

February 4, 2022

The Honorable Alan Davidson
Assistant Secretary of Commerce for Communications and Information and Administrator
National Telecommunications and Information Administration
Department of Commerce
1401 Constitution Ave. NW
Washington, District of Columbia 20230

RE: National Telecommunications and Information Administration's Funding of Broadband Infrastructure Programs per the Infrastructure Investment and Jobs Act of 2021 (Docket No. NTIA-2021-0002)

Dear Assistant Secretary Davidson:

We, the undersigned, are a diverse—and growing—coalition of stakeholders spanning the healthcare and technology sectors. We support the use of connected health technologies to improve patient outcomes and reduce healthcare costs and are committed to advancing an equitable healthcare ecosystem. We are pleased to share our consensus views with the National Telecommunications and Information Administration (NTIA) regarding its implementation of the Infrastructure Investment and Jobs Act (the Act), including the Broadband Equity, Access and Deployment program, the Middle-Mile Broadband Infrastructure Program, and the Digital Equity Planning Grant Program.¹

With approximately 133 million Americans suffering from some form of chronic illness, our healthcare system requires a shift to support continuous contact with patients in underserved communities across rural, suburban, and urban geographies. The COVID-19 pandemic highlighted, and in some cases exacerbated, existing inequities and disparities across American society, and in healthcare specifically.² Based on data from 14 participating states, the Centers for Disease Control and Prevention reported that age-adjusted COVID-19–associated mortality among American Indian and Alaska Native persons was 1.8 times that among non-Hispanic Whites.³ Digital health tools, increasingly powered by artificial/augmented intelligence (AI), leverage patient-generated health data (PGHD) and social determinants of health (SDOH), and include a wide range of digital health products, including mobile medical solutions, digitally enhanced screening and treatment technologies, clinical decision support, and cloud-based patient portals. A constantly growing body of evidence demonstrates that digital health technologies improve patient outcomes, reduce hospitalizations, avoid complications, improve patient engagement, and reduce costs. Connected health technologies offer the ability to bridge the digital divide and provide needed disease prevention and treatment to America's most vulnerable citizens – as long as

¹ *Infrastructure Investment and Jobs Act Implementation*, 87 Fed Reg 1123 (Jan. 10, 2022).

² <https://www.govtech.com/network/pandemic-worsens-internet-disparity-in-alabama-black-belt.html>.

³ <https://www.cdc.gov/mmwr/volumes/69/wr/mm6949a3.htm>.

there is access to a robust broadband network to facilitate patients and care teams sharing health data from outside the hospital or doctor's office.

Given the critical role broadband infrastructure plays in supporting countless digital health uses, we support NTIA's efforts to design and implement various broadband infrastructure programs created in the Act. NTIA's grant programs can, and should, provide advanced broadband capabilities to American consumers and businesses. Access is especially important in the many diverse underserved communities across the country that are increasingly stranded on the wrong side of a widening digital divide amid the COVID-19 pandemic. Given the integral role of digital health in improving healthcare and in advancing access, adoption, affordability, digital equity, and digital inclusion for underserved communities, we offer the following recommendations to NTIA:

- **NTIA Should Consider as Diverse a Set of Stakeholders and Viewpoints as Possible.** We applaud NTIA's collaborative approach initiated through this call for written views, various listening sessions, and efforts to work with other federal agencies to ensure that new grants authorized by the Act build on lessons learned to effectively deploy broadband to underserved communities. We encourage NTIA to work with as diverse a set of stakeholders, including those at the frontlines providing critical health services to America's most vulnerable populations and communities, to shape grant program requirements.
- **NTIA Should Take a Technology-Neutral Approach in Program Requirements for Deploying Resources to Diverse Communities with Unique Needs.** Because no two underserved communities are identical, grantees will need flexibility to tailor their efforts. NTIA's use of outcome-based and technology/modality neutral requirements will ensure that program implementations are responsive to local-level needs while meeting NTIA's goals. For some deployments, laying fiber may be the most effective path to success, while in others (such as where macro sites alone will not be sufficient to manage traffic congestion) small cell deployment can add density to a network to help manage increasing traffic.
- **NTIA Should Align with Other Agencies' Existing Federal Insight, Approaches, and Expertise.** We urge NTIA to align its definitions and requirements with existing federal approaches where possible (*e.g.*, we support NTIA's reliance on the Federal Communications Commission's definition of broadband) to leverage NTIA's and other agencies' expertise and to avoid confusion that can be caused by conflicting federal definitions and approaches. Further, health sector agencies can offer immense help to NTIA in addressing underserved populations and key healthcare use cases.
- **NTIA, States, and Territories, Must Consider a Broad Range of Health Indicators in Grant Awards and Administration.** Access to technology, access to broadband, and digital literacy are SDOH, and NTIA determinations of need in evaluating and overseeing grant applications should ultimately lead to connecting the most underserved Americans as possible and enabling the use of a suite of digital health tools and services to address healthcare disparities. More accurate and granular mapping, developed in collaboration with the Federal Communications Commission (including its Connect2Health effort⁴), supplemented by new insights provided in SDOH data sets, can greatly assist in identifying unconnected and underserved communities for this purpose.

⁴ <https://www.fcc.gov/about-fcc/fcc-initiatives/connect2healthfcc>.

- **NTIA Should Give Flexibility to States and Territories to Meet the Needs of Their Underserved Communities.** America faces a growing digital divide across a wide range of populations, in both urban, suburban, and rural areas of the country, and all should benefit from the grants authorized by the Act. States and territories should also use competitive bidding processes to minimize costs when determining funding awards and amounts. Within the parameters set by NTIA, states and territories will need the ability to flexibly shape and manage grant programs to best meet the unique and evolving needs of their populations.

While providing this flexibility, NTIA can also assist states and territories through the development of guidance and key use cases (which should include connected healthcare scenarios).

- **NTIA Should Ensure Transparency and Oversight while Minimizing Compliance Burdens.** NTIA should draw on its extensive experience in administering the Broadband Infrastructure Program (BIP) and Broadband Technology Opportunities Program (BTOP) to ensure transparency and oversight while avoiding overburdening grantees with reporting obligations. Further, states and territories should be encouraged to develop grant administration plans that prioritize transparency, build on existing resources at all levels, and that consistently consult with their underserved communities including health departments, medical providers, and community health organizations.

We commit to continued collaboration with NTIA to realize congressional goals of the Act and to enhance access to healthcare for America’s unserved and underserved populations.

Sincerely,

AHIP

American Academy of Neurology

American Association for Respiratory Care

American Board of Quality Assurance and Utilization Physicians (ABQAURP)

America's Essential Hospitals

Anelto

Anthem

ATA Action

CEO Action for Racial Equity

College of Healthcare Information Management Executives (CHIME)

Connected Health Initiative

Diasyst

EmPowerYu

GlobalForce Tech Consulting

Health Recovery Solutions

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