

Documentation for Auditors Checklist

HCP Fligibility

Eligibility
IRS not-for-profit determination letter Business License IRS Form 990 Audited Financial Statement (including OMB A-133 audits on compliance with Federal programs) Documentation demonstrating any site substitutions were approved by USAC For non-rural hospitals receiving RHCP support of more than \$30,000 per year for recurring charges or more than \$70,000 for non-recurring charges over a five-year period, documentation demonstrating the non-rural hospital has less than 400 licensed patient beds
petitive Bidding
RFPs issued Copies of all bids received (winning and losing) Copies of all correspondence with potential service providers up to one year preceding selection of the service provider Bid evaluation documentation supporting selection of a cost-effective service provider, including support that price was a primary factor Contracts, including leases, for supported services Copies of all state and local procurement regulations and/or policies Documentation supporting the HCP met exemptions claimed on the FCC Form 462
nent of Non-Discounted Portion / Reimbursement
nentation to support payment of non-discounted portion was made, such as: Copies of all service provider bills for supported services Documentation supporting the HCP paid its share of the service provider bills, such as: Copies of all cancelled checks Accounts payable register showing payment was made and bank statement showing payment cleared Documentation that shows the service provider issued credits or other form of reimbursement to the HCP for the RHCP support Reconciliation, by FRN, of service provider bills to the amounts invoiced to USAC seeking reimbursement

Updated: February 2017



Delivery or installation of eligible products and services

Deliv	ery or installation of eligible products and services
Docun	nentation to support eligible products and services, such as:
	Description, by FRN, of the supported service(s) and their use by the HCP
	Documentation to support installation/termination (if applicable) date(s) of the supported service(s)
	Documentation supporting when requested dark fiber was lit
	Documentation to support the allocation of costs
	Support for the portion of time RHCP supported services are used by part-time facilities
	Network diagrams delineating connection of lines to eligible and non-eligible locations, including connections to and from data centers, hubs, and huts
	Documentation demonstrating any service substitutions were approved by USAC
	If receiving RHCP support from both the Telecommunications Program and the Healthcare Connect Fund, documentation demonstrating the specific services supported from each program
Cons	ortia
Letter	s of agency from members authorizing the consortium lead to act on their behalf
	Annual reports submitted to USAC
	Sustainability plans submitted to USAC
	Network plans submitted to USAC
Exces	ss Capacity and Fair Share
Descri	ption of the use of excess capacity installed
	Documentation supporting ownership of the excess capacity (i.e. HCP or service provider)
	Documentation of how fair share was determined for connections to ineligible locations, lines owned
	by the service provider, lines owned by the HCP and leased or sold to other entities, etc.
Othe	r
	Reports of any other audits conducted that relate to the Rural Health Care Program
	Copy of the records retention policy
	List of individuals including staff, service providers, and consultants that work on USF-funding request,
	as well as their roles and responsibilities
	Any correspondence to/from USAC, the FCC, potential service providers, or any individuals listed above
	tionally, you should have the following people available to answer
ques	tions:
	Person who managed the bidding and award process
	Person who reviews and approves service provider bills
	Person who writes checks, makes deposits, and reconciles the bank account
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