

116TH CONGRESS
2D SESSION

H. R. 6474

To provide for the expansion of the Rural Health Care Program of the Federal Communications Commission in response to COVID-19, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

APRIL 10, 2020

Ms. ESHOO (for herself and Mr. YOUNG) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To provide for the expansion of the Rural Health Care Program of the Federal Communications Commission in response to COVID-19, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Healthcare Broadband
5 Expansion During COVID-19 Act”.

6 **SEC. 2. EXPANSION OF RURAL HEALTH CARE PROGRAM OF**

7 **FCC IN RESPONSE TO COVID-19.**

8 (a) PROMULGATION OF REGULATIONS REQUIRED.—

9 Not later than 7 days after the date of the enactment of

1 this Act, the Commission shall promulgate regulations
2 modifying the requirements in subpart G of part 54 of
3 title 47, Code of Federal Regulations, in the following
4 manner:

5 (1) A health care provider not located in a rural
6 area shall be treated as a rural health care provider
7 for the purposes of the Healthcare Connect Fund
8 Program.

9 (2) The discount rate for an eligible expense
10 through the Healthcare Connect Fund Program (as
11 described in section 54.611(a) of title 47, Code of
12 Federal Regulations, or any successor regulation)
13 shall be increased to 85 percent in funding years
14 2019, 2020, and 2021 for eligible equipment pur-
15 chased or eligible services rendered in such funding
16 years (including for eligible equipment, upfront pay-
17 ments, and multi-year commitments without limita-
18 tion).

19 (3) A temporary, mobile, or satellite health care
20 delivery site shall be treated as a health care pro-
21 vider or an eligible site of a health care provider for
22 purposes of determining eligibility for the Healthcare
23 Connect Fund Program or the Telecommunications
24 Program.

1 (4) The waiver of the application window speci-
2 fied in section 54.621(a) of title 47, Code of Federal
3 Regulations (or any successor regulation), for fund-
4 ing year 2019.

5 (5) The adoption and implementation of a roll-
6 ing application process to allow a health care pro-
7 vider to apply for funding.

8 (6) The following changes to certain bidding re-
9 quirements:

10 (A) A waiver of any requirement under
11 section 54.622 of title 47, Code of Federal Reg-
12 ulations (or any successor regulation), for a
13 health care provider upgrading an existing sup-
14 ported service at a particular location, effective
15 as of the date of declaration of the public health
16 emergency pursuant to section 319 of the Pub-
17 lic Health Service Act (42 U.S.C. 247d) as a
18 result of confirmed cases of COVID-19, if the
19 health care provider maintains the same eligible
20 service provider to provide the upgraded service
21 at such location.

22 (B) Reduction of the 28-day waiting period
23 described in section 54.622(g) of title 47, Code
24 of Federal Regulations (or any successor regu-
25 lation), to a 14-day waiting period.

1 (C) Modification of the requirements in
2 section 54.622 of title 47, Code of Federal Reg-
3 ulations (or any successor regulation), to—

4 (i) provide that bid evaluation criteria
5 may give additional consideration to the
6 speed with which an eligible service pro-
7 vider can initiate service; and

8 (ii) encourage applicants to consider
9 bids from different providers to provide
10 service to different locations of such appli-
11 cants, if considering bids in this manner
12 would expedite the overall timeline for ini-
13 tiating or expanding service to individual
14 locations.

15 (7) Issuance of a decision on each application
16 for funding not later than 60 days after the date on
17 which the application is filed.

18 (8) Release of funding not later than 30 days
19 after the date on which an invoice is submitted with
20 respect to an application that is approved, applicable
21 services have been provided, and required invoices
22 have been submitted as required under program
23 rules.

24 (b) ADDITIONAL CHANGES TO RURAL HEALTH CARE
25 PROGRAM.—

1 (1) RELEASE OF FUNDING FOR OUTSTANDING
2 FUNDING REQUESTS.—The Commission shall release
3 funding for all requests (outstanding as of the date
4 of the enactment of this Act) for funding under the
5 Rural Health Care Program not later than 30 days
6 after the date of the enactment of this Act, except
7 that for funding requests subject to a review of the
8 applicable rural rate, the Commission shall release
9 interim funding not later than 30 days after the
10 date of the enactment of this Act based on the most
11 recent approved rural rate for a similar service, sub-
12 ject to a true-up following the completion of such re-
13 view. This paragraph shall not be construed to re-
14 quire the Commission to release funding for a re-
15 quest if the Commission is, on the date of enactment
16 of this Act, investigating potential waste, fraud, or
17 abuse allegations with respect to a specific applicant
18 or service provider to which such request relates.

19 (2) DELAY OF IMPLEMENTATION SCHEDULE.—
20 The Commission shall—

21 (A) delay by one year the implementation
22 of sections 54.604 and 54.605 of title 47, Code
23 of Federal Regulations (or any successor regu-
24 lation), as adopted in the Report and Order in
25 the matter of Promoting Telehealth in Rural

1 America (FCC 19–78) that was adopted by the
2 Commission on August 1, 2019; and

3 (B) delay application of the new definition
4 of “similar services” as described in paragraphs
5 14 to 20 of such Report and Order until the
6 implementation of such sections.

7 (c) EFFECTIVE DATE OF REGULATIONS.—The regu-
8 lations required under subsection (a) shall take effect on
9 the date on which such regulations are promulgated.

10 (d) TERMINATION OF REGULATIONS.—Except to the
11 extent that the Commission determines that some or all
12 of the regulations promulgated under subsection (a)
13 should remain in effect (excluding any regulation promul-
14 gated under paragraph (1) of such subsection), such regu-
15 lations shall terminate on the later of—

16 (1) the earlier of—

17 (A) the date that is 60 days after the ter-
18 mination of the declaration, or any renewal
19 thereof, of the public health emergency pursu-
20 ant to section 319 of the Public Health Service
21 Act (42 U.S.C. 247d) as a result of confirmed
22 cases of COVID–19; and

23 (B) the date of the expiration of the appro-
24 priation in subsection (f)(2); and

1 (2) the date that is 9 months after the date of
2 the enactment of this Act.

3 (e) EXEMPTIONS.—

4 (1) NOTICE AND COMMENT RULEMAKING RE-
5 QUIREMENTS.—Section 553 of title 5, United States
6 Code, shall not apply to a regulation promulgated
7 under subsection (a) or a rulemaking to promulgate
8 such a regulation.

9 (2) PAPERWORK REDUCTION ACT REQUIRE-
10 MENTS.—A collection of information conducted or
11 sponsored under the regulations required by sub-
12 section (a), or under section 254 of the Communica-
13 tions Act of 1934 (47 U.S.C. 254) in connection
14 with universal service support provided under such
15 regulations, shall not constitute a collection of infor-
16 mation for the purposes of subchapter I of chapter
17 35 of title 44, United States Code (commonly re-
18 ferred to as the Paperwork Reduction Act).

19 (f) EMERGENCY RURAL HEALTH CARE
20 CONNECTIVITY FUND.—

21 (1) ESTABLISHMENT.—There is established in
22 the Treasury of the United States a fund to be
23 known as the Emergency Rural Health Care Con-
24 nectivity Fund.

1 (2) APPROPRIATION.—There is appropriated to
2 the Emergency Rural Health Care Connectivity
3 Fund, out of any money in the Treasury not other-
4 wise appropriated, \$2,000,000 for fiscal year 2020,
5 to remain available through fiscal year 2022.

6 (3) USE OF FUNDS.—Amounts in the Emer-
7 gency Rural Health Care Connectivity Fund shall be
8 available to the Commission to carry out the Rural
9 Health Care Program, as modified by the regula-
10 tions promulgated under subsection (a).

11 (4) RELATIONSHIP TO UNIVERSAL SERVICE
12 CONTRIBUTIONS.—Support provided under the regu-
13 lations required by paragraphs (1) through (3) of
14 subsection (a) shall be provided from amounts made
15 available under paragraph (3) of this subsection and
16 not from contributions under section 254(d) of the
17 Communications Act of 1934 (47 U.S.C. 254(d)).
18 Such support shall be in addition to, and not in re-
19 placement of, funds authorized by the Commission
20 for the Rural Health Care Program as of the date
21 of the enactment of this Act from contributions
22 under section 254(d) of the Communications Act of
23 1934 (47 U.S.C. 254(d)).

24 (g) DEFINITIONS.—In this section:

1 (1) COMMISSION.—The term “Commission”
2 means the Federal Communications Commission.

3 (2) ELIGIBLE EQUIPMENT.—The term “eligible
4 equipment” means the equipment described in sec-
5 tion 54.613 of title 47, Code of Federal Regulations
6 (or any successor regulation).

7 (3) ELIGIBLE SERVICE PROVIDER.—The term
8 “eligible service provider” means a provider de-
9 scribed in section 54.608 of title 47, Code of Federal
10 Regulations (or any successor regulation).

11 (4) FUNDING YEAR.—The term “funding year”
12 has the meaning given such term in section
13 54.600(a) of title 47, Code of Federal Regulations
14 (or any successor regulation).

15 (5) HEALTH CARE PROVIDER.—The term
16 “health care provider” has the meaning given such
17 term in section 54.600(b) of title 47, Code of Fed-
18 eral Regulations (or any successor regulation).

19 (6) HEALTHCARE CONNECT FUND PROGRAM.—
20 The term “Healthcare Connect Fund Program” has
21 the meaning given such term in section 54.602(b) of
22 title 47, Code of Federal Regulations (or any suc-
23 cessor regulation).

24 (7) MULTI-YEAR COMMITMENTS.—The term
25 “multi-year commitments” means the commitments

1 described in section 54.620(c) of title 47, Code of
2 Federal Regulations (or any successor regulation).

3 (8) RURAL AREA.—The term “rural area” has
4 the meaning given such term in section 54.600(e) of
5 title 47, Code of Federal Regulations (or any suc-
6 cessor regulation).

7 (9) RURAL HEALTH CARE PROGRAM.—The
8 term “Rural Health Care Program” means the pro-
9 gram described in subpart G of part 54 of title 47,
10 Code of Federal Regulations (or any successor regu-
11 lation).

12 (10) RURAL HEALTH CARE PROVIDER.—The
13 term “rural health care provider” has the meaning
14 given such term in section 54.600(f) of title 47,
15 Code of Federal Regulations (or any successor regu-
16 lation).

17 (11) TELECOMMUNICATIONS PROGRAM.—The
18 term “Telecommunications Program” has the mean-
19 ing given such term in section 54.602(a) of title 47,
20 Code of Federal Regulations (or any successor regu-
21 lation).

22 (12) UPFRONT PAYMENTS.—The term “upfront
23 payments” means the payments described in section

- 1 54.616 of title 47, Code of Federal Regulations (or
- 2 any successor regulation).

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