COVID-19 Telehealth Program │ Connected Care Pilot Program

April 21, 2020
The AMA would like to alert you to a recent funding opportunity from The Federal Communications Commission (FCC) related to its COVID-19 Telehealth and Connected Care Pilot Programs.

About the COVID-19 Telehealth Program: This $200 million program supports health care providers responding to the COVID-19 pandemic by providing eligible health care providers support to purchase telecommunications services, information services, and devices necessary to enable the provision of telemedicine services during this emergency period. It will provide selected applicants with full funding for these eligible telehealth services and devices. In order to receive funding, eligible health care providers must submit an application to the Commission for this program, and the Commission will award funds to selected applicants on a rolling basis until the funds are exhausted or until the current pandemic has ended.

About the Connected Care Pilot Program: This three-year Pilot Program will provide universal service support to help defray health care providers' qualifying costs of providing connected care services. It will target funding to eligible health care providers, with a primary focus on pilot projects that primarily benefit low-income or veteran patients. The Pilot Program will make available up to $100 million, which is separate from the budgets of the existing Universal Service Fund (USF) programs and the COVID-19 Telehealth Program. The Pilot Program will provide funding for selected pilot projects to cover 85 percent of the eligible costs of broadband connectivity, network equipment, and information services necessary to provide connected care services to the intended patient population. In order to participate, eligible health care providers must submit an application to the Commission for the Pilot Program, and the Commission will announce the selected pilot projects.

Below is an overview of both programs and supportive documents to help you gage your eligibility. These resources were developed by the Connected Health Initiative, which the AMA is a member of. It should be noted that only select "health care providers" are eligible for funding. **In this context, the applicable statute defines a health care provider to mean:**

- Post-secondary educational institutions offering health care instruction, teaching hospitals and medical schools;
- Community health centers or health centers providing health care to migrants;
- Local health departments or agencies;
- Community mental health centers;
- Not-for-profit hospitals;
- Rural health clinics;
- Skilled nursing facilities (as defined in [section 395i–3(a) of title 42](#)); and
- Consortia of [health care providers](#) consisting of one or more entities described in clauses (i) through (vii).

Below is additional information from the FCC's recent announcement.

COVID-19 Telehealth Program: Today we establish a $200 million emergency COVID-19 Telehealth Program to implement the CARES Act and ensure access to connected care services and devices in response to the ongoing COVID-19 pandemic and surge in demand for connected care services. The support provided through the COVID-19 Telehealth Program will help eligible health care providers purchase telecommunications services, information services, and devices necessary to provide critical connected care services, whether for treatment of coronavirus or other health conditions during the coronavirus pandemic. This COVID-19 Telehealth Program is funded through a $200 million appropriation signed into law as part of the CARES Act, and this program will not rely on USF support.

We will begin accepting applications for the COVID-19 Telehealth Program immediately after publication of this Report and Order and notice of the Office of Management and Budget's (OMB) approval of the COVID-19 Telehealth Program information collection requirements in the Federal Register. We direct the Wireline Competition Bureau (WCB or Bureau) to review the COVID-19 Telehealth Program applications, select participants, and make funding awards on a rolling basis until the funding is exhausted or until the current pandemic has ended, consistent with the criteria outlined in this Report and Order. We also direct the Bureau to announce the selected applicants and funding awards for the COVID-19 Telehealth Program applicants. The deadline for filing applications for the Pilot Program will be 45 days from the effective date of the Pilot Program rules or 120 days from the release date of this Report and Order, whichever is later. We will review the applications and our pilot project selections will be guided by the criteria outlined in this Report and Order and our strong interest in targeting limited Pilot Program resources towards patient populations, health conditions, and geographic areas where we believe USF funding for connected care services is most needed. We will announce the selected pilot projects and our rationale for selecting specific pilot projects.

·   The FCC will limit the program to nonprofit and public eligible health care providers. It is in the public interest to support connected care services being provided to patients by eligible health care providers even when provided from a temporary or mobile location that is operated by the eligible health care provider.
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·   Interested health care providers that do not already have an eligibility determination can obtain one by filing an FCC Form 460 with the Universal Service Administrative Company (USAC). For purposes of the COVID-19 Telehealth Program, we establish a separate, streamlined application process in order to more expeditiously address the needs of eligible health care providers impacted by the coronavirus pandemic. Specifically, under the COVID-19 Telehealth Program, eligible health care providers must submit an application to the Bureau with sufficient information that will allow the Bureau to make selections and funding amount determinations. COVID-19 Telehealth Program applicants will also be required, at the time of submission of their application, to certify, among other things, that they will comply with the Health Insurance Portability and Accountability Act (HIPAA) and other applicable privacy and reimbursement laws and regulations, and applicable medical licensing laws and regulations, as waived or modified in connection with the COVID-19 pandemic, as well as, all applicable COVID-19 Telehealth Program requirements and procedures, including the requirement to retain records to demonstrate compliance with the COVID-19 Telehealth Program requirements and procedures for three years following the last date of service, subject to audit.
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·   WCB, in consultation with the FCC's Connect2Health Task Force, will evaluate the COVID-19 Telehealth Program applications, and will select participants based on applicants' responses to the criteria listed above. Our goal is to select applications that target areas that have been hardest hit by COVID-19 and where the support will have the most impact on addressing the health care needs. As indicated above, the funds for the COVID-19 Telehealth Program will be awarded on a rolling basis until they are exhausted or until the current pandemic ends.

COVID-19 Telehealth Program

- The Federal Communications Commission (FCC) is acting in kind with other agencies such as the Department of Health and Human Services' (HHS) Center for Medicare and Medicaid Services (CMS), Office of Civil Rights (OCR), and Health Resources and Service Administration (HRSA) to provide relief to the COVID-19 pandemic.
- Full funding for eligible services and devices!
- $200 million dollars for total funding and **no more than $1 million per single applicant**.
- Healthcare Provider Application
    - Applicants that have received support may request additional support.
- ***Wireline Bureau will review applications in consultation with the Connect2Health Task Force.***
- ***Applications may be submitted after OMB Approval of the COVID-19 Telehealth Program.***
- Interested participants may apply to the COVID-19 Telehealth Program and the Connected Care Pilot, but may not request funding for the same services at the same time.

Criteria

1. Strong interest in targeting areas that have been hit hardest by COVID-19. (e.g. New York)
2. Applicants should note within application (if applicable)
    a. Low income population
    b. Healthcare provider shortage
    c. Rural hospital closures
    d. Limited Broadband/Internet Access
3. Program not limited to only treating COVID-19, it can also be used to "prevent, prepare for, and respond to COVID-19." **The Program will include End-User Devices!**
4. **Eligible Healthcare Provider**: Nonprofit and public eligible healthcare providers are (1) post-secondary educational institutions offering healthcare instruction, teaching hospitals, and medical schools; (2) community health centers or health centers providing healthcare to migrants; (3) local health departments or agencies; (4) community mental health centers; (5) not-for-profit hospitals; (6) rural health clinics; (7) skilled nursing facilities; or (8) consortia of healthcare providers consisting of one or more entities falling into the first seven categories.
    a. *Fill out an FCC Form 460*!
    b. *USAC will review eligible healthcare provider eligibility forms*
5. **Connected Care Services**: A subset of telehealth that "uses broadband internet access service-enabled technologies to deliver remote medical, diagnostic, patient-centered, and treatment related services directly to patients outside of traditional brick and mortar medical facilities - including specifically to patients at their mobile location or residence." (¶14)
    a. Examples: Services include, but are not limited to, remote patient monitoring, patient health education, store and forward services (e.g. transfer of patient images and data interpreted by a physician, video consultations and visits). (¶ 16)
    b. This program will only cover devices that are connected, but not unconnected devices that a patient uses at home to share their results with a medical professional. (¶16)
6. Application must include:

1. Proof that the applicant is an ***Eligible Healthcare Provider***. (USAC will determine eligibility *via* [FCC Form 460](#)).
2. <u>Details of the Application</u>:
   a. Names, addresses, county, and health care provider numbers (if available), (¶52) for health care providers seeking funding through the COVID-19 Telehealth Program application and the lead health care provider for applications involving multiple health care providers.
   b. Contact information for the individual that will be responsible for the application (telephone number, mailing address, and email address).
   c. Description of the anticipated connected care services to be provided, the conditions to be treated, and the goals and objectives. This should include a brief description of how COVID-19 has impacted your area, your patient population, and the approximate number of patients that could be treated by the health care provider's connected care services during the COVID-19 pandemic. If you intend to use the COVID-19 Telehealth Program funding to treat patients without COVID-19, describe how this would free up your resources that will be used to treat COVID-19 and/or how this would otherwise prevent, prepare for, or respond to the disease by, for example, facilitating social distancing.
   d. Description of the estimated number of patients to be treated.
   e. Description of the telecommunications services, information services, or "devices necessary to enable the provision of telehealth services" requested, the total amount of funding requested, as well as, the total monthly amount of funding requested for each eligible item. If requesting funding for devices, description of all types of devices for which funding is requested, how the devices are integral to patient care, and whether the devices are for patient use or for the health care provider's use. As noted above, monitoring devices (e.g., pulse-ox, BP monitoring devices) will only be funded if they are themselves connected.
   f. Supporting documentation for the costs indicated in their application, such as a vendor or service provider quote, invoice or similar information.
   g. A timeline for deployment of the proposed service(s) and a summary of the factors the applicant intends to track that can help measure the real impact supported services and devices.
   h. *Certification*: Applicant must comply with the Health Insurance Portability and Accountability Act (HIPAA) and other applicable privacy and reimbursement laws and regulations, and applicable medical licensing laws and regulations, as waived or modified in connection with the COVID-19 pandemic, as well as, all applicable COVID-19 Telehealth Program requirements and procedures, including the requirement to retain records to demonstrate compliance with the COVID-19 Telehealth Program requirements and procedures for three years following the last date of service, subject to audit. This document retention period appropriately balances the interests of program integrity while minimizing administrative burdens on health care providers during this emergency. Health care providers that participate in the COVID-19 Telehealth Program must also comply with all applicable federal and state laws, including the False Claims Act, the Anti-Kickback Statute, and the Civil Monetary Penalties Law, as waived or modified in connection with the COVID-19 pandemic. Further, applicants will also be required to certify that they are not already receiving or expecting to receive other federal or state funding for the exact same services or devices for which they are requesting support under the COVID-19 Telehealth Program.

7. Applications for the COVID-19 Telehealth Program will be submitted through the **FCC's ECFS under WC Docket No. 20-89** and entitled *COVID-19 Telehealth Program Application for Funding*.
8. Applicants will be selected for funding on a rolling basis until the COVID-19 Telehealth Program funds have been depleted.

To submit an application online, click HERE.

FCC Connected Care Pilot

General Facts
- The Connected Care Pilot is a **three-year program** (with a six-month startup and windup period) that provides **$100 million dollars** to eligible healthcare providers providing connected care services, with the primary focus of the Pilot being services provided to low-income or veteran patients.
- The Pilot Program will provide selected projects funding to cover 85 percent of eligible costs of *broadband connectivity, network equipment, and information services* necessary to provide connected care services to the intended patient population. This does not include end-user devices or medical equipment. However, see below for more details about what is considered an "information service."
- There is not a set number of projects that the FCC will fund.

Goals of the Pilot
- Helping healthcare providers improve patient outcomes *and* reduce costs.
- The Pilot is intended to generate *meaningful measurable data* about the benefits of connected care, and how and whether the Universal Service Fund (USF) support could be used more broadly in the future to enable the adoption of connected care services among patients and their healthcare providers.

Who is Eligible for the Connected Care Pilot Program?
- The Pilot Program is available to all nonprofit and public healthcare providers (eligible healthcare providers under § 254(h)(7)(B)) regardless of rural or non-rural geography.
  - ***Preference may be given to eligible healthcare providers that have either (1) experience with providing telehealth or connected care services to patients (e.g., remote patient monitoring, store-and-forward imaging, or video conferencing) beyond using electronic health records, or (2) a partnership with another health care provider, government agency, or designated telehealth resource center with such experience that will work with the health care provider to implement its proposed pilot.*** (¶50)

What Types of Projects is the FCC interested in funding?
- An applicant using the funds to treat a "medical condition." (HHS definition of a medical condition (*see below*))
- Special Interest In:
  - Public Health Epidemics
  - Opioid Dependency
  - Mental Health Conditions
  - High-Risk Pregnancy
  - Chronic or Recurring Conditions (requiring several months of treatment) (e.g. diabetes, cancer, kidney disease, heart disease and stroke recovery)

What Services Will the Connected Care Pilot Program Cover?
- **Broadband Services**
  - Eligible healthcare providers participating in the Pilot Program can receive support for qualifying broadband service from any broadband provider.

- - The broadband provider does not need be a designated eligible telecommunications carrier (ETC) under the Universal Service Fund statutory language.
    - o Patient Broadband Internet Access Service: Eligible healthcare providers may purchase mobile or fixed broadband internet access service for participating patients to receive connected care services who do not already have broadband internet access or who lack sufficient broadband Internet access to participate in the pilot. (¶ 57)
      - Eligible healthcare providers MUST include two things in their application: (1) The estimated number of patient broadband connections that healthcare providers intend to purchase for purposes of connected care services; and (2) how the applicant intends to assess its patient lack of or insufficient broadband Internet access.
    - o Healthcare Provider Broadband Data Connections: The Connected Care Pilot will also provide support for eligible healthcare providers broadband data connections for the purposes of providing connected care services to its patients.
      - Eligible healthcare providers may not request or receive funding for broadband data connections through both the Connected Care Pilot and the Healthcare Connect Fund.
- **==***Other Information Services==*****
  - o The FCC does not provide a specific list of information service examples that will be funded through the Pilot Program, but will perform a case-by-case evaluation of the information service.
    - While the FCC did not provide a list of information services for the Connected Care Pilot, it did make references to remote patient monitoring, store and forward, and turnkey solutions (e.g. software solutions). (fn 150)
- **Network Equipment**
  - o The Connected Care Pilot will fund network equipment (e.g. routers and servers) necessary to manage, control, or maintain supported broadband services for connected care services provided for in the Pilot Project application.
  - o Cannot apply for the same network equipment under both the Pilot and the Healthcare Connect Fund.
- NOT End-User Devices, Medical Equipment, Administrative Expenses or Other Miscellaneous Expenses.

Important Definitions

- **Eligible Healthcare Provider**: Nonprofit and public eligible healthcare providers are (1) post-secondary educational institutions offering healthcare instruction, teaching hospitals, and medical schools; (2) community health centers or health centers providing healthcare to migrants; (3) local health departments or agencies; (4) community mental health centers; (5) not-for-profit hospitals; (6) rural health clinics; (7) skilled nursing facilities; or (8) consortia of healthcare providers consisting of one or more entities falling into the first seven categories.
  - a. *Fill out an FCC Form 460!*
  - b. *USAC will review eligible healthcare provider eligibility forms.*
- **Connected Care Services**: A subset of telehealth (see below) that "uses broadband Internet access service-enabled technologies to deliver remote medical, diagnostic, patient-centered, and treatment related services directly to patients outside of traditional brick and mortar medical facilities - including specifically to patients at their mobile location or residence." (¶ 39)
  - o **Telehealth**: For purposes of the Pilot Program, *we also define "telehealth" as the broad range of health care-related* applications that depend upon *broadband connectivity, including telemedicine*; exchange of electronic health records; collection of data through Health Information Exchanges and other

entities; exchange of large image files (e.g., X-ray, MRIs, and CAT scans); and the use of real-time and delayed video conferencing for a wide range of telemedicine, consultation, training, and other health care purposes.
- o Connected Care can be provided by doctors, nurses or other healthcare professionals.
- **Medical Condition**: Any condition whether medical or mental, including but not limited to any condition resulting from illness, injury (whether or not the injury is accidental), pregnancy or congenital malformation.
- **Low Income Patient**: Healthcare providers may determine a low-income patient if (1) patient is eligible for Medicaid or (2) the patient's household income is at or below 135 percent of HHS' Federal Poverty Guidelines. (¶52)
- **Veteran**: Healthcare providers may determine wither a patient qualifies as a veteran based on if the patient qualifies for healthcare through the VA. (¶53)

Application Process
1. Become an Eligible Healthcare Provider – Submit an eligibility and registration form (Form 460) to USAC to be deemed an eligible healthcare provider.
2. Submit additional documentation to USAC to verify eligibility to participate in the Connected Care Pilot.
3. Submit Application to the FCC via their electronic comment filing system (ECFS) under **WC Docket No. 18-213**. The application itself must also reference WC Docket No. 18-213. All filings must be addressed to the Commission's Secretary, Office of the Secretary, Federal Communications Commission. Applicants must also send a courtesy copy of their application via email to ConnCarePltProg@fcc.gov.
   - The FCC will provide a "Connected Care Pilot Program Application."
   - Due Date:
     - o Applications will be due 45 days from the effective date of the Pilot Program Rules or
     - o 120 days from the release date of this Report and Order *(adopted March 31, 2020, and released April 2, 2020),* whichever comes later.
     - o ****CHI will update once we know more information. ****
4. The Wireline Bureau in consultation with the Connect2Health Task Force will evaluate the projects based on the criteria below.
5. Once selected additional information will be provided with next steps for funding, invoicing, and specific data to be collected, reported, and the reporting format that must be used.
6. Data reporting will occur at the end of each Connected Care Pilot Year before additional funding is dispersed.

Application Criteria
1. Description of Pilot Project Proposal.
   a. Clear Research and Evaluation strategy for meeting the healthcare needs of participating patients through the use of connected care services and how proposed Pilot Project will accomplish these objectives.
   b. Demonstrate how these connected care services will impact low income or veteran individuals.
2. **See Paragraph 68** from order (pages 40-43) about minimum details that must also be included in the application (e.g. name, address, manager of project, area where project will have an impact, etc.)
3. *Certification*: Applicant must comply with the Health Insurance Portability and Accountability Act (HIPAA) and other applicable privacy and reimbursement laws and regulations, and applicable medical licensing laws and regulations, as well as, all applicable Pilot Program requirements and procedures, including the requirement to retain records to demonstrate compliance with the Pilot Program requirements and procedures for five years, subject to audit. Healthcare providers that participate in the Connected Care Pilot must also comply with all applicable federal and state laws,

including the False Claims Act, the Anti-Kickback Statute and the Civil Monetary Penalties Law. We understand that health care providers must routinely navigate these laws in other contexts. Thus, health care providers that are interested in applying for the Pilot Program should speak to their compliance experts prior to applying to participate in the Pilot Program. Further, applicants will also be required to certify that they are not already receiving or expecting to receive other federal funding for the exact same services eligible for support under the Pilot Program. We recognize that we may need to waive certain of the RHC Program rules that we extend to the Pilot Program in order to implement the Pilot Program, and we therefore also request that applicants identify in their application, as applicable, any Commission rules that we extend to the Pilot Program in this Report and Order from which they may need a waiver in order to participate in the Pilot Program, if selected.