The importance of affordable access to high quality broadband for healthcare continues to grow at a rapid pace. Unfortunately, broadband access at quality levels is often not available or affordable, especially for small or very rural healthcare providers (HCPs). Naturally, this can put certain providers at a disadvantage as they seek to upgrade their IT infrastructure to provide better levels of IT-assisted care.

The Challenge
Without reliable, high-speed connectivity, many rural communities are effectively barred from adopting next-generation technologies, limiting their effectiveness in reaching patients across remote areas. From utilizing cloud-based technologies to offering telemedicine services, an ever-increasing reliance on high performance networks places HCPs and patients at risk and at a severe disadvantage within these underserved communities. Unless HCPs can find a cost-effective way to achieve the robust connectivity required in today’s digital health era, their IT services will unfortunately always be a step behind.

The Juniper Networks Solution
With underlying infrastructure playing such a critical role in driving improved patient outcomes across the continuum of care, Juniper Networks is committed to helping HCPs navigate federally funded programs that yield subsidies for eligible telecommunications equipment and/or services to improve the quality of healthcare for patients throughout their rural communities.

History of FCC Funding for Healthcare
Since 1998, the Federal Communications Commission (FCC) has provided universal service subsidies to offset the telecommunications costs of public or non-profit HCPs serving rural areas of the country. This program typically helped reduce the costs for plain telephone service and for T1 lines or greater. The program subsidy was based on the differential cost between urban and rural rates for equivalent services. In 2003, the FCC expanded the program to partially offset Internet Access Program costs with a flat-rate subsidy of 25%. Unfortunately, these programs were minimally utilized and only a small portion of the $400 million in annual funding was actually consumed.

In 2007, the FCC launched a limited pilot program intended to increase program utilization by exploring ways to fund broadband networks. This program offered an 85% flat rate subsidy and ultimately committed $364 million to fund regional and statewide...
broadband networks in 39 states. These pilot projects ranged from statewide networks covering hundreds of HCPs to networks serving just a few HCPs in a small region.

Based on lessons learned from the pilot program, in 2012, the FCC created the Healthcare Connect Fund (HCF) which provided a subsidy of 65% for eligible expenses related to broadband connectivity to both individual rural HCPs and consortia, which can include non-rural HCPs (if the consortium has a majority of rural sites). The HCF program replaces the Internet Access Program but exists alongside the Telecommunications Program, which provides reduced rates for voice services for the use of telemedicine and telehealth. However, the FCC expects that many HCPs currently receiving support under the Telecommunications Program will most likely migrate to the HCF program.

**Healthcare Connect Fund Program Advantage**

For those HCPs that have not taken advantage of the HCF program, there is no better time to start to understand the tremendous value that exists within the program. From the healthcare industry’s point of view, one of the most important features of the program is the ability of urban non-profit and public hospitals with less than 400 beds to enjoy substantial subsidies by joining a buying consortium in which rural not-for-profit or public hospitals comprise a majority of the members (50% or greater). Those HCPs who are eligible and apply for the subsidized funds will receive a 65% discount on eligible expenses.

The HCF program can be used for high-speed internet access or private networks (e.g., MPLS) provided that these transmission services are used to transport healthcare data, in such use cases as electronic health records (EHRs), health information exchanges (HIEs), telemedicine, etc.

Eligible equipment and services can include switches, routers, and firewalls and the costs of designing, installing, and managing network equipment.

**Juniper Networks and MiICTA Membership Advantage**

MiICTA, formerly the Michigan Collegiate Telecommunications Association, is headquartered in Saginaw, MI and serves thousands of members nationwide. MiICTA focuses on providing quality products and services to its members at outstanding discounts, and its growth has enabled members to access better volume pricing as well as receive a continuous stream of information as it relates to technology changes and legislations that may be of impact.

Juniper Networks is pleased to announce a partnership with MiICTA to offer HCPs a quick route to procuring equipment and services for their network needs without the requirement to solicit a bid (USAC Form 461). Those HCPs who want to take advantage of the program can now avoid the bidding process by leveraging Juniper’s MiICTA Master Service Agreement (MSA), eliminating administrative costs and timelines with going out to bid.

To learn more about the program, please contact Juniper’s Healthcare Practice Leader, Matt Roberts (mattr@juniper.net).

**About Juniper Networks**

Juniper Networks brings simplicity to networking with products, solutions and services that connect the world. Through engineering innovation, we remove the constraints and complexities of networking in the cloud era to solve the toughest challenges our customers and partners face daily. At Juniper Networks, we believe that the network is a resource for sharing knowledge and human advancement that changes the world. We are committed to imagining groundbreaking ways to deliver automated, scalable and secure networks to move at the speed of business.