



Department of Health and Human Services
MaineCare Services
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AGREEMENT ALLOCATING LEGAL AND FINANCIAL RESPONSIBILITY HEALTHCARE CONNECT FUND

Re: FCC Healthcare Connect Fund RFP Letter of Engagement and Allocation of Legal and Financial Responsibility

Thank you for your interest in the FCC Healthcare Connect Fund (HCF)¹ and the **Health Information Connectivity-Knowledge Rural Consortium. Maine, Department of Health and Human Services, Office of MaineCare Services** is the Consortium Leader of the **Health Information Connectivity-Knowledge Rural Consortium.**²

Maine, Department of Health and Human Services, Office of MaineCare Services is pleased to assist
Healthcare Participant

(
Please insert the Healthcare Participants' Name within the brackets above
)

in applying for federal Universal Service Fund (USF) subsidies for eligible services through the HCF.

The funding for the **Health Information Connectivity-Knowledge Rural Consortium** will be provided through a 65% reimbursement for eligible services from the Universal Service Administrative Company (USAC) in accordance with the rules and regulations set forth by the Federal Communications Commission.³ The remaining 35% match for each individual Participant is the responsibility of the Participant. Eligible sources of the 35% match are as follows:

- Participant revenue sources;
- State grants, funding or appropriations;
- Federal funding, grants, loans or appropriations except for other federal universal service funding;
- Tribal government funding
- Other grant funding, including private grants

As you know, the **Maine, Department of Health and Human Services, Office of MaineCare Services** is the Consortium Leader for the **Health Information Connectivity-Knowledge Rural Consortium.** As part of the HCF, we will list your healthcare facility in our next Request for Proposal. Once the RFP is posted on the Universal Service Administrative Company website, vendors will have an opportunity to respond to the competitive bid request at that time.

On behalf of the consortium, Maine, Department of Health and Human Services, Office of MaineCare Services will provide the following services as the Maine, Department of Health and Human Services, Office of MaineCare Services:

¹ *In the Matter of Rural Health Care Support Mechanism*, WC Docket 02-60, Report and Order, FCC 12-150, 22 FCC Rcd 16678 (2012) (*Healthcare Connect Fund Order*).

² 47 C.F.R. § 54.631

³ See 47 C.F.R. §54.600 through 54.602 and 54.630 through 54.680.

- Designating an individual who will be the "Project Coordinator" and serve as the point of contact with the Commission and the Administrator for all matters related to the consortium, and responding to Commission and Administrator inquiries on behalf of the consortium members throughout the application, funding, invoicing, and post-invoicing period.
- Submitting program forms and required documentation, Consortium Leader is responsible for ensuring that all information and certifications are true and correct.
- Ensuring that the competitive bidding process is fair and open by coordinating and administering the evaluation and scoring of vendor RFP responses with HCP provided representatives.
- Ensuring that the competitive bidding process complies with FCC requirements.
- Notifying the Administrator when supported services have commenced, and processing and submitting invoices to the Administrator.
- Complying with the Commission's recordkeeping requirements and for coordinating site visits and audits for all consortium members; referenced in paragraph 325-329 in the Healthcare Connect Fund Order.
- Facilitating the on-going invoice processing between vendors and USAC for the duration of the HCPs' participation in the HCF.

The HCP will be responsible for the following functions:

- Providing accurate data or information for Block 2, Block 4, Block 5, and Block 6 for Form 460 and any additional information requested by the **Maine, Department of Health and Human Services, Office of MaineCare Services**.
- Providing a representative from your organization to participate in the evaluation of vendor RFP responses.
- Signing a legal contract between the HCP and the winning vendor for telecommunications services, if deemed advantageous to by the HCP.
- Paying 35% of the expenses related to services within the vendor's billing due date and providing proof of payment for these services to the **Maine, Department of Health and Human Services, Office of MaineCare Services** quarterly.
- Updating the **Maine, Department of Health and Human Services, Office of MaineCare Services** within 15 days in the event of terminating services, changing locations, seeking upgraded services, any alteration to the information detailed above, changes in non-profit status, or any other changes to documents filed for participation in the HCF.

Participation in the **Health Information Connectivity-Knowledge Rural Consortium** at any level does not include the **Maine, Department of Health and Human Services, Office of MaineCare Services** or **Health Information Connectivity-Knowledge Rural Consortium** accepting any legal or financial responsibility for any telecommunications contract signed between individual Participants and their chosen vendor(s). Each Participant will retain sole legal and financial responsibility throughout the life of said contract as it relates to the relationship between the Participant and the service provider(s).

Furthermore, each Participant accepts full responsibility for the timely submission and authenticity of any information or certification requested by the **Maine, Department of Health and Human Services, Office of MaineCare Services** (as detailed above) during the RFP process and maintains responsibility for repayment if any is required due to the HCP's violation of program rules.

The **Maine, Department of Health and Human Services, Office of MaineCare Services** will maintain legal and financial responsibility for accurately completing all USAC forms, updating USAC of any changes within the program or with individual Participants, and retaining all pertinent and required documentation from the HCF.

Furthermore, the **Maine, Department of Health and Human Services, Office of MaineCare Services** will indemnify, defend, and hold harmless each HCP and its officers, directors, employees, and agents from and

against all Claims arising from and incurred as a result of any third-party Claim (including, without limitation, regulatory investigations or proceedings) to the extent attributable to the negligence or intentional misconduct of the **Maine, Department of Health and Human Services, Office of MaineCare Services** its officers, directors, employees, or agents.

HCPs will also indemnify, defend, and hold harmless the **Maine, Department of Health and Human Services, Office of MaineCare Services** and its officers, directors, employees, and agents from and against all Claims arising from the Healthcare Connect Fund and incurred as a result of any third-party Claim (including, without limitation, regulatory investigations or proceedings) to the extent attributable to the negligence or intentional misconduct of the HCP or its officers, directors, employees, agents, or Affiliates.

We appreciate your confidence in **Maine, Department of Health and Human Services, Office of MaineCare Services**. Thank you for allowing us to assist you in obtaining HCF support. If you have any questions, please do not hesitate to contact Dawn R. Gallagher, Primary Project Coordinator at Dawn.R.Gallagher@maine.gov ; 207-287-6573 or Lorie Smith at Lorie.Smith@maine.gov 207-762-1316.

If you are in agreement with the terms and conditions of this letter, please countersign where indicated below and return it to me at your earliest convenience.

Participant Signature:

Signature: _____

Printed Name: _____

Title: _____

Facility Name: _____

Phone: _____

E-mail: _____

Date: _____

Maine, Department of Health and Human Services, Office of MaineCare Services Signature:

Signature: Dawn R Gallagher _____

Printed Name: Dawn R. Gallagher

Title: Director, State Health Information Technology Initiatives Program

Phone: 207-287-6573

E-mail: -Dawn.R.Gallagher@maine.gov

Date: 1/27/14 _____