

**STATEMENT OF
COMMISSIONER JESSICA ROSENWORCEL,
APPROVING IN PART, CONCURRING IN PART**

Re: *Promoting Telehealth for Low-Income Consumers*, WC Docket No. 18-213; *COVID-19 Telehealth Program*, WC Docket No. 20-89.

This is a perilous time. The coronavirus pandemic has crashed our economy, filled our hospitals, emptied our public spaces, and tested our communications like nothing before. The news is dizzying. The numbers are harrowing. This virus does not discriminate and in some way, shape, or form it will change us all.

But if there's a source of optimism in this moment, it comes from watching communities come together to respond to this pandemic. There are heroes all around us. If you want to look for them, start with the doctors, nurses, and people working in our nation's healthcare facilities. They are on the front lines in this battle, and they deserve our thoughts, prayers, and boundless gratitude.

They also deserve every possible resource we can give them in this fight.

Congress saw fit to do just that in the Coronavirus Aid Relief and Economic Security Act, when it charged the Federal Communications Commission with the authority to distribute \$200 million in special funding to healthcare providers using telemedicine to help provide care in this crisis. This effort is smart and comes not a moment too soon. The toll this pandemic is taking on our healthcare system is clear. It also presents new challenges for patients seeking care for other ailments. To the extent that connectivity solutions can provide immediate assistance with remote care and monitoring, we should use them. There is already evidence across the country that this works. Take, for instance, one hospital in Washington state that is already sending some patients home with a thermometer and pulse oximeter so that doctors can remotely monitor their condition. This is smart because it frees up hundreds of beds and reduces exposure for healthcare workers and patients.

With this new \$200 million program authorized by Congress, the FCC has the opportunity to put these kind of tools to use across the country. To this end, in today's decision the FCC commits to fund a range of new healthcare devices and services that depend on connectivity.

We need to get this right. As the text of this decision makes clear, we intend to deploy the \$200 million provided in this program to those areas hardest hit by the coronavirus. I hope we do so in a manner that is fast and fair, without playing favorites. It would be shameful for the FCC to do otherwise—as I fear we are seeing elsewhere in the national response.

In the end, I believe this effort to deploy the new \$200 million in funding provided by Congress is both necessary and timely. It has my full support.

While we launch this immediate effort to counteract the pandemic, the FCC separately kicks off its own three-year program to explore connected care. This \$100 million effort is not undertaken at the explicit direction of Congress. Instead, it is crafted by the FCC alone. It is designed to demonstrate the possibilities of improved care by facilitating direct patient and provider connections through funding the purchase of network equipment and services. It is specifically focused on veterans and low-income individuals.

This is a well-intended effort, but it lacks clear performance metrics. That means it will disburse funds without a system for measuring outcomes or a plan for what comes after this pilot program reaches its end. Moreover, it does not focus on a specific problem in healthcare. So I hope as this effort moves forward, we heed the words of Congressman G.K. Butterfield and 27 other Members of Congress who implored us to focus our attention with this program on the country's maternal mortality crisis. They also urged us to fund such a project in every state. That makes sense because we need to ensure the benefits of this program are available all across the country. Again, it's not time to play favorites. Because the guardrails here are so limited, I can only concur.

Finally, it is important to note that our legal analysis here pursuant to Section 254 of the Communications Act allows for the delivery of services to patients beyond the traditional four corners of the hospital building or healthcare facility. The very same analysis supports delivering connectivity to students struggling at home during this crisis with the Homework Gap. Millions of kids have found that their schools have closed and classes have migrated online. But so many of them lack the internet access they need to continue their education. It's time for the FCC to step up to the plate and use the powers it displays such willingness to use here in service of our nation's students. If we do, we can solve the Homework Gap and make a meaningful difference in the lives of millions of students. We should.