General Information

HCP or Consortium: 17224 - Indiana Telehealth Network
Application Number: RHC46100023030
FCC Registration Number: 0018361972
Address: 2901 OHIO BLVD STE 240 , TERRE HAUTE, IN 47803-2245
Application Nickname: HCF-16 RFP
Funding Year: 2027
Funding Priority: Priority 7

Consortium Participating Sites

HCP Number	Name	LOA Expiry
133321	4C Health - Monticello	12/31/2028
35562	Aspire - 2009 Anderson	12/31/2028
35558	Aspire - Carmel	12/31/2028
35561	Aspire - Elwood	12/31/2028
26248	Aspire - May House	12/31/2030
35560	Aspire - Noblesville	12/31/2028
35556	Aspire - Willowbrook	12/31/2028
69364	Elizabeth Clinic	12/31/2028
34313	Expedient Data Center	12/31/2029
35111	First Capital Medical Group	12/31/2028
16073	Four County Counseling Center - Fulton County Satellite	12/31/2028
45118	Four County Counseling Center - Kokomo	12/31/2028
16074	Four County Counseling Center - Miami County Satellite	12/31/2028
49409	Four County Counseling Center - Tipton	12/31/2028
16075	4C Health - Winamac Clinic	12/31/2028
18420	Greene County General Hospital	12/31/2028
92557	Greene County General Hospital Team Ortho Clinic	12/31/2028
37371	My Bloomfield Clinic	12/31/2028
37379	My Linton Clinic	12/31/2028
44590	My WestGate Clinic	12/31/2028
37292	My Worthington Clinic	12/31/2028
17809	Harrison County Hospital	12/31/2028
52626	Hartung Group Home	12/31/2028
38183	Middletown Family Healthcare Partners	12/31/2028
26255	Hope Family Health Center	12/31/2028
52622	Hudson House Group Home	12/31/2028
135475	IHC Bedford	12/31/2029
34202	IHC Marion	12/31/2028
64439	IHC - Owen County	12/31/2028
34312	Indiana Health Centers, Inc.	12/31/2029
60927	Marram Health Center - Hebron	12/31/2027
49134	Meridian Health Services - 8th Street	12/31/2028
49135	Meridian Health Services - Connersville	12/31/2028

49136	Meridian Health Services - Indianapolis	12/31/2028
49141	Meridian Health Services - New Castle	12/31/2028
49059	Meridian Health Services - Portland	12/31/2028
49139	Meridian Health Services - Richmond	12/31/2028
49142	Meridian Health Services - Rushville	12/31/2028
49138	Meridian Health Services - Tillotson	12/31/2028
49140	Meridian Health Services - White River	12/31/2028
35112	New Salisbury Family Medicine	12/31/2028
112793	Open Door Health Services - Anderson Family Practices	12/31/2027
26259	Open Door Health Service, Inc-Madison St Clinic	12/31/2027
93640	Open Door Health Services Urgent Care	12/31/2027
112792	Open Door Health Services - White River	12/31/2027
26264	Porter - Starke Services, Inc. - 601 Wall	12/31/2027
26267	Porter Starke Services, Inc. - Knox	12/31/2027
120879	Porter-Starke Services - La Porte	12/31/2027
26266	Porter Starke Services - Portage	12/31/2027
44903	Regional Mental Health Center - Hammond	12/31/2028
44902	Regional Mental Health Center - Highland	12/31/2028
26268	Regional Mental Health Center - Stark Center	12/31/2028
116723	Team Ortho Foot & Ankle Center	12/31/2028
93829	Windrose Health Network - Business Center	12/31/2028
49504	Windrose Health Network - Epler Parke	12/31/2028
45489	Windrose Health Network - Franklin	12/31/2028
69781	Cambridge City Family Health Partners	12/31/2028
37277	Draper Health Services	12/31/2028
25762	HealthLink	12/31/2028
11333	Henry Memorial Hospital	12/31/2028
25770	Henry County Memorial Hospital - New Castle Family Physicians	12/31/2028
52309	Henry Community Health - Northfield Park	12/31/2028
120799	4C Health - Peru Admin	12/31/2027
37298	Family Medicine of Cloverdale	12/31/2028
37296	North Putnam Family Healthcare	12/31/2028
16765	Putnam County Hospital	12/31/2028
132260	Putnam - YMCA Health Center	12/31/2028
35114	Harrison Crawford Healthcare	12/31/2030

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
Construction Data Equipment Installation		75	75	10000	10000	Mbps	Yes

Dates and Timing

What is the HCP's desired service contract length?:	Equal 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?:	No
What is the HCP's desired time to publicly post this request for services?:	35 Day(s)
What is the HCP's expected bid evaluation period after the public posting?:	45 Day(s)

Bid Evaluation

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

Criteria	Description	Evaluation Weight (%)	Minimum Requirement
Price		35	Scoring Rubric Attached
Other	Submission of Proposal Guidelines	25	Scoring Rubric Attached
Other	Business Proposal	25	Scoring Rubric Attached
Other	Technical Proposal	15	Scoring Rubric Attached

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

Disqualifying factors: 1) Failure to submit bids by stated deadline. 2) Failure to certify that they are compliant with the FCC's Rule 47 CFR Section 54.9 regarding supply chain security. 3) Failure to meet the minimum required services/equipment for the healthcare facilities on which they are bidding. 4) Communication with HCPs during the bid process outside of the prescribed email method.

Main Contact

Name	Organization	Title	Phone	Email	Address
Allison Orwig	Indiana Telehealth Network	Senior Director	(812) 478-3919	aorwig@indianarha.org	2901 Ohio Blvd Ste 240, Terre Haute, IN 47803

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?: No

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

ITN HCF-16 RFP.pdf

3135794-ITN HCF-16 RFP.pdf

Summary of the HCP's requested services. :

The Indiana Telehealth Network (ITN) is accepting bids for leased facilities and/or construction and/or operation of a High Speed Fiber Optic Based Internet Services for the healthcare participants within the ITN network.

Additional Documentation

Document Type	Description for Other	Document	Uploaded On
Network Plan		ITN HCF-16 Network Plan.pdf	9/21/2026 11:57 AM EDT
Other	MSA	HCF-16 ITN Master Services Agreement.docx	9/21/2026 11:57 AM EDT
Other	Attachment B	HCF-16 RFP Attachment B.xlsx	9/21/2026 11:57 AM EDT
Other	Scoring Rubric	HCF-16 Scoring Rubric.xlsx	9/21/2026 11:57 AM EDT
Other	Attachment A	HCF-16 Attachment A.xlsx	10/7/2026 8:34 AM EDT

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:	Allison Orwig
Email:	aorwig@indianarha.org
Phone:	(812) 478-3919
Employer:	Indiana Rural Health Association
Title:	Senior Director
Employer's FCC RN:	0018361972
Certifier's Full Name:	Allison Orwig
Digital Signature:	Allison Orwig
Date and time:	10/7/2026 8:35 AM EDT