

Marsha Withrow, Manager  
Charlotte Fire Communications

**SUMMERVILLE POLICE DEPARTMENT** - 300 West 2nd North Street - Summerville, South Carolina 29483 - 843-851-4100**Bruce E. Owens**  
Chief of Police

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, may have an adverse impact on our organization's ability to maintain emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will pass through those costs to their customers.

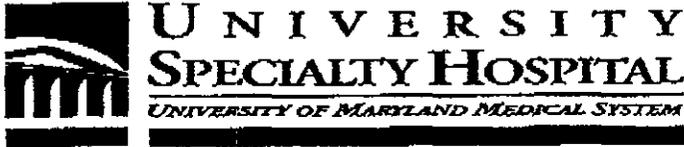
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Sincerely,

*Service With Integrity*



October 22, 2008

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

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We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community.

Sincerely,

Earl W Johnson  
Director of Ancillary Services  
University Specialty Hospital  
601 S. Charles Street  
Baltimore Md. 21207



# WINDHAM HOSPITAL

Excellence In Community Healthcare

October 22, 2008

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

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Sincerely,

Kevin Tupper  
Director, Information Technology



**DEPARTMENT OF THE ARMY**  
HEADQUARTERS, CARL R. DARNALL ARMY MEDICAL CENTER  
38000 DARNALL LOOP  
FORT HOOD, TEXAS 78644-4752

MCXI-IMD

21 October 2008

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

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Sincerely,

A handwritten signature in black ink, appearing to be "A. R. [unclear]".



Westinghouse Electric Company  
Nuclear Fuel  
Columbia Fuel Site  
P.O. Drawer R  
Columbia, South Carolina 29250  
USA

Kevin Berdin  
Senior Account Executive  
USA Mobility

Direct tel: 866-224-6992  
Direct fax: 866-379-1368  
Your ref: USF fee increase

October 22, 2008

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services nuclear regulatory preparedness communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

As a result of the increased costs, we will be forced to re-evaluate our communication strategy. These revisions will likely lead us to reduce our communications usage in order to offset the increased costs. As a result, we feel that patient safety, security and emergency response could be adversely impacted.

We are in the business of providing services to the public. We understand the USF goals are also aligned with the public interest as the USF helps defray the cost of telephone service in rural areas and for low-income consumers as well as provides subsidies to schools, libraries, and rural health clinics. However, we feel these revisions will run counter to the interests of the public. Therefore we urge you to reconsider the changes taking into account the adverse impact they may cause in the healthcare community as well as our nuclear fuel organization.

Sincerely,

Larry Baines,  
Manager, Enterprise Information Systems



October 17, 2008

Dear Mr. Chairman,

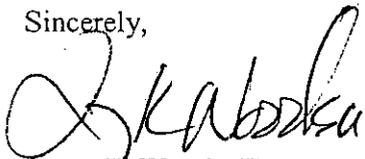
We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for hospital communications ranging from emergency response, code team alerting (i.e. code blue), security, nursing and numerous other patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

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Sincerely,



Larry K. Woods, II  
CEO Agape Healthcare Services



## THE QUEEN'S MEDICAL CENTER

1301 Punchbowl Street • Honolulu, Hawaii 96813 • Phone (808) 538-9011 • FAX: (808) 547-4646

October 20, 2008

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

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Sincerely,

David A. Valentini  
Manager, Biomed Eng Svcs & Telecommunications Services



# PHYSICIANS EXCHANGE OF HONOLULU, INC.

An Affiliate of the Honolulu County Medical Society  
1360 S. BERETANIA ST., SUITE 301  
HONOLULU, HI 96814  
PHONE 524-2575 • FAX 523-7809

October 17, 2008

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**MANAGER:**  
Rose Hamura

Dear Mr. Chairman,

We have been made aware that the FCC is considering revisions in the Universal Service Fund (USF) contribution methodology that, according to our review, could have an adverse impact on our organization's ability to maintain patient safety and emergency response standards. It is our understanding that certain components of these revisions, if applied to paging services, would lead to significantly increased costs as the carriers will seek to pass through those costs to their customers.

Our organization relies heavily on paging services for physicians ranging from emergency response, hospital communications and other numerous patient-related communications. Today, we pay less than 10 cents per month in USF charges for each pager, and often less than 5 cents. Replacing these revenue-based charges with a flat \$1.00 charge would dramatically raise our costs (by as much as 30% overall) for these services, causing our organization to revisit its use of the services. At a time when our budgets are already stretched and in an uncertain economy, this is not a welcome surprise.

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Sincerely,

Rose Hamura  
Manager