



Rural Health Care

Briefing Book

April 26, 2021

Available for Public Use

Virtual Meeting

Universal Service Administrative Company Offices

700 12th Street, N.W., Suite 900

Washington, D.C. 20005

**Universal Service Administrative Company
Rural Health Care Committee Quarterly Meeting
Virtual Agenda**

**USAC Offices
700 12th Street, N.W., Suite 900
Washington, D.C. 20005**

MONDAY, APRIL 26, 2021 11:05 A.M. – 11:30 A.M. EASTERN TIME <u>OPEN SESSION</u>		<i>Estimated Duration in Minutes</i>
Chair	a1. Consent Items (each available for discussion upon request): A. Approval of Rural Health Care Committee Meeting Minutes of January 25 and January 26, 2021 B. Approval of moving all <i>Executive Session</i> items into <i>Executive Session</i>	5
Mark	a2. Approval of Rural Health Care Support Mechanism 3rd Quarter 2021 Programmatic Budget and Demand Projection for the April 30, 2021 FCC Filing	5
Mark	i1. Rural Health Care Business Update: <ul style="list-style-type: none"> • Accomplishments and Plans <ul style="list-style-type: none"> ○ Metrics ○ Open Data and Rates Data Base ○ Outreach • Reform Oder and Supply Chain Order • Roadmap • Systems Update 	15
TUESDAY, APRIL 27, 2020 10:25 A.M. – 10:35 A.M. EASTERN TIME <u>EXECUTIVE SESSION</u> Confidential – <i>Executive Session Recommended</i>		<i>Estimated Duration in Minutes</i>
Mark	i2. Rural Health Care Business Update <ul style="list-style-type: none"> • Business Process Outsourcing Update 	10

**Universal Service Administrative Company
Rural Health Care Committee Meeting**

ACTION ITEM

Consent Items

Action Requested

The Rural Health Care Committee (Committee) of the USAC Board of Directors (Board) is requested to approve the consent items listed below.

Discussion

The Committee is requested to approve the following items using the consent resolution below:

- A. Committee meeting minutes of January 25 and January 26, 2021 (*see Attachments A-1 and A-2*).

- B. Approval of moving all *Executive Session* items into *Executive Session*:
 - (1) **i2.** – Rural Health Care Business Update (*Continued*). USAC management recommends that this matter be discussed in Executive Session because it relates to *specific internal controls or confidential company data* that would constitute a discussion of internal rules and procedures. This item also relates to USAC's *procurement strategy and contract administration*.

Upon request of a Committee member, any one or more of the above items are available for discussion by the Committee.

Recommended USAC Rural Health Care Committee Action

APPROVAL OF THE FOLLOWING RESOLUTION:

RESOLVED, that the Rural Health Care Committee of the USAC Board of Directors hereby approves: (1) the Committee meeting minutes of January 25 and January 26, 2021; and (2) discussion in *Executive Session* of the item noted above.

UNIVERSAL SERVICE ADMINISTRATIVE COMPANY
700 12th Street, N.W., Suite 900
Washington, D.C. 20005

RURAL HEALTH CARE COMMITTEE MEETING
Monday, January 25, 2021

(DRAFT) MINUTES¹

Due to the COVID-19 pandemic, USAC continued mandatory telework; therefore the *Open Session* portion of the quarterly meeting of the Rural Health Care Committee (Committee) of the USAC Board of Directors (Board) was conducted by web conference on Monday, January 25, 2021. Dr. Kathy Wibberly, Committee Chair, called the meeting to order at 12:38 p.m. Eastern Time, with a quorum six of the seven Committee members present (there is one vacancy):

Freeman, Sarah	Waller, Jeff
Sekar, Radha – Chief Executive Officer	Wein, Olivia
Wade, Dr. Joan	Wibberly, Dr. Kathy – Chair

Members of the Committee not present:

Fontana, Brent – Vice Chair

Other Board members and officers of the corporation present:

Ayer, Catriona – Vice President of Shared Services
Beckford, Ernesto – Vice President, General Counsel, and Assistant Secretary
Beyerhelm, Chris – Chief Administrative Officer
Buzacott, Alan – Member of the Board
Choroser, Beth – Member of the Board
Davis, Craig – Vice President of Schools and Libraries
Delmar, Teleshia – Vice President of Audit and Assurance
Domenech, Dr. Dan – Member of the Board
Feiss, Geoff – Member of the Board
Gaither, Vic – Vice President of High Cost
Garber, Michelle – Vice President of Enterprise Resources Program
Gerst, Matt – Member of the Board
Gillan, Joe – Member of the Board
Gregory, Amber – Member of the Board
Hutchinson, Kyle – Vice President of IT and Chief Information Officer
Jacobs, Ellis – Member of the Board

¹ Draft resolutions were presented to the Committee prior to the Committee meeting. Where appropriate, non-substantive changes have been made to the resolutions set forth herein to clarify language, where necessary, or to correct grammatical or spelling errors.

Mason, Ken – Member of the Board
Salvator, Charles – Vice President, Chief Financial Officer, and Assistant Treasurer
Schell, Julie Tritt – Member of the Board
Skrivan, Michael – Member of the Board
Sweeney, Mark – Vice President of Rural Health Care

Others present:

<u>NAME</u>	<u>COMPANY</u>
Benham, Cathy	CMS Consulting Inc.
Campos, Rosy	CMS Consulting Inc.
Crawford, Katherine	USAC
DiVo, Victor	USAC
Goode, Vernell	USAC
Harkin, Michelle	CMS Consulting Inc.
James, Christine	USAC
Lee, James	USAC
Little, Chris	USAC
Mitchell, Tamika	USAC
Morning, Kimberly	USAC
Nelbach, Nick	USAC
Nuzzo, Patsy	USAC
Samuels, Victoria	USAC
Schecker, Laurence	USAC
Schrader, Theresa	Broadband Legal Strategies, LLC
Tiwari, Tanya	USAC

OPEN SESSION

All materials from *Open Session* can be found on the [USAC website](#).

- a1. Consent Items.** Dr. Wibberly presented this item to the Committee.
- A.** Approval of Rural Health Care Committee Meeting Minutes of October 26, October 27, and November 16, 2020.
 - B.** Approval of moving all *Executive Session* items into *Executive Session*:
 - **a4** – Approval of Rural Health Care Support Mechanism 2021 Annual Programmatic Budget. USAC management recommends that this item be discussed in *Executive Session* because it relates to USAC’s *procurement strategy and contract administration*.

On a motion duly made and seconded, and after discussion, the Committee adopted the following resolutions

RESOLVED, that the USAC Rural Health Care Committee hereby approves: (1) the Committee meeting minutes of October 26, October 27, and November 16, 2020; and (2) discussion in *Executive Session* of the item noted above.

- a2. Recommendation for Election of Committee Chair and Vice Chair.** Dr. Wibberly introduced Mr. Gerst. As Chair of the Nominating Committee, Mr. Gerst reported on the election recommendations for the Rural Health Care Committee.

On a motion duly made and seconded, and after discussion, the Committee adopted the following resolution:

RESOLVED, that the USAC Rural Health Care Committee recommends that the USAC Board of Directors elect **Dr. Kathy Wibberly** as Chair and **Brent Fontana** as Vice Chair of the Committee. The term for each position begins immediately upon the election to such position by the Board and ends at such time as the Chair or Vice Chair (as the case may be): (i) is replaced by a successor selected by the Board, (ii) resigns from the Committee or the Board, (iii) is removed by resolution of the Board, or (iv) is no longer a member of the Board (whichever comes first).

- a3. Approval of Rural Health Care Support Mechanism 2nd Quarter 2021 Programmatic Budget and Demand Projection for January 29, 2021 FCC Filing.** Mr. Sweeney presented this item for consideration. The presentation included a written report on USAC management's recommendations for the Rural Health Care Support Mechanism 2nd Quarter 2021 programmatic budget and demand projection for the January 29, 2021 FCC filing.

On a motion duly made and seconded, and after discussion, the Committee adopted the following resolutions:

RESOLVED, that the USAC Rural Health Care Committee approves a 2nd Quarter 2021 Rural Health Care Support Mechanism direct program budget of \$3.94 million; and

RESOLVED FURTHER, that the USAC Rural Health Care Committee directs USAC staff to submit a collection requirement of \$3.94 million for Rural Health Care Support Mechanism administrative costs in the required January 29, 2021 filing to the FCC on behalf of the Committee; and

RESOLVED FURTHER, that the USAC Rural Health Care Committee, having reviewed at its meeting on January 25, 2021 the 2nd

Quarter 2021 Rural Health Care Support Mechanism demand estimate of \$149.36 million, hereby directs USAC staff to proceed with the required January 29, 2021 filing to the FCC on behalf of the Committee. USAC staff may make adjustments if the total variance for the Rural Health Care Support Mechanism is equal to or less than \$1 million, or may seek approval from the Committee Chair to make adjustments if the total variance is greater than \$1 million, but not more than \$2 million.

ii. Rural Health Care Business Update. Mr. Sweeney presented PowerPoint slides covering the following items to the Committee:

- Update on Items from October 2020 Committee Meeting
- Operational Velocity in 4Q2020
- Operational Plans for 2021
- Escalation Process Changes
- Roadmap
- 4Q2020 Update on Rural Health Care Administration. The Committee received a report on Rural Health Care 4Q2020 accomplishments, planned activities for 1Q2021, and program metrics. The report was provided for *information only* and was publically posted on USAC's website. No discussion was held.

At 1:04 p.m. Eastern Time, on a motion duly made and seconded, the Committee adjourned until January 26, 2021 at approximately 11:40 a.m. Eastern Time.

/s/ Kimberly Morning
Assistant Secretary

UNIVERSAL SERVICE ADMINISTRATIVE COMPANY
700 12th Street, N.W., Suite 900
Washington, D.C. 20005

RURAL HEALTH CARE COMMITTEE MEETING
Tuesday, January 26, 2021

(DRAFT) MINUTES¹

Due to the COVID-19 pandemic, USAC continued mandatory telework; therefore the *Executive Session* portion of the quarterly meeting of the Rural Health Care Committee (Committee) of the USAC Board of Directors (Board) was conducted by web conference on Tuesday, January 26, 2021. The Committee meeting continued from the January 25, 2021 *Open Session* portion of the meeting. Dr. Kathy Wibberly, Committee Chair, called the meeting to order at 11:51 a.m. Eastern Time, with a quorum of six of the seven Committee members present (there is one vacancy):

Freeman, Sarah	Waller, Jeff
Sekar, Radha – Chief Executive Officer	Wein, Olivia
Wade, Dr. Joan	Wibberly, Dr. Kathy – Chair

Members of the Committee not present:

Fontana, Brent – Vice Chair

Other Board members and officers of the corporation present:

Ayer, Catriona – Vice President of Shared Services
Beckford, Ernesto – Vice President, General Counsel, and Assistant Secretary
Beyerhelm, Chris – Chief Administrative Officer
Buzacott, Alan – Member of the Board
Choroser, Beth – Member of the Board
Davis, Craig – Vice President of Schools and Libraries
Delmar, Teleshia – Vice President of Audit Assurance
Domenech, Dr. Dan – Member of the Board
Feiss, Geoff – Member of the Board
Gaither, Victor – Vice President of High Cost
Garber, Michelle – Vice President of Enterprise Resource Program
Gerst, Matt – Member of the Board
Gillan, Joe – Member of the Board
Gregory, Amber – Member of the Board

¹ Draft resolutions were presented to the Committee prior to the Committee meeting. Where appropriate, non-substantive changes have been made to the resolutions set forth herein to clarify language, where necessary, or to correct grammatical or spelling errors.

Hutchinson, Kyle – Vice President of Information Technology and Chief Information Officer
Mason, Ken – Member of the Board
Polk, Stephanie – Member of the Board
Salvator, Charles – Vice President, Chief Financial Officer, and Assistant Treasurer
Schell, Julie Tritt – Member of the Board
Skrivan, Michael – Member of the Board
Sweeney, Mark – Vice President of Rural Health Care

Others present:

<u>NAME</u>	<u>COMPANY</u>
DiVo, Victor	USAC
Goode, Vernell	USAC
James, Christine	USAC
Lee, James	USAC
Mitchell, Tamika	USAC
Morning, Kim	USAC
Nelbach Nick	USAC
Nuzzo, Patsy	USAC
Samuels, Victoria	USAC
Tiwari, Tanya	USAC

OPEN SESSION

At 11:51 a.m. Eastern Time, on a motion duly made and seconded, the Committee moved into *Executive Session* for the purpose of discussing confidential items. The Committee approved discussing confidential items in *Executive Session* on Monday, January 25, 2021. Only members of the Board and USAC staff were present.

EXECUTIVE SESSION

- a4. Approval of Rural Health Care Support Mechanism 2021 Annual Programmatic Budgets.** Mr. Sweeney presented this item for consideration. The presentation included a written report on the Rural Health Care Support Mechanism annual budget.

On a motion duly made and seconded, and after discussion, the Committee adopted the following resolution:

RESOLVED, that the Rural Health Care Committee approves a 2021 annual programmatic budget for the Rural Health Care Support Mechanism of \$14.90 million.

OPEN SESSION

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At 12:00 p.m. Eastern Time, the Committee moved out of *Executive Session* and immediately reconvened in *Open Session*, at which time Dr. Wibberly reported that, in *Executive Session*, the Committee took action on item a4.

On a motion duly made and seconded, the Committee adjourned at 12:00 p.m. Eastern Time.

/s/ Kimberly Morning
Assistant Secretary

**Universal Service Administrative Company
Rural Health Care Committee Meeting**

ACTION ITEM

**Approval of Rural Health Care Support Mechanism
3rd Quarter 2021 Programmatic Budget and
Demand Projection for the April 30, 2021 FCC Filing**

Action Requested:

The Rural Health Care Committee (Committee) of the USAC Board of Directors (Board) is requested to approve the 3rd Quarter 2021 (3Q2021) programmatic budget and demand projection for the Rural Health Care Support Mechanism for submission to the Federal Communications Commission (FCC) in USAC's April 30, 2021 quarterly filing.

Discussion:

On a quarterly basis, USAC is required to submit to the FCC each program's budget¹ and projected demand for the upcoming quarter.²

Funding Requirement

USAC estimates the 3Q2021 funding requirement for the Rural Health Care Support Mechanism as follows:

¹ See 47 C.F.R. § 54.715(c).

² See 47 C.F.R. § 54.709(a)(3).

Table A. Program Funding Requirement

<i>(in millions)</i>	2Q2021	Increase/ (Decrease)	3Q2021	Notes
Steady State:				
Program Funding Requirement	\$144.66	\$2.34	\$147.00	See Note 1 and Table B
New Requirements:				
N/A	0.00	0.00	0.00	
Total Program Funding Requirement	\$144.66	\$2.34	\$147.00	
Prior Period Adjustments (difference between projections and actuals):				
Billings	(0.53)	(1.54)	(2.07)	
Interest Income	0.00	0.00	0.00	
Bad Debt Expense	(1.30)	(0.25)	(1.55)	
Total Prior Period Adjustments	(\$1.83)	(\$1.79)	(\$3.62)	
USAC Administrative Expenses ³	\$6.53	(\$0.52)	\$6.01	See Table D
Total Funding Requirement	\$149.36	\$0.03	\$149.39	

Note 1: On March 19, 2021, the Commission announced a funding cap for Funding Year 2021 of \$612.02 million.⁴ The Program Funding Requirement represents one quarter of the Funding Year 2021 cap, less USAC administrative costs. See Table B below for additional detail.

Table B. Funding Year 2021 Program Funding Requirement

<i>(in millions)</i>	Fund Year 2021	Notes
Funding Year 2021 Cap	\$612.02	See Note 1
Quarterly Funding Requirement for Funding Year 2020	\$153.01	
Less USAC Administrative Costs, which are covered within the Funding Cap	(6.01)	
3Q2021 Program Funding Requirement	\$147.00	

Note 2: Table C is an annual schedule that is updated once a year for the April Board meeting. The Funding Year 2021 filing window will close on June 1, 2021. The Commission will provide guidance at a later date regarding the amount to carry-forward in Table C to cover Funding Year 2021 Rural Health Care Program demand (to the extent necessary).⁵

³ Administrative costs are covered within the funding cap.

⁴ See *Wireline Competition Bureau Announces E-Rate and RHC Programs' Inflation-Based Caps for Funding Year 2021*, CC Docket No. 02-6, WC Docket No. 02-60, Public Notice, DA 21-332 (2021).

Table C. Funding Year 2021 Available Roll Forward

<i>(in millions)</i>	Net Change
Unused Funds	
Available Funds	\$802.78
Disbursements	(520.63)
Reserved Funds	
a. Pending Applications to Process	159.18
b. Unliquidated Obligations (ULOs)	(55.07)
c. Appeals Reserve - USAC Appeals	46.13
d. Appeals Reserve - FCC Appeals	(52.41)
Total Unused Funds	\$379.98

Based on the projected burn rate, USAC estimates the following 3Q2021 programmatic budget:

Table D. Quarterly Programmatic Budget

<i>(in millions)</i>	2Q2021 Budget	Increase/ (Decrease)	3Q2021 Budget	Notes
Direct Program Costs				
Employee Expenses	\$1.79	(\$0.03)	\$1.76	
Professional Services	0.68	(\$0.47)	0.21	
General & Administrative	0.01	(\$0.01)	0.00	See Note 3
Total Direct Program Costs	\$2.48	(\$0.51)	\$1.97	
Direct Assigned Costs				
Employee Expenses	\$0.38	\$0.01	\$0.39	
Professional Services	1.08	\$0.00	1.08	
General & Administrative	0.00	\$0.00	0.00	See Note 3
Total Direct Assigned Costs	\$1.46	\$0.01	\$1.47	
Total Direct Program & Direct Assigned Costs	\$3.94	(\$0.50)	\$3.44	
Common Allocated Costs	\$2.59	(\$0.02)	\$2.57	
Total Programmatic Budget	\$6.53	(\$0.52)	\$6.01	

Note 3: General & Administrative expenses include meetings & conferences and reference materials.

A comparison of actual expenditures to the budget for the three months ending March 31, 2021 is provided in **Attachment 1**.

Recommendation:

USAC management recommends that the Committee approve the 3Q2021 budget and projection of demand as proposed.

Recommended Rural Health Care Committee Actions:

APPROVAL OF THE FOLLOWING RESOLUTIONS:

RESOLVED, that the USAC Rural Health Care Committee approves a 3rd Quarter 2021 Rural Health Care Support Mechanism direct program budget of \$3.44 million; and

RESOLVED FURTHER, that the USAC Rural Health Care Committee directs USAC staff to submit a collection requirement of \$3.44 million for Rural Health Care Support Mechanism administrative costs in the required April 30, 2021 filing to the FCC on behalf of the Committee; and

RESOLVED FURTHER, that the USAC Rural Health Care Committee, having reviewed at its meeting on April 26, 2021 the 3rd Quarter 2021 Rural Health Care Support Mechanism demand estimate of \$149.39 million, hereby directs USAC staff to proceed with the required April 30, 2021 filing to the FCC on behalf of the Committee. USAC staff may make adjustments if the total variance for the Rural Health Care Support Mechanism is equal to or less than \$1 million, or may seek approval from the Committee Chair to make adjustments if the total variance is greater than \$1 million, but not more than \$2 million.

ATTACHMENT 1

Rural Health Care Administrative Costs and Headcount Comparison of Actual Expenditures and Headcount to the Budget for the Three Months Ending March 31, 2021

(\$ in millions)	FTE Actual	FTE Budget	FTE Variance	YTD Actual	YTD Budget	Variance
Direct Program Costs						
Employee Expenses	47	53	6	\$1.45	\$1.70	\$0.25
Professional Services (Note 4)				0.09	1.23	1.14
General & Administrative (Note 5)				0.00	0.00	0.00
Total Direct Program Costs				\$1.54	\$2.93	\$1.39
Direct Assigned Costs						
Employee Expenses	9	9	0	\$0.36	\$0.37	\$0.01
Professional Services (Note 4)				0.49	1.01	0.52
General & Administrative (Note 5)				0.00	0.00	0.00
Total Direct Assigned Costs				\$0.85	\$1.38	\$0.53
Total Direct Program & Direct Assigned Costs	56	62	6	\$2.39	\$4.31	\$1.92
Common Allocated Costs (Note 6)				\$2.15	\$2.40	\$0.25
Total Programmatic Budget				\$4.54	\$6.71	\$2.17

Note 4: Direct Program Professional Services include contract labor to perform application reviews and business requirements gathering. Direct Assigned Professional Services include beneficiary & contribution audit program audits and IT contract labor.

Note 5: General & Administrative expenses include printing & postage and reference materials.

Note 6: Common costs include costs not directly attributable to a program and are allocated based on the Cost Allocation Methodology, which allocates costs based 50% on direct program costs in the prior year and 50% on program demand in the prior year. Actual common allocated costs reflect a reduction for costs allocated to the appropriated programs.



Rural Health Care Committee

Rural Health Care Business Update

Open Session

April 26, 2021



Universal Service
Administrative Co.

Agenda

- Accomplishments and Plans
 - Metrics
 - Open Data and Rates Database
 - Outreach
- Reform Order and Supply Chain Order
- Roadmap
- Systems Update

Metrics

Rural Health Care

Category	Total # Received	Dollars	Actual Processed	Dollars Processed	Percentage Complete	Aging >90 Day*
Eligibility CY2020-21:						
HCF	52,542	N/A	49,784	N/A	94.75%	0 (2,554)
Telecom	43,093	N/A	43,084	N/A	99.97%	0
Applications FY2021:						
HCF	6,578	N/A	0	N/A	N/A	0
Telecom	388	N/A	0	N/A	N/A	0
Applications FY2020:						
HCF	13,358	\$442,128,678	7,111	\$118,155,213	53%	6,247
Telecom	3,182	\$206,110,697	1,832	\$27,306,750	58%	1,350

*Workable (un-workable)

Metrics (Continued)

Rural Health Care

Category	Total # Received	Dollars	Actual Processed	Dollars Processed	Percentage Complete	Aging >90 Day*
Applications						
Prior Years						
FY2017-19:	31,906	\$1,264,750,014	31,900	\$1,264,644,770	99.98%	0 (6)
HCF	15,100	\$735,420,288	14,946	\$728,124,824	98.98%	0 (154)
Telecom						
Disbursements						
CY20/21:						
HCF	83,500	\$ 906,608,088	83,352	\$902,762,175	99.82%	0 (41)
Telecom	14,456	\$1,205,703,337	14,422	\$1,204,357,575	99.76%	0 (2)
Appeals (YTD):						
HCF	118	N/A	64	N/A	N/A	40
Telecom	84	N/A	22	N/A	N/A	37 (24)

*Workable (un-workable)

Open Data and Rates Database

- Open Data
 - Three enhancements to existing commitment and disbursement data set are expected to be deployed in May 2021.
 - Original commitment
 - Gross demand (originally submitted amount)
 - All other statuses (currently only commitment is displayed)

Open Data and Rates Database (Continued)

- Launched the Rural Rates Database on July 1, 2020, and refreshed database on September 30, 2020 and December 31, 2020.
- Incorporated changes for Alaska Waiver Order (January 19, 2021).
- On April 8th, 2021 the FCC issued a DA 21-394 to extend the waiver of the Rates Database to all applications for FY2021 and FY2022.
 - All applicants should use previous methods or a rate approved in the last 3 years in the determination of both Rural and Urban rates.
 - USAC conducted outreach, including all applicants who had already submitted applications for FY2021 (383 FRNs) to recall and resubmit applications.
 - Order also contained waivers and extensions for COVID-19 relief.

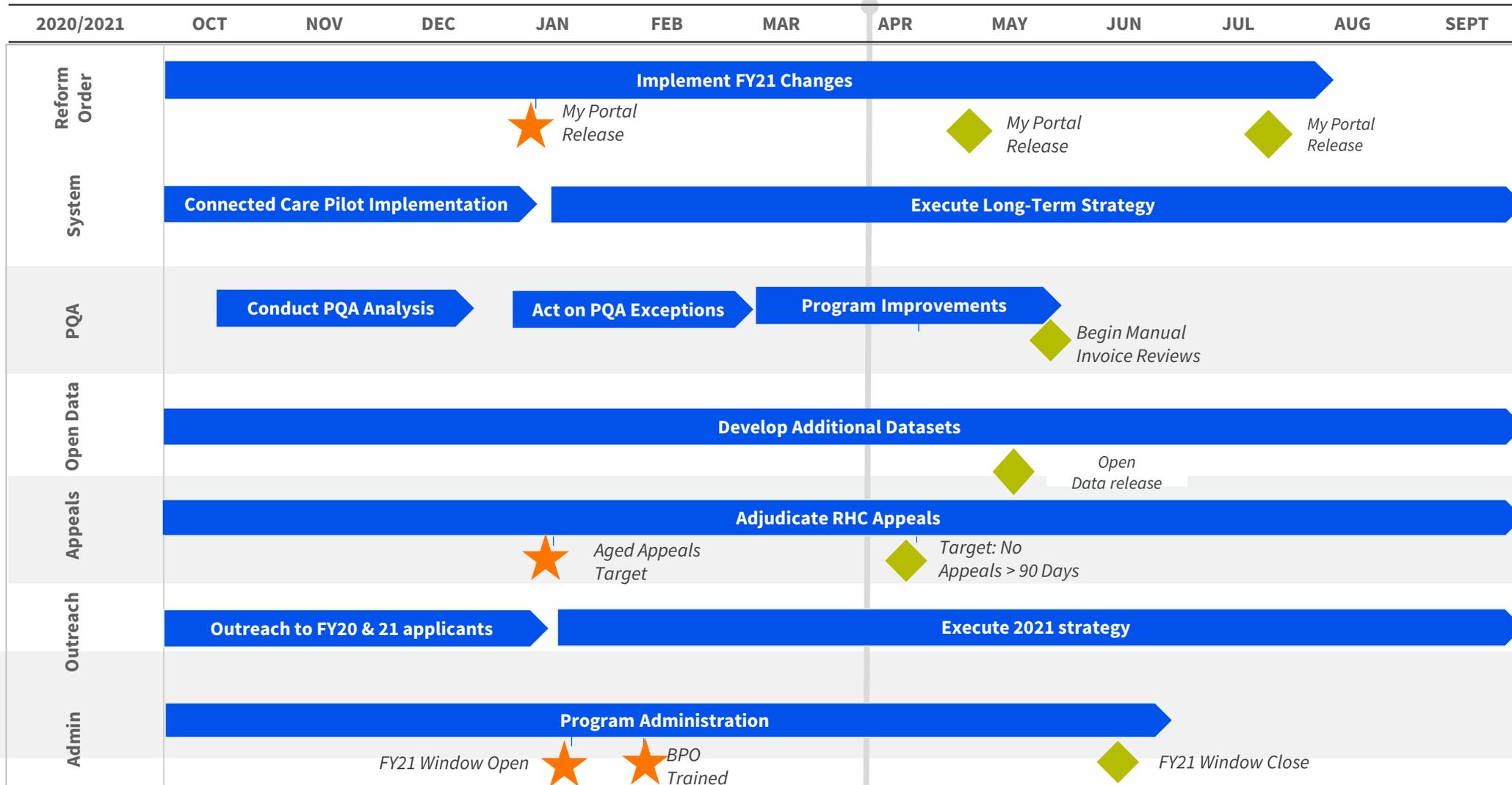
Outreach

- Supporting FY2021 Window Extension to June 1
- New Filing Window Office Hours
 - In March, the Healthcare Connect Fund (HCF) and Telecom applicants had the opportunity to participate in office hours and receive live assistance on program and filing window specific questions.
- First Virtual Site Visit of 2021
 - Rural Health Care (RHC) staff met virtually with an Alaska healthcare provider (HCP) account holder and clinic staff.
 - Walk-through of telehealth technology and discussion about the successes and challenges of telehealth medicine in rural areas.
 - A second virtual site visit is planned for May 19.

Reform Order and Supply Chain Order Updates

- Phase Two – Completed (Dec. 29, 2020)
 - Updated My Portal to support FY2021 competitive bidding process (July 1), five-tier rural classification, and funding proration based on priority (Sept. 1).
 - Phase Two release completed (Dec. 29), supporting multi-tier commitments and denials.
- Phase Three – On Track
 - My Portal functionality to be deployed April 30, to support Telecom site and service substitutions and declaration of assistance.
 - Additional release on July 30 to address Telecom and HCF service delivery deadline and invoice delivery deadline extensions.
 - Supply Chain Order: HCF Form 463 and Telecom invoice certification (April 30).

Roadmap



Milestone Legend

- At Risk
- On Track
- Completed

RHC IT High Level Project Status

- ✓ **Re-planned RHC releases to support Connected Care Pilot program.** In collaboration with the Federal Communications Commission (FCC), USAC IT has completed assessment of Connected Care Pilot program requirements. Re-planned RHC releases based on priority and business needs into two releases.

Active Projects	Project Status	Target Production Date	Project Updates and Risks
Combined Reform Order Release 3.2 and Connected Care Pilot Program Part 1: <ul style="list-style-type: none"> • Reform Order: Telecom site and service substitutions, Declaration of assistance • Connected Care Pilot Program: Modifications to FCC Form 461 and FCC Form 462 to support Connected Care applicants • Supply Chain Order: Update HCF Form 463 and Telecom invoice form certifications 	In Progress / On Track	April 30, 2021	Development in Progress

RHC IT High Level Project Status (Continued)

Active Projects	Project Status	Target Production Date	Project Updates and Risks
Combined Reform Order Release 3.2 and Connected Care Pilot Program Part 2: <ul style="list-style-type: none">Reform Order: Telecom and HCF Service Delivery Date and Invoicing Due Date extensionsConnected Care Pilot Program: Modifications for FCC Form 462 review and commitment functionality and modifications to FCC Form 463	In Progress / On Track	Tentative July 30, 2021	Requirement in Progress.



**Universal Service
Administrative Co.**