

RHC Connect User Guide – FCC Form 462

Updated as of May 2023

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About RHC Connect for the FCC Form 462

RHC Connect is the web-based system that hosts the FCC Form 462. Although the look of the application has changed, the FCC Form 462 did not. To submit your FCC Form 462, you will be asked the same questions and are required to provide the same information as in years past. No preparation for this change is required by you.

The Funding Year (FY) 2024 filing window will open on December 1, 2023, and close on April 1, 2024. Click on the following hyperlink to view the [FY2024 Program Calendar](#). FCC Forms 461 and 462 will be submitted in RHC Connect. Applicants submitting FCC Forms 460 and 463 (for funding commitments prior to FY 2022) will continue to do so in My Portal.

Please Note: The red boxes and arrows in the screenshots that follow do not actually appear in RHC Connect.

DASHBOARD **START A FORM**

RHC Connect

(137) Unread Notifications

Information Requests **My Forms** My Organizations

17:57
Oct 27 2022

The funding year 2022 funding request filing window closes in 3 days.

My Forms

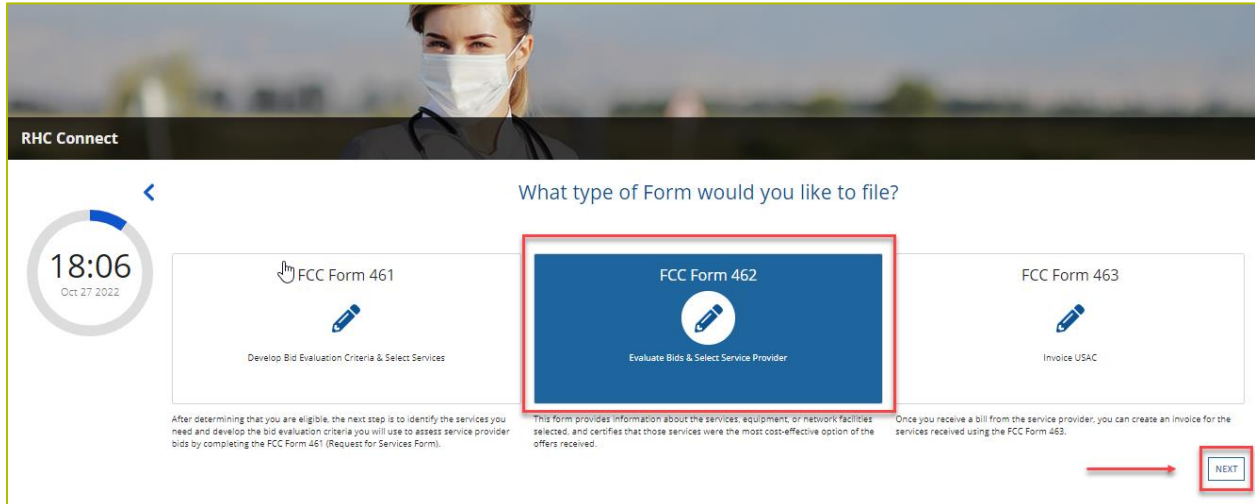
Form Type
Form 462

Q Search Form 462 SEARCH

Site Name	Site Number	Application Number	Application Nickname	Form	Last Update	Status	Actions
				Form 462	9/23/2022 4:17 PM EDT	Processed	🔍 📄 🗑️
				Form 462	9/22/2022 8:04 PM EDT	Submitted	🔍 📄 🗑️

Step 3:

Click **"FCC Form 462"** then click **Next**.



RHC Connect

What type of Form would you like to file?

18:06
Oct 27 2022

FCC Form 461
Develop Bid Evaluation Criteria & Select Services

FCC Form 462
Evaluate Bids & Select Service Provider

FCC Form 463
Invoice USAAC

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).

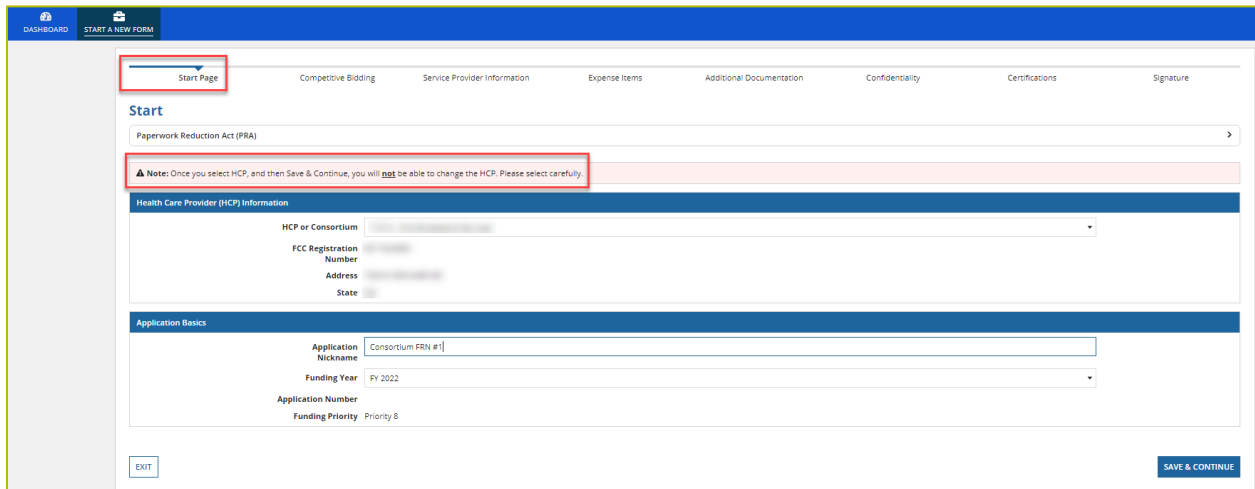
This form provides information about the services, equipment, or network facilities selected, and certifies that those services were the most cost-effective option of the offers received.

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

NEXT

Step 4:

Move to the **Start** page and select the HCP or consortium from the drop-down menu. The information will be prepopulated. Enter an application name as an identifier for the application should you need to exit My Portal and return later. The note at the top in pink is a warning to alert you that once you click save and continue, you will be unable to change the HCP you select.



DASHBOARD **START A NEW FORM**

Start Page Competitive Bidding Service Provider Information Expense Items Additional Documentation Confidentiality Certifications Signature

Start

Paperwork Reduction Act (PRA)

Note: Once you select HCP, and then Save & Continue, you will not be able to change the HCP. Please select carefully.

Health Care Provider (HCP) Information

HCP or Consortium
FCC Registration Number
Address
State

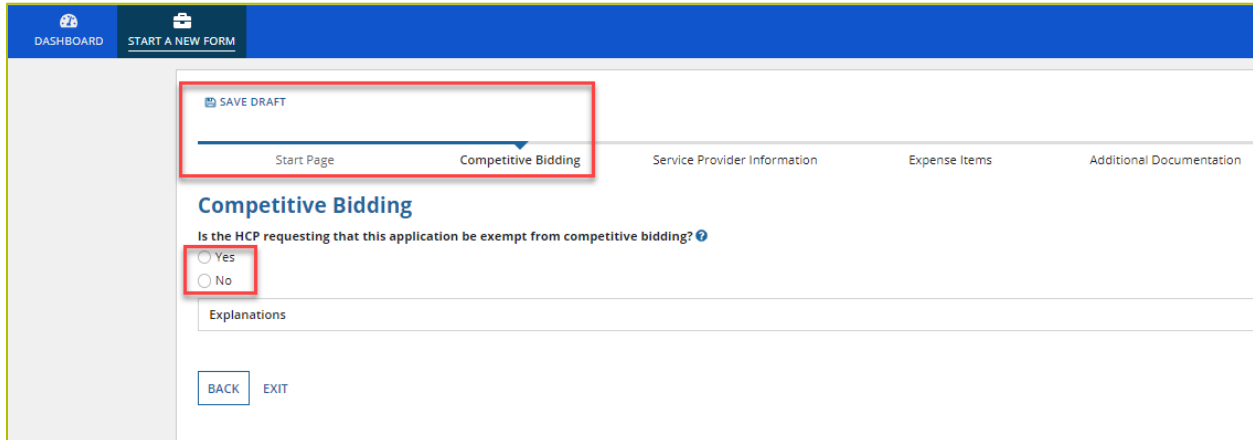
Application Basics

Application Nickname Consortium FRN #1
Funding Year FY 2022
Application Number
Funding Priority Priority 8

EXIT **SAVE & CONTINUE**

Step 5:

Answer **Yes** if you are exempt from competitive bidding and **No** if you completed your competitive bidding process.



SAVE DRAFT

Start Page **Competitive Bidding** Service Provider Information Expense Items Additional Documentation

Competitive Bidding

Is the HCP requesting that this application be exempt from competitive bidding? ⓘ

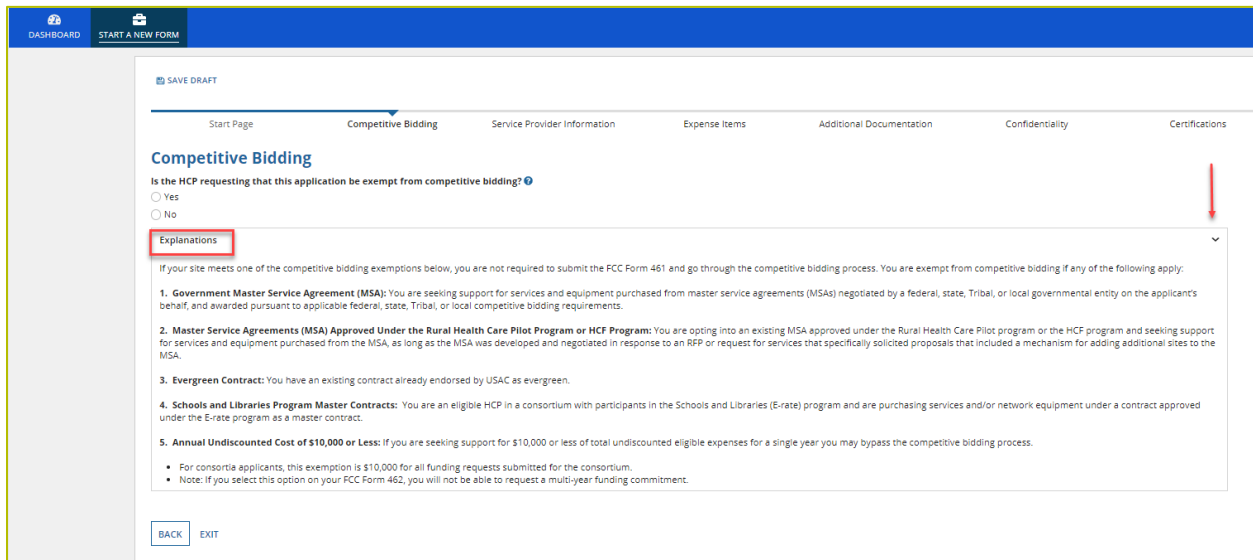
☐ Yes

☒ No

Explanations

BACK **EXIT**

There is a drop-down menu with explanations of each competitive bidding exemption.



SAVE DRAFT

Start Page **Competitive Bidding** Service Provider Information Expense Items Additional Documentation Confidentiality Certifications

Competitive Bidding

Is the HCP requesting that this application be exempt from competitive bidding? ⓘ

☐ Yes

☒ No

Explanations

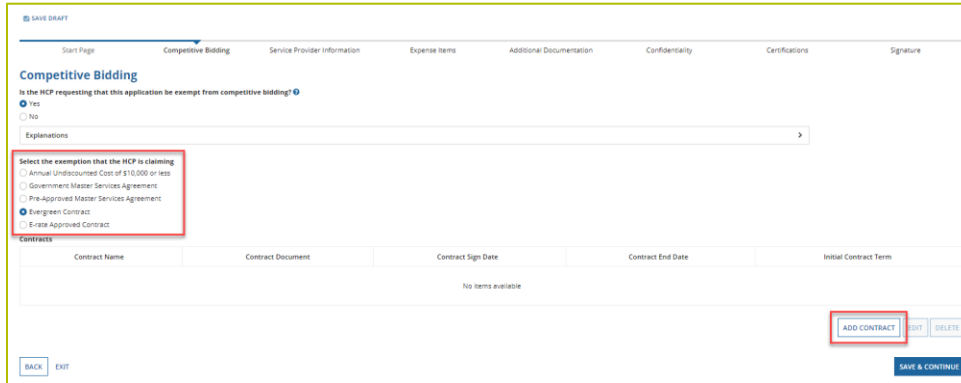
If your site meets one of the competitive bidding exemptions below, you are not required to submit the FCC Form 461 and go through the competitive bidding process. You are exempt from competitive bidding if any of the following apply:

- 1. Government Master Service Agreement (MSA):** You are seeking support for services and equipment purchased from master service agreements (MSAs) negotiated by a federal, state, Tribal, or local governmental entity on the applicant's behalf, and awarded pursuant to applicable federal, state, Tribal, or local competitive bidding requirements.
- 2. Master Service Agreements (MSA) Approved Under the Rural Health Care Pilot Program or HCF Program:** You are opting into an existing MSA approved under the Rural Health Care Pilot program or the HCF program and seeking support for services and equipment purchased from the MSA, as long as the MSA was developed and negotiated in response to an RFP or request for services that specifically solicited proposals that included a mechanism for adding additional sites to the MSA.
- 3. Evergreen Contract:** You have an existing contract already endorsed by USAC as evergreen.
- 4. Schools and Libraries Program Master Contracts:** You are an eligible HCP in a consortium with participants in the Schools and Libraries (E-rate) program and are purchasing services and/or network equipment under a contract approved under the E-rate program as a master contract.
- 5. Annual Undiscounted Cost of \$10,000 or Less:** If you are seeking support for \$10,000 or less of total undiscounted eligible expenses for a single year you may bypass the competitive bidding process.
 - For consortia applicants, this exemption is \$10,000 for all funding requests submitted for the consortium.
 - Note: If you select this option on your FCC Form 462, you will not be able to request a multi-year funding commitment.

BACK **EXIT**

Step 6:

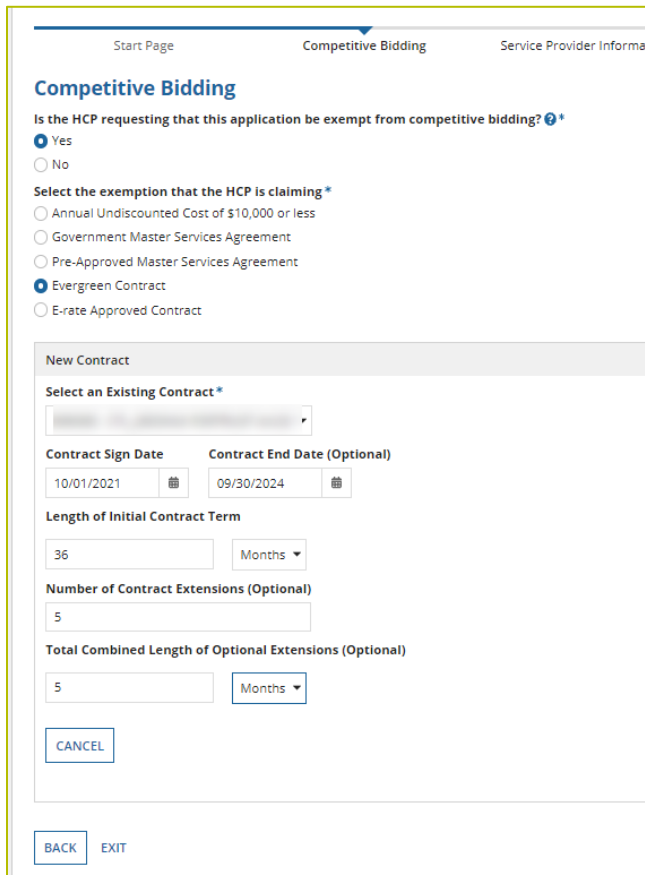
If you are exempt from competitive bidding, select the exemption from the list of eligible exemptions. Click **Add Contract** at the bottom right on the screen.



The screenshot shows the 'Competitive Bidding' section of a web form. At the top, there is a 'SAVE DRAFT' button. Below it is a progress bar with tabs: 'Start Page', 'Competitive Bidding' (active), 'Service Provider Information', 'Expense Items', 'Additional Documentation', 'Confidentiality', 'Certifications', and 'Signature'. The main heading is 'Competitive Bidding'. Below it is a question: 'Is the HCP requesting that this application be exempt from competitive bidding?'. There are two radio buttons: 'Yes' (selected) and 'No'. Below this is a text input field for 'Explanations'. A red box highlights the 'Select the exemption that the HCP is claiming' section, which contains five radio buttons: 'Annual Undiscounted Cost of \$10,000 or less', 'Government Master Services Agreement', 'Pre-Approved Master Services Agreement', 'Evergreen Contract' (selected), and 'E-rate Approved Contract'. Below this is a table with columns: 'Contract Name', 'Contract Document', 'Contract Sign Date', 'Contract End Date', and 'Initial Contract Term'. The table is currently empty with the text 'No items available' in the center. At the bottom right, there is a red box around the 'ADD CONTRACT' button, and next to it are 'EDIT' and 'DELETE' buttons. At the bottom left, there are 'BACK' and 'EXIT' buttons. At the bottom right, there is a 'SAVE & CONTINUE' button.

Step 7:

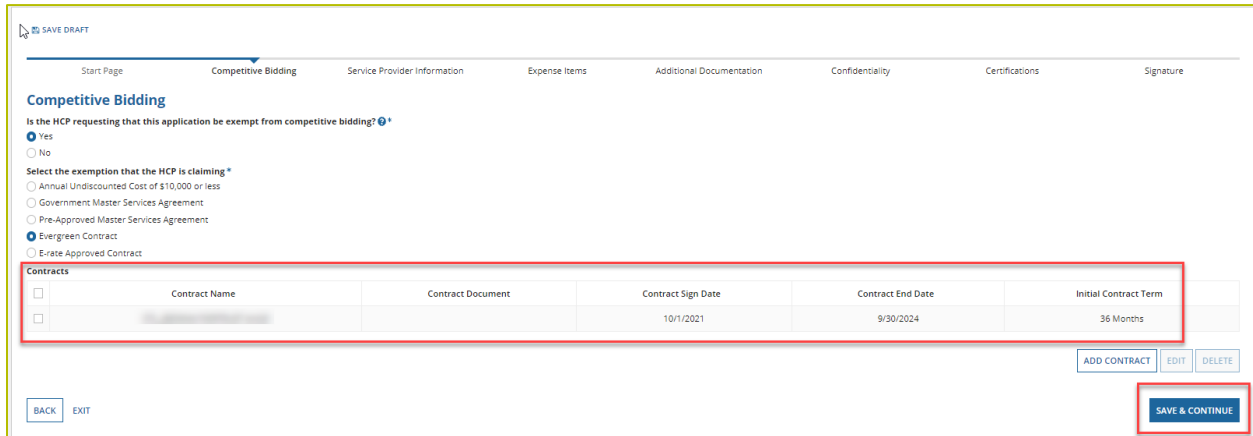
If using an evergreen contract, select an existing contract from the drop down menu. For all other exemptions, upload a new contract or choose an existing contract. Enter the relevant information about the contract in the fields. Use the drop-down calendar to enter dates.



The screenshot shows the 'Competitive Bidding' section of a web form, specifically the 'New Contract' section. The progress bar at the top shows 'Start Page', 'Competitive Bidding' (active), and 'Service Provider Information'. The main heading is 'Competitive Bidding'. Below it is a question: 'Is the HCP requesting that this application be exempt from competitive bidding?'. There are two radio buttons: 'Yes' (selected) and 'No'. Below this is a section titled 'Select the exemption that the HCP is claiming *' with five radio buttons: 'Annual Undiscounted Cost of \$10,000 or less', 'Government Master Services Agreement', 'Pre-Approved Master Services Agreement', 'Evergreen Contract' (selected), and 'E-rate Approved Contract'. Below this is a section titled 'New Contract'. It contains a dropdown menu labeled 'Select an Existing Contract *'. Below the dropdown are two date pickers: 'Contract Sign Date' (10/01/2021) and 'Contract End Date (Optional)' (09/30/2024). Below these are two more date pickers: 'Length of Initial Contract Term' (36 Months) and 'Number of Contract Extensions (Optional)' (5). Below these are two more date pickers: 'Total Combined Length of Optional Extensions (Optional)' (5 Months). At the bottom left, there is a 'CANCEL' button. At the bottom left, there are 'BACK' and 'EXIT' buttons.

Step 8:

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



SAVE DRAFT

Start Page Competitive Bidding Service Provider Information Expense Items Additional Documentation Confidentiality Certifications Signature

Competitive Bidding

Is the HCP requesting that this application be exempt from competitive bidding? ⓘ *

☒ Yes
☐ No

Select the exemption that the HCP is claiming *

☐ Annual Undiscounted Cost of \$10,000 or less
☐ Government Master Services Agreement
☐ Pre-Approved Master Services Agreement
☒ Evergreen Contract
☐ E-rate Approved Contract

Contracts	Contract Name	Contract Document	Contract Sign Date	Contract End Date	Initial Contract Term
<input type="checkbox"/>			10/1/2021	9/30/2024	36 Months

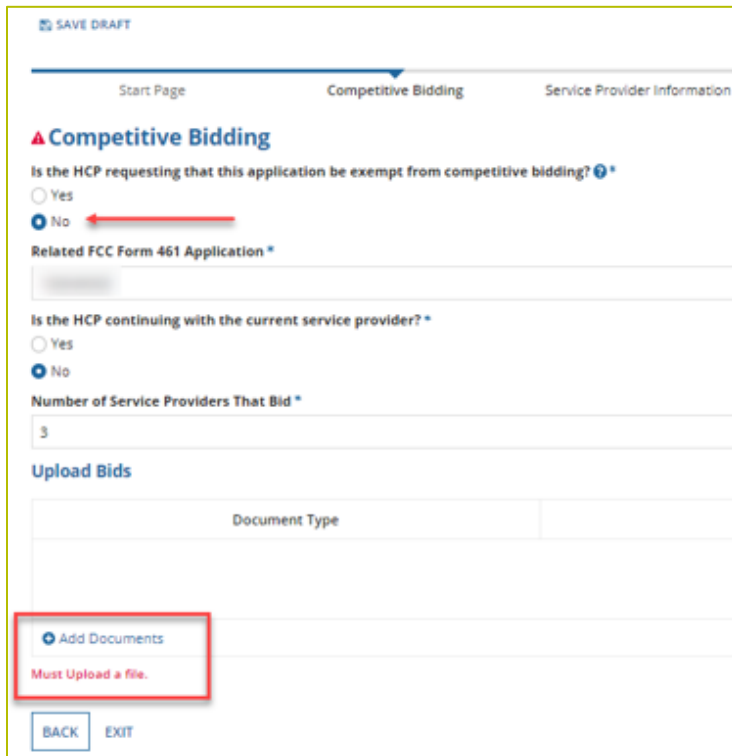
ADD CONTRACT EDIT DELETE

BACK EXIT

SAVE & CONTINUE

Step 9:

If an FCC Form 461 was submitted, choose **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 will be available. Enter the number of bids received and upload copies of those bids. A red error message will display if you don't upload the documents.



SAVE DRAFT

Start Page Competitive Bidding Service Provider Information

Competitive Bidding

Is the HCP requesting that this application be exempt from competitive bidding? ⓘ *

☐ Yes
☒ No

Related FCC Form 461 Application *

Is the HCP continuing with the current service provider? *

☐ Yes
☒ No

Number of Service Providers That Bid *

3

Upload Bids

Document Type

Add Documents

Must Upload a file.

BACK EXIT

Upload Bids

Document Type	Document	Uploaded On
Bids	[Redacted]	11/8/2021 9:26 AM EST

[Add Documents](#)

[BACK](#) [EXIT](#) [SAVE & CONTINUE](#)

Step 10:

Select your service provider's 498 ID/SPIN. You can search by service provider name or the 489 ID/SPIN.

[SAVE DRAFT](#)

Start Page Competitive Bidding **Service Provider Information** Expense Items Additional Documentation Confidentiality Certifications Signature

Service Provider Information

498 ID/SPIN Service Provider Name centurylink [SEARCH](#) [CLEAR](#)

498 ID/SPIN	Service Provider Name
<input type="checkbox"/> 498 ID/SPIN	Service Provider Name
<input type="checkbox"/> 143022618	CenturyLink CenturyTel Solutions, LLC
<input type="checkbox"/> 143001636	CenturyLink CenturyTel of Goltewah-Collegdale, Inc.
<input type="checkbox"/> 143002667	CenturyLink CenturyTel of the Gem State (Nevada)
<input type="checkbox"/> 143002671	CenturyLink Central Telephone Co. of Nevada (PXA)
<input checked="" type="checkbox"/> 143005231	CenturyLink Qwest Corporation

< 6 - 10 of 67 >

You have selected 143005231 - CenturyLink Qwest Corporation

[BACK](#) [EXIT](#) [SAVE & CONTINUE](#)

Step 11:

Download the NCW Template to populate and upload or enter a new expense item manually. **Note:** If you enter any information manually and then choose to use the NCW template, the NCW will overwrite that information.

Start Page Competitive Bidding Service Provider Information **Expense Items** Additional Documentation Confidentiality Certifications Signature

Expense Item Summary

#	Site #	Site Name	Contract Number	Expense Type	Eligible Undiscounted Cost	Maximum Support Amount	Actions
1	[Redacted]	[Redacted]		Network Maintenance			Edit Delete
2	[Redacted]	[Redacted]		Ethernet			Edit Delete

[Advanced Features](#)
[Download NCW Template](#)
[Upload NCW Document](#)

[ENTER A NEW EXPENSE ITEM](#)

Step 12:

For consortia applicants, all member sites will appear in the drop-down menu. Select a site from the drop-down menu. Answer the question about whether the HCP is submitting this expense with a contract. If **No** is selected, the application will be processed as month-to-month. Month-to-month funding requests, meaning forms submitted without a contract, are limited to 12 months of funding and competitive bidding is required each year.

Start Page Competitive Bidding Service Provider Information **Expense Items** Additional Documentation Confidentiality Cer

Expense Items

Expense Item 1 of 1
Total Eligible Undiscounted Cost \$0.00
Maximum Support Amount \$0.00

Contract Status

- Expense Information
- Expense Type
- Bandwidth
- Service Level Agreement
- Circuit Information
- Financial Information
- HCP Contribution Source

Expense Item Site
---Select---

Does the HCP have a Contract with the Service Provider? ⓘ

☐ Yes

☒ No (process this item as month-to-month)

Sum of All Expense Item Total Eligible Undiscounted Cost: \$0.00
Sum of All Expense Item Maximum Support Amount: \$0.00

BACK EXIT

Step 13:

For expenses submitted with a contract, select **Yes** to the question: **Does the HCP have a contract with the service provider**. Enter all information in the required fields. Contract information is entered for each line item.

Start Page Competitive Bidding Service Provider Information **Expense Items** Additional Documentation Confidentiality Cer

Expense Items

Expense Item 1 of 1
Total Eligible Undiscounted Cost \$0.00
Maximum Support Amount \$0.00

Contract Status

- Expense Information
- Expense Type
- Bandwidth
- Service Level Agreement
- Circuit Information
- Financial Information
- HCP Contribution Source

Expense Item Site
[Redacted]

Does the HCP have a Contract with the Service Provider? ⓘ

☒ Yes

☐ No (process this item as month-to-month)

Select an Existing Contract

Select a contract already associated ... OR Contract Nickname

Upload a New Contract

UPLOAD Drop file here

Contract Start Date

mm/dd/yyyy

Initial Contract End Date

mm/dd/yyyy

Length of Initial Contract Term

Time Unit

Number of Contract Extensions (Optional)

Total Combined Length of Optional Extensions (Optional)

Time Unit

Contract Sign Date

mm/dd/yyyy

Install Date


mm/dd/yyyy

Sum of All Expense Item Total Eligible Undiscounted Cost: \$0.00
Sum of All Expense Item Maximum Support Amount: \$0.00

Step 14:

Enter the contract start date, initial contract end date, contract sign date, and installation date for the requested expense.

Expense Item Site

Does the HCP have a Contract with the Service Provider? 

☒ Yes


☐ No (process this item as month-to-month)

Select an Existing Contract


OR

Contract Nickname


Upload a New Contract

UPLOAD  Drop file here


Contract Start Date

11/01/2021 

Initial Contract End Date

10/31/2024 


Length of Initial Contract Term

3 Years 


Number of Contract Extensions (Optional)

5


Total Combined Length of Optional Extensions (Optional)

5 Years 

Contract Sign Date

11/01/2021 

Install Date

11/01/2021 

Step 15:

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.

Start Page Competitive Bidding Service Provider Information **Expense Items** Additional Documentation Confidentiality


Expense Items

Expense Item 1 of 1
Total Eligible Undiscounted Cost \$N/A
Maximum Support Amount \$N/A


- ✓ Contract Status
- > **Expense Information**
- Expense Type
- Bandwidth
- Service Level Agreement
- Circuit Information
- Financial Information
- HCP Contribution Source

Is this a newly installed circuit?
☒ Yes
☐ No

Billing Account Number (Optional)

Expected Broadband Service Start Date
 

ⓘ You have chosen the funding year start date. Please make sure that this is the date when you actually expect to begin this service or have already started this service.

Installation Date
 

Sum of All Expense Item Total Eligible Undiscounted Cost: \$N/A
Sum of All Expense Item Maximum Support Amount: \$N/A

[BACK](#) [EXIT](#)

Step 16:

Choose the expense category and the expense type from the drop-down menus. There's an optional field where an explanation of the eligible expense may be added.

Start Page Competitive Bidding Service Provider Information **Expense Items** Additional Documentation Confidentiality

Expense Items

Expense Item 1 of 1
Total Eligible Undiscounted Cost \$N/A
Maximum Support Amount \$N/A

- ✓ Contract Status
- ✓ Expense Information
- > **Expense Type**
- Bandwidth
- Service Level Agreement
- Circuit Information
- Financial Information
- HCP Contribution Source

Expense Category

Expense Type

Explanation of Eligible Expense (Optional)

Step 17:

Enter the bandwidth for the requested expense. For expenses such as equipment, installation, construction and network management services, bandwidth is not required and fields may be left blank. For all other services, bandwidth is required.

[Start Page](#) [Competitive Bidding](#) [Service Provider Information](#) [Expense Items](#) [Additional Documentation](#)

Expense Items

Expense Item 1 of 1
Total Eligible Undiscounted Cost \$48,480.00
Maximum Support Amount \$31,512.00

☒ Contract Status

☒ Expense Information

☒ Expense Type

☒ **Bandwidth**

☐ Service Level Agreement

☐ Circuit Information

☐ Financial Information

☐ HCP Contribution Source

Download Speed

Mbps

Upload Speed

Mbps

Step 18:

Select **Yes** or **No** to answer the question about whether the requested expense includes a service level agreement and, if yes, enter the information shown.

Expense Items

Expense Item 1 of 1
Total Eligible Undiscounted Cost \$48,480.00
Maximum Support Amount \$31,512.00

- ✓ Contract Status
- ✓ Expense Information
- ✓ Expense Type
- ✓ Bandwidth
- > **Service Level Agreement**
- Circuit Information

Is there a service level agreement (SLA) with the service provider for this expense item? (Optional)

☒ Yes
☐ No

What is the SLA for Latency? (Optional)

What is the SLA for Jitter? (Optional)

What is the SLA for Packet Loss? (Optional)

What is the SLA for Packet Reliability? (Optional)

Step 19:

Enter a circuit ID (optional) and select where the site is located on the requested circuit. This should align with submitted service provider confirmed documentation. Information will pre-populate based on information in the FCC Form 460.

Expense Items

Expense Item 1 of 1
Total Eligible Undiscounted Cost \$48,480.00
Maximum Support Amount \$31,512.00

- ✓ Contract Status
- ✓ Expense Information
- ✓ Expense Type
- ✓ Bandwidth
- ✓ Service Level Agreement
- > **Circuit Information**
- Financial Information
- HCP Contribution Source

Circuit ID (Optional)

Where is the site's location on the circuit?

☒ The circuit starts at the site location
☐ The circuit ends at the site location

Circuit Start Location

Address Line 1

Address Line 2

City

State

CO

ZIP Code

Step 20:

For consortia applicants only: For expenses associated with off-site administrative offices and off-site data centers, the circuit end location is required. If you select **Location is a Member Site**, a drop-down menu with a list of all HCP sites that appear on the FCC Form 460 for the administrative office or data center will appear. Choose the relevant member site.

Expense Items

Expense Item 1 of 1
Total Eligible Undiscounted Cost \$N/A
Maximum Support Amount \$N/A

- Contract Status
- Expense Information
- Expense Type
- Bandwidth
- Service Level Agreement
- Circuit Information**
- Financial Information
- HCP Contribution Source

Sum of All Expense Item Total Eligible Undiscounted Cost: \$N/A
Sum of All Expense Item Maximum Support Amount: \$N/A

Circuit ID (Optional)

Where is the site's location on the circuit?

☒ The circuit starts at the site location
☐ The circuit ends at the site location

Circuit Start Location

Address Line 1
Address Line 2
City
State
CO
ZIP Code

Circuit End Location

☐ Location is a Member Site
☒ Location is the Service Provider
☐ Location is not a Member Site or Service Provider

Address Line 1
Address Line 2
City
State
Choose a State
ZIP Code

Step 21:

Indicate whether there are multiple items being requested, whether you're asking for multi-year funding, how often the expense is invoiced, and how many expense periods are being requested. Enter the undiscounted cost per expense period, taxes and fees and indicate whether this expense is to be cost-allocated. If **No** is selected for **Is this entire expense eligible for support**, enter the eligible percentage and an explanation about how the percent eligible for support was calculated. Upload the document with the explanation where indicated.

Expense Items

Expense Item 2 of 2
Total Eligible Undiscounted Cost \$0.00
Maximum Support Amount \$0.00

- Contract Status
- Expense Information

Does this expense item represent multiple items or circuits?

☒ Yes
☐ No

Quantity of Items

Enter a value.

Expense Item 1 of 1

Total Eligible Undiscounted Cost \$0.00

Maximum Support Amount \$0.00

- Contract Status
- Expense Information
- Expense Type
- Bandwidth
- Service Level Agreement
- Circuit Information
- Financial Information
- HCP Contribution Source

Sum of All Expense Item Total Eligible Undiscounted Cost: \$N/A

Sum of All Expense Item Maximum Support Amount: \$N/A

Does this expense item represent multiple items or circuits?

☐ Yes

☒ No

Multi-year Funding Request

☐ Yes

☒ No

How often is this item expensed?

Monthly

How many expense periods will there be total?

12

Undiscounted Cost Per Expense Period (Excluding Taxes and Fees)

\$1,000.00

Taxes and Fees per Expense Period

\$50.00

Is this entire expense eligible for support?

☐ Yes

☒ No

Percent Eligible for Support

90

Explanation

Ten locations use this service but one site is ineligible for funding.

70/1000

Upload Documentation to Support Your Explanation

UPLOAD Drop file here

Step 22:

Answer the question about how the HCP will cover their costs not covered by Healthcare Connect Fund (HCF) support. Click all that apply.

Start Page

Competitive Bidding

Service Provider Information

Expense Items

Additional Documentation

Confidentiality

Expense Items

Expense Item 1 of 1

Total Eligible Undiscounted Cost \$12,600.00

Maximum Support Amount \$8,190.00

- Contract Status
- Expense Information
- Expense Type
- Bandwidth
- Service Level Agreement
- Circuit Information
- Financial Information
- HCP Contribution Source

Sum of All Expense Item Total Eligible Undiscounted Cost: \$12,600.00

Sum of All Expense Item Maximum Support Amount: \$8,190.00

BACK EXIT

How will the HCP cover their costs including the required 35% that are not covered by HCF support? (select all that apply)

☐ The HCP will cover the difference

☐ State grants, funding, or appropriations

☐ Federal funding, grants, loans, or appropriations

☐ Tribal government funding

☐ Other grant funding including private grants

Step 23:

Continue to add new expenses or move to next steps to complete your form. The total eligible undiscounted cost and total maximum support based on 65 percent of the total undiscounted cost for eligible expenses will be clearly displayed.

Expense Item Summary

ENTER A NEW EXPENSE ITEM

#	Site #	Site Name	Contract Number	Expense Type	Eligible Undiscounted Cost	Maximum Support Amount	Actions
1				Ethernet	\$24,240.00	\$15,756.00	Edit Delete

Show
5
records/page

Total Eligible Undiscounted Cost \$24,240.00
Total Maximum Support \$15,756.00

BACK

EXIT

SAVE & CONTINUE

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.

Approved by OMB 3060-0804

Step 24:

Upload all supporting documentation. For consortia applicants, a copy of the viable source letter is required.

SAVE DRAFT

Start Page
Competitive Bidding
Service Provider Information
Expense Items
Additional Documentation
Confidentiality
Certifications
Signature

Additional Documentation

Use this tab to upload additional documentation that is relevant to the application. Ensure that all bandwidths, costs, service locations, and expense types are supported with documentation.

Service provider documentation required to confirm expenses

Document Type	Document	Uploaded On
No items available		

Add Documents
Must upload a file of document type Viable Source Letter

Note: If a document is uploaded that gives an error message for an empty document, the error message may persist even after replacing the empty document with a valid document. Please select **save and continue**.

BACK

EXIT

SAVE & CONTINUE

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.

Approved by OMB 3060-0804

Step 25:

Select **Yes** or **No** to answer the question about confidentiality. An explanation of why we ask the question can be viewed in the **Explanation** section.

Start Page

Competitive Bidding

Service Provider Information

Expense Items

Confidentiality

Is the HCP requesting confidential treatment and non-disclosure of commercial and financial information? *

☐ Yes
☐ No

Explanation

BACK

EXIT

Step 26:

Each certification must be checked to continue.

Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality	Certifications	Signature
<h3>Certifications</h3> <p><input type="checkbox"/> I certify under penalty of perjury that I am authorized to submit this request on behalf of the applicant or consortium.</p> <p><input type="checkbox"/> I certify under penalty of perjury that I have examined this request and all attachments and to the best of my knowledge, information, and belief, all statements of fact contained therein are true.</p> <p><input type="checkbox"/> I certify under penalty of perjury that the applicant or consortium has considered all bids received and selected the most cost-effective method of providing the requested services. "Cost-effective" is defined as the "method that costs the least after consideration of the features, quality of transmission, reliability, and other factors that the applicant deems relevant to choosing a method of providing the required health care services." 47 CFR § 54.622(c).</p> <p><input type="checkbox"/> I certify under penalty of perjury that all RHC Program support will be used only for eligible health care purposes.</p> <p><input type="checkbox"/> I certify under penalty of perjury that the applicant or consortium is not requesting support for the same service from both the Telecommunications Program and the Healthcare Connect Fund Program.</p> <p><input type="checkbox"/> I certify under penalty of perjury that the applicant or consortium satisfies all of the requirements under Section 254 of the Act and applicable Commission rules, and understand that any letter from the Administrator that erroneously commits funds for the benefit of the applicant may be subject to rescission.</p> <p><input type="checkbox"/> I certify under penalty of perjury that I have reviewed all applicable rules and requirements for the RHC Program and complied with those rules and requirements.</p> <p><input type="checkbox"/> I understand that all documentation associated with this application, including all bids, contracts, scoring matrices, and other information associated with the competitive bidding process, all billing records for services received and any other documentation demonstrating compliance with the rules 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 or as otherwise prescribed by the Commission's rules.</p> <p><input type="checkbox"/> I certify under penalty of perjury that the applicant or consortium and/or its consultant, if applicable, has not solicited or accepted a gift or any other thing of value from a service provider participating in or seeking to participate in the RHC Program.</p> <p><input type="checkbox"/> I certify under penalty of perjury that any consultants or third parties associated with this request or RFP do not have an ownership interest, sales commission arrangement, or other financial stake in the vendor 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.</p> <div><input type="button" value="BACK"/> <input type="button" value="EXIT"/></div> <div><input type="button" value="SAVE & CONTINUE"/></div>							

Step 27:

Sign the form using your first and last name as it appears in RHC Connect.

Start Page	Competitive Bidding	Service Provider Information	Expense Items	Additional Documentation	Confidentiality	Certifications	Signature																		
<h3>Signature</h3> <div>Current User Information<table><tr><td>Name</td><td></td></tr><tr><td>Email</td><td></td></tr><tr><td>Phone</td><td></td></tr><tr><td>Employer</td><td></td></tr><tr><td>Title</td><td></td></tr><tr><td>Employer's FCC RN</td><td></td></tr></table></div> <div>Signature<table><tr><td>Certifier's Full Name</td><td></td></tr><tr><td>* Digital Signature</td><td></td></tr><tr><td>Date</td><td>10/21/2021</td></tr></table></div> <div><input type="button" value="BACK"/> <input type="button" value="EXIT"/></div> <div><input type="button" value="CERTIFY & SUBMIT"/></div>								Name		Email		Phone		Employer		Title		Employer's FCC RN		Certifier's Full Name		* Digital Signature		Date	10/21/2021
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Frequently Asked Questions

What changes were made to the RHC Connect?

RHC Connect has a new look and feel that is more intuitive and user-friendly. It is easier to navigate the form for submission, and it is easier for RHC program reviewers to approve funding requests.

Did the FCC Form 462 change?

No, the FCC Form 462 itself did not change – only the platform changed. The questions on the form and the information required of applicants remain the same.

Who is impacted by this change?

RHC Connect is used for FY2022 and future funding years. Applicants who participate in the Telecommunications (Telecom) Program will begin submitting the FCC Form 466 in RHC Connect in FY2024. Connected Care Pilot Project (CCPP) projects are not impacted unless they also participate in the HCF Program.

Can I still make updates or changes to my FCC Forms 460 in My Portal?

Yes, please verify in My Portal that all account holder information is accurate and up to date. USAC will import this data to pre-populate the FCC Forms 462.

How do I access RHC Connect to file my FCC Form 462?

To access RHC Connect, simply use the same log-in credentials you use for My Portal. You can log in and create a draft FCC Form 462 shortly before the beginning of a filing window however you will be unable to submit it until the filing window opens.

Resources

For more information, visit the Welcome to [Welcome to RHC Connect - FCC Form 462](#) webpage.

For questions about the Rural Health Care program, contact RHC-Assist@usac.org or the RHC Help Desk at (800) 453-1546 from 8 a.m. - 8 p.m. ET Monday through Friday for assistance. Use the [RHC Customer Service Tip Sheet](#) to learn about what the RHC Help Desk can and cannot help you with.