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# HCF Program Funding Request Office Hours

March 12, 2025



#### **DISCLAIMER:**

To accommodate all attendees, real-time closed captions will be present during this presentation. We apologize in advance for any transcription errors or distractions. Thank you for your support.

# Housekeeping

- Use the "Audio" section of your control panel to select an audio source and connect to sound.
  - Turn on your computer's speakers, or
  - Use the call-in instructions in your confirmation email.
- All participants are on mute.
- Use the "**Raise Your Hand**" button to be unmuted and ask a question to the team!



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#### **Meet Our Team**



#### **Simone Andrews**

Senior Communications Specialist| RHC Outreach



#### **Blythe Albert**

Advisor of Program Management | RHC Outreach

# Agenda

- Introduction
- Program Updates
- Submitting Forms in RHC Connect
  - RHC Connect Updates
  - Submitting the FCC Form 462
- Best Practices
- Resources

# **Introduction – Office Hours**

- Subject matter experts are available to answer live questions from program participants.
- Today's presentation will focus on the HCF Program.
- Send FRN or HCP-specific questions to the RHC Customer Service Center at <u>RHC-Assist@usac.org</u>.
- Raise your hand or ask your question in the questions box.
- Please note, recordings of Office Hours webinars are not posted to the USAC website.
- You can download a PDF copy of the slide deck from the handout section on the GoToWebinar dashboard.

# Glossary

Acronym	Definition
FCC	Federal Communications Commission
HCF	Healthcare Connect Fund
FY	Funding Year
HCP	Health Care Provider (your site)
HCP Number	Number associated with your site
PAH	Primary Account Holder
FCL	Funding Commitment Letter
NCW	Network Cost Worksheet
BAN	Billing Account Number
SPIN/498 ID	Service Provider Identification Number

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#### **Program Updates**

#### HCF Program Funding Request Office Hours

# **Reminder – FCC Order 23-110**

- <u>FCC Order 23-110</u> improves RHC program administration and facilitates participation in the program by allowing health care providers that expect to become eligible during a funding year to complete the processes required to request funding.
- The order permits health care providers to be granted conditional eligibility, thus allowing them to initiate competitive bidding and request funding while awaiting a final eligibility determination.
- Adopts the FCC Form 460 for eligibility determinations in the Telecom Program, which will eliminate the need for Telecom Program participants to seek an eligibility determine every time they engage in competitive bidding.

### **Reminder: FCC Report and Order 19-78**

• <u>FCC Report and Order 19-78</u> webpage summarizes the Report and Order's major changes.



## FCC Report and Order 19-78 (continued)

- **Consortia Majority Rural Rule (HCF Only)** Every consortium participating in the HCF Program must consist of more than 50 percent eligible rural sites.
  - Example If there are five member sites, three must be rural.
- **Consultant Registration** USAC will issue a unique registration number to the consultant or outside expert and that number will be linked to the HCP's organization.
  - <u>RHC Connect User Guide Third-Party Authorizations</u>

# **Reminder: FCC Report and Order 19-78 (continued)**

#### • SPIN CHANGES

- A corrective SPIN change is made when the SPIN associated with a Funding Request Number (FRN) is not correct. This occurs when:
  - The applicant or USAC made a data entry error,
  - SPIN has changed due to the merger of companies or the acquisition of one company by another; or
  - The applicant has not initiated the change (e.g., where the service provider declares bankruptcy).
- An operational SPIN change is a request to change the actual service provider associated with an FRN.
  - The change in service providers is the result of a deliberate decision by the applicant.
  - The applicant has a legitimate reason to change providers (e.g., breach of contract or the service provider is unable to perform).
- **Site and Service Substitutions** HCPs in both the HCF and Telecom program are required to submit site and service substitutions by the service delivery deadline.
  - This date can be found on the Funding Commitment Letter (FCL) for the FRN (FCC Form 462 Application)

# **Reminder: Information Requests**

- If USAC requires information that cannot be located on the submitted supporting documentation, this will result in an **Information Request.**
- All account holders will receive all Information Requests.
- Applicants are given 14 calendar days to provide a response to the Information Request.
  - 11:59 p.m. ET on the 14<sup>th</sup> day would be the last time to respond to the Information Request.
- Information Requests not responded to within 14 calendar days **will result in a denial** of that form.
- An extension request must be received prior to the original 14-day Information Request deadline.

# **FY2025 Funding Request Reviews**

- RHC may begin funding request reviews before the funding request window closes.
- No final decisions will be made prior to the close of the filing window.
- Some changes to submissions must occur prior to the close of the filing window.
- This means that you may receive an Information Request before April 1, 2025.
- For FY2025 FCC Forms 462, an auto-generated email will be sent with instructions to respond through RHC Connect.
  - HCPs should respond through RHC Connect only.
  - The auto-generated email comes from an unattended mailbox so please only respond through RHC Connect.

# **Reminder: Invoice Filing Deadlines**

- Invoicing guidelines adopted in FCC <u>Report and Order 19-78</u> became effective beginning with FY2020 applicants.
- The invoice filing deadline will be four months (120 days) from the service delivery deadline in both the HCF and Telecom Programs, October 28 of a given funding year.
- Applicants and service providers may request a one time 120-day extension if the request was received prior to the original deadline.
  - February 25, 2025, is the new invoice filing deadline for those who requested an extension prior to October 28, 2024.
- Please use the <u>RHC Invoice Filing Deadline Tool</u> in the Open Data section of the USAC website to look up your invoice filing deadline deadline.
- For more information, please see the <u>HCF invoice page</u> and <u>Telecom invoice page</u>.

# **Supply Chain Order**

- As a reminder, when service providers login to <u>My Portal</u> they will see two new supply chain certifications included in the FCC Form 463 and Telecom program invoice.
- The first certification affirms compliance with the <u>Section 54.9</u> prohibition on USF for specified transactions with companies deemed to pose a national security threat. The second certification affirms compliance with <u>Section 54.10</u>, which prohibits the use of any Federal subsidies on any communications equipment and services on the <u>Covered List</u>.
- **FY2024 Applicants**: If you requested services or equipment that contain components of products produced by any of the listed covered companies or their parents, affiliates or subsidiaries in FY2024, you cannot invoice for these funds. Instead, you should immediately request a <u>service substitution</u>.
- **FY2025 Applicants:** As you proceed with competitive bidding, please ensure you are not requesting funding for services or equipment from listed covered companies or any of their parents, affiliates or subsidiaries.

# **Supply Chain Web Page**

#### Supply Chain webpage

About 🗸	E-rate $\checkmark$	Rural Health Care $\smallsetminus$	Lifeline 🗸	High Cost 🗸	Service Providers $\smallsetminus$
USAC   About   Re	ports & Orders   <b>Suppl</b> y	y Chain			
<b>Reports &amp; Order</b> Annual Report	S	Supply	Chain		
FCC Filings FCC Orders		Since November 2019, United States, the secu networks or the comm	the FCC has taken a num irity and safety of United s unications supply chain.	ber of actions to protect the States persons, and the inte The FCC has also implemer ECC's actions can be found	e national security of the grity of communications ated the <u>Secure and Trusted</u>
		In November 2019, the Section 54.9) which pro maintain, improve, mo provided by companie	FCC released the <u>Supply</u> phibits the use of Universi dify, operate, manage, or s found to pose a nationa	Chain First Report and Orde al Service Fund (USF) suppo otherwise support equipm I security threat to the integ	er adopting a rule (47 CFR ort to purchase, obtain, ent or services produced or grity of communications

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# **Questions?**

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#### **RHC Connect – Updates**

#### HCF Program Funding Request Office Hours

# **RHC Connect Updates**

Form	<b>Current Platform</b>	<b>RHC Connect Migration</b>
FCC Forms 460 & 465 - Letters of Agency (LOA) - Third Party Authorization (TPA)	RHC Connect RHC Connect RHC Connect	RHC Connect RHC Connect RHC Connect
FCC Form 461	RHC Connect	FY2023 and forward
FCC Form 462	RHC Connect	FY2022 and forward
FCC Form 463	RHC Connect	FY2022 and forward
FCC Form 463	My Portal	FY2021 and prior – multi-year commitments
HCF Post-Commitment Change Requests	RHC Connect	FY2022 and forward
Telecom Post-Commitment Change Requests	My Portal	FY2024 and forward – in development
FCC Form 466	RHC Connect	FY2024 and forward
FCC Form 469 (Telecom Invoice Form)	My Portal	RHC Connect

#### **RHC Connect - TPA and User Management**

- Moved to RHC Connect.
- Do not submit TPAs in My Portal or through the RHC Customer Service Center.
- Submit all TPAs and manage Consultant Groups using the following online resources:
  - <u>RHC Webinars</u> webpage Authorizations and User Management Webinar (March 5, 2025)
  - RHC Connect User Guide TPA

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# **RHC Connect – Submitting the FCC Form 462**

#### HCF Program Funding Request Office Hours

# **My Portal Landing Page**

- Log into My Portal and click
   Rural Health Care then
   RHC Connect
- For all other forms that have not yet moved to RHC Connect, you will use RHC My Portal

Dashboard	
(i) In accordance with the Supply Chain orders and High Cost & Lifeline - FCC Form 481. Se	s, new certifications have been added to the following forms: RHC - FCC Form 463 and the rvice providers are required to submit these annual certifications. For additional information of the submit these annual certifications.
💾 Upcoming Dates	
HCF Program 11/13 Funding Request Webinar	Rural Health Care
Telecom 11/20 Funding Request	<b>RHC Connect</b> - Health care providers must use this section to create and submit required forms for the Healthcare Connect Fund (HCF) Program and for the Telecommunications (Telecom) Program.
Webinar HCF 12/11 Consortium Best Practices Webinar	<b>RHC My Portal</b> - Health care providers must use this section to create and submit required forms for the Connected Care Pilot Program (CCPP), and the Healthcare Connect Fund (HCF) Program for multi-year commitments from FY2021 and earlier.
see full calendar	<b>Connected Care Pilot Program</b> - Health care providers must use this form to complete, certify, and submit their required Connected Care Pilot Program Annual Reports and Final Report.

#### Dashboard

- You can start a new form, view the status of submitted and processed applications, resume working on a draft or delete a draft FCC Form 462.
- There's a countdown banner displaying the days remaining in the filing window.

RHC Connect         Image: Co		0						
RHC Connect		10				37	-	
Information Requests       My forms         Information Requests       My forms         Information Requests       Information Requests         Information Requests       Status         Information Requests       Form Algoing Status         Information Requests       Status         Information Requests       Form Algoing Status         Information Requests       Status         Information Requests       Form Algoing Status         Informatio	RHC Connect	170 Januard Manifestings	1111					
Oct 27       My Forms         Form Type       Form 422         Q. Startin Form 4(2)       Station         Stee Name       Stee Number       Application Number       Application Nickname       Form       Last Update       Status         Stee Name       Site Number       Application Number       Application Nickname       Form 462       Status	17:57	Larrent Montantes	uation Requests	My F	arma quess filing window closes in 3 days.	My O	ganizations	
OL Starych Rome 4520     SEARDA       Site Name     Site Number     Application Number     Application Nickname     Form     Last Update     Status       Form 462     \$123/417 PM EDT     Processed	0rt 27	My Forms Form Type Form 262 •						
Form 462 5/23/ 4/17 PM EDT Processed		Q, Search Form 462x Site Name	Station Site Number	Application Number I Application Nic	iname Form	Last Update	Status Actions	_
					Form 462	9/23/ 4/17 PM EDT	Processed @ 🗋	8 6

#### **Start a New Form**

• Select FCC Form 462, then click **Next**.



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# **Start Page**

Start Page Co	mpetitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality	Certifications	Signature
Start							
Paperwork Reduction Act (PRA)							
A Note: Once you select HCP, and then Save 8	k Continue, you will <u>not</u> b	oe able to change the HCP. Please select ca	refully.				
Health Care Provider (HCP) Information							
HCP or	Consortium					•	
FCC	Registration						
	Address						
	State						
Application Basics							
	Application Consort	ium FRN #1					
	Nickname						
,	unding Year					•	
Applicat	ion Number						
Fund	ding Priority Priority 8						

# **Competitive Bidding**

DASHBOARD	START A N					
		🖺 SAVE DRAFT				
		Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation
		Competitive Biddin Is the HCP requesting that this ap	<b>g</b> pplication be exempt from competit	ive bidding? 🕜		
		Explanations BACK EXIT				

# **Competitive Bidding (continued)**

DASHBOARD START A M	
	SAVE DRAFT
	Start Page Competitive Bidding Service Provider Information Expense Items Additional Documentation Confidentiality Certifications
	Competitive Bidding
	Is the HCP requesting that this application be exempt from competitive bidding? ? Yes
	Explanations
	If your site meets one of the competitive bidding exemptions below, you are not required to submit the FCC Form 461 and go through the competitive bidding process. You are exempt from competitive bidding if any of the following apply: <b>1. Government Master Service Agreement (MSA):</b> You are seeking support for services and equipment purchased from master service agreements (MSAs) negotiated by a federal, state, Tribal, or local governmental entity on the applicant's behalf, and awarded pursuant to applicable federal, state, Tribal, or local competitive bidding requirements.
	2. Master Service Agreements (MSA) Approved Under the Rural Health Care Pilot Program or HCF Program: You are opting into an existing MSA approved under the Rural Health Care Pilot program or the HCF program and seeking support for services and equipment purchased from the MSA, as long as the MSA was developed and negotiated in response to an RFP or request for services that specifically solicited proposals that included a mechanism for adding additional sites to the MSA.
	3. Evergreen Contract: You have an existing contract already endorsed by USAC as evergreen.
	4. Schools and Libraries Program Master Contracts: You are an eligible HCP in a consortium with participants in the Schools and Libraries (E-rate) program and are purchasing services and/or network equipment under a contract approved under the E-rate program as a master contract.
	5. Annual Undiscounted Cost of \$10,000 or Less: If you are seeking support for \$10,000 or less of total undiscounted eligible expenses for a single year you may bypass the competitive bidding process.
	<ul> <li>For consortia applicants, this exemption is \$10,000 for all funding requests submitted for the consortium.</li> <li>Note: If you select this option on your FCC Form 462, you will not be able to request a multi-year funding commitment.</li> </ul>
	BACK

# **Competitive Bidding Exemptions**

🖺 SAVE DRAFT							
Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality	Certifications	Signature
Competitive Biddin	g						
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Contract Name	с	ontract Document	Contract Sign	Date	Contract End Date	Initial	Contract Term
			No ite	ms available			
BACK EXIT							ADD CONTRACT EDIT DELETE

# **Competitive Bidding Exemptions (continued)**

- Click Yes.
- Choose exemption type.
- Upload contract.
  - For evergreen contracts, select a contract from the drop-down menu.
- Enter the relevant contract information in the fields.
  - Use the drop-down calendar to enter dates.

Start Page	Competi	tive Bidding	Service Provider I	Start
A Competitive B	idding			Competitiv
Is the HCP requesting the Yes	at this application be exen	npt from competit	tive bidding? 😧 *	Is the HCP reques Yes No
<ul> <li>No</li> <li>Select the exemption that</li> <li>Annual Undiscounted C</li> <li>Government Master Se</li> <li>Pre-Approved Master S</li> <li>Evergreen Contract</li> <li>E-rate Approved Contract</li> </ul>	at the HCP is claiming* iost of \$10,000 or less rvices Agreement ervices Agreement ct			Select the exemp Annual Undisco Government M Pre-Approved I Evergreen Cont E-rate Approve
New Contract				Select an Existi
Select an Existing Cont Select a contract alread Please select a contract.	ract ★ γ associated with this HCP ▼	]		Contract Sign D 10/01/2021
Contract Sign Date	Contract End Date (Opt	ional)		Length of Initia
Length of Initial Contra	oct Term			Number of Con
Number of Contract Ex	Time Unit 🔻			5 Total Combined
Total Combined Lengt	of Optional Extensions (C	ptional)		CANCEL
CANCEL				BACK EXIT

Start P	age		Co	mpet	itive Bidding	Service Provider Informa
Competitive	Bid	ding				
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Evergreen Contra	act					
<ul> <li>E-rate Approved</li> </ul>	Contrac	t				
New Contract						
Select an Existing	g Contr	act*				
Contract Sign Da	ta	Contra	ct End Dat	a (On	tional	
10/01/2021	.e	00/20/	2024	e (op	lional)	
10/01/2021		05/50/	2024	8		
Length of Initial	Contra	t Term				
36		M	onths 🔻			
Number of Contr	act Ext	ensions (	Optional)			
5						
Total Combined	ength	of Ontion	al Extensi	ons ((	() ntional)	
	- ngen			0115 (1	prional)	
5		M	onths 🔻			
CANCEL						
BACK EXIT						

# **Competitive Bidding Exemptions (continued)**

• Once the contract is selected, click **Save and Continue**.

	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality	Certifications	Signature
ompetitive Bidding	6						
the HCP requesting that this a	application be exempt from competi	tive bidding? 😧*					
Yes							
10							
ct the exemption that the H	ICP is claiming *						
	10,000 01 1033						
<b>Government Master Services A</b>	greement						
Government Master Services A Pre-Approved Master Services	greement Agreement						
Government Master Services A Pre-Approved Master Services Evergreen Contract	greement Agreement						
Government Master Services A Pre-Approved Master Services Evergreen Contract E-rate Approved Contract	greement Agreement						
Government Master Services A Pre-Approved Master Services Evergreen Contract E-rate Approved Contract Itracts	greement Agreement						
Sovernment Master Services A Pre-Approved Master Services Evergreen Contract Evergreen Contract Evergreen Contract Evergreen Contract	greement Agreement Contract Name	Contract Docum	ent	Contract Sign Date	Contract End Date		Initial Contract Term
Government Master Services A Pre-Approved Master Services Evergreen Contract E-rate Approved Contract Itracts	greement Agreement Contract Name	Contract Docum	ent	Contract Sign Date	Contract End Date		Initial Contract Term 36 Months
Government Master Services A Pre-Approved Master Services Evergreen Contract Evrate Approved Contract Itracts	greement Agreement Contract Name	Contract Docum	ent	Contract Sign Date	Contract End Date		Initial Contract Term 36 Months
Sovernment Master Services A Ire-Approved Master Services Evergreen Contract Serate Approved Contract <b>tracts</b>	greement Agreement Contract Name	Contract Docum	ent	Contract Sign Date	Contract End Date		Initial Contract Term 36 Months

# **Competitive Bidding Non-Exempt**

- Click No.
- Choose related FCC Form 461 from drop-down menu.
  - All FCC Forms 461 for the HCP will be available.
- Enter number of bids received.
- You'll be required to upload copies of bids.

Start Page	Competitive Bidding	Service Provider Information
A Competitive Biddin	g	
Is the HCP requesting that this a	pplication be exempt from competi	tive bidding? 🔂 *
() Yes		
O No +		
Related FCC Form 461 Applicatio	n*	
Is the HCP continuing with the c	urrent service provider?*	
() Yes		
O No		
Number of Service Providers The	st Bid "	
3		
Upload Bids		
Do	cument Type	
O Add Documents		
Must Unload a file		

Upload Bids	_		
Document Type	Document	Uploaded On	
Bids	0		×
Add Documents			
BACK EXIT			SAVE & CONTINUE

# **Service Provider Information**

- Select 498 ID/SPIN.
- Click Save and Continue.

🖺 S	AVE DRAFT							
	Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality	Certifications	Signature
Ser	vice Provider Inf	formation						
	498 ID/SPIN	Service Provi Na	ider centurylink SE	ARCH CLEAR				
	498 ID/SPIN		Service Provider Name					
	143022618		CenturyLink CenturyTel Solutions, L	LC				
	143001636		CenturyLink CenturyTel of Ooltewal	n-Collegdale, Inc.				
	143002667		CenturyLink CenturyTel of the Gem	State (Nevada)				
	143002671		CenturyLink Central Telephone Co.	of Nevada (FKA)				
	143005231		CenturyLink Qwest Corporation					
								≪ < 6 - 10 of 67 > ≫
You	nave selected 143005231 -	CenturyLink Qwest Corporation						
BAG	CK EXIT							SAVE & CONTINUE

#### **Expense Items – Summary Page**

- Download the NCW Template and save.
- Populate all information and upload the NCW to RHC Connect.
- Any information entered manually will be overwritten by the NCW document once it's uploaded.

Start F	age	Competitive Bidding	Service Provider Infor	mation Expense	e Items Additional Doo	cumentation Confident	tiality Certificati	ons	Signature
								Adv. Dow Upto	anced Features mioad NCW Template pad NCW Document
Expe	ense Ite	m Summary						ENT	ER A NEW EXPENSE ITE!
E <b>xpe</b> # 1	ense Ite	m Summary		Contract Number	Expense Type	Eligible Undiscounted Cost	Maxium Support Amount	ENT	TER A NEW EXPENSE ITE
Expe # 1	Site #	m Summary Site Name	۱	Contract Number	Expense Type Network Maintenance	Eligible Undiscounted Cost	Maxium Support Amount	ENT	ER A NEW EXPENSE ITE Actions Edit   Delete

# **Using the NCW Template**

- Do not disturb the formatting.
  - When using "copy" and "paste" to enter data, be sure to paste using a "text" or "values" format.
  - If any data is entered manually prior to uploading the NCW, that data will be overwritten when the NCW is uploaded.
  - If after uploading the NCW data isn't saved or you're directed back to the summary page, the formatting has been changed.
    - Download a new NCW template and try again.

							Contract S	òtatus								Ехр	ense Informati	on			Expense T	Гуре			Ban	dwidth		:	Service I	Level Agr	eement					
	A	В	С	D	Е	F	G	н	I.	J	К	L	М	N	0	Ρ	Q	R	S	Т	U	V	W	×	Y	Z	AA	AB	AC	AD	AE	AF	AG	AH		
			s service			(pp-uuu	ional) (yyyy-	(bb-mm	(pp	ns (optional	t Term	ontract tern	Optional D	optional)	circuit?	ptional)	(уууу-тт-	(bb-m	0		optional)	s (optional)	s Eligible fo				it	ment (SLA) er for ional)			ø	ility	_	the circuit?		
Line Number	Site Number	Site Name	a contract with the provide??	Contract ID	ontract Nickname	: Start Date (www-	act End Date (opt mm·dd)	Sign Date (yyyy-r	all Date (yyyy-mm-	Contract Extension	of Initial Contrac	Length of initial c	mbined Length of densions (optiona	it of Extensions (c	s a newly installed	ccount Number (o	iervice Start Date dd)	tion Date (yyyy-m	ategory of Expens	Expense Type	tion of Expense (	er of Fiber Strand	er of Fiber Strand Support (optional)	Upload Speed	Jpload Speed Uni	Download Speed	wnload Speed Ur	ervice level agree the service provide cpense item? (Opt	SLA for Latency	SLA for Jitter	LA for Packet Los	v for Packet Reliab	circuit ID (optional)	s site's location on	bber Site, Service Site or Neither?	o Number
			Is there		0	Contract	Initial Contri	Contract	Insta	Number of C	Lengt	Time unit of	Total Cor E>	Time Un	ls this is	Billing A	Expected S	Installa	ö		Explana	Total Numb	Total Numb				ů	ls there a s with t this e>			0	SLA	0	Where is the	ls this Mem Provider S	HCF
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## **Expense Items – Contract Status**

- For consortia applicants, select a member site from drop-down menu.
- Select No for submission without contract (monthto-month).

Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality	
xpense ltems						
Cpense Item 1 of 1 al Eligible Undiscounted Cost \$0.00 ximum Support Amount \$0.00						
			Expense Item Site			
> Contract Status			Select			•
O Expense Information	_	,	Does the HCP have a Contract Yes No (process this item as moni	with the Service Provider? 😧		
O Expense Type						
O Bandwidth						
O Service Level Agreement						
O Circuit Information						
O Financial Information						
O HCP Contribution Source						
um of All Expense Item Total Eligible Undiscou um of All Expense Item Maximum Support Am	inted Cost: \$0.00 iount: \$0.00					
BACK EXIT						

# **Expense Items – Contract Status (continued)**

- Select **Yes** for submission with contract.
- Select an existing contract or upload a new contract.
- Enter information about the contract.

	Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality
Ex	pense ltems					
Exp <sup>Total I</sup> Maxin	ense Item 1 of 1 Eligible Undiscounted Cost \$0.00 hum Support Amount \$0.00					
>	Contract Status			Expense Item Site		•
0	Expense Information			Does the HCP have a Contract wit Yes No (process this item as month-t	th the Service Provider? 🚱	
0	Expense Type		Г	Select an Existing Contract	Contract Nickname	Upload a New Contract
0	Bandwidth			Select a contract already associated	∃ ▼ OR	UPLOAD C Drop file here
0	Service Level Agreement			Contract Start Date	Initial Contra	act End Date
0	Circuit Information			Length of Initial Contract Term		
0	Financial Information			Time	e Unit 🔻	
0	HCP Contribution Source			Number of Contract Extensions (	Optional)	
5um of 5um of	All Expense Item Total Eligible Undiscount All Expense Item Maximum Support Amou	ted Cost: \$0.00 unt: \$0.00		Total Combined Length of Option	aal Extensions (Optional) e Unit 💌	
				Contract Sign Date	Install Date	/ <b>#</b>

# **Expense Items – Contract Status (continued)**

- Enter the Contract Start Date, Initial Contract End Date, Contract Sign Date, and Install Date.
- Reviewers will read the contract to confirm all information entered.

Does the HCP have a Co	ntract with the Se	ervice Provider? 😢	
• Yes	a measing to measing		
O No (process this item a	is month-to-month	1)	
Select an Existing Contra	act	Contract Nickname	Upload a New Contract
	-	DR	
Contract Start Date	1	Initial Contr	ract End Date
<b>#</b>			#
_			
Length of Initial Contrac	t Term	L	
Length of Initial Contrac	t Term		
Length of Initial Contrac	tt Term Years 👻		
Length of Initial Contrac 3 Number of Contract Ext	ensions (Optional	0	
Length of Initial Contrac 3 Number of Contract Ext	ensions (Optional	1)	
Length of Initial Contrac 3 Number of Contract Ext 5	ensions (Optional	1)	
Length of Initial Contrac 3 Number of Contract Ext 5 Total Combined Length	ensions (Optional	l) nsions (Optional)	
Length of Initial Contrac 3 Number of Contract Ext 5 Total Combined Length 5	ensions (Optional Years •	l) nsions (Optional)	
Length of Initial Contract 3 Number of Contract Ext 5 Total Combined Length 5	ensions (Optional of Optional Exten	l) nsions (Optional)	
Length of Initial Contrac 3 Number of Contract Ext 5 Total Combined Length 5 Contract Sign Date	ensions (Optional of Optional Exten	i) nsions (Optional)	

# **Expense Items – Expense Information**

Enter Expected
 Broadband
 Service Start Date.

	6 D	a					_
	Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality	Ce
Ex	pense ltems						
EXP Total E Maxim	ense Item 1 of 1 Eligible Undiscounted Cost \$N/A num Support Amount \$N/A						
				Is this a newly installed circuit?			
2	Contract Status			• Yes			
•	conductoratas			○ No			
	Exponse Information			Billing Account Number (Optiona	1)		
1	expense information						
-				Expected Broadband Service Star	t Date		
0	Expense Type			07/01/2022			
0	Bandwidth			<b>9</b> You have chosen the funding expect to begin this service or	g year start date. Please make sure t have already started this service.	hat this is the date when you actual	y
0	Service Level Agreement			Installation Date			
0	Circuit Information						
0	Financial Information						
0	HCP Contribution Source						
um of um of	All Expense Item Total Eligible Undiscount All Expense Item Maximum Support Amou	ed Cost: \$N/A int: \$N/A					
BAC	K EXIT						

#### **Expense Items – Expense Type**

- Choose Expense Category and Expense Type from the dropdown menus.
- Provide a brief explanation of the eligible expense.

Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentia
Expense Items					
Expense Item 1 of 1 Total Eligible Undiscounted Cost \$N/A Maximum Support Amount \$N/A					
✓ Contract Status		Expense Cate	gory		
<ul> <li>Expense Information</li> </ul>		Expense Type Ethernet			
> Expense Type					
O Bandwidth		Explanation o	f Eligible Expense (Optional) uit between service provider a	nd eligible HCP	
O Service Level Agreement	:				
O Circuit Information					
O Financial Information					
O HCP Contribution Source	2				

# **Expense Items – Bandwidth**

• Enter bandwidth speeds.

	Start Page	Competitive Bidding	Service Provider Inform	ation	Expense Items A	dditional Documentation
Exp	ense ltems					
Expe Total Eli Maximu	ense Item 1 of 1 gible Undiscounted Cost \$48,480.00 Im Support Amount \$31,512.00					
				Download Spee	d	
<b>~</b>	Contract Status			10		Mbps
~	Expense Information			Upload Speed		
~	Expense Type			10		Mbps
>	Bandwidth					
0	Service Level Agreement					
0	Circuit Information					
0	Financial Information					
0	HCP Contribution Source					

# **Expense Items – Bandwidth (Continued)**

- For equipment, installation, construction and network management services, bandwidth does not have to be entered if not applicable.
- For all other services, bandwidth is required.

Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentialit
cpense Items	; 				
kimum Support Amount \$N/A		Download	Sneed		
<ul> <li>Contract Status</li> </ul>				Select	
<ul> <li>Expense Information</li> </ul>		Leave blank if Upload Sp	bandwidth is not applicable		
<ul> <li>Expense Type</li> </ul>		Leave blank if	bandwidth is not applicable	Select	
> Bandwidth					
O Service Level Agreeme	ent				
O Circuit Information					
O Financial Information					
O HCP Contribution Sou	rce				
m of All Expense Item Total Eligible Un m of All Expense Item Maximum Supp	discounted Cost: \$N/A ort Amount: \$N/A				
BACK EXIT					

# **Expense Items – Service Level Agreement (SLA)**

- If **No** is selected, fields will not appear.
- If **Yes** is selected, enter the information about the SLA.

Expense Items	
Expense Item 1 of 1 Total Eligible Undiscounted Cost \$48,480.00 Maximum Support Amount \$31,512.00	
✓ Contract Status	Is there a service level agreement (SLA) with the service provider for this expense item? (Optional) Yes No
<ul> <li>Expense Information</li> </ul>	What is the SLA for Latency? (Optional)
<ul> <li>Expense Type</li> </ul>	What is the SLA for Jitter? (Otional)
✓ Bandwidth	What is the SLA for Packet Loss? (Optional)
> Service Level Agreement	What is the SLA for Packet Paliability? (Ontional)
O Circuit Information	

# **Expense Items – Circuit Information**

- Address of the HCP on expense item will pre-populate based on information in the FCC Form 460.
- "Start location" and "End location" cannot be the same address.

#### **Expense Items** Expense Item 1 of 1 Total Eligible Undiscounted Cost \$48,480.00 Maximum Support Amount \$31,512.00 Circuit ID (Optional) Contract Status Image: A second s Where is the site's location on the circuit? The circuit starts at the site location Expense Information The circuit ends at the site location ~ Expense Type **Circuit Start Location** Bandwidth ~ Address Line 1 Service Level Agreement ~ Address Line 2 **Circuit Information** > City Financial Information 0 State CO HCP Contribution Source 0 **ZIP** Code

# **Expense Items – Circuit Information (continued)**

- If the HCP is an Administrative Office or Data Center, the location on the other end of the circuit is required.
- For all other entity types, addresses are suggested but not required to advance to the next page.

Circuit ID (Optional) Where is the site's location on the circuit? The circuit starts at the site location The circuit ends at the site location	
Circuit ID (Optional) Where is the site's location on the circuit? The circuit starts at the site location The circuit ends at the site location	
Where is the site's location on the circuit? The circuit starts at the site location The circuit ends at the site location	
Where is the site's location on the circuit? The circuit starts at the site location The circuit ends at the site location	
O The circuit ends at the site location	
Circuit Start Location	Circuit End Location
	O Location is a Member Site
	Location is the Service Provider Location is not a Member Site or Service Provider
Address Line 1	Address Line 1
Address Line 2	Address Line 2
City	
	City
State	
co	State
ZIP Code	Choose a State
	ZIP Code
	Circuit Start Location Address Line 1 Address Line 2 City State CO ZIP Code

# **Expense Items – Financial Information**

- If you select **No** for "is this entire expense eligible for support", you're indicating that this expense is costallocated.
- Enter the eligible percentage and an explanation of the methodology used to determine percent entered
- Upload the required document

Ves	or circuits? 🥹	
0 No		
-		
Multi-year Funding Request		
No.		
How often is this item expensed?		
Monthly		-
How many expense periods will there be total?		
12		
Undiscounted Cost Per Expense Period (Excluding	; Taxes and Fees)	
\$1,000.00		
Taxes and Fees per Expense Period		
\$50.00		
	Percent Eligible for Support	
ls this entire expense eligible for support? 🕢	90	
Is this entire expense eligible for support? ? Yes	50	
Is this entire expense eligible for support? ? Ves No	50	
Is this entire expense eligible for support? Yes No Explanation	30	
Is this entire expense eligible for support? Yes No Explanation Ten locations use this service but one site is ineligib	le for funding.	
Is this entire expense eligible for support? Yes No Explanation Ten locations use this service but one site is ineligib	le for funding.	
Is this entire expense eligible for support? Yes No Explanation Ten locations use this service but one site is ineligib	le for funding.	70/1000

### **Expense Items – Multiple Items**

- The quantity of items, for example number of routers or PRI lines.
  - The number (s) should match the quantity on the documentation.

Expense Items	
Expense Item 2 of 2 Total Eligible Undiscounted Cost \$0.00 Maximum Support Amount \$0.00	
	Does this expense item represent multiple items or circuits? 🥑
	O Yes
<ul> <li>Contract Status</li> </ul>	No
<ul> <li>Expense Information</li> </ul>	Quantity of Items

# **Expense Items – Financial Information (Continued)**

• Check all that apply.

	Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality
Ехр	ense Items					
Expe Total Elig Maximu	nse Item 1 of 1 gible Undiscounted Cost \$12,600.0 m Support Amount \$8,190.00	0				
~	Contract Status			How will the HCP cover their co that apply) The HCP will cover the differen	sts including the required 35% that ar	e not covered by HCF support? (select all
~	Expense Information			State grants, funding, or appro Federal funding, grants, loans, Tribal government funding	priations or appropriations	
~	Expense Type			Uther grant funding including p	private grants	
~	Bandwidth					
~	Service Level Agreement					
~	Circuit Information					
~	Financial Information					
>	HCP Contribution Source					
um of Al 12,600.0 um of Al	II Expense Item Total Eligible Undiscount 10 II Expense Item Maximum Support Amou	ed Cost: int: \$8,190.00				
BACK	EXIT					

#### **Expense Items – Summary**

Expe	ense Item	n Summary					ENTER A NEW EXPENSE ITEM
# 1	Site #	Site Name	Contract Number	Expense Type	Eligible Undiscounted Cost	Maxium Support Amount	Actions
1				Ethernet	\$24,240.00	\$15,756.00	Edit   Delete
500W	5 v reco	ras/baße				Total Eligit	tal Maximum Support \$15,756.00
EXIT							SAVE & CO
							Approved by OMB 3
		lf you ha	ve questions please contact our Help Desk	at (800) 453-1546 or RHC-Assist@	ousac.org 8:00 a.m. — 8:00 p.m. ET Monday th	nrough Friday for assistance.	

# **Additional Documentation**

• Consortia applicants are required, at minimum, to upload a Viable Source Letter before continuing.

Start P	Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality	Certifications	Signature
Additional	l Documentatio	n						
Use this	is tab to upload additional	documentation that is relevant	to the application. Ensure that all bandwi	dths, costs, service locations, a	nd expense types are supported with docu	mentation.		
O Ser	ervice provider documenta	tion required to confirm expens	es					
Docur	ument Type		Description		Document		Uploaded On	Ť
				No item	s available			
UPLO	DAD DOCUMENT(S)							
Must	t upload a file of documen	t type Viable Source Letter						
BACK EXIT								SAVE & CONTI

# **Additional Documentation (continued)**

• To upload more than 10 documents, follow the instructions in the blue banner.

								<b>.</b>
	Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality	Certifications	Signature
Additio	nal Docum	entation						
	Service provide	der documentation required to confirm exp	benses					
		Document Type			Document		Uploaded On	
				No ite	ns available			
	Add Documer	nt						
	Bulk Upload *							
_		)rop files here					_	
- 1	🖒 Note: 10 files	; can be uploaded at a time (up to <b>100</b> total)	). Click <b>Next</b> on this screen once the 10 docu	iment limit has been reached;	you may then click UPLOAD DOCUMENT(S)	again to add another batch of file	s. 🖌	
							_	
BACK	XIT							N
								Approved by OMB 3060

# Confidentiality

Start Page	Competitive Bidding	Service Provider Information	Expense Items
Confidentiality			
	Is the HCP requesting confidential	treatment and non-disclosure of comme	rcial and financial information?*
	⊖ Yes		
	○ No		
	Explanation		
BACK EXIT			

# Certifications

Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality	Certifications	Signature
Certification	s						
I certify under pen	alty of perjury that I a	m authorized to submit	t this request on beha	If of the applicant or co	onsortium.		
l certify under pen contained therein	alty of perjury that l h are true.	ave examined this requ	lest and all attachmer	nts and to the best of n	ny knowledge, informa	ation, and belief, all sta	tements of fact
I certify under pen services. "Cost-effe applicant deems re	alty of perjury that th ective" is defined as th elevant to choosing a	e applicant or consortiu ne "method that costs th method of providing th	im has considered all ne least after consider e required health car	bids received and sele ration of the features, o e services." 47 CFR § 54	cted the most cost-eff quality of transmissior 4.622(c).	ective method of provi n, reliability, and other f	ding the requested actors that the
I certify under pen	alty of perjury that all	RHC Program support	will be used only for e	eligible health care pur	poses.		
I certify under pen Healthcare Conne	alty of perjury that th ct Fund Program.	e applicant or consortiu	im is not requesting s	upport for the same se	ervice from both the T	elecommunications Pro	gram and the
I certify under pen understand that a	alty of perjury that th ny letter from the Adr	e applicant or consortiu ninistrator that erroned	im satisfies all of the i ously commits funds f	requirements under Se or the benefit of the ap	ection 254 of the Act a oplicant may be subject	nd applicable Commiss ct to rescission.	ion rules, and
I certify under pen	alty of perjury that I h	ave reviewed all applica	able rules and require	ments for the RHC Pro	gram and complied w	ith those rules and req	uirements.
I understand that bidding process, a years after the last	all documentation ass Il billing records for se t date of service delive	ociated with this applic ervices received and any ered in a particular fund	ation, including all bio y other documentatio ling year pursuant to	ls, contracts, scoring m n demonstrating comp 47 CFR §§ 54.631 or as	atrices, and other info liance with the rules r otherwise prescribed	ormation associated wi must be retained for a p by the Commission's re	th the competitive period of at least five ules.
I certify under pen service provider p	alty of perjury that th articipating in or seek	e applicant or consortiu ing to participate in the	im and/or its consulta RHC Program.	int, if applicable, has no	ot solicited or accepte	d a gift or any other thi	ng of value from a
I certify under pen or other financial s rules requiring fair	alty of perjury that an stake in the vendor ch r and open competitiv	y consultants or third p losen to provide the req re bidding.	arties associated with juested services, and	n this request or RFP do that they have otherwi	o not have an ownersl se complied with RHC	nip interest, sales comn Program rules, includi	nission arrangement ng the Commission's
BACK EXIT							SAVE & CONTINUE

# Signature

 Sign by typing your first and last name into the Digital Signature field.

Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality	Certifications	Signature
ignatur	е						
Current User Infor	mation						
		Name					
		Email					
		Phone					
		Title					
	E	mployer's FCC RN					
Signature							
	Ce	rtifier's Full Name					
		Digital Signature					
		Date					
						6	
BACK EXIT							CERTIFY & SU

# **After Submitting**

- You will receive an email letting you know that your form has been received.
  - If you do not receive an email, please go back into My Portal and be sure that you actually signed and submitted the form.
- Draft forms remain in RHC Connect but are not considered submitted until signed, certified, and submitted.
- The reviewer will reach out if additional information is needed.
- No funding decisions will be issued until after the close of the filing window period.
- Once your funding request has been approved, you will receive a Funding Commitment Letter (FCL) that will include all corresponding information to your funding request.

Available for Public Use

# **Questions?**

Available for Public Use

#### **Best Practices**

#### HCF Program Funding Request Office Hours

# **Submission Checklist**

- Document(s) confirming the monthly cost for your services (e.g., a copy of your bill dated within the requested funding period) or the most currently available bill as the filing window closes before the funding year opens
- A copy of all bids that were received for your request for services including the winning bid, all bids that were rejected and any bids that were disqualified and why
- A list of the bid evaluation criteria and copy of the bidding evaluation matrix
- A list of people who evaluated bids including title, role, and their relationship to the applicant
- Internal documents related to the selection of the service provider (upon request)
- Copies of any correspondence with service providers prior to and during the competitive bidding process (upon request)
- A copy of any new contract signed for your services
- Award letter to winning vendor (upon request)
- Contact information for the service provider and all responsible account holders
- □ The start and end location of your services.
- □ Viable source letter for consortia applicants (35 percent contribution)

\* Any information that cannot be located on the submitted supporting documentation will result in an Information Request

# **Best Practices – Competitive Bidding**

- Begin your competitive bidding process early.
  - Bidding period opened on July 1, 2024, for FY2025.
- Once the ACSD has passed and you've chosen a service provider, include them when you reply to Information Requests via email.
- Ensure your service provider is aware of all the necessary documentation needed for future steps in the application process.
- All bid correspondence should be handled via email for audit purposes.
- HCPs and service providers are required to retain documentation for a minimum of five years.

# **Best Practices – FCC Form 462 (Funding Request)**

- Do not enter into an agreement with a service provider until after the ACSD has passed.
- Include all required documentation when submitting your FCC Form 462.
- Include a cover letter if needed to clarify information entered into the FCC Form 462.
- If submitting funding requests for equipment, data center or administrative offices or network expenses, tip sheets can be found on the <u>Step 4: Submit Funding Requests</u> webpage under the Additional Resources section.
- Be sure to actually sign, certify and submit all FCC Forms 462 before 11:59 p.m. ET on April 1, 2025 (Drafts are not considered submitted).
- HCPs and service providers are required to retain documentation for a minimum of five years.

Available for Public Use

#### **Resources**

#### HCF Program Funding Request Office Hours

# **Upcoming Trainings**

Please join the RHC outreach team for the following webinars:

- Telecom Program Office Hours Webinar:
  - When: Wednesday, March 19, 2025, from 2-3 p.m. ET <u>Register</u>
- FY2025 Service Provider Training:
  - When: Wednesday, March 26, 2025, from 2-3 p.m. ET <u>Register</u>
- For a list of upcoming webinars, check the RHC <u>Upcoming Dates</u> webpage for dates and details.

# **Online Resources**

- <u>RHC Learn</u>
- <u>Step 4: Submit Funding Request</u> webpage
- <u>Welcome to RHC Connect FCC Form 462</u> webpage
- <u>Competitive Bidding Exemptions</u>
- <u>Request for Proposals (RFPs)</u>
- <u>Network Plans</u>
- Funding Limitations Tip Sheet
- Off-site Data Centers and Admin Offices Tip Sheet
- Equipment Tip Sheet
- <u>Authorizations</u> webpage
- <u>RHC Connect User Guide Third-Party Authorizations</u>

## **Online Resources - RHC Connect**

- <u>Welcome to RHC Connect FCC Form 460</u> webpage
  - RHC Connect User Guide
  - <u>Welcome to RHC Connect FCC Form 460</u> self-paced video training guide
- Welcome to RHC Connect FCC Form 461 webpage
  - <u>RHC Connect User Guide</u>
  - <u>Welcome to RHC Connect FCC Form 461</u> self-paced video training guide
- <u>Welcome to RHC Connect FCC Form 462</u> webpage
  - <u>RHC Connect User Guide</u>
  - <u>RHC Connect FCC Form 462</u> self-paced video training guide
- <u>Welcome to RHC Connect FCC Form 463</u> webpage
  - RHC Connect Form User Guide
  - <u>RHC Connect FCC Form 463</u> self-paced video training guide
- Information Request Tip Sheet

## **RHC Program Customer Service Center**



- Email: <u>RHC-Assist@usac.org</u>
- Include in your email:
  - HCP Number
  - FRN Number
- Phone: (800) 453-1546
  - Hours are 8 a.m. 8 p.m. ET
  - Monday- Friday
- Additional Hours Filing Window Close:

#### **The RHC Customer Service Center**

The RHC Customer Service Center CAN	The RHC Customer Service Center CANNOT
Answer general questions regarding both programs	Determine eligibility of a specific site or service before an official form submission
Provide account holder information for an HCP	Review a form or document for accuracy before an official submission
Provide clarity regarding FCC Report and Order 19-78 and other FCC orders	Contact a service provider or other account holder on someone else's behalf
Provide helpful resources and best practices for forms	Provide documents that are not already accessible in My Portal
Assist with My Portal and RHC Connect	Transfer a call to a specific form reviewer

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# **Questions?**



# **Thank You!**

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