General Information

HCP or Consortium:	35645 - NY Community Broadband Partnership
Application Number:	RHC46100005365
FCC Registration Number:	0014849566
Address:	14 Maiden Lane PO Box 423, Penn Yan, NY 14527
Application Nickname:	RFP 6 - Casa 1, NOCHSI, & FHN
Funding Year:	2023
Funding Priority:	Priority 6

Consortium Participating Sites

HCP Number	Name	LOA Expiry
114851	CASA-Trinity - Hornell Outpatient	11/30/2026
51156	Fulton Health Center	11/30/2026
51173	Parish Health Center	11/30/2026
51172	Oswego Health Center	11/30/2026
51175	Pulaski Health Center	11/30/2026
51174	Phoenix Health Center	11/30/2026
51171	Mexico Health Center	11/30/2026
114849	ConnextCare - Central Square	11/30/2026
30506	Family Health Network of Central NY Moravia Health Center	11/30/2023
112757	Family Health Network of Central NY Pediatric Groton Ave Corr land Health Center	t 11/30/2023
112758	Family Health Network Cortland Medical Office	11/30/2023
30594	Family Health Network of Central NY Marathon Health Center	11/30/2023
112759	Family Health Network Admin Office Homer	11/30/2023
30603	Family Health Network of CNY, Inc Cincinnatus Health Center	11/30/2023

Requested Services

Type of Services	Description for Other		Max Download Speed	Min Uploa Speed	ldMax Upload Speed	Speed Un	it Allow Bids for Similar Services
Data		300	300	20	20	Kbps	Yes
Data		100	100	100	100	Mbps	Yes
Data		500	500	500	500	Mbps	Yes
Data		1	1	1	1	Gbps	Yes
Data		2	2	2	2	Gbps	Yes

Dates and Timing

What is the HCP's desired service contract length?:	Up to 5 Year(s)
Will the HCP consider bids with contract extension language?:	Yes
Will the HCP consider bids for month-to-month contracts?:	Yes
Page1	

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?:	3 Day(s)

Bid Evaluation

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

Criteria Cost	Description	Evaluation Weight (%) 30	Minimum Requirement
0031		50	
Other	Past Performance, including Past P erformance	20	Past performance
Other	Network IP Services such as QoS, DSCP and H.323	20	QoS, DSCP and H.323
Other	Proposed implementation time fram es	10	Implementation Time Frames
Other	Solution functions and features and suitability of vendor(s) solution(s) to meet project goals		Suitability of Vendor Solutions

Does the HCP have any disqualifying factors that will remove bids No or bidders from consideration?:

Main Contact

Name	Organization	Title	Phone	Email	Address
Rachel Mehlenba	a NY Community Broadb	aExecutive	A (315) 531-9102	rachelm@flcheal	t 14 Maiden Lane PO Box 423,
cher	nd Partnership	ssistant		h.org	Penn Yan, NY 14527

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

NY CBP Draft RFP_January 2023 - Bath, ConnextCare, FHN, Casa.docx

Summary of the HCP's requested services. :

This RFP seeks to establish new broadband services at 1 CASA-Trinity site, 7 NoCHSI sites, and 6 FHN sites that currently have inadequate connectivity for their needs.

Additional Documentation

Document Type Description for Other Network Plan Document Uploaded On NYCBP_Network Plan - RFP 6.docx 2/27/2023 9:35 PM EST

Declaration of Assistance

Name	Organization	Title	Employer	Nature of Email	Telephone
	Туре			Relationship	

Certifications

- I certify under penalty of perjury that I am authorized to submit this request on behalf of the healthcare provider or c onsortium.
- I certify under penalty of perjury that I have examined this request and all attachments, and to the best of my knowle dge, 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 stat e, Tribal, or local procurement rules.
- I certify under penalty of perjury that all requested RHC Program support will be used solely for purposes reasonabl y related to the provision of health care service or instruction that the health care provider is legally authorized to pr ovide 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 Service s (FCC Form 461), any bids/contracts resulting from the FCC Form 461 posting, scoring sheet, and other informatio n that was used in the decision making process, must be retained for a period of at least five years pursuant to 47 C FR § 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 a s 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 o r any other thing of value.

Signature

Name:	Rachel Mehlenbacher
Email:	rachelm@flchealth.org
Phone:	(315) 531-9102
Employer:	Finger Lakes Migrant Health Care Project, Inc.
Title:	Executive Assistant
Employer's FCC RN:	0014849566
Certifier's Full Name:	Rachel Mehlenbacher
Digital Signature:	Rachel Mehlenbacher
Date and time:	2/27/2023 9:37 PM EST