



PUBLIC NOTICE

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WIRELINE COMPETITION BUREAU PROVIDES ADDITIONAL INFORMATION CONCERNING THE CONNECTED CARE PILOT PROGRAM

WC Docket No. 18-213

On April 2, 2020, the Commission released a *Report and Order* establishing the Connected Care Pilot Program (Pilot Program) within the Universal Service Fund (USF) to help defray eligible health care providers' costs of providing connected care services, with an emphasis on supporting these services for low-income Americans and Veterans. By this Public Notice, the Wireline Competition Bureau (Bureau) provides additional information concerning the Connected Care Pilot Program and guidance to assist prospective applicants in preparing to apply for the Pilot Program. Further information regarding the timing of the Pilot Program application window, and other specific, necessary procedures, will be announced by the Bureau in a forthcoming Public Notice.¹

Eligible Funding

The Pilot Program will make available up to \$100 million over three years for selected pilot projects. Specifically, the Pilot Program will provide universal service support for 85% of the cost of eligible services and network equipment, which include: (1) patient broadband internet access services, (2) health care provider broadband data connections, (3) other connected care information services, and (4) certain network equipment (e.g., equipment necessary to make a supported broadband service function such as routers). The Pilot Program will **not** provide funding for devices, including end-user connected devices (e.g., tablets, smart phones or remote patient monitoring equipment), medical equipment, health care provider administrative costs, personnel costs (including, but not limited to medical professional costs), or other miscellaneous expenses.² The Pilot Program also will not fund network deployment, the construction of networks between health care providers, or connectivity services between health care provider sites.³ Selected projects will need to seek competitive bids for the eligible items for which they intend to seek Pilot Program support.⁴

¹ Due to Paperwork Reduction Act requirements, the Bureau does not anticipate that Pilot Program applications will be accepted before November 2020.

² See *Promoting Telehealth for Low-Income Consumers; COVID-19 Telehealth Program*, Report and Order, 35 FCC Rcd 3366, 3402-04, paras. 65-66 (2020) (*Report and Order*).

³ *Id.* at 3399-40, para. 60.

⁴ *Id.* at 3412-13, paras. 75-76.

Eligible Health Care Providers

The Pilot Program is open to eligible health care providers whether located in rural or non-rural areas.⁵ The Pilot Program is limited to nonprofit and public eligible health care providers that fall within the statutorily enumerated categories of “health care provider” in section 254(h)(7)(B) of the Telecommunications Act of 1996, which includes: (1) post-secondary educational institutions offering health care instruction, teaching hospitals, and medical schools; (2) community health centers or health centers providing health care to migrants; (3) local health departments or agencies; (4) community mental health centers; (5) not-for-profit hospitals; (6) rural health clinics; (7) skilled nursing facilities; or (8) consortia of health care providers consisting of one or more entities falling into the first seven categories.⁶ To determine whether a health care provider site falls within one of these eight categories, applicants must request an eligibility determination by filing an FCC Form 460 with the Universal Service Administrative Company (USAC) and obtaining a Health Care Provider Number (HCP Number) for each health care provider site where they intend to use Pilot Program funding to provide connected care services.

Request an Eligibility Determination

To prepare for submitting a Pilot Program application, nonprofit and public eligible health care providers interested in participating in the Pilot Program can take steps now to obtain an eligibility determination by filing an FCC Form 460 (Eligibility and Registration Form) with USAC and obtaining a Health Care Provider (HCP) number.⁷ An eligibility determination and HCP number is required for each health care provider site that will be included in a Pilot Program application. Thus, a consortium of health care providers will need to obtain an eligibility determination for each health care provider site that intends to participate in the Pilot Program. Health care systems or other health care providers with multiple locations will also need to obtain an eligibility determination for each health care provider site (e.g., separate location) that intends to participate in the Pilot Program. Health care provider sites that USAC has already deemed eligible to participate in the Commission’s existing Rural Health Care (RHC) Program or the COVID-19 Telehealth Program may rely on that eligibility determination for the Pilot Program.

The FCC Form 460 can be found at: <https://www.usac.org/rural-health-care/resources/forms/>. The FCC Form 460 requires applicants to provide basic information about the health care provider sites for which an eligibility determination is requested, such as:

- Address and contact information.
- Health care provider type.
- Brief explanation as to why the health care provider is eligible under the categories in section 254(h)(7)(B) of the Communications Act.
- Health care provider identifying number, such as a National Provider Identifier (NPI) code and/or taxonomy code.
- Supporting documentation demonstrating the health care provider’s eligibility.

⁵ As explained in the *Report and Order*, for purposes of the Pilot Program, eligible, non-rural health care providers do not need to be part of a consortium in order to participate. *See Report and Order*, 35 FCC Rcd at 3404, para. 67 & n.171.

⁶ *See* 47 U.S.C. § 254(h)(7)(B).

⁷ An HCP number is the unique 5-digit numerical identifier that USAC automatically assigns to each FCC Form 460 filed for an eligibility determination. USAC uses the HCP number to identify whether a health care provider has been deemed an eligible.

Consortium applicants may file an FCC Form 460 on behalf of member health care providers if they have a Letter of Agency. The FCC Form 460 is also used to provide certain basic information about consortia to USAC, including:

- Lead entity (Consortium Leader).
- Contact person within the lead entity (the Project Coordinator).
- Health care provider sites that will participate in the consortium.

Interested health care providers can contact USAC for specific questions about eligibility and completing the eligibility form (FCC Form 460) via telephone at (800) 453-1546 or via email at RHC-Assist@usac.org.

Required Information for Applications for the Pilot Program

In preparation for the Pilot Program application becoming available, interested applicants can begin to collect the information outlined below, which we anticipate applicants will be required to submit as part of their Pilot Program application. Note that the actual wording on the application and the order in which the information appears on the final application form may vary from the wording and order in this Public Notice.

We recognize that some applications could contain confidential information.⁸ Applicants may request that any materials or information submitted to the Commission in their application be withheld from public inspection pursuant to the procedures set forth in section 0.459 of the Commission's rules.

Applicant Information

- Applicant Name.
- Applicant FCC Registration Number.
- Applicant Organization Type (Individual or Consortia).
- FCC Form 460 Filing Status (Filed or Eligible).
- Health Care Provider Number(s) (must file an FCC Form 460 for each participating location).
- Service area (State(s)).
- Contact name, organization and position title, mailing address, email address, and telephone number of individual submitting application.

Contact Information for Proposed Pilot Project

- Contact name, organization and position title, mailing address and telephone number for the individual responsible for the management and operation of the proposed pilot project.

Lead Entity & Health Care Provider Information

- Number of health care provider sites for which funding is requested.
- Total patient population of participating health care providers.
- Lead entity or lead health care provider name.
- Facility name of all health care provider sites for which Pilot Program funding is requested.
- Street address, city, state, county for lead entity or lead health care provider and all participating health care provider sites.
- Health Care Provider numbers for each participating site.

⁸ *Report and Order*, 35 FCC Red at 3405, para. 68 & n.174.

- Rural or non-rural designation for each participating site.⁹
- Eligibility type for each site.
- National Provider Identifier (NPI).
- Estimated number of patients to be served by Pilot Program funding.

Conditions to be Treated with Pilot Program Funding, Goals and Objectives, and Proposed Metrics

- Description of health condition(s) the participating health care providers will treat through the proposed pilot project.
- Participating health care provider's experience treating the condition(s).
- Description of connected care service(s) the proposed pilot project would provide to treat condition(s).
- Goals and objectives of the proposed pilot project (including the health care provider's anticipated goals with respect to reaching new or additional patients, and improved patient health outcomes, expected health care benefits to the patients, health care provider, or the health care industry that will result from the proposed pilot project, and how the pilot project will achieve each of the goals of the Pilot Program).
- Metrics for the proposed pilot project that are relevant to the Connected Care Pilot Program goals and how the participating providers will collect those metrics, including reductions in potential emergency room or urgent care visits; decreases in hospital admissions or readmissions; condition-specific outcomes, such as reductions in premature births or acute incidents among sufferers of a chronic illness, and patient satisfaction as to with their overall health status. Additional illustrative examples of potentially relevant metrics include number of patients treated using Pilot Program funding, number of telehealth encounters using Pilot Program funding, number of patients retained in treatment at 30, 60, and 90 days and at one year, patient travel miles saved, patient compliance with care plan, increase in patient knowledge of care, patient comfort with telehealth applications and procedures, patient satisfaction with their overall health status, provider comfort with telehealth application and procedures, and provider satisfaction with delivery method.

Costs for Which Funding Will be Requested

- Description of the costs for which Pilot Program Funding will be requested. The Pilot Program will provide 85% funding for patient broadband internet access services; health care provider broadband data connections;¹⁰ information services needed to provide connected care services; and network equipment (e.g., routers necessary to make health care provider supported broadband services functional).

Additional Information Concerning Requested Eligible Items

- If requesting support for patient connectivity, description of the anticipated level of patient broadband service required for the proposed pilot project, including the necessary speeds, the

⁹ For purposes of the Pilot Program, rurality determinations are based on the definitions in section 54.600(e) of the FCC's rules. See 47 CFR § 54.600(e) ("A 'rural area' is an area that is entirely outside of a Core Based Statistical Area; is within a Core Based Statistical Area that does not have any Urban Area with a population of 25,000 or greater; or is in a Core Based Statistical Area that contains an Urban Area with a population of 25,000 or greater, but is within a specific census tract that itself does not contain any part of a Place or Urban Area with a population of greater than 25,000. For purposes of this rule, 'Core Based Statistical Area,' 'Urban Area,' and 'Place' are as identified by the Census Bureau."). Health care providers can use USAC's Eligible Rural Areas Search Tool to determine their rurality under this definition. See USAC, Rural Health Care, Eligible Rural Areas Search, <https://apps.usac.org/rhc/tools/Rural/search/search.asp> (last visited Sept. 3, 2020).

¹⁰ Note, the Pilot Program will not provide funding for connections between health care provider sites. *Report and Order*, 35 FCC Red at 3399-40, para. 60.

technologies to be used (e.g., mobile or fixed broadband), and any other relevant service characteristics (e.g., LTE service).

- If requesting support for patient connectivity, description of the estimated number of patient broadband connections that the health care provider intends to purchase for purposes of providing connected care services to patients who lack broadband service or have insufficient broadband services, and, if known, the estimated percentage of patients in participating patient population that lack level of broadband service required for telehealth services.
 - This description must include an explanation of how the health care provider plans to assess whether a patient lacks broadband service or has insufficient broadband Internet access service for the indicated connected care service based on speed, technology, or data cap limitations.
 - This description must also include a description of the measures or mechanisms the health care provider will use to verify that participating patients are using the supported broadband service primarily for activities that are integral, immediate, and proximate to the provision of connected care services.
- If seeking support for an information service used to provide connected care, a description of the service, including a description of the primary function/s of the service, and whether it facilitates the capturing, transmission, and storage of data for connected care, and how it is integral to the pilot project.

Health Care Provider Experience, Plans for Implementing the Pilot and Financial Health

- Health care provider's previous experience with providing telehealth services (other than electronic health records) or experience and name of a partnering health care provider or organization.
- Plan for implementing and operating the pilot project, including how the pilot project intends to recruit patients, estimated amount of ramp-up time necessary to implement the pilot project (not to exceed six months), plans to obtain any necessary end-user devices (e.g., tablets, smartphones) and medical devices for the connected care services that the pilot project will provide, plans to provide training to providers and patients, and to what extent the pilot project can be self-sustaining once established.
- Description of any commitments from community partners, including physicians, hospitals, health systems, and home health/community providers to the success of the proposed pilot project.
- Documentation of the participating health care provider(s)'s financial health (e.g., recent audited balance sheets and income statements that are no more than two years old).

Additional Information Concerning Geographic Area and Patient Population to Be Served

- Description of whether each participating health care provider site is located in a rural area as defined in the RHC Program Rules,¹¹ on Tribal lands, is associated with a Tribe, or is part of the Indian Health Service. If the health care provider is not located in a rural area, include a description of whether the health care provider will primarily serve veterans or low-income patients located in rural areas as defined in the RHC Program rules, and identify those specific rural areas.
- Listing of all Department of Health and Human Services, Health Resources & Services Administration (HRSA) designated Health Professional Shortage Areas (for primary care or

¹¹ For purposes of determining rurality for the Pilot Program, we use definition of "rural area" in section 54.600(e) of the FCC's rules. Health care providers can determine whether they are located in a rural area or serve patients who reside in rural areas under this definition by visiting the Eligible Rural Areas Search Tool on USAC's website. See USAC, Rural Health Care Program, Healthcare Connect Fund Program, Determine Eligibility of Your Site, Rural Look Up Tool, <https://apps.usac.org/rhc/tools/Rural/search/search.asp> (last visited Sept. 3, 2020).

mental health care only) or HRSA designated Medically Underserved Areas that will be served by the proposed project.

- Description of whether the pilot project will primarily benefit low-income or veteran patients and, if so, the estimated number or percentage of those patients the project will serve compared to the total number of patients that the pilot project estimates serving.
- Description of whether the primary purpose of the project is to provide connected care services to respond to a public health epidemic, or to provide connected care services for opioid dependency, high-risk pregnancy/maternal mortality, mental health conditions (e.g., substance abuse, depression, anxiety disorders, schizophrenia, eating disorders, and addictive behavior), or conditions of a chronic or long term nature (including, but not limited to heart diseases, diabetes, cancer, stroke).

Information on Estimated Eligible Funding Needs

- Description of whether any health care providers that would participate in the proposed pilot project applied for and were awarded funding through any of the FCC's programs, including the COVID-19 Telehealth Program and, if so, a description of what the other FCC Program funding was used for, and how the request for funding through the Connected Care Pilot Program is different.
- Estimated total project costs including costs eligible for support through the Pilot Program and costs not eligible for Pilot Program support but still necessary to implement the proposed pilot project.
- Total estimated eligible funding (85%) to be requested by category (patient connectivity service, health care provider connectivity service, eligible network equipment, and other information services necessary to provide connected care services).
- Estimated eligible funding requested per year (over three years) by category (patient connectivity service, health care provider connectivity service, eligible network equipment, and other information services necessary to provide connected care services).
- A list of anticipated sources of financial support for the pilot project costs not covered by Pilot Program, including the applicant share of eligible costs.

Information About Need for Funding

Applicants may provide additional information relevant to the consideration of their application, including, but not limited to, information on existing strains on the submitting health care providers' resources, healthcare shortages in the areas the proposed project would serve, the need for funding, or whether the project may need a waiver of any applicable FCC rules in order to participate in the Pilot Program.

Additional Information

For further information regarding this Public Notice, please send an email to ConnCarePilotProg@fcc.gov. Additional information concerning the Pilot Program will be posted at the following link: <https://www.fcc.gov/wireline-competition/telecommunications-access-policy-division/connected-care-pilot-program>.