I am pleased the Commission adopts today’s Order making funding available for the deployment broadband healthcare networks across the country. Through this Order, the Commission dedicates more than 400 million dollars over 3 years to the construction of broadband networks for state-wide and regional healthcare networks reaching over 6,000 facilities in 42 states and 3 U.S. territories, all connected to a national broadband network.

Since becoming Chairman, I have made broadband deployment the Commission’s top priority. Broadband technology is a key driver of economic growth. The ability to share increasing amounts of information at greater and greater speeds, increases productivity, facilitates interstate commerce, and helps drive innovation. But perhaps most important, broadband has the potential to affect almost every aspect of our lives – from where and when we work to how we educate our children. In particular, it is increasingly changing the way healthcare is delivered and received.

Broadband infrastructure for healthcare is particularly critical to those living in rural areas where access to medical services can be limited. I can appreciate the tremendous capability of broadband to improve peoples’ quality of life and healthcare in rural America. Telemedicine programs around the nation enable patients to receive medical care in a wide variety of areas, including pediatrics, dermatology, psychiatry, cardiology, and radiology, without even leaving their homes or communities. This may not seem like a big deal to those of us who need only drive a couple miles to visit our local doctor or dentist. But, it can mean everything to those patients who don’t have that luxury or who don’t have access to healthcare at all.

A dedicated national broadband healthcare network will also facilitate the President’s goal of implementing electronic medical records nationwide. Electronic medical records will improve the healthcare treatment Americans receive by, among other things: ensuring that appropriate medical information is available; reducing medical errors; reducing health care costs, and; improving the coordination among health care facilities.

In order to receive the benefits of telemedicine, electronic health care records, and other healthcare benefits, health providers must have access to underlying broadband infrastructure. Without this underlying infrastructure, efforts to implement these advances in health care cannot succeed.

It is my vision to see every healthcare facility in the nation connected to each other with broadband. This is especially important in rural areas of the nation that may lack the breadth of medical expertise available in urban areas. To make such connectivity a reality, we need to continue to encourage the deployment of broadband facilities that connect networks of rural and non-rural public and not-for-profit healthcare providers.
within a state or region – as well as connect such state-wide or regional healthcare networks to each other across the nation.

As we evaluated the pilot program, it became even more clear to me how well this program aligns with the goals that the Department of Health and Human Services and the health community is working to achieve. That is why it is important that organizations participating in the pilot program use their resources to build networks consistent with the health IT initiatives being promoted by HHS. This includes the implementation of interoperable health IT systems and the use of certified health IT products. Additionally, participants will coordinate with HHS and CDC during public health emergencies, such as pandemics or bioterrorism events.

Through the Commission’s Rural Healthcare Pilot Program, I am hoping to establish the basic building blocks of a digitally connected health system – regional and state-wide broadband networks, all connected to a national backbone. I look forward to learning from this pilot program how we can ensure that all Americans, including those in the most remote areas of the country, receive first-rate medical care.