

FCC Form 460 Instructions
Rural Health Care Universal Service
Eligibility and Registration Form

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I. PURPOSE OF FORM

Submitting the Federal Communications Commission (FCC) Form 460 is the first step health care providers (HCPs) must take to participate in the universal service support mechanism's Healthcare Connect Fund (Fund).¹ Each consortium and all HCP sites, including those participating in a consortium, must obtain an eligibility determination via the Form 460 to participate in the Fund. If participating in a consortium, an HCP may opt to allow the consortium to file a Form 460 on its behalf to determine its eligibility. In addition, the Form 460 is used to register ineligible HCP sites, off-site data centers, and off-site administrative offices. The Form 460 is also used to notify the Universal Service Administrative Company (USAC) when information for a site or consortium has changed. See *When to File* below for more information about when notification is required.

- An individual applicant must file a Form 460 for itself and a separate Form 460 for any associated off-site administrative office or off-site data center.
- A consortium applicant must file a Form 460 identifying all of the sites on its network. This includes eligible sites, ineligible sites, off-site data centers and off-site administrative offices. A consortium applicant may also file a Form 460 on behalf of any site on its network to determine that site's eligibility, at the option of the HCP. Consortium applicants must keep their Form 460s current to reflect their current membership.

All individual HCPs, consortia, and consortium members must obtain an eligibility determination via Form 460 to receive Fund support. The eligibility determination must occur before the start of competitive bidding, which is initiated through the submission of FCC Form 461.

Applicants must file all forms with USAC, not the FCC. See *Where to File* below for more information.

All applicants are encouraged to review the FCC's Healthcare Connect Fund Order, FCC 12-150, available at http://hraunfoss.fcc.gov/edocs_public/attachmatch/FCC-12-150A1.pdf, and the FCC's rules at 47 C.F.R. § 54.600 *et seq.*, available at <http://www.ecfr.gov>.

II. FILING REQUIREMENTS AND GENERAL INSTRUCTIONS

A. Who is Eligible to Receive Support from the Fund

1. Eligible Types of HCP Sites:

Eligible HCP sites must be public or non-profit, and must qualify under one of the following categories:

¹ An HCP that is only participating in the Rural Health Care Telecommunications Program is not required to file Form 460. See <http://www.usac.org/rhc/telecommunications/default.aspx>.

- Post-secondary educational institutions offering health care instruction, including teaching hospitals and medical schools;
- Community health centers or health centers providing health care to migrants;
- Local health departments or agencies;
- Community mental health centers;
- Not-for-profit hospitals;
- Rural health clinics;
- Dedicated emergency room of rural, for-profit hospitals; or
- Consortia of health care providers consisting of one or more entities described above.

In addition, connections and network equipment associated with off-site data centers and off-site administrative offices are eligible for support, subject to certain restrictions.

2. Limitation on Non-Rural HCP Sites:

- *Rural* public or non-profit HCP sites are eligible to receive support individually or as part of a consortium.
- *Non-rural* public or non-profit HCP sites are eligible to receive support only as part of a consortium, and subject to certain restrictions (see below).

3. Applying as an Individual HCP Site:

Only public or non-profit HCP sites located in rural areas may apply for support on an individual basis. An HCP site can determine if it is in an area that meets the FCC definition of rural by consulting the USAC Rural Health Care website at <http://www.usac.org/rhc/tools/Rural/search/search.asp>. HCPs located in rural areas under the FCC's pre-July 1, 2005 definition, and that have been receiving support from the universal service rural health care support mechanism since that time, will be "grandfathered" and will continue to be treated as if they were located in a rural area for the purposes of determining eligibility. If a grandfathered HCP site moves to a new address, USAC will determine whether the new address would also have been considered rural under the pre-July 1, 2005 definition. If so, the HCP will continue to retain its rural classification. If not, the HCP becomes non-rural and is not eligible for support on an individual basis.

4. Applying as a Consortium:

Both rural and non-rural eligible HCP sites may apply for support as part of a consortium. A consortium is a group of two or more health care provider sites that request support through a single application. In addition, ineligible sites may participate as part of a consortium, although they are not eligible to receive support from the Fund and must pay full cost (fair share) for all services, network equipment, and/or facilities received through the consortium. Each ineligible site participating in a consortium must be registered using Form 460.

Non-rural public or non-profit HCP sites may receive support only if they are part of a consortium that includes a majority (more than 50 percent) of eligible HCP sites that are rural. A consortium must achieve compliance with this requirement within three years of the filing date of its first request for funding (FCC Form 462). Non-rural hospitals with 400 or

more licensed patient beds also are limited in the amount of support per year. See 47 C.F.R. § 54.630(c) for more information about the limitation.

B. Registration of Ineligible HCP Sites

Each ineligible HCP site participating in a consortium must register with USAC, using Form 460. The Consortium Leader typically will file the Form 460 on behalf of the ineligible HCP site. Although the Consortium Leader is not required to submit a Letter of Agency for an ineligible HCP site, the Consortium Leader must still certify that it has the authority to submit this form on behalf of the ineligible site.

C. Registration of Off-Site Administrative Offices and Off-Site Data Centers

An applicant must register each off-site administrative office and off-site data center for which it requests support. Off-site administrative office and off-site data center themselves are not considered eligible health care providers. However, connections and network equipment associated with off-site administrative offices and off-site data centers used by eligible health care providers are eligible for support. See 47 C.F.R. § 54.637 for the definitions of off-site data center and off-site administrative office and for the restrictions associated with funding for connections and network equipment associated with such sites.

Both individual and consortium applicants must provide a list of all HCP sites (eligible and ineligible) that will use the supported connections and network equipment associated with each off-site data center and off-site administrative office. *Submit FCC Form 460 for the HCP sites (eligible and ineligible) first, since you will need the HCP number assigned by USAC for each HCP site in order to register an off-site data center or off-site administrative office.*

D. When to File

Applicants may submit the Form 460 prior to, or along with, their request for services (FCC Form 461). The purpose of the Form 460 is to determine the eligibility of particular HCP sites or to register ineligible sites, off-site administrative offices, or off-site data centers. The purpose of the Form 461 is to provide the necessary information to initiate the competitive bidding process. Applicants are encouraged to submit all necessary Form 460(s) at least 30 days prior to filing Form 461. Applicants can choose to submit the Form 460(s) and Form 461 concurrently, but Applicants are cautioned that the Form 461 will not be posted until USAC has confirmed eligibility of the HCP site(s) (and consortium, if applicable).

If an applicant is claiming an exemption from competitive bidding (and thus not filing a Form 461), the applicant must submit a Form 460 prior to or with its request for funding (FCC Form 462). In such a case, a funding commitment will not be issued until USAC has confirmed eligibility of the HCP site(s) (and consortium, if applicable).

No further eligibility determination is required for HCP sites that have previously received an eligibility determination under the Telecommunications Program or the RHC Pilot Program. However, applicants are required to ensure that USAC has a complete Form 460 for each such site.

All applicants are required to submit an updated Form 460 within 30 days of a material change. Examples include (1) a change in a site's name, site location, contact information or eligible

entity type, (2) for non-rural hospitals, an increase to 400 or more licensed patient beds, or (3) a change in any factor that would affect a cost allocation and/or fair share calculation. If in doubt, the applicant should contact USAC for additional guidance.

E. Where to File

Applicants are required to submit all forms electronically through USAC's RHC "My Portal" website at <https://forms.universalservice.org/usaclogin/login.asp>. A Form 460 is required to be submitted through this link to create an online account. Instructions on how to file electronically are also found at USAC's RHC website at <http://www.usac.org/rhc/tools/applicant-login/applicant-login-info.aspx>. Applicants without adequate Internet access to submit the forms online should contact USAC's Rural Health Care Division (RHC) (1-800-453-1546 or [mailto: rhc-assist@usac.org](mailto:rhc-assist@usac.org)) to make alternative arrangements.

Applicants must file all forms with USAC and not the FCC.

F. Next Steps

USAC will notify the applicant within 30 calendar days after submitting the Form 460 of USAC's eligibility determination, of USAC's request for more information, or of USAC's need for additional time to process the form. If USAC determines that the HCP site is ineligible, USAC will automatically register the HCP site as an "ineligible site" without any additional action by the applicant.

After receiving an eligibility determination, the individual HCP site or consortium may then proceed to the competitive bidding stage of the process by submitting an FCC Form 461 (or if the Form 461 is already filed, USAC will post the Form 461 to start the competitive bidding period).

G. For More Information

Contact USAC's Rural Health Care Division (RHC) at 1-800-453-1546 between 9:00 a.m. and 6:00 p.m. EST, Monday through Friday or at [mailto: rhc-assist@usac.org](mailto:rhc-assist@usac.org).

III. SPECIFIC INSTRUCTIONS FOR FILING FORM 460

A. Block 1: General Information

Line 1: The date submitted will be automatically generated.

Line 2: Select the appropriate option that describes why the applicant is submitting this form.

Line 2a: Requires a list of eligible and ineligible sites, by HCP number, that will use the supported connections and/or network equipment associated with the off-site data center. The HCP number is a unique identifier assigned by USAC to all sites, eligible and ineligible.

Line 2b: Requires a list of eligible and ineligible sites, by HCP number, that will use the supported connections and/or network equipment associated with the off-site administrative office.

B. Block 2: Physical Location

The information required in this block applies to the physical location of the site. Do not enter a P.O. Box or a rural route address. See Lines 8 -14 instructions for more details.

Line 3: Requires providing the HCP number (a unique identifier assigned by USAC to all sites, eligible and ineligible), if previously provided by USAC. If USAC has not previously provided an HCP number for the site, leave this field blank.

Line 4: Requires providing the name of the site. This name will be automatically populated on all forms associated with the HCP number.

Line 5: Requires providing the name of the legal entity that owns and/or operates the site. If registering an off-site data center, provide the legal entity that will purchase the connections and network equipment associated with the off-site data center.

Line 6: Requires providing an FCC Registration Number (FCC RN) for the legal entity provided in Line 5. All legal entities must obtain an FCC RN prior to submitting this form. An FCC RN is a ten digit number that is assigned to a business or individual registering with the FCC, and is used to uniquely identify the business or individual in all of its transactions with the FCC. Obtaining an FCC RN is a simple process that can typically be completed within minutes through the FCC's website at <https://fjallfoss.fcc.gov/coresWeb/publicHome.do>. If you do not have adequate Internet access to complete this process online, call the FCC's FRN Help Desk/Administrator number at (877) 480-3201 (8 a.m. to 6 p.m. Eastern Time) to obtain information on how to obtain an FCC RN by mail.

Lines 7, 15 and 16: Requires providing the name, phone number and email of a contact person located at the physical site. The site contact person is not necessarily the same person who will be contacted if there are questions about the application (see Block 4 below). In the case of an off-site data center, the site contact person is not required to be physically located at the site.

Lines 8-9, 11-14: Requires providing the site's physical address, county, city, state and zip code.

Line 10: Only if the site does not have a street address, provide geo-location information such as latitude and longitude in Line 10. Otherwise, leave Line 10 blank.

C. Block 3: Consortium Information

HCPs applying as a consortium must identify a legal entity that will be the lead entity for the consortium (Consortium Leader). The consortium and the Consortium Leader can be the same legal entity, but are not required to be. For example, the consortium may prefer to designate one of its HCP members, an ineligible state government agency, or a non-profit organization as the Consortium Leader. The consortium need not be a legal entity. However, in order for the consortium to be the Consortium Leader, it must be a legal entity. If the Consortium Leader is an ineligible entity, the Consortium Leader is prohibited from receiving support from the Fund. If the Consortium Leader is an eligible HCP, the HCP may receive support while serving as Consortium Leader.

State organizations, public sector (governmental) entities (including Tribal governments), or non-profit entities may serve as Consortium Leaders or provide consulting assistance to the

consortium if they do not participate as potential vendors during the competitive bidding process. Conversely, if such entities wish to provide eligible services, network equipment, or facilities to the consortium, they are prohibited from simultaneously serving as the Consortium Leader. Vendors that plan to bid to provide supported services, network equipment, or facilities cannot provide consulting or other expertise to the consortium to assist it in developing its request for services (Form 461). Applicants will be required to disclose entities who have assisted with preparation of the request for services on Form 461.

Certain entities, such as state governmental entities, may be large enough to institute an organizational and functional separation between staff acting on behalf of the part of the organization performing the vendor functions and staff providing application assistance. State organizations, public sector entities, or non-profit entities may obtain an exemption from this prohibition by making a showing to USAC that there is a functional separation within the organization. Attach any such request for exemption to Form 460. The exemption must be obtained before the consortium begins preparing its request for services.

In addition to designating a entity/organization as the Consortium Leader, consortia must designate an individual (person) as the Project Coordinator. See Block 4 below.

Line 17: Requires providing the HCP number of the consortium (a unique identifier that will be assigned by USAC to the consortium), if previously provided by USAC. If USAC has not previously provided an HCP number for the consortium, leave blank and USAC will supply. The consortium will need an HCP number even if the consortium is not a legal entity. If the Consortium Leader is an eligible HCP participating in the consortium, both the eligible HCP (Consortium Leader) and the consortium itself would each have a unique HCP number.

Line 18: Requires the name of the consortium. If the consortium is a legal entity, provide the name of the legal entity.

Line 19: Requires indicating if the consortium is a legal entity. If the consortium is a legal entity, provide the required FCC RN. See above instructions for Line 6 for more information.

Line 20: Requires the applicant to indicate whether the consortium has a written agreement allocating legal and financial responsibility. By default, the Consortium Leader is the legally and financially responsible entity for the conduct of activities supported by the Fund. The consortium may allocate legal and financial responsibility differently as it finds appropriate (except for the functions listed in 47 C.F.R. § 54.631(c)(2)-(6)), provided that the allocation is memorialized in a formal written agreement between the Consortium Leader and the consortium as a whole and/or its individual members. The Consortium Leader must submit any such agreement to USAC for approval prior to or with the FCC Form 461. The agreement should clearly identify the party(ies) responsible for repayment if fund recovery is necessary at a later date. USAC will provide in writing – by the expiration of the 28-day competitive bidding period – either approval or an explanation as to why the agreement does not provide sufficient clarity about the parties responsible for repayment.

If the consortium does not have an agreement, the Consortium Leader will be the responsible entity if audits or other investigations by USAC or the FCC reveal violations of the program rules by the consortium, with the individual consortium members being jointly and severally liable if the Consortium Leader dissolves or files for bankruptcy.

Line 21: Select the appropriate option that describes the type of Consortium Leader. If the Consortium Leader is an eligible HCP participating in the consortium, provide the HCP number of the eligible HCP. If the eligible HCP has more than one HCP number, enter the HCP number of the site where the Project Coordinator is located. See instructions to Block 4 below for more information on the Project Coordinator.

Lines 22 and 23: Requires contact information for and the name of the Consortium Leader. This should be the organization that will serve as the main point of contact with USAC and the FCC and who will act on behalf of the consortium members throughout the application process and the funding, invoicing, and post-invoicing periods.

Line 24: List the HCP numbers of all sites (eligible and ineligible) participating in the consortium. The Consortium Leader is required to obtain a Letter of Agency from each eligible HCP authorizing the Consortium Leader to file forms on the HCP's behalf. The Consortium Leader is required to submit a Letter of Agency for each eligible HCP participating in the consortium no later than when it submits its request for services (Form 461). See 47 C.F.R. § 54.632. No Letter of Agency is required for an ineligible HCP site, but the Consortium Leader is still required to certify that it has the authority to submit this request on behalf of the ineligible site. More information on Letters of Agency may be found at: www.usac.org/rhc/healthcare-connect.

D. Block 4: Contact Information

The Consortium Leader (or HCP, if participating individually) must designate a Primary Account Holder for purposes of interacting with USAC. For consortia, the Project Coordinator should also be the Primary Account Holder. The Project Coordinator/Primary Account Holder must be an officer, director, or other authorized employee of the Consortium Leader (or, HCP, if participating individually) and may not be a consultant. See 47 C.F.R. § 54.649.

The Primary Account Holder has the ability to view, create, and enter data in forms, and electronically certify, sign and submit forms, on behalf of the consortium (or HCP, if participating individually). The Primary Account Holder is the person responsible for granting access to and managing the consortium's (or HCP's, if participating individually) online account information. The Primary Account Holder may designate one or more Secondary Account Holders with varying levels of access to the consortium's account (or HCP's account, if participating individually). Learn more by viewing the My Portal: Managing Account Holders video tutorial at: <http://www.usac.org/rhc/about/outreach/online-learning.aspx>.

A Secondary Account Holder (also known as an Application Contact or Assistant Project Coordinator) will normally have access to forms and have the ability to answer specific questions about the applications associated with a funding request. In addition, a Secondary Account Holder may have full access, including the ability to sign, certify, and submit forms on behalf of the applicant, if the Secondary Account Holder is a director, officer, or authorized employee of the Consortium Leader (or, a director, officer, or authorized employee of the HCP, participating individually).

A Secondary Account Holder may be a third-party (e.g., consultant). However, a Secondary Account Holder that is a third-party is prohibited from certifying, signing, or submitting forms, unless USAC receives, prior to the submission of the forms or documentation, a written, dated, and signed authorization from the relevant officer, director, or other authorized employee stating that the individual HCP or Consortium Leader accepts all potential liability from any errors,

omissions, or misrepresentations on the forms and/or documents being submitted by the third party. Attach any required third-party written authorization.

Lines 25-33: Require the name, employer, address, and contact information for the Primary Account Holder/Project Coordinator.

Lines 34-42: Require the name, employer, address, and contact information for the Secondary Account Holder (Application Contact/Assistant Project Coordinator).

E. Block 5: Eligibility Information

Line 43: Requires selecting the category that describes the type of health care provider requesting an eligibility determination. Only public or non-profit health care providers that qualify under one of the categories listed in Block 5 are eligible for Fund support. Only HCP sites seeking support are required to complete this block.

Line 44: Provide a brief explanation of why the HCP site qualifies as the HCP type selected in Line 43. This information will be used to determine the eligibility status of the site. For example, the explanation may include a description of the services provided by the organization or licensing information. If appropriate, supporting documentation (such as a state license) may be uploaded when completing this section.

F. Block 6: Additional Information

The information requested in this block is required for all individual applicants, and for each HCP site (both eligible and ineligible) participating as part of a consortium.

Line 45: Enter the non-profit tax identification number for the legal entity listed in Line 5. If the legal entity is not a non-profit entity, provide the Employer Identification Number.

Line 46: Provide the ten-digit health care facility National Provider Identifier (NPI) used on Medicare and Medicaid claims. **IMPORTANT:** This should be the organizational NPI, not an individual practitioner NPI. An NPI lookup by name and address can be found at: <https://npiregistry.cms.hhs.gov/NPPESRegistry/NPIRegistryHome.do>.

If the applicant is unsure of how to determine the appropriate NPI to provide, contact the facility's billing department for assistance. If the applicant does not have an NPI (for example a facility that does not bill) or the NPI Organization or DBA Name or Business Practice Location do not match the name and address on this application, provide a brief explanation in line 46.

Line 47a: Provide the ten-digit Healthcare Provider Taxonomy Code for the site associated with the NPI in line 46 (for the organization).

Line 47b: If the provided taxonomy code is not the appropriate taxonomy code for the site, review the codes and select the appropriate code for this site. If applicant does not provide a taxonomy code or the code is not one associated with the NPI, provide a brief explanation of eligibility.

Line 48: If the HCP selected "non-profit hospital" in Block 5, select "yes" here if it has been designated as a Critical Access Hospital by the U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services.

Line 49: If the HCP selected “non-profit hospital” in Block 5, enter the number of licensed patient beds. Licensed patient beds are the maximum number of beds the hospital is licensed to operate.

Line 50: Indicate whether the site is located on Tribal lands, operated by the Indian Health Service, and/or otherwise affiliated with a Tribe. If not applicable, check “N/A”.

Lines 51 and 52 are reserved for future use.

G. Block 7: Certifications and Signatures

The Primary Account Holder/Project Coordinator or an authorized designee (see Block 4 instructions) must provide the certifications and signatures in Block 7. All applicable certifications must be checked, the form must be signed and dated, and Lines 59 – 66 completed to submit this form.

Line 53: Certifies that the signatory is authorized to submit this form on behalf of the consortium or HCP.

Line 54: Certifies that the information provided in this form and in any attachments is true and correct.

Line 55: Certifies that if applying as an individual HCP site, the HCP in Block 2 is a non-profit or public entity and that the site is located in an FCC designated rural area, or is grandfathered rural pursuant to 47 C.F.R. § 54.600(b)(2).

Line 56: Certifies that if applying as a consortium, the eligible HCPs participating in the consortium are non-profit or public entities.

Line 57: Certifies that all documentation associated with the Form 460 will be retained for a period of at least five years. See 47 C.F.R. § 54.648.

Line 58: Requires that if applying as a consortium, the Project Coordinator understands that the consortium must obtain letters of agency from each consortium member granting the Project Coordinator the authority to complete, sign, and submit all forms for the funding year(s) for which support is sought.

Lines 59-66: Require the signature, name, contact information, and employer’s FCC RN for the person authorized to sign on behalf of the individual HCP or the Consortium Leader.

IV. REMINDERS

- An applicant must complete the required Form 460(s) and receive an eligibility determination for each site seeking support and the consortium (if applicable) before the competitive bidding process may start. If any material information on the approved Form 460 changes, the applicant must submit an updated Form 460 within thirty days of the change.
- USAC will not accept incomplete forms. For assistance in completing this form, contact USAC RHC at 1-800-453-1546 or rhc-assist@usac.org.

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