



# **FY2023 RHC Program Invoicing Best Practices**

September 4, 2024

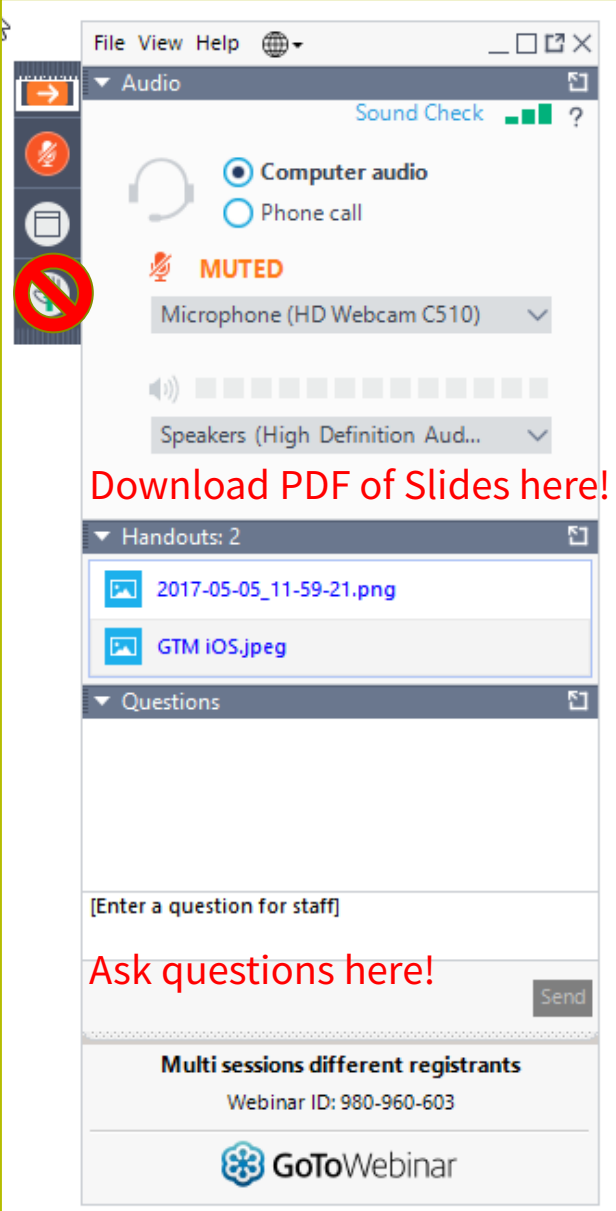
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Handouts: 2

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Questions

[Enter a question for staff]

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Send

Multi sessions different registrants  
Webinar ID: 980-960-603

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# Meet Our Team



**Simone Andrews**

Senior Communications  
Specialist | RHC Outreach



**Blythe Albert**

Advisor of Program  
Management | RHC Outreach

# Agenda

- Invoicing Overview and Program Updates
- Invoicing Process HCF Program for FY2023
  - Filing the FCC Form 463 – RHC Account Holders
  - Filing the FCC Form 463 – Service Providers
- Invoicing Process Telecom Program
  - Filing the FCC Form 467
  - Filing the Telecom Invoice – Service Providers
- Disbursement Process
- Resources

# By the end of the webinar, you will be able to...

- *Understand the Healthcare Connect Fund (HCF) and Telecommunications (Telecom) Program invoicing process and deadlines*
- *Mark your calendars with upcoming invoice filing deadlines*
- *Identify the steps to submit the FCC Form 463 invoice for USAC review*
- *Identify resources to help you submit the FCC Form 463 invoice*
- *Identify the steps to submit the Telecom Program FCC Form 467 for USAC review*
- *For service providers, understand how to approve the FCC Form 463 and submit the Telecom invoice*
- *Understand the disbursement process*

# Glossary

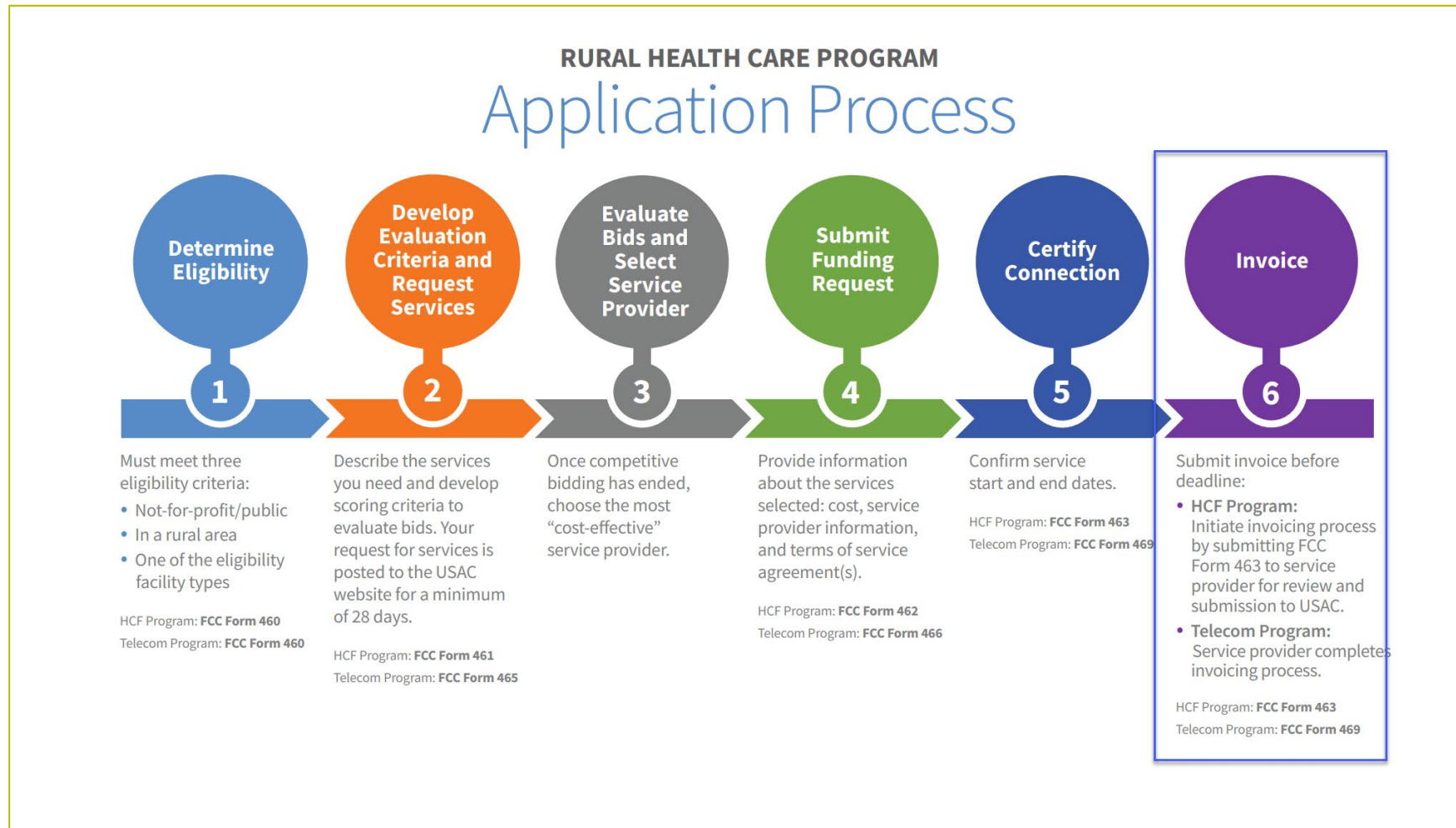
<b>Acronym</b>	<b>Definition</b>
FCC	Federal Communications Commission
HCF	Healthcare Connect Fund
FY	Funding Year
HCP	Health Care Provider (your site)
HCP Number	Number associated with your site
PAH	Primary Account Holder
FRN	Funding Request Number
FCL	Funding Commitment Letter
BAN	Billing Account Number
SPIN/498 ID	Service Provider Identification Number
FCCRN	FCC Registration Number (Referred to as FRN on FCC website)

# Invoicing Overview and Program Updates

FY2023 RHC Program Invoicing Best  
Practices



# Application Process



# RHC Connect

- FCC Form 463 for approved FY2023 FRNs will be submitted in RHC Connect.
- FCC Forms 463 should be submitted in My Portal for all multi-year commitments for funding years prior to FY2022.
- The FCC Form 469 (the new Telecom invoicing form), will move to RHC Connect in late September .
- All Connected Care Pilot Program (CCPP) forms will remain in My Portal.

# Invoice Filing Deadlines

- The invoice filing deadline, per FCC [Report and Order 19-78](#), is four months (120 days) from the service delivery deadline in both the HCF and Telecom Programs.
  - For more information, please see the [HCF invoice page](#) and [Telecom invoice page](#).
  - Invoice filing deadlines can be found on our website by going to the Open Data platform and clicking on the [Rural Health Care Commitments and Disbursements \(FCC Form 462/466/466A\)](#) webpage.
    - The invoice filing deadline can be found in the last column of the searchable table when viewing data or in Column BE of the Excel spreadsheet.

# FCC 23-110 Third Report and Order

- On December 14, 2023, the FCC released [Order FCC 23-110](#). This order 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, aligns program deadlines, simplifies rules for calculating urban rates, streamlines administrative processes, and frees up unused funding for other purposes. Changes to RHC program rules are as follows:
  - 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.
  - Provides health care providers more time to complete Service Provider Identification Number (SPIN) changes by moving the SPIN change deadline to align with the invoice filing deadline (Beginning in FY2023).
  - Simplifies urban rate calculations by eliminating the seldom-used “standard urban distance” component of the rule for determining urban rates in the Telecommunications (Telecom) Program (Beginning in FY2025).
  - Allows health care providers to request changes to the dates covered by an evergreen contract post-commitment (Beginning in FY2024).
  - 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 determination every time they engage in competitive bidding.

# Supply Chain Order

- As a reminder, when service providers login to [My Portal](#) and RHC Connect, 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 [Section 54.9 prohibition](#) on USF for specified transactions with companies deemed to pose a national security threat. The second certification affirms compliance with [Section 54.10](#), which prohibits the use of any Federal subsidies on any communications equipment and services on the [Covered List](#).
- **FY2023 and FY2024 Applicants:** If you requested services or equipment provided or that contain components of products produced by any of the listed covered companies or any of their parents, affiliates and subsidiaries in FY2023, you cannot invoice for these funds. Instead, you should immediately request a [service substitution](#).
- **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 and subsidiaries.

# Supply Chain Web Page

- [Supply Chain webpage](#)

About ▾ E-rate ▾ Rural Health Care ▾ Lifeline ▾ High Cost ▾ Service Providers ▾

USAC | About | Reports & Orders | **Supply Chain**

**Reports & Orders**

- Annual Report
- FCC Filings
- FCC Orders
- Supply Chain**

## Supply Chain

Since November 2019, the FCC has taken a number of actions to protect the national security of the United States, the security and safety of United States persons, and the integrity of communications networks or the communications supply chain. The FCC has also implemented the [Secure and Trusted Communications Networks Act of 2019](#) . The FCC's actions can be found at [www.fcc.gov/supplychain](http://www.fcc.gov/supplychain) .

In November 2019, the FCC released the [Supply Chain First Report and Order](#) adopting a rule (47 CFR Section 54.9) which prohibits the use of Universal Service Fund (USF) support to purchase, obtain, maintain, improve, modify, operate, manage, or otherwise support equipment or services produced or provided by companies found to pose a national security threat to the integrity of communications networks or the communications supply chain.

**Questions?**

# **Filing the FCC Form 463 – HCF Applicants**

FY2023 RHC Program Invoicing Best  
Practices



# My Portal Landing Page

- Log in to My Portal and click **RHC Connect**.

The screenshot displays the 'Dashboard' page of the My Portal. At the top, there is a yellow notification banner with an information icon and text: 'In accordance with the Supply Chain orders, new certifications have been added to the following forms: RHC - FCC Form 463 and the and High Cost & Lifeline - FCC Form 481. Service providers are required to submit these annual certifications. For additional informa'. Below the banner, the dashboard is divided into two main sections. On the left, 'Upcoming Dates' is shown with a calendar icon, listing '07/07 2022 New Filer ID Basics Webinar' and '08/01 2022 Quarterly Filing due August 1'. On the right, the 'Rural Health Care' section is expanded, showing three items: 'RHC Connect' (highlighted with a red box), 'RHC My Portal', and 'Connected Care Pilot Program'. Each item has a brief description of its purpose.

Dashboard

*i* In accordance with the Supply Chain orders, new certifications have been added to the following forms: RHC - FCC Form 463 and the and High Cost & Lifeline - FCC Form 481. Service providers are required to submit these annual certifications. For additional informa

Upcoming Dates

07/07 2022 **New Filer ID Basics Webinar**

08/01 2022 **Quarterly Filing due August 1**

Rural Health Care

**RHC Connect** - Health care providers must use this section to create and submit required forms for the Healthcare Connect Fund (HCF) Program for all required forms other than the FCC Form 460 for FY2022 and later.

**RHC My Portal** - Health care providers must use this section to create and submit required forms for the Telecommunications (Telecom) Program, the Connected Care Pilot Program (CCPP), and the Healthcare Connect Fund (HCF) Program for the FCC Form 460 and all required forms for FY2021 and earlier.

**Connected Care Pilot Program** - Health care providers must use this form to complete and submit their original Connected Care Pilot Program proposal application directly to FCC.

# Dashboard

- On the **My Forms** tab, you can view the status of all forms.
- Click the icons to view, continue with a draft form, discard a form, view a PDF copy or view the email for a processed invoice.

The screenshot shows the RHC Connect dashboard. At the top, there are navigation tabs: DASHBOARD, START A FORM, and a user profile icon. The main header area features a background image of a healthcare worker and the text 'RHC Connect'. Below this, there are three tabs: 'My Information Requests', 'My Forms' (which is selected), and 'My Organizations'. A clock displays '11:49 Feb 2, 2022'. A search bar is set to 'Form Type: Form 463' and shows 'Search 463 Forms'. Below the search bar is a table with the following data:

Site Name	Site Number	Form	Invoice Number	Nickname	Last Updated	Status
		463	INV0000023904		4/2/2022	Submitted
		463	INV0000029564		4/9/2022	SP Review
		463	INV0000022204		4/18/2022	Draft
		463	INV000002152204		4/30/2022	Processed
		463	INV0000022554		4/20/2022	Returned
		463	INV0000023304		5/20/2022	Withdrawn

A red box highlights the action icons for each row in the table, which include: view (eye), PDF (document), share (share icon), view (eye), share (share icon), view (eye), continue (play button), discard (trash), view (eye), PDF (document), email (envelope), view (eye), continue (play button), discard (trash), and view (eye), PDF (document).

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# Dashboard (continued)

- Click **START A FORM**.

The screenshot displays the RHC Connect dashboard interface. At the top, a blue navigation bar contains two buttons: 'DASHBOARD' and 'START A FORM'. The 'START A FORM' button is highlighted with a red rectangular box, and a red arrow points upwards towards it from the left side of the dashboard. Below the navigation bar is a large banner image of a healthcare professional wearing a white face mask. The text 'RHC Connect' is overlaid on the bottom left of this banner. Below the banner, the dashboard features a yellow notification bar with '(38) Unread Notifications'. A blue navigation bar below the notification bar contains three tabs: 'Information Requests' (which is active), 'My Forms', and 'My Organizations'. A blue banner below the tabs displays a clock icon and the text 'The Funding Year 2023 funding request filing window closes in 114 days.' Below this, the 'Information Requests' section includes a search bar with the placeholder text 'Search for Information Requests', a 'SEARCH' button, a 'Form Type' dropdown menu set to 'FCC Form 462', and a 'Type' dropdown menu set to '--- Select a Value ---'. A circular clock widget on the left side of the dashboard shows the time '11:12' and the date 'Sep 07 2022'. At the bottom of the 'Information Requests' section, there is a link for 'Advanced Search Options'.

# Starting a Form

- Click the box titled **FCC Form 463** and then click **Next**.

RHC Connect

11:16  
Sep 07 2022

<

What type of Form would you like to file?

FCC Form 461  
Develop Bid Evaluation Criteria & Select Services

FCC Form 462  
Evaluate Bids & Select Service Provider

FCC Form 463  
Invoice USAC

After determining that you are eligible, the next step is to identify the services you need and develop the bid evaluation criteria you will use to assess service provider bids by completing the FCC Form 461 (Request for Services Form).

This form provides information about the services, equipment, or network facilities selected, and certifies that those services were the most cost-effective option of the offers received.

Once you receive a bill from the service provider, you can create an invoice for the services received using the FCC Form 463.

NEXT

# General Information

- Select the HCP or consortium from the dropdown menu and then select the FRN.
- Enter a **Nickname** for the FCC Form 463.
- Click **Save & Continue**.

The screenshot shows the 'General Information' section of the FCC FORM 463 application. The page has a navigation bar with tabs for 'General Information', 'Invoice Line Items', 'Supporting Documentation', 'Certifications', and 'Signature'. The 'General Information' tab is active. Below the navigation bar, the title 'FCC FORM 463' is displayed, followed by a sub-section 'General Information'. A dropdown menu for 'Paperwork Reduction Act (PRA)' is visible. A yellow warning box contains the text: '▲ Note: Once you select a HCP or Consortium and corresponding Form 462 and click Continue, you will not be able to change your selection.' The form fields include: 'HCP or Consortium' (dropdown menu), '\* Form 462 Selection' (dropdown menu), 'RHC Invoice Number' (text input), 'Funding Year' (set to 2023), '\* Nickname' (text input with 'Invoice #1' entered), 'SPIN/498 ID' (text input), and 'Vendor Name' (text input). At the bottom left is an 'EXIT' button, and at the bottom right is a 'SAVE & CONTINUE' button. Red arrows point to the 'HCP or Consortium' dropdown, the '\* Form 462 Selection' dropdown, the '\* Nickname' text input, and the 'SAVE & CONTINUE' button. The text 'Approved by OMB 3060-0804' is at the bottom right.

# Invoice Line Items

- Click the **Ready** hyperlink under the **Status** column for the first line item.

RHC\_INV20220009920001

General Information
Invoice Line Items
Supporting Documentation
Certifications
Signature

**FCC FORM 463**

**Invoice Line Items**

Select the approved line items from Form 462 RHC20220009920 that you would like to add to this invoice.

Line Item # ↑	Billing Account Number	HCP Number	Site Name	Expense Category	Expense Type	Expense Frequency	Bandwidth (Upload/Download)	Total Cost Remaining to Invoice ⓘ	Today's Cost Invoiced ⓘ	Today's Potential Reimbursement ⓘ	Status ⓘ
1				Installation	Installation of Recurring Services	One Time		\$12,500.00			Ready
2				Equipment	Channel Service Unit / Data Service Unit (CSU/DSU) and Switches (leased)	Monthly		\$600,000.00			Ready
3				Installation	Installation of Recurring Services	One Time		\$12,500.00			Ready
4	555			Equipment	Fiber Network Transport Equipment	One Time		\$12,500.00	\$4,166.67	\$2,708.33	Added

# Invoice Line Items (continued)

- To use an Excel template to enter the information, navigate to the **Invoice Line Items** tab.
- Under **Advanced Features**, on the right side of the screen, click **Generate Template**.
- Open Excel spreadsheet and save it on your computer.
- Enter all information and click **Upload Completed Template**.

The screenshot shows the 'FCC FORM 463' interface. The 'Invoice Line Items' tab is selected and highlighted with a red box. On the right side, the 'Advanced Features' dropdown menu is open, showing 'Generate Template' and 'Upload Completed Template' options, both highlighted with red boxes. A red arrow points from the 'Advanced Features' dropdown to the 'Generate Template' option. Below the dropdown, there is a search bar with the text 'Select the approved line items from Form 462 [redacted] that you would like to add to this invoice.' and a 'SEARCH' button.

# Invoice Line Items (continued)

- If this is the first FCC Form 463 submission, enter the **Service Start Date** using the drop-down calendar.
- Enter the **Billing Period Start Date** and the **Billing Period End Date**.
- Enter **Total Cost Invoiced (Undiscounted)** and click **Add to 463**.

RHC\_INV20220009920001

General Information Invoice Line Items Supporting Documentation Certifications Signature

**FCC FORM 463**

**Invoice Line Items**

Select the approved line items from Form 462 RHC20220009920 that you would like to add to this invoice.

Search

Line Item #	Billing Account Number	HCP Number	Site Name	Expense Category	Expense Type	Expense Frequency	Bandwidth (Upload/Download)	Total Cost Remaining to Invoice	Today's Cost Invoiced	Today's Potential Reimbursement	Status
1				Installation	Installation of Recurring Services	One Time		\$12,500.00			Ready
2				Equipment	Channel Service Unit / Data Service Unit (CSU/DSU) and Switches (leased)	Monthly		\$600,000.00			Ready
3				Installation	Installation of Recurring Services	One Time		\$12,500.00			Ready
4	555			Equipment	Fiber Network Transport Equipment	One Time		\$12,500.00	\$4,166.67	\$2,708.33	Added

LINE ITEM: 2 | Monthly Expense

Total Cost Remaining to invoice  
\$600,000.00

Billing Account Number: 12345

Item Quantity Invoiced: 1

Maximum Amount for Chosen Period: \$50,000.00

Total Cost Invoiced (Undiscounted): \$50,000.00

Today's Potential Reimbursement: \$32,500.00

Service Start Date: 07/01/2022

Billing Period Start Date: 07/01/2022

Billing Period End Date: 08/31/2022

Show Calculations >



# Invoice Line Items (continued)

- Click **Show Calculations** to show the calculation based on entered information.
- Follow prior steps to add each line item to the FCC Form 463.

RHC\_INV20220009920001

General Information    Invoice Line Items    Supporting Documentation    Certifications    Signature

### FCC FORM 463

#### Invoice Line Items

Select the approved line items from Form 462 RHC20220009920 that you would like to add to this invoice.

Search

Line Item #	Billing Account Number	HCP Number	Site Name	Expense Category	Expense Type	Expense Frequency	Bandwidth (Upload/Download)	Total Cost Remaining to Invoice	Today's Cost Invoiced	Today's Potential Reimbursement	Status
1				Installation	Installation of Recurring Services	One Time		\$12,500.00			Ready
2				Equipment	Channel Service Unit / Data Service Unit (CSU/DSU) and Switches (leased)	Monthly		\$600,000.00			Ready
3				Installation	Installation of Recurring Services	One Time		\$12,500.00			Ready
4	555			Equipment	Fiber Network Transport Equipment	One Time		\$12,500.00	\$4,166.67	\$2,708.33	Added

LINE ITEM: 2 | Monthly Expense

Total Cost Remaining to Invoice: \$600,000.00

Billing Account Number: 12345    Service Start Date: 07/01/2022    Billing Period Start Date: 07/01/2022    Billing Period End Date: 08/31/2022

Item Quantity Invoiced: 1

Maximum Amount for Chosen Period: \$50,000.00

Total Cost Invoiced (Undiscounted): \$50,000.00

Today's Potential Reimbursement: \$32,500.00

Show Calculations

Total Undiscounted Cost From Approved FCC Form 462: \$600,000.00  
 Total Commitment From Approved FCC Form 462: \$390,000.00

The total commitment from your approved FCC Form 462 includes all reduction factors, including the percent eligible for support, the 65 percent HCF program discount, commitment capping, and proration.

---

Today's Cost Invoiced (Undiscounted): \$50,000.00  
 Today's Potential Reimbursement: \$32,500.00

You're invoicing for 8.33% of the line item's total cost (\$50,000.00/\$600,000.00).  
 Your Potential Reimbursement of \$32,500.00 is 8.33% of your Commitment Amount (\$390,000.00).

# Supporting Documentation

- Use the **Upload** button to upload supporting documentation including, at minimum, a vendor invoice and a proof of payment document.
- Click **Add Documents** and use the **upload** button for each document.
- Select the associated line item (s) from the drop-down menu.
- Click **Save & Continue**.

RHC\_INV20220009969001 RETURN OR FINALIZE

Summary Invoice Line Items **Supporting Documentation** Applicant Certifications Applicant Signature

### FCC FORM 463

#### Supporting Documentation

Document Type	Description	Upload File	Line Item(s)
Invoice		Test Invoice	Line 1
Proof of Payment		Test Proof of Payment	Line 1

ADD SERVICE PROVIDER COMMENT (Optional)

Comment History  
No comment history available

Approved by OMB 3060-0804

# Certifications

- Read and click all certifications.
- You will be unable to move forward until all certifications are clicked.
- Click **Save & Continue**.

RHC\_INV20220009969001

Summary Invoice Line Items Supporting Documentation **Applicant Certifications** Applicant Signature

---

## FCC FORM 463

### Certifications

- I certify under penalty of perjury that I am authorized to submit this request on behalf of the applicant or consortium.
- I certify under penalty of perjury that I have examined this form and attachments and, to the best of my knowledge, information, and belief, all information contained therein is true and correct.
- I certify under penalty of perjury that the applicant or consortium members have received the related services, network equipment, and/or facilities itemized on the invoice form.
- I certify under penalty of perjury that the required 35% minimum contribution for each item on the FCC Form 463 was funded by eligible sources as defined in the FCC rules and that the required contribution was remitted to the service provider.
- I understand that all documentation associated with this application, including all billing records for services received, must be retained for a period of at least five years after the last date of service delivered in a particular funding year pursuant to 47 CFR § 54.631.

Approved by OMB 3060-0804

# Signature

- Type your full name into the **Digital Signature** field and then click **Certify & Submit**.

RHC\_INV20220009969001

Summary Invoice Line Items Supporting Documentation Applicant Certifications **Applicant Signature**

## FCC FORM 463

### Signature

User Information

Name	
Email	
Phone	
Employer	
Title	
Employer's FCC RN	

Signature

Certifier's Full Name	
Digital Signature	
Date	Sep 7, 2022

Approved by OMB 3060-0804

# Best Practices for Creating the FCC Form 463

- Consolidate invoices.
- Use calendar drop down for billing start and end dates.
- Identify eligible amount for chosen period.
- Common issues:
  - Expense items unavailable to invoice
  - \$0.00 in the USF Support Amount to be Paid column
  - Error Messages

# Commonly Asked Questions

- *The total amount of funds invoiced is less than what is listed on the FCL. I divided the total amount by 12 months, which is one year of funding. How do I invoice for the full amount?*
  - USAC calculates the monthly recurring rate based on full months as they vary in the numbers of days, as opposed to the 365/366 days in a year.
  - For instance, January has 31 days and April has 30 days.
  - If you invoice for all committed funding dates consecutively, then you will receive the full committed funding amount as listed on your FCL.

# USAC Monthly Recurring Cost Calculation Example

- Entered billing dates of (September 24, 2023 - October 23, 2023)
  - Individual day calculations are different for September and October
- Line item 1 = \$100.00 monthly
- September (30 days):  $100 / 30 = \mathbf{\$3.33 \text{ per day}}$ 
  - $\$3.33 \times 7 \text{ days (September 24 - 30)} = \$23.31$
- October (31 days):  $100 / 31 = \mathbf{\$3.23 \text{ per day}}$ 
  - $\$3.23 \times 23 \text{ days (October 1 - 23)} = \$74.29$
- Total amount for billing period = **\$97.60** not \$100.00

## Commonly Asked Questions (continued)

- *Why is the service start date greyed out?*
  - When you file the first FCC Form 463 for an FRN, you are prompted you to enter a date into the service start date field.
  - Once USAC approves an FCC Form 463 with a service start date, neither USAC nor the account holder can modify that date at a later time.



# Commonly Asked Questions (continued)

- *Why is USAC requesting supporting documentation for my FCC Form 463?*
  - Per [FCC Report and Order 19-78](#), USAC must ensure that an invoice accurately reflects the services an HCP is receiving and the support due to the service provider.
  - RHC is requesting supporting documentation to verify the services that were submitted on the FCC Form 463 and confirm eligibility for payment for the requested billing period.
  - This validation ensures that HCPs receive accurate funding for approved services and eliminates the risk of fraud, waste, and abuse of program funds.

# Supporting Documentation – Best Practices

When responding to Information Requests, please submit the following documentation:

- **Copies of billing documentation** for the referenced billing period with the following information highlighted:
  - HCP Name
  - Circuit Location(s)
  - Billing Account Number (BAN)
  - Bandwidth
  - Circuit ID
  - Service Type
  - Monthly Recurring Charges (MRC)

## Supporting Documentation – Best Practices (continued)

- **Proof of payment** for the requested billing period, e.g., check, bank statement, or a printout from the accounts payable system. Proof of payment must show 35% of the MRC has been paid.
  - In the absence of payment or if no payment was made as a result of **credits** on an account, please provide an explanation of what action resulted from the credits.
- If these details can't be identified on an invoice or proof of payment document, please provide the contract or service agreement.
- Supporting documents must be submitted by the deadline on the Information Request.
- Requests for deadline extensions must be submitted **prior to the original deadline**.

# Supporting Documentation - Examples

- Marked up invoice that clearly reflects HCP, Billing Account Number (BAN) Circuit Location(s), Bandwidth, Service Type, and Monthly Recurring Charge (MRC).

<b>Account Number</b> 9001	<b>Billing Account Number</b>	<b>Invoice Number</b>
<b>Service Details</b> Expense Type/Circuit ID		
Ethernet Network Service : 62.		
Location A: Community Hospital,		
<b>Summary of Charges</b>		
<b>Service Charges</b>		
Recurring Charges	HCP name and service location	1,896.04
<b>Total Service Charges</b>		1,896.04
<b>Total Charges</b>		1,896.04
<b>Recurring Charges</b>	<b>Bandwidth</b>	<b>Billing Period</b>
<b>Description</b>	<b>Date Range</b>	<b>Amount</b>
Port - Gig E	Aug 1, 23 to Aug 31, 23	463.32
Regional Bandwidth - 1000 Mbps - Basic CoS	Aug 1, 23 to Aug 31, 23	1,432.72
<b>Total Recurring Charges</b>		<b>1,896.04</b> MRC

# Supporting Documentation – Examples (continued)

- Proof of payment using an accounts payable statement.

**Accounts Payable Statement**

Company	[REDACTED]	Payment Terms	Net 1	Ship-To Address	(empty)
Supplier	[REDACTED]	Discount Date	(empty)	Settlement Runs	[REDACTED]
Currency	USD	Due Date	06/18/2021	On Hold	No
Invoice Date	06/17/2021	Default Payment Type	PayMode Direct Deposit	Supplier Document Received	No
Invoice Received Date	07/02/2021	Default Tax Option	Enter Tax Due to Supplier	Supplier's Invoice Number	[REDACTED] <b>Proof of payment matches invoice number</b>
Total Invoice Amount	154.94			External PO Number	(empty)
Amount Due	0.00			Referenced Invoices	(empty)
				Statutory Invoice Type	[REDACTED] United States of America

Invoice Lines   **Activity**   Process History

Turn on the new tables view

Payments 1 item

Supplier Payment	Payment Date <b>Payment date</b>	Status	Reconciliation Status	Company	Transaction Reference	<b>Payment amount</b> Payment Amount	Discount Taken
...	07/02/2021	Complete	Reconciled	[REDACTED]	[REDACTED]	154.94	0.00

# Supporting Documentation – Examples (continued)

- Proof of payment by check.

General Operating Account  
 CHECK DATE: 06/25/11  
 CHECK NO. [REDACTED]  
 VENDOR NO. [REDACTED]  
 AMOUNT: \$7,626.25  
 SEVEN THOUSAND SIX HUNDRED TWENTY-SIX 16/100  
 Pay TO THE ORDER OF [REDACTED] AT&T [REDACTED]  
 HCP PROSPERITY BANK BAY CITY, TEXAS  
 VOID  
 NEAT SENSITIVE  
 VOID

Proof of payment matches invoice number

INVOICE NO.	DATE	DESCRIPTION	GROSS AMOUNT	DISCOUNT	NET PAY
[REDACTED]	06/11/11	[REDACTED] BAN	4498.80	0.00	4498.80
			3127.35	0.00	3127.35
					Amount paid

CHECK DATE: 06/25/11  
 CHECK NO. [REDACTED]

# Supporting Documentation

- If supporting documentation is found to be insufficient or does not confirm approved services, a reviewer will send an Information Request.
- If a discrepancy is discovered, the invoice may be returned for corrections or denied.
  - Discrepancies can occur when the service approved on the FCC Form 462 is not the same service as what is in use and being billed by the service provider.
    - Example: The bandwidth for an expense increased from 25 Mbps to 50 Mbps, **even if there is no change to the monthly recurring charge.**
- Any pending issues about services must be resolved prior to submitting an invoice to USAC.
  - If an HCP is in dispute with its service provider, an invoice **should not** be submitted to USAC until the dispute has been resolved.

# Information Request Reminders

- Forms with missing or incomplete information or documentation cannot be processed.
- If USAC requires information that cannot be located on the submitted supporting documentation, you will receive an Information Request.
- All account holders will receive all Information Requests.
- Account holders have 14 calendar days to answer 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.
- Forms are denied if Information Requests are not answered within 14 calendar days.



**Questions?**

# Filing the FCC Form 463 – HCF Service Providers

FY2023 RHC Program Invoicing Best Practices

# Service Provider Review

- An email notification will be sent stating that there's an invoice available for review.
- Log in to RHC Connect.
- Carefully review form for accuracy.
  - Confirm billing period and invoiced amount.
  - If inaccurate, return invoice to HCP.
- Certify and sign the FCC Form 463.

# My Portal Landing Page

- Log in to My Portal and click **Rural Health Care**.

Universal Service Administrative Co. Sign Out

## Dashboard

*i* In accordance with the Supply Chain orders, new certifications have been added to the following forms: RHC - FCC Form 463 and the Telecom invoice, E-rate - FCC Form 473, and High Cost & Lifeline - FCC Form 481. Service providers are required to submit these annual certifications. For additional information, visit the [USAC Supply Chain](#) page. *x*

Upcoming Dates	High Cost	Help?
09/14 2022 <a href="#">September 2022 Monthly Webinar</a>	Lifeline	<a href="#">Send us a message</a> <a href="#">Click here</a>
09/21 2022 <a href="#">Funding Year 2022 Update Webinar</a>	<b>Rural Health Care</b>	<a href="#">Call us</a> (888) 641-8722
09/30 2022 <a href="#">CAF BLS Form 507 Line Counts Due (Optional)</a>	Schools and Libraries	
<a href="#">see full calendar</a>	Service Providers	
	USAC Customer Service Portal	

# My Portal Landing Page (continued)

- Click **RHC Connect**.

## Dashboard

*(i)* In accordance with the Supply Chain orders, new certifications have been added to the following forms: RHC - FCC Form 463 and the Telecom invoice, E-rate - FCC Form 473, and High Cost & Lifeline - FCC Form 481. Service providers are required to submit these annual certifications. For additional information, visit the [USAC Supply Chain](#) page. ✕

### Upcoming Dates

09/14 2022 **September 2022 Monthly Webinar**

---

09/21 2022 **Funding Year 2022 Update Webinar**

---

09/30 2022 **CAF BLS Form 507 Line Counts Due (Optional)**

[see full calendar](#)

### High Cost

High Cost ∨

### Lifeline

Lifeline ∨

### Rural Health Care

Rural Health Care ∧

**Telecom Invoice** - Service Providers must use this page to submit and manage invoices in the Telecommunications Program.

**My Portal FCC Form 463** - Service providers must use this page to submit and manage invoices (FCC Forms 463) in the Healthcare Connect Fund (HCF) Program for FY2021 and earlier, and the Connected Care Pilot Program (CCPP).

**RHC Connect** - Service providers must use this page to submit and manage invoices (FCC Forms 463) in the Healthcare Connect Fund (HCF) Program for FY2022 and later

### Help?

**Send us a message**  
[Click here](#)

**Call us**  
(888) 641-8722

# Dashboard

- Click the **My Invoices** tab and locate invoice.
- Under **Actions** column, click on **view** icon.

Dashboard

RHC Connect

My Funding **My Invoices** My SPINs

15:23  
Sep 09 2022

My Form 462s

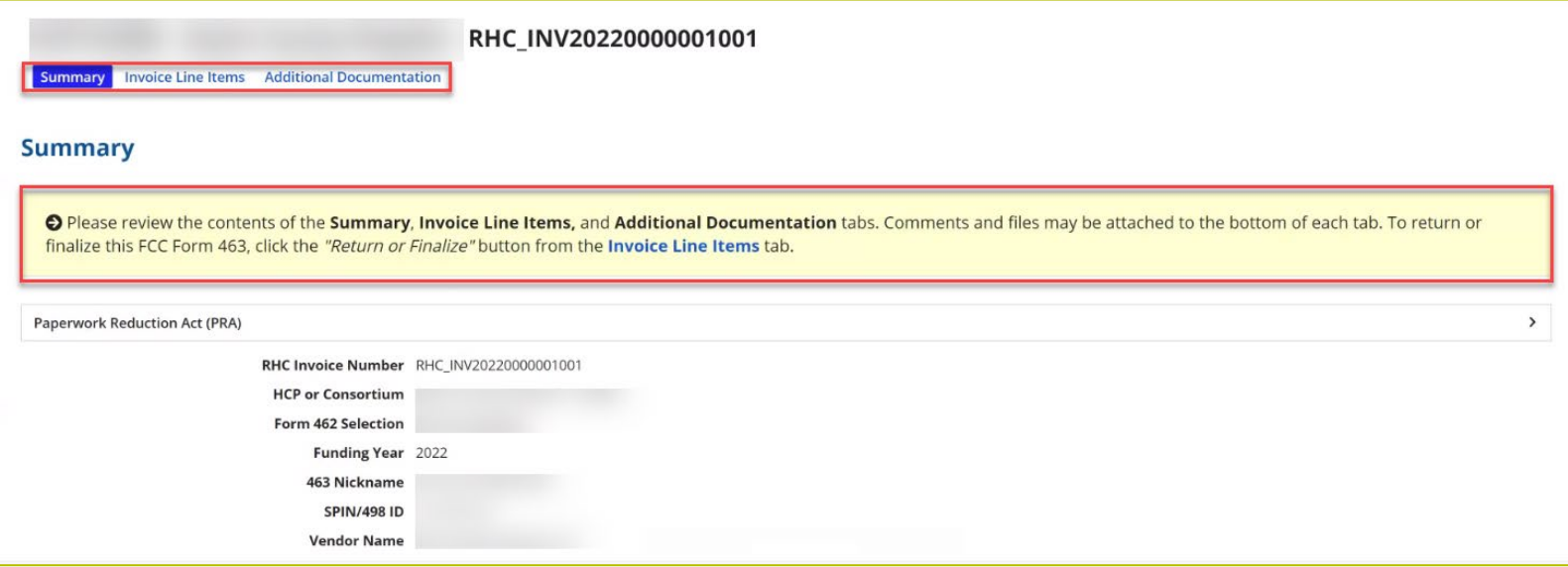
Q Search Form 462s SEARCH status | Any

Invoice Number	Site Name	Site Number	Form 462	Invoice Deadline	Status	Actions
RHC_INV20220009920001			RHC20220009920	10/28/2025	SP Review	👁
RHC_INV20220009895004			RHC20220009895	10/28/2025	Returned	
RHC_INV20220009902001			RHC20220009902	10/28/2025	Submitted	👁 📄
RHC_INV20220009959001			RHC20220009959	10/28/2025	Submitted	👁 📄
RHC_INV20220009959002			RHC20220009959	10/28/2025	Returned	
RHC_INV20220005387004			RHC20220005387	10/28/2025	Submitted	👁 📄
RHC_INV20220009895007			RHC20220009895	10/28/2025	Returned	
RHC_INV20220006655001			RHC20220006655	10/28/2025	Submitted	👁 📄
RHC_INV20220009969001			RHC20220009969	10/28/2025	SP Review	👁
RHC_INV20220009960002			RHC20220009960	10/28/2024	Submitted	👁 📄

< 1 - 10 of 17 >

# Summary Section – General Information

- Review information in the **Summary** section.
- Navigate to each section by clicking the hyperlinks at the top of the page.
- Please note the instructions in the yellow box.
- Click **Add service provider comment** at the bottom of each tab if you want to add a comment or upload a document.



RHC\_INV20220000001001

Summary Invoice Line Items Additional Documentation

### Summary

Please review the contents of the **Summary**, **Invoice Line Items**, and **Additional Documentation** tabs. Comments and files may be attached to the bottom of each tab. To return or finalize this FCC Form 463, click the "Return or Finalize" button from the **Invoice Line Items** tab.

Paperwork Reduction Act (PRA) >

RHC Invoice Number RHC\_INV20220000001001

HCP or Consortium [blurred]

Form 462 Selection [blurred]

Funding Year 2022

463 Nickname [blurred]

SPIN/498 ID [blurred]

Vendor Name [blurred]

# Invoice Line Items

- All expense items are displayed in the **Invoice Line Items** section.
- An overview of each line item is displayed on this page.
- Click on each line item to review all of the data entered by the applicant.

RHC\_INV2022000001001

Summary **Invoice Line Items** Additional Documentation

Advanced Option ⓘ  
Download an Excel Document Version ⬇️

Search  SEARCH

Line Item #	Billing Account Number	HCP Number	Site Name	Expense Category	Expense Type	Expense Frequency	Bandwidth (Upload/Download)	Total Cost Remaining to Invoice ⓘ	Today's Cost Invoiced ⓘ	Today's Potential Reimbursement ⓘ
1	859563233			Equipment	Hardware	One-Time	1200/800 Mbps	\$15,000.00	\$10,500.00	\$8,000.00
5	866563233			Service	High Speed Service	Monthly	1200/800 Mbps	\$12,000.00	\$2,300.40	\$1,403.44
7	915263233			Equipment	Hardware	One-Time	1200/800 Mbps	\$14,000.00	\$5,403.33	\$2,402.00
10	859562223			Service	High Speed Service	Monthly	1200/800 Mbps	\$20,000.00	\$18,034.04	\$15,394.99
16	859863233			Equipment	Infrastructure	Quarterly	1200/800 Mbps	\$22,000.00	\$17,402.94	\$14,293.88
18	492563233			Equipment	Hardware	One-Time	1200/800 Mbps	\$18,500.00	\$12,394.22	\$10,300.22
21	253563233			Equipment	Hardware	One-Time	1200/800 Mbps	\$9,000.00	\$6,400.22	\$4,984.88



# Invoice Line Items (continued)

- Review all of the information entered on this page.

RHC\_INV20220009969001
RETURN OR FINALIZE

Summary
Invoice Line Items
Supporting Documentation
Applicant Certifications
Applicant Signature

### FCC FORM 463

#### Invoice Line Items

Select the approved line items from Form 462 RHC20220009969 that you would like to add to this invoice.

SEARCH

Line Item #	Billing Account Number	HCP Number	Site Name	Expense Category	Expense Type	Expense Frequency	Bandwidth (Upload/Download)	Total Cost Remaining to Invoice	Today's Cost Invoiced	Today's Potential Reimbursement
1	123456			Construction	HCP Owned Network Costs - Cable, Copper	Monthly	444 Kbps/77 Kbps	\$7,132,839.54	\$135,000.00	\$87,750.00

LINE ITEM: 1 | Monthly Expense

Total Cost Remaining to Invoice  
\$7,132,839.54

Billing Account Number  
123456

Service Start Date  
Jul 30, 2022

Billing Period Start Date  
Aug 1, 2022

Billing Period End Date  
Aug 31, 2022

Item Quantity Invoiced  
44

Maximum Amount for Chosen Period  
\$208,164.00

→

Show Calculations

Total Cost Invoiced (Undiscounted)  
\$135,000.00

Today's potential Reimbursement  
\$87,750.00

BACK

ADD SERVICE PROVIDER COMMENT (Optional)

Comment History

No comment history available

Approved by OMB 3060-0004

If you have questions please contact our Help Desk at (800) 453-1546 or RHC-Assist@usac.org 8:00 a.m. – 8:00 p.m. ET Monday through Friday for assistance.

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# Applicant Certifications

RHC\_INV20220009969001

Summary Invoice Line Items Supporting Documentation **Applicant Certifications** Applicant Signature

---

**FCC FORM 463**

**Certifications**

- I certify under penalty of perjury that I am authorized to submit this request on behalf of the applicant or consortium.
- I certify under penalty of perjury that I have examined this form and attachments and, to the best of my knowledge, information, and belief, all information contained therein is true and correct.
- I certify under penalty of perjury that the applicant or consortium members have received the related services, network equipment, and/or facilities itemized on the invoice form.
- I certify under penalty of perjury that the required 35% minimum contribution for each item on the FCC Form 463 was funded by eligible sources as defined in the FCC rules and that the required contribution was remitted to the service provider.
- I understand that all documentation associated with this application, including all billing records for services received, must be retained for a period of at least five years after the last date of service delivered in a particular funding year pursuant to 47 CFR § 54.631.

Approved by OMB 3060-0804

# Applicant Signature

RHC\_INV20220009969001

Summary Invoice Line Items Supporting Documentation Applicant Certifications **Applicant Signature**

**FCC FORM 463**

**Signature**

User Information

Name  
Email  
Phone  
Employer  
Title  
Employer's FCC RN

Signature

Certifier's Full Name  
Digital Signature  
Date Sep 7, 2022

Approved by OMB 3060-0804

# Finalizing the FCC Form 463

- Navigate back to the **Invoice Line Items** page.
- Click the **Return or Finalize** button.

RHC\_INV20220000001001

Summary **Invoice Line Items** Additional Documentation

### Invoice Line Items

Search

Advanced Option ⓘ  
Download an Excel Document Version

Line Item #	Billing Account Number	HCP Number	Site Name	Expense Category	Expense Type	Expense Frequency	Bandwidth (Upload/Download)	Total Cost Remaining to Invoice ⓘ	Today's Cost Invoiced ⓘ	Today's Potential Reimbursement ⓘ
1	859563233			Equipment	Hardware	One-Time	1200/800 Mbps	\$15,000.00	\$10,500.00	\$8,000.00
5	866563233			Service	High Speed Service	Monthly	1200/800 Mbps	\$12,000.00	\$2,300.40	\$1,403.44
7	915263233			Equipment	Hardware	One-Time	1200/800 Mbps	\$14,000.00	\$5,403.33	\$2,402.00
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21	253563233			Equipment	Hardware	One-Time	1200/800 Mbps	\$9,000.00	\$6,400.22	\$4,984.88

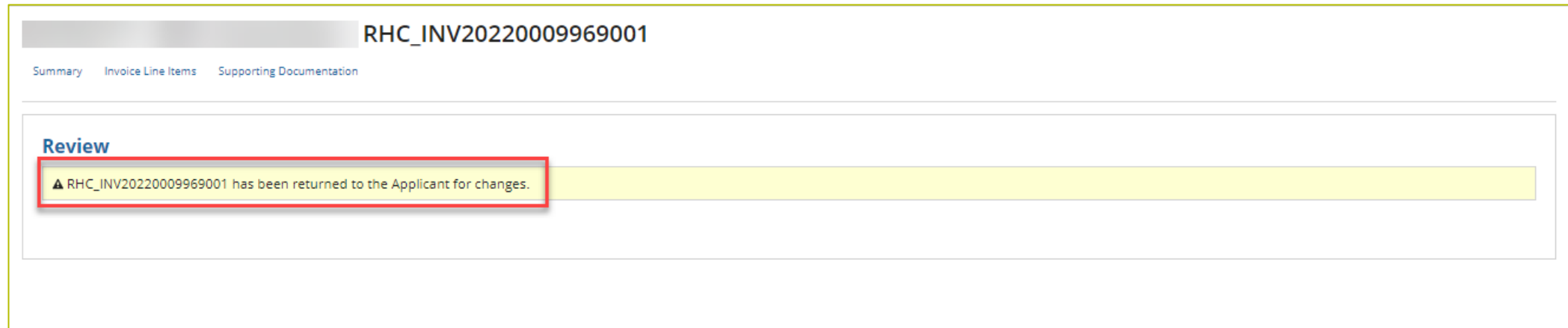
# Return to HCP

- If there is incorrect information entered in the FCC Form 463, return the form to the HCP.
- You must leave comments for the HCP, directing them to the incorrect information.
- The **Return Form** button will not be activated until at least one comment is entered.

The screenshot displays a web interface for reviewing an FCC Form 463. At the top, the form ID 'RHC\_INV20220009969001' is shown, along with navigation tabs for 'Summary', 'Invoice Line Items', 'Supporting Documentation', 'Applicant Certifications', and 'Applicant Signature'. The main section is titled 'Review' and contains a yellow warning box: '⚠ If you choose to Return for Changes, the application will be returned to the Health Care Provider and you will be taken back to the landing page.' Below this, the text reads 'I have reviewed this FCC Form 463 and I would like to ...'. Two buttons are present: 'RETURN FORM' (highlighted with a red box) and 'FINALIZE'. A second red-bordered box contains the instruction: '⚠ Please note: You must write at least one (1) comment on one or more of the prior tabs if you wish to return this FCC Form 463 to the Health Care Provider for changes.' A 'CANCEL' button is located in the bottom left corner. The footer includes the copyright notice '© 2022 Universal Service Administrative Company. All rights reserved.' and a link to 'PRIVACY POLICIES'.

# Return to HCP (continued)

- This message is displayed once the invoice is returned to the HCP.



The screenshot displays a software interface for an invoice. At the top, the invoice number "RHC\_INV20220009969001" is shown. Below it, there are navigation tabs for "Summary", "Invoice Line Items", and "Supporting Documentation". A "Review" section is visible, containing a yellow message box with a red border that reads: "▲ RHC\_INV20220009969001 has been returned to the Applicant for changes."

# Return to HCP (continued)

- When the HCP account holder logs back into RHC Connect, the service provider's comments will be displayed.
- The HCP can leave comments or make corrections.
- HCPs will be required to re-certify the FCC Form 463 before submitting it.
- Once the HCP submits the Form 463, the service provider will be notified.

RHC\_INV20220009969001

General Information **Invoice Line Items** Supporting Documentation Certifications Signature

**FCC FORM 463**

**Invoice Line Items**

Select the approved line items from Form 462 RHC20220009969 that you would like to add to this invoice.

Search

Line Item #	Billing Account Number	HCP Number	Site Name	Expense Category	Expense Type	Expense Frequency	Bandwidth (Upload/Download)	Total Cost Remaining to Invoice	Today's Cost Invoiced	Today's Potential Reimbursement	Status
1	123456			Construction	HCP Owned Network Costs - Cable, Copper	Monthly	444 Kbps/77 Kbps	\$7,132,639.54	\$135,000.00	\$87,750.00	Added

**ADD COMMENT FOR SERVICE PROVIDER**

Optional

EXIT

**Comment History**

9/9/2022 3:52 PM EDT  
test, incorrect information

Showing 1 - 1 of 1

Approved by OMB 3060-0804

If you have questions please contact our Help Desk at (800) 453-1546 or RHC-Assist@usac.org 8:00 a.m. — 8:00 p.m. ET Monday through Friday for assistance.

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# Finalize Service Provider Review

- Log into RHC Connect to review the corrections.
- All comments are recorded and are displayed under the **Comment History** section.
- Click **Return or Finalize**.

RHC\_INV20220009969001
RETURN OR FINALIZE

Summary
Invoice Line Items
Supporting Documentation
Applicant Certifications
Applicant Signature

### FCC FORM 463

#### Invoice Line Items

Select the approved line items from Form 462 RHC20220009969 that you would like to add to this invoice.

Line Item #	Billing Account Number	HCP Number	Site Name	Expense Category	Expense Type	Expense Frequency	Bandwidth (Upload/Download)	Total Cost Remaining to Invoice	Today's Cost Invoiced	Today's Potential Reimbursement
1	123456			Construction	HCP Owned Network Costs - Cable, Copper	Monthly	444 Kbps/77 Kbps	\$7,132,639.54	\$135,000.00	\$87,750.00

**Comment History**

9/9/2022 3:56 PM EDT

correct

9/9/2022 3:52 PM EDT

test, incorrect information

Showing 1 - 2 of 2

Approved by OMB 3060-0804

If you have questions please contact our Help Desk at (800) 453-1546 or RHC-Assist@usac.org 8:00 a.m. — 8:00 p.m. ET Monday through Friday for assistance.

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# Declaration of Assistance

- Click the correct radio button to indicate whether any third parties were involved during the competitive bidding process.
- Then click **Next**.

The screenshot shows a web application interface for a Request for Proposal (RFP) or FCC Form 461. The header displays the ID 'RHC\_INV20220009969001' and navigation tabs for 'Summary', 'Invoice Line Items', 'Supporting Documentation', 'Applicant Certifications', and 'Applicant Signature'. A progress bar at the top indicates the current step is 'Declaration of Assistance', with 'Certifications' and 'Signature' as subsequent steps. The main content area is titled 'FCC FORM 463' and 'Declaration of Assistance'. It contains a question: 'Have any consultants or third parties helped you to identify the applicant's Request for proposals (RFP) or FCC Form 461, helped to connect you with the health care provider participating in the program, or is anyone authorized to act on your behalf in the RHC Program? \*'. Below the question are two radio buttons: 'Yes' and 'No'. The 'Next' button is highlighted with a red border. At the bottom left is an 'EXIT' button, and at the bottom right is a 'NEXT' button. The footer includes the text 'Approved by OMB 3060-0804', a help desk contact number '(800) 453-1546 or RHC-Assist@usac.org 8:00 a.m. — 8:00 p.m. ET Monday through Friday for assistance.', and a copyright notice '© 2022 Universal Service Administrative Company. All rights reserved.' along with a link to 'PRIVACY POLICIES'.

RHC\_INV20220009969001

Summary Invoice Line Items Supporting Documentation Applicant Certifications Applicant Signature

Declaration of Assistance Certifications Signature

**FCC FORM 463**

**Declaration of Assistance**

Have any consultants or third parties helped you to identify the applicant's Request for proposals (RFP) or FCC Form 461, helped to connect you with the health care provider participating in the program, or is anyone authorized to act on your behalf in the RHC Program? \*

Yes

No

EXIT

NEXT

Approved by OMB 3060-0804

If you have questions please contact our Help Desk at (800) 453-1546 or RHC-Assist@usac.org 8:00 a.m. — 8:00 p.m. ET Monday through Friday for assistance.

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# Declaration of Assistance (continued)

- If **Yes**, click the **Add Contact** hyperlink and enter information about the third-party assistance.
- Once all fields are complete, click **Save** to continue.

FCC FORM 463

### Declaration of Assistance

Have any consultants or third parties helped you to identify the applicant's Request for proposals (RFP) or FCC Form 461, helped to connect you with the health care provider participating in the program, or is anyone authorized to act on your behalf in the RHC Program? \*

Yes  
 No

Name	Title	Employer	Nature of Relationship	Email	Telephone Number
No items available					

[+ Add Contact](#)

**New Contact**

First Name  Middle Name(Optional)  Last Name

Title/Role

Employer

Address 1

Address 2

City  State  Zip

Email

Phone  Extension(Optional)

Nature of Relationship

# Declaration of Assistance (continued)

- A pop-up window will appear asking if you are sure you want to save the contact information.
- Click **Yes** to save the information.

The screenshot shows the 'Declaration of Assistance' form for FCC FORM 463. A red-bordered pop-up window is centered on the screen, asking 'Are you sure want to save the contact?' with 'NO' and 'YES' buttons. The 'YES' button is highlighted in blue. Below the pop-up, the form contains a table for listing contacts, which is currently empty with the text 'No items available'. Below the table is a '+ Add Contact' button. A 'New Contact' form is open, showing fields for First Name (John), Middle Name (Optional), Last Name (Smith), Title/Role (IT consultant), Employer (IT Heaven), Address 1 (1234 Main Street), Address 2, City (Los Angeles), State (Select State), Zip (90028), Email (john.smith@it.com), Phone (8001231234), Extension (Optional), and Nature of Relationship (consultant). At the bottom right of the 'New Contact' form are 'CANCEL' and 'SAVE' buttons. At the bottom left of the main form is an 'EXIT' button, and at the bottom right is a 'NEXT' button.

# Declaration of Assistance (continued)

- Once the information is saved, it will be displayed on the screen.
- Click **Next** to continue.

RHC\_INV20220009969001

Summary Invoice Line Items Supporting Documentation Applicant Certifications Applicant Signature

Declaration of Assistance Certifications Signature

**FCC FORM 463**

**Declaration of Assistance**

Have any consultants or third parties helped you to identify the applicant's Request for proposals (RFP) or FCC Form 461, helped to connect you with the health care provider participating in the program, or is anyone authorized to act on your behalf in the RHC Program?\*

Yes  No

Name	Title	Employer	Nature of Relationship	Email	Telephone Number
John Smith	IT consultant	IT Heaven	IT consultant	john.smith@it.com	2001231234

+ Add Contact

EXIT NEXT

Approved by OMB 3060-0804

If you have questions please contact our Help Desk at (800) 453-1546 or RHC-Assist@usac.org 8:00 a.m. — 8:00 p.m. ET Monday through Friday for assistance.

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# Declaration of Assistance (continued)

- If you click **No**, click **Next** to continue.

RHC\_INV20220009969001

Summary Invoice Line Items Supporting Documentation Applicant Certifications Applicant Signature

Declaration of Assistance Certifications Signature

**FCC FORM 463**

**Declaration of Assistance**

Have any consultants or third parties helped you to identify the applicant's Request for proposals (RFP) or FCC Form 461, helped to connect you with the health care provider participating in the program, or is anyone authorized to act on your behalf in the RHC Program? \*

Yes

No

EXIT

NEXT

Approved by OMB 3060-0804

# Certifications

- Read and click all certifications.
- Forms cannot advance until all certifications are clicked.
- Click **Save & Continue**.

**RHC\_INV20220009969001**

[Summary](#) | [Invoice Line Items](#) | [Supporting Documentation](#) | [Applicant Certifications](#) | [Applicant Signature](#)

---

Declaration of Assistance
**Certifications**
Signature

**FCC FORM 463**

**Certifications**

- I certify under penalty of perjury that I am authorized to submit this request on behalf of the service provider.
- I understand that the service provider must apply the amount submitted, approved, and paid by USAC to the billing account of the applicant(s) and FRN/FRN ID listed on this invoice.
- I certify under penalty of perjury that I have examined this form and attachments and that, to the best of my knowledge, information, and belief, the date, quantities, and costs provided are true and correct.
- I certify under penalty of perjury that I have abided by all RHC Program requirements and procedures, including all applicable Commission rules.
- I certify under penalty of perjury that I charged only for eligible services delivered or provided to the applicant prior to submitting the invoice form and accompanying documentation.
- I certify under penalty of perjury that I have not offered or provided a gift or any other thing of value to the applicant (or to the applicant's personnel, including its consultant) for which it will provide services.
- I certify under penalty of perjury that the consultants or third parties hired do not have an ownership interest, sales commission arrangement, or other financial stake in the service provider chosen to provide the requested services, and that they have otherwise complied with RHC Program rules, including the Commission's rules requiring fair and open competitive bidding.
- I certify under penalty of perjury, as a condition of receiving support, that I will provide to the health care providers, on a timely basis, all information and documents regarding supported equipment, facilities, or services that are necessary for the applicant to submit required forms or respond to Commission or Administrator inquiries.
- I understand that all documentation associated with this application, including all billing records for services received, must be retained for a period of at least five years after the last day of the delivery of supported services, equipment or facilities pursuant to 47 CFR § 54.631.
- I certify under penalty of perjury that no universal service support has been or will be used to purchase, obtain, maintain, improve, modify, or otherwise support any equipment or services produced or provided by any company designated by the Federal Communications Commission as posing a national security threat to the integrity of communications networks or the communications supply chain since the effective date of the designations.
- I certify under penalty of perjury that no Federal subsidy made available through a program administered by the Commission that provides funds to be used for the capital expenditures necessary for the provision of advanced communications services has been or will be used to purchase, rent, lease, or otherwise obtain, any covered communications equipment or service, or maintain any covered communications equipment or service previously purchased, rented, leased, or otherwise obtained, as required by 47 C.F.R. § 54.10.

EXIT   BACK
SAVE & CONTINUE

Approved by OMB 3060-0804

If you have questions please contact our Help Desk at (800) 453-1546 or RHC-Assist@usac.org 8:00 a.m. — 8:00 p.m. ET Monday through Friday for assistance.

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# Signature

- Your signature is your full name as it appears in RHC Connect.
- Click **Certify & Submit**.

RHC\_INV20220009969001

Summary Invoice Line Items Supporting Documentation Applicant Certifications Applicant Signature

Declaration of Assistance Certifications **Signature**

**FCC FORM 463**

**Signature**

Current User Information

Name	
Email	
SPIN/498 ID	
Service Provider Name	
Service Provider FCC RN	

Signature

Certifier's Full Name

Digital Signature

Date Sep 9, 2022

EXIT

Approved by OMB 3060-0804

If you have questions please contact our Help Desk at (800) 453-1546 or RHC-Assist@usac.org 8:00 a.m. — 8:00 p.m. ET Monday through Friday for assistance.

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# After Submitting

- Navigate back to the **Dashboard** and the invoice will appear as **Submitted** under the **Status** column.
- Under the **Actions** column, you can view the submitted FCC Form 463 or download a PDF copy of the form.

The screenshot shows the RHC Connect dashboard. At the top, there is a navigation bar with a 'Dashboard' button. Below this, a banner image of a healthcare worker is visible. The main content area has three tabs: 'My Funding', 'My Invoices' (selected), and 'My SPINs'. On the left, there is a clock showing 17:54 on Sep 09 2022. The 'My Form 463s' section contains a table with columns: Invoice Number, Site Name, Site Number, Form 462, Invoice Deadline, Status, and Actions. The table lists several invoices, with the one having Invoice Number RHC\_INV20220009969001 highlighted in red. This invoice has a status of 'Submitted' and an 'Actions' column containing icons for viewing and downloading.

Invoice Number	Site Name	Site Number	Form 462	Invoice Deadline	Status	Actions
RHC_INV20220009920001			RHC20220009920	10/28/2025	SP Review	👁️
RHC_INV20220009895004			RHC20220009895	10/28/2025	Returned	
RHC_INV20220009902001			RHC20220009902	10/28/2025	Submitted	👁️ 📄
RHC_INV20220009959001			RHC20220009959	10/28/2025	Submitted	👁️ 📄
RHC_INV20220009959002			RHC20220009959	10/28/2025	Returned	
RHC_INV20220005387004			RHC20220005387	10/28/2025	Submitted	👁️ 📄
RHC_INV20220009895007			RHC20220009895	10/28/2025	Returned	
RHC_INV20220006655001			RHC20220006655	10/28/2025	Submitted	👁️ 📄
RHC_INV20220009969001			RHC20220009969	10/28/2025	Submitted	👁️ 📄
RHC_INV20220009960002			RHC20220009960	10/28/2024	Submitted	👁️ 📄



# What to Expect After Submitting to USAC

- An invoice is not considered submitted until approved by the service provider and received by USAC.
- With no Information Requests, the review generally takes less than 10 days.
- If an Information Request is sent, it will come from [rhcadmin@usac.org](mailto:rhcadmin@usac.org).
  - Respond to the Information Request in RHC Connect.
  - Email notifications sent from RHC Connect are from an unattended mailbox.
  - Use the [Information Request tip sheet](#) on the USAC website as a resource.
- Approval will be held until response is received and reviewed.
- Email notification of invoice approval will be sent from [rhcadmin@usac.org](mailto:rhcadmin@usac.org) to all account holders.

# Post-Commitment Changes in RHC Connect

- The following operations are now available in RHC Connect for FY2022 and forward for the HCF Program:
  - SPIN changes, both correctional and operational
  - Site and service substitutions
  - Invoice filing deadline extension
  - Service delivery deadline extension for non-recurring costs in HCF
- These post-commitment operations are available in My Portal for funding commitments for FY2021 and prior funding years for HCF, Telecom and CCPP FRNs.
- [Post-Commitment Actions](#) webpage

**Questions?**

# **Invoicing Process – Telecom Program**

Invoicing Best Practices – HCF and Telecom Programs

# Submitting the FCC Form 467 – Telecom Program

- When the FCC Form 466 is approved, USAC issues a Funding Commitment Letter (FCL) and sends a link to the FCC Form 467 (Connection Certification).
- USAC emails a copy of the FCL to all account holders and the service provider. The FCL includes the estimated support amount based on the duration of the expected service.
- Review the FCL to ensure the Billing Account Number (BAN) is correct, confirm the actual start and actual end dates of service, and confirm that all other information is accurate.
- If the FCL is correct and the selected services have begun, submit the FCC Form 467.
  - The FCC Form 467 informs USAC that services have started.
  - An FCC Form 467 must be submitted for each approved FCC Form 466.
- Funds will not be disbursed until USAC has received and approved the FCC Form 467 and the Telecom invoice has been submitted and approved.

# HCP Support Schedule (HSS)

- Once the FCC Form 467 is submitted, USAC will send all account holders and the service provider an HCP Support Schedule (HSS).
  - Once the HSS is received, the service provider can begin the invoicing process.
- There is no form name or number for the Telecom Program invoice.
- Review the HSS to ensure all the information is correct.
- If you have any questions about the information on the HSS, email [RHC-Assist@usac.org](mailto:RHC-Assist@usac.org) with the FRN number in the subject line.
- If services were delayed or not turned on, it is the responsibility of the account holder to submit an FCC Form 467 revision in My Portal.
- After reviewing the HSS for accuracy, the service provider will credit the HCPs account.
- The service provider will log in to My Portal and submit an online invoice.

**Note:** For FY2024, the FCC Form 467 and the HSS will be eliminated. The FCC Form 469 will be used to invoice for the Telecom Program.

# FCC Form 467 Revision

MY FORMS MY DOCUMENTS MY CONTRACTS MY HCPS Mainline Health Systems, Inc. -

Fund Year 2022

Fund Year 2021

Form Type	Form 465 App #	Friendly Name	Last Edited	Form Status	ACSD	Action Available
465			Tue May 02 16:35:44 EDT	Posted		Select Circuits

Form Type	FRN	Friendly Name	Service Type	Bandwidth	Status	FCL Issued	Action	Invoice Deadline
466			Ethernet - Dedicated		Approved with Funding		Substitution Extend inv. deadline	

Form Type	FRN	Status	HSS Issued	Action
<a href="#">467</a>		Approved		Revise 467

New FCC Form 465 Create Exempt FCC Form 466

# FCC Form 467 Revision(continued)

**FCC Form 467 Revision Request**

HCP Name:

HCP Number:

FRN:

Funding Start Date: 07/01/20

Funding End Date: 08/30/20

**Desired Action**

**Application Request is required**  
**All certifications have to be completed**

Informing RHC that the service was not (or will not be) turned on during the funding year

Notifying RHC of changes to the service dates

Actual Service Start Date:

Actual Service End Date:

**Certifications**

I certify under penalty of perjury that the service identified above has been or is being provided to the above-named applicant.

I certify under penalty of perjury that the universal service credit will be applied to the telecommunications service billing account of the applicant or the billed entity as directed by the applicant.

I certify under penalty of perjury that I am authorized to submit this request on behalf of the above-named applicant.

I certify under penalty of perjury that I have examined the invoice and supporting documentation and that, to the best of my knowledge, information and belief, all statements contained herein are true.

I certify under penalty of perjury that the applicant or consortium that I am representing satisfies all of the requirements and will abide by all of the relevant requirements, including all applicable FCC rules, with respect to universal service benefits provided under 47 U.S.C. § 254.

I understand that any letter from USAC that erroneously states that funds will be made available for the benefit of the applicant may be subject to rescission.

I understand that all documentation associated with this request must be retained for a period of at least five years pursuant to 47 CFR § 54.631, or as otherwise prescribed by the Commission's rules.



# Telecom Invoice Certifications – Service Provider

## Certification

Form Guide

**RHC Notes:** Read the information in the certification carefully before certifying, signing, and submitting this form. If you are unsure about any of the information you should contact the RHC team prior to submitting.

- I certify under penalty of perjury that I am authorized to submit this invoice form on behalf of the service provider.
- I certify under penalty of perjury that the information contained in the invoice is correct and the applicant(s) and the Billed Account Number(s) listed above have been credited with the amounts shown under "Support Amount to be Paid by USAC."
- I certify under penalty of perjury that I have complied with all RHC Program requirements, including all applicable Commission rules.
- I certify under penalty of perjury that I have received and reviewed the Health Care Provider Support Schedule, invoice form and accompanying documentation, and that the rates charged for the provided or delivered telecommunications services, to the best of my knowledge, information and belief, are accurate and comply with the Commission's rules.
- I certify under penalty of perjury that the applicant paid the appropriate urban rate for the telecommunications services.
- I certify under penalty of perjury that I charged for only eligible services provided or delivered to the applicant prior to submitting the invoice form for payment and accompanying documentation.
- I certify under penalty of perjury that I have not offered or provided a gift or any other thing of value to the applicant (or to the applicant's personnel, including its consultant) for which it will provide services.
- I certify under penalty of perjury that any consultants or third parties hired do not have an ownership interest, sales commission arrangement, or other financial stake in the service provider chosen to provide the requested services, and that they have otherwise complied with RHC Program rules, including the Commission's rules requiring fair and open competitive bidding.
- I certify under penalty of perjury, as a condition of receiving support, that I will provide to health care providers, on a timely basis, all information and documents regarding supported equipment, facilities, or services that are necessary for the applicant to submit required forms or respond to Commission or Administrator inquiries.
- I understand that all documentation related to the delivery of supported services or demonstrate compliance with the rules must be retained for a period of at least five years after the last day of the delivery of discounted services pursuant to 47 CFR § 54.631, or as otherwise prescribed by the Commission's rules.
- I certify under penalty of perjury that no universal service support has been or will be used to purchase, obtain, maintain, improve, modify, or otherwise support any equipment or services produced or provided by any company designated by the Federal Communications Commission as posing a national security threat to the integrity of communications networks or the communications supply chain since the effective date of the designations.
- I certify under penalty of perjury that no Federal subsidy made available through a program administered by the Commission that provides funds to be used for the capital expenditures necessary for the provision of advanced communications services has been or will be used to purchase, rent, lease, or otherwise obtain, any covered communications equipment or service, or maintain any covered communications equipment or service previously purchased, rented, leased, or otherwise obtained, as required by 47 C.F.R. § 54.10.

You must select all certifications before advancing.

[Previous](#) [Preview FCC Invoice](#) [Cancel Changes](#)

# Supporting Documentation – Best Practices

When responding to Information Requests, please submit the following documentation:

- **Copies of billing documentation** for the referenced billing period with the following information highlighted:
  - HCP Name
  - Circuit Location(s)
  - Billing Account Number (BAN)
  - Bandwidth
  - Circuit ID
  - Service Type
  - Monthly Recurring Charges (MRC)

## Supporting Documentation – Best Practices (continued)

- **Proof of payment** for the requested billing period, e.g., check, bank statement, or a printout from the accounts payable system.
  - In the absence of payment or if no payment was made as a result of **credits** on an account, please provide an explanation of what action resulted from the credits.
- If these details can't be identified on an invoice or proof of payment document, please provide the contract or service agreement.
- Supporting documents must be submitted by the deadline on the Information Request.
- Requests for deadline extensions must be submitted **prior to the original deadline.**

# Telecom Program Invoicing

- If supporting documentation is found to be insufficient or does not confirm approved services, a reviewer will send an Information Request.
  - If a discrepancy is discovered, the invoice may be denied.
- USAC pays invoices in batches on the sixth and the 21st day of each month.
  - If the payment batch falls on a weekend or a holiday, the payment batch will be completed on the next business day.
- Service providers can expect payment of the approved invoice to arrive in their bank accounts three business days after the payment batch date.
- The online invoice status report is sent to the service provider point of contact (POC) on the payment batch date.
- The report explains which invoiced line items were accepted and denied (if any).

# Disbursement Process

FY2023 RHC Program Invoicing  
Best Practices

# Disbursement Process

- All account holders and service provider will receive email notification from [rhcadmin@usac.org](mailto:rhcadmin@usac.org) once the FCC Form 463 or Telecom invoice is approved.
- Funds are disbursed to the service provider on the sixth and 21st of each month, barring weekends and holidays.
  - For clerical errors, please notify USAC **before** the disbursement date.
- Record-keeping
  - HCPs and service providers are required to maintain records of billing and invoices for at least five years.

# Red Light Status and Voluntary Netting

- Red Light status
  - Contact Customer Support: (888) 641-8722
- Voluntary Netting

**Block 17: Offsetting Disbursement Payments Against Federal Universal Service Contribution Obligations For Rural Healthcare Participants**

*See Instruction Section III.O*

The following information pertains only to telecommunications companies participating in the Rural Health Care Program. In accordance with FCC rule section 54.679 regarding Rural Health Care payments, a telecommunications company may choose to offset its payment against its Federal universal service contribution. A telecommunications company must have an FCC Form 499 Filer ID number in order to offset its Rural Health Care Program payments against its Federal universal service contribution. In order to obtain an FCC Form 499 Filer ID number, visit <http://www.usac.org/cont/tools/forms/default.aspx> and select FCC Form 499. You do not need an FCC Form 499 Filer ID in order to be issued a FCC Form 498 ID.

94  Yes, I want my Rural Health Care Program disbursement payments to be offset against my Federal universal service contribution obligations. This box must be checked in order to receive offsets. The Default is "No."

# Resources

## FY2023 RHC Program Invoicing Best Practices



# Invoicing Webpages

- HCF Program - [Step 6: Invoice USAC.](#)

**Healthcare Connect Fund Program**

Step 1: Determine Eligibility of Your Site

Step 2: Develop Evaluation Criteria & Select Services

Step 3: Evaluate Bids & Select Service Provider

Step 4: Submit Funding Requests

Step 5: Review Your Funding Commitment Letter (FCL)

**Step 6: Invoice USAC**

Submit Consortia Annual Report

What is Consortium?

< Step 5

## Step 6: Invoice USAC

Invoicing is a joint process between you and your service provider using the FCC Form 463 (Invoice and Request for Disbursement Form).

### Invoicing Process

Once you receive a bill from the service provider, you can create an invoice for the services received using the FCC Form 463. You must certify that the information in the form and attachments is accurate and that you or another eligible source have paid the 35% contribution. Next, you send the FCC Form 463 to the service provider for approval through [My Portal](#). The service provider reviews the FCC Form 463 and certifies its accuracy, and then submits the form to USAC. Once USAC receives the FCC Form 463, it processes the form and, if approved, funds are then distributed to the service provider. As a reminder, please be sure to respond to any invoicing Information Requests by the 14-calendar day deadline listed in the email.

For more information on the Telecom program invoice process please see the [Telecom Step 6](#) page.

- Telecom Program - [Step 6: Invoice USAC.](#)

**Telecommunications Program**

Step 1: Determine Eligibility of Your Site

Step 2: Prepare For Competitive Bidding and Request Services

Step 3: Evaluate Bids & Select Service Provider

Step 4: Submit Funding Requests

Step 5: Review Funding Commitment Letter & Submit FCC Form 467

**Step 6: Invoice USAC**

< Step 5

## Step 6: Invoice USAC

Once you submit your FCC Form 467, USAC will send you and your service provider an HCP Support Schedule (HSS) and your service provider can begin the invoicing process. There is no form name or number for the Telecom program invoicing process.

### HCP Support Schedule (HSS) Contents

USAC sends the HSS to you and the service provider after processing the FCC Form 467. A [sample support schedule](#) is available for download. The HSS includes the following information:

- Funding year;
- HCP number;
- FRN;
- Billing Account Number (BAN);
- HCP name;
- 498 ID and service provider name;
- Supported service;
- Support start date;
- Support end date; and
- Support amount: per month (\$) and total support for the funding year.

# RHC Program Customer Service Center



Email: [RHC-Assist@usac.org](mailto:RHC-Assist@usac.org)

- Include in your email
  - HCP Number
  - FRN Number



- Phone: **(800) 453-1546**
  - Hours are 8 a.m. – 8 p.m. ET
  - Monday- Friday

# RHC Customer Service Center

<b>The RHC Customer Service Center CAN</b>	<b>The RHC Customer Service Center CANNOT</b>
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

**Questions?**

**Thank You!**





**Universal Service**  
Administrative Co.