



December 22, 2023

Trent Harkrader
Bureau Chief, Wireline Competition Bureau
Federal Communications Commission
45 L Street, NE
Washington, DC 20554

**Re: Petition for Limited Waiver of the Rural Health Care Invoice Filing Deadline
WC Docket No. 02-60
Letter of Support**

Dear Mr. Harkrader:

The Schools, Health & Libraries Broadband Coalition (SHLB) writes to support the petition for limited waiver of the Rural Health Care (RHC) Program invoice filing deadline filed on October 6, 2023, by Community Hospital Corporation (CHC).¹ Granting the petition will serve the public interest by ensuring program participants have the time they need to overcome the inevitable challenges presented by a major system migration like RHC Connect. Granting the petition will especially provide relief for those applicants or service providers who did not know they needed a waiver and so failed to request one by the October 30 deadline. Indeed, given the issues our members are seeing and experiencing – backed up circumstantially by information in USAC OpenData – the monthly public notice waiver process is at best inefficient but more likely insufficient to address the problem.

SHLB recognizes the importance of the RHC Connect migration and is pleased USAC and the Commission are working to improve USAC's application processing systems. Given the complexity of any system migration, the fact that users are encountering various types of issues is not surprising. Indeed, we do not see these issues as suggesting USAC's approach to the migration is deficient, but rather that such challenges are inevitable and can be anticipated.

Similar to the issues described in the CHC petition, SHLB members know of many cases where service providers, despite working with USAC to resolve their issues, (1) have not been able to access RHC Connect or (2) have had issues once logged into RHC Connect that are preventing certification of Form 463s.² While we understand that USAC is aware of this issue, it has not been able to provide a definite date for resolution. In many individual cases, resolution

¹ See <https://www.fcc.gov/ecfs/search/search-filings/filing/10060389102944>. (CHC Petition).

² See *id.* at 5 (“CHC knows of at least one service provider whose primary account holder cannot access RHC Connect. USAC has not been able to resolve the issue and has offered no definite timeframe to do so.”).

has taken weeks (with one service provider indicating that it had been trying to resolve the issue for three weeks). Further complications include:

- If providers do not have access to RHC Connect, they are also not likely to receive notifications. As such, providers may not know the issue exists and may assume there are no Form 463's to certify, unless told otherwise by the applicant.
- The RHC Program does not have a SPIN tool to identify the appropriate contact person for each SPIN. This makes it difficult to know who to contact regarding any pending forms.

We are concerned that there is a high probability that some providers have already missed the initial invoicing deadline, due to the inability to review and certify a Form 463. Should the applicant(s) have not requested an extension to the invoice deadline, any Form 463 will be denied or never processed.

Additionally, SHLB is concerned about remaining issues related to the Form 460 (health care provider eligibility). First, the Form 460 and related tools are still part of the legacy system and have yet to be fully incorporated into RHC Connect. This can result in delays and missed steps as applicants and USAC work between the two systems. For example, one SHLB member reports that RHC Connect did not allow for the submission of a Form 463 although USAC had corrected a previous error with the related Form 460 (the error being an incorrect denial). The applicant did not receive a notification explaining why the system prevented a Form 463 submission, prompting the applicant's consultant to reach out directly to USAC and resulting in USAC implementing a manual "fix" around a month later.³ Second, the new Form 460 revision process completely suspends the processing of any FRNs or FRN line items (including being able to submit a Form 463) associated with the affected health care provider while a Form 460 is in process or pending approval.⁴ SHLB members have been aware of this issue and have discussed it with USAC, but no known resolution has been established. Revisions to a Form 460 can be caused by a variety of reasons, including for something as simple as a contact change or slight change to the health care provider name, or for something outside of the health care provider or service provider's control, such as an error made when the form is evaluated. Despite the awareness about the Form 460 revision process within SHLB, we are concerned about small health care providers and service providers who typically do not have a sophisticated understanding of program processes and who may not be represented by a knowledgeable consultant. SHLB recognizes CHC's petition as – in part – a pro-active attempt to help these smaller, less experienced entities and we support that effort.

Further, SHLB members have shared a concern about system limitations for post-commitment changes. New post-commitment tools were released in RHC Connect in late May of 2023. The timing of this release provided applicants and providers only about a month to submit

³ It took almost four months for this issue to be resolved in total - from the original incorrect denial of the Form 460 to when the Form 463 was able to be submitted.

⁴ See CHC Petition at 3-4.

all FY2022 SPIN changes and/or site and service substitutions,⁵ with no ability to submit such changes prior to the release of the tool. An applicant that submitted a post-commitment change was (or still is) potentially delayed in invoicing because it is prevented from submitting a Form 463 until that pending post-commitment submission is processed. Further, the tool (by design) only allows for the submission of one post-commitment change at a time, which could have caused additional delay if an applicant had to submit multiple post-commitment requests (such as a SPIN change and a site and service substitution).⁶

As of November 28, 2023, USAC OpenData showed over \$12 million in funding year (FY) 2022 dollars tied to funding request numbers (FRNs) with essentially no disbursements for which no invoice deadline extension appears to have been requested. We recognize Form 463's may have been submitted against some of these FRNs (or FRN line items) which had not been processed yet, but this cannot account for that entire number. This data supports CHC's contention that entities affected by the several issues they identified *were unaware or may as yet be unaware* they have an issue that required an invoice deadline extension be filed by the October 30, 2023, deadline. This would be explained by cases where FRNs or FRN line items affected by a pending Form 460 revision went unprocessed by USAC without notice to the applicant or service provider.

Finally, we note that the Wireline Bureau granted limited invoice deadline relief in the E-rate program in a similar situation in 2018 when USAC was migrating to its new EPC system.⁷

These concerns and SHLB member reports validate the fact that unresolved RHC Connect access and other programmatic issues for which there might be no known resolution date are causing participants to miss programmatic deadlines completely. For those that requested an invoice deadline extension by October 30, 2023, we are concerned that they may run out of time waiting for migration issues to be solved prior to the next February 25, 2024 deadline, with no opportunity to request an additional extension after that date.

We thus urge the Commission to grant CHC's petition for limited waiver of Section 54.627(a) of its Rules with respect to the RHC Program invoice filing deadline for all Healthcare Connect Fund participants (applicants and service providers). CHC's request for entities to have the option to request one-further 120-day extension beyond February 25, 2024, and to retroactively provide an automatic 120-day extension from October 30, 2023, for entities that

⁵ The post commitment change deadline mirrored the service delivery deadline, which was June 30, 2023.

⁶ While we are aware that there might be potential solutions to this particular issue, we are concerned about other applicants who might not have such guidance.

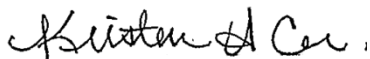
⁷ See *Schools and Libraries Universal Service Support Mechanism*, Order, CC Docket 02-6, 33 FCC Rcd 2042, ¶ 7 (2018) (the "extraordinary nature of the instant circumstances is indicated by the fact that the waiver and relief granted here is limited in both scope and time (i.e., to invoices for funding year 2016 recurring charges for which post-commitment changes were required and delayed due to a lack of functionality that has now been implemented in EPC); thus, this specific USAC system issue should not prevent program participants from timely submitting invoices going forward.")

neglected to request one seems reasonable under the circumstances. The burden on USAC and the larger program would be minimal and would not undermine the overall purposes of the invoice deadline.

We appreciate all the actions this Commission has undertaken to help ensure that consumers, anchor institutions and the communities they serve have access to connectivity. Granting CHC's petition for limited waiver will ensure that healthcare providers do not lose needed funding due to issues beyond their control.

If you have any questions, please do not hesitate to contact me at kcorra@shlb.org.

Respectfully,



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