Consortia Best Practices

Preparing for FY2020
Housekeeping

• Use the “Audio” section of your control panel to select an audio source and connect to sound
  • Turn on your computer’s speakers, or
  • Use the call-in instructions in your confirmation email
• All participants are on mute
• Submit questions at any time using the “Questions” box
• Slides attached to GoToWebinar Panel and posted to the Online Learning Library
Today’s Presenters

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Program Manager, RHC Outreach
Agenda

1. Getting Started
2. Forming a Consortium
3. Best Practices for Requesting Services
4. FY2018 Annual Report
## Glossary

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<th>Meaning</th>
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<td>FCC</td>
<td>Federal Communications Commission</td>
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<td>HCF</td>
<td>Healthcare Connect Fund</td>
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<td>FY</td>
<td>Funding Year</td>
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Getting Started

FY2019 Applicant Webinar
What is a Consortium?

• A consortium is two or more health care providers (HCPs) that choose to request support from the Healthcare Connect Fund (HCF) Program as a single entity.
• A consortium can file a single application on behalf of all its members.
• Eligible and ineligible HCPs may participate in a consortium.
  • Ineligible entities cannot receive direct finding and must pay their fair share (HCF Order, para.178-184)
  • Costs shared by eligible and ineligible entities must be allocated in a manner that ensures that only eligible entities receive the benefit of program discounts.
Example Consortium Structure

- Consortium
  - Consortium Leader
    - Lead Entity/Site
    - Employee of Consortium Leader
  - Project Coordinator
    - Member HCP
    - Member HCP
    - Member HCP
Consortium Leaders

- A consortium leader is the legal entity for the consortium.
- The consortium and the consortium leader can be the same entity (if the consortium is a legal entity), but are not required to be.
- What other types of entities can be considered a consortium leader?
  - Eligible HCP participating in the consortium; Ineligible state organization; Public sector (government) entity, including Tribal Governments; or Nonprofit entity
Consortium Leader Type

Block 3: Consortium Information

17 HCP Number
18 Name of Consortium Bacon

19 Is the Consortium a legal entity?  ○ Yes  ○ No  If yes, Consortium FCC RN:

20 Consortium has a written agreement allocating legal and financial responsibility.  ○ Yes  ○ No
If yes, submit the agreement to USAC. If no, see instructions regarding the default entity that bears legal and financial responsibility for the consortium's activities in connection with the Healthcare Connect Fund.

21 Consortium Leader Type:
○ The Consortium
○ An eligible HCP participating in the Consortium
○ Ineligible State organization
○ Ineligible public sector (government) entity
○ Ineligible non-profit entity

A state organization, public sector entity, or non-profit entity may obtain an exemption to allow the organization to perform vendor functions and provide application assistance. Submit any such request for exemption.

22 Consortium Leader Contact Information

Consortium applicants are required to have a Letter of Agency from each eligible HCP that authorizes the Consortium to file forms on the HCP’s behalf. Submit a Letter of Agency for each eligible HCP.

24 List participating sites by HCP Number (eligible/ineligible)
Consortium Leader Responsibilities

• Ensures that all applicants and service providers comply with any applicable state or local competitive bidding requirements.
• Legally and financially responsible for the activities of the consortium.
• Designates a project coordinator responsible for communicating with USAC and the FCC.
• Submits program forms, required documents, and verifies that all information and certifications are accurate and true.
• Ensures that the competitive bidding process is fair and open, and compliant with FCC requirements.
• Responsible for the invoicing process.
• Responsible for recordkeeping, site visits, and responding to audits.
Project Coordinators

• A project coordinator is an individual who is an officer, director, or authorized employee of the consortium leader.
• Responsible for signing all forms submitted on behalf of the consortium.
• Serves as point of contact with USAC and the FCC on all matters related to the consortium.
• Responsible for responding to inquiries from USAC and the FCC on behalf of the consortium members throughout the application, funding, invoicing and post-invoicing period.
Member HCPs

- An individual site that has an approved individual FCC Form 460.
- Represents one of the individual HCPs that make up a consortium.
Majority Rural Rule

- Beginning in FY2020, all current and new consortia must be majority rural.
- FCC Report and Order 19-78 eliminates the three-year grace period for consortia to become majority rural; there will be no grandfathering of prior Pilot Program consortia or other existing consortia.
- “Majority Rural” means that more than 50% of participating HCPs in a consortium must be rural.
- Funding requests filed by consortia that are not in compliance with the majority-rural threshold at the time the funding request is submitted will be denied.
- The “majority rural” consortia percentage requirement will automatically increase by 5% for the following funding year whenever RHC Program demand exceeds the funding cap (up to a maximum of 75%).
Things to Consider

• A consortium must meet a majority rural percentage quota in order to continue receiving eligible funding (i.e., more than 50 percent of HCP sites are rural).

• HCPs can participate as both an individual HCP and a member HCP of a consortium.

• Network-wide services may be eligible when requesting funding as a consortium.

• Membership in a consortium is not dependent on ownership structure; HCPs can connect different member sites via Letter of Agency (LOA).

• Membership in a consortium is not dependent on HCP locations; member sites from different states can be part of a consortium.
Questions?
Forming a Consortium

FY2020 Consortium Best Practices
Types of Account Holder Rights

- **HCP**
  - **Primary**: Main Point of Contact
  - **Secondary**: Additional Account Holder(s)
  - **Tertiary**: Consultant

- Third Party Authorization (TPA)
Three Types of Account Holders

1. Primary Account Holder (PAH)
   • Must work for the legal entity of the HCP
   • Responsible for the accuracy of information submitted to USAC
   • Can only be one individual
   • Mandatory for every HCP

2. Secondary Account Holder
   • Must work for the legal entity of the HCP
   • Responsible for the accuracy of information submitted to USAC
   • Can have multiple secondary account holders for one HCP

3. Tertiary
   • Hired by HCP to file forms on behalf of the HCP (e.g., consultants)
   • Must have a valid Third Party Authorization (TPA)
   • TPAs are uploaded to the FCC Form 460 before submission or added by the primary account holder in My Portal

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Account Holder Management

• All account holders should be up to date at all times.
• Automatic emails and Information requests are sent directly to individuals listed as account holders.
• If an original TPA uploaded in My Portal expires, an updated TPA should be sent to rhc-assist@usac.org.
• Account Holder Guides: HCF Program, Telecom Program
Consortium leaders and/or individual members may hire a third party to fill out applications on their behalf. Consultants must file a TPA (third party authorization) with the consortium leader to file forms on their behalf.
Forming a Consortia: Steps

1. Identify member HCPs and if member sites already have approved individual FCC Form(s) 460 on file.

2. Identify the Consortium Leader (entity) and the Consortium Project Coordinator (person) who will be responsible for filing forms on behalf of the consortium.

3. Review necessary authorizations such as Letter of Agency (LOA) and Letter of Exemption (LOE) to determine which ones should be filed.
Consortium Member Site

If member HCPs do not currently participate in the HCF Program:

- Project Coordinator must identify the new HCPs that will participate as member sites.
- Submit individual FCC Form 460s to determine eligibility of each member site.
- Must verify that at least one HCP location is rural, and wait for the FCC Form 460 to be approved.
- Once the first rural FCC Form 460 is approved, file the FCC Form 460 for the consortium.
- Once the FCC Form 460 consortium is approved, connect member site with consortium via an LOA in My Portal.
If member HCPs currently participate in the HCF Program:

- Do not file a new FCC Form 460 for an existing site. This will be denied as a duplicate within our system.
- If you do not have access to that HCP, email rhc-assist@usac.org with the HCP number in the subject line to find out who the current account holders are.
- Connect individual member sites to the consortium via LOA in My Portal.
Consortium Leader

- The consortium FCC Form 460 will have a separate HCP number from the individual HCP member sites.

- The **Consortium Leader** is the entity responsible for filing forms.
  - If an individual HCP site is assigned as the consortium leader, this site must already have eligibility determined via an individual FCC Form 460.

- The **Project Coordinator** is the person responsible for filing forms.
Authorizations

- **Letter of Agency (LOA):** Provides written authorization to the consortium project coordinator to act on behalf of each participating health care provider (HCP) within the consortium. This is mandatory for HCP member sites not owned and operated by the consortium.

- **Letter of Exemption (LOE):** Provides written authorization to the consortium project coordinator to file forms for sites that are owned and operated by the consortium.

- **Third Party Authorization (TPA):** Provides written authorization to a third party/consultant to complete and submit forms on behalf of an HCP.
LOA Requirements

- Name of the entity being authorized to submit application forms.
- Name of the entity on whose behalf the project coordinator is authorized to file (HCP/consortium member).
- Physical location address of the HCP/consortium member site.
- Specific timeframe the LOA covers (start date and end date).
- Signature, title, and contact information of an officer, director, or other employee of the HCP/consortium member who is authorized to act on behalf of the HCP/consortium member.
- Date of signature.
- Type of services covered by the LOA.
- Relationship of the HCPs listed on the LOA to the entity signing the LOA on their behalf (only for health systems or an HCP that owns multiple locations).
Adding an LOA

RHC Note: All consortium members must have an HCP # and a submitted Form 460. Click on the 'File Member Form 460' button to create a new HCP or file a Form 460 for an existing Rural Health Care participant.

HCP Number | HCP Name | Authorization Level | Status
--- | --- | --- | ---
 | Family Clinic | 460 - 463 | Approved

Document Uploads

FY2017 LOA2.pdf

View LOA Details
Adding an LOA
Uploading an LOE
Add HCPs to LOA
Add HCPs to LOA

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Submit LOA

RHC Note: All consortium members must have an HCP # and a submitted Form 460. Click on the 'File Member Form 460' button to create a new HCP or file a Form 460 for an existing Rural Health Care participant.

[Diagram of the LOA submission interface with options for My Consortium, My LOAs, Documents, Account Holders, and Forms.]

- LOA ID: [Input field]
- HCP Number: [Input field]
- Status: [Dropdown]
- Search
- Clear

[Table showing LOA ID 55513551 - Awaiting Submission]

<table>
<thead>
<tr>
<th>HCP Number</th>
<th>HCP Name</th>
<th>Authorization Level</th>
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<tbody>
<tr>
<td></td>
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<td>460 - 463</td>
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<td>460 - 463</td>
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<td>Remove</td>
</tr>
</tbody>
</table>

[Document Uploads]
- LOA signed.pdf

[Buttons: Submit LOA, Edit LOA, Add HCPs to LOA]
LOA Management Reminder

- Consortia must ensure all LOAs are up to date for each participating member site
- Consortia is unable to submit forms for member sites that have expired LOAs
- Account holders of the consortia and the member HCPs will receive automatic emails from My Portal when an LOA is about to expire.
- Update LOAs via My Portal only
Questions?
Best Practices for Requesting Services

FY2020 Consortia
Requesting Services & Competitive Bidding

• Once you have completed all FCC Forms 460 and LOAs/LOEs, you then competitively bid and submit a request for services form (FCC Form 461) by taking the following steps:
  • Prepare a Request for Proposal (RFP), if applicable, and develop criteria to evaluate submitted bids
  • Develop a network plan and required documents describing your service needs.
  • Submit the FCC Form 461, network plan, and, if desired or applicable, an RFP.
  • Once approved, USAC posts the approved FCC Form 461 and supporting documents on the USAC website for a minimum of 28 days. This is known as competitive bidding.
  • Some applicants may be exempt from the competitive bidding if they meet certain requirements.
FCC Form 461

- The FCC Form 461 allows the applicant to describe its service needs and request bids for services from service providers.
- Can be submitted as early as 180 days before the beginning of the funding year, and must be posted on USAC's website for at least 28 days.
- You may sign a contract with a service provider on the 29th day.
- If you decide to extend the bidding period after USAC posts the FCC Form 461, notify USAC via rhc-assist@usac.org as soon as possible, so that USAC can update the website posting with notice of the extension.
After the FCC Form 461 is Posted

• After the 28-day competitive bidding period ends (which begins once the FCC Form 461 is posted on the RHC website), you will need to evaluate all bids received to determine which service provider can provide the most cost-effective services that meets your requirements.

• You must choose the most cost-effective option, which is defined by the FCC as, “the method that costs the least after consideration of the features, quality of transmission, reliability, and other factors relevant to choosing a method of providing the required services.”

• You must consider all bids received during the competitive bidding period and document how you evaluated each bid.
Information Requests

- FCC Forms with missing or incomplete information or documentation cannot be processed.
- USAC will send out an **Information Request** to an applicant when it requires information that cannot be located on the submitted supporting documentation.
- All account holders will receive all Information Requests.
  - Please make sure your account holders are up to date!
Questions?
Submitting the Annual Report for FY2018

• The consortium leader must submit an annual report to USAC, which will include information that allows the FCC to assess progress towards the performance goals and measures of the HCF Program.

• The consortium leader must file the annual report by September 30 for the preceding funding year.

• For FY2018, to supplement the information collected from forms filed by consortia, the FCC requires HCF consortia who received funding in FY2018 (July 1 2018 – June 30, 2019) to submit information to USAC about the telehealth applications used during the funding year.

• Failure to submit the required annual report(s) by the deadline may result in the denial of program funding.
<table>
<thead>
<tr>
<th>Telehealth Applications</th>
<th>Select only applicable (Use the dropdown)</th>
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<tbody>
<tr>
<td>1. Exchange of EHRs</td>
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<tr>
<td>2. Participation in Health Information Exchange</td>
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<td>3. Remote Training</td>
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<tr>
<td>4. Adult Echocardiology</td>
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<td>5. Adult Psychiatry</td>
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<tr>
<td>6. Allergy / Rheumatology / Immunology</td>
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<tr>
<td>7. Cardiovascular Surgery (Including pre, post surgery)</td>
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<td>8. Chronic Disease Counseling (diabetes, cardiac rehab etc...)</td>
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<tr>
<td>9. Clinical Pharmacology / Pharmacy</td>
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<tr>
<td>10. CT and MRI Interpretations (adult and pediatric)</td>
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<tr>
<td>11. Dentistry (adult and pediatric)</td>
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<td>12. Dermatology (adult and pediatric)</td>
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<td>13. Diabetes Clinical Services (adult and pediatric)</td>
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<td>14. Endocrinology clinical services (adult and pediatric)</td>
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<td>15. ENT (adult and pediatric)</td>
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<tr>
<td>16. ENT Surgery (including pre, post surgery)</td>
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<td>17. Gastroenterology (adult and pediatric)</td>
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<tr>
<td>18. General Pediatrics</td>
<td></td>
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<tr>
<td>19. General surgery (including pre, post surgery)</td>
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How to Submit

1. Download the HCF Program Annual Report Template [here](#).
2. In the “Telehealth Services” tab, review the telehealth applications in column A and use the dropdown menu in column B to select “Yes” for each telehealth application for which the consortium received funding in FY2018.
3. Save the template with a file name that includes the consortium name and HCP number.
4. Email the completed template to [RHC-assist@usac.org](mailto:RHC-assist@usac.org) by September 30, 2019.
Questions?
RHC Program Help Desk

- Email: RHC-Assist@usac.org
  - Email at any time to request a one-on-one appointment to learn more about the application process or ask specific questions.
- Phone: (800) 453-1546
  - Hours are 8:00 a.m. – 8:00 p.m. ET