



14450 Burnhaven Drive
Burnsville, MN 55306

January 31, 2019

Ms. Kavita Kale, Executive Secretary
Michigan Public Service Commission
7109 West Saginaw Highway
Lansing, MI 48917

In the Matter, On the Commission's)
Own Motion, to Receive Eligible)
Telecommunications Carrier)
Filings for 2018)

Case No. U-20357

Dear Ms. Kale,

Frontier North Inc., Frontier Midstates Inc., and Frontier Communications of Michigan, Inc., hereby provide a copy of their Annual Lifeline Eligible Telecommunications Carrier Certification Forms (FCC Form 555) in compliance with 47 CFR 54.416 as adopted by the Federal Communications Commission (FCC) in its Lifeline Reform Order, FCC 12-11, released February 6, 2012.

Section 54.416(b) requires eligible telecommunications carriers (ETCs) to annually provide the results of their recertification efforts performed pursuant 47 CFR 54.410(f) to the FCC and the Universal Service Administrative Company (USAC). ETCs are also required to provide the results of their recertification efforts to state commissions for subscribers residing in those states where the state designated the ETC.

If you have any questions, please contact me at 952-435-1378 or Michelle.schlie@ftr.com.

Respectfully Submitted,

Michelle Schlie
Sr. Analyst – Regulatory Affairs

Attachments

cc: Robert Stewart, Frontier

Annual Lifeline Eligible Telecommunications Carrier Certification Form All carriers must complete all or portions of all sections Form must be submitted to USAC and filed with the Federal Communications Commission

IMPORTANT: PLEASE READ INSTRUCTIONS FIRST

Deadline: January 31st (Annually)

313033		143004780
Study Area Code (SAC)		Service Provider Identification Number (SPIN)
<i>(An Eligible Telecommunications Carrier (ETC) must provide a certification form for each SAC through which it provides Lifeline service).</i>		
2018	MI	Frontier Midstates Inc.
Recertification Year	State	ETC Name
N/A		FRONTIER COMMUNICATIONS CORPORATI
DBA, Marketing, or Other Branding Name		Holding Company Name
<i>(If same as ETC name, list "N/A" Do not leave blank)</i>		<i>(If same as ETC name, list "N/A" Do not leave blank)</i>

Does the reporting company have affiliated ETCs?

Yes No

Provide a list of all ETCs that are affiliated with the reporting ETC, using page 4 and additional sheets if necessary. Affiliation shall be determined in accordance with Section 3(2) of the Communications Act. That Section defines "affiliate" as "a person that (directly or indirectly) owns or controls, is owned or controlled by, or is under common ownership or control with, another person." 47 U.S.C. § 153(2). See also 47 C.F.R. § 76.1200.

Affiliated ETC's SAC	Affiliated ETC's Name
-- See attached worksheet -	

ETCs Subject to the Non-Usage Requirements

All ETCs must complete the appropriate check-box. ETCs that do not assess and collect a monthly fee from their Lifeline subscribers are subject to the non-usage requirements. ETCs subject to the non-usage requirements must indicate the number of subscribers de-enrolled by month in Section 4. ETCs that only assess a fee but do not collect such fees are subject to the non-usage requirements and must also indicate the number of subscribers de-enrolled by month.

Is the ETC subject to the non-usage requirements? Yes No

If yes, record the number of subscribers de-enrolled for non-usage by month in Block Q below.

P	Q
Month	Subscribers De-Enrolled for Non-Usage
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0
Total Subscribers	0

For purposes of this filing, an officer is an occupant of a position listed in the article of incorporation, articles of formation, or other similar legal document. An officer is a person who occupies a position specified in the corporate by-laws (or partnership agreement), and would typically be president, vice president for operations, vice president for finance, comptroller, treasurer, or a comparable position. If the filer is a sole proprietorship, the owner must sign the certification.

Initial Certification *All ETCs must complete this section*

I certify that the company listed above has certification procedures in place to:

- A) Review income and program-based eligibility documentation prior to enrolling a consumer in the Lifeline program, and that, to the best of my knowledge, the company was presented with documentation of each consumer's household income and/or program-based eligibility prior to his or her enrollment in Lifeline; and/or
- B) Confirm consumer eligibility by relying upon access to a state database and/or notice of eligibility from the state Lifeline administrator prior to enrolling a consumer in the Lifeline program.

I am an officer of the company named above. I am authorized to make this certification for the Study Area Code listed above.

JCM
Initial _____

Minimum Service Level

I certify that the company listed above is in compliance with the minimum service levels set forth in the 47 CFR Section 54.408.

I am an officer of the company named above. I am authorized to make this certification for the SACs listed above.

Initial JCM

Annual Recertification

Do not leave empty blocks. If an ETC has nothing to report in a block, enter a zero.

Report the number of Lifeline subscribers due for recertification by month (January-December)

- A. Subscribers eligible for recertification by anniversary month
- B. Subscribers de-enrolled prior to recertification attempts
- C. Total number of subscribers ETC is responsible for recertifying (A-B)

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
A.	6	7	7	2	4	6	2	4	5	5	11	4	63
B.	0	0	0	0	0	0	0	0	0	0	0	0	0
C.	6	7	7	2	4	6	2	4	5	5	11	4	63

Recertification Methods

State of federal database

- D. Subscribers recertified through ETC access to state or federal database by anniversary month

Report the number of eligible subscribers verified through access to a state or federal database.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
D.	0	0	0	0	0	0	0	0	0	0	0	0	0

- E. Name of the data source(s) used to verify consumer eligibility:

ETC Direct Contact

- F. Subscribers contacted by ETC directly to recertify (You may also use this section to report subscriber initiated recertifications).

Report the number of Lifeline subscribers the ETC contacted directly to obtain recertification of eligibility

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
F.	0	0	0	0	0	0	0	0	0	0	0	0	0

- G. Subscribers who failed to recertify through ETC direct outreach attempt

Report the number of Lifeline subscribers de-enrolled due to ineligibility or non-response to the ETC's outreach attempt.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
G.	0	0	0	0	0	0	0	0	0	0	0	0	0

H. Subscribers who recertified through ETC direct outreach attempt

Report the number of Lifeline subscribers that successfully recertified through ETC's outreach attempt.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
H.	0	0	0	0	0	0	0	0	0	0	0	0	0

Third Party

I. Subscribers whose eligibility was reviewed by state administrator, third party administrator, or USAC

Report the number of Lifeline subscribers contacted by a state administrator, third party administrator, or USAC for the purpose of recertification.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
I.	6	7	7	2	4	6	2	4	5	5	11	4	63

J. Name of third party administrator used to verify subscriber eligibility:

USAC

K. Subscribers de-enrolled as a result of a third party recertification attempt

Report the number of subscribers as a result of ineligibility or non-response to outreach from a state administrator, third party administrator, or USAC.

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
K.	0	1	2	0	2	0	1	1	2	1	3	1	14

L. Subscribers who recertified through a state administrator, third party administrator, or USAC's recertification effort

Report the number of subscribers that recertified through a request from a state administrator, third party administrator, or USAC

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year Total
L.	6	6	5	2	2	6	1	3	3	4	8	3	49

Certification:

Recertification Method: Database

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on a database. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed above.

Initial _____

Recertification Method: ETC

I certify that the company listed above has procedures in place to recertify the continued eligibility of all of its Lifeline subscribers, and that, to the best of my knowledge, the company obtained signed certifications from all subscribers attesting to their continuing eligibility for Lifeline. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed above.

Initial _____

Recertification Method: Third Party

I certify that the company listed above has procedures in place to recertify consumer eligibility by relying on an administrator. I am an officer of the company named above. I am authorized to make this certification for the SAC(s) listed above.

Initial JCM

No Subscribers

I certify that my company did not claim federal low income support for any Lifeline subscribers for the current Form 555 data year. I am an officer of the company named above. I am authorized to make this certification for the SAC listed above.

Initial _____

$M = (G+K)$	$N = (D+F+I)$	$O = M/N*100$
Total number of subscribers de-enrolled as a result of recertification	Total number of subscribers ETC is responsible for recertifying	Percent of subscribers due for recertification who were de-enrolled
14	63	22.22%

Signature Block

By signing below, I certify that the company listed above is in compliance with all federal Lifeline certification procedures. I am an officer of the company named above. I am authorized to make this certification for the Study Area Code (SAC) listed above.

Signed,

Jessica C. Matushek Director, Accour
Signature of Officer

jessica.matushek@ftr.com
Email Address of Officer

Christine Burke
Person Completing This Certification Form

Jessica C. Matushek Director, A
Printed Name and Title of Officer

Jan 29, 2019
Date

585-777-6719
Contact Phone Number

Affiliated ETCs

SAC	Name
135200	The Southern New England Telephone Company
150072	Frontier Communications of AuSable Valley Inc.
150100	Frontier Communications of New York Inc.
150110	OGDEN TELEPHONE COMPANY
150121	Frontier Telephone of Rochester Inc.
150122	Frontier Communications of Seneca Gorham Inc.
150128	Frontier Communications of Sylvan Lake Inc.
154532	CITIZENS TELECOMMUNICATIONS COMPANY OF N
154533	CITIZENS TELECOMMUNICATIONS COMPANY OF N
154534	CITIZENS TELECOMMUNICATIONS COMPANY OF N
170149	Frontier Communications of Breezewood LLC
170152	Frontier Communications of Canton LLC
170161	Commonwealth Telephone Company
170168	Frontier Communications of Pennsylvania LLC
170178	Frontier Communications of Lakewood LLC
170194	Frontier Communications of Oswayo River LLC
200271	CITIZENS MOUNTAIN STATE TEL
204338	Citizens Mountain State Tel
204339	Citizens Mountain State Tel
205050	Frontier West Virginia Inc.
210318	Frontier Communications of the South LLC
210328	Frontier Florida LLC
220362	Frontier Communications of Fairmount LLC
220387	Frontier Communications of Georgia LLC
230479	Frontier Communications of the Carolinas Inc.
230509	Frontier Communications of the Carolinas Inc.
240479	Frontier Communications of the Carolinas Inc.
240526	Frontier Communications of the Carolinas Inc.
250301	Frontier Communications Lamar County LLC
250306	Frontier Communications of Alabama LLC
250318	Frontier Communications of the South LLC
280460	Frontier Communications of Mississippi Inc.
290580	CITIZENS TEL OF VOLUNTEER STATE
294336	CITIZENS TEL OF TENNESSEE LLC
300615	Frontier North Inc.
300682	Frontier Communications of Michigan Inc.
310682	Frontier Communications of Michigan Inc.
310695	Frontier North Inc.
313033	Frontier Midstates Inc.
320750	Frontier Communications of Indiana Inc.
320772	Frontier North Inc.
320779	Frontier North Inc.
320828	Frontier Communications of Thorntown Inc.
323034	Frontier Midstates Inc.
330870	RHINELANDER TEL CO
330886	Frontier North Inc.
330891	Rhineland Tel Co
330912	Frontier Communications of Mondovi LLC
330940	Rhineland Tel Co
330941	Rhineland Tel Co

Affiliated ETCs

SAC	Name
330944	Frontier Communications - St. Croix LLC
330964	Frontier Communications of Wisconsin LLC
330967	Frontier Communications of Viroqua LLC
340998	Frontier Communications of DePue Inc.
341011	Frontier Communications of Lakeside Inc.
341015	Frontier North Inc.
341036	Frontier North Inc.
341038	Frontier Communications of Illinois Inc.
341055	Frontier Communications - Midland Inc.
341061	Frontier Communications of Mt. Pulaski Inc.
341067	Frontier Communications of Orion Inc.
341073	Frontier Communications - Prairie Inc.
341079	Frontier Communications - Schuyler Inc.
341183	CITIZENS TEL OF ILLINOIS INC
343035	Frontier Communications of the Carolinas Inc.
351127	Frontier Communications of Iowa Inc
361123	CITIZENS TEL OF MINNESOTA
361367	Frontier Communications of Minnesota Inc.
367123	CITIZENS TEL OF MINNESOTA
371128	CITIZENS TEL OF NEBRASKA
442080	Frontier Southwest Incorporated
442154	Frontier Southwest Incorporated
452172	CITIZENS UTILITIES RURAL TEL CO
452302	Frontier Communications of the Southwest Inc.
454426	CITIZENS UTILITIES CO
454449	NAVAJO COMM CO
472416	Frontier Communications Northwest Inc.
474427	CITIZENS TELECOMM CO OF IDAHO
484322	CITIZENS TELECOMM CO OF MONTANA
494449	NAVAJO COMM CO
504429	CITIZENS TELECOMM CO OF UTAH
504449	NAVAJO COMM CO
522416	Frontier Communications Northwest Inc.
522449	Frontier Communications Northwest Inc.
532416	Frontier Communications Northwest Inc.
533401	CITIZENS TELECOMM CO OF OREGON
541863	Frontier Communications of the Southwest Inc.
542302	Frontier California Inc.
542308	CITIZENS TELECOMM CO OF CA
542315	CITIZENS TELECOMM CO OF CA
542319	Frontier California Inc.
542344	CITIZENS TELECOMM CO OF CA. Frontier Communica
543402	CITIZENS TELECOMM CO OF CA
544342	CITIZENS TELECOMM CO OF CA
552302	Frontier Communications of the Southwest Inc.
554431	CITIZENS TEL COMPANY
554432	CITIZENS TEL COMPANY