Columbia Memorial Health
71 Prospect Ave.,
Hudson, NY 12534

Request for Proposal
FCC Healthcare Connect Fund

Columbia Memorial Health, on behalf of healthcare provider members of the Consortium (defined below), is seeking bids for telecom services under the FCC's Healthcare Connect Fund. The Consortium application with the FCC Healthcare Connect Fund will enable a set of standard telehealth connection services throughout the Consortium network that will allow any facility within our network to share one or more telehealth services with any other healthcare location not only within the Consortium network but also with other healthcare providers in the state, regionally, and nationally.

This RFP addresses the network infrastructure, perimeter hardware, and network maintenance services for the Consortium.

The Consortium is a non-profit healthcare consortium of healthcare providers in the state of New York. They depend heavily on information technology to provide services at a very high level. Information technology also enables all healthcare staff to provide these services in an efficient manner and the additional connectivity provided will continue to build member capacity to exchange mental health information electronically and engage in telemedicine services.

Requested services. This Request for Proposal provides support for existing private site connections at member sites. The services requested will provide connectivity to each site as specified in Table 1.1. Vendors are free to propose whatever layout/infrastructure they feel best meets the needs of the Consortium. The configuration must support quality of service (QoS), specifically DSCP prioritization end-to-end for telehealth and secure reliable connections for electronic health information exchange. Eventually the connectivity will be able to provide additional services to Consortium members for a converged IP network that will consolidate many technologies into one platform.

The successful bidder(s) will support routes for existing services at the original sites and referral hospitals, data centers, and clinics to provide a seamless transition to their bandwidth solution(s). The hardware for the connections will be purchased and configured through the successful bidders' ability to support these routes. Telecom service options for remaining end-user sites should reflect overall pricing, quality standards, and network-wide service requirements as described below and in Table 1.1. Bids must be responsive to service needs established by end-user health centers in Table 1.1. A high bandwidth fiber connection or equivalent to the Consortium Network Operations Center (hereafter "NOC") will allow the Consortium sites to interoperate with other healthcare providers in the network and beyond.

All sites currently connect via point-to-point circuits or IntraState Ethernet WAN. Internet connectivity is provided through a direct connection with firewall, e-mail, and web security services at the providers'

egress to the Internet. Vendors are free to submit any solution they feel works best for the needs of the Consortium.
All site connections are listed in Table 1.1 and the Form 461 participating entity listing, which incorporates this RFP. The existing Consortium sites will connect via vendor-owned fiber circuits, or equivalent, with router and high capacity port capacity to accommodate the bandwidth needed for each site as defined. Where fiber infrastructure or equivalent is not available, the vendor will build out vendor-owned infrastructure where possible or provide next best technology. The vendor(s) must deliver connectivity over a private data network in a secure and prioritized fashion on an Internet Protocol (IP) platform. Vendor(s) may be required to purchase local access from the local exchange carrier to complete last-mile connectivity to nearest Point of Presence. The vendor will be responsible for all network hardware purchasing and maintenance in accordance with the site needs in Table 1.1. The vendor shall provide network services in a manner that meets HIPAA requirements concerning telecommunications.

QUALITY OF SERVICE (QoS) - All local access circuits and vendor's core infrastructure network should be designed to deliver QoS, specifically DSCP from end to end. The vendor will be required to prioritize traffic with QoS to ensure that packet delivery and latency remains at or above industry standards for the routing protocols as well as for switching.

SERVICE LEVEL AGREEMENT
As a requirement the vendor must be able to guarantee that the requested services are included in the Service Level Agreement (SLA) for **each** connection that will be made. If the parameters cannot be met after the point of implementation, the Consortium reserves the right to terminate any and all contracts, based on the fact that services are not being met as specified.

1. Specified bandwidth for each site and hardware necessary in Table 1.1
2. Administrative network security policy and operational requirements for data transport that meet HIPAA security and privacy requirements of State and Federal regulations and statutes.
3. Support for standards-based encryption protocols.
4. Requirements must be defined for common technical standards and operational procedures to maintain system reliability. Relevant parameters include:

    a. An average end-to-end centralized Consortium hub site delay of less than (<) 20 milliseconds.
    b. Less than (<) 0.1% packet loss.
    c. Less than (<) 20-millisecond jitter (delay variance).
    d. Greater than or equal to (≥) 99.99% network availability.

Proposed system testing and acceptance provisions will be required on all bid proposals. Columbia Memorial Health reserves the right to work in concert with the vendors to develop appropriate test and acceptance criteria for a specific installation or configuration, to be defined and accepted by both parties prior to contract initiation.

TECHNICAL SUPPORT
Bidders are to provide details of all maintenance activities and how assistance will be provided to Consortium users. The data shall include, but not be limited to:

- How 24/7 maintenance support will be provided and the response times for major and minor problems.

- The definition of what is a “minor” or a “major” problem.
- How the service will be monitored on a continuous basis for any problems and what proactive steps will be taken to ensure the quality of the service.
- How reports will be made available to [the Consortium] management online via the public Internet or through the newly created private intranet.
- Description of what software will be used to generate reports containing the following minimum information:
    - Circuit Bandwidth Utilization (private intranet and public Internet)
    - Peak Bandwidth Analysis (private intranet and public Internet)
    - Circuit Up-time (private intranet and public Internet)
    - Circuit Down-time (private intranet and public Internet)

TERMS

Services requested in this RFP are for a 36-month beginning 7/1/27. Vendors should provide contracts to be signed as early as the ACSD.

UPGRADE AND SITE ADDITIONS

Columbia Memorial Health is requesting that proposals provide for upgrades and site additions during the life of the contract. All vendors are hereby made aware that the Consortium may add new HCPs to its network during the life of the contract, existing sites may move and that the contract(s) entered into as a result of this RFP will allow for said site additions/substitutions. All vendors are also hereby made aware that the Consortium members may need to upgrade bandwidth during the life of the contract and that the contract(s) entered into as a result of this RFP will allow for any bandwidth upgrades (or downgrades) that are required for the provision of healthcare for the existing HCPs and any new HCP that may join the Consortium during the life of the contract.

BANDWIDTH

Bidders are to describe the scalability of the proposed broadband service:

1. How the service can be extended to new locations added by the Consortium at a later date
2. How the service can be extended to any changes in physical location by any Consortium member at later date.
3. How level of service can be upgraded to provide a higher level of service to HCPs participating in the
4. Consortium. This should be accomplished without purchasing new equipment (i.e., no “fork-lift” upgrades). [The Consortium’s] preference is the ability to increase bandwidth via a change to the software configuration without having to install any new hardware modules. This is not a requirement but the vendor that proposes this type of configuration will receive the highest possible points for this criteria.

IMPLEMENTATION SCHEDULE DESCRIPTION

Any network build-out that is required by the responding bidder must be designed to work with Columbia Memorial Health to prevent connectivity down time with existing sites. Please include a plan with timeline, and address ability to meet project timeline goals. Identify circumstances that may create project delays.

PRICING AND COST INFORMATION

Vendors submitting proposals should identify all costs associated with the solution they are quoting. All hardware MUST BE new and not refurbished equipment.

Columbia Memorial Health– TABLE 1.1

HCP #	Address	Originating / Termination Address	Service
28280	71 Prospect Ave, Hudson, NY	Originating	5 Gbps Ethernet to HCP 56678 – Primary and Redundant 1 Gbps Ethernet Back up to HCP 56678
31269	67 Prospect Ave, Hudson, NY	Originating	100 – 500 Mbps Ethernet to HCP 56678
31272	1301 River Road, Valatie, NY	Originating	100 – 500 Mbps Ethernet to HCP 56678
56678	43 New Scotland Ave, Albany, NY	Originating	1 Gbps Internet Access 5 Gbps Internet – Primary and Redundant 10 Gbps Internet
67395	11835 Route 9W, West Coxsackie, NY	Originating	100 – 500 Mbps Ethernet to HCP 56678
111618	2 Emerson Lane, Seacacus, NJ	Originating	9 Gbps Ethernet to HCP 55566
	ALL LOCATIONS		Cisco or Equivalent Equipment Maintenance
	ALL LOCATIONS		CISCO or Equivalent Switches and Routers

Quotes should include the following:

1. Implementation fees, including purchase of required new hardware for end-to-end connectivity and initial configuration of network hardware.
2. Ongoing transmission fees for end-to-end connectivity.
3. Any other costs associated with the solution that may add cost to participants.
4. Bid proposals should identify all included costs in sufficient detail as to confirm the proposed solution, including installation, configuration, maintenance and any recurring costs, and must comply with the Healthcare Connect Fund's eligibility requirements.
5. Purchase price for each unit. Bundled pricing may be cited, but individual components must be identified and detailed pricing provided.
6. Shipping cost for each unit or shipment shall be included as well.

All subcontracting shall be pre-approved by the Consortium. The Prime Contractor/Bidder shall be responsible for all subcontractors' work and payment. The Consortium will not pay any subcontractor or third parties directly. Proof of release of liens of subcontractors will need to be submitted prior to invoice approval.

COMPLIANCE WITH FCC HEALTHCARE CONNECT FUND

In order to obtain funding for the services and equipment being requested through this RFP, the Consortium is subject to the rules and regulations of the FCC Healthcare Connect Fund program.

Vendors must meet all program requirements. Once Columbia Memorial Health has submitted its Form 461 and this RFP, it will be posted to the USAC website. More information on bidding and posting rules can be found at http://www.usac.org/rhc/healthcare-connect/getting-started/default.aspx. All bid

proposals must understand and acknowledge USAC invoicing requirements and formats. Bidder will conform to invoicing procedures and processes as promulgated by USAC. Any successful bidders are required to have a current Service Provider Identification Number (SPIN) as required by the Healthcare Connect Fund Order. A SPIN number may be obtained by contacting the Universal Services Administrative Company (www.usac.org). A FCC Registration number must be obtained from the FCC

https://fjallfoss.fcc.gov/coresWeb/publicHome.do). All costs may not qualify for HCCF funding. It is critical that accurate, detailed cost information should be provided for all portions of the bid proposal.

PRIOR EXPERIENCE INCLUDING PAST PERFORMANCE

Bidders shall provide documentation to support their experience in providing this type of service by providing:

- A description of the qualifications, experience, capability and/or capacity of the vendor to successfully provide the broadband solution recommended by the vendor in a complete and timely manner.
- List of client references and/or citations from prior projects where equal services have been provided for projects of similar size and scope.

PERSONNEL QUALIFICATIONS INCLUDING TECHNICAL EXCELLENCE

Bidders shall provide documentation to support qualification of personnel and technical excellence of staff who will be assigned to the project. Personnel qualifications, professional designations and certifications, experience with overall installation, integration and maintenance capabilities based upon performance record, and availability of sufficient high quality vendor personnel with the required skills and experience for the specific approach.

BID SUBMISSION REQUIREMENTS

A deadline for bid submissions will be 28 days after the posting of the Form 461 on the USAC web site. Program rules require the Form 461 and RFP to be posted for a minimum of 28 days, meaning that at a minimum a contract could not be signed until the 29th day after posting of the RFP. You must submit three (3) copies of your proposal in hard copy format to:

Proper Connections
521 Hall Hill Rd
Ancram, NY 12502
info@proper-connections.com

PROPOSAL EVALUATION

Any and all costs incurred by vendors in preparing and submitting a proposal are the vendors' Responsibility and **shall not** be charged to Columbia Memorial Health or reflected as an expense of the resulting contracts.

Proposed vendor responses will be based on the following:

Criteria Points Description

Criteria	Points	Description
Cost of solution	35	Vendor's cost of products and services
Prior experience including past performance	30	Prior experience of the vendor with client and client references and/or citations from prior projects where equal services have been provided for projects of similar size and scope
Leverage Existing Resource	25	Utilizing the existing resources in the environment and local area.
Bandwidth	10	The quality of the proposed solution to meet the bandwidth needs of the Consortium including scalability over the life of the contract.
TOTAL POINTS	**100**	

The selection will be based on all factors indicated in this section, and may not go to the lowest bidder if cost is outweighed by a combination of other features in the winning vendor's bid. The point scale listed above will determine the most cost-effective solution for Columbia Memorial Health. In compliance with the provisions of the Healthcare Connect Fund, Columbia Memorial Health will consider all bids in a fair and open competitive bidding process. Columbia Memorial Health is not responsible for any costs incurred by a vendor related to the preparation or delivery of the bid proposal, or any other activities carried out by the vendor as it relates to this RFP. Changes in applicable laws and rules may affect the award process or any resulting contracts. Vendors are responsible for ascertaining pertinent legal requirements and restrictions. Vendors are encouraged to visit the official FCC website pertaining to the Healthcare Connect Fund, at: http://www.fcc.gov/encyclopedia/ruralhealth-care#HCF. The selection decisions made by Columbia Memorial Health and reported to USAC under this RFP are final, and appeals or submissions will not be considered. Columbia Memorial Health reserves the right to issue any resulting order with the vendor(s) whose proposal most nearly conforms to the specifications and will best serve the needs of Columbia Memorial Health.