March 22, 2022

Marlene H. Dortch
Secretary
Federal Communications Commission
45 L Street, NE
Washington, DC 20554

Re: Promoting Telehealth in Rural America, WC Docket 17-310
Request for Information Regarding Rural Health Care Historical Funding Demand and Request for Additional Time for Comments

Dear Madam Secretary:

The Schools, Health & Libraries Broadband (SHLB) Coalition strongly supports the Commission’s efforts to consider new measures to enhance the accuracy and efficiency of the Rural Health Care (RHC) Program through a further notice of proposed rulemaking.¹ In order to provide meaningful public comment on questions raised in the Further Notice concerning the RHC funding caps, SHLB respectfully requests the Commission to direct USAC to make public certain non-confidential information regarding RHC Program funding demand.² Because this information is so important to providing meaningful input to the Further Notice, we also ask the Commission extend the comment deadlines to 30 and 60 days after USAC makes this information public.

Among other things, the Further Notice asks critical questions about the sufficiency of the overall RHC funding cap and whether the Commission should “simply eliminate the internal cap on upfront costs and multi-year commitments [in the Healthcare Connect Fund (HCF)]”?³ In order to fully respond to these questions, commenters must have access to the aggregate data showing the trends in demand both for the program as a whole and for those expenses subject to the internal cap. We therefore ask that USAC provide information on the gross demand for RHC funding for each of the last 10 funding years. Gross demand means funding requested at the close of funding window, before USAC has performed any application reviews.⁴ We also request annual data for each of the last 10 years of funds

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² The Commission has previously directed USAC to make such information public. See, e.g., Promoting Telehealth in Rural America, WC Docket No. 17-310, Report and Order, 34 FCC Rcd 7335, 7416-17, n.532 (2019) (2019 RHC R&O) (“We direct the Administrator to file this gross demand estimate 30 days prior to the start of the pertinent funding year.”).


⁴ See 2019 RHC R&O, 34 FCC Rcd at 7416-17, n.532 (“We recognize that the gross demand figures provided will be based on the data available to the Administrator at the close of the application filing windows(s) and that actual demand cannot be ascertained until the Administrator completes a review
committed and funds disbursed, broken out between the Telecom Program and the HCF. To meaningfully consider demand trends, a ten-year period should be sufficient and should not be burdensome on USAC because USAC has been collecting this information already. Indeed, the Commission directed USAC in 2012 to “periodically inform the public, through its web site, of the total dollar amounts that have been requested by health care providers (HCPs), as well as the total dollar amounts that have been actually committed by USAC for the funding year.” For the last several years, this information has generally not been released to the public.

We ask USAC to provide similar historical data for the HCF internal cap: gross demand, actual commitments, and funds disbursed, for equipment, multi-year funding requests, and upfront costs, respectively. To address whether costs from self-constructed networks are placing pressure on the HCF internal cap, we ask that USAC separate upfront costs between HCP self-construction and other upfront costs (e.g., service provider special construction costs).

We also ask that USAC and the Commission respond to concerns SHLB raised previously about whether USAC’s data overstates HCF funding going to non-rural HCPs. Specifically, when USAC reports consortia network costs that are shared by rural and non-rural consortium participants, are those costs being classified as 100% non-rural? As the Commission continues its efforts to ensure the RHC program primarily supports rural HCPs, it is critically important that the amount of funding actually going to non-rural areas not be mis-stated.

Finally, we respectfully request the Commission extend the period for comments until 30 and 60 days after this information is made publicly available. The Further Notice calls for substantial review of the RHC program and the availability of this information will be extremely important so that commenters can frame their requests based on the best possible data. In the alternative, if the Commission decides not to release this information, we respectfully request that the comment deadline be extended to 60 days and 90 days after publication in the federal register. We note that the Commission has already extended the application deadline for RHC applicants by two months until June 1, 2022, because of the strain on RHC applicants due to the COVID pandemic and resulting supply chain delays. For the same reason, extending the comment period would give applicants necessary

of the funding requests to identify filing errors that have significantly lowered demand estimates in the past (e.g., typographical errors, duplicate filings). We . . . direct the Administrator to provide that information.


6 See id. at 16700, ¶ 47 (“We also impose an annual cap of $150 million that will apply, in part, to the funds available for HCP self-construction, to ensure that ample funding will remain available for HCPs choosing to obtain services”)

7 See Schools, Health and Libraries Broadband Coalition Petition for Reconsideration and Clarification, WC Docket No. 17-310, at 4-7 (filed Nov. 12, 2019).

8 The Commission has itself acknowledged this concern in the past. See HCF Order, 27 FCC Rcd at 16704, n.148 (“funding attributed to non-rural locations likely is overstated because shared equipment and services often are attributed to non-rural locations even though they are used by all the network sites.”).
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breathing room to prepare their applications for submission while also preparing their comments on this enormously significant proceeding.

Respectfully submitted,

[Signature]

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