Service Provider Best Practices

Rural Health Care (RHC) Program
Agenda

1. RHC Program Basics
2. Competitive Bidding
3. Funding Request/Evergreen Contracts
4. Telecom Program Invoicing
5. HCF Program Invoicing
6. Disbursement Process
FY2017, 2018, 2019 FRNs

• Today’s training is for service providers with funding commitments from the above funding years.

• FCC Order 17-98 - Promoting Telehealth in Rural America: Adopted during the FCC August 1 meeting.

• Changes to RHC Program procedures and rules will have separate trainings and additional resources.

• Read the final Order here.
## Program Glossary

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>FCC</td>
<td>Federal Communications Commission</td>
</tr>
<tr>
<td>HCF</td>
<td>Healthcare Connect Fund</td>
</tr>
<tr>
<td>FY</td>
<td>Funding Year</td>
</tr>
<tr>
<td>HCP</td>
<td>Health Care Provider (the site receiving services)</td>
</tr>
<tr>
<td>Service Provider/SP</td>
<td>Telco company providing services (you)</td>
</tr>
<tr>
<td>SPIN/Form 498 ID</td>
<td>Service Provider Identification Number</td>
</tr>
<tr>
<td>ACSD</td>
<td>Allowable Contract Selection Date</td>
</tr>
<tr>
<td>FRN</td>
<td>Funding Request Number</td>
</tr>
<tr>
<td>HSS</td>
<td>HCP Support Schedule</td>
</tr>
</tbody>
</table>
The Basics
The Two Components of the RHC Program

There are two “subprograms” of the RHC Program:

- Healthcare Connect Fund (HCF) Program
- Telecommunications (Telecom) Program
HCF Program Highlights

• Funds eligible expenses related to broadband connectivity for both individual sites and consortia.
• Provides a flat 65% discount.
• HCP to submit invoices for service providers to review and submit to USAC.
Telecom Program Highlights

• Funds telecommunications services related to the use of telemedicine and telehealth.
• Single year funding requests for recurring telecommunications services.
• Funds up to the difference between the urban and rural rates for the requested service.
• Requires that service providers to submit invoices to USAC to request reimbursement for the difference between the urban and rural rates. (HCPs are required to pay the service provider the urban rate for the requested service.)
Service Provider Participation

1. Submit bids for services included on the posted Request for Services forms.
   - HCF Program: FCC Form 461 (Request for Services Form)
   - Telecom Program: FCC Form 465 (Description of Services Requested and Certification Form)

2. Provide supporting documentation (e.g., calculation of the rural rate) to the HCP during the application (Funding Request) process.
   - HCF Program: FCC Form 462 (Funding Request Form)
   - Telecom Program: FCC Form 466 (Funding Request and Certification Form)

3. Complete invoicing process
   - HCF Program: FCC Form 463 (Invoice and Request for Disbursement Form)
   - Telecom Program: Telecom Invoice
Service Provider Participation

Rural Healthcare Program Application Process

1. Determine Eligibility
   - Must meet the three initial program criteria and make sure requested services are eligible
   - Form 460

2. Develop Evaluation Criteria and Request Services
   - Develop scoring criteria to evaluate bids and describe service needs (posted on USAC website)
   - Form 461

3. Evaluate Bids and Select a Service Provider
   - Choose the “most cost-effective” service provider
   - Form 462

4. Submit Funding Request
   - Provide information about services and selected service provider
   - Form 464

5. Certify Connection
   - Confirm service start and end dates
   - Form 467

6. Invoice
   - Initiate invoicing process and submit to service provider for review (HFC Program)
   - N/A

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Competitive Bidding/Request for Services
FCC Form 461 and 465
Service Provider Participation

Rural Healthcare Program Application Process

1. Determine Eligibility
   - Must meet the three initial program criteria and make sure requested services are eligible

2. Develop Evaluation Criteria and Request Services
   - Develop scoring criteria to evaluate bids and describe service needs (posted on USAC website)

3. Evaluate Bids and Select a Service Provider
   - Choose the “most cost-effective” service provider

4. Submit Funding Request
   - Provide information about services and selected service provider

5. Certify Connection
   - Confirm service start and end dates

6. Invoice
   - Initiate invoicing process and submit to service provider for review (HCF Program)

Form 465
Form 460
Form 461

Form 466
Form 462

Form 467
N/A

N/A
Form 463

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FCC Form 465 (Description of Services Requested and Certification Form) and Form 461 (Request for Services)

- In Telecom FCC Form 465 combines both HCP eligibility to participate in the program and competitive bidding for the requested services.
- In the HCF Program, after an HCP is determined eligible (FCC Form 460), an FCC Form 461 is submitted to USAC inform all service providers what types of eligible services the HCP needs.
- Service providers use the information on the FCC Form 461 and Form 465 to create a responsive bid to provide the requested services.
- This form initiates the HCP’s process to seek competitive bids from service providers for the requested services and opens the competitive bidding process.
Competitive Bidding

• The purpose of competitive bidding is to allow all service providers an equal opportunity to understand the HCP’s service requirements and offer the most cost-effective solution to address those needs.
Competitive Bidding

• Equal access for all service providers.
• Fair and open process.
• Bidders cannot participate in the vendor selection process.
• All applicants and service providers must comply with FCC rules and any applicable state or local competitive bidding requirements.
**Competitive Bidding**

- Service providers who plan to bid cannot also simultaneously help the HCP choose a winning bidder or participate in the vendor selection process in any way.
- All potential bidders and service providers must have access to the same information about the HCP’s service needs, and must be treated in the same manner.
## Competitive Bidding

- Begin the competitive bidding process on the USAC public website on the Search Posted Services Page

### ABOUT THE PROGRAM
- Process Overview
- Appeals & Audits
- Program Calendar
- Funding Information
- Glossary of Terms (PDF)
- FAQs

### RESOURCES & TOOLS
- Forms
- My Portal
- Tools
- Latest News
- Sample Documents
- FCC Resources
- Trainings & Outreach
- Contact Us

### TOOLS

#### Funding Tool
- Funding Commitments Search (FY2013 and Later)
  - The commitments search tool provides Rural Health Care (RHC) Program funding commitment information.

#### Health Care Provider Tool
- Eligible Rural Areas Search
  - This tool is a directory of rural areas and will help you determine whether your organization is located in a rural area, as defined by program rules.

#### Service Provider Tool
- Search Posted Services
  - This tool allows service providers to view service request information posted by consortia and individual health care providers applying for funding through the Healthcare Connect Fund Program.
Search Posted Services

To search for requests for services, type the full or partial criteria in the appropriate box below.

The search results will show a summary of each HCP whose service request(s) match the search criteria entered, with options to view additional information. View more information about each HCP by clicking "Details" next to each HCP number. All supporting documentation will be available for download on this expanded view.

Fund Year: ____________________  City: ____________________  Posting Start Date After: ____________________
HCP Number: ____________________  County: ____________________  Posting End Date Before: ____________________
Category of Expense: ____________________  State: ____________________  Applicant Type: ____________________

[Form fields for search criteria]

[Export Selected, Export All, Reset, Search buttons]

<table>
<thead>
<tr>
<th>HCP#</th>
<th>HCP Name</th>
<th>Fund Year</th>
<th>Category of Expense Requested</th>
<th>Posting Start Date</th>
<th>Posting End Date</th>
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<td>Lewist County Nursing Home District</td>
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<td>Network Equipment, Leased/Temporary Facilities &amp; Services</td>
<td>04/04/2017</td>
<td>05/03/2017</td>
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<td>52669</td>
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<td>05/03/2017</td>
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<td>1237</td>
<td>Morgan County Health Department</td>
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<td>Network Equipment, Leased/Temporary Facilities &amp; Services</td>
<td>04/04/2017</td>
<td>05/03/2017</td>
</tr>
</tbody>
</table>
Bid Evaluation Criteria

- The bid evaluation criteria is a list of weighted standards that HCPs will use to determine the most cost-effective bid.
- Each criterion is given a certain weight, and the sum of these weights will equal 100.
  - Examples of evaluation criteria include: cost, reliability, quality of transmission.
- The bid evaluation criteria should address the HCP's needs as indicated on the FCC Form 465 or Form 461, and be based on the FCC's definition of "cost-effective."
  - The FCC defines "cost-effective" as the method that costs the least after consideration of the features, quality of transmission, reliability, and other factors that the health care provider deems relevant to choosing a method of providing the required health care services. 47 CFR § 54.603(b)(4)
# Example of Evaluation Criteria

## Block 5: Bid Evaluation

22. Select selection criteria (and weights assigned to each) that will be used to evaluate bids received as a result of this request for services. Attach supplemental information (if necessary).

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>a.  Cost</td>
<td>25</td>
</tr>
<tr>
<td>b.  Technical Support</td>
<td>15</td>
</tr>
<tr>
<td>c.  Prior experience, including past performance</td>
<td>15</td>
</tr>
<tr>
<td>d.  Reliability of Service</td>
<td>20</td>
</tr>
<tr>
<td>e.  Other (Single Point of Contact)</td>
<td>25</td>
</tr>
</tbody>
</table>
When Can a Contract Be Signed?

- **Allowable Contract Selection Date (ACSD):** Once a Request for Services is posted, service providers have at least 28 days to submit their bids to the applicant.
  - The HCP and service provider may not enter into an agreement to purchase services until after 28 days from the date the FCC Form 465 is posted on USAC’s website.
  - After the 28 day period ends, the HCP and the selected service provider may sign a contract.
Documentation

• All bid correspondence and supporting documentation should be handled via email for audit purposes.

• All documentation related to the delivery of discounted services must be retained for at least five years after the last day of delivery of discounted services. 47 CFR § 54.619(d)

• All communications with the HCP regarding the discounted services should be in writing and retained.
Funding Request
FCC Form 462 and Form 466
Funding Requests and Service Providers

• Once a service provider is selected, the HCP submits a funding request (FCC Form 462 and/or 466) to USAC.
• Specifies the type of service(s) ordered, cost, name of service provider(s), and terms of the service agreement(s).
• Selected services must be the most cost-effective option of the offers received.
Who Must Submit a Funding Request?

- In Telecom:
  - All Telecom Program applicants requesting funding must file a separate FCC Form 466 for each circuit for which funding is requested.
  - The HCP files the FCC Form 466 via My Portal.

- In the HCF Program:
  - All HCF Program applicants requesting HCF Program funding must file a separate FCC Form 462 for each service provider for which funding is requested.
  - Multiple expenses can be included on one FCC Form 462 if the requested services are from the same service provider.
  - The HCP files the FCC Form 462 via My Portal.
When the HCP Submits a Funding Request

- Funding Requests must be submitted by the close of the filing window period to be considered for funding.
- Cannot submit funding request forms outside of an application filing window period.
- HCPs should submit funding requests as early as possible during a filing window.
- No changes can be made to funding request forms after the close of the filing window.
HCP’s Submission Checklist

• Access to My Portal.

• Document(s) confirming the monthly cost for your services (e.g., a copy of your bill dated within the requested funding period) or the most currently available bill before the application filing window close date.

• A scanned copy of all bids that were received for your Request for Services, including the winning bid, all bids that were rejected, and any bids that were disqualified and why.

• A scanned copy of the bidding evaluation matrix.

• A scanned copy of any new contract signed for your services.

• Contact information for:
  • Service provider
  • All responsible Account Holders

• The start and end location of your services.

• A scanned copy of urban rate documentation (Telecom Program only).

• Rural rate documentation from the service provider demonstrating compliance with the rural rate rule (Telecom Program only).

• * Any information that cannot be located on the submitted supporting documentation will result in an Information Request being sent to the health care provider and carrier to obtain the information.
Funding Requests and Service Providers

• It is the responsibility of the HCP to ensure all forms submitted are accurate and complete.

• The service providers must provide the HCP with any additional information needed by USAC to complete the form review.

• The HCP and service provider should work together to ensure that information requests are answered before their deadline (within 14 days).
Rural Rate Definition (47 CFR § 54.607) (Telecom Program Only)

- Method 1: FCC rules state that “[t]he rural rate shall be the average of the rates actually being charged to commercial customers, other than health care providers, for identical or similar services provided by the telecommunications carrier providing the service in the rural area in which the health care provider is located.”
  - Similar services are those that are functionally equivalent from the perspective of the end user, considering factors including advertised speed with respect to bandwidth and whether the service is symmetrical and asymmetrical.

- Method 2: If the telecommunications carrier does not provide similar or identical service in the rural area where the HCP is located, “the rural rate shall be the average of the tariffed and other publicly available rates, not including any rates reduced by universal service programs, charged for the same or similar services in that rural area . . . .”

- Method 3: If there are no such tariffed or publicly available rates, or the carrier “reasonably determines that this method for calculating the rural rate is unfair,” the carrier must submit its rural rates to the state commission (for intrastate rates) or the FCC (for interstate rates) for approval.
Rural Rate – Key Points (Telecom Program Only)

- Documentation provided must show that the rural rate provided is in compliance with the rural rate rule (47 CFR 54.607).
- There are 3 methods of determining a rural rate. These methods are sequential. Carriers must first determine a rural rate using Method 1. If there isn’t a way to determine the rate using Method 1, then carriers must determine a rural rate using Method 2. Only if Method 2 cannot be used to determine a rural rate, or the carrier reasonably determines that the rate determined under Method 2 is unfair, may a carrier seek approval of a cost-based rural rate under Method 3.
  - Method 1 – use actual rates charged to a commercial customer in the same rural area as the HCP who is NOT a health care provider for the same or similar services. For example a bill, invoice, or contract.
  - Method 2 – for use only if the service provider does not provide the same or similar service to a commercial customer who is NOT a health care provider in the HCP’s rural area. In this case, be sure to use tariffed or publicly available rates for same or similar services provided by other carriers in the HCP’s rural area.
  - Method 3 – this part of the rule is straightforward and may only be used if Method 2 can not be used because “there are no such tariffed or publicly available rates” or the carrier “reasonably determines that this method for calculating the rural rate is unfair,” The carrier must submit an itemization of costs of providing the service requested by the HCP to the state commission (for intrastate rates) or the FCC (for interstate rates) for approval of a costbased rural rate. The applicant must submit proof to USAC that rate was submitted to state commission or FCC before the FCC Form 466 was filed.
Rural Rate – Key Points For Service Providers (Telecom Program Only)

• Your customer is not likely to have the information needed to document that the rural rate on the FCC Form 466 is compliant with the rule.

• You should determine the rural rate for a service before you submit a bid in response to the FCC Form 465.
  • Carriers should not begin the process of determining a rural rate when they submit a bid. They should already know what their rural rates are.
  • If using Method 3, you should submit your rural rate to the state commission or FCC for approval.

• Be sure that the correct contact person is on the FCC Form 498 (Service Provider Identification Number and General Contact Information Form) so that Information Requests that require the service provider’s input are received in a timely manner.

• Be sure to copy everyone on the email with your Information Request response and be mindful of deadlines.

• In the rare case where you deem the information provided to USAC as confidential, please mark it clearly as confidential in the subject line and take the appropriate measures to protect the email correspondence.
Urban Rate Definition (47 CFR § 54.605) (Telecom Program Only)

- If a rural health care provider requests support for an eligible service to be funded from the Telecommunications Program that is to be provided over a distance that is less than or equal to the “standard urban distance,” for the state in which it is located, the “urban rate” for that service shall be a rate no higher than the highest tariffed or publicly-available rate charged to a commercial customer for a functionally similar service in any city with a population of 50,000 or more in that state, calculated as if it were provided between two points within the city.

- If a rural health care provider requests an eligible service to be provided over a distance that is greater than the “standard urban distance,” for the state in which it is located, the urban rate for that service shall be a rate no higher than the highest tariffed or publicly-available rate charged to a commercial customer for a functionally similar service provided over the standard urban distance in any city with a population of 50,000 or more in that state, calculated as if the service were provided between two points within the city.
Urban Rate – Key Points (Telecom Program Only)

• Documentation provided must show that the urban rate provided is in compliance with the urban rate rule (47 CFR § 54.605).

• Urban rate must be derived from a tariff or “publicly available rate.”

• Urban rate must be derived using a rate for a “functionally similar” service i.e. must be a rate for a complete circuit, not simply a portion of the circuit and similar in symmetry/asymmetry.

• Urban rate must be a tariff or publicly available rate in the same state as where the HCP is located.

• Urban rate must be a tariff or publicly available rate in a city with a population of over 50,000.

• Safe harbor rates are available on USAC’s website for bandwidths up to 50 Mbps.
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.
• Telecom Program Information Requests can be received two ways:
  • Via the HCP’s My Portal
  • Via email from RHC reviewer
• Applicants are given 14 calendar days to provide a response to the Information Request.
• Information Requests not responded to within 14 calendar days will result in a denial of that form.
USAC Evergreen Designation
Evergreen Contracts

- A contract is reviewed for evergreen designation at the time of the FCC Form 466 submission.
- The contract may be designated as “evergreen” if the contract meets all of the following requirements:
  - Both parties identified.
  - Contract specifies the service type, bandwidth, and quantity.
  - Contract is signed and dated by the HCP or consortium leader after the Allowable Contract Selection Date (ACSD).
  - Contract specifies the term and cost of service(s).
  - Contract includes the physical addresses of the HCP(s) purchasing from the contract.
Evergreen Contracts

- A contract is considered “evergreen” when it covers more than one funding year and is granted evergreen status by USAC.
- An evergreen contract exempts the HCP from seeking bids for services requested under the contract for the life of the contract (or until the contract is modified).
- If USAC designates a contract as “evergreen” under the Telecom Program, that designation will also apply under the HCF Program, and vice versa.
- If an HCP submits a contract as part of the Funding Request documentation, USAC staff will automatically review this contract for evergreen designation.
  - Notification of evergreen designation is reflected in the Funding Commitment Letter (FCL).
- HCPs with evergreen contracts must submit the FCC Forms 466 (Telecom Program) annually for every funding year in which funding is requested under the terms of the contract unless HCPs have been approved for a multi-year funding commitment under the HCF Program.
Invoicing in the Telecom Program
# Service Provider Participation

## Rural Healthcare Program Application Process

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
<th>Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Determine Eligibility</td>
<td>Form 465</td>
</tr>
<tr>
<td>2</td>
<td>Develop Evaluation Criteria and Request Services</td>
<td>Form 460, Form 461</td>
</tr>
<tr>
<td>3</td>
<td>Evaluate Bids and Select a Service Provider</td>
<td>Form 466, Form 462</td>
</tr>
<tr>
<td>4</td>
<td>Submit Funding Request</td>
<td>Form 467</td>
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<tr>
<td>5</td>
<td>Certify Connection</td>
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</tr>
<tr>
<td>6</td>
<td>Invoice</td>
<td>Form 463</td>
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</tbody>
</table>

**Notes:**
- Must meet the three initial program criteria and make sure requested services are eligible.
- Develop scoring criteria to evaluate bids and describe service needs (posted on USAC website).
- Choose the “most cost-effective” service provider.
- Provide information about services and selected service provider.
- Confirm service start and end dates.
- Initiate invoicing process and submit to service provider for review (HCF Program).
Telecom Program Invoicing

• Invoicing is the last step in the Telecom Program application process.

• Service providers may file an invoice once they have received an approval of the FCC Form 467 (Connection Certification Form), HCP Support Schedule (HSS), and credited the HCP’s account for the discounted services.

• Once the Telecom Program invoice form is approved by USAC, funds are disbursed to the service provider.
HCP Support Schedule (HSS)

- The HSS is sent to the HCP and service provider after the FCC Form 467 has been approved. You should refer to the HSS when invoicing to ensure the correct credit amount has been issued to the HCP. The HSS provides the following details:
  - Funding year
  - HCP number & FRN
  - Billing Account Number (BAN): an account code for an HCP credited with support
  - HCP name & HCP address
  - HCP mailing organization and address
  - 498 ID (formerly known as SPIN/498 ID) and service provider name
  - Service being supported
  - Support start date: first date HCP can receive support based on the FCC Form 466
  - Support end date: last day service is eligible for support during the funding year
  - Support amount: per month ($) and total support for the funding year
### Information Center

To revise or deactivate a Form 498 ID, or to consolidate multiple SPINs, click the "Manage" link for appropriate Form 498 ID.

#### Service Providers

<table>
<thead>
<tr>
<th>Form 498 ID</th>
<th>Company Name</th>
<th>Form 498 ID Status</th>
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<tr>
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#### Schools & Libraries

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#### Rural Health Care

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<tbody>
<tr>
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<td>Entitlements</td>
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</table>
Service Provider My Portal
HCF Program Invoicing
Service Provider Participation

Rural Healthcare Program
Application Process

1. Determine Eligibility
   - Must meet the three initial program criteria and make sure requested services are eligible

2. Develop Evaluation Criteria and Request Services
   - Develop scoring criteria to evaluate bids and describe service needs (posted on USAC website)

3. Evaluate Bids and Select a Service Provider
   - Choose the “most cost-effective” service provider

4. Submit Funding Request
   - Provide information about services and selected service provider

5. Certify Connection
   - Confirm service start and end dates

6. Invoice
   - Initiate invoicing process and submit to service provider for review (HCF Program)

Form 465
Form 460
Form 461

Form 466
Form 462

Form 467
N/A

N/A
Form 463

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HCF Program Invoicing

• Invoicing is the last step in the HCF Program application process.
• Once the HCP receives an approved FCC Form 462 funding commitment letter (FCL), bill from the service provider, and paid the 35% minimum contribution, they can create an invoice for the services received (using an FCC Form 463).
• Once the HCP submits the FCC Form 463, the service provider will receive it in My Portal for approval.
• The service provider then reviews and certifies to the accuracy of the form, and then submits it to USAC for approval.
• Once an FCC Form 463 is approved by USAC, funds are disbursed to the service provider.
Reviewing the Invoice

• Upon receiving an email notification stating you have an invoice readily available for review, log into My Portal/E-File:
  • Start process by selecting your SPIN.
  • If you don’t see it, click “HCF Form 463” on the left side of the page.

• Carefully review the form for accuracy:
  • Confirm billing period and invoiced amount.
  • If inaccurate, return invoice to HCP.

• Certifying
  • FCCRN can be found in Block 3 of the FCC Form 498 or [https://apps.fcc.gov/coresWeb/simpleSearch.do](https://apps.fcc.gov/coresWeb/simpleSearch.do)
  • Your signature is your My Portal password.
Service Provider Review

- HCF Certification – Check the FCC Form 498
  - SPIN/498ID must be authorized for the Rural Health Care Program.
  - Confirm that you have selected Block 18 in order to have access to the FCC Form 463.

  ![Certification to Assist Health Care Providers](image)

- If not, you will not be able to view the invoice.
  - File an FCC Form 498 revision or contact the Contributors team for help: customersupport@usac.org or (800) 453-7546 ext. 2 and ex. 1
# Service Provider Review

![Service Provider Review interface](image)

Note: All Forms in this section have been submitted by the HCP for Service Provider Review.

## Invoices in Service Provider Review: 2

<table>
<thead>
<tr>
<th>RHC Invoice Number</th>
<th>FRN</th>
<th>Fund Year</th>
<th>Vendor/Applicant Invoice Number</th>
<th>HCP Name</th>
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<td>2016</td>
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<td>Mental Health Center</td>
<td>11/01/2017</td>
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<td>20</td>
<td>Medical Center</td>
<td>11/04/2017</td>
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</tbody>
</table>
# General Information

Read the complete Form Guide before you begin. Click the button on each screen for guidance about completing each section of the form. Failure to comply with the Federal Communications Commission (FCC) rules and orders may result in denial of the request.

Information about the Paperwork Reduction Act (PRA) is available here.

<table>
<thead>
<tr>
<th>Line 1: RHC Invoice Number</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Line 2: FRN</td>
<td>16</td>
</tr>
<tr>
<td>Line 3: HCP Number</td>
<td></td>
</tr>
<tr>
<td>Line 4: Site/Consortium Name</td>
<td>Mental Health Center</td>
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<tr>
<td>Line 5: Funding Year</td>
<td>2016</td>
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<tr>
<td>Line 6: Vendor/Applicant Invoice Number</td>
<td></td>
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<tr>
<td>Line 7: SPIN/493 ID</td>
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</tr>
<tr>
<td>Line 8: Vendor Name</td>
<td></td>
</tr>
</tbody>
</table>

Approved by OMB 3080-0804

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You **must** download the FCC Form 463 (Excel document)
Supporting Documentation

Applicant Documentation

Description | Upload
cover letter | Download HCP Hardware docs
Aug | Download Augmentation docs

Vendor Documentation

Description | Upload | Actions
New Document | Select All Documents | Delete Checked Documents
Save and Exit | Save and Go Back | Exit
Best Practices for Creating the FCC Form 463

• Consolidate invoices.
• Utilize calendar drop down for billing start and end dates.
• Identify eligible amount for chosen period.
• Common issues:
  • N/A Line Items
  • Grayed out “Create 463” button
  • $0.00 in the USF Support Amount to be Paid column
  • Error Messages
Common Invoicing Question

• The total amount of funds invoiced is less than what is listed on the FCL. I divided the total amount by 12 months, which is 1 year of funding. How do I invoice for the full amount?
  • USAC calculates the monthly recurring rate based on full months as they vary in the numbers of days, as opposed to the 365/366 days in a year.
  • For instance, January has 31 days and April has 30 days.
  • As long as you invoice for all committed funding dates consecutively, then you will receive the full committed funding amount as listed on your FCL.
USAC Monthly Recurring Cost Calculation Example

- Entered billing dates of (9/24/2018 - 10/23/2018)
  - September and October’s individual day calculations are different.
- Line item 1 = $100.00 monthly
- September (30 days): 100 / 30 = $3.33 per day
  - $3.33 x 7 days (September 24 – 30) = $23.31
- October (31 days): 100 / 31 = $3.23 per day
  - $3.23 x 23 days (October 1 – 23) = $74.29
- Total amount for billing period: $97.60 not $100.00
HCF Invoice Deadline for FY2017, FY2018, and FY2019

- All invoices must be received by USAC within six months of the funding end date.
  - Reminder: An invoice is not considered submitted until it has been approved by the service provider.

- For multi-expense commitments, the invoice deadline is based on the latest funding end date.

- Where you can find your invoice deadline:
  - Funding Commitment Letter (FCL)
  - USAC website
Disbursement Process
What to Expect After Submitting an Invoice to USAC

- Review Time:
  - Review generally takes less than 10 days, barring any outstanding Information Requests or other reviews.

- If information is requested, it will come from rhc-invoicing@usac.org
  - Approval will be held until response is received and reviewed.
  - Note: This differs from under-invoicing emails, which will be approved after 14 days as filed.

- Email notification of invoice approval will be emailed from rhcadmin@usac.org to account holders after USAC review and approval.
Disbursement Process

- HCP and service provider receive email notification from rhcadmin@usac.org once an invoice is approved.
- Funds are disbursed to the service provider on the 6th and 21st of each month, barring weekends and holidays.
- Record-keeping and Audits
  - Both the HCP and service provider are required to maintain records regarding billing and invoices to USAC for a term of five years after the last day of delivery of discounted services.
  - Both HCPs and service providers may be subject to audits regarding participation in the RHC Program.
Red Light Status and Voluntary Netting

- Red Light status
  - Contact Customer Support: (888) 641-8722

- Voluntary Netting

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Block 17: Offsetting Disbursement Payments Against Federal Universal Service Contribution Obligations For Rural Healthcare Participants

The following information pertains only to telecommunications companies participating in the Rural Health Care Program. In accordance with FCC rule section 54.879 regarding Rural Health Care payments, a telecommunications company may choose to offset its payment against its Federal universal service contribution. A telecommunications company must have an FCC Form 499 Filer ID number in order to offset its Rural Health Care Program payments against its Federal universal service contribution. In order to obtain an FCC Form 499 Filer ID number, visit http://www.usac.org/cont/tools/forms/default.aspx and select FCC Form 499. You do not need an FCC Form 499 Filer ID in order to be issued a FCC Form 498 ID.

94 □ Yes, I want my Rural Health Care Program disbursement payments to be offset against my Federal universal service contribution obligations. This box must be checked in order to receive offsets. The Default is "No."
```
Watch our Invoicing Video Series – RHC Online Learning Library

Invoicing

HCF Program: Invoicing Best Practices
34:43 minutes | November, 2017

Individual HCP Invoicing Video Series
5 videos | Created November 2016
Up to Date for FY2016 Invoicing Deadline (December 31, 2017)

Consortia Invoicing Video Series
5 videos | Created November 2016
Up to Date for FY2016 Invoicing Deadline of (December 31, 2017)

Telecom Program: Submitting Invoices for Service Provider
6:21 minutes | July, 2013

Direct links: Individual HCPs and Consortia
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