

Department of Mental Health and Addiction Services, Electronic Health Records Request for Proposals Questionnaire

1) Business Information (Proposer Profile, Experience and References)

A. Background and Financial Information:

1. Company Name and Geography
2. Address of company headquarters
3. Year the Company Was Established
4. Significant Company Merges, Acquisitions, and Sell-offs
5. Public or Private Ownership Model
6. Any Bankruptcy/Legal Issues (including under which name the bankruptcy was filed and when, or any pertinent lawsuits, closed or pending, filed against the company.)
7. Research and Development Investment (expressed in a total amount or percentage of total sales)
8. Statement of Key Differentiators: The vendor should provide a statement describing what differentiates its products and services from those of its competitors.

B. Client base for EHR proposed to DMHAS. (for the purpose of this section, a “client” is defined as a Behavioral Health System or Facility)

Category	Response
EHR Name Proposed for DMHAS	
Number of Behavioral Health Clients LIVE on solution	
Number of concurrent end users at peak times	

C) Three Behavioral Health references utilizing the software product you are proposing to DMHAS of similar size and nature

1. New client with less than 1 year on system
2. Established client with more than 3 years on system

2) Applications

- A) Provide technology specifications that support the product (e.g., database, architecture, operating system, browser, etc.).
- B) Describe the options for remote-hosting the product or if the product Software-as-a-service.

- C) Describe how the product supports remote access for workers not on-site or not physically connected to the DMHAS network.
- D) This RFP is specific to use at DMHAS, however the option to extend its use to other state agencies is a future possibility. Describe how the product would partition/ separate or isolate each agency's data so they are not accessed or shared either by users or by system administrators.
- E) Complete the following table about the applications for the proposed product for DMHAS and installed at customer sites. The vendor MUST identify when a third-party product is being proposed. Identify/provide the total Behavioral Health sites installed per application.

APPLICATION FUNCTION	NAME OF PRODUCT	TOTAL CLIENT INSTALLS	CURRENT RELEASE

As rows as needed

3) Functional Capabilities

Please answer the Yes/No Questions AND provide any correlating comments on the included Excel worksheet - DMHAS_RFP EHR Functionality.

4) Implementation Model

- A) Provide a description of the implementation plan for the proposed products and/or services that specifically describes the overall implementation approach of your system.
- B) Provide your estimated implementation timeline for the proposed products and services.
- C) Provide a staffing plan for the implementation of the proposed EHR product for DMHAS, including the recommended number of DMHAS dedicated staff by skill set that will be required to implement all products proposed for the stated scope.
- D) Provide a vendor staffing implementation plan for the applications proposed including the approximate number of vendor staff that will be assigned to this implementation. Identify the staff that will be dedicated full-time throughout the lifecycle of the implementation versus staff that would offer interim support as needed. Include any Technical services and Conversion services provided.
- E) Describe any training services provided by vendor staff. Please list training manuals, reference guides, on-line help by subject, content sensitive help, etc. Identify the format as hard-copy print, on-line printable, or on-line content sensitive
- F) Describe any pre-go-live services provided such as comprehensive workflow analysis, recommendations for configurations, table set-ups, and historical data migration.

5) Maintenance and Support

- A) Identify DMHAS IS staffing requirements to support the system post go-live, with all vendor-proposed applications installed.
- B) Describe your post implementation support structure, including Help Desk support and hours of support. Include the tiers of support provided as well as the process to request enhancements or new features.
- C) Provide your proposed production service level agreements (SLA's) including, but not limited to average response times, average resolution times, Mean Time Between Failures, RTO, RPO, system availability, etc. If SLA's differ between applications, please note differences.
- D) Describe your version control process including new release timelines, client testing requirements, training, etc.; The process to patch, upgrade, and/or migrate to new releases should require minimal time, effort, and downtime.
- E) Please list all current product certifications (CCHIT, MIPS/MACRA, Cures Act, etc.) related to this product and confirm that you will keep your product current in all required governmental certifications as part of the normal annual maintenance costs.
- F) Describe how your product will help CT-DMHAS maintain required certifications and audits, including The Joint Commission (TJC), the Centers for Medicare and Medicaid (CMS) and others.
- G) Provide a copy of the warranty describing how it is affected by maintenance and support agreements after the implementation period.
- H) Do you have an active online support community of other users like us?

6) Security

- A) What security certifications do you possess?
 - 1. When was your last audit?
 - 2. How often do you get audited?
 - 3. Can you confirm compliance with HIPAA Privacy and Security Rules?
- B) How is the data protected?
 - 1. Administrative – Policies and Procedures
 - 2. Physical – Data Center Controls
 - 3. Technical – Technology solutions used to support policies and procedures
 - i. Access Control
 - ii. Unique User Identification
 - iii. Emergency Access
 - iv. Encryption
 - v. Audit Controls
 - vi. Integrity

vii. Transmission Security

viii. Backup

ix. Disaster Recovery

- C) Describe all backup and recovery procedures, including who performs them.
- D) How many tiers of security are available?
- E) Detail how your organization would respond to a data security breach.
- F) Do you maintain a well-documented security infrastructure?
- G) Detail the level of auditing that is available and what access the customer has to audit logs. How are these logs accessible to staff that need them?
- H) Describe any use of incident protection and detection software.
- I) Describe your ability to use encrypted data storage and transmission while compensating for performance implications.
- J) Do you maintain infrastructure standards certification like International Standards Organization/International Electrical Commission (ISO/IEC 27002)?
- K) Please provide an estimated response time from support personnel when contacted regarding security issues.
- L) Can our data be moved among multiple data centers? If so, how are we notified?
- M) Will you allow for the storage of a customer's data outside the United States of America?
- N) Do you provide for the delegation of user provisioning administration to the customer?
- O) Can you provide written copies of your security and privacy policies and procedures including disaster recovery?
- P) Are you insured to cover the costs of recovery from a security breach? Please provide limitations and exclusions of coverage

7) Cost Estimates and Value

Responses should be based on not-to-exceed estimates inclusive of itemized Software Application purchases, Services, Hardware, and Hosting as well as time and materials)

The cost response must clearly separate one-time costs, implementation/installation costs, and recurring costs for a minimum of five years.

Costs for each component and service should be broken down between installation and ongoing expenses.

A timeline to implement a new EHR may include a 'Big Bang' or phased approach by DMHAS facility. However, if there is a difference in cost, please include that in the following cost estimate information.

- A) Unit cost for all license types for all required software elements, including improving economics as volume changes.

- B) Unit cost for all services elements, so that individual SOWs can be priced easily, including improving economics as volume changes.
- C) Integration costs to interface the following applications with the new EHR:
- CORE-CT (Peoplesoft) - Connecticut state government's integrated human resources, payroll, and financial System. Interface would supply employee information to the EHR for role-based security management.
 - Billing Control System (BCS) – provided by DMHAS Information Systems Department is an application solution that processes the PNP and EHR encounter (claims) data for billing to the Department of Administrative Services (DAS), the billing agent for DMHAS.
 - Enterprise Data Warehouse (EDW) – Nightly batch process that will receive data from the new EHR. Data collected includes Client Demographics, Admission, Diagnosis, Assessment, Service and Discharge information.
 - CBORD – Nutrition services application.
 - Pyxis – Medication dispensing.
- D) Expected costs related to data migration from legacy systems and data stores. This cost should be estimated based on 3 primary legacy systems and many Excel and MS-Access based data stores. Please provide a process and vendor cost associated with a 'typical' migration from these sources so DMHAS can understand likely costs given associated volume of migration sources.
- E) Remote hosting costs for all proposed applications, by fiscal year, including planned or expected pricing increases.
- F) Total estimated costs, by State fiscal year (assuming [What Date?] project kickoff), including detailed build up to the total (unit costs, number of units, effective dates of any subscription step-ups, software and services elements separate, etc.).
- G) Demonstrated alignment between step-ups in subscription costs to delivery of new services and functionality (not paying for software that is not providing value to taxpayers).
- H) Maximum allowable annual price increases for the duration of the contract term.
- I) Submit all (if any) price assumptions, conditions, or exceptions.
- J) Explanation to support the correlation between the proposed pricing and the proposed technical approach.