General Information

HCP or Consortium: 71794 - CHC - Community Healthcore
Application Number: RHC46100022400
FCC Registration Number: 0025217506
Address: 107 WOODBINE PL , LONGVIEW, TX 75601-2912
Application Nickname: 2026
Funding Year: 2026
Funding Priority: Priority 8

Consortium Participating Sites

HCP Number	Name	LOA Expiry
70258	501 Pine Tree Rd.	
70260	4603 Troup Hwy	
62213	N Main Street - Henderson	
70270	2435 College Drive	
70265	1007 S Williams Street	
62212	N Martin Luther King Drive - Clarksville	
62211	S Adams Street - Carthage	
62214	1500 West Grand - Marshall	
62218	N Louise Street - Atlanta	
71516	3110 H G Mosley Pkwy	
49900	Community Healthcore	

Requested Services

Type of Services	Description for Other	Min Download Speed	Max Download Speed	Min Upload Speed	Max Upload Speed	Speed Unit	Allow Bids for Similar Services
Equipment							
Installation							
Network Management Services							
Data		100	5000	100	5000	Mbps	Yes

Dates and Timing

What is the HCP's desired service contract length?: Up to 3 Year(s)
Will the HCP consider bids with contract extension language?: Yes
Will the HCP consider bids for month-to-month contracts?: No
What is the HCP's desired time to publicly post this request for services?: 28 Day(s)
What is the HCP's expected bid evaluation period after the public posting?: 1 Day(s)

Bid Evaluation

Select the criteria that will be used to evaluate the bids collected.

Criteria	Description	Evaluation Weight (%)	Minimum Requirement
Price		30	
Technical support		20	Must be timely on installs and responsive when circuits are down
Other	Worked with other LMHA's	30	Has worked with Local Mental Health Facilities
Other	Prior experience with USAC funding	20	Experience with USAC reporting requirements

Does the HCP have any disqualifying factors that will remove bids or bidders from consideration?: No

Main Contact

Name	Organization	Title	Phone	Email	Address
Shawn Ormes	CHC - Community Healthcore	IT Operations Manager	9032372343	shawn.ormes@communityhealthcore.com	107 WOODBINE PL , LONGVIEW, TX 75601-2912

RFP and Summary

Is the HCP likely to request more than $100 000 in program support from this request for services?: Yes

Do state, Tribal, or local procurement rules require the HCP to include an RFP with this request for services application?: Yes

Will the HCP be including an RFP with this application?: Yes

RFP1002-25 RFP FCC - Healthcare Connect Fund Consortium.docx

Summary of the HCP's requested services. :

For 50 years, Community Healthcore has served some of the most vulnerable populations in North East Texas, such as children and adults with mental health conditions, intellectual and developmental disabilities, and substance use disorders. Community Healthcore’s 450 employees served over 15,000 unduplicated individuals across East Texas from 9/1/2023 – 8/31/2024. Community Healthcore has clinics in nine counties in East Texas: Bowie, Cass, Gregg, Harrison, Marion, Panola, Red River, Rusk, and Upshur. Increasing bandwidth to the locations listed below will improve access to clinical information and provide better healthcare for the people in East Texas. This will also allow us to increase our telemed services and improved patient experience as well as facilitate the development of new services. Community Healthcore’s goal is to provide a central source for patient information. Connecting the clinics to the data center allows access all of the Community Healthcore’s resources including our new EMR (Credible) and our primary care EMR (Nextgen) that is scheduled to go live April 2025. Community Healthcore’s long range vision of the FCC Healthcare Connect Program is to improve our telehealth connection services throughout East Texas and the option to connect to an HIE (Health Information Exchange) which would allow us to share patient information. The RFP addresses the telecommunications challenges in East Texas connecting our rural locations to cloud applications and back to our data center.

Additional Documentation

Document Type	Description for Other	Document	Uploaded On
Network Plan		CHC (USAC 2025) Network Plan.docx	3/2/2026 4:55 PM EST
Other	Required Document for CHC RFP	ATTACHMENT B, CIQ, Word Format, RFP1002-25.pdf	3/2/2026 4:56 PM EST
Other	Required Document for CHC RFP	Attachment C - Non-Community Service Contract with state-required provisions - RFP1002-25.docx	3/2/2026 4:56 PM EST
Other	Required Document for CHC RFP	ATTACHMENT E, Respondent Information Sheet, Word Format, RFP1002-25.docx	3/2/2026 4:56 PM EST
Other	Current & Future Bandwidth	CHC Current-Future Bandwidth Consortium.xlsx	3/2/2026 4:57 PM EST

Declaration of Assistance

Name	Organization Type	Title	Employer	Nature of Relationship	Email	Telephone

Certifications

- ✓ I certify under penalty of perjury that I am authorized to submit this request on behalf of the healthcare provider or consortium.
- ✓ I certify under penalty of perjury that I have examined this request and all attachments, and to the best of my knowledge, information, and belief, all statements contained herein and in any attachments are true.
- ✓ I certify under penalty of perjury that the applicant seeking supported services has complied with any applicable state, Tribal, or local procurement rules.
- ✓ I certify under penalty of perjury that all requested RHC Program support will be used solely for purposes reasonably related to the provision of health care service or instruction that the health care provider is legally authorized to provide under the law of the state in which the services are provided.
- ✓ I certify under penalty of perjury that the applicant seeking supported services satisfies all of the requirements under section 254 of the Communications Act, 47 U.S.C. § 254, and applicable Commission rules.
- ✓ I certify under penalty of perjury that the applicant seeking support has reviewed and is compliant with all applicable RHC Program requirements.
- ✓ I understand that all documentation associated with this request, including a copy of the signed Request for Services (FCC Form 461), any bids/contracts resulting from the FCC Form 461 posting, scoring sheet, and other information that was used in the decision making process, must be retained for a period of at least five years pursuant to 47 CFR § 54.631, or as otherwise prescribed by the Commission's rules.
- ✓ I certify under penalty of perjury that the applicant seeking supported services is a nonprofit or public entity that falls within one of the seven categories set forth in the definition of health care provider listed in 47 CFR §54.600 of the Commission's rules.
- ✓ I certify under penalty of perjury that the applicant seeking supported services is physically located in a rural area as defined in section 47 CFR § 54.600 of the Commission's rules, or is a member of a consortium which satisfies the majority-rural composition requirements set forth in 47 CFR § 54.607 of the Commission's rules.
- ✓ I certify under penalty of perjury that the services will not be sold, resold, or transferred in consideration for money or any other thing of value.

Signature

Name:	Shawn Ormes
Email:	shawn.ormes@communityhealthcore.com
Phone:	9032372343
Employer:	Community Healthcore
Title:	IT Operations Manager
Employer’s FCC RN:	0025217506
Certifier’s Full Name:	Shawn Ormes
Digital Signature:	Shawn Ormes
Date and time:	3/2/2026 4:58 PM EST