The Alliance for Connected Care appreciates the opportunity to submit testimony for this hearing examining the importance of access to telehealth services, and the role that broadband plays in the public health response.

The Alliance for Connected Care (the Alliance) is an advocacy organization dedicated to facilitating the delivery of high-quality care using connected care technology. Our members are leading health care and technology companies from across the health care spectrum, representing insurers, health systems, and technology innovators. Our Advisory Board includes more than 30 patient and provider groups, including many types of clinician specialty and patient advocacy groups who wish to better utilize the opportunities created by telehealth.

We believe telehealth has the potential to broaden access to care and improve patient engagement, and we agree it demands thoughtful consideration to ensure all Americans are provided equal and equitable access. As highlighted by the COVID-19 pandemic, access and affordability of broadband is an important aspect to accessing health care services, including telehealth services.

Broadband is essential to expanding access to telehealth. Without it, we will never reach populations who need access to behavioral health, primary care, specialty consults and more. We must invest in broadband alongside changing coverage policy for telehealth.

The inequities in broadband access across geography, race, and income are clear. According to a 2021 Pew Research Center survey, home broadband use varies significantly across demographic groups, including race and income levels. Nearly all Americans with annual household incomes above $75,000 reported having a broadband connection at home, compared to just half of households making less than $30,000 a year. Similar stark contrasts can be seen between races and geography, with 80 percent of Whites having access, compared to just 70 percent and 65 percent of Blacks and Hispanics, respectively. Additionally, more than 35 million rural Americans lack access to broadband.

In January, the Federal Communications Commission (FCC) released their fourteenth annual Broadband Deployment Report finding progress in closing the digital divide. For example, the gap between urban and rural Americans with access to high-speed broadband service has been nearly halved, falling from 30 percentage points at the end of 2016 to just 16 points at the end of 2019. Despite significant progress being made, tens of millions of Americans do not have access to broadband. Estimates range from roughly 14.5 million to 42 million Americans in total, with the lowest coverage levels experienced in Tribal and rural areas.
Below we summarize recommendations designed to support and maintain both patient and provider availability and affordability of broadband:

- Congress should invest in efforts that support broadband affordability for patients and providers.
- Congress must continue to coordinate with other federal agencies to ensure improvements are being made to our taxpayer-funded programs, and that all patients deserving of these benefits are being afforded access.
- Congress must make permanent the Emergency Broadband Benefit program.
- Congress must continue to address anticompetitive behaviors in all industries, and explore solutions that support patients.
- Congress should invest in efforts that support the deployment of broadband for all Americans, including those living in rural areas, on Tribal lands and to our nation’s health care providers and centers.
- Congress must maintain access to audio-only services for patients who, in the interim, continue to lack broadband access and/or affordability.
- Congress should pass the Data Mapping to Save Moms’ Live Act (S. 198/H.R. 1218) in the 2022 Consolidated Appropriations package.
- Congress should consider addressing antiquated licensure requirements that impeded access to care to address gaps in the delivery system and provide high-value care directly to consumers in rural or underserved areas.

1. Congress should invest in efforts that support broadband affordability and use for patients and providers.

For digital health technologies to truly transform the way Americans obtain and receive access to health care services, we must address affordability and usability of the technology supporting that access.

Telehealth has been a critical lifeline during the pandemic and public health emergency flexibilities have resulted in drastic increases in telemedicine utilization, introducing millions of Americans to a new way to access health care. Data from the Centers for Disease Control and Prevention (CDC) finds that during the period of June 26 – November 6, 2020, 30.2 percent of weekly health center visits occurred via telehealth. In addition, preliminary data from the Centers for Medicare & Medicaid Services (CMS) show that between mid-March and mid-October 2020, over 24.5 million out of 63 million beneficiaries and enrollees received a Medicare telemedicine service. Finally, an HHS Office of the Assistant Secretary for Planning and Evaluation (ASPE) Medicare fee-for-service (FFS) telehealth report found that from mid-March through early July, more than 10.1 million traditional Medicare beneficiaries used telehealth, including nearly 50 percent of primary care visits conducted via telehealth in April versus less than 1 percent before the COVID-19 pandemic.
Despite all of these advancements in telehealth usage, many households lack the ability to benefit from these digital services. This is partly due to the United States having one of the highest broadband prices among OECD countries.

Congress must continue to coordinate with other federal agencies to ensure improvements are being made to our taxpayer-funded programs, and that all patients deserving of these benefits are being afforded access.

- FCC’s Lifeline program helps low-income consumers afford the high cost of telecommunications services, including phone and broadband. The program has helped millions of Americans connect with the internet. However, as the COVID-19 pandemic took full force and much of our in-person services were shutdown, challenges and shortcomings of the program came to light.

- In April of 2020, Senators Klobuchar (D-MN) and Durbin (D-IL) and Representatives Fudge (D-OH) and Eshoo (D-CA), along with 140 colleagues in both the House and Senate, urged the FCC Chair at the time to ensure that the millions of Americans eligible for the Lifeline Program are informed of their eligibility status. “The Lifeline program provides critical connectivity for those who need it most. Informing consumers about their Lifeline eligibility is a necessary step to help close the digital divide and is clearly something we should continue doing even after the pandemic ends,” the members wrote.

- Congress must continue to coordinate with other federal agencies to ensure improvements are being made to our taxpayer-funded programs, and that all patients deserving of these benefits are being afforded access.

Congress must make permanent the Emergency Broadband Benefit program.

- The Alliance for Connected Care supported efforts to establish the Emergency Broadband Benefit, a program that bolsters access to broadband internet services for low-income and minority individuals. Passed in the Consolidated Appropriations Act of 2021, Congress appropriated $3.2 billion to the FCC to help low-income households pay for broadband service and connected internet devices.

- The Emergency Broadband Benefit program has proven to be a successful entry point for tackling some of the inequities that exist in access to broadband and internet services. In September, FCC Acting Chair Rosenworcel announced that the FCC has enrolled over six million low-income households into the country’s largest broadband affordability program. Additionally, nearly 1,200 broadband providers have agreed to take part in the program.

- Congress must make permanent the Emergency Broadband Benefit program. Without a permanent, government-funded structure for this program, funds will expire and Americans will lose access to this vital program. Similar programs like the Supplemental Nutrition Assistance Program (SNAP) and other federal programs have proven to be effective models to deliver assistance. The Emergency Broadband Benefit program should be treated the same.

Congress must continue to address anticompetitive behaviors in all industries, and explore solutions that support patients.
- A provision later omitted from President Biden’s infrastructure plan would have promoted price transparency and competition among internet providers, including by lifting barriers that prevent competition, and requiring internet providers to clearly disclose the prices they charge.

- Similarly, the Alliance for Connected Care supported the Community Broadband Act, which would prohibit banning or limiting the ability of any state, regional, or local governments to build broadband networks and provide internet services.

- According to a [2020 Institute for Local Self-Reliance report](https://www.iflsr.org/) which analyzed data from the FCC, more than 20 million Americans live in broadband monopolies, whereby they have access to only one broadband provider. Another roughly 100 million Americans live in areas with access to only two broadband service providers.

- A lack of affordable broadband is a significant barrier to not only virtual health care access, but also other important social determinants of health such as education and employment opportunities. **Congress must ensure that Americans are not at the detriment of corporate business, and that access to these services takes precedent over corporate interests.**

2. Congress should invest in efforts that support the deployment of broadband for all Americans, including those living in rural areas, on Tribal lands and to our nation’s schools and health care providers.

**Congress should expand and extend the FCC’s COVID-19 Telehealth Program and Connected Care Pilot Program**

- The Alliance for Connected Care has been supportive of calling for additional FCC funding to help health care providers and others provide telemedicine. In June, Representatives Spanberger (D-VA), co-leads Johnson (R-SD), Matsui (D-CA) and Curtis (R-UT) – plus 31 bipartisan members of Congress – sent a [letter](https://www.iflsr.org/) to House and Senate leaders emphasizing the demand in their districts for reliable telehealth services during the COVID-19 pandemic and the need to strengthen the FCC’s COVID-19 Telehealth Program.

- We applaud Congress’ and the FTC’s continued efforts to close the digital divide and ensure health care providers have the appropriate tools to take care of their patients in an ever-evolving virtual world. The COVID-19 Telehealth Program and Connected Care Pilot Program have remarkably increased telehealth adoption among health care providers and health centers serving those in need. Health care providers in each state, territory, and the District of Columbia have received funding.

- **The Alliance for Connected Care urges FCC to extend these programs, and for Congress to appropriate additional funding to support such efforts.**

**Congress must continue coverage for audio-only services beyond the COVID-19 public health emergency.**

- Our nation has only just begun to make strides recognizing and addressing broadband inequities. As we continue to reach for 100 percent broadband coverage for all, Congress must recognize and support policies that maintain coverage and access where broadband is lacking.

- The Alliance believes that audio-only telehealth has been a critical tool for many clinicians and patients during COVID-19, especially when considering providing equitable access to care for
patients facing broadband, affordability and other barriers. While we believe that audio-video communication is the preferred modality for most telehealth, we strongly support continued flexibility for audio-only – when clinically appropriate and when meeting the need or request of the patient.

- Congress must maintain access to audio-only services for patients who in the interim continue to lack broadband access and/or affordability.

Congress should pass the Data Mapping to Save Moms’ Lives Act

- The Data Mapping to Save Moms’ Lives Act (S. 198/H.R. 1218) would use data mapping to identify areas of the country where poor maternal health rates overlap with a lack of broadband access, to better deploy telehealth services there.

- The United States is one of the only countries in the developed world with a rising maternal mortality rate. The problem is especially prevalent in rural communities and amongst women of color who continue to experience disproportionately high rates of maternal and infant mortality.

- This bill will give our nation one more tool to combat the devastating rising maternal mortality rate in this country. **We urge Congress to pass the Data Mapping to Save Moms’ Lives Act in future legislation, including considering inclusion of the bill in the year-end appropriations package.**

Congress should consider policies that drive greater flexibility for clinicians to provide care across state lines.

- State lines create artificial barriers to the delivery of care – complicating access for patients and creating additional burden on clinicians. These lines sometimes split major urban areas and hamper the ability of telemedicine providers to fill in gaps in the delivery system and provide high-value care directly to consumers in rural or underserved areas.

- Current efforts to expand interstate licensure have been insufficient to meet the needs of patients and the clinicians seeking to better serve them. One of the most effective utilizers of telehealth networks to support the delivery of care across state lines, the U.S. Department of Veterans Affairs, supported 900,000 veterans though telemedicine visits in fiscal year 2019 – a majority of which were for mental health care. The program demonstrated growth of 17 percent over the prior fiscal year.

- As our entire ecosystem works to address inequities, we **urge Congress to consider addressing antiquated licensure laws that impeded access to care, and the value of cross-state care in providing greater access to health care and specialty medicine, addressing provider shortages in rural and medically underserved communities, improving follow-up and continuity of care, and providing patients with more choice in the providers they wish to see.**

Thank you for your consideration. We look forward to working with you on this important effort. Please contact Crystal Wallace at 301-742-5240 or crystal.wallace@connectwithcare.org with any questions.

Sincerely,
Krista Drobac
Executive Director
Alliance for Connected Care