Illinois Rural HealthNet

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November 20, 2013

Linda Oliver
Deputy Chief, Telecommunications Access Policy Division
Wireline Competition Bureau
Federal Communications Commission
445 12th Street, S.W.
Washington, D.C. 20554
Via FCC ECFS

RE: Appeal of USAC Denial of Location Eligibility, Rural or Urban
Docket 02-60

Dear Ms. Oliver,

The Illinois Rural HealthNet (IRHN) is appealing USAC's designation of multiple health care provider locations as being urban. As a result of this, the HCP locations have been denied eligibility for inclusion in two Requests for Proposals, RFP 01 and RFP 02.

Please note that the State of Illinois is supporting our appeals. Governor Pat Quinn's letter is the first attachment, and it summarizes in one page the importance of allowing health clinics to be included as eligible for the Healthcare Connect Fund.

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Funding Year	Healthcare Connect Fund, 2013-2014
Application Type	465 Attachment
Application No.	RFP01Form 465 AttachmentIRHNAug30 2013 Oct 11 new date RFP02Form 465 AttachmentIRHNAug28 2013 Oct 11 new date
Appeal Reason	USAC Denial of Urban Health Clinic Cover Letter, dated October 15, 2013: Health Clinics denied eligibility based on being defined as urban and being defined as not being a HRSA Community Health Center

Summary of IRHN's Appeal: The IRHN has Letters of Agency from a number of HCPs that are rural health clinics, that is, health clinics in locations that are most commonly referred to as rural. USAC has, however, categorized these locations as urban, and USAC is acting under the belief that it is thereby

complying with the FCC's guidelines in this regard. As a result of USAC's categorization of the denied locations as urban, USAC directed that the IRHN change our category for these locations from "rural health clinic" to "community health center," then issued denial letters based on the fact that the HCP locations in question are not HRSA Community Health Centers, also known as FQHCs. The IRHN knows the locations are not FQHCs. They are rural health clinics, and as such should be eligible on that basis.

The IRHN does have an understanding of the position that USAC is in, and we hasten to add that we do not, in any way, question the good intentions of USAC in this matter. We understand that USAC is making eligibility decisions as best as they can determine. We ask that the FCC help clarify this matter, concerning what is and what is not defined as "rural," as pertains to health clinics in geographical locations most commonly designated as rural.

What follows is the sequence of submissions and communications that resulted in the denial of eligibility of the HCP locations included in this appeal. Our appeal is based ultimately on our belief that the Federal Communications Commission (FCC) is interested in carrying out its worthwhile objective of assisting in the process of improving access to health care in rural areas.

In order to make our case, we need to include the chain of events that led to this appeal, along with selected Documents which we will number for purposes of discussion and review in this appeal.

In brief, the IRHN submitted locations that we described as rural. USAC ruled that they were not rural locations, and directed that the IRHN change the classification to some other category. Community health center seemed the only alternative, as was suggested by USAC in Document 7 of the attachments. USAC then denied the eligibility, based on the fact that the health clinics in question were not HRSA FQHCs. We make this point again to make sure it is clear that, while the reason for USAC denial of eligibility was the Community Health Center question, this is not the basis of this appeal. The basis of this appeal is that the health clinics are, according to most rural/urban indicators, rural and not urban. If they are categorized as rural, they will be eligible, and that is what we are requesting, that the clinics in this appeal be categorized as rural, as they are shown to be in Document 11 and Document 12. The chain of events described below and documented in the attachments trace the "evolution" of the categorization of the clinics in question. This detail is included so that the FCC may be able to understand how exactly this appeal came into being.

Now for the details:

The IRHN received a Denial of Urban Health Clinic Cover Letter on October 15, 2013, which is Document 1 listed below. We also received email copies of the individual Denial Letters sent to the HCPs. These have been combined into a single pdf named Document 2 - IRHN Denied Rural locations

Nov 12 2013, which was the date that we combined the individual Denial Letters into a pdf. In the paragraphs that follow, we will briefly outline the communications between the IRHN and USAC concerning the Denied locations.

The IRHN submitted Document 3, the 465 Attachment for RFP 01, on August 30, 2013 and Document 4, the 465 Attachment for RFP 02, on August 28, 2013. In these two 465 Attachments, there were a large number of HCP locations that we described as "rural health clinics" in columns 27b and 27c.

On October 8, we received Document 5, an email from USAC stating that changes were needed, with an attachment of Document 6, an Excel spreadsheet named IRHN Listed Entity Type Changes needed. That same day, I contacted USAC to ask for clarification, and subsequently received Document 7, an email that described the drop-downs and suggested using either community health center or not-for-profit hospital. As the locations in question were clinics, not hospitals, it was agreed that we would change the drop-down to community health center.

The IRHN then submitted revised versions of the two 465 Attachments:
Document 8 - RFP01Form 465 Attachment IRHN Aug30 2013 Oct 11 new date
Document 9 - RFP02Form 465 Attachment IRHN Aug28 2013 Oct 11 new date

Then, on October 15, we received Document 1, 17223 – Denial of Urban Health Clinic Cover Letter, and we started receiving the copies of the individual Denial Letters (Document 2). On October 31, after we asked for explanations on why the HCPs were denied, we received Document 10, the IRHN List of Denied Sites Oct 31 13. As you will see, most of the denials were described as being due to the HCP not being a HRSA CHC.

The grounds for this particular IRHN appeal to the FCC will <u>not</u> address the HRSA CHC definition of community health center. That will be the grounds for a separate appeal that the IRHN will file.

The grounds for this IRHN appeal is the ruling by USAC that the HCP locations included in this appeal are, according to USAC, urban. (It was because USAC declared the locations urban that we changed the drop-down to community health center, but we did that after being so advised by USAC, as per Document 7.) Our contention is that the HCP locations included in this appeal are, according to a majority of indicators, rural, as shown in Document 11 and Document 12. If these sites had been deemed rural by USAC, they would be eligible entities.

The "evidence" for our argument is attached, partly in Document 11, an Excel spreadsheet named "IRHN Rural designation multiple Nov 12 13." The spreadsheet lists the denied locations, and includes three columns. Column D contains for each location the USAC verdict, which is negative or not rural. Column E contains the RUCA code for each location, and most of them are either 4 or 5 (1 is urban).

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Column F is the eligibility decision from the HRSA website as to whether each location is eligible for Rural Health Grants. In every case, the answer is Yes.

This is documented in Document 12, which is named "HRSA Yes Eligible on rural grants pdf." This pdf contains the screen prints from the HRSA Rural Health Grants Eligibility Analyzer, showing that each separate location is eligible.

The IRHN requests that the Federal Communications Commission clarify this situation. Given that the locations included in this appeal are deemed eligible for rural health grants by the US Department of Health and Human Services, and given that the RUCA codes are also indicative of rural locations, the IRHN believes that a strong case can be made that the locations included in our appeal are indeed rural.

As such, they should be eligible for the drop-down category of rural health clinic in the 465 Attachment. And that is the category that the IRHN had chosen, until we were advised by USAC that we should not use that category. Please direct USAC to allow the IRHN to change the category of these locations to rural health clinic in the 465 Attachments for RFP 01 and RFP 02, and to assess each location's eligibility on the basis of that categorization. As part of that direction and clarification, we request that the FCC direct USAC to use multiple sources of rural designations in deciding rural eligibility.

Finally, it is important to note that a significant amount of health care treatment is performed on an outpatient basis at health clinics such as the ones that recently were denied eligibility by USAC. These clinics are often the final and vital link in bringing improved health care to at-risk populations. The IRHN has succeeded in creating a viable, fiber optic healthcare backbone that reaches most areas of Illinois. The impact of this backbone will increase ever more dramatically as additional clinics are added to the connection, thus bringing improved access to healthcare to wider geographies. It would be a shame, now that the backbone is in place and many hospitals are connected, to deny that benefit to hospital clinics, which carry out much of the health care treatment for at-risk individuals.

Thank you for your consideration, and please do not hesitate to contact me if that would be helpful.

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Attachments included in this Appeal:

- Pat Quinn, Governor, State of Illinois; Letter of Support
- Document 1: 17223-Denial of Urban Health Clinic Cover Letter
- Document 2: IRHN Denied Rural locations Nov 12 2013; pdf of individual denial letters to HCPs
- Document 3: RFP1 465 Attach Aug 30 13
- Document 4: RFP2 465 Attach Aug 28 13
- Document 5: Oct 8 email from USAC IRHN Entity Type – Changes needed
- Document 6: Listed Entity Changes needed
- Document 7: USAC email suggests CHC instead of rural
- Document 8: RFP1 465 Attachment Aug30 2013 Oct 11
- Document 9: RFP2 465 Attachment Aug28 2013 Oct 11
- Document 10: IRHN List of Denied Sites Oct 31 13
- Document 11: IRHN Rural designation multiple Nov 12 13
- Document 12: HRSA Yes Eligible on rural grants pdf; contains copies of the Yes determination on eligibility for rural health grants