General Information

HCP or Consortium: 94702 - Burrell, Inc. Consortium
Application Number: RHC46100022476
FCC Registration Number: 0029424926
Address: 2885 W BATTLEFIELD ST , SPRINGFIELD, MO 65807
Application Nickname: 461 - Preferred RFP-2
Funding Year: 2026
Funding Priority: Priority 8

Consortium Participating Sites

HCP Number	Name	LOA Expiry
117362	Preferred Family Healthcare - Clarity Columbia E Walnut St	
117364	Preferred Family Healthcare - Clarity Quincy S. 36th St.	
117366	Preferred Family Healthcare - Clarity Quincy York St.	
117368	Preferred Family Healthcare - Clarity St. Louis	
117363	Preferred Family Healthcare - Dayspring Bartlesville	
117735	Preferred Family Healthcare - Dayspring of OK Tulsa	
117369	Preferred Family Healthcare Liberty	
51752	Preferred Family Health Bridgeway BH Warrenton	
132177	Preferred Family Health YCPRC	
117371	Preferred Family Healthcare - Clarity Bowling Green	
103389	Preferred Family Healthcare - Clarity Hannibal PATCH Center	
15105	Preferred Family Healthcare - Kirksville E. Laharpe St.	
44939	Preferred Family Healthcare Hannibal	
117372	Preferred Family Healthcare - Clarity Hannibal Stardust Drive	
44979	Preferred Family Healthcare Union	
44978	Preferred Family Healthcare Kahoka	
45006	Preferred Family Healthcare - Dayspring Cushing	
44880	Preferred Family Healthcare - Kirksville S. Jamison St.	
51748	Preferred Family Healthcare Bridgeway BH Troy	
45004	Preferred Family Healthcare Trenton	
44938	Preferred Family Healthcare Brookfield	
44645	Preferred Family Healthcare Winfield	
44943	Preferred Family Healthcare - Clarity Hannibal Communication Dr.	
134833	Preferred Family Healthcare - St. Charles, Administration	
134597	Preferred Family Healthcare - St. Louis, Delmar	
134607	Preferred Family Healthcare - St. Louis, Florissant	
134603	Preferred Family Healthcare - Jefferson City, Hoover	
134844	Preferred Family Healthcare - St. Louis, Northrup	
134599	Preferred Family Healthcare - St. Louis, Office Center	
134601	Preferred Family Healthcare - St. Charles, Main	
134836	Preferred Family Healthcare - Kansas City, E Blue Pkwy	
134841	Preferred Family Healthcare - Jefferson City, Adams	

134842	Preferred Family Healthcare - Joplin, Wildwood Ranch
134839	Preferred Family Healthcare - St. Charles, Westbury
134630	Preferred Family Healthcare - Columbia, Rangeline
134593	Kirksville, MO Walk-In Crisis Center
134609	Preferred Family Healthcare - Troy, Cherry
134616	Preferred Family Healthcare - Bowling Green, Adams
134600	Preferred Family Healthcare - Edina, First St.
134604	Preferred Family Healthcare - Kirksville, S Baltimore
134605	Preferred Family Healthcare - Macon, Prospect
134606	Preferred Family Healthcare - Moberly, County Rd
134847	Preferred Family Healthcare - Chillicothe, Park Lane
134848	Preferred Family Healthcare - Milan
134845	Preferred Family Healthcare - Kirksville, S Halliburton
117361	Preferred Family Healthcare - Clarity Columbia Berrywood Dr.

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
Data		100	1000	100	1000	Mbps	Yes
Installation							
Equipment							
Network Management Services							

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, This is preferred
Will the HCP consider bids for month-to-month contracts?:	Yes, This is preferred
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?:	7 Day(s)

Bid Evaluation

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

Criteria	Description	Evaluation Weight (%)	Minimum Requirement
Price		40	Price of Service
Personnel qualifications, including technical excellence		30	3 References for Same or Similar Services
Other	Service Capacity & Scalability	20	To Extent Possible
Technical support		10	Single Point of Contact

Does the HCP have any disqualifying factors that will remove bids or bidders from consideration?: Yes

Disqualifying factors: No 498ID

Main Contact

Name	Organization	Title	Phone	Email	Address
Chrystal Matthews	Burrell, Inc. Consortium	CEO	(337) 302-3764	chrystal@elitepro gramspecialists.com	711 E. Ascension St. Suite 56 9 , Gonzales, LA 70737

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

Burrell Inc-Brightli Preferred Family Healthcare_RFP-2_FY26.docx

Summary of the HCP's requested services. :

The Consortium Member is soliciting proposals for the provision of primary and redundant public Internet access services, as well as long-term leased or owned private network (Intranet) services. The scope includes the design, engineering, implementation, and ongoing management and monitoring of a secure broadband network infrastructure. Proposed solutions must include all components necessary to ensure full functionality of the services, along with a detailed breakdown of all associated costs. The member is not seeking a single provider solution. Bidders may propose a solution related to the particular services and/or equipment for which they have the capacity to provide. Requested Contract Term: Month to month and up to 3 years

Additional Documentation

Document Type	Description for Other	Document	Uploaded On
Network Plan		Burrell_NetworkPlan_FY26_Brightli, Inc..docx	3/5/2026 12:14 PM EST

Declaration of Assistance

Name	Organization Type	Title	Employer	Nature of Relationship	Email	Telephone
Chrystal Matthews	Consultant	CEO	Elite Program Specialists	Consultant	chrystal@eliteprogramspecialists.com	(337) 302-3764
Caitlyn Bass	Consultant	Executive Assistant	Elite Program Specialists, LLC	Paid Service	caitlyn@epsfirm.com	(225) 494-3635

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:	Chrystal Matthews
Email:	chrystal@eliteprogramspecialists.com
Phone:	(337) 302-3764
Employer:	Elite Program Specialists
Title:	CEO
Employer's FCC RN:	0027714672
Certifier's Full Name:	Chrystal Matthews
Digital Signature:	Chrystal Matthews
Date and time:	3/5/2026 12:14 PM EST