

## Healthcare Connect Fund (HCF) Program

# FCC Form 462 Guide

How to submit an FCC Form 462 (Funding Request Form) for individual and consortium applicants. Please keep in mind that the FCC Form 462 must be submitted during a [filing window](#) to be considered for funding.

## Start Tab

- The following fields are prepopulated based on information from the FCC Form 460: **HCP or Consortium Number and Name, FCC Registration Number, Address and State**. If the information displayed is incorrect, submit an FCC Form 460 revision to make any necessary corrections prior to submitting an FCC Form 462.
  - Note: Applicants must ensure all associated FCC Forms 460 are up to date and submit any required updates within 30 days of a material change. Examples of a material change include (1) a change in a site's name, site location, contact information or eligible entity type, (2) for non-rural hospitals, an increase to 400 or more licensed patient beds, or (3) a change in any factor that would affect a cost allocation and/or fair share calculation. If in doubt, the applicant should contact USAC for additional guidance.
- **Application Nickname** is a nickname for the form that should be entered to easily identify this form in the future.
- **Funding Year** is a prepopulated field. A funding year runs from July 1 to June 30 of the following year.
- **Application Number** is a prepopulated field. The Application Number is a unique identifier for each request submitted. USAC assigns each FCC Form 462 a unique Application Number when the form is started.
- The **Funding Priority Tier** is based on the rurality of the HCP site filing the FCC Form 462 and whether that site is in a Medically Underserved Area or Population (MUA/P) as determined by the Health Resources and Services Administration (HRSA). The priority tier is assigned when the FCC Form 460 is approved. USAC is directed to prioritize funding using priority tiers should program demand exceed the program cap in any given funding year.

## Competitive Bidding Tab

- **Is the HCP requesting that this application be exempt from competitive bidding?** Select "Yes" if this funding request is using an exemption, select "No" if this funding request is not using an exemption.
  - If the applicant has additional eligible expense(s) that qualify under a separate and distinct competitive bidding exemption, the applicant must file a separate FCC Form 462 to request funding for those additional eligible expense(s). For example, an applicant may be requesting services for a service under a Government Master Service Agreement. They may also request services using a contract that was endorsed by USAC as evergreen. In this case, the applicant would file two funding requests using two different competitive bidding exemptions.
  - If the applicant has expenses that do not qualify for any competitive bidding exemption (i.e., that must be competitively bid), the applicant must file a separate FCC Form 462 for those expenses and select the applicable FCC Form 461. For example, an applicant is requesting funding for the purchase of certain eligible services from an evergreen contract. These eligible expenses would be submitted on one FCC Form 462. The applicant also is requesting funding for additional eligible services that were not covered by the evergreen contract and thus have not been competitively bid. These latter eligible expenses would be submitted on a second, separate FCC Form 462 that identifies the required FCC Form 461.

## Competitive Bidding – Exempt From Competitive Bidding

- Competitive bidding exemptions are displayed under “**Explanations**” and are as follows:
  - **Government Master Service Agreement:** Applicants purchasing services and/or network equipment from a Master Service Agreement (MSA) negotiated by federal, state, Tribal, or local government entities on behalf of

applicant HCPs and others are exempt from the competitive bidding requirements, but only if such MSAs were awarded pursuant to applicable federal, state, or local competitive bidding requirements. This exemption only applies to MSAs that were negotiated by, or under the direction of, government entities and that were subject to government competitive bidding requirements ("Government MSAs"). If the applicant has previously submitted (and USAC has approved) this Government MSA, select the Contract ID assigned by USAC and the "friendly name" will automatically be populated. If the applicant has not previously submitted this Government MSA, leave the Contract ID blank, enter a "friendly name" for the Government MSA, and submit (1) a copy of the Government MSA and (2) documentation that the MSA was subject to government competitive bidding requirements (e.g., a copy of the RFP that originated the Government MSA). Information about the government competitive bidding process is not always found within the contract.

- **Pre-Approved Master Service Agreement:** Applicants purchasing services and/or equipment from Master Service Agreements (MSAs) (and extensions thereof) previously approved by USAC under the RHC Pilot Program or through the Healthcare Connect Fund (Pre-Approved MSA) are exempt from competitive bidding. The exemption is limited to those MSAs that were developed and negotiated from an RFP or request for services that specifically sought a mechanism to add additional sites to the network. Select the applicable Contract ID. The "friendly name" will be automatically populated for the Pre-Approved MSA ID selected.
  - **Evergreen Contract:** Applicants purchasing services from a contract designated by USAC as "[evergreen](#)" are exempt from the competitive bidding process until the contract expires. Select the applicable Contract ID. The "friendly name" will be automatically populated for the contract ID selected.
  - **E-Rate Approved Contract:** Applicants who enter into consortium with E-rate participants under 47 C.F.R. § 54.501(c)(1) and are purchasing services and/or equipment from a master contract approved under the E-rate program are exempt from the competitive bidding requirements. If the applicant has previously submitted the E-Rate Approved Contract, select the applicable Contract ID and the "friendly name" will be automatically populated. If the applicant has not previously submitted the E-Rate Approved Contract, leave the Contract ID blank, enter a "friendly name" for the E-Rate Approved Contract, and submit (1) a copy of the contract and (2) a copy of the E-rate program approval.
  - **Annual Undiscounted Cost of \$10,000 or less:** Applicants seeking support for \$10,000 or less of total undiscounted eligible expenses for a single year (i.e., up to \$6,500 in Fund support) are exempt from the competitive bidding requirements. The exemption does not apply to multi-year contracts. Under this exemption, an applicant is restricted to a total of \$6,500 in annual support for services that are not subject to another exemption. Services supported through the Telecommunications Program are not counted toward the \$10,000 limit.
    - **NOTE:** For consortia applicants, the \$10,000 applies to all funding requests submitted by the consortium for all member sites for a single year.
- if "Yes" was chosen as the response to the previous question, select the competitive bidding exemption that applies to the eligible expense(s) for which support is requested. This will require uploading a contract using the "Add Contract" button (with the exception of the Annual Undiscounted Cost of \$10,000 or less exemption).
  - If using an evergreen contract, select the existing contract from the drop-down menu. For all other exemptions, upload a new contract or choose an existing contract.
  - For **Contract Sign Date**, enter the date the contract or service agreement with the vendor was signed.
  - **Contract End Date** is an optional field. Enter the date the contract ends based on the contract term.
  - For **Length of initial contract term**, enter the length of the initial contract term (that is, the length of the contract excluding any voluntary extensions). Indicate the unit of measure by selecting the "Months" or "Years" from the drop-down menu.
  - If the contract includes voluntary options to extend the term of the contract, enter the number of such voluntary extensions. If the contract does not include any voluntary options, enter "N/A" or "0". Up to five years of voluntary extensions are allowable under RHC program rules.

### Competitive Bidding – Not Exempt From Competitive Bidding

- If an FCC Form 461 was used to submit the FCC Form 462, select “No” for the question about qualifying for an exemption.
- Select the related FCC Form 461 from the drop-down menu. All FCC Forms 461 submitted for the HCP or the consortium will be available after the ACSD has passed.
- **FCC Form 461 Application Number** will display if the form was created using an FCC Form 461 and will be a prepopulated field. The application number is populated based on the FCC Form 461 used to create this FCC Form 462. Only one FCC Form 461 may be associated with each FCC Form 462.
  - Note: If claiming a competitive bidding exemption for some expenses, but not for others, the applicant must file a separate FCC Form 462 for the expenses not covered by a competitive bidding exemption.
- Answer the following question, “**Is the HCP continuing services with the current service provider?**” using the “Yes” or “No” radio buttons.
- Enter the **Number of Service Providers That Bid** and click “Add Documents” to upload all bids received including winning, losing, and disqualified.
- **Allowable Contract Selection Date (ACSD)** - The ACSD is the first day an applicant may agree to or sign a contract with a vendor. The ACSD is calculated based on the number of days the FCC Form 461 was posted. The ACSD is no less than 29 calendar days after the date on which the FCC Form 461 was posted on USAC's website. Applicants cannot file an FCC Form 462 until the ACSD is reached.
  - Note: Unless covered by a competitive bidding exemption, applicants must wait at least until its ACSD before a contract may be signed with a vendor. USAC provides the applicant with the ACSD for the FCC Form 461 via a 461 Posting Notification Email. An applicant may not agree to or sign a contract with a vendor until after the ACSD, but may discuss requirements, rates, and conditions with all potential vendors prior to that date.

### Service Provider Information Tab

- Select the **498 ID/SPIN** by searching for the selected vendor's Service Provider Identification Number (SPIN) in the drop-down menu. If an applicant is requesting support for eligible expenses from more than one service provider, the applicant must submit a separate FCC Form 462 for each service provider.
  - Note: If the selected service provider has not indicated on its FCC Form 498 that it wishes to participate in the HCF program, a notice will appear. To continue with the SPIN/498 ID, select "Select this SPIN/498 ID." Note, however, that disbursements may be held until the service provider makes the required certification on the FCC Form 498. Otherwise, select "Choose Different SPIN/498 ID."
- The **Service Provider Name** is populated based on the SPIN/498 ID entered.
  - Note: Service providers can obtain a SPIN/498 ID by submitting the FCC Form 498 (Service Provider Identification Number and General Contact Information Form). Service providers must complete this form and receive a SPIN/498 ID before USAC can authorize support payments. Applicants who do not know their service provider's SPIN should contact their selected service provider and obtain the correct SPIN/498 ID before submitting their FCC Form 462.

### Expense Items Tab

#### Expense Item Summary:

- A summary of each entered expense item is displayed in the **Expense Items Summary** section.
- Click “Enter a New Expense Item” to enter an expense item manually or download a Network Cost Worksheet (NCW) template to enter multiple line items.
  - The NCW template is an Excel representation of the FCC Form 462 and can be accessed under **Advanced Features**.

- Open the Excel spreadsheet and save it on your computer. Enter all information and click **Upload NCW Template**.
- Note: if you enter an expense item manual and then upload the NCW template, information entered in the NCW will overwrite the manual entry. When using the NCW template, applicants must not disturb the formatting in the Excel file. If the formatting is disturbed, the NCW template will not be able to be uploaded to the system.

### Contract Status:

- For consortia, Select the HCP site receiving the service from the drop-down menu under “Expense Item Site.”
  - For consortia applicants, if this FCC Form 462 was created from an FCC Form 461, the search results will be limited to only member sites of the consortium that were listed on the corresponding FCC Form 461.
- Answer “Yes” or “No” to the question “Does the HCP have a contract with the service provider?”. If the “No” box is selected, only enter the expected service start date; additional contract information is not required. This box is not selectable if claiming a Competitive Bidding Exemption.
- **Contract ID** is a required field if a contract is being used for the service. Upload the contract or attach an existing contract. USAC assigns each contract or service agreement a unique identifier (Contract ID). If the contract was previously provided to USAC, select the applicable Contract ID.
- **Contract Friendly Name** is an optional field if a contract is attached to the expense. Enter the name of the contract for ease of use.
- **Contract Start Date** - Enter the date the contract starts based on language in the contract (example: Contract is effective upon signatures of both parties.).
- **Initial Contract End Date** - Enter the date the contract ends.
- **Length of initial contract term** is a required field if a contract is attached to the expense. Enter the length of the initial contract term (that is, the length of the contract **excluding** any voluntary extensions). Indicate the unit of measure by selecting the “Months” or “Years” from the drop-down menu.
- **Number of contract extensions** is an optional field if a contract is attached to the expense. If the contract includes voluntary options to extend the term of the contract, enter the number of such voluntary options. If the contract does not include any voluntary options, leave the field blank.
- **Length of optional extension(s) combined** is an optional field if a contract is attached to the expense. If the contract includes one or more voluntary options to extend the term of the contract, enter the combined length of **all** the voluntary options. Voluntary extensions cannot exceed five years in aggregate.
- **Contract Sign Date:** Enter the date the contract was signed by an account holder for the HCP or consortium.
- **Install Date:** Enter the date that you either actually began receiving the service or the date that you expect to receive the service. If it is actually the first day of the funding year, you may to enter July 1 as the expected service start date.

### Expense Information

- **Is this a newly installed circuit?** is an optional field. Indicate whether the circuit for which you are requesting funding is newly installed using the dropdown options.
- **Billing Account Number (BAN)** is an optional field. Enter the BAN, if available. The applicant typically can find the BAN on the vendor's bill. Contact the vendor with any questions regarding the appropriate BAN to enter in this field.
- **Expected Broadband Service Start Date** is the date the applicant actually began receiving the service or the date that they expect to receive the service. If it is actually the first day of the funding year, July 1 may be entered as **the Expected Broadband Service Start Date**.
- **Installation Date** is the date the service was installed or the date the applicant expects the service to be installed. If it is actually the first day of the funding year, July 1 may be entered as the installation date.

### Expense Type

- **Expense Category** is a required field. Select the category of expense (e.g., Leased/Tariffed Facilities or Services) for which funding is requested.
- **Expense Type** is a required field. Select the expense type (e.g., T-1, Ethernet) for which funding is requested.
- **Explanation of Eligible Expense** is an optional field. Enter a description of the eligible expense for which funding is requested.

### Bandwidth

- **Upload Speed and Download Speed** are required fields. Enter the bandwidth in the field and use the dropdown menu to indicate the unit e.g., Mbps, for the expense item.

### Service Level Agreement (SLA) (if applicable):

- Answer “Yes” or “No” to the question “Is there a service level agreement (SLA) with the service provider for this expense item. If “yes”, enter the following broadband performance metrics (optional), if available:
  - **Latency:** Enter the latency (in milliseconds), as specified.
  - **Jitter** is defined as the variation or difference in the end-to-end delay (latency) between received packets of an IP or packet stream. Enter the maximum range (in milliseconds) in end-to-end delay.
  - **Packet loss** is defined as the percentage of packets that are dropped or discarded before reaching their destination. Enter the maximum packet loss rate as a percentage.
  - **Reliability:** Enter the guaranteed availability (as a percentage) of end-to-end network functionality.

### Circuit Information

- **Circuit ID (if available)** is an optional field. Enter the circuit ID, if available. The Circuit ID is a vendor-specific identifier assigned to the connection between two locations. The applicant should find the Circuit ID, if available, on the vendor invoice.
- Select the appropriate answer to the question “Where is the site’s location on the circuit?” The prepopulated field is based on which radio button is selected. For individual applicants, only one location will appear. There is no option to enter the second location. For consortia applicants, the end location is required.
- **HCP Location** is where on the circuit the HCP is located. The HCP must be on one end. Applicants may select “Circuit Start” or “Circuit End” using the radio buttons on the **Circuit Information** page. For individual applicants, only one location will appear. There is no option to enter the second location. For consortia applicants, both the start and end locations are required.
- **Circuit Start Location** is a prepopulated field if the answer to the question if that the circuit starts at the HCP. This field will be populated with the HCP physical location information from the FCC Form 460.
- **Circuit End Location** - Enter the physical location where the circuit terminates, if applicable. The HCP's physical location must either be the circuit start or end location. Consortia applicants will be asked if the other end of the circuit is a service provider, a member site, or neither.
  - If a **member site** is selected, all member sites that have an approved FCC Form 460 and are connected to the consortium through a [Letter of Agency \(LOA\)](#) or [Letter of Exemption \(LOA\)](#) will be available in the drop-down menu. If the FCC Form 462 was submitted using an FCC Form 461, only member sites that were included on that form will be available in the drop-down menu.
  - If **service provider** is selected, enter the address of the service provider listed on the FCC Form 462.
  - If **neither** is selected, enter the address of the entity at the other end of the circuit as it appears on the bill or contract (Example, A and Z locations).

- Note: do not enter the same address as the HCP that's listed on the line item.

#### Financial Information:

- Answer the question "Does this expense item represent multiple items or circuits?"
- **Quantity of Items** is where you'll enter the quantity of items if you answered "Yes" to the question above.
- **Multi-Year Funding Request** is an optional field. Answer "Yes" or "No" to indicate whether the applicant is seeking a multi-year funding commitment. Applicants who are exempt from competitive bidding because they are seeking support for \$10,000 or less of annual undiscounted costs, and applicants that requested to have their form processed as month-to-month, are not eligible for multi-year funding commitments.
- **Expense Frequency** is a required field. Select the frequency of the expense for which support is sought. The applicant may specify the expense frequency as monthly, quarterly, semi-annual, annual, or one-time.
- **How Many Expense Periods Will There be Total** is a required field. Enter the quantity of expense periods for which support is requested. If the Expense Frequency is "monthly", enter the number of months for which support is requested. If the applicant has also requested a multi-year funding commitment, an applicant may request support for up to 36 months. However, the multi-year funding commitment may not cover more than three funding years and may not extend beyond the initial expiration date of the contract.
  - Note: The Expected Broadband Start Date, Expense Frequency, and Expiration Date of Initial Term will inform the number of expense periods. The total number of expense periods will be limited to ensure the requested funding commitment does not exceed three funding years and those dates will determine when those expense periods begin and end.
- **Undiscounted cost per expense period (excluding taxes & fees)** is a required field. Enter the undiscounted cost per expense period excluding taxes and fees. For example, if the applicant is requesting monthly support for a single connection (e.g., a single T-1), only enter the monthly undiscounted cost of the connection.
- **Taxes & fees per expense period** is an optional field. Enter applicable taxes or surcharges for the service.
- Answer "Yes" or "No" to the question "Is this entire expense eligible for support?" If "No" is selected, enter the percentage of the expense that is eligible for support. For example, a vendor may provide a bundle that includes both broadband internet access service (eligible) and webhosting (ineligible).
  - Applicants seeking support for a service that includes both eligible and ineligible components must explicitly ask in their requests for services (FCC Form 461) that vendors include pricing for a comparable service that is made up of only eligible component(s). If the selected provider submits a price for the eligible component(s) on a stand-alone basis, enter the percentage that reflects the price of the eligible component(s) on a stand-alone basis. If the selected provider does not provide stand-alone pricing for the eligible component(s), the applicant must allocate the costs between the eligible and ineligible components using a methodology that is based on objective and reasonable criteria. See 47 C.F.R. § 54.617(d). Applicants must submit a written description of any required cost allocation(s). See 47 C.F.R § 54.623(a)(4).
  - If cost-allocation is necessary due to an eligible HCP sharing a service with an ineligible site, submit an explanation that demonstrates that the ineligible site paid their fair share of the cost of the service. See 47 C.F.R. § 54.617(d) (1).
- Explanation is required if "No" is selected. Enter an explanation of the method used to calculate eligible support and upload the documentation to support the explanation.
- **HCP Contribution Source (choose at least one source)** is a required field. Select at least one source of the HCP's 35 percent contribution. Only funds from eligible sources may be applied toward the HCP's required contribution. Eligible sources include funding from the applicant or eligible HCP participants; state grants, funding, or appropriations; federal funding, grants, loans, or appropriations except for other federal universal service funding; Tribal government funding; and other grant funding including private grants. Any other source is not an eligible source of funding towards the participant's required contribution. See 47 C.F.R. § 54.611(b).

- To add another expense item to the funding request, elect "**Add Expense**" or "**Save and Continue**" to move onto the next section.
- **Total Eligible Undiscounted Cost** is a pre-populated field based on the total of all undiscounted costs entered into the FCC Form 462.
- **Total Maximum Support** is a pre-populated field based on 65 percent of the total of all undiscounted costs entered into the FCC Form 462.

### Additional Documentation Tab

- **List all supporting documentation (Competitive bids, Invoice, etc.) that is required to be submitted with this form** is an optional field. Select the appropriate documentation type from the dropdown menu (or choose "other" and provide a description of the document) and upload the documentation. The Viable Source Letter (35%) is required for consortia.

### Confidentiality Tab

- Select "Yes" or "No" to answer the question about confidentiality.
- An explanation of why we ask the question can be viewed in the "**Explanations**" section.
- **Request for Confidentiality** is a required field. Indicate whether applicant is requesting that commercial and financial information submitted with the FCC Form 462 and any associated FCC Form 463 be treated as confidential. See 47 C.F.R. § 0.459(a)(4).
  - In addition, by checking "Yes", the requested non-disclosure will also include the following supporting documents submitted with the FCC Form 462: (i) contracts or other documentation, 47 C.F.R. §54.643(a)(3); (ii) competitive bidding documents, 47 C.F.R. §54.643(a)(4); and (iii) written descriptions of cost allocations, 47 C.F.R § 54.643(a)(5).
  - Requesting confidential treatment of the above commercial and financial information does not guarantee non-disclosure. All decisions regarding disclosure of company-specific information will be made by the FCC. See 47 C.F.R. § 0.459.
  - If the applicant would like to request non-disclosure and confidential treatment of information beyond what is set forth above, the applicant may file a formal request for confidential treatment of that additional information pursuant to 47 C.F.R. § 0.459.

### Certifications Tab

- **Certifications** are required fields. All ten certifications must be checked to move forward.

### Signature Tab

- **Name, Email, Phone, Employer, Title, and Employer's FCC RN, Certifier's Full Name** are prepopulated fields. These fields are populated based on the user credentials associated with the login information used for My Portal.
- **Digital Signature – Sign using your full name as it appears in RHC Connect.**