Rural Healthcare Program

Healthcare Connect Fund

Fund Year 2027

Request for Proposal

Requested specifically by

Alabama Hospital Association Broadband Consortium

And Baptist Health

Table of Contents

BACKGROUND AND PROCESS 3

DUE DATE AND COMMUNICATIONS: 3

VENDOR RESPONSIBILITIES 4

PARTICIPATING HCPS: 5

SERVICE REQUESTS AND REQUIREMENTS: 5

PRICING, COST AND CONTACT INFORMATION: 6

Standard and Evergreen Contracts 6
Pricing, Cost-Effectiveness, Dependencies, and Service Levels 7

EVALUATION PROCESS 8

Evaluation and Award 8

IMPLEMENTATION TIMELINE 8

ADDENDUMS 9

Background and Process

The **Alabama Hospital Association Broadband Consortium** ("CONSORTIUM"), organized by the **Alabama Hospital Association**, is a USAC-certified consortium under the FCC Healthcare Connect Fund (HCF) program comprised of hospital and health clinics. As an eligible consortium, it may conduct competitive bidding and submit funding requests on behalf of participating healthcare providers (HCPs).

The CONSORTIUM and its agents are seeking proposals for broadband and Internet services, including network buildouts where applicable, as well as network equipment, perimeter solutions, network management hardware and software, and related professional services.

Participating HCPs have authorized the CONSORTIUM through Letters of Agency (LOAs) to conduct competitive bidding on their behalf. Following the bid evaluation, each HCP will independently determine whether to proceed with contracting. HCPs' selecting services may authorize the CONSORTIUM and its agents to administer HCF-related forms, invoicing, and payment processes associated with resulting contracts.

Consortium members operate independently across a broad geographic region and maintain diverse network environments utilizing various technologies, including, but not limited to, Ethernet, MPLS, point-to-point, fiber, wireless, and other connectivity solutions. Differing network architectures, redundancy levels, back-up, secondary, and rollover capabilities will be considered. Service requirements vary by location based on operational needs, available infrastructure, and budget considerations.

To comply with FCC competitive bidding requirements (47 C.F.R. §§ 54.603 and 54.642), this RFP is technology neutral. Any references to specific technologies, manufacturers, or service features are intended solely as examples or guidance. Vendors may propose any solution that meets or exceeds the stated requirements and should identify equivalent alternatives when the requested technology or equipment is not available. Vendors should only bid on services they can deliver.

Due Date and Communications:

All communications regarding this RFP shall be directed to Federal Funding Group, LLC at **info@fedfunding.net**.

Questions regarding this RFP must be submitted via email no later than one week prior to the proposal due date. The CONSORTIUM may coordinate responses with the applicable healthcare provider (HCP) as needed. Responses to questions and any related addenda will be posted at **www.fedfunding.net**.

Proposals must be received no later than **5:00 PM MST, 28 days after the RFP is posted on the FCC/USAC website**. In accordance with FCC Healthcare Connect Fund rules, contracts may not be executed prior to the **Allowable Contract Selection Date (ACSD)**, which is the **29th** day following the posting date.

Unless otherwise specified, requested services are expected to align with the applicable funding year, beginning **July 1** and ending **June 30** of the approved term. Refer to Section 6 for additional pricing, cost, and contract requirements.

Vendor Responsibilities

Vendors participating in this RFP should be aware of the unique requirements of the Healthcare Connect Fund (HCF) program. This RFP allows vendors to submit consortium-wide pricing; however, proposed pricing is not contingent upon all CONSORTIUM members ordering all listed services or equipment. Individual HCPs may choose not to purchase some or all proposed services based on business needs, funding availability, or cost.

Any contract resulting from this RFP is subject to the applicable HCP receiving HCF funding. If funding is unavailable or denied through no fault of the applicant, the CONSORTIUM and affected HCP reserve the right to renegotiate terms or terminate awarded services.

Vendors must have an active and valid SPIN/FCC Form 498 at the time of proposal submission. Vendors are encouraged to bid only on the services, locations, or project components they can effectively deploy and support. Proposals will be evaluated by the CONSORTIUM, its agents, and affected HCPs based on the most cost-effective[1] solution, using the evaluation criteria in Section 7.

By submitting a proposal, vendors certify that all proposed products and services comply with 47 C.F.R. §§ 54.9 and 54.10, including restrictions on equipment or services provided, manufactured, maintained, modified, or supported by Huawei, ZTE, or any other covered company deemed a national security risk.

Some requested services may already be in place or under existing contracts. Both incumbent and new vendors may submit proposals, and the most cost-effective solution will be selected. Cost effective is not exclusive to price alone. If the existing vendors' solutions are determined to be the most cost-effective, contract work may be required to meet the new circumstances and HCF rules. If a new vendor is selected, the affected HCP will determine whether to terminate any existing contract, pay applicable penalties, or decline HCF participation for that service.

Vendors should also note that HCF payment procedures may differ from standard billing practices. Vendors will bill the HCP directly in accordance with the agreed-upon billing cycle, and the HCP will either pay the invoice in full or pay the required 35% applicant's share before reimbursement processing.

The HCP will pay the vendor either in full or the minimum required 35% of the billed amount. The CONSORTIUM and its agents will review billing and proof of payment to submit Form 463 for USAC reimbursement. The vendor must verify and certify the accuracy of Form 463. If the HCP has paid the full

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Cost effective is defined in the HCF Order (54.642(c)) as "the method that costs the least after consideration of the features, quality of transmiss ion, reliability, and other factors that the health care provider deems relevant to . . . choosing a method of providing the required health care services."

invoice prior to USAC disbursement, the vendor shall credit the CONSORTIUM within 90 days of reimbursement. Each HCP will also maintain a separate invoicing arrangement with the CONSORTIUM to cover administrative, invoicing, and compliance costs.

Participating HCPs:

A list of Participating HCPs, including names, numbers, and locations, is provided in the addendum. In accordance with FCC 23-110 (Third Report and Order), HCPs may receive conditional eligibility to initiate competitive bidding and request funding prior to meeting all eligibility requirements; however, no funding will be committed until full eligibility is confirmed.

Service Requests and Requirements:

A list of requested services specific to the participating HCPs is provided. Please refer to the page regarding the potential services of interest on this RFP. These services can include, but are not limited to, data/telecommunications, network equipment, network management, software exclusive for network management or professional services.

Any requests for Dark Fiber, leased Dark Fiber, or Dark Fiber Indefeasible Rights of Use (IRUs) vendors should provide costs for, but are not limited to:

- modulating equipment necessary to light dark fiber (whether the HCP will own or lease the requested infrastructure)
- upfront or recurring charges (sometimes called special construction),
- maintenance costs associated with leases of either dark or lit fiber

For more information on the eligibility of these services, it's recommended to review FCC 12-150A1, paragraphs 127-130.

All HCP participants are encouraged to evaluate network redundancy, backup connectivity, rollover and failover capabilities, and consider emerging technologies to enhance reliability, resiliency, and overall network performance, such as wireless technologies. This ensures that lower-cost or innovative alternatives are not overlooked. The goal is a cost-effective, highly reliable network that maintains operational continuity, minimizes downtime, and supports uninterrupted access to critical services even during equipment failures, carrier outages, or other disruptions.

Unless otherwise specified, bids for recurring services must follow the terms in Section 6, Pricing, Cost, and Contract Information. Installation charges up to $5,000 and upfront deployment costs up to $50,000 per consortium member are eligible for HCF funding; amounts above $50,000 must be pro-rated. Vendors should clearly state upfront charges and provide pricing for comparable services or equipment that include only eligible components when ineligible elements are involved.

Vendors shall describe their account management approach, including ongoing support for the requested services. Vendors with existing relationships with participating HCPs should identify any

changes to account management, support structure, or service delivery that would result from an award under this RFP.

Pricing, Cost and Contact information:

Vendors must identify all costs associated with each proposed solution, including any ineligible costs, to ensure participants can accurately evaluate the total cost of ownership. Vendors are encouraged to use the attached Vendor Pricing Template to clearly present all pricing, fees, and cost components included in their proposal.

Vendor submissions should include the following:

- HCP Name
- HCP Number
- Form 461 Number
- SPIN (Service Provider Identification Number)
- Solution being quoted
    - For telecommunications, bandwidth upgrade options
- Service provider's terms and conditions

Telecommunication solutions should include, but are not limited to:

- monthly service fees
- managed router/modem lease fees (if required for service to function)
- one-time construction, installation, and/or connection charges
- estimated taxes, fees, and/or surcharges
- any other costs associated with the solution and/or description of requirements that are prerequisites for the solution that may add additional cost to CONSORTIUM and its participants

Hardware and/or software solutions should include, but are not limited to:

- purchase price
- installation costs
- shipping charges
- ongoing support costs and support hour limits that may add costs
- tax/surcharge rate that will apply
- any other costs associated with the solution and/or description of requirements that are prerequisites for the solution that may add additional cost to CONSORTIUM and its participants

The requested contract period is 60 months, on a month-to-month basis, such that the HCP is not contractually bound beyond the 3-year maximum length of an HCF funding commitment.

Vendors should include information regarding service levels and any service level guarantee associated with the solution, including uptime and response time guarantees. Vendors are encouraged to include strong guarantees, as this will be one of the proposal evaluation criteria.

Standard and Evergreen Contracts

All contracts resulting from this RFP must acknowledge that no HCP is contractually bound beyond the three-year maximum term of an HCF funding commitment. The CONSORTIUM seeks to maximize the

use of “evergreen” contracts. To qualify as evergreen under HCF guidance, each contract must: be signed by the individual HCP or consortium lead entity; specify the service type, bandwidth, quantity, contract term, and cost of services; and include the physical addresses or other identifying information for the HCPs purchasing under the contract.

Contracts awarded through this RFP will be between the vendor and the participating HCPs. The CONSORTIUM will not be financially responsible for services contracted between an HCP and a vendor. The CONSORTIUM has separately contracted with the HCPs to serve as their contracting and payment-validation agent, along with other consortium-lead functions.

All telecommunications contracts must permit service upgrades during the contract term, including any optional renewal periods. Bandwidth increases or similar upgrades will be treated as modifications to the existing agreement, not new agreements, and will not extend the contract term.

Contracts must also allow an HCP to terminate circuits without penalty if the HCP closes. If an HCP opens a new location, the final agreement must permit the new site to be added at the existing monthly recurring charge for the remainder of the contract term. The HCP will be responsible for any one-time charges associated with adding the new site. Any added sites will be coterminous with the main agreement.

The CONSORTIUM allows for Site and Service Substitutions per the rules found in the HCF order (47 C.F.R. § 54.646: 746 Appendix D, 47 C.F.R. § 54.646) this provision allows for the Consortium to add sites and upgrade or change service adjustments throughout the length of the contract without having to re-bid.

Pricing, Cost-Effectiveness, Dependencies, and Service Levels

No price increases will be permitted during the quoted period, including special construction, non-recurring charges, or monthly recurring charges. Service providers proposing equipment that may be affected by future U.S. tariffs on imports should identify those products in their proposals and provide an acceptable methodology for limiting price adjustments over the contract term. Subject to contract restrictions, services may be reevaluated for cost-effectiveness at any time during the agreement, including any renewal periods.

Some requested services may already be in place under existing contracts. Both incumbent and new vendors may respond. The most cost-effective proposal will be selected. If an incumbent vendor is selected, contract modifications may be required to reflect current circumstances and HCF requirements. If a new vendor is selected, the HCP must determine whether to terminate the existing contract and pay any applicable penalties or decline participation in the HCF program for those services.

Vendors must identify any proposed solution that requires or depends on additional hardware, systems, or third-party vendors, so all costs associated with the requested functionality are fully accounted for. If the vendor cannot provide pricing for a dependent vendor or system, the response must clearly state that limitation.

Proposals must include all applicable service levels and service-level guarantees, including uptime and response-time commitments. Strong service-level guarantees are encouraged and will be considered in proposal evaluation.

Evaluation Process

Vendor RFP responses will be evaluated based on the criteria specified in the RFP Evaluations criteria shown below.

RFP Evaluation

CRITERIA	WEIGHT %	MINIMUM REQUIREMENT
Cost	30	N/A
Prior experience, including past performance	25	At least 3 comparable references
Reliability of service	25	99.99% availability
Leverage of existing resources	20	Compatible with existing services and equipment
	100%	

Note: Failure to comply with the requirements within the RFP may result in disqualification.

Evaluation and Award

The expected evaluation period is up to 45 days; however, this period is not part of the Allowable Contract Selection Date (ACSD). An applicant may sign an agreement at any time on or after the ACSD, provided the fair and open bidding process has been completed, and all responses have been evaluated.

The CONSORTIUM, its agents, and participating HCPs reserve the right to award contracts to the vendor(s) whose proposals, in their judgment, most closely meet the specifications, HCP needs, and evaluation criteria, and are determined to be the most cost-effective.

The CONSORTIUM, its agents, and participating HCPs reserve the right to waive technicalities and reject any or all proposals that, in their judgment, do not serve the best interests of the CONSORTIUM or HCPs. The CONSORTIUM is not obligated to accept any proposal and may accept proposals in whole or in part, reject any or all proposals, and revisit proposals at an HCP's request at any time during the application window.

Implementation Timeline

Vendors should include an implementation plan and timeline demonstrating their capacity to deploy the proposed solution. Preferred service dates are July 1 of the requested funding year through June 30 of the following year, or through the end of the agreed-upon contract term. If a different timeline is proposed, the vendor must clearly identify the contract start and end dates.

The timeline should allow for testing of implemented circuits or services and identify any circumstances that could cause delays. The vendor's ability to meet mission-critical HCP timing requirements will be considered in proposal evaluation.

Addendums

Service Provider Information

Requested Services

Participating HCP Locations

Service Provider Information

Vendors are required to complete this form to assist in the Universal Service Administrative Company (USAC) application process.

Service providers are required to have an active, and in good standing, Service Provider Identification Number (SPIN, also known as Form 498). If multiple SPINs, vendor must complete a new form for each number.

Legal Name _____

Dba: _____

SPIN / Form 498 Number _____

Address: _____

_____

Primary Contact: _____

Office Phone _____

Cell Phone _____

Email Address: _____

By submitting a response to the posted request for proposal (RFP), vendor understands and will comply to terms and conditions presented in the RFP. Vendor to verify SPIN is up to date with RHC participation [Block 18 on Form 498] and confirms understanding of the USAC disbursement process and participation in the verification process on the USAC portal.

Authorized Person Signature: _____

Name of Authorized Person: _____

Title of Authorized Person: _____

Date of Signature: _____

For more information on USAC's FORM 498 / SPIN, please visit:

https://www.usac.org/service-providers/participating-in-a-usf-program/register-for-a-498-id/

For questions on the USAC program requirements contact:
CustomerSupport@usac.org

Consortium Requested Services

THE PURPOSE IS TO PROVIDE SOLUTIONS THAT PROVIDE ACCESS AND SUPPORT TO CONDUCT ACTIVITIES SUCH AS USE OF EMR, TELEMEDICINE AND TRANSMISSION OF RADIOLOGY IMAGES FOR THE PURPOSE OF HEALTHCARE DELIVERY

Please provide a solution(s) to the request(s) below:

- Solutions should meet or exceed, bandwidth and manufacturer's specifications, if noted.
- Vendors should only quote services they are able to deploy to the locations they can reach.
- Vendor to provide pricing in .xlsx format with service specifics for data services and equipment.
- Vendor to provide a comprehensive response acknowledging compliance with the terms and conditions outlined within the RFP and the FCC's Healthcare Connect Fund program and mechanism.

DATA SERVICES:

- HCPs request pricing for leased data services and/or other services to include, but not limited to, Internet, Ethernet, ISDN PRI, T1, MPLS and Dark Fiber. Provide bandwidth options ranging from 1.54MB to 40G to accommodate growth and scalability. Options for redundancy, fail-over solutions, back-up, secondary and new technology, i.e., wireless solutions are encouraged. Include all costs to deliver an operable solution, such as installation, configuration, and other services.

.xlsx example

HCP#	HCP Site Name, Address	Expense Type	BW UP	BW Unit	BW Down	BW Unit	MRC	NRC	Notes:
12345	*ABC Clinic, 100 Main St, USA*	*Internet*	*10*	*Mbps*	*10*	*Mbps*	*$ 250*	*$ 500*	*$500 Install, SEE ATTACHED SOW*
23654	*XYZ Clinic, 200 South St, USA*	*Ethernet*	*1*	*Gbps*	*1*	*Gbps*	*$ 900*		

NETWORK SERVICES AND EQUIPMENT:

- Equipment to include all costs associated with, but not limited to, routers, switches, and firewalls, including all design, construction, installation and management services required for the operability of the equipment which supports the network. Vendor to provide the most current model they can provide. License, support and warranty should also be included in the response as separate line item. Lease and purchase option are encouraged. Include all costs to deliver an operable solution, such as installation, configuration, and other services.

* Please note, equipment should be compatible with Cisco products.

.xlsx example

HCP#	HCP Site Name	Brand	Expense Type	Equipment Model#	Purchase Cost Per unit	Monthly Lease / MRC	Install / NRC	Notes:
12345	*ABC Clinic, 100 Main St, USA*	*CISCO*	*Firewall*	*FW 123*	*$ 2,500.00*	*$ 105.00*	*$ 1,000.00*	*24 month lease*
23654	*XYZ Clinic, 200 South St, USA*		*Installation / Configuration*				*$ 20,500.00*	*90 day install*

PROPOSALS EVALUATED USING CRITERIA BELOW:

CRITERIA	WEIGHT %	MINIMUM REQUIREMENT
Cost	30	N/A
Prior experience, including past performance	25	At least 3 comparable references
Reliability of service	25	99.99% availability
Leverage of existing resources	20	Compatible with existing services and equipment

- **Failure to comply with the terms within the RFP may result in disqualification**

Participating Locations

Client	HCP	Location	Category	Address	City	State	Postal Code
Baptist Health	71644	Baptist Health - Admin Building	Off-Site Admin Office	301 Brown Springs Rd	Montgomery	Alabama	36116
Baptist Health	71956	Baptist Health Resource Center	Off-Site Admin Office	2001 East South Blvd	Montgomery	Alabama	36116
Baptist Health	71642	Baptist Medical Center East	Non-Profit Hosp	400 Taylor Rd.	Mongomery	Alabama	36116
Baptist Health	71640	Baptist Medical Center South	Non-Profit Hosp	2105 E South Blvd	Montgomery	Alabama	36116
Baptist Health	135311	Baptist Medical Center South DC	Off-Site Data Center	2105 E South Blvd	Montgomery	Alabama	36116
Baptist Health	71641	Crossbridge Behavioral Health	Community Mental Hlth Ctr	4385 Narrow Lane	Montgomery	Alabama	36116
Baptist Health	134017	Montgomery Cancer - DC	Off-Site Data Center	4145 Carmichael Rd	Midway	Alabama	36106
Baptist Health	71643	Prattville Baptist Hospital	Non-Profit Hosp	124 S. Memorial Dr.	Prattville	Alabama	36067
Baptist Health	135684	Surgical Specialists | Wetumpka	Rural Health Clinic	277 Huntress St	Wetumpka	Alabama	36093