

**STATEMENT OF
COMMISSIONER JESSICA ROSENWORCEL**

Re: *In the Matter of Rural Health Care Support Mechanism*, WC Docket No. 02-60,
Report and Order (December 12, 2012)

Like some of my colleagues, I have had the chance to see the power of telemedicine up close and at work. I have watched as pediatric surgeons in California share their expertise via video with patients many miles away. I have seen how village clinics in rural Alaska use broadband to provide first-class care to patients in some of this country's most remote communities. These experiences amaze because they can challenge our traditional notions of health care. They can collapse distance and time; enhance the quality of care; improve outcomes; and lower costs.

Today's Report and Order seizes this transformative power by updating our rural health care universal service mechanism with a new Healthcare Connect Fund. The Commission's existing universal service rural health care programs have had some success, but I believe they are also due for a check-up. After all, good programs do not thrive without continuous attention and care, and I am hopeful that today's order will position this program for doing even more good in the days ahead.

I am optimistic. Because in critical part, today's decision addresses three key recommendations made by the Government Accountability Office in its 2010 assessment of the agency's universal service rural health care programs. This is important.

First, the Commission evaluated its Pilot Program and assessed the communications needs of rural health care providers. To this end, the new program encourages applications by consortia that include both urban and rural health care providers, fostering higher capacity services at lower cost.

Second, the Commission coordinated with both the Department of Health and Human Services and Universal Service Administrative Company in crafting the Healthcare Connect Fund. In addition, we set the stage for additional coordination going forward. The ability to draw regularly on experts in program administration, telemedicine, and telehealth is essential.

Third, the Commission has put in place clear performance goals and measures to ensure that this program will do what it is intended to do: increase broadband access for health care providers and support the deployment of health care networks in a cost-effective manner.

This is good governance and good medicine. It has my full support. Thank you to the Wireline Competition Bureau for its efforts.