Invitation to Negotiate (ITN)

Electronic Health Record (EHR) System

Questions & Answers

ITN#: **171802EHR**

1. I noticed in the ITN that when we try to access the CFBHN's Master Contract with DCF' doc we get an error message and cannot open it? It appears that there's a dead link there. Is this part of the solicitation?

    No, CFBHN's Master Contract is not a part of this solicitation. The link to that resource has been removed.

2. We are unable to access Official Notices, decisions and intended decisions and other matters relating to the procurement, as we keep getting an error notice when attempting to access the Central Florida Behavioral Health Network's website at http://www.cfbhn.org/Pages/Competitive-Procurement-Advertisements.aspx.

    The correct link is: https://www.cfbhn.org/contracting-procurement/. Two references in the ITN were incorrect (section 2.3. and section 4.2.) and will be updated in Addendum 1.

3. In order to be considered for evaluation under this ITN, are there any other requirements (i.e., functional checklists) other than the mandatory requirements found in Section 4.2. Appendix I as well as all items found in Appendix XII?

    No, those are the only requirements that need to be met in order to be considered for evaluation under this ITN.

4. Please clarify if CFBHN prefers a self-hosted environment or a SaaS solution.

    CFBHN requires a system that is hosted by the EHR vendor or is cloud-based.

5. Please provide a breakdown (by role) of the number of active staff who will be using the new system. Please include any eprescribers.

    This is unknown. In the current system there are no ePrescribers. Identifying the costs for ePrescribing would be helpful.

6. Please list your payors and how your invoicing is done today (e.g., EDI).

    This currently includes DCF-SAMH funding, private pay, insurance companies and Medicaid.

7. Can we please have a Word version of the RFP?

Yes, this will be posted in Word format.

8. Will CFBHN act as the Implementation entity for each of the Network Providers who elect to use the EHR?

   CFBHN will assist with connection and setting up user groups, but our involvement with implementation will be limited.

9. Will vendor selection need to pass each Provider Agency's Board?

   We hope to arrange a pricing schedule, but each agency will have their own procedure that they will need to follow.

10. Can you provide a list of participating providers?

    At this time, we only have one who implemented the current EHR. We had two other providers who were prepared for implementation and up to 9 that expressed interest. We are looking for a solution that meets the needs for any providers that may be interested.

11. How many programs are offered by the participating provider groups?

    At this time, there are three programs – case management, outpatient and in-home/on-site. The addition of new providers could expand this list, depending on their needs and the negotiated pricing structure.

12. Will CFBHN consolidate data across all programs for reporting?

    No.

13. Will training of the new system occur at all provider sites or at a central location?

    This will depend on the needs of the providers in the user group. CFBHN is happy to convene the user groups for training.

14. What is the overall budget for the initiative? What percentage will CFBHN fund?

    CFBHN is not directly funding this initiative. The subcontractors will provide funding for the EHR solution.

15. Please provide a list of required forms and reports

    This is not available.

16. Is there any interface required?

    Yes.

17. What is the current EHR system, in place, that CFBHN is running on?

"Psychconsult" for Success 4 Kids & Families.

18. Can CFBHN share the approximate # of provider agencies they expect to "go live" with the solution during the initial implementation?

    Please see answer to question #10.

19. Can CFBHN share the approximate or future estimated total # of provider agencies that will be using the solution?

    Please see answer to question #10.

20. Will any of the provider agencies be licensed as Inpatient Psychiatric Hospitals (i.e this does not include residential care)

    Not at this time.

21. Does CFBHN anticipate providing a centralized project team during the initial implementation of the solution?

    Please see answer to question #8.

22. Will CFBHN identify a centralized/CFBHN team of resources that are responsible for the ongoing maintenance of the solution or will this be the responsibility of each provide/agency?

    The provider agency. CFBHN support will be limited. Please see answer to question #8.

23. The ITN requirements include reference to ePrescribing functionality – how many prescribers should we include in the proposal quote?

    Five (5). This has been added to the scenario through Addendum 1.

24. Can CFBHN share the budget for this project?

    Please see answer to question #14.

25. Should we include fees for one lab connection and a patient portal?

    It is not required, but could be included under "Other Costs".

26. The section 4.3.2.3 appears to imply that you are looking for an system with failover to equipment located at the Providers site.   When questioned about this on the conference call, you indicated that was not the intention, but rather to confirm that the vendor will provide adequate reliability in the cloud and be responsible for managing effective failover and recovery. Please confirm this understanding is correct.

    The vendor is responsible for the failover system and there is no requirement for the provider to be a part of the failover system.

27. For those vendors who do not have a user based pricing model, I had asked on the conference call if it was OK to state any assumptions about the providers and programs in order to establish a forecasted price for a customer of the size stated.   For example, I need to know the number of pages of forms to be setup on the customers system. For example I may use an assumption that 90 pages of forms will be setup on the customers system based upon similar customers using our system, and show the basis for the pricing model. The response to this question was that this was acceptable.   Please confirm.

    Yes, but we ask that you first try to fit your pricing structure within the table provided. Additional explanation is permitted and we added 10 pages to our scenario through Addendum 1.

28. The requirement for signing Appendix II as stated in the Mandatory Criterial Checklist will be eliminated. Please confirm.

    Yes, this was removed.

29. Will CFBHN post a list of those vendors who are responding to the ITN?

    CFBHN will post a list of the top vendors and their scores according to the times outlined in section 2.5. A full list can be made available at the end of the procurement upon request.

30. In the Statement of Assurances, there is the following statement referencing requirements in the PAM 155-2.

    The vendor agrees to comply with activities related to information systems in compliance with the Department's PAM 155-2.

    If I am required to sign agreeing to this statement, I need to make sure I understand what it is referring to. I looked through the 155 pamplet, and I cannot find any specific section or language that this is clearly referencing. Please provide the specific language that I am agreeing to from the Pamphlet and update the form to be signed. If you cannot provide clarity on this, I would need it to say that "The Vendor Agrees to work in good faith to comply…." Since signing the Statement of Assurances form is required, I really need to get clarity for this before I can proceed.

    Pamphlet 155-2 establishes all of the State data reporting (SAMHIS) requirements of CFBHN and its providers. To be considered a responsive vendor in this ITN, a vendor must agree to meet the current requirements and be willing to modify the system as the requirements change.

31. I have looked through the 155 pamplet chapters and do not see any specific sections that detail "activities related to information systems" . I am trying to understand clearly what it is I am agreeing to by signing. I looked through the 155 Pamphlet, and the only section in the 155 pamphlet I can find that relates to IT systems is Chapter 2- Privacy and Security, and it specifically describing the policies and procedures used with the SAMHIS system. This does not

generally reference IT systems, or an EHR vendor because we are not using the SAMHIS system. In other words, I do not think there are any guidelines in the 155 pamphlet that detail "activities related to information systems", only activities related to one unique system (SAMHIS).

Please see answer to question #30.

32. Page 3, 1.2 Statement of Need – 'an EHR System' – do you want 1 central system that can be used by all providers? Or, a small system for each provider?

Each provider's system will be independent.

33. Is Billing for each sub-contractor part of the requirement?

This question is unclear and could be interpreted in multiple ways.

- **The vendor will have to bill each subcontractor independently for this EHR system.**

- **Billing is required for the EHR. In the scenario, we set up three different types of billing.**

34. Is delivery actually 10 days after contract?

No, the delivery date has been removed from Section 2.5.

35. Questions regarding Contract Agreement(s) to be executed and by which parties. Response on call clarified there would be:

1 - A contract executed between EHR Vendor and CFBHN that outlines the negotiated pricing structure, for a typical provider/agency, that would include costs for software licensing, implementation, training, conversion, support, additional costs, etc. as detailed on RFP. Contract would also outline any available tiered or reductions in pricing based on economies of scale.

2- A contract executed between EHR Vendor and Provider/Agency/Sub Contractor that would outline the same negotiated pricing structure as per contract b/w vendor and CFBHN, but be more specific to fit the Provider Agency's needs (# of users requiring access, # of Rx prescribers, etc.).

Yes. CFBHN is negotiating a price structure for our subcontractors to utilize. The vendor will then execute contracts with each subcontractor.

36. Is CFBHN signing a Master agreement with the selected vendor? And, then each sub-contractor signing another?

Please see response to question #35.

37. Question regarding Page 11. Mandatory Criteria – Item 2 – Acceptance of Contract Terms and Conditions, also referenced as Appendix II on page 20. Response on call by CFBHN was that this criteria was not applicable to this ITN and RFP would be amended.

Correct. This was removed in Addendum 1.

38. Will all providers have to use this system in conjunction with their current systems?

    No, providers are not required to replace any current EHRs. Providers may, at their option, take advantage of the prices negotiated through the CFBHN contract.