

**STATEMENT OF  
COMMISSIONER MICHAEL J. COPPS  
APPROVING**

Re: *In the Matter of Rural Health Care Support Mechanism*, Order  
(WC Docket No. 02-60)

It is still the unfortunate truth that rural America lags behind the rest of the country in access to first-rate health care. That's bad news for so prosperous a nation as ours. So I am pleased that the pilot program we establish today to build a dedicated broadband network for health care providers creatively pushes the envelope in an effort to spur the development of tele-medicine programs to better serve rural America.

The need for new thinking in this area is clear. Over the last 10 years, the rural health care mechanism has disbursed less than 10 percent of the \$400 million authorized for the program each year. I don't believe the foregone potential of this program is what Congress or the Commission had in mind when the rural health care mechanism was launched. Missed opportunities are all the more worrisome at a time when bioterror, naturally-occurring health threats such as E-coli 0157H7, an avian flu pandemic, or a natural disaster like Hurricane Katrina can wreak havoc anywhere in America. One thing is for sure—if a health catastrophe visited many of our rural areas today, our rural health care system is not generally equipped to deal with it.

So I welcome this initiative and I hope we will consider other innovative ways to use this program to advance rural health care. And let me also say how pleased I am that the Chairman and my colleagues have agreed to include a requirement for the Commission to issue a report based on over a decade of FCC experience that can advise Congress and others of what we have learned, what has worked well, and where legislative or administrative improvements may be needed.

I would note that this new initiative deserves a serious outreach effort so that all interested parties can participate; an expeditious but totally transparent application process; and careful selection of recipients. The item envisions a short timeframe for applicants so the Bureau needs to do some extraordinary outreach here beginning today. A swift application process has real benefits but it must not come at the expense of a diverse pool of applicants from all across the country who could benefit from this initiative.

Finally, after our last rural health care order in 2004, legitimate concerns were raised that our current rules are not as expansive as they should be when it comes to the types of providers, services, and technologies that are covered by the program. I would hope that the Commission will quickly address these items as they could immediately result in wider participation in the program.

There is no question that healthcare communications is vital to both the homeland security and economic security of our citizens. As I have said before, I want to see this

Agency commit to ensuring that every hospital and health center in America has a broadband connection by 2010 and is fully integrated into an emergency response communications system. What a powerful achievement that would be. We take an important step towards this goal today, and I am pleased to support this item.