

**BEFORE THE PUBLIC SERVICE COMMISSION
OF THE STATE OF MISSOURI**

Application of American Broadband and)
Telecommunications Company for Designation)
as an Eligible Telecommunications Carrier for the)
Purpose of Offering Lifeline Service on a)
Wireless Basis)

File No. RA-2014-0225

STAFF RECOMMENDATION

COMES NOW the Staff of the Missouri Public Service Commission and for its Response, states as follows:

1. On February 14, 2014, American Broadband and Telecommunications Company (“the Company”) requested designation by the Missouri Public Service Commission (“Commission”) as an eligible telecommunications carrier (“ETC”) for the purpose of providing prepaid wireless services in Missouri supported by the federal Universal Service Fund’s Lifeline program.

2. For the reasons set forth more fully in the attached Memorandum, the Staff believes it appropriate to grant the requested ETC status.

3. The Company has an obligation to update its application with new information when any statement therein becomes untrue or could mislead the reader to an inference that is untrue.

WHEREFORE, the Staff recommends that the Company be granted ETC designation, in compliance with the Commission’s rules concerning the provision of wireless Lifeline Service to low-income customers.

Respectfully submitted,



Colleen M. Dale
Senior Counsel
Missouri Bar No. 31624
Attorney for the Staff of the
Missouri Public Service Commission
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CERTIFICATE OF SERVICE

I hereby certify that copies of the foregoing have been mailed, hand-delivered, transmitted by facsimile or electronically mailed to all counsel of record this 10th day of June, 2014.



MEMORANDUM

To: Official Case File
Case No. RA-2014-0225

Company Name: American Broadband and Telecommunications Company
d/b/a American Assistance

From: Dana Parish
Telecommunications Unit

John Van Eschen (6/10/2014) Cully Dale (6/10/2014)
Telecommunications Unit Staff Counsel's Office

Subject: Staff's Recommendation to Grant ETC Status

Date: 6/10/2014

Date ETC application was filed:	2/14/2014 and amended app filed on 6/9/2014
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Full name of Applicant:	American Broadband and Telecommunications Company d/b/a American Assistance
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The Commission Staff (Staff) has reviewed the Company's ETC application and responses to Staff data requests.

Basic Information Regarding Applicant <i>(check as appropriate)</i>				
Applicant's technology is:	Landline		Wireless	x
Applicant meets facility-based requirements?	Facility-Based		Reseller	x
If reseller, FCC has approved Lifeline compliance plan?	Yes	x	Not applicable	
Applicant's Lifeline service fees:	Monthly Fee		Free	x

In Staff's opinion the Company has adequately met all ETC application requirements identified in Attachment A. Staff recommends the Commission grant ETC status to the Company, applicable only to the full name of the applicant as indicated above. The Staff further recommends the Commission's order also indicate the ETC designation is subject to the following information

Purpose for Receiving ETC Status	<i>(check "X" as appropriate)</i>
Solely for the purpose of receiving Lifeline support.	x
Purpose of receiving Lifeline and high-cost support.	

Proposed Service Area	
State-wide	Company will provide service via resale provided in non-rural geographic areas throughout Missouri where Sprint provides coverage.
Other <i>(describe)</i>	

If ETC status is granted should applicant be authorized by the MoUSF Board to receive MoUSF support?	Yes		No	x
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Checklist Items		Citation						
Basic Application Requirements	Complies with application requirements in 4 CSR 240-2.060 specifically: <ul style="list-style-type: none"> • Proper authorization from Missouri Secretary of State. • Contact information. • Provides statement indicating whether applicant has any pending action of final unsatisfied judgments against them by a state or federal agency or court involving customer service or rates within past 3 years. • Signed affidavit that verifies all information is true, accurate & correct in the application. 	See application & amended application (DR 0001.2)						
	Is the applicant already certificated or registered by the Missouri PSC to provide local voice service in Missouri? <i>(check "X" in appropriate box below)</i>							
	<table border="1"> <tr> <td></td> <td> Yes. If yes, the applicant must be compliant in: <ul style="list-style-type: none"> • Paying MoUSF assessment. • Paying MoPSC assessment. • Paying Relay MO assessment. • Annual report submissions. </td> </tr> <tr> <td>x</td> <td>No, the applicant is not certificated or registered by the Missouri PSC.</td> </tr> </table>		Yes. If yes, the applicant must be compliant in: <ul style="list-style-type: none"> • Paying MoUSF assessment. • Paying MoPSC assessment. • Paying Relay MO assessment. • Annual report submissions. 	x	No, the applicant is not certificated or registered by the Missouri PSC.			
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	x	No, the applicant is not certificated or registered by the Missouri PSC.						
Has the Missouri PSC already granted ETC status to the company?								
<table border="1"> <tr> <td></td> <td> Yes. If yes, cite the case and in space below explain the current ETC status of the company: </td> </tr> <tr> <td>x</td> <td>No, the applicant has not previously received ETC status from the Missouri PSC.</td> </tr> </table>		Yes. If yes, cite the case and in space below explain the current ETC status of the company:	x	No, the applicant has not previously received ETC status from the Missouri PSC.				
	Yes. If yes, cite the case and in space below explain the current ETC status of the company:							
x	No, the applicant has not previously received ETC status from the Missouri PSC.							
Disciplinary History	Identifies any individual or entity having a 10% or more ownership interest in the applicant, and all managers, officers and directors or any person exerting managerial control over applicant's day-to-day operations, policies, service offerings and rates.	DR 0001, #9						
	Does the Applicant share common ownership or management with other companies? <i>(check appropriate box below)</i>							
	<table border="1"> <tr> <td></td> <td>Yes</td> </tr> <tr> <td>x</td> <td>No</td> </tr> </table>		Yes	x	No			
		Yes						
x	No							
<table border="1"> <tr> <th colspan="2">If yes, provide the following information:</th> </tr> <tr> <th>Companies with common ownership or management:</th> <th>Indicate if identified company has ever received federal or state USF funding.</th> </tr> <tr> <td>•</td> <td>•</td> </tr> </table>		If yes, provide the following information:		Companies with common ownership or management:	Indicate if identified company has ever received federal or state USF funding.	•	•	DR 0001, #10
If yes, provide the following information:								
Companies with common ownership or management:	Indicate if identified company has ever received federal or state USF funding.							
•	•							

Service Provisioning	<p>Have any matters been brought forth within the last ten years by any state, federal regulatory or law enforcement agency against the applicant or against any person or entity that holds more than 10% ownership interest in the applicant? (check appropriate box below)</p> <table border="1"> <tr> <td>x</td><td>No.</td></tr> <tr> <td></td><td> Yes. If yes, provide below the following information for each matter (date, agency and general description of the matter): <ul style="list-style-type: none"> </td></tr> </table>	x	No.		Yes. If yes, provide below the following information for each matter (date, agency and general description of the matter): <ul style="list-style-type: none"> 	DR 0001, #11				
x	No.									
	Yes. If yes, provide below the following information for each matter (date, agency and general description of the matter): <ul style="list-style-type: none"> 									
<p>Adequately explains the applicant's proposed service. Basic service characteristics:</p> <table border="1"> <tr> <td>(check applicable boxes)</td><td>Wireless</td><td>Landline</td></tr> <tr> <td>No charge</td><td>x</td><td></td></tr> <tr> <td>Monthly Fee</td><td></td><td></td></tr> </table> <p>If applicant intends to offer a free wireless Lifeline service the applicant has adequately explained:</p> <ul style="list-style-type: none"> How the company will ensure USF is not received until the subscriber activates the service. How the company will ensure support will only be received if the subscriber has used the service sometime during a 60 consecutive day time period. Subscriber will be de-enrolled if fails to use the service for 60 consecutive days. 	(check applicable boxes)	Wireless	Landline	No charge	x		Monthly Fee			DR 0001, #20
(check applicable boxes)	Wireless	Landline								
No charge	x									
Monthly Fee										
<p>Applicant's proposed service area is adequately described.</p>	DR 0001, #4									
<p>Does the applicant qualify as a facility-based provider?</p> <table border="1"> <tr> <td></td><td>Yes. If yes, describe general facilities:</td></tr> <tr> <td>x</td><td> No. If no then ensure: <ul style="list-style-type: none"> FCC has <u>approved</u> company's compliance plan. Applicant has ensured customers will have access to 911 services. </td></tr> </table>		Yes. If yes, describe general facilities:	x	No. If no then ensure: <ul style="list-style-type: none"> FCC has <u>approved</u> company's compliance plan. Applicant has ensured customers will have access to 911 services. 	DR 0001, #2					
	Yes. If yes, describe general facilities:									
x	No. If no then ensure: <ul style="list-style-type: none"> FCC has <u>approved</u> company's compliance plan. Applicant has ensured customers will have access to 911 services. 									
	<p>Advertising commitments.</p> <ul style="list-style-type: none"> Provides a statement certifying the company will advertise the availability of its supported service. Provides reasonable explanation of how the applicant will advertise. If advertising by direct mail the company has provided a reasonable explanation of how it will target these mailings. Were Missouri-specific advertising examples provided? <table border="1"> <tr> <td></td><td>Yes</td></tr> <tr> <td>x</td><td>No</td></tr> </table>		Yes	x	No	DR 0001.2 Application paragraph 32				
	Yes									
x	No									

	Demonstrates can remain functional in emergency situations.	Application paragraph 35						
	Provides statement will satisfy applicable consumer protection, consumer privacy and service quality standards and provides a reasonable list of applicable standards. (<i>Wireless applicants must agree to comply with Cellular and Internet Assoc.'s Consumer Code for Wireless Service.</i>)	Application paragraph 36						
	Will applicant maintain information about service provisioning and rates in a (check appropriate box below): <table border="1" data-bbox="159 541 1325 655"> <tr> <td>Tariff</td><td>X (both tariff and website)</td></tr> <tr> <td>Informational Filing</td><td></td></tr> <tr> <td>Website (indicate website)</td><td>http://www.americanassistance.com</td></tr> </table>	Tariff	X (both tariff and website)	Informational Filing		Website (indicate website)	http://www.americanassistance.com	Application paragraph 24 DR 0001, #3
Tariff	X (both tariff and website)							
Informational Filing								
Website (indicate website)	http://www.americanassistance.com							
	Provides a reasonable explanation of: <ul style="list-style-type: none"> How the applicant intends to provide service throughout the proposed service area, including whereby the applicant lacks facilities or network coverage. How service will be provided in a timely manner to requesting customers. 	DR 0001, #4						
	Commits to maintain a record of complaints, including an agreement to make such records available upon request to the commission staff.	DR 0001, #6						
	Commits to remit required, collected 911 revenues to local authorities.	DR 0001, #7						
	Provides a reasonable demonstration the applicant is financially viable and technically capable of providing voice telephony service.	Application paragraph 39						
	Does the applicant intend to provide access to directory assistance services, operator services and interexchange services? <table border="1" data-bbox="159 1213 685 1293"> <tr> <td>X</td><td>Yes</td></tr> <tr> <td></td><td>No</td></tr> </table>	X	Yes		No	DR 0001, #8		
X	Yes							
	No							
Lifeline/Disabled Program Compliance	Certifies all Lifeline funding will flow through to the subscriber.	DR 0001, #17						
	Commits to conduct business only through the name identified in the application and will not use any additional service or brand names. (<i>If company's name includes a d/b/a name then the company can either use the company's full name and/or the d/b/a name. For instance "ABC Company d/b/a Company W" can use that full name or simply "Company W". The company cannot solely use the parent name "ABC Company" or a name different from d/b/a name.</i>)	DR 0001.2						
	Commits to comply with all requirements associated with the Lifeline program contained in 47 CFR Part 54 Subpart E.	DR 0001, #14						
	Commits to comply with all Lifeline requirements established by the Missouri PSC even if solely funded by federal USF.	DR 0001, #15						
	Will the applicant seek support from the MoUSF? (check appropriate box below)	DR 0001, #16						

	<table border="1"> <tr> <td></td> <td>Yes. If yes, ensure applicant only seeks MoUSF for landline service.</td> </tr> <tr> <td>x</td> <td>No.</td> </tr> </table>		Yes. If yes, ensure applicant only seeks MoUSF for landline service.	x	No.	
	Yes. If yes, ensure applicant only seeks MoUSF for landline service.					
x	No.					
Does applicant intend to participate in the Disabled program? <i>(check appropriate box below)</i>		DR 0001, #16				
	<table border="1"> <tr> <td></td> <td>Yes. If yes, ensure applicant only seeks MoUSF for landline service.</td> </tr> <tr> <td>x</td> <td>No.</td> </tr> </table>			Yes. If yes, ensure applicant only seeks MoUSF for landline service.	x	No.
	Yes. If yes, ensure applicant only seeks MoUSF for landline service.					
x	No.					
Adequately demonstrates how the applicant will ensure that the full amount of Lifeline or Disabled support will be passed through to the qualifying low-income consumer.		DR 0001, # 17				
Commits to use only a board approved Lifeline or Disabled application form.		DR 0001, #18				
Adequately explains how the applicant will initiate Lifeline or Disabled service to a subscriber. Explanation should include how company will ensure: <ul style="list-style-type: none"> • The subscriber meets eligibility requirements. • The subscriber's identity and address are correct. • Only one Lifeline or Disabled discount is provided to a household. 		DR 0001, #19				
Adequately explains how the applicant intends to annually verify a customer's continued eligibility for the Lifeline or Disabled program, including what action will be taken if a subscriber fails to adequately respond or is no longer eligible for support.		DR 0001, #21				
Use of independent contractors to sign-up Lifeline subscribers <i>(check appropriate box below):</i> <table border="1"> <tr> <td>Intends to use independent contractors to sign-up Lifeline subscribers. If so then applicant also commits to take full responsibility for these contractors.</td> <td></td> </tr> <tr> <td>Does not intend to use independent contractors.</td> <td>x</td> </tr> </table>		Intends to use independent contractors to sign-up Lifeline subscribers. If so then applicant also commits to take full responsibility for these contractors.		Does not intend to use independent contractors.	x	DR 0001, #22 DR 0001.1
Intends to use independent contractors to sign-up Lifeline subscribers. If so then applicant also commits to take full responsibility for these contractors.						
Does not intend to use independent contractors.	x					
Adequately demonstrates how it will monitor its employees, agents or contractor to ensure they comply with all applicable laws and rules concerning Lifeline or Disabled Programs.		DR 0001.1				
Commits to notify the commission of any changes to company contact information.		DR 0001, #23				
Provides statement the applicant complies with all reporting and assessment requirements (if certificated or registered with the commission).		DR 0001, #24				
Provides statement the applicant is compliant with contribution obligations to the FUSF.		DR 0001, #25				
FCC waivers <i>(check appropriate box below):</i> <table border="1"> <tr> <td>Applicant has obtained waivers from FCC of certain ETC requirements and provided a copy of the FCC's decision.</td> <td></td> </tr> <tr> <td>Applicant has not sought any waivers from the FCC regarding ETC requirements.</td> <td>x</td> </tr> </table>		Applicant has obtained waivers from FCC of certain ETC requirements and provided a copy of the FCC's decision.		Applicant has not sought any waivers from the FCC regarding ETC requirements.	x	DR 0001, #26
Applicant has obtained waivers from FCC of certain ETC requirements and provided a copy of the FCC's decision.						
Applicant has not sought any waivers from the FCC regarding ETC requirements.	x					