Universal Service Administrative Co.

Rural Health Care Committee

Briefing Book

Monday, April 25, 2022

12:40 p.m. – 1:15 p.m. Eastern Time

Available for Public Use

USAC Offices

700 12th Street NW, Suite 900

Washington, D.C. 20005

Universal Service Administrative Company
Rural Health Care Committee
Quarterly Meeting
Agenda

Monday, April 25, 2022
12:40 p.m. – 1:15 p.m. Eastern Time
USAC Offices
700 12th Street, N.W., Suite 900
Washington, D.C. 20005

	OPEN SESSION	*Estimated Duration in Minutes*

Chair	**a1.** Consent Items (each available for discussion upon request):
	   A. Approval of Rural Health Care Committee Meeting Minutes of January 24, 2022
	   B. Approval of moving all *Executive Session* items into *Executive Session*
		5

Mark	**a2.** Approval of Rural Health Care Support Mechanism 3rd Quarter 2022 Programmatic Budget and Demand Projection for the May 2, 2022 FCC Filing	5
Teleshia	**i1.** Information on Four USAC Internal Audit Division Rural Health Care Support Mechanism Beneficiary Audit Reports *(For Information Only)*	–
Mark	**i2.** Rural Health Care Business Update • Funding Year (FY) 2022 and FY2021 Applications Updates • Eligibility and Invoicing • Other Accomplishments • Plans for 2Q2022Roadmap • Systems Update o HCF Automation Releases and Plans for Next Quarter • Appendix: Metrics	20

	EXECUTIVE SESSION **Confidential – *Executive Session Recommended***	*Estimated Duration in Minutes*
Radha/ Mark	**i3.** Rural Health Care Business Update *(Continued)* • CEO Roundtable • Call Center Metrics	5

Next Scheduled USAC Rural Health Care Committee Meeting

Monday, July 25, 2022
USAC Offices, Washington, D.C.

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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 24, 2022 (*see* **Attachment A-1**).

    B. Approval of moving all *Executive Session* items into *Executive Session*:

        (1) **i3 –** Rural Health Care Business Update (*Continued*). USAC management recommends that this item be discussed in *Executive Session* because it may involve discussion of *specific internal controls or confidential company data* or *internal rules and procedures* concerning the administration of the universal service support mechanisms, where discussion of the matter in open session would result in *disclosure of confidential techniques and procedures* that would compromise program integrity.

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 24, 2022; and (2) discussion in *Executive Session* of the items noted above.

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

RURAL HEALTH CARE COMMITTEE MEETING
Monday, January 24, 2022

(DRAFT) MINUTES[1]

The quarterly meeting of the Rural Health Care Committee (Committee) of the USAC Board of Directors (Board) was held at USAC's offices in Washington, D.C. on Monday, January 24, 2022. A virtual meeting platform was available to the general public for *Open Session* to accommodate the need for increased physical distancing on site due to the COVID-19 pandemic. Dr. Kathy Wibberly, Committee Chair, called the meeting to order at 10:56 a.m. Eastern Time, with a quorum of seven of the eight Committee members present:

Fontana, Brent – Vice Chair – *by telephone*   Waller, Jeff – *by telephone*
Freeman, Sarah   Wein, Olivia
Sekar, Radha – Chief Executive Officer   Wibberly, Dr. Kathy – Chair
Wade, Dr. Joan – *by telephone*

Member of the Committee not present:

 Feiss, Geoff

Other Board members and officers of the corporation present:

Beyerhelm, Chris – Chief Administrative Officer – *by telephone*
Butler, Stephen – Vice President of Shared Services – *by telephone*
Buzacott, Alan – Member of the Board – *by telephone*
Chalk, Indra – Member of the Board – *by telephone*
Choroser, Beth – Member of the Board – *by telephone*
Davis, Craig – Vice President of Schools and Libraries
Domenech, Dr. Dan – Member of the Board
Delmar, Teleshia – Vice President of Audit and Assurance – *by telephone*
Gaither, Victor – Vice President of High Cost – *by telephone*
Garber, Michelle – Vice President and Chief Financial Officer
Gillan, Joe – Member of the Board
Gregory, Amber – Member of the Board – *by telephone*
Hughet, Pamela – Vice President of Lifeline – *by telephone*

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[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.

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Hutchinson, Kyle – Vice President of IT and Chief Information Officer – *by telephone*
Mason, Ken – Member of the Board – *by telephone*
Schell, Julie Tritt – Member of the Board – *by telephone*
Skrivan, Michael – Member of the Board – *by telephone*
Sweeney, Mark – Vice President of Rural Health Care

Others present:

NAME	COMPANY
Augustino, Steven – *by telephone*	Kelley Drye & Warren LLP
Nuzzo, Patsy	USAC
Pace, Regina – *by telephone*	USAC
Phillippi, Megan	USAC
Schrader, Theresa – *by telephone*	Broadband Legal Strategies, LLC
Thomas, Spencer – *by telephone*	Cone Health
Tiwari, Tanya	USAC
Williams, Erin	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 25 and 28; and December 16, 2021.

B. Approval of moving all *Executive Session* items into *Executive Session*:
(1)   **i3** – Rural Health Care Business Update (*Continued, if needed*). USAC management recommended that this item be discussed in *Executive Session* because it may involve discussion of *specific internal controls or confidential company data* or *internal rules and procedures* concerning the administration of the universal service support mechanisms; discussion of the matter in open session would result in *disclosure of confidential techniques and procedures* that would compromise program integrity**.**

(2)   **a4** – Approval of Rural Health Care Support Mechanism 2022 Annual Programmatic Budget. USAC management recommended that this item be discussed in *Executive Session* because this matter relates to USAC's *procurement strategy and contract administration*.

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

> **RESOLVED**, that the Rural Health Care Committee of the USAC Board of Directors hereby approves: (1) the Committee meeting minutes of October 25 and 28; and December 16, 2021; and (2) discussion in *Executive Session* of the items noted above.

a2. **Recommendation for Election of Committee Chair and Vice Chair.** Dr. Wibberly introduced Dr. Wade. As Chair of the Nominating Committee, Dr. Wade 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 2022 Programmatic Budget and Demand Projection for the January 31, 2022 Federal Communications Commission (FCC) Filing.** Mr. Sweeny presented this item for consideration. The presentation included a written report on USAC management's recommendations for the Rural Health Care Mechanism 2nd Quarter 2022 programmatic budget and demand projection for the January 31, 2022 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 2022 Rural Health Care Support Mechanism direct program budget of $5.62 million; and

> **RESOLVED FURTHER**, that the USAC Rural Health Care Committee, having reviewed at its meeting on January 24, 2022 the 2nd Quarter 2022 Rural Health Care Support Mechanism demand estimate of negative $7.62 million, hereby directs USAC staff to proceed with the required January 31, 2022 filing to the Federal Communications Commission on behalf of the Committee. USAC staff may make adjustments if the total variance for the Rural

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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.

i1.   **Information on One USAC Internal Audit Division Rural Health Care Support Mechanism Beneficiary Audit Report.** This item was provided for *information purposes only*. Dr. Wibberly noted that the Rural Health Care Audit Briefing Book would be made public and posted to the USAC website.

i2.   **Rural Health Care Business Update.** Mr. Sweeney presented PowerPoint slides to the Committee covering the following items:
    - Accomplishments
        - Update on FY2021 Application Processing
        - Outreach
        - HCF Automation First Release
    - Plans for Next Quarter
        - HCF Automation Releases
        - Outreach
    - Roadmap

At 11:18 a.m. Eastern Time, on a motion duly made and seconded, the Committee moved into ***Executive Session*** for the purpose of discussing confidential items. Only members of the Board and USAC staff were present.

EXECUTIVE SESSION

i3.   **Rural Health Care Business Update (*Continued*).** Mr. Sweeney presented a verbal update on appeals and invoicing.

a4.   **Approval of Rural Health Care Support Mechanism 2022 Annual Programmatic Budget.** Mr. Sweeny presented this item to the Committee 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 2022 annual programmatic budget for the Rural Health Care Support Mechanism of $17.81 million.

OPEN SESSION

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At 11:37 a.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 discussed item i3 and took action on item a4.

On a motion duly made and seconded, the Committee adjourned at 11:37 a.m. Eastern Time.

/s/ Olivia Wein
Secretary

Universal Service Administrative Company
Rural Health Care Committee Meeting

ACTION ITEM

Approval of Rural Health Care Support Mechanism
3rd Quarter 2022 Programmatic Budget and
Demand Projection for the May 2, 2022 FCC Filing

Action Requested

The Rural Health Care Committee (Committee) of the USAC Board of Directors (Board) is requested to approve the 3rd Quarter 2022 (2Q2022) programmatic budget and demand projection for the Rural Health Care Support Mechanism for submission to the Federal Communications Commission (FCC) in USAC's May 2, 2022 quarterly filing.

Discussion

On a quarterly basis, USAC is required to submit to the FCC each program's budget[1] and projected demand for the upcoming quarter.[2]

Funding Requirement

USAC estimates the 3Q2022 funding requirement for the Rural Health Care Support Mechanism as follows:

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[1] *See* 47 C.F.R. § 54.715(c).
[2] *See* 47 C.F.R. § 54.709(a)(3).

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Table A. Program Funding Requirement

(in millions)	2Q2022	Increase/ (Decrease)	3Q2022	Notes
Steady State:				
Program Funding Requirement	$145.19	$6.96	$152.15	See Note 1 and Table B
Adjustments	(145.19)	145.19	0.00	See Note 2
New Requirements:				
N/A	0.00	0.00	0.00	
Total Program Funding Requirement	**$0.00**	**$152.15**	**$152.15**	
Prior Period Adjustments (difference between projections and actuals):				
Billings	($6.56)	$6.48	($0.08)	
Bad Debt Expense	(1.06)	0.96	(0.10)	
Total Prior Period Adjustments	**($7.62)**	**$7.44**	**($0.18)**	
USAC Administrative Expenses[3]	$0.00	$7.28	$7.28	See Note 2 and Table D
Total Funding Requirement	**($7.62)**	**$166.87**	**$159.25**	

Note 1: On March 14, 2022, the Commission announced a funding cap for Funding Year 2022 of $637.72 million.[4] The Program Funding Requirement represents one quarter of the Funding Year 2022 cap, less USAC administrative costs. See Table B below for additional detail.

Note 2: On October 25, 2021, the Commission directed USAC to use available carry forward funds to reduce collections for 1Q2022 and subsequent quarters after first reserving sufficient funds to meet demand above the cap for Funding Year 2021, and reserving $50 million to carry forward to subsequent funding years. USAC anticipates the Commission will provide guidance after the window close regarding the amount to carry-forward to cover Funding Year 2022 Rural Health Care Program demand or to reduce collections.

Table B. Funding Year 2021 Program Funding Requirement

(in millions)	Fund Year 2022	Notes
Funding Year 2022 Cap	$637.72	See Note 1
Quarterly Funding Requirement for Funding Year 2022	$159.43	
Less USAC Administrative Costs, which are covered within the Funding Cap	(7.28)	
3Q2022 Program Funding Requirement	$152.15	

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[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 2022,* CC Docket No. 02-6, WC Docket No. 02-60, Public Notice, DA 22-271 (WCB 2022).

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Note 3: Table C is an annual schedule updated once a year for the April Board meeting. The Funding Year 2022 filing window will close on June 1, 2022. USAC anticipates the Commission will provide guidance after the window close regarding the amount to carry-forward in Table C to cover Funding Year 2022 Rural Health Care Program demand (to the extent necessary).

Table C. Funding Year 2022 Available Roll Forward

(in millions)	Net Change
Unused Funds	
Available Funds	$685.99
Disbursements	(480.59)
Reserved Funds	
a. Pending Applications to Process	503.05
b. Unliquidated Obligations (ULOs)	(309.30)
c. Appeals Reserve - USAC Appeals	(57.30)
d. Appeals Reserve - FCC Appeals	(13.34)
Total Unused Funds	**$328.50**

Based on the projected burn rate, USAC estimates the following 3Q2022 programmatic budget:

Table D. Quarterly Programmatic Budget

(in millions)	2Q2022 Budget	Increase/ (Decrease)	3Q2022 Budget	Notes
Direct Program Costs				
Employee Expenses	$1.73	($0.02)	$1.71	
Professional Services	1.49	(0.30)	1.19	
General & Administrative	0.00	0.01	0.01	See Note 4
Total Direct Program Costs	**$3.22**	**($0.31)**	**$2.91**	
Direct Assigned Costs				
Employee Expenses	$0.37	$0.01	$0.38	
Professional Services	1.79	(0.71)	1.08	
General & Administrative	0.24	0.00	0.24	See Note 4
Total Direct Assigned Costs	**$2.40**	**($0.70)**	**$1.70**	
Total Direct Program & Direct Assigned Costs	**$5.62**	**($1.01)**	**$4.61**	
Common Allocated Costs	**$2.20**	**$0.47**	**$2.67**	
Total Programmatic Budget	**$7.82**	**($0.54)**	**$7.28**	

Note 4: General & Administrative expenses include reference materials and software licenses.

A comparison of actual expenditures to the budget for the three months ending March 31, 2022 is provided in **Attachment 1.**

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Recommendation

USAC management recommends that the Committee approve the 3Q2022 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 2022 Rural Health Care Support Mechanism direct program budget of $4.61 million; and

> **RESOLVED FURTHER**, that the USAC Rural Health Care Committee directs USAC staff to submit a collection requirement of $4.61 million for Rural Health Care Support Mechanism administrative costs in the required May 2, 2022 filing to the Federal Communications Commission on behalf of the Committee; and

> **RESOLVED FURTHER**, that the USAC Rural Health Care Committee, having reviewed at its meeting on April 25, 2022 the 3rd Quarter 2022 Rural Health Care Support Mechanism demand estimate of $159.25 million, hereby directs USAC staff to proceed with the required May 2, 2022 filing to the Federal Communications Commission 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.

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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, 2022

($ in millions)	FTE Actual	FTE Budget	FTE Variance	YTD Actual	YTD Budget	Variance
Direct Program Costs						
Employee Expenses	48	51	3	$1.52	$1.65	$0.13
Professional Services (Note 5)				0.13	1.19	1.06
General & Administrative (Note 6)				0.00	0.01	0.01
Total Direct Program Costs				**$1.65**	**$2.85**	**$1.20**
Direct Assigned Costs						
Employee Expenses	8	8	0	$0.41	$0.37	($0.04)
Professional Services (Note 5)				1.06	1.15	0.09
General & Administrative (Note 6)				0.22	0.24	0.02
Total Direct Assigned Costs				**$1.69**	**$1.76**	**$0.07**
Total Direct Program & Direct Assigned Costs	**56**	**59**	**3**	**$3.34**	**$4.61**	**$1.27**
Common Allocated Costs (Note 7)				**$2.51**	**$2.09**	**($0.42)**
Total Programmatic Budget				**$5.85**	**$6.70**	**$0.85**

Note 5: Direct Program Professional Services include business process outsourcing (BPO) and rates database support. Direct Assigned Professional Services include beneficiary & contributor audit program audits and IT contract labor.

Note 6: General & Administrative expenses include reference materials and software licenses.

Note 7: 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.

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Rural Health Care Committee

Rural Health Care Business Update

Open Session

April 25, 2022

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Agenda

- Business Updates

  - Funding Year (FY) 2022 and FY2021 Applications Updates

  - Eligibility and Invoicing

  - Other Accomplishments

  - Plans for 2Q2022

- Roadmap

- Systems Update

  - HCF Automation Releases and Plans for Next Quarter

- Appendix: Metrics

FY2022 and FY2021 Application Updates

- FY2022 to date
  - Telecom - received 769 applications requesting $22 million
  - HCF - received 7,577 applications requesting $152 million
  - Window closes June 1, 2022

- FY2021 to date
  - Telecom- processed 99% of all applications. Completed reviews on 2,494 applications for $213 million
  - HCF- processed 99% of all applications. Completed 13,283 applications for $412 million

Data as of March 31, 2022

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Eligibility Determinations

- Telecom - 3 pending for processing as of March 31, 2022. Current year throughput:

  - Approved - 506

  - Denied - 1 due to non-responsiveness to an information request

  - Withdrawn - 2 at the applicant's request

- HCF - 180 pending for processing as of 3/31/22. Current year through-put:

  - Approved - 461

  - Denied - 63 due to the following categories (non-responsiveness, inability to substantiate entity type, non-profit status, duplicate)

  - Withdrawn - 42 at the applicant's request

- **Note:** Withdrawals are always at the applicant's request.

Changes to Invoice Review Process to Improve Internal Controls

- Implemented exception based manual reviews as a result of audit related findings.
- Conducted outreach to let the stakeholders know changes to the process and associated justification documentation requests.
- Conducted **1,451** invoice reviews in Calendar Year (CY) 2021 (May-Dec.) - approximately **10%** of the total invoices received during that time frame.
- Invoice reviews have detected the following results:
  - Noted invoicing requests totaling over **$3.9M** that had errors - USAC had to return the invoices for necessary corrections before disbursements were paid.
 - Denied invoice requests due to not being compliant with program rules - prevented **$510K** in improper payments.

Other Accomplishments

- Completed training on HCF Modernized system – "RHC Connect"

- Completed training and stand up of new BPO (Maximus) for FY2022 processing, and began processing Telecom applications on April 4.

- Conducted Telecom/HCF office hours & webinars

- Conducted FY2022 service provider training

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Plans for 2Q2022

- Close FY2022 applications window on June 1, 2022.

- Extend Help Desk hours for June 1 filing window close.

- Identify velocity plan that delivers commitments on 95% of workable applications by end of CY2022.

- Begin review of applications utilizing both My Portal and RHC Connect systems.

- Hold HCF/Telecom/CCPP office hours webinars.

  - HCF/Telecom - Help HCPs with application filing questions prior to June 1.

  - CCPP - Focus on helping applicants submit the first funding request by September 16.

- Host 2Q2022 RHC Stakeholders Group Touch Base webinar and survey – TBD.

  - Obtain feedback about RHC Connect and inform them of program updates.

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Roidmap
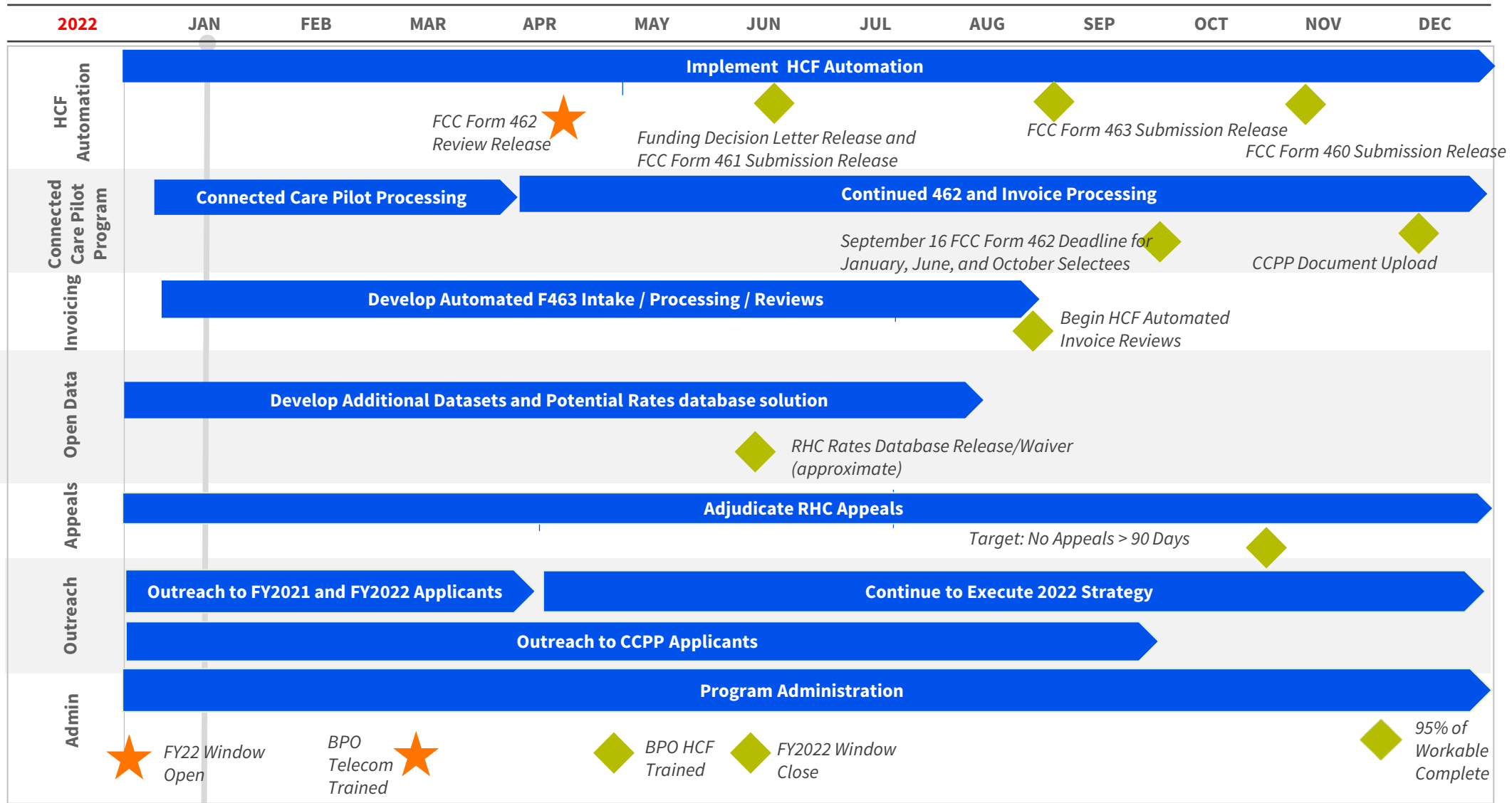
Appendix A: Metrics
RHC HCF Pre-Commitment (Calendar year snapshot as of March 31, 2022)

			Q1	Q2	Q3	Q4	Total
Requested	2022	Demand	5,378	-	-	-	5,378
		Requested Dollars	$129,233,827	-	-	-	$129,233,827
		Avg. Days Outstanding	52	-	-	-	52
	2021	Demand	7,214	6,053	1	31	13,299
		Requested Dollars	$105,790,960	$310,471,622	$2,422	$838,826	$417,103,830
		Avg. Days Outstanding	303	303	183	141	271
Reviewed	2022	Reviewed Apps.	3	-	-	-	3
		Reviewed Dollars	$1,219,089	-	-	-	$1,219,089
	2021	Reviewed Apps.	2	243	5,766	6,539	12,550
		Reviewed Dollars	$16,159	$74,936,548	$92,883,289	$160,531,278	$328,367,274

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Appendix A: Metrics (Continued)

RHC HCF Post-Commitment (Calendar year snapshot as of March 31, 2022)

			Q1	Q2	Q3	Q4	Total
Submitted	2022	Invoice Counts	-	-	-	-	-
		Invoice Dollars	-	-	-	-	-
	2021	Invoice Counts	-	-	55	489	544
		Invoice Dollars	-	-	$234,902	$2,048,390	$2,167,297
Disbursed	2022	Invoice Counts	-	-	-	-	-
		Invoice Dollars	-	-	-	-	-
	2021	Invoice Counts	-	-	-	358	358
		Invoice Dollars	-	-	-	$3,636,856	$3,636,856

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Appendix A: Metrics (Continued)

RHC Telecom Pre-Commitment (Calendar year snapshot as of March 31, 2022)

			Q1	Q2	Q3	Q4	Total
Requested	2022	Demand	765	-	-	-	765
		Requested Dollars	$21,737,814	-	-	-	$21,737,814
		Avg. Days Outstanding	-	-	-	-	-
	2021	Demand	373	2,129	-	-	2,502
		Requested Dollars	$10,061,559	$217,172,776	-	-	$227,234,335
		Avg. Days Outstanding	-	303	-	-	303
Reviewed	2022	Reviewed Apps.	-	-	-	-	-
		Reviewed Dollars	-	-	-	-	-
	2021	Reviewed Apps.	-	1	1,059	985	2,045
		Reviewed Dollars	-	$21,766	$17,691,940	$108,642,217	$126,355,923

Appendix A: Metrics (Continued)

RHC Telecom Post-Commitment (Calendar year snapshot as of March 31, 2022)

			Q1	Q2	Q3	Q4	Total
Submitted	2022	Invoice Counts	-	-	-	-	-
		Invoice Dollars	-	-	-	-	-
	2021	Invoice Counts	-	-	9	47	56
		Invoice Dollars		-	$1,368,212	$34,977,995	$34,977,995
Disbursed	2022	Invoice Counts	-	-	-	-	-
		Invoice Dollars	-	-	-	-	-
	2021	Invoice Counts	-	-	8	41	49
		Invoice Dollars	-	-	$1,059,300	$21,954,776	$21,954776

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