

FCC FACT SHEET*
Connected Care Pilot Program
Public Notice – WC Docket No. 18-213

Background: Telehealth has assumed an increasingly critical role in health care delivery, enabling patients to access health care services without needing to visit a health care provider’s physical location. Among other benefits, connected care services, delivered via a broadband Internet access connection directly to the patient’s home or mobile location, also can help contain and treat health conditions during public health emergencies, such as the ongoing COVID-19 pandemic. The Commission created the Connected Care Pilot Program (Pilot Program) in April 2020 to evaluate how the Universal Service Fund (USF or Fund) can promote telehealth by supporting the adoption of connected care services among patients and their health care providers. The Commission accepted applications for the Pilot Program from November 6 to December 7, 2020. In January 2021, the Commission announced the selection of an initial set of 14 Pilot Program projects from 23 applications requesting over \$26 million. In June 2021, the Commission announced the selection of a second set of 32 Pilot Program projects from 36 applications requesting over \$31 million. In October 2021, the Commission announced the selection of a third set of 26 Pilot Program projects from 36 applications requesting over \$15 million.

What the Public Notice Would Do:

- Announce the selection of a fourth, and final, set of projects selected for the Pilot Program.¹
- Allow newly-selected applicants to begin their Pilot Program projects.
- Further the goals of the Pilot Program to improve health outcomes through connected care, reduce health care costs for patients, facilities and the health care system, and support the trend towards connected care everywhere.
- The selected projects will address treatments for maternal health/high-risk pregnancy, COVID-19, other infectious diseases, opioid dependency, mental health conditions, and chronic or recurring conditions.
- Waive the deadline for Pilot Program participants selected in January, June, and October 2021 to file their initial request for funding with the Universal Service Administrator and bring this filing deadline into alignment with the selections made in the Public Notice.

* This document is being released as part of a “permit-but-disclose” proceeding. Any presentations or views on the subject expressed to the Commission or its staff, including by email, must be filed in WC Docket No. 18-213, which may be accessed via the Electronic Comment Filing System (<https://www.fcc.gov/ecfs/>). Before filing, participants should familiarize themselves with the Commission’s *ex parte* rules, including the general prohibition on presentations (written and oral) on matters listed on the Sunshine Agenda, which is typically released a week prior to the Commission’s meeting. See 47 CFR § 1.1200 *et seq.*

¹ Information concerning the specific projects selected, as well as the number and dollar value of the selected projects has been redacted from this public draft. Selected projects will be announced upon adoption by the Commission.



PUBLIC NOTICE

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FEDERAL COMMUNICATIONS COMMISSION ANNOUNCES FINAL SET OF PROJECTS SELECTED FOR THE CONNECTED CARE PILOT PROGRAM*

WC Docket No. 18-213

1. In this Public Notice, as part of its ongoing efforts to promote and support connected care technologies and services, the Commission announces a fourth and final set of Pilot projects that have been selected for the Connected Care Pilot Program (Pilot Program). The Pilot Program was established to provide up to \$100 million in Universal Service Funds to help eligible health care providers defray the costs of providing connected care services to their patients and study how the Universal Service Fund (USF) can help support the continuing trend toward connected care services.

2. The projects selected today represent a broad array of geographic areas and a diversity of provider types, involve patients in underserved communities, and will address a range of health conditions. Selected Pilot Program participants each demonstrated sufficient experience or expertise necessary to provide connected care services as proposed in their applications, and in supplemental materials, which should enable them to implement their projects and enable patients to experience the benefit of connected care services. Funding these projects will enable selected Pilot Program participants to treat a large number of low-income and veteran patients with connected care services; to address public health epidemics, opioid dependency, mental health conditions, maternal health/high-risk pregnancy, and chronic or recurring conditions—all conditions that are the focus of the Pilot Program; and to bring connected care services to rural and other underserved areas nationwide. Finally, supporting these projects will also help the Commission ascertain how USF support can enable providers to use connected care to help improve health outcomes, with an emphasis on low-income and veteran patients.

I. BACKGROUND

3. The Pilot Program is a \$100 million three-year program, funding selected Pilot projects' qualifying purchases necessary to provide connected care services, with a particular emphasis on providing connected care services to low-income and veteran patients.¹ The Pilot Program is open to

* This document has been circulated for tentative consideration by the Commission at its March 16, 2022 open meeting. The issues referenced in this document and the Commission's ultimate resolution of those issues remain under consideration and subject to change. This document does not constitute any official action by the Commission. However, the Chairwoman has determined that, in the interest of promoting the public's ability to understand the nature and scope of issues under consideration, the public interest would be served by making this document publicly available. The FCC's *ex parte* rules apply and presentations are subject to "permit-but-disclose" *ex parte* rules. *See, e.g.*, 47 C.F.R. §§ 1.1206, 1.1200(a). Participants in this proceeding should familiarize themselves with the Commission's *ex parte* rules, including the general prohibition on presentations (written and oral) on matters listed on the Sunshine Agenda, which is typically released a week prior to the Commission's meeting. *See* 47 CFR §§ 1.1200(a), 1.1203.

¹ *See Promoting Telehealth for Low-Income Consumers; COVID-19 Telehealth Program*, WC Docket No. 18-213, Report and Order, 35 FCC Rcd 3366, 3369-97, paras. 5, 55 (2020) (*Connected Care Report and Order*).

eligible non-profit or public health care providers that fall within the enumerated categories in section 254(h)(7)(B) of the Telecommunications Act until the three-year duration of the Pilot Program ends.² For purposes of the Pilot Program, eligible health care providers and their patients may be located in rural or non-rural areas, and eligible non-rural health care providers are not required to be part of a majority rural consortium.³

4. Pilot projects selected to participate in the program will receive universal service support to offset 85% of qualifying costs incurred in connection with the Pilot Program. The remaining 15% share of the costs of eligible services must be paid by the selected Pilot project recipients from eligible sources, and participating health care providers must also pay the costs of any ineligible expenses associated with their respective projects.⁴ Health care providers whose Pilot projects are selected to participate in the program also must seek competitive bids for the eligible services for which they intend to seek Pilot Program support.⁵

5. On January 15, 2021, the Commission announced the initial set of Pilot projects, which included 14 applicants requesting \$26.5 million.⁶ On June 17, 2021, the Commission announced a second set, approving 36 separate applications requesting \$31.3 million.⁷ Shortly after that announcement, on June 21, 2021, the Commission released a Report and Order offering additional guidance to Pilot program participants on eligible services, competitive bidding, data reporting, and the invoicing process.⁸ Most recently, on October 27, 2021, the Commission announced a third set of projects, selecting an additional 36 applications, with requests totaling \$15.3 million.⁹

² See *id.* at 3368-69, para. 55 (noting that the categories of eligible nonprofit and public health care providers are: (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; and (8) consortia of health care providers from one of the preceding seven categories). 47 U.S.C. § 254(h)(7)(B). See also *Connected Care Report and Order*, 35 FCC Rcd at 3393, para. 51 (describing the Pilot Program's focus on low-income and veteran patients).

³ See *Connected Care Report and Order*, 35 FCC Rcd at 3384, para. 38.

⁴ See *id.* at 3388-89, para. 43. See also 47 CFR § 54.611(b)(1) ("Eligible sources include the applicant or eligible health care provider participants, state grants, appropriations, or other sources of state funding; federal funding, grants, loans or appropriations except for other federal universal service funding, or other sources of federal funding; Tribal government funding; and other grants, including private grants."); 47 CFR § 54.611(b)(2) ("Ineligible sources include (but are not limited to) in-kind or implied contributions from health care providers; direct payments from service providers, including contractors and consultants to such entities; and for-profit entities."). Additionally, all applicants participating in the Connected Care Pilot Program are subject to the Commission prohibition on gifts from service providers. See *Connected Care Report and Order*, 35 FCC Rcd at 3412, para. 76.

⁵ *Connected Care Report and Order*, 35 FCC Rcd at 3411-13, paras. 75-76. The *Connected Care Report and Order* outlines limited exemptions to the competitive bidding requirements. *Id.* at 3412-13, para. 76.

⁶ *Federal Communications Commission Announces Initial Projects Selected for the Connected Care Pilot Program*, WC Docket No. 18-213, Public Notice, 36 FCC Rcd 593 (2021) (*January Selection Public Notice*).

⁷ *Federal Communications Commission Announces Second Set of Projects Selected for the Connected Care Pilot Program*, WC Docket No. 18-213, Public Notice, FCC 21-71 (June 17, 2021) (*June Selection Public Notice*).

⁸ See *Promoting Telehealth for Low-Income Consumers*, WC Docket No. 18-213, Second Report and Order, FCC 21-74 (rel. June 21, 2021) (*Second Connected Care Report and Order*).

⁹ *Federal Communications Commission Announces Third Set of Projects Selected for the Connected Care Pilot Program*, WC Docket No. 18-213, Public Notice, FCC 21-113 (Oct. 27, 2021) (*October Selection Public Notice*).

II. SELECTED PROJECTS

6. Following further review of the applications on file, the Commission, working with the Wireline Competition Bureau (Bureau) and others,¹⁰ today announces the fourth and final set of Pilot projects, totaling { [REDACTED] }. Selected projects are listed in the Appendix. Combined with selections from the first three rounds, today's selections total approximately { [REDACTED] } million in funding for Pilot projects.¹¹

7. As with the previous sets, projects in this fourth set of selections represent many different geographic areas and provider types, will involve patients in underserved communities and will address a range of health conditions. The Commission designed the Pilot Program with a particular emphasis on providing connected care services to low-income and veteran patients, and these projects will all target one or both of these populations. As such, these projects will advance the goals of the Pilot Program by helping the Commission to determine how universal service support provided to health care providers for the costs associated with providing connected care services can enable them to: (1) improve health outcomes through connected care; (2) reduce health care costs for patients, facilities, and the health care system; and (3) support the trend towards connected care everywhere.¹²

8. Each of the projects in this fourth set of selections will treat a number of patients in the target populations with eligible services. Further, these projects will address a number of critical health conditions such as high-risk pregnancy/maternal health, mental health conditions, opioid dependency, COVID-19, and chronic conditions. Supporting these projects will help us ascertain how USF support can enable providers to use connected care to help improve the health outcome of patients. Likewise, we expect that using connected care to treat these conditions will reduce costs and increase the quality of care. And, because these projects will treat many patients in areas of great need across the nation, selecting these projects will enable the Commission to better understand how USF funding can support the trend towards connected care everywhere.

9. Selected participants announced in this Public Notice must file their initial request for funding to the Universal Service Administrative Company (USAC), the Administrator of the Universal Service programs, within six months of today's selection announcement, using FCC Form 462.¹³ Additionally, we waive the deadline of April 27, 2022 to file an initial FCC Form 462 for those Pilot Program participants selected in January, June, and October 2021 and set a new deadline six months from today's announcement. The Bureau waived the deadline for filing an initial FCC Form 462 for Pilot Program participants selected in January and June 2021 to provide flexibility as they began work on their

¹⁰ *Connected Care Report and Order*, 35 FCC Rcd at 3412, para. 74.

¹¹ This aggregate total reflects today's selections, as well as adjustments for health care providers that have opted to withdraw from the Pilot Program. Before the *October Selection Public Notice* was released, two health care providers withdrew from the Pilot Program. See *October Selection Public Notice*, at 2, n.10. Since its release, two additional health care providers have withdrawn: Grady Health System and Heritage Clinic. See Letter from Ryan Palmer, Chief, Telecommunications Access Policy Division, Wireline Competition Bureau, FCC to Shannon Sale, Chief Strategy Officer, Grady Health System, WC Docket No. 18-213, DA 22-68, <https://ecfsapi.fcc.gov/file/012079959619/DA-22-68A1.pdf> (Jan. 20, 2022); Letter from Ryan Palmer, Chief, Telecommunications Access Policy Division, Wireline Competition Bureau, FCC to Robyn East, Financial Analyst, Heritage Clinic, WC Docket No. 18-213, DA 22-67, <https://ecfsapi.fcc.gov/file/0120089923046/DA-22-67A1.pdf> (Jan. 20, 2022). Grady Health Center was selected in the *January Selection Public Notice* and requested \$635,596. See *January Selection Public Notice*, Appendix at 5-6. Heritage Clinic was selected in the *June Selection Public Notice* and requested \$197,880. See *June Selection Public Notice*, Appendix A at 7.

¹² *Id.* at 3416, para. 83.

¹³ See *Second Connected Care Report and Order* at 9, para. 26.

Pilot projects in the midst of the COVID-19 pandemic.¹⁴ Today, to ensure health care providers that are still addressing the pandemic are able to meet Pilot Program deadlines and to bring all Pilot Program selectees' deadlines into alignment, we waive FCC Form 462 deadline and set a new deadline six months after today's announcement for all Pilot Program participants.¹⁵ In addition, Pilot Program participants must seek bids for the services they intend to procure in accordance with the competitive bidding rules for the Healthcare Connect Fund Program.¹⁶ USAC will review Requests for Funding and make final determinations regarding the eligibility of the services requested before committing funding to each Pilot project.¹⁷

III. ADDITIONAL INFORMATION

10. For further information regarding this Public Notice, please send an email to ConnectedCare@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>.

11. Action by the Commission, [], 2022.

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¹⁴ *Promoting Telehealth for Low-Income Consumers*, WC Docket No. 18-213, Order, DA 22-40 (WCB rel. Jan. 13, 2022).

¹⁵ The Commission rules may be waived for good cause shown. 47 CFR § 1.3. *See also, Northeast Cellular Telephone Co. v. FCC*, 897 F.2d 1164, 1166 (D.C. Cir. 1990) (noting that the Commission may exercise its discretion to waive a rule where the particular facts make strict compliance inconsistent with the public interest); *WAIT Radio v. FCC*, 418 F.2d 1153, 1159 (D.C. Cir. 1969).

¹⁶ *See Connected Care Report and Order*, 35 FCC Rcd at 3411-12, paras. 75-76.

¹⁷ Services and equipment eligible for support 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. *See id.* at 3397-3402, paras. 55-64. End-user devices are not eligible for support in the Pilot Program. *See id.* at 3402-03, para. 65. *See also Wireline Competition Bureau Announces Connected Care Pilot Program Application Filing Window Opening*, WC Docket No. 18-213, Public Notice, 35 FCC Rcd 12751, 12751-52 (WCB 2020) (providing examples of services eligible for support in the Pilot Program).

APPENDIX: Selected Pilot Program Projects

Will Be Released After Adopted By Commission