**Example Request for Proposals** 

Large Consortium (100+ HCPs) Leased Services

This example RFP is provided to guide applicants in preparing their own RFPs. Using this example as a template does not guarantee that the RFP will be approved by USAC. Applicants are responsible for reviewing FCC rules. Applications should pay particular attention to the following elements; conforming their RFP to meet the requirements of the Healthcare Connect Fund:

- <u>47 C.F.R. § 54.642</u>, for competitive bidding requirements
- <u>47 C.F.R. § 54.634</u>, for eligible services
- <u>47 C.F.R. § 54.635</u>, for eligible equipment
- <u>47 C.F.R. § 54.636</u>, HCP owned network facilities (for consortium applicants)
- <u>47 C.F.R. § 54.637</u>, off-site data centers and off-site administrative offices
- <u>47 C.F.R. § 54.638</u>, upfront payments
- <u>47 C.F.R. § 54.639</u>, ineligible expenses
- <u>47 C.F.R. § 54.646</u>, site and service substitutions

#### <u>REQUEST FOR PROPOSALS (RFP)</u> [Proposal Number Example (HCF-XX)]

#### OPENING OF PROPOSALS Month, XX, XXXX

## <u>RFP For: Creating and Operating a State-wide Broadband Network known as [Consortium Name]</u>

You are invited to submit responses in the form of proposals in accordance with the requirements of this Request for Proposals (RFP) solicitation which are contained herein.

Responses are to be submitted to the [Consortium Leader Address] of [Consortium Leader] not later than the date and time specified in the schedule of key events, at which time respondents to this request will be publicly identified. Due to the possibility of further due diligence or perhaps negotiation with any offerors submitting a proposal which appears to be eligible for contract award pursuant to selection criteria set forth in this RFP, prices may not be divulged at the time of opening.

The proposals must be signed by an official authorized to bind the offeror, and it shall contain a statement to the effect that the proposal is firm for a period of at least 90 days from the closing date for submission of proposals. Proposals shall be submitted showing the above proposal number [Proposal Number Example]. [Consortium Leader] assumes no responsibility for unmarked or incorrectly marked envelopes being considered for further review or award.

This solicitation does not commit [Consortium Leader] or [Consortium Name] to award a contract, to pay any costs incurred in the preparation of a proposal, or to procure or contract for the articles of goods or services. [Consortium Leader] and [Consortium Name] reserve the right to accept or reject any or all proposals received as a result of this request, to negotiate with all qualified offerors, and to cancel in part or in its entirety this solicitation if it is in the best interest of [Consortium Leader] and [Consortium Name] to do so. Neither [Consortium Leader], [Consortium Name] nor any agent thereof on behalf of [Consortium Leader] or [Consortium Name] will be obligated in any way by any offeror response to this RFP.

Authorized Signature	Printed Name			Date
Company			SPIN/498 ID. (If Know	vn)
Mailing Address			Social Security Or Fede	eral Tax No.
City	State	Zip Code		Phone
Accepted By [Consortium Leader] As Follows:				

## 3

### KEY EVENT DATES

#### 1. Issuance of RFP

- 2. Deadline for receipt of an **original** and **5 copies** of the formal response
- 3. Opening of proposals in: [Address Where Proposals Shall be Opened]

<u>NOTE</u>: If additional information is necessary, it should be requested in writing to be received no later than, Month XX, 20XX. The inquiry and the written response will be distributed to all offerors indicating an intent to submit a response.

Your contact for supplemental information is:

[Name of Contact] [Phone Number of Contact] [Fax of Contact] or by Email [Email of Contact]

All times and dates listed are local [Geographic Area] times and dates except if otherwise noted

E-MAIL QUESTIONS TO:

MAIL QUESTIONS TO:

MARK ENVELOPES: QUESTIONS – [Proposal Number Example]

MAIL PROPOSALS TO:

PHYSICAL ADDRESS:

MARK ENVELOPES: Proposal – [Proposal Number Example] Attn.: [Proposal Contact]

## XX/XX/20XX

XX/XX/20XX

#### X/XX/20XX

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### **1.0. GENERAL INFORMATION AND INSTRUCTIONS**

NOTE: While effort has been made to separate substantive and procedural matters through the division of this Request For Proposals (hereinafter called "RFP") into various Parts, the distinctions between such categories are not always precise. Consequently, OFFERORS are advised that all contents of this RFP will constitute the substantive terms and conditions of the relationship, if any occurs, between that OFFEROR and [Consortium Name].

#### **1.1. SCOPE**

The purpose of this solicitation is to investigate the qualifications in order to establish a Primary Partner (PP) or a Primary Partner Consortium (PPC) for [Consortium Leader] and for the [Consortium Name] who can build, implement, and mange a broadband network that connects rural caregivers, across all [# of Consortium HCP Sites] [Geographic Location] counties to [Consortium Leader]'s academic and tertiary medical centers via a 10 gigabit backbone. The goal of the [Consortium Name] is to link rural caregivers, hospitals, and clinics to clinical resources, expertise and knowledge not readily available in the rural communities thus improving the healthcare delivery system across [Geographic Location]. Nothing herein is intended to, nor should it be construed to limit competition, but instead is for the purpose of meeting the full needs of [Consortium Leader] and [Consortium Name] using a system of fair, impartial and free competition among all OFFERORS. It is the intent and purpose of [Consortium Leader] and [Consortium Name] that this RFP identify potential partners and permit competition. It shall be the OFFEROR'S responsibility to advise the agent acting for [Consortium Leader] and [Consortium Name] if any language, requirements, etc., or any combination thereof, inadvertently restricts or limits the requirements stated in this RFP to a single source. Such notification must be submitted in writing, and must be received by the agent no later than the time and date specified in the schedule of "Key Event Dates" section of this proposal. A review of such notifications will be made.

#### 1.2. DISCUSSIONS

By submission of a response to this RFP, the OFFEROR agrees that during the period following issuance of the RFP and prior to the issuance of any award, the OFFEROR shall limit discussions concerning this potential agreement to members of the formal evaluation process or other parties designated in this solicitation. The CONTRACTOR shall not attempt to discuss or attempt to negotiate with individual employees of [Consortium Leader], [Consortium Name] or its member institutions, any aspects of the procurement process without

the prior approval of the [Consortium Leader] and [Consortium Name] representative responsible for this procurement.

#### **1.3. OFFEROR RESPONSIBILITY**

Each OFFEROR shall fully acquaint himself with conditions relating to the scope and restrictions attending the performance of obligations under the conditions of this RFP. The omission of an OFFEROR to acquaint himself with existing pre-contract conditions or post-contract consequences shall in no way relieve such OFFEROR of any obligation with respect to the qualifications identified or to any contract resulting here from. OFFERORS are notified that failure to inspect, familiarize or otherwise gather information as to the total cost to [Consortium Leader] and [Consortium Name], will, in addition to any and all other remedies available, create cost difference liabilities and potential claims against the ultimately successful OFFEROR. Therefore OFFERORS should notify [Consortium Leader] and [Consortium Name] of <u>ALL</u> costs reasonably expected.

#### 1.4. PREPARATION OF RESPONSE

All responses should be complete and carefully worded and must convey all the information requested by [Consortium Leader] and [Consortium Name], or their agent, the designated [Consortium Leader] and [Consortium Name] representative. If significant errors are found in the OFFEROR'S proposal, the OFFEROR does not possess the requisite qualifications, or if the proposal fails to conform to the essential requirements of the RFP, [Consortium Leader] and [Consortium Name] alone, will be the judge as to whether that variance is significant enough to reject the proposal or eliminate the OFFEROR from further consideration.

#### 1.5. FORMAT FOR PROPOSALS

Proposals are to be submitted in multiple parts.

It is expected that OFFERORS will respond with an overall 2-part proposal:

- A response to section 3.0 of this RFP. Please clearly summarize in a succinct proposal the roadmap the PP or PPC will follow to achieve a successful partnership, with expected milestone timeframes that would be incurred at these significant milestones or decision points. Also, include in this section suggestions and ideas as to how you can work with [Consortium Leader] and [Consortium Name] to identify funding models/business plans to sustain the [Consortium Name] over time.
- 2) A response to section 4.0 of this RFP. This part of your proposal is expected to conform to the qualification specifications contained in section 4.0, including a separate submission of the costs associated with the establishment of the parts contained on the Cost Sheets supplied with this section of the RFP.

Your response to section 4.0 of the RFP is to be comprised of the **OFFEROR'S Technical Proposal.** Proposals are to be prepared simply and in a manner designed to provide [Consortium Leader] and [Consortium Name] with a straightforward presentation of the OFFEROR'S capability to satisfy the requirements of this RFP. The OFFEROR shall respond to each specification. Each response shall clearly indicate whether the OFFEROR'S technology complies or does not comply with each specific requirement. OFFERORS shall explain in detail the method used to meet each requirement. Elaborate brochures and other promotional materials are not desired at this time.

#### 1.6. MULTIPLE PROPOSALS

OFFERORS may submit more than one proposal, each of which must satisfy the requirements of this RFP in order to be considered. The alternative proposal(s) may be in abbreviated form following the same section format, but providing only those sections which differ in any way from those contained in the original proposal.

#### 1.7. QUALITY OF PRODUCT

Unless otherwise specified in this solicitation, it is understood and agreed that any item offered or shipped in response to this request shall be new and in first class condition.

#### **1.8. QUESTIONS**

Every effort has been made to ensure that all information needed by the OFFEROR is included herein. If an OFFEROR finds that he cannot complete a proposal without additional information, he may submit written questions to the person designated herein on or before the deadline set forth in the schedule of "Key Event Dates". No questions will be accepted by [Consortium Leader] and

[Consortium Name] after this date. All replies to questions will be in writing. When a question received by [Consortium Leader] is found to be already sufficiently answered in the RFP, that question will be returned to the OFFEROR with a reference to the part of the RFP containing the answer. All questions and written replies will be distributed to all OFFERORS and will be regarded as a part hereof.

#### **1.9. AMENDMENTS**

If it becomes necessary to revise any part of the RFP, all amendments will be provided in writing to all OFFERORS. <u>ALL AMENDMENTS TO AND INTERPRETATIONS OF THIS</u> <u>SOLICITATION SHALL BE IN WRITING. [Consortium Leader] and [Consortium Name] SHALL</u> <u>NOT BE LEGALLY BOUND BY ANY AMENDMENT OR INTERPRETATION THAT IS NOT</u> <u>IN WRITING.</u>

#### 1.10. OTHER WRITTEN BASIS FOR PROPOSAL

If any of an OFFEROR'S proposal has as its basis written statements (other than the RFP) provided by [Consortium Leader] and [Consortium Name] (such as notification of a change in the qualifications or specifications), the OFFEROR is to identify and include those statements in his proposal at the place or places applicable.

#### 1.11. COMPANY EXPERIENCE AND REFERENCE ACCOUNTS

The OFFEROR must provide reference accounts where the services offered were similar to the services requested in this RFP. The intent is to show company experience in receiving contracts for and delivery of services similar to the ones being proposed. Information should include name, address, telephone number, and title of person to contact for inquiry as to the OFFEROR'S experience, performance and overall qualifications. Reference accounts must not be company owned.

[Consortium Leader] and [Consortium Name] reserves the right to consider historic information and fact, whether gained from the OFFEROR'S proposal, question and answer conferences, references, or any other source, in the evaluation process.

#### **1.12. PARTIAL ACCEPTANCE**

All proposals must be for the entire RFP. However, [Consortium Leader] and [Consortium Name] reserve the right to accept any portion(s) of the OFFEROR'S proposal if it is deemed to be in the best interest of the [Consortium Name] to do so.

#### **1.13. CONFIDENTIAL INFORMATION**

No documents relating to this request will be presented or made otherwise available to any other person, agency or organization until a notification of Intent to Award is issued or other agreement(s) subsequently made. Commercial or financial information obtained in response to this RFP which is privileged and confidential and is clearly marked as such will not be disclosed at any time. Such privileged and confidential information includes information which, if disclosed, might cause harm to the competitive position of the OFFEROR supplying the information. All OFFERORS, therefore, must visibly mark as "CONFIDENTIAL" each part of their proposal which they consider to contain proprietary information.

#### **1.14. RECEIPT OF PROPOSALS: TIMELINESS**

[Consortium Leader] and [Consortium Name] require that a copy of the proposal be submitted no later than the date and time specified in this RFP. OFFERORS mailing proposals should allow a sufficient mail delivery period to insure timely receipt of their proposals by the issuing office. Any proposals received after the scheduled opening date and time may be immediately disqualified.

#### 1.15. NO PROPOSAL REPLY

Any CONTRACTOR electing to submit no proposal in response to this RFP may do so by sending a letter of "no reply" to the [Consortium Leader] and [Consortium Name] representative named in this RFP.

#### 1.16. NUMBER OF PROPOSALS TO BE SUBMITTED, UNDER SEAL, ETC.

Each OFFEROR is to submit (as indicated in the "Key Event Dates") the requested number of copies of the proposal, under seal, to [Contact Name], [Contact Address]. Each copy of the proposal should be bound in a single volume where practical, and all documentation submitted with the proposal should be bound in that single volume where possible. The OFFEROR is required to have typed on the envelope or wrapping containing the proposal the RFP identification number specified in the RFP.

#### 1.17. PROPOSALS SIGNED

All proposals must be signed by a representative of the company authorized to commit to the provisions of this proposal. Unsigned responses will be rejected unless an authorized representative is present at the proposal opening and provides the needed signature, provided that the discovery is made prior to the reading of the name of the first OFFEROR.

#### **1.18. PUBLIC OPENING**

All proposals received in response to this RFP will be opened publicly at the time and place specified in the schedule of "Key Event Dates". At that time, the name of each OFFEROR will be listed and made available for public inspection.

#### **1.19. OFFEROR QUALIFICATIONS**

The OFFEROR must, upon the request of [Consortium Leader] and [Consortium Name], furnish any and all information requested to determine its ability to furnish the products or services requested in accordance with the terms and conditions of this RFP. [Consortium Leader] and [Consortium Name] reserves the right to request any information it deems necessary to make the final determination regarding the OFFEROR'S ability to provide the services requested herein before entering into any contract or further agreement.

#### **1.20. CLARIFICATIONS**

[Consortium Leader] and [Consortium Name] reserves the right, at any time after opening of responses and prior to pursuing further procurement activities leading to an award, to request clarification, address technical questions, or to seek or provide other information regarding the OFFEROR'S qualifications. Such a process may be used for such purpose as providing an opportunity for the OFFEROR to clarify their proposal(s) in order to ensure mutual understanding and/or aid in determinations of responsiveness or responsibility.

#### **1.21. NEGOTIATIONS**

[Consortium Leader] and [Consortium Name] may conduct negotiations with any OFFERORS submitting a proposal, which appears to be eligible for further consideration or award pursuant to the selection criteria set forth in the request for qualifications. All apparently eligible OFFERORS will be accorded the opportunity to submit best and final proposals if negotiations with any other OFFEROR result in a material alteration to the terms of the RFP and such alteration has a cost consequence that may alter the order of OFFEROR'S price quotations contained in the initial proposals. In conducting negotiations, there will be no disclosure of any information derived from proposals submitted by

competing OFFERORS.

#### **1.22. NEXT STEPS**

Ultimately an award will be made to the responsive and responsible OFFEROR whose proposal is determined to be the most advantageous to [Consortium Leader] and [Consortium Name], taking into consideration price and the evaluation factors set forth in the request for proposals, along with any subsequent due diligence process. No other factors or criteria will be used in evaluation. However, the right is reserved to reject any and all proposals received and in all cases, [Consortium Leader] and [Consortium Name] will be the sole judge as to whether an OFFEROR'S proposal has or has not satisfactorily met the requirements of this RFP.

## 2.0. SPECIAL PROVISIONS

#### 2.1. PROHIBITION OF GRATUITIES

[Specific Section of State Law] of the [Specific Document of Law] states: [Quote from individual's State Law Regarding Giving or Offering Compensation to any Public Official or Employee] provides that it shall be a breach of ethical standards for a subcontractor to make a kickback to a prime CONTRACTOR or a higher tier subcontractor in connection with the award of a subcontract or order there under.

#### 2.2. PERFORMANCE EVALUATIONS

[Consortium Leader] and [Consortium Name] shall have full access to observe and evaluate the performance with respect to the services herein provided and [Consortium Leader] and [Consortium Name], its authorized agents, and/or [Consortium Leader] or member institution auditors shall have full access to and the right to examine all records of the OFFEROR developed in the course of providing services under this AGREEMENT.

#### 2.3. OFFEROR AGREEMENT

The OFFEROR agrees to retain and safeguard all records related to this contract and any records it retains in the normal course of business for at least three years after any termination of this contract.

#### 2.4. COMPLETE PROPOSALS

**OFFEROR MUST** address all categories outlined in this RFP. No partial proposals will be accepted. It will be the OFFEROR'S responsibility to act as the primary contractor for all aspects. Communication between all technology and services suppliers is encouraged so that total responsibility will reside with one single contractor.

#### 2.5. OWNERSHIP OF MATERIAL

Ownership of all data, material and documentation originated and prepared for [Consortium Leader] and [Consortium Name] pursuant to this contract shall belong exclusively to [Consortium Leader] and [Consortium Name].

#### 2.6. OWNERSHIP OF DATA

All data and other records entered into any [Consortium Leader] and [Consortium Name] database or supplied to the OFFEROR by [Consortium Leader] and [Consortium Name] as a result of the network are, and shall remain, the sole property of [Consortium Leader] and [Consortium Name]. OFFEROR shall not: copy or use such records without written consent except to carry out contracted

work, transfer such records to any other party not involved in the performance of this Agreement; and will return any submitted records to [Consortium Leader] or its member institutions upon completion of the work hereunder.

## 3.0. SCOPE OF WORK (PARTNERSHIP)

[Consortium Leader] and the [Consortium Name] are seeking a qualified Primary Partner (PP) or Primary Partner Consortium (PPC) to enter into a broad-based, mutually beneficial partnership in accordance with this section of the RFP. [Consortium Leader] and [Consortium Name] is seeking a vendor that will build, implement, manage, and maintain a robust state-wide broadband network that links rural caregivers in all [# of counties] to the state's academic and large tertiary medical centers using a 10 gigabits (GB) lambda as the backbone network.

<u>Phase I</u> of the project calls for providing a 10 GB lambda backbone network connecting the hub sites listed under hub sites (Section 3.2). Linear and protected configurations should be proposed. In addition, access to Internet2 and/or National Lambda Rail is required to at least one of the hub sites. Access should include bandwidth options of 1Gb and 10Gb. Usage and connector fees for Internet2 and National Lambda Rail are not included in this RFP.

<u>Phase II of the project calls for the linking of [#] large tertiary hospital systems; [HCP Name], [HCP Name], and [HCP Name] to the [HCP Name] in [Geographic Location] via the backbone described in Phase I. Links to the backbone network from each of these facilities should be ten gigabits (GB) or 1 gigabits (GB) circuits with a one gigabit optional redundant path. We request that both 1GB and 10 GB circuits be bid. Both the primary and secondary circuits shall be bid separately. The tertiary hospital circuits will link back to hubs in or around [Geographic Location], [Geographic Location] and [Geographic Location] specified under Hub Site section.</u>

<u>Phase III</u> of the project calls for the linking of rural and perhaps urban clinics and hospitals across all [Geographic Location] counties (see Appendix A for details) back to the hub sites. Ideally, links to these rural and perhaps urban hospitals and clinics will be either 4, 5, 10 or 100 MB circuits. Bids should include pricing and availability of these circuit bandwidths for each location.

#### Key Circuit Attributes:

- Ethernet circuits should be non-blocking, clear channel transport "pipes".
- Network design is fully deterministic to ensure 100% bandwidth availability and full channel throughput.
- Circuits will provide full Committed Information Rate at all times. Excess Information Rate is not applicable.
- Maximum Frame Size: Any standard IEEE 802.1Q frame size can be transported
- Ethernet transport and access bandwidth must not be oversubscribed.
- All circuits should be designed to maximize network security

The network core equipment (routers, switches, etc.) should be located within the one or all of the 3 hub sites.

<u>Phase IV</u> of the project will entail creating a network cloud around each of the rural and perhaps urban hospitals so as to provide broadband connectivity for clinics to the respective hospitals. The objective is to provide affordable broadband connectivity for as many community clinics to the respective rural

hospitals and to [Consortium Name], as possible. Connecting equipment on the remote sites as well as the hospital site should be included in the bid.

Additionally, [Consortium Leader] and [Consortium Name] are looking for a Primary Partner or Primary Partner Consortium that will provide NOC services for all aspects of Phases I, II, and III of the [Consortium Name]. This service will include a 24/7 Help Desk<sup>1</sup>. It is also envisioned that [Consortium Name] will require a service billing capability; this functionality should be part of the operations bid. The Primary Partner or Consortium must be fully qualified to participate in USAC services and provide telecommunications services in [Geographic Location].

[Consortium Leader] and [Consortium Name] are seeking to find a Primary Partner or Primary Partner Consortium that is willing to enter into a relationship covering all of the categories of services, products or equipment outlined herein. Understanding that one vendor may not be able to supply all of the systems and service components needed by and for [Consortium Leader] and [Consortium Name], it is asking financially secure, visionary, industry leaders to band together, if necessary, to form a "primary partner consortium" for purposes of submitting a consolidated response for integrated products and related services covering systems and services described below.

#### Primary Partner (PP)

A Primary Partner (PP) is a vendor who is willing to assume responsibility for all of the categories, as well as overall systems implementation responsibility.

#### Primary Partner Consortium (PPC)

To be considered as a PPC, a group of vendors must indicate their willingness to accept overall responsibility for all of the categories of services, products, or equipment identified herein. Within a PPC, one company shall be designated as the lead company and will act in a capacity similar to a general contractor. The other vendors in the PPC will act as sub-contractors to the lead company. The lead company will seek products and/or services from the other companies when needed to meet RFP requirements.

The OFFEROR may elect to submit a response in which it is the lead company in a PPC. The same OFFEROR may also be a "sub-contractor" in one or more PPCs wherein a different company is the lead company.

Vendors may also choose to submit an independent bid for each Phase or a sub-set of Phases identified above.

#### **3.1. INTRODUCTION/BACKGROUND**

[Consortium Leader] is a collaborative organization with the goal of improving the health status of all [State Residents] through the support of healthcare quality and clinical research while also fostering economic growth. First formed in 20XX, the founding partners of [Consortium Leader] the [List founding partners] joined the collaborative in 20XX. The [Consortium Leader] partners originally convened to coordinate joint research activities; as the benefits of collaboration have become apparent and the field of quality improvement in healthcare has evolved, the scope of [Consortium Leader] efforts has now grown to encompass improvements in the delivery of care & associated clinical education along with other emerging directions that increasingly depend upon the ability to aggregate

<sup>&</sup>lt;sup>1</sup> Helpdesk services are ineligible, unless used exclusively in support of eligible services and equipment. Helpdesk services for anything other than supporting the eligible services and equipment is not eligible for funding through the Healthcare Connect Fund. The PP or PPC should delineate the eligible helpdesk services cost and, if applicable, the helpdesk service costs for ineligible usage (e.g. services not related to eligible services or equipment).

clinical data across the hospital systems.

[Consortium Leader] emerged as an ideal framework within which to establish a state-wide broadband network that will link rural caregivers and providers to the state's academic and large tertiary centers using a 10 gigabits (GB) circuit as a backbone for the rural healthcare network. This rural healthcare network will be known as the [Consortium Name]. The network will provide broadband access to most of the rural hospitals and clinics across the state. It will connect [XX] rural and underserved regions, approximately [XX] facilities (Refer to Appendix for FCC HCF eligible sites), to a 10 gigabits (GB) backbone with connections to Internet 2/NLR. In [Geographic Location], [XX] of our [XX] counties fall outside a metropolitan area and nearly XX% of the state is designated as rural. Some portion, if not all, of [XX] of the state's [XX] counties are medically underserved.

The [Geographic Location] has talented healthcare professionals and excellent tertiary care centers in addition to a significant primary care network. However, with the lack of sufficient access, the rural areas cannot fully take advantage of these resources. Until recently, the missing link has been the broadband connectivity to these large academic and tertiary hospital systems. The size and demography, mostly rural, provides an opportunity to demonstrate how the use of modern network technology can simultaneously improve the health status and economic well-being of its population. Since its inception, [Consortium Leader] has promoted and funded projects to improve the health and economic wellbeing of [Geographic Location] citizens.

The [Consortium Name] will be extended out from a 10 gigabits (GB) backbone into the rural areas of the state. Once operational the [Consortium Name] will allow rural area electronic access to specialty consultations, clinical services such as remote ICU monitoring, pediatric echo cardiology, clinical pathology, psychiatry, training and education as well as a host of other telemedicine, telehealth and videoconferencing services. Working with other agencies, the [Consortium Name] will also offer an Electronic Health Record to the rural physicians' office sites which are connected. It will greatly improve the efficacy of the proposed Medicare and Medicaid disease management projects by improving the communications between patient and physician. In the case of the current Medicare pilot programs, this will cover 57,000 patients across fifteen practice groups in the low country of [Geographic Location] alone.

The [Consortium Name] will extend out to all [#] counties in an attempt to connect as many of the small hospitals, community health centers and physicians offices as possible.

The [Consortium Name] will be organized as a subsidiary of the [Consortium Leader], an organization within the meaning of Section 501 (c) (3) of the Internal Revenue Code. The [Consortium Name] will be governed by a board consisting of members from [Consortium Leader], rural hospitals from the [Geographic Location] State Hospital Association, the [Geographic Location] Rural Primary Care Association, AHEC, and four at large rural primary care physicians. In addition, there will be a telehealth/telemedicine advisory council that will oversee the programmatic activities of the [Consortium Name].

#### 3.2. HUB SITES

# [This section provides a complete listing of all HUB sites, including the HCP number, name, and physical location]

#### **3.3. GENERAL QUESTIONS**

The following questions have been developed for PPs, or PPCs, to answer. The first series of questions

(starting with **S**) requires a narrative response. All subsequent questions are to be answered Yes or No, with follow-up questions requiring a narrative response. Please take as much space as needed to answer the narrative questions and to elaborate on your yes or no answers. It is recommended that you read all questions first before responding to any of them to ensure full understanding of all the questions.

In the review process, particular attention will be given to the Offeror's clear understanding of the consortium concept, an understanding of the future of healthcare networks, the relevant experience brought to this engagement, the willingness to work collaboratively with [Consortium Leader], [Consortium Name] and other vendors, and the ability to develop a creative funding mechanism.

#### 3.3.1. Scope Questions

- S-1a Are you responding as a PP or a PPC?
- S-1b If there are multiple firms in your PP or PPC, what are the names and addresses of the firms?
- S-1c What is the name of the lead company?
- S-1d Please provide the following information about the lead company:
  - Last two (2) years of audited financial statements
    - Debt/Credit rating
- S-2 For each of the areas listed below, please indicate those components for which your PP or PPC wishes to assume responsibility. Please add any specific components to help [Consortium Leader] and [Consortium Name] better understand your offering. Please indicate which company (if any) in the consortium will be likely to provide the product or service:

A. Overall topology of [Consortium Name] Network

B. Circuits and associated electronics to link three large tertiary and [HCP Name] to the hub sites

C. Circuits and associated equipment to link rural and perhaps urban hospitals to the backbone network.

D. Creation of rural hospital communication clouds and all of the circuits and required equipment from remote clinics to rural hospitals

- E. NOC services, including billing for services as needed services
- F. Primary partner responsibilities
- S-3 If you are the lead company please answer the following questions about yourself and each partnering company:
  - Name of company
  - Role of company including systems/services being proposed
  - Number of Employees
  - Years in Telecom Industry
  - Names and contact information of other facilities where company has installed all or part of the products, services or supplies you propose to provide to [Consortium Leader]/[Consortium Name]
  - Name of company principals
  - Address of main company office
  - Address of closest company office

- S-4 Who will be the lead person from the lead company and what is his/her experience with projects of this nature? Do you commit to keep the lead person or an acceptable replacement on the project throughout the contract period?
- S-5 What additional resources (particularly personnel resources) will you be able to commit to this partnership? Please indicate how your company is currently organized, identifying numbers & types of people that would be assigned to this effort.
- S-6 As a Primary Partner outline your ideas about how you will work with HSSC and PSPN to identify various funding models/business plans to sustain the PSPN over time.

#### 3.3.2 Narrative Questions

- N-1 Have you entered into an arrangement of this type before? Provide specific information regarding the products, services or equipment offered how they were offered and where they were offered.
- N-2 [Consortium Leader] and [Consortium Name] desires to derive real value & sustainability from this initiative. Please provide any specific expectations you have regarding this effort and how you plan to work with [Consortium Leader] and [Consortium Name] in demonstrating value or conducting ROI studies.
- N-3 How can [Consortium Leader] and [Consortium Name] avoid the high costs of frequent equipment upgrades and/or replacements? What types of safeguards can you provide to protect investments in the infrastructure components or equipment
- N-4 How can we incorporate future research and development work, new technologies, intellectual property ownership and the like into a contract with your PP or PPC?
- N-5 Are there particular components within the scope of this RFP that must be included in a PP or PPC arrangement in order for you or your team to further consider any type of a creatively funded relationship with [Consortium Leader] and [Consortium Name]?
- N-6 Have the companies in your PP or PPC ever been party to a consortium relationship such as this before?

Identify the three (3) projects that most closely resemble your response to this proposal. As to each, describe in detail the major differences between that installation and your proposal for [Consortium Leader] and [Consortium Name]. As part of your response, provide contact information for those projects.

- N-7 How will the PP or PPC ensure that standardization occurs across the [Consortium Name]?
- N-8 What is your plan for assisting [Consortium Leader]'s and [Consortium Name]'s in obtaining grants or governmental contracts to attract support in order to sustain these efforts beyond initial implementation.

#### 3.3.3 Yes/No Questions and Follow-up

health science research?

YES

NO

Y-1	Under your approach, is your PP or PPC willing to be responsible for all service maintenance issues?	
Y-1a	If not, who will be?	
Y-2	Will you provide any training needed for users your proposed solutions?	
Y-2a	Describe any user training required and who will be conducting it	
Y-3	As part of a PP or PPC are you willing to contractually commit to a response time for service call/problems?	
Y-4	As part of a PP or PPC would your company be willing to commit to a 99.999% network uptime requirement or better?	
Y-5	Do you see problems with the PP or PPC approach?	
Y-5a	If yes, what are they?	
Y-6	Is your firm willing to make a commitment to be part of a PP or PPC through at least three (3) years from the day of award?	
Y-7	Do you have ideas as to some of the strategies or approaches that might be used to allow us to work together?	
Y-7a	If yes, what are they?	
Y-8	Will the lead company in your PP or PPC assume responsibility for HIPPA, FDA and/or other regulatory compliance of all companies/products in the PP or PPC?	
Y-9	Is your PP or PPC willing to work with [Consortium Leader and [Consortium Name] to secure local, state, federal and/or private or foundation monies to support initiatives aimed at improving patient care processes and outcomes, clinical research, and other areas of	

## 4.0 CIRCUITS, EQUIPMENT/ELECTRONICS, MAINTENANCE, AND NOC SERVICES REQUIREMENTS

1. Please describe how you will provide a 10 gigabits (GB) lambda and an optional redundant route for the backbone network linking the three [Consortium Leader] tertiary hospitals and [HCP Name] and outline all customer premises (CPE) equipment/electronics you will provide to support this component of the [Consortium Name] proposed network. Please include make of electronics [model numbers or approximate specifications], etc. required or recommended.

Response:

2. Briefly describe technology you will use to link the rural and perhaps urban hospitals to the 10 gigabits (GB backbone and describe all core equipment/electronics need for this component of the [Consortium Name]. Please include make of electronics [model numbers or approximate specifications], SLAs etc. required or recommended.

Response:

Briefly describe the technology you will use for creating a "telecommunications cloud" around the rural and perhaps urban hospitals to connect clinics to the respective hospitals. Describe all equipment/electronics required for this component of the [Consortium Name]. Please include make of electronics [model numbers or approximate specifications], etc. required or recommended.

Response:

4. Please indicate, in your experience with similar clients, the extent of downtime that can be expected for [Consortium Leader] and [Consortium Name] healthcare providers accessing the network and the most likely cause of any such downtime.

Response:

5. Briefly describe how you will provide NOC services and maintenance support for all components of the [Consortium Name] including a billing service.

Response:

6. Briefly describe how your network design will provide and manage network security, quality of service and class of service functions. It should be noted that [Consortium Name] healthcare providers will provide their own firewall services.

Response:

7. Please describe the core network equipment and design you propose to manage the various connections, VLANs and service options.

Response:

## 5.0 CIRCUITS, EQUIPMENT/ELECTRONICS, MAINTENANCE, AND NOC SERVICES REQUIREMENTS

1. Briefly describe how you will operationalize an existing 10 gigabits (GB) lambda for the backbone network linking the three [Consortium Leader] tertiary hospitals and [HCP Name] and outline all equipment/electronics you will provide to support this component of the [Consortium Name] proposed network. Please include make of electronics [model numbers or approximate specifications], etc. required or recommended.

Response:

2. Briefly describe technology you will use to link the rural and perhaps urban hospitals to the 10 gigabits (GB backbone and describe all equipment/electronics need for this component of the [Consortium Name]. Please include make of electronics [model numbers or approximate specifications], etc. required or recommended.

Response:

3. Briefly describe the technology you will use for creating a "telecommunications cloud" around the rural and perhaps urban hospitals to connect clinics to the respective hospitals. Describe all equipment/electronics required for this component of the [Consortium Name]. Please include make of electronics [model numbers or approximate specifications], etc. required or recommended.

Response:

8. Please indicate, in your experience with similar clients, the extent of downtime that can be expected for [Consortium Leader] and [Consortium Name] healthcare providers accessing the network and the most likely cause of any such downtime.

Response:

9. Briefly describe how you will provide NOC services and maintenance support for all components of the [Consortium Name] including a billing service.

Response:

#### 4.0.1 Equipment/Electronics Maintenance and Support

Any OFFEROR-supplied equipment/electronics **must** be specified and priced on the attached Cost Sheets. Any annual maintenance or support fees **must** be itemized on the appropriate Cost Sheets. Requirements for housing and/or maintenance of equipment at participating locations **must** be specified.

### 5.0 COMPANY PROFILE

Please answer the following questions as related to the organization, management and future development of the Offeror. The Offeror must demonstrate as far as possible, that the company is economically stable. Answer each question concisely, completely and accurately.

#### 5.1. Organization

- 1. Size of company (total number of employees, size & location of offices, etc)
- 2. Size of parent company current ownership
- 3. Is your company a "parent" to any other companies or subsidiaries? If so please describe.
- 4. Description of the organization of your company and the nature of your business. Specifically address the relationship of the organizational unit providing the creation, implementation, operation and NOC service
- 5. Any material (including letters of support or endorsement) indicative of the bidder's capability to fulfill contract.
- 6. A copy of your last two (2) years of audited financial statements. At least the most recent audited financial statement should be provided if possible. Alternatively, provide a summary of the financial position of the entity that is proposing the system and will be responsible for supporting it.
- 7. Personnel numbers, credentials, length of service, turnover rate. Are there content experts within your organization, or is this technical expertise contracted out to other organizations?

#### 5.2. Management

- 1. History of company ownership to date. Include year established and the current headquarters location.
- 2. "Vision statement", or organizational goals, of the entity supplying the solution.
- 3. Method of evaluating corporate performance to ensure contract compliance.

#### 5.3. Performance and Support

- 1. Length of time company has been providing telecommunications services to organizations.
- 2. Similar/Related services or products associated with your company.

- 3. Annual reports or financial documentation demonstrating solvency for more than three years
- 4. Percentage of your total revenues derived from telecommunications services similar to those proposed.
- 5. Future research and development plans for current and next fiscal year, for entire company and system specific to this proposal. Please specify type of application.
- 6. Percent of revenue expended on research and development for telecommunications
- 7. For evaluation purposes, the Offeror **must** supply a complete list of all installed users

for the type network proposed.

Please identify those most comparable to the network proposed for [Consortium Leader] and [Consortium Name]. Include the following in your response:

Organization Name, Address & Entity (Hospital, Facility or Practice Size) Programs or Circuits Installed ) Project Manager (include telephone number)

## 6.0. COST

All costs related to this section of the RFP <u>MUST</u> be included in the OFFEROR'S Cost Proposal in a separate sealed section.

Regardless of whether the OFFEROR is proposing a purchase or subscription option, the itemized listing submitted on the attached Cost Sheets in the Cost Proposal <u>MUST</u> include the costs of <u>all</u> proposed components.

#### 6.1. COST SECTION CERTIFICATION:

The following certification **must** be submitted with the offer in the cost section thereof:

I hereby certify that the price included in this proposal is accurate and binding for \_\_\_\_\_\_ days (not less than ninety (90) days) from the proposal due date and that all changes and estimates are, to the best of my knowledge, accurate and complete. I further certify that the above total cost accurately reflects my total proposal cost, including any applicable discounts, and that the company which I represent will provide the proposed system for this amount.

SPIN/498 ID Name:

SPIN/498 ID Number: \_\_\_\_\_\_

If no SPIN/498 ID, provide EIN:

#### 6.2 COST SHEETS:

#### 6.2a Data Circuits

List Phase I, II, III, and IV Installation Separately if applicable

Cost

Three & Five Year

\_\_\_\_ (A) Subtotal =\_\_\_\_\_

6.2b <u>Equipment/Electronics</u> (List Each Item Separately)	Cost including installation		Annual maintenance
		· -	
		-	
		-	
		-	
		-	
		-	
		-	
		-	
		-	
		-	
		-	

(B)Subtotal =\_\_\_\_

\*OFFEROR **should** indicate time frame for completion of modification.

### 6.2c NOC Activities

Item (List Each Activity Separately)

Cost of Item

\_

\_

(C) Subtotal =

### 6.2d Maintenance Fees

The cost of annual maintenance will be a factor in determining the award. The present annual maintenance rate, times five (5) years, less initial warranty period, will be factored to arrive at the total maintenance cost.

#### CIRCUIT/EQUIPMENT MAINTENANCE/SUPPORT

Circuit/Equipment	Annual Rate	Five (5) Times Annual Rate	Less Warranty	Five (5) Year Total

(D)Subtotal =\_\_\_\_

#### **6.2e INSTALATION FEES**

Item		Cost
	_	
	(E) Subtotal =	
6.2f BILLING SERVICE FEES <sup>2</sup>		
Item		Cost
	(F) Subtotal =	

<sup>&</sup>lt;sup>2</sup> Billing Fees are an ineligible through the Healthcare Connect Fund. PP and PPC are not encouraged to include Billing Fees but should identify any that will be charged to the [Consortium]. These expenses will be included in the total cost of the

Item	Cost
(G) Subtotal =	
GRAND TOTAL $(A+B+C+D+E+F+G) = $	

6.2g OTHER RELATED COSTS: i.e., Consulting Fees (per hour and type), Travel etc.

#### APPENDIX

Α

NOTE: Of the following sites, [#] are eligible to be funded through the HCF. An additional [#] sites have been included which will 'pay their own way' for connectivity to the [Consortium Name] and should not be included in your bid. However, [Consortium Name] will need to have accurate estimates for their individual connectivity to the network.

[Consortium Name] [Geographic Location] Hospitals, Clinics and AHEC sites by County

1. [HCP Name]	<b>Definition: Rural / Very Rural</b>
Facility:	Eligible
Location:	Address:
City:	Zip Code:
Phone:	FAX:
Admin:	E-Mail:
Owner:	