

APPENDIX C

APPLICATION PROCESS GUIDANCE

The COVID-19 Telehealth Program (Program) will provide an additional \$249.95 million in funding, appropriated by Congress as part of the Consolidated Appropriations Act, 2021,¹ to help health care providers provide connected care services to patients at their homes or mobile locations in response to the novel Coronavirus 2019 disease (COVID-19) pandemic. The second round of the Program (Round 2), will provide immediate support to eligible health care providers responding to the COVID-19 pandemic by fully funding their telecommunications services, information services, and devices necessary to provide critical connected care services until the Program's funds have been expended or the COVID-19 pandemic has ended.

Interested health care providers must complete several steps to apply for Round 2 funding through the Program. This guidance is aimed at assisting applicants. There are three steps interested providers can take immediately to prepare to apply for the Program: (1) obtain an eligibility determination from the Universal Service Administrative Company (USAC); (2) obtain an FCC Registration Number (FRN); and (3) register with System for Award Management. If an interested party does not already have these steps and accompanying components completed, they must gather the necessary information and begin to complete other necessary steps now, so that they are prepared to submit applications for program funding as soon as applications can be accepted for filing. The various components are described below.

Eligibility Determination

Health care providers seeking to participate in Round 2 of the Program must obtain an eligibility determination from the Universal Service Administrative Company (USAC) for the lead health care provider site that they include in their application.² Health care provider sites that USAC has already deemed eligible to participate in the Commission's existing Rural Health Care Programs or to participate in the initial round of the Program (Round 1) may rely on that eligibility determination for Round 2 of the Program. Interested health care providers that do not already have an eligibility determination may obtain one by filing an FCC Form 460 (Eligibility and Registration Form) with USAC.³ **Applicants must have obtained a health care provider number to submit an application for Round 2 of the Program. However, applicants that do not yet have an eligibility determination from USAC can still file an application for Round 2 of the Program while their FCC Form 460 is pending with USAC.**

The FCC Form 460 can be found at: <https://www.usac.org/rural-health-care/resources/forms/>. The FCC Form 460 requires applicants to provide basic information about the individual health care provider, such as:

¹ Coronavirus Aid, Relief, and Economic Security Act, Pub. L. No 116-136, 134 Stat. 281 (2020) (CARES Act); Consolidated Appropriations Act, 2021, Pub. L. No: 116-260, Division N-Additional Coronavirus Response and Relief, Title IX-Broadband Internet Access Service, § 903 "FCC COVID-19 Telehealth Program" (2020), <https://www.congress.gov/bill/116th-congress/house-bill/133/text> (Consolidated Appropriations Act).

² Consistent with the Telecommunications Act of 1996, the COVID-19 Telehealth Program limits participation to nonprofit and public eligible health care providers that fall within the following categories: (1) post-secondary educational institutions offering health care instruction, teaching hospitals, and medical schools; (2) community health centers or health centers providing health care to migrants; (3) local health departments or agencies; (4) community mental health centers; (5) not-for-profit hospitals; (6) rural health clinics; (7) skilled nursing facilities; or (8) consortia of health care providers consisting of one or more entities falling into the first seven categories. See 47 U.S.C. §§ 254(h)(1)(A), (h)(2)(A), and (h)(7)(B).

³ As explained in the *Report and Order*, the COVID-19 Telehealth Program is open to rural and non-rural providers. Non-rural providers do not need to be part of a consortium to participate in the program. *Telehealth Program Round 2 Report & Order* at 10, para. 21.

- Address and contact information;
- Health care provider type;
- Brief explanation as to why the health care provider is eligible under the categories in section 254(h)(7)(B) of the Communications Act;
- Health care provider identifying number, such as a National Provider Identifier (NPI) code and/or taxonomy code; and
- Supporting documentation demonstrating the health care provider's eligibility.

Contact USAC for specific questions about eligibility and completing the eligibility form (FCC Form 460) via telephone at (800) 453-1546 or via email at: RHC-Assist@usac.org.

Application and Request for Funding and Registering to Receive Payments Through COVID-19 Telehealth Program

To submit an application, the applicant must first obtain an FCC Registration Number (FRN). Additionally, to receive payment through the Program, applicants must be registered with the federal System for Award Management. While interested parties do not need to be registered with the System for Award Management in to submit an application, applicants are strongly encouraged to start that process early.

Interested parties must submit an application through the COVID-19 Telehealth Program Application Portal, which applicants can find under the "Application" tab on the Commission's website, here: <https://www.fcc.gov/covid-19-telehealth-program>.

Obtaining an FCC Registration Number (FRN)

All applicants, like all other entities doing business with the Commission, must register for an FRN in the Commission Registration System (CORES). An FRN is a 10-digit number that is assigned to a business or individual registering with the FCC. This unique FRN is used to identify the registrant's business dealings with the FCC.

To register with CORES, please use the following link: <https://apps.fcc.gov/cores/userLogin.do>. The first step to setting up an account in CORES is creating a username and account in the FCC User Registration System. Before the account is activated, the user will receive an automated email titled "FCC Account Request Verification" and must verify its account email address as prompted. Once the user is logged in to CORES, the user should select the "Register New FRN" or "Associate Username to FRN" option as applicable from the menu options that appear and provide the information as prompted by CORES. Users will need to provide their Taxpayer Identification Number (TIN) to register. The TIN is a nine-digit number that the Internal Revenue Service (IRS) requires of all individuals, businesses, and other employers to identify their tax accounts with the IRS. Once the user provides the information required in CORES and clicks "Submit," CORES will generate a new FRN or associate the user's existing FRN with its account.

Required Information for Application for COVID-19 Telehealth Program Round 2

Applicants are required to submit the following information on their application for Round 2 of the Program. The actual wording on the electronic application may vary slightly from the wording in this Appendix to the Report and Order:

Applicant Information

- Applicant Name
- Applicant FCC Registration Number (FRN)
- Federal Employer Identification Number (EIN/Tax ID)

- Data Universal Number System Number (DUNS)⁴
- Business Type (from Data Accountability and Transparency (DATA) Act⁵ Business Types) – Applicants may provide up to three business types
- DATA Act Service Area – This information will be required for each line item for which funding is requested. Applicants must enter name of the applicable state(s) or “nationwide”

Contact Information

- Contact name for the primary and secondary individuals that are responsible for timely answering questions about the application
- Email addresses
- Phone numbers
- Position title
- Mailing address

Health Care Provider Information

- Lead health care provider name
- Facility name
- Indicate whether facility is a hospital
- Physical address, city, state, zip code
- County
- FCC Registration Number (FRN)
- Healthcare provider number⁶
- Eligibility type⁷

Conditions to be Treated with COVID-19 Telehealth Funding

- Whether the applicant will treat COVID-19 patients directly
- Whether the applicant will treat patients without COVID-19 symptoms or conditions (applicants will check all that apply):
 - Other infectious diseases
 - Emergency/Urgent Care
 - Routine, Non-Urgent Care
 - Mental Health Services (non-emergency)
 - Other conditions

⁴ A DUNS number is a unique nine-character number used to identify your organization. The federal government uses the DUNS number to track how federal money is allocated. Most large organizations, libraries, colleges, and research universities already have a DUNS number. Applicants should contact their grant administrator, financial department, chief financial officer, or authorizing official to identify their organization’s DUNS number. If your organization does not yet have a DUNS number, or no one knows it, visit the Dun & Bradstreet (D&B) website: <https://fedgov.dnb.com/webform/displayHomePage.do> or call 1-866-705-5711 to register or search for a DUNS number. Registering for a DUNS number is free of charge.

⁵ Digital Accountability and Transparency Act of 2014 (DATA Act), Pub. L. No. 113-101, 128 Stat. 1146 (2014).

⁶ USAC assigns the health care provider number when the FCC Form 460 is filed. See Universal Service Administrative Company, *Rural Health Care, Forms*, <https://www.usac.org/rural-health-care/resources/forms/> (last visited Mar. 24, 2021).

⁷ Eligibility type (e.g., hospital) is determined and confirmed by USAC when an entity files an FCC Form 460 and is deemed to be eligible.

Application Evaluation Metrics

- **Hardest Hit** - Whether the lead health care provider listed on the application, or an eligible health care provider that the applicant is applying on behalf of, is located in a hotspot or a sustained hotspot county⁸
 - If the qualifying entity is an eligible health care provider site that the applicant is applying on behalf of, the name, physical address, city, state, zip code, and county of the qualifying eligible health care provider site
- **Low-Income Area** - Whether the lead health care provider listed on the application, or an eligible health care provider that the applicant is applying on behalf of, is located in a low-income area⁹
 - If the qualifying entity is an eligible health care provider that the applicant is applying on behalf of, the name, physical address, city, state, zip code, and county of the qualifying eligible health care provider site; if the health care provider is located in Puerto Rico, the application must also provide the urbanization code
- **Round 1 Unfunded Applicant** - Whether the applicant applied for, but did not receive, funding during Round 1 of the Program
 - The Application Number¹⁰ of the Round 1 application or proof of an e-mailed application submission
 - Whether the applicant received funding during Round 1 of the Program
- **Tribal Community** - Whether the lead health care provider listed on the application, or an eligible health care provider that the applicant is applying on behalf of, is a health care provider that qualifies under the Tribal Community metric¹¹
 - If the qualifying entity is an eligible health care provider site that the applicant is applying on behalf of, the name, physical address, city, state, zip code, and county of the qualifying eligible health care provider

⁸ U.S. Department of Health and Human Services, *Community Profile Report*, at 13 (Mar. 11, 2021), <https://beta.healthdata.gov/Health/COVID-19-Community-Profile-Report/gqxm-d9w9> (Area of Concern Continuum by County).

⁹ See U. S. Census Bureau, *Small Area Income and Poverty Estimates*, Interactive Map, https://www.census.gov/data-tools/demo/saippe/#/?map_geoSelector=aa_c (last updated Dec. 2020) (Interactive map and data set reflecting poverty rates for the United States and counties within the United States as of 2019).

¹⁰ For applicants that applied during Round 1, the application number started with “GRA” followed by seven numbers (e.g., GRA0000123). Some applications submitted via e-mail during Round 1 did not receive a GRA number. If the applicant did not receive an application number, USAC may accept proof of an email submission in lieu of the application number.

¹¹ USAC, *Enhanced Tribal Benefit, Eligible Tribal Lands Maps and Shapefile*, <https://www.usac.org/lifeline/get-started/enhanced-tribal-benefit/#Eligible> (last updated Jan. 22, 2021) (providing link to eligible Tribal lands map and shapefile for reference purposes). See also 47 CFR § 54.400(e) (defining Tribal lands as “any federally recognized Indian tribe’s reservation, pueblo, or colony, including former reservations in Oklahoma; Alaska Native regions established pursuant to the Alaska Native Claims Settlement Act (85 Stat. 688); Indian allotments; Hawaiian Home Lands—areas held in trust for Native Hawaiians by the state of Hawaii, pursuant to the Hawaiian Homes Commission Act, 1920 July 9, 1921, 42 Stat. 108, et. seq., as amended”). We also include the Eastern Navajo Agency lands that have previously been designated as eligible for Lifeline and are included in the shapefile and map posted on USAC’s website. See *Federal-State Joint Board on Universal Service, Smith Bagley, Inc., Petition for Waiver of Section 54.400(e) of the Commission’s Rules*, Memorandum Opinion and Order, 20 FCC Rcd 7701 (2005) and *Sacred Wind Communication*, Order, 21 FCC Rcd 9227 (WCB 2006).

- If applicable, supporting documentation to verify that the qualifying entity is operated by the Indian Health Service or otherwise affiliated with a Tribe
- **Critical Access Hospital** - Whether the lead health care provider listed on the application, or an eligible health care provider that the applicant is applying on behalf of, qualifies as a Critical Access Hospital (CAH)¹²
 - Proof of CAH certification
- **Federally Qualified Health Center / Federally Qualified Health Center Look-Alike / Disproportionate Share Hospital** - Whether the lead health care provider listed on the application, or an eligible health care provider that the applicant is applying on behalf of, qualifies as a Federally Qualified Health Center (FQHC),¹³ as a FQHC Look-Alike (LAL),¹⁴ or as a Disproportionate Share Hospital (DSH)¹⁵
 - Proof of FQHC certification
 - Proof of qualification as a FQHC LAL¹⁶ or
 - Proof of DSH certification
- **Health Care Provider Shortage Area** - Whether the lead health care provider listed on the application, or an eligible health care provider that the applicant is applying on behalf of, is located in a Healthcare Provider Shortage Area (HPSA)¹⁷
 - HPSA Score, and
 - HPSA ID number, or
 - If the qualifying entity is an eligible health care provider that the applicant is applying on behalf of, the name, physical address, city, state, zip code, and county of the qualifying eligible health care provider site
- **Round 2 New Applicant** - Whether the applicant is applying to the Program for the first time
 - If applicable, applicants must certify, under penalty of perjury, that the applicant has not previously applied for Program funding

¹² Centers for Medicare and Medicaid Services, *Critical Access Hospitals*, <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/CertificationandCompliance/CAHs> (last updated Apr. 9, 2013); Flex Monitoring Team, *Critical Access Hospitals Locations List*, <https://www.flexmonitoring.org/critical-access-hospital-locations-list> (last updated Aug. 1, 2020).

¹³ Health Resources and Services Administration, *Federally Qualified Health Centers*, <https://www.hrsa.gov/opa/eligibility-and-registration/health-centers/fqhc/index.html> (last visited Mar. 12, 2021) (defining Federally Qualified Health Centers).

¹⁴ Health Resources and Services Administration, *Federally Qualified Health Center Look-Alike Eligibility*, <https://www.hrsa.gov/opa/eligibility-and-registration/health-centers/fqhc-look-alikes/index.html> (last visited Mar. 12, 2021); Health Resources and Services Administration, *Health Center Program Look-Alikes*, <https://bphc.hrsa.gov/programopportunities/lookalike/index.html> (last visited Mar. 12, 2021).

¹⁵ Health Resources and Services Administration, *Disproportionate Share Hospitals Eligibility*, <https://www.hrsa.gov/opa/eligibility-and-registration/hospitals/disproportionate-share-hospitals/index.html> (last visited Mar. 24, 2021) (describing eligibility criteria for a Disproportionate Share Hospital).

¹⁶ A list of FQHCs and LALs is available on the Health Resources and Services Administration website. Health Resources and Services Administration, *FQHCs and LALs by State*, <https://data.hrsa.gov/data/reports/datagrid?gridName=FOHCs> (last visited Mar. 12, 2021).

¹⁷ Applicants should use the HPSA score for primary care, which is publicly available on the Health Resources and Services Administration website. Health Resources and Services Administration, *Find Shortage Area*, <https://data.hrsa.gov/tools/shortage-area> (last visited Mar. 12, 2021).

- **Rural County** - Whether the lead health care provider listed on the application, or an eligible health care provider that the applicant is applying on behalf of, is located in a rural county¹⁸
 - If the qualifying entity is an eligible health care provider that the applicant is applying on behalf of, the name, physical address, city, state, zip code, and county of the qualifying eligible health care provider

Requested Funding Items

- Funding Request Details:
 - Category
 - Description of Service(s) and/or connected device(s)
 - Quantities
 - Supporting documentation, which should summarize the expected costs of the eligible services and connected devices requested and may include documentation such as an invoice or quote from a vendor or service provider (or similar information). **Such information should be specific enough to identify both the eligibility of and the cost of each line item to facilitate swift review of the application.**
- Total amount of funding requested

Registering with System for Award Management

To receive payments through Round 2 of the Program, applicants must be registered with the federal System for Award Management. The System for Award Management is a web-based, government-wide application that collects, validates, stores, and disseminates business information about the federal government's partners in support of federal awards, grants, and electronic payment processes.

Many applicants may already be registered with the System for Award Management and do not need to re-register with that system in order to receive payment through Round 2 of the Program. Health care providers not yet registered with the System for Award Management may still submit an application. However, the Bureau strongly recommends unregistered health care providers to start that registration process now because it may take up to 10 business days for your registration to become active and an additional 24 hours before that registration information is available in other government systems.

To register with the system, go to <https://www.sam.gov/SAM/> with the following information: (1) DUNS number; (2) Taxpayer Identification Number (TIN) or Employment Identification Number (EIN); and (3) Your bank's routing number, your bank account number, and your bank account type, *i.e.* checking or savings, to set up Electronic Funds Transfer (EFT). You will receive a confirmation email once the registration is activated. **Only applicants registered through the System for Award Management will be able to receive Program funding.** Registration in the System for Award Management provides the FCC with an authoritative source for information necessary to provide funding to applicants and to ensure accurate reporting pursuant to the DATA Act, Pub. L. 113-101.

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¹⁸ 47 CFR § 54.600(e) (defining a rural area as “an area that is entirely outside of a Core Based Statistical Area; is within a Core Based Statistical Area that does not have any Urban Area with a population of 25,000 or greater; or is in a Core Based Statistical Area that contains an Urban Area with a population of 25,000 or greater, but is within a specific census tract that itself does not contain any part of a Place or Urban Area with a population of greater than 25,000”). Universal Service Administrative Company, *Eligible Rural Areas Search*, <https://apps.usac.org/rhc/tools/Rural/search/search.asp> (last visited Mar. 24, 2021).