**Statement of**

**COMMISSIONER BRENDAN CARR**

Re: *In the Matter of COVID-19 Telehealth Program*, WC Docket No. 20-89, *Promoting Telehealth for Low Income Americans*, WC Docket No. 18-213; Report and Order and Order on Reconsideration

Over two years ago, we identified a new trend in telehealth. The delivery of high-quality care is no longer limited to the confines of traditional brick-and-mortar facilities. With smartphones and other connected devices, Americans can now access health care services right from their homes or anywhere they have an Internet connection.

It’s the healthcare equivalent of shifting from Blockbuster to Netflix.

Since then, I have been working with my FCC colleagues and stakeholders to support this new trend in telehealth by standing up the FCC’s Connected Care Pilot Program, which selected its initial tranche of awardees back in January. I first saw the promise of these services on a visit to the Mississippi Delta. That’s where I met patients with diabetes that saw their lives improve through the use of connected care offerings. Indeed, the limited trials to date show that connected care technologies consistently reduce the costs of care while improving patient outcomes.

During the coronavirus pandemic, the benefits of these telehealth services and the offering of care at a distance have been brought into even sharper focus. Building off the FCC’s efforts to stand up the Connected Care Pilot Program, the FCC established its COVID-19 Telehealth Program last year just days after Congress appropriated $200 million in round one funding through the CARES Act. In December 2020, Congress recognized the success of the FCC’s efforts and appropriated an additional $250 million in round two funding.

I have had the chance to meet with at least eight of the health care providers that received round one funding and to hear directly from them on visits to six different states. Every one of these awardees credited the FCC’s Telehealth Program with providing the resources necessary for them to meet a massive spike in telehealth visits as COVID-19 spread across the country.

Today, we take a crucial step in the implementation of round two of the Commission’s successful COVID-19 Telehealth Program. The program requirements we adopt today strike the right balance between ensuring a wide and equitable distribution of funding and promoting the widest possible participation of health care providers. I would like to thank my colleagues for agreeing to edits that strengthened the program in this regard, including ensuring that all round one awardees are eligible to submit applications in round two as well.

This additional funding will have a significant and lasting impact across the country. The reliance on telehealth technology will continue to grow, even as the nation starts to see relief from this devastating pandemic. While we are in a much stronger position than we were when the COVID-19 Telehealth Program was initially adopted, we are not out of the woods yet. That is why we must continue to move swiftly on this second round of awards.