

**STATEMENT OF
CHAIRWOMAN JESSICA ROSENWORCEL**

Re: *Promoting Telehealth for Low-Income Consumers*, WC Docket No. 18-213, Fourth Selection Public Notice (March 16, 2022)

Telemedicine has moved into the mainstream. It is now an essential part of healthcare in rural communities, urban communities, and everything in between. These pandemic days have proven it. But even before they began, the Federal Communications Commission started an experiment. We created the Connected Care Pilot Program to explore how the expansion of services like remote patient monitoring, virtual visits, and video counseling were changing the nature of healthcare and system-wide demand for communications.

Today, we announce our final round of selections for the Connected Care Pilot Program. We commit more than \$29 million to 16 entities in 15 states for a range of services. These include Children's Hospital of Denver, which will provide remote patient monitoring to children suffering from medically complex conditions in Colorado and Wyoming; Christiana Care Health Services, which will offer prenatal remote monitoring in Delaware; and the Council of Athabascan Tribal Governments, which will provide video visits and remote treatment in rural Alaska. Since we began awards for this program last year, we have selected a total of 107 pilot projects that serve 40 states and the District of Columbia. That's a lot of support for new ways to connect and improve care.

Although this is the last set of participants we are announcing in this program, it's not the end. That's because we will be studying the award recipients in this program, the connections they used, and how they helped facilitate care. In fact, at the start of this effort, we announced we would produce a report when the three-year pilot program is complete. But I don't think we should wait that long. So that's why I'm announcing a new study today. By this time next year, the FCC staff will develop an interim report about initial lessons learned from this program and the COVID-19 Telehealth Program, which provided nearly \$450 million in support for care during the pandemic. I look forward to this report informing our thinking about telemedicine going forward.

One final note. On a personal level, I'm especially pleased that efforts to address maternal health and high-risk pregnancy are the focus of several of our awardees. We are the only industrialized nation with a rising level of maternal mortality. That's unacceptable in every way. It's a situation that is not helped by the closure of obstetric facilities in so many rural areas. Moreover, for Black women the situation is especially chilling. They have a maternal mortality rate that is nearly three times as high as other women.

My goodness, we need to do better. So I'm glad that in several locations, including Virginia, Hawaii, Delaware, Alaska, and South Carolina, we have been able to use this program to support connected care for pregnancy monitoring and maternal health. I'm also hopeful that Senator Jacky Rosen and Representative G.K. Butterfield's Data Mapping to Save Moms' Lives Act will become law soon. This legislation will incorporate maternal health data in our new broadband maps to help show how access to broadband and maternal health outcomes are related. It will provide more data for researchers and clinicians to help address this crisis.

Finally, I want to thank Commissioner Carr for his early effort to establish this program. I also want to thank the staff who did the work that brought us to where we are today, including Matt Baker, Bryan Boyle, Adam Copeland, Rashann Duvall, Abdel Eqab, Veronica Garcia-Ulloa, Jodie Griffin, Trent Harkrader, Clint Highfill, India McGee, Kris Monteith, Kiara Ortiz, Nick Page, Ryan Palmer, Negheen Sanjar, Joe Schlingbaum, and Hayley Steffen from the Wireline Competition Bureau, and Malena Barzilai and Rick Mallen from the Office of General Counsel.