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FCC Moves Ahead with Connected Care Pilot Program Notice of Inquiry

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With the release of the [full Notice of Inquiry](#) (NOI) proposing that the FCC begin a pilot program for “Connected Care” services, the FCC has adopted an aggressive comment and reply comment schedule. Specifically, the FCC has set the following comment window:

- Comments due: September 10, 2018
- Reply comments due: October 10, 2018

These tight deadlines mean that interested parties have a limited window of time in which to determine whether and how to weigh in on this NOI to assist the FCC in shaping its pilot program.

Companies that may have an interest in the design of this pilot should act quickly to determine their positions on the many issues raised in the NOI and begin crafting their comments. In particular, health care providers or other businesses within the life sciences ecosystem should assess whether they serve veterans or residents of working-class and middle-class rural areas—demographics that the FCC emphasized as core constituencies for the assistance programs contemplated in the NOI.

Similarly, organizations with heavy investment in telehealth and connected care solutions may have substantial interest in helping to develop the record to include information relevant to the use and efficacy of their services.

The Federal Communications Commission (FCC) today [voted to forge ahead](#) on its connected care initiatives by adopting a Notice of Inquiry (NOI) proposing a Connected Care Pilot Program. The program is slated to devote \$100 million to support telehealth for low-income Americans. In a [press release](#) announcing the initiative, the FCC said the program is particularly intended to advance connected care solutions for both rural Americans and veterans.

The action is largely a culmination of FCC Commissioner Brendan Carr’s recent telehealth tour, which took him to meetings with health care providers around the country. Commissioner Carr has emphasized that, while the FCC has long supported broadband buildout to health care providers, the Connected Care Pilot Program would seek to advance

connected solutions on the patient’s end as well.

The FCC’s NOI seeks comment on many important issues for health care providers and consumers in developing cost-effective telehealth solutions. The NOI proposes to allocate \$100 million in Universal Service Fund (USF) support for the initiative, along with targeted assistance supporting telehealth solutions for Medicaid recipients and veterans receiving cost-free medical care. The NOI also describes several proposed oversight measures, including limited-duration programs and savings-verification mechanisms.

An earlier FCC [press release](#) on the subject cited findings of reducing the costs of providing health care using connected care solutions, as well as substantially improved patient outcomes. Commissioner Carr also [released a statement](#) touting significant bipartisan support on Capitol Hill and elsewhere for the FCC’s efforts in promoting telehealth capabilities. The initiative dovetails with Commissioner Carr’s emphasis on 5G buildout, a topic which is frequently the subject of his public speeches and social media postings.

The FCC’s [Fact Sheet](#) on the proposal explains that:

It is critical that all Americans have access to . . . connected care services. However, many low-income consumers, particularly those living in rural areas, lack access to affordable or adequate broadband and might not have the opportunity to benefit from these telehealth services. In this Notice of Inquiry, the FCC would therefore explore launching an experimental “Connected Care Pilot Program” to support the delivery of connected care services to low-income Americans.

The NOI itself observes that the predominant “hub-and-spoke” model of supporting broadband buildout to and among health care providers is no longer the only effective way to facilitate superior patient outcomes and, instead, patients themselves increasingly may need connectivity to support their health care. “By providing care directly to patients in their homes and remotely tracking vital signs and symptoms to detect problems before they arise,” the FCC states, “the new connected health care model is fundamentally changing how patients access treatment.” As a result, the Commission concludes that “universal service support can play a vital role in improving access to cutting-edge digital health resources and bridging the health care divide for low-income patients in particular.”

Among other things, the item will seek public comment

on “how the pilot program can improve health outcomes by focusing on particular demographics or geographical areas. Are there particular populations or demographic groups that are more likely to benefit from increased access to and use of broadband-enabled telehealth services?” It also solicits comments on whether the initiatives should focus on particular health conditions that might be substantially improved by access to connected health. In terms of the operational details, the NOI proposes that “each telehealth pilot project could receive up to \$5 million in funding to support broadband connectivity to low-income patients and increased capabilities for the health care provider.” Further, “we could permit up to 20 health care providers that serve primarily low-income populations to partner with at least one facilities-based broadband service provider” to deploy enhanced health care technologies for these populations.

Finally, the NOI will solicit comment on the types of programs that might be supported by such an initiative. It seeks proposals for specific project models and comments on the potential application process to provide these services, as well as feedback on whether certain categories of proposals should be prioritized over others, and on what bases.

This NOI presents a significant opportunity for health care providers to advance the care of underserved populations by participation in this pilot program; both as it is designed and then as it is rolled out. Initial program participants would likely have the opportunity to support deployment of important technologies and help shape the future of connected care. Further, these projects may have the potential to foster longer-term relationships with telecommunications providers to better serve patients.

Health care providers and telecommunications firms alike should carefully consider how their service models may fit into this pilot program, and may wish to weigh in on this NOI to help frame the conversation in a productive manner. This initiative marks an important new foray into health care by the FCC in a way that seems poised to have wide-reaching ripple effects for many years. Drinker Biddle’s telecommunications team continues to monitor the progress of this initiative, and will update our readers with the comment deadline once one is established.

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