



REQUEST FOR PROPOSALS

Grant County Washington
October 26th, 2017

Request for Proposals for:

Electronic Health Records Software RFP #2017-001

PROPOSALS MUST BE RECEIVED BY: 1:00 pm, November 13th, 2017
Proposals after that time will not be accepted

Proposal(s) shall be sealed and clearly marked with RFP Title. Proposals must be typewritten on 8 ½ x 11 paper, using 12 point fonts. Identify headings and sections, and do not use extensive artwork, photographs, or printing. Respond to each section in order and number each page of the application.

Submit one (1) original and two (2) complete copies (no 3-ring binders please) of the Proposals to:

Grant Integrated Services
840 E. Plum Street
Moses Lake, WA 98837

Refer Questions to RFP Project Manager:

Name: Darla Boothman
Title and Department: Director of Administrative Services
Email address: dboothman@grantcountywa.gov

Request for Proposals
Grant Integrated Services

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(Email dboothman@grantcountywa.gov for a Microsoft Word version of this section)

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Request for Proposal

Grant Integrated Services

Part I Proposals Requirements

Grant Integrated Services, a behavioral health agency, is looking for our new Electronic Health Records Software.

Section IA General Information

1. General
 1. Proposers must strictly adhere to all the requirements of this RFP. However, whilst fully complying with the RFP requirements, Proposers are encouraged to provide any suggestions and solutions that may achieve a more cost-effective and value-for-money approach to fulfilling the requirements of this RFP.
 2. Submissions of a Proposal shall be deemed to constitute an acknowledgement by the Proposer that all obligations stipulated by this RFP will be met and unless specified otherwise, the Proposer has read, understood and agreed to all the instructions provided in this RFP.
 3. Any Proposal submitted will be regarded as an offer by the Proposer and not as an acceptance of an offer of any Proposal by GrIS. This RFP does not commit GrIS to award a contract.
 4. A Proposer shall not be in any position of conflict of interest arising from their current or future work with respect to GrIS.

2. Preparation of Proposals
 1. Cost of Proposal. The proposer shall bear any and all costs related to the preparation and/or submission of the Proposal, regardless of whether its Proposal was selected or not. GrIS shall in no case be responsible or liable for those costs, regardless of the conduct or outcome of the process.
 2. Technical Proposal Format and Content. Unless otherwise stated, the Proposer shall structure the Technical Proposal to meet the evaluation criteria.
 3. Provide other Information as may be relevant to the Proposal.
 4. Period of Validity. Proposal length shall be valid for ie, 30, 60 days...

3. Submission of Proposals
 1. Proposal(s) shall be sealed and clearly marked with RFP Title. Proposals must be typewritten on 8 ½ x 11 paper, using 12 point fonts. Identify headings and sections, and do not use extensive artwork, photographs, or printing. Respond to each section in order and number each page of the application.

Submit one (1) original and two (2) complete copies (no 3-ring binders please) of the Proposals to:

Grant Integrated Services
840 E Plum Street
Moses Lake, WA 98837

2. If the envelope is not sealed and marked as required, GrIS will assume no responsibility for the misplacement or premature opening of the Proposal.

3. Proposals must be received by GrIS at the address above no later than November 13th at 1:00pm.

4. GrIS shall not consider any Proposal that arrives after the deadline for submission of Proposals. Any Proposal received by GrIS after the deadline for submission of Proposals shall be declared late, rejected, and returned unopened to the Proposer.

5. No Proposal may be withdrawn, substituted, or modified in the interval between the deadline for submission of Proposals and the expiration of the period of proposal validity specified by the Proposer on the Proposal Submission Form or any extension thereof.

4. Timeline for Selection Contractors will be notified no later than November 21, 2017 whether or not their Proposal has been accepted.

5. Evaluation and Comparison of Proposals

1. Confidentiality

2. Information relating to the examination, evaluation, and comparison of Proposals, and recommendation of contract award, shall not be disclosed to Proposers or any other persons not officially concerned with such process, even until publication of the contract award.

3. Any effort by a Proposer to influence GrIS in the examination, evaluation and comparison of the Proposals or contract award decisions may, at GrIS' decision, result in the rejection of its Proposal.

4. Any effort by a Proposer is unsuccessful, the Proposer may seek a meeting.

5. Preliminary Examination of Proposals. GrIS shall examine the Proposals to determine whether they are complete, whether the documents have been properly signed, and whether the Proposals are generally in order. GrIS reserves the right to reject any Proposal after preliminary examination of Proposal, if GrIS finds justifiable reason for such rejection, including but not limited to the discovery of significant or material deviation, conflict of interest, fraud, among others.

6. Contract Signature. Contract, once awarded, will be final upon signatures from both parties.

7. Vendor Protest. In the event that you believe you have not received fair treatment, please contact dboothman@grantcountywa.gov.

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Part II Proposal Preparation and Submittal

Section IIA Proposal Submission

Sealed proposal must be received no later than the date, time and at the location specified on the cover of this document.

The outside of the envelope/package shall clearly identify:

1. RFP Title and;
2. Name and address of the Contractor.

Responses received after submittal time will not be considered and will be returned to the applicant - unopened.

Proposals received with insufficient copies (as noted on the cover of this document) cannot be properly disseminated to the Review Committees and other reviewers for necessary action, therefore, will not be accepted.

Section IIB Proposals Content

Responses to this RFP shall include all of the following:

(*email* dboothman@grantcountywa.gov *for a Microsoft Word version of the following sections to complete*)

Attachment A – Executive Summary and Vendor Profile. This form is to be used as your qualifications Cover Sheet.

Attachment B – RFP Responses. This form, when completed, will comprise your statement of proposal.

Request for Proposal

Grant Integrated Services

Attachment A: Executive Summary and Vendor Profile

Section 1 – Executive Summary (provide a concise summary of the products and services proposed)

Enter response here...

Section 2 - Vendor Profile

Using the template below, please provide the requested information on your organization. Your response to a specific item may be attached to this section as an additional page if necessary.

General Information	
Vendor Name	
Address	
Main Phone Number	
Website	
Publicly Traded or Privately Held?	
Number of Employees	
Number of Employees in Behavioral Health Segment	
Total Number of Active Clients	
Total Active Clients with Product Proposed	
Total 2016 Revenue	
Total 2016 Revenue for the Product Proposed	
Total 2016 Profit	
Total 2016 R&D Spend for the Product Proposed	
Provide the Number of New Client Sales for the Product Proposed in Each of the Last 3 Years	

Provide the Number of Clients that Have Cancelled a Contract or De-installed the Product Proposed in Each of the Last 3 Years	
Parent Company	
Name	
Address	
Main Phone Number	
System Information	
System Name	
Most recent Version number	
Version and year of ONC-ATCB Certification	
List and Elaborate on any Third Party Software Required for the Product to Perform as Described	
Market Data	
Number of years as EHR vendor	
Number of years system has been in existence	
Number of live* agencies *live means post-implementation services	
Number of live agencies in Washington	
Number of implementations occurring in 2017	
Do you have behavioral health specialists on staff? Include name(s) and degree(s).	
Average implementation length	

Attachment B: RFP Responses

<p>Section 3 - Specifications</p> <p>Please use this sheet to enter your responses to each of the RFP questions. Remember to check the appropriate boxes indicating if the function is available now, and if it is fully integrated into the system or a separate module. Indicate if the requirement is pending completion of development or not available at this time. If the requirement is not available at this time but a plan exists for future inclusion, please indicate the expected completion date and include any published road maps. Each available requirement should have at least two (2) boxes checked.</p>	<p>FAN = Function Available Now FI = Fully Integrated SM = Separate Module PC = Pending Completion of Development NA = Not available at This Time FIP = Function in Planning / Planned Completion Date</p>						
	FAN	FI	SM	PC	NA	FIP & Date	
<p>1. Does the EHR allow for golden thread customization by the client-administrator? Describe how.</p>							
<p>Enter response here...</p>							
	FAN	FI	SM	PC	NA	FIP & Date	
<p>2. Does the EHR allow for intake/referral customization by the client-administrator? Describe how.</p>							
<p>Enter response here...</p>							
	FAN	FI	SM	PC	NA	FIP & Date	
<p>3. Can the EHR accommodate multiple assessment tools?</p>							
<p>Enter response here...</p>							
	FAN	FI	SM	PC	NA	FIP & Date	
<p>4. Does the system come with a comprehensive review of systems that can expand as needed? Describe how.</p>							
<p>Enter response here...</p>							
	FAN	FI	SM	PC	NA	FIP & Date	
<p>5. When writing a new Assessment, can the EHR bring forward answers from previous Assessments in whole or in part? Specify.</p>							
<p>Enter response here...</p>							
	FAN	FI	SM	PC	NA	FIP & Date	
<p>6. Can the EHR handle many treatment plan types? Describe.</p>							
<p>Enter response here...</p>							
	FAN	FI	SM	PC	NA	FIP & Date	
<p>7. Can the EHR have an initial treatment plan for a specific program that is different from the on-going treatment plan?</p>							
<p>Enter response here...</p>							

	FAN	FI	SM	PC	NA	FIP & Date
8. Does the EHR allow for multiple, simultaneous treatment plans per program? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
9. Is there an option to only print treatment plan parts for certain date ranges (for example: the last year, all open goals only) and print the entire plan, including closed goals, objectives, and interventions? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
10. Does the EHR have decision support built in for the use of E&M codes to assist the clinician in picking the appropriate billing code? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
11. Can the Progress Note be formatted by the System Administrator to allow the user to pick from the current treatment plan only the goals, the goals and objectives, or the goals, objectives and interventions? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
12. Describe how the EHR handles group notes and scheduling. Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
13. Describe how productivity is captured and reported. Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
14. Describe the billing functionality. Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
15. Can the EHR support both the productivity issues and the billing as described? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
16. If yes, does the EHR do this through one or multiple entries? Describe. Enter response here...						

	FAN	FI	SM	PC	NA	FIP & Date
17. Can the system bill for a 45-minute session and credit the clinician with an hour of productivity? Explain how.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
18. Can the EHR export files? Please list the exportable files? Describe how.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
19. Can the EHR do the following? When a claim is moved to a secondary payer (and the first payer has paid a portion of the claim – e.g. Medicare/Medicaid), the system will decrement the first payer and then use the separate authorization from the second payer and also decrement the second authorization’s balance.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
20. Can the EHR support multiple clinician signatures, multiple client/other signatures, and the sending back and forth of clinician documentation for supervisor approval? Describe.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
21. Does the EHR have version control so that a signed document cannot be changed and no edits or additions made by sub-form table changes or other means?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
22. Can client signatures be captured outside of an office setting? Describe methods available.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
23. Does the clinician’s signature include current credentials (e.g. LICSW, PhD or RN) when displayed on the screen? When printed?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
24. Does the EHR retain a clinician’s historical credentials on signatures if and when they change (e.g. LCSW to LICSW)?						
Enter response here...						

	FAN	FI	SM	PC	NA	FIP & Date
25. How does the system handle staff name changes? Does it store changes historically with the effective date?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
26. Can the EHR temporarily reassign supervisor signature for vacation coverage?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
27. GrIS has various sub-contractors. Can the EHR limit a sub-contractor's access to a particular program and/or group of clients?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
28. Can the EHR limit access to particular forms based on user profile, level of care program settings, and/or client status?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
29. Can the EHR handle a billing matrix by payer with modifiers?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
30. Can the EHR bill PM/PM? (Per member/per month enrolled).						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
31. Can the EHR track capitated contracts for one client? A group of clients?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
32. Does the EHR have the ability to re-code a procedure on secondary billing in the event that the second payer codes the procedure differently? Describe how.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
33. Can the front desk admin see a client balance (prior unpaid co-pays, deductibles etc.) even when the client may not have an ACTIVE co-pay at this point in time within the scheduler?						
Enter response here...						

	FAN	FI	SM	PC	NA	FIP & Date
34. Does EMR have a limit of how many batches can be submitted to insurances per a day?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
35. Does the EMR require batching?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
36. Can the EHR prescribe controlled substances? Describe the process.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
37. Can the medication system stop PRN medications from being dispensed too close together in time without an override?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
38. Can medications be recorded as administered, dispensed, refused and/or observed?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
39. Does the EHR alert staff when a refill is needed? Describe how?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
40. Does the EHR meet all regulations for all e-prescribing in outpatient programs and for psychiatric consultations including medication orders and reconciliation?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
41. Can the EHR display and track consents, and can the proper staff be alerted when a new consent is needed?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
42. Can a revoked or expired consent be distinguished from an active one? Describe how.						
Enter response here...						

	FAN	FI	SM	PC	NA	FIP & Date
43. Can the EHR track releases of information that are required without a consent being signed? (HIPAA Disclosure Form). Describe how. Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
44. Can the EHR document based on the program and shift without using a “dummy” client? In other words, the document is attached to the program/facility and not a client. Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
45. Does the EHR cross walk DSM and ICD codes? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
46. Can the EHR handle multiple primary billing diagnoses (due to different programs)? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
47. Can the system filter for or warn if a substance abuse program is trying to bill with a non-substance abuse code? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
48. Can the system administrator require a billing diagnosis on the service form? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
49. Can the agency administrator create ticklers on her/his own? Do these include IF/THEN logic? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
50. Can the EHR handle client check-ins, including staff notification that the client is present and checked in, ready for vitals, seen by therapist, seen by prescriber, checked out, scheduling searches, blocking out time for staff on a one time or reoccurring basis, and scheduling groups? Describe in detail. Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
51. Can Microsoft SQL Server Reporting Services can be used with the EHR and if so, what are the requirements? Describe any other mechanisms for generating reports. Enter response here...						

	FAN	FI	SM	PC	NA	FIP & Date
52. Can the EHR track and report on non-billable services? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
53. What level of access does the client-administrator have to the data? Is it a complete read access of the database, a subset of the database, or a limitation of customized views? Describe in detail. Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
54. Describe the options for using the EHR remotely. Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
55. Do these options include non-internet based use/synching? If yes, describe in detail. Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
56. Is the EHR Meaningful Use certified? At what level? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
57. Describe in detail your plans to meet MACRA standards? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
58. GrIS has a continuum of care, and often clients are involved in multiple programs at one time. Can the EHR alert all providers involved with a client when the client is seen in a program? For example, can the outpatient therapist, psychiatrist and Residential staff be alerted if their client is seen for an emergency mental health evaluation by the Crisis Response Team? Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
59. Does the EHR have alerts that are pop-up and task list entries? Describe. Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
60. Can the EHR save notes in Draft form? Enter response here...						

	FAN	FI	SM	PC	NA	FIP & Date
61. What, if any, fields are required to save a draft progress note?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
62. Can saved forms be modified after the fact? If so, to what extent, and how does the modified data present? If yes, is the modification allowed only before the session is billed, only after billing, or both?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
63. Can some, but not all, staff have permission to delete notes/charges? Describe.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
64. Can the system generate aggregate reports and individual trend reports?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
65. Can GrIS create new forms in the EHR, adding required data elements, on their own?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
66. Is new form creation limited to the options made available in the form designer, or are programming languages and scripting allowed? If so, list accepted and applicable programming languages and scripting.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
67. Can a form score results of questions and then categorize the results (for example, scores between 1-5 = low risk, 6-10 = moderate risk)?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
68. Can the EHR handle moving data from one form to the next iteration of the same form (copy forward)? Describe how.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
69. Is the original form locked and unalterable after signature even if a sub form is edited?						
Enter response here...						

	FAN	FI	SM	PC	NA	FIP & Date
70. Can the EHR handle moving data from one form to a second unique form so that data does not need to be entered twice? For example: Risk factors, medications, allergies, family members, outside treatment team members, address, etc. Describe.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
71. Does the EHR have an internal communications / secure email function?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
72. Can the EHR scan material into the record? Describe how scans are filed, viewed and retrieved for printing.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
73. Can the end user distinguish a release of information from our agency and one from a separate outside provider? How?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
74. Does the EHR identify who scanned a particular document? And when it was scanned?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
75. Is E-Faxing built into the EHR?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
76. Does the EHR allow for multiple staff assignments within one program?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
77. Does the EHR have a spell checker that allows additions?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
78. Can the EHR track wait lists? Describe in detail.						
Enter response here...						

	FAN	FI	SM	PC	NA	FIP & Date
79. Does the EHR support integration of duplicate records and purging of unneeded records? Archiving as of a specified date?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
80. Can you cut and paste into a document in your EHR from Microsoft Word? Any restrictions? Notepad? Other programs?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
81. Are custom fields stored in the database in a way that makes them easily identifiable when building a report?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
82. Are custom fields only available in custom reports?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
83. Can the system store legacy EHR client identifying numbers (medical records numbers)? Is there a limit to the number that can be stored? Can the legacy number be used in a client lookup?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
84. Does the EHR have a sandbox/test/development version that updates can be tested in? If yes, how often is this test/development system updated? Describe						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
85. Describe the following within your product in detail: advanced reporting						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
86. Describe the following within your product in detail: Treatment Planning						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
87. Describe the following within your product in detail: Security at multiple levels						
Enter response here...						

	FAN	FI	SM	PC	NA	FIP & Date	
88. Describe the following within your product in detail: EDI / HIE between hospitals, primary care, and other BH providers.							
Enter response here...							
	FAN	FI	SM	PC	NA	FIP & Date	
89. Describe the following within your product in detail: Internet Connectivity with upload/download speeds.							
Enter response here...							
	FAN	FI	SM	PC	NA	FIP & Date	
90. Describe the following within your product in detail: secure hosting, software platform, site/domains, availability. Is each hosted version on a separate server?							
Enter response here...							
	FAN	FI	SM	PC	NA	FIP & Date	
91. Describe the following within your product in detail: secured messaging							
Enter response here...							
	FAN	FI	SM	PC	NA	FIP & Date	
92. Describe the following within your product in detail: appointment reminders							
Enter response here...							
	FAN	FI	SM	PC	NA	FIP & Date	
93. Describe the following within your product in detail: direct messaging							
Enter response here...							
	FAN	FI	SM	PC	NA	FIP & Date	
94. Describe the following within your product in detail: Scheduler – client/clinician appointment.							
Enter response here...							
	FAN	FI	SM	PC	NA	FIP & Date	
95. Describe the following within your product in detail: Scheduler – scheduling resources (cars and rooms).							
Enter response here...							

	FAN	FI	SM	PC	NA	FIP & Date
96. Describe the following within your product in detail: Scheduler – display of multiple staff for same date and time.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
97. Describe the following within your product in detail: Scheduler – display of single staff for multiple days						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
98. Describe the following within your product in detail: Scheduler – Groups scheduling (clients)						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
99. Client has both MH/SUD dx. How does your system know to attach the correct dx to correct claim in the billing module?						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
100. Describe the following within your product in detail: Patient Portal. Include its function in detail. Be sure to include all activities patients can complete through the portal.						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
101. Describe the following within your product in detail: Mobility - Devices						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
102. Describe the following within your product in detail: Mobility – Operating systems						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
103. Describe the following within your product in detail: Mobility – Talk to text						
Enter response here...						
	FAN	FI	SM	PC	NA	FIP & Date
104. Describe the eligibility checking process within your product. Is it live or batching?						
Enter response here...						

	FAN	FI	SM	PC	NA	FIP & Date	
105. Describe the following within your product in detail: software escrow.							
Enter response here...							
	FAN	FI	SM	PC	NA	FIP & Date	
106. Describe your products training module for super users and agency staff who will be providing on-going training to agency staff.							
Enter response here...							

Section 4 – Integration

Provide details on all forms of integration and data-sharing technologies that your product utilizes.

1. Do your interfaces create log files or other audit trails of their activity? How long are these files or logs maintained? Can they be exported to GrIS storage device?
Enter response here...
2. Describe your plans regarding HL7?
Enter response here...
3. Are HL7 messages used by your system to communicate internally -- that is, between the different modules that make up your system? If so, what parts of your system use HL7 in this way?
Enter response here...
4. In what ways, if any, does your system's use of HL7 protocols deviate from the HL7 standard version you are using?
Enter response here...
5. What facilities does your system provide to use HL7 messages in batch-type interfaces?
Enter response here...
6. What facilities does your system provide to allow Client to maintain HL7 interfaces?
Enter response here...
7. What lower-level protocol assumptions are used in your implementation of HL7 protocols?
Enter response here...

Section 5 – System & Hardware

Provide specifications on hardware and hosting options based on the requirements and volumes noted in this RFP (provide a list of hardware requirements, configuration options [client/server, SaaS, etc.], as well as hosting options if available).

1. Define how your product application is licensed (employees, work stations, etc.)?
Enter response here...
2. If Windows based, define if your system supports 32 bit and/or 64 bit operating systems? Server? Workstations?
Enter response here...

3. Are any additional system software products or utilities required or recommended to efficiently run your system on the recommended hardware and operating system?

[Enter response here...](#)

4. What is the data organization method used by your system -- relational, hierarchical, other? Please describe.

[Enter response here...](#)

5. How is data integrity maintained? What tools are used?

[Enter response here...](#)

6. System shall support automated database backup. Explain how this will be accomplished, including documentation of occurrence.

[Enter response here...](#)

Section 6 – Security

1. Describe your system's security features.

[Enter response here...](#)

2. How are new users set up?

[Enter response here...](#)

3. Discuss the authentication process including encryption and wireless devices.

[Enter response here...](#)

4. Can users who are to be set up identically or similarly be copied from one to another? What other timesaving security set up features are there?

[Enter response here...](#)

5. Describe how the password and security code file is maintained on the system. Indicate the data elements which are contained in this file.

[Enter response here...](#)

6. How does your system's security relate to the security system provided by the underlying operating system?

[Enter response here...](#)

7. Can security be tailored down to the individual user level, or is it customizable only at a higher level such as department?

[Enter response here...](#)

8. What is the smallest functional unit that can be enabled/disabled in your security system? Can users be enabled/disabled for whole modules, files, menus, menu choices, specific screens, and fields within screens?

[Enter response here...](#)

9. Does your security system distinguish on a screen level between the ability to add data, the ability to change data, the ability to delete data, and the ability to inquire only?

[Enter response here...](#)

10. How are passwords changed in your system? Does your system allow the user to change his/her own password? Can Super User reset it when user is locked out?

[Enter response here...](#)

11. What reports are generated by (or from) your security system? Please include report samples.

[Enter response here...](#)

Section 7 – Operations

1. How are updates, new releases and enhancements distributed? Who applies the releases or enhancements? Vendor or Client?

[Enter response here...](#)

2. How do you install bug fixes and other patches to your system? How often are patches released?

[Enter response here...](#)

3. Are there any programs that periodically check the integrity of the system? Describe how these programs work and how analysis information becomes available.

[Enter response here...](#)

4. How does your system prevent and minimize downtime?

[Enter response here...](#)

5. Please describe in detail your daily, weekly, monthly, etc., batch processing, "update" jobs, calendar and fiscal year end procedures.

[Enter response here...](#)

6. When a problem occurs at a workstation, what types of error messages or codes are displayed for the user? Is the screen frozen at that point or can the user continue after reporting the code and error message to the IS department? What tools are provided for Information Systems to use in diagnosing and troubleshooting user problems and errors?

[Enter response here...](#)

7. Describe how and when your system is backed up. Do the backups vary daily, weekly, monthly, etc.? Are back-up procedures dedicated or concurrent?

[Enter response here...](#)

8. Describe the services and support you would provide in the event that a catastrophic disaster disabled the clients computer systems for an extended period of time. If enhanced services of this type are offered at additional cost, please specify the services and the costs.

[Enter response here...](#)

9. What kinds of redundancy and data recovery features are included or available in your system?

[Enter response here...](#)

10. In situations where maintenance or other operations need to be done on your system with all the users "out" of the system, how does your system allow Information System to keep the users "out" for the duration of the maintenance operation?

[Enter response here...](#)

11. What technical documentation is available for your system (not the hardware, operating system, or language, but actually for your application system)? Do you provide error explanations? Trouble-shooting guides? Logic flow-charts? Descriptions of underlying assumptions and logic?

[Enter response here...](#)

12. What technical documentation is available to describe your hardware and backup systems?

[Enter response here...](#)

13. What is the security level of the building where your data servers are housed?

[Enter response here...](#)

14. Describe how your system handles changes due to daylight savings time.

[Enter response here...](#)

15. What date/time stamp is affixed to electronic signatures? Agency location (i.e. Pacific) or where ASP host resides (Eastern)?

[Enter response here...](#)

16. Have you completed a HIPAA Risk Assessment? If yes, include copy.

[Enter response here...](#)

Section 8 – Total Cost of Ownership

Be sure to list and include all products, including any third party software that will be needed to perform all functions included in this proposal.

Provide a detailed pricing table of the following for each module:

- One-time fees
- Annual fees

Include limitations of the following:

- Number of users
- Number of forms
- Number of e-licenses
- Number of messages
- Number of active clients
- Number of MPIs
- Number of payers
- Any other limitations

Include a statement concerning your policy on price increases and a history of increases over the last 5 years.

Enter response here...
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Section 9 – Data Conversion and Implementation Schedule

1. Describe your data conversion process in detail (including import data points), from our current Cerner system to your system.
2. What do converted assessments look like for end user viewing at later date?
3. Are converted documents able to be reported on?
4. Describe your implementation schedule including data conversion, forms building, training of super users, and number of hours on-site.
5. Describe your technical assistance and support.

Section 10 – References

Reference 1	
Products Purchased:	
Year Contract Signed:	
Deployment Status:	
(Provide metrics if live, such as # of sites, # of users, etc.):	
Results/benefits achieved thus far:	

Lessons learned:	
Why/how is this client relevant to Grant Integrated Services?	
Results/benefits achieved thus far:	
Can we directly contact this reference? If yes, list name, phone and email.	
Reference 2	
Products Purchased:	
Year Contract Signed:	
Deployment Status:	
(Provide metrics if live, such as # of sites, # of users, etc.):	
Results/benefits achieved thus far:	
Lessons learned:	
Why/how is this client relevant to Grant Integrated Services?	
Results/benefits achieved thus far:	
Can we directly contact this reference? If yes, list name, phone and email.	