Request for Proposal (RFP) Template for Health Information Technology

Template

Provided By:
The National Learning Consortium (NLC)

Developed By:
Health Information Technology Research Center (HITRC)
Wisconsin Health Information Technology Extension Center (WHITEC)
Stratis Health
Wide River Technology Extension Center (Wide River TEC)

NATIONAL LEARNING CONSORTIUM

The National Learning Consortium (NLC) is a virtual and evolving body of knowledge and tools designed to support healthcare providers and health IT professionals working towards the implementation, adoption and meaningful use of certified EHR systems.

The NLC represents the collective EHR implementation experiences and knowledge gained directly from the field of ONC's outreach programs (*REC*, *Beacon*, *State HIE*) and through the *Health Information Technology Research Center (HITRC)* Communities of Practice (CoPs).

The following resource is an example of a tool used in the field today that is recommended by "boots-on-the-ground" professionals for use by others who have made the commitment to implement or upgrade to certified EHR systems.

DESCRIPTION

This RFP template is intended to aid providers and health IT implementers throughout the EHR vendor selection process. This template can be used to structure requests for vendors to send proposals on the specific health IT that needs to be acquired.

INSTRUCTIONS

1. Carefully review the template to see if it contains information needed from the vendors. Add, change, and delete information as needed. Update items that are noted <INSERT X> with the appropriate information and remove the <INSERT> prompt.
2. Delete notes that are intended as instructions only.
3. Complete the Cover Page and General Conditions prior to sending to vendors, and complete information for the Vendor Profile before sending (if known).

TABLE OF CONTENTS

1 Complete Aspects of the Template

1.1 PROVIDING INFORMATION

Provide accurate information about the organization so the vendor can target the appropriate products and prepare an accurate price quote. This includes demographic, practice and IT information.

1.2 TIME TO RESPOND

Give vendors 4-6 weeks to respond so that they have adequate time to prepare an appropriate response.

2 Sample RFP

Name of Practice

Request for Proposal:

Electronic Health Record ("EHR") and

Integrated Practice Management System

<INSERT Date>

<INSERT Practice Logo/Brand>

<INSERT Practice Name>
<INSERT Practice Address>
<INSERT City, State Zip Code>
<INSERT Point of Contact: >
<INSERT Phone: (xxx) xxx-xxxx>
<INSERT Fax: (xxx) xxx-xxxx>
<INSERT Email: email@domain.xxx>

<INSERT Practice Name>

Request for Proposal

Date:

To Whom It May Concern:

About <INSERT **Practice Name>**

<INSERT History, organization, operations, staffing, patient population, special goals, etc.>

To meet the deadline for the initial approval, **all responses to this RFP must be received electronically by 5:00 PM (EDT) on** <INSERT Date>. All vendors intending to submit a response are requested to submit a letter of intent along with any questions they may have by <INSERT Date>. All questions from all vendors will be consolidated and answered in writing by 5:00 PM (EDT) on <INSERT Date >. Vendors will review the information posted and communicate any requested changes or updates in writing. Questions and completed responses should be sent to:

<INSERT Point of contact>

<INSERT Role>

Terms and Instructions:

Timeline	
Process	Deadline
Issue RFP	<INSERT Date>
Intent to Respond Due	<INSERT Date>
Written Questions Due	<INSERT Date>
Responses Posted	<INSERT Date>
RFP Responses Due	<INSERT Date>
Vendor of Choice Selected	<INSERT Date>

Letter of Intent to Respond

<INSERT Organization Name> asks that all vendors email a letter of intent declaring their intention to respond to this RFP by the given deadline. The e-mail should be sent to <INSERT Email Address> and received no later than <INSERT Date>. Please include the words "**RFP: Intent to Respond**" in the subject line.

Inquiries

We encourage inquiries regarding this RFP and welcome the opportunity to answer questions from potential applicants. Please direct your questions to <INSERT Email Address>. Please include the words "**RFP: Inquiry**" in the subject line.

Deadline for Response

Interested vendors must submit an electronic copy of their proposed solution to <INSERT Email Address> by <INSERT Date and Time>. Submissions will be confirmed by reply email. Late proposals will not be evaluated.

Submission Process and Requirements

Responses shall be submitted in PDF format and sent using electronic mail. Send your response to: <INSERT Email Address> by the date and time specified above. Receipt will be acknowledged via email. Please include the words "**RFP: Vendor Response**" in the subject line.

Vendors should organize their proposals as defined below to ensure consistency and to facilitate the evaluation of all responses. All the sections listed below must be included in the proposal, in the order presented, with the Section Number listed. The responses shall be submitted in the following format:

- **Section 1** – Executive Summary (provide a concise summary of the products and services proposed)
- **Section 2** – Vendor Profile (provide answers using the template and instructions below)
- **Section 3** – Specifications (provide answers using the template and instructions below)
- **Section 4** – Implementation Plan (provide a high level implementation plan with estimated timeline)
- **Section 5** – Hardware and Configuration Specifications (provide a list of hardware requirements and configuration options [client/server, SaaS, etc.])
- **Section 6** – Cost Estimate (provide answers using the template and instructions below)

General Conditions

<INSERT Organization Name> is not obligated to any course of action as the result of this RFP. Issuance of this RFP does not constitute a commitment by <INSERT Organization Name> to award any contract.

The <INSERT Organization Name> is not responsible for any costs incurred by any vendor or their partners in the RFP response preparation or presentation.

Information submitted in response to this RFP will become the property of <INSERT Organization Name>.

All responses will be kept private from other vendors.

<INSERT Organization Name > reserves the right to modify this RFP at any time and reserves the right to reject any and all responses to this RFP, in whole or in part, at any time.

National Learning Consortium

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	
Name	Click here to enter text.
Address (Headquarters)	Click here to enter text.
Address Continued	Click here to enter text.
Main Telephone Number	Click here to enter text.
Website	Click here to enter text.
Publicly Traded or Privately Held	Click here to enter text.

Parent Company (if applicable)	
Name	Click here to enter text.
Address	Click here to enter text.
Address Continued	Click here to enter text.
Telephone Number	Click here to enter text.

Main Contact	
Name	Click here to enter text.
Title	Click here to enter text.
Address	Click here to enter text.
Address Continued	Click here to enter text.
Telephone Number	Click here to enter text.
Fax Number	Click here to enter text.
Email Address	Click here to enter text.

Market Data	
Number of years as EHR vendor	Click here to enter text.
Number of live sites	Click here to enter text.
Breakdown of sites by provider # (1-5, 6-9, >10)	Click here to enter text.
Number of new EHR installations over the last 3 years?	Click here to enter text.
What is the percentage of vendor-provided installs vs. outsourced to 3rd party companies?	Click here to enter text.
Breakdown of sites by specialty	Click here to enter text.
Size of existing user base	Click here to enter text.
Does the product have a <INSERT State> presence? If so, # of install sites by specialty and size; list of <INSERT State> reference sites.	Click here to enter text.
What is the current implementation timeframe when using only vendor-supplied resources?	Click here to enter text.
Number and percentage of practices in <INSERT Year> that did not get installed four (4) months after signing contract?	Click here to enter text.
How many organizations have de-installed any vendor systems over the past two (2) years? Please specify which systems and why?	Click here to enter text.
What is your EHR customer retention for the years <INSERT Year 1>, <INSERT Year 2>, and <INSERT Year 3>?	Click here to enter text.
Total FTEs Last Year	Click here to enter text.

March 31, 2012 • Version 1.0   8

Total FTEs This Year	Click here to enter text.
Explain how your company is planning to meet the increase in demand for your EHR product (including implementation, training, and support) over the next five (5) years.	Click here to enter text.

Product Information

Product name and version#	Click here to enter text.
When is your next version release?	Click here to enter text.
Single Database for scheduling, billing, and EHR?	Click here to enter text.
Is it a Client Server, ASP or Hosted model?	Click here to enter text.
Does product include a patient portal?	Click here to enter text.

Was the product (or any of its significant functionality) acquired from another company?
    If yes, please answer the following:
    – What was the original company's name that developed the product or functionality?
    – What was the original product's name?
    – What version did you purchase?
	Click here to enter text.

Does the product include a patient portal and/or does it allow integration with 3rd party patient portals (e.g., Google Health, Microsoft HealthVault, iHealth, etc)?	Click here to enter text.
Is the product comprehensive or modular?	Click here to enter text.
Modular – List all modules available, their current version, and provide additional documents with all technical specifications, requirements, and dependencies for each module to operate fully with the "core" product.	Click here to enter text.
– Which modules are necessary in order to meet meaningful use criteria?	Click here to enter text.
– Are additional or multiple modules required to meet post-2011 meaningful use guidelines?	Click here to enter text.
Comprehensive – Does the product meet meaningful use guidelines?	Click here to enter text.
– Will the product continue to meet meaningful use guidelines through 2015 without significant changes?	Click here to enter text.
Will there ever be a charge to copy, move, or retrieve patient data from the product should a customer decide to change vendors or a provider leave the customer?	Click here to enter text.

List all ways that a practitioner could import a patient's data into the product:
    • CD/DVD
    • Flash Drive
    • PDF Format
    • Paper Copies
    • Clinical Exchange Document
	Click here to enter text.

Reporting Capabilities

Does the product allow custom reports to be created?	Click here to enter text.
Ad hoc reporting by users an option?	Click here to enter text.
Provide a list of standard reports (no customization) which the customer may run at Go Live to meet meaningful use and/or HIPAA requirements.	Click here to enter text.

Can this report information be exported to CD/DVD in CSV or comma text delimited format?	Click here to enter text.

ONC-ATCB Certification

Is the product ONC-ATCB certified?	Click here to enter text.
Version and Year of Certification	Click here to enter text.
Certified as Comprehensive or Modular?	Click here to enter text.

Meaningful Use

Are the modules necessary to meet each of the menu set objectives included in the attached pricing, or are they sold separately at an additional cost?	Click here to enter text.
Do you have a guarantee the product will meet the current standards and future standards?	Click here to enter text.

Additional Information

Timeframe to receive demonstration of product	Click here to enter text.
Is a demo copy available prior to purchasing?	Click here to enter text.
Onsite implementation or remote?	Click here to enter text.
Training sites	Click here to enter text.
Training options (train-the-trainer, # hours all staff)	Click here to enter text.
Has your company acquired, been acquired, merged with other organizations, or had any "change in control" events within the last five (5) years? (If yes, please provide details.)	Click here to enter text.
Is your company planning to acquire, be acquired, merge with other organizations, or have any "change in control" events within the next five (5) years? (If yes, please provide details.)	Click here to enter text.

Does your company use resellers to distribute your product(s)?
     If yes, please answer the following:
     – What is your reseller structure?
     – Who are your resellers who are authorized to sell within [STATE]?
     If no, please answer the following:
     – What is your distribution and sales structure?
	Click here to enter text.

Please provide information on any outstanding lawsuits or judgments within the last five (5) years. Please indicate any cases that you cannot respond to as they were settled with a non-disclosure clause.	Click here to enter text.

Security and Security Features

Describe how the product meets all HIPAA, HITECH, and other security requirements.	Click here to enter text.
Does the product provide different levels of security based on User Role, Site, and/or Enterprise settings?	Click here to enter text.
Does the product provide different levels of security based on type of patient (Employee vs. VIP)?	Click here to enter text.
Describe the audit process within the product.	Click here to enter text.
List the security reports the product provides at Go-Live to meet all auditing and HIPAA reporting needs.	Click here to enter text.
Describe any remote tools you offer the provider to access patient data (e.g. iPhone) and how these devices/data may be secured if the provider loses their device or a breach is suspected.	Click here to enter text.
Describe the product's ability to terminate user connections/sessions by an administrator (remotely) if a breach is suspected.	Click here to enter text.
Describe the product's ability to lockout users (for upgrades, security breaches, employee terminations, etc).	Click here to enter text.
Describe the product's ability to create new security rights/roles based on new workflows or enhancements (e.g., customer-developed content such as Psych notes or departmental flowsheets).	Click here to enter text.

Data Protection

Describe how the patient's data is secured at all times and in all modules of the product (e.g., strong password protection or other user authentication, data encrypted at rest, data encrypted in motion).	Click here to enter text.
Describe how the patient's data is secured when accessed via handheld devices (e.g., secured through SSL web sites, iPhone apps, etc).	Click here to enter text.

Licensing

How is the product licensed?	Click here to enter text.
Are licenses purchased per user?	Click here to enter text.
Define 'user' if it relates to the licensing model (i.e., FTE MD, all clinical staff, etc).	Click here to enter text.
– How does the system licensing account for residents, part time clinicians, and midlevel providers?	Click here to enter text.
– Can user licenses be reassigned when a workforce member leaves?	Click here to enter text.
If licensing is determined per workstation, do handheld devices count towards this licensing?	Click here to enter text.
Is system access based on individual licensing, concurrent, or both?	Click here to enter text.
What does each license actually provide?	Click here to enter text.
For modular systems, does each module require a unique license?	Click here to enter text.
In concurrent licensing systems, when are licenses released by the system (i.e., when the workstation is idle, locked, or only when user logs off)?	Click here to enter text.

Computerized Physician Order Entry (CPOE)

Is CPOE part of the core product or a separate module?	Click here to enter text.
Is CPOE customizable per provider or are templates available?	Click here to enter text.
– Does the system allow for custom Order Sets to be built?	Click here to enter text.
– Does the system allow multiple Resultable Items to be mapped to a single Orderable Item? (e.g., Skin tests have multiple antigens (resultables) which must map to a single Orderable item code).	Click here to enter text.
Does the system allow free text ordering?	Click here to enter text.
Does the system provide the end user the ability to cancel pending orders?	Click here to enter text.
– If so, does an outbound interface message result, sending the cancellation message to 3rd party systems?	Click here to enter text.
Does the system utilize ICD9 or ICD10 coding?	Click here to enter text.
– Are codes pre-loaded?	Click here to enter text.
– Are future code updates vendor or user applied?	Click here to enter text.
Does the system allow custom questions per order to be developed?	Click here to enter text.
– If so, please describe how these items are built and managed by the customer.	Click here to enter text.
– Can these items be classified as "required" or "optional" to complete?	Click here to enter text.
Does the product support recurring orders?	Click here to enter text.
– If so, please describe how the system accommodates this workflow.	Click here to enter text.
Does the product support Orderable Favorites per user and/or per specialty?	Click here to enter text.
How does the product support ordering for off-site (non-integrated/interfaced) orders?	Click here to enter text.
Are there Reporting tools available to monitor all CPOE steps? (e.g., unsigned orders, overdue orders, etc.)	Click here to enter text.
Which LIS vendors currently interface "out of the box" with CPOE?	Click here to enter text.
Which RIS/PACS systems interface "out of the box" with CPOE?	Click here to enter text.

E-Prescribing

Is E-Prescribing part of the core product or a separate module?	Click here to enter text.
Is E-Prescribing customizable per provider and/or at the enterprise level?	Click here to enter text.
What are the E-Signature Requirements for E-Prescribing?	Click here to enter text.
– What is required of the customer in order to set this up?	Click here to enter text.
Which local or national pharmacies interface with the EHR?	Click here to enter text.
– How are these updated and with what frequency?	Click here to enter text.
Is there an extra expense required for local pharmacies to be set up for E-Prescribing?	Click here to enter text.
– Rate per transmission?	Click here to enter text.
– What form of transmission is required?	Click here to enter text.
Is there a fax server incorporated in the EHR?	Click here to enter text.
– If so, does it require a separate server?	Click here to enter text.
– If not, are 3rd party vendor fax servers supported?	Click here to enter text.

– Which vendors are supported?	Click here to enter text.
Can Rx faxes be configured to use a separate fax queue from other faxed documents within the system?	Click here to enter text.
Is there a functional limit to the number of fax lines supported by the system?	Click here to enter text.
Can active faxes be cancelled during transmission by user or by system administrators?	Click here to enter text.
What security settings are available in the product to govern who can E-Prescribe?	Click here to enter text.
Are medication updates performed regularly?	Click here to enter text.
– Which vendor(s) does the product support?	Click here to enter text.
– Does it include Drug Contraindications?	Click here to enter text.
– Does it include Drug Interactions?	Click here to enter text.
– Does it include Drug Warnings received?	Click here to enter text.
Are reporting tools for E-Prescribing available?	Click here to enter text.
Describe how new medications are displayed in the system if added by: • MD • RN • MA • PA/NP • Residents	Click here to enter text.
Where is E-Prescription information housed in the EHR?	Click here to enter text.
Describe the audit features for E-Prescribing.	Click here to enter text.
– Does the system keep a running history of Rx renewal changes?	Click here to enter text.

Infrastructure and Technology

If product is a client/server model, please respond to questions below:	
What type of hardware is required?	Click here to enter text.
What are the recommended workstation requirements?	Click here to enter text.
What are the recommended server specifications?	Click here to enter text.
Recommended Manufacturer/Model?	Click here to enter text.
How many servers and server roles?	Click here to enter text.
• Application Server	Click here to enter text.

• Web Server
    – IIS (version)
    – Apache (version)
	Click here to enter text.

• Other	Click here to enter text.
• Database Server	Click here to enter text.
• MS SQL (version)	Click here to enter text.
• Oracle (version)	Click here to enter text.
• Other	Click here to enter text.
• HL7 Interface System	Click here to enter text.
• Test Server	Click here to enter text.
• E-mail Server	Click here to enter text.
• Others (Fax, Print, Dictation, etc)	Click here to enter text.

• Operating system (Windows, Unix/Linux, Other)	Click here to enter text.
• Processor (number of processors and processor speed)?	Click here to enter text.
• Memory/RAM requirements?	Click here to enter text.
• Storage Space Requirements?	Click here to enter text.
• SANs Connectivity (Yes/No)	Click here to enter text.
– If yes, SANs requirements?	Click here to enter text.
• Network Card Speeds	Click here to enter text.
Dual NICs required?	Click here to enter text.
Other Components Required?	Click here to enter text.
What other applications are required for server?	Click here to enter text.
• Server Management Tools	Click here to enter text.
• Bandwidth Monitors	Click here to enter text.
• Database Management Suite	Click here to enter text.
Can systems be virtualized?	Click here to enter text.
– Will the product run on virtualized servers?	Click here to enter text.
– If yes, what virtualization and remote access software is required on server?	Click here to enter text.
• Citrix	Click here to enter text.
• BMC	Click here to enter text.
• Other	Click here to enter text.
– If no, are you moving toward certifying virtualized environments?	Click here to enter text.
Are we required to purchase hardware from your company?	Click here to enter text.
Do you have a recommended vendor with discount pricing to purchase equipment?	Click here to enter text.
What type of support is available if equipment purchased from your company?	Click here to enter text.
What are the recommended printer manufacturers/models?	Click here to enter text.
– What type(s) of printers are recommended? (Laser, Inkjet, Thermal)	Click here to enter text.
What are the recommended scanner manufacturers/models?	Click here to enter text.
Do you require Internet access for your product?	Click here to enter text.
– For remote connection/maintenance?	Click here to enter text.
– If so, please detail security setup required for this access. If Delta processes are initiated and data is downloaded into the system automatically, detail that information here.	Click here to enter text.
– Remote Support?	Click here to enter text.
– If so, please detail security setup and access rules governing when connections are created and what type of work can be performed on the live system during normal business hours.	Click here to enter text.
– Access System/Application Remotely?	Click here to enter text.
– Are there any Delta processes that run nightly/weekly/etc. and if so, what data is collected and how is it used?	Click here to enter text.
What are the minimum network infrastructure requirements?	Click here to enter text.
– Firewall/VPN Appliance?	Click here to enter text.
– Switches/Routers	Click here to enter text.

– Other Devices	Click here to enter text.
Will your product operate on Windows Terminal Services or Citrix?	Click here to enter text.
– If no, are there plans to certify in these environments?	Click here to enter text.
What are the backup requirements?	Click here to enter text.
– Do you require a separate server for backup services? (Tape, SANs)	Click here to enter text.
Are 3rd party backup solutions supported?	Click here to enter text.
Does product provide database software (Yes/No)?	Click here to enter text.
– If no, what database application is required? (MS SQL, Oracle, MySQL, Other)	Click here to enter text.
Can data be exported?	Click here to enter text.
– What format? (CSV, Text/Comma delimited, Other)	Click here to enter text.
Does product allow for ad hoc reporting against the database by customer using standard reporting software (Crystal Reports) or standard database queries?	
Infrastructure and Technology	
If product is an ASP model, please respond to questions below:	
Do you provide ASP solutions or require 3rd party vendor participation?	Click here to enter text.
What is the 3rd party vendor's involvement?	Click here to enter text.
How are support issues handled?	Click here to enter text.
Does the ASP model require a server at the customer location?	Click here to enter text.
– If yes, what are the system requirements?	Click here to enter text.
• Number of Server(s)?	Click here to enter text.
• Processor	Click here to enter text.
• Storage and Fault Tolerance Requirements?	Click here to enter text.
• Memory? – <25 concurrent users – >25 concurrent users	Click here to enter text.
• Bandwidth Requirements?	Click here to enter text.
• System Backup Requirements?	Click here to enter text.
– Types of Server(s)	Click here to enter text.
• Database Servers	Click here to enter text.
• Web Servers	Click here to enter text.
• Interface Servers	Click here to enter text.
• Scanning Servers	Click here to enter text.
• Messaging (Fax, E-Prescribing, Print) Servers – If fax from server, what fax cards are supported? – Is separate fax software needed?	Click here to enter text.
Is virtualization supported or required (VMWare, XenApp, etc.)?	Click here to enter text.
– If so, on which servers and in what configuration?	Click here to enter text.
Are Citrix and/or Terminal Services supported?	Click here to enter text.
– If so, are there any application modules not supported or recommended for use in a virtualized environment?	Click here to enter text.
Does your product require or recommend a firewall?	Click here to enter text.
– If yes, what is the recommended manufacturer/model?	Click here to enter text.

– Do you recommend VPN access?	Click here to enter text.
Do you provide all CALs (client access licenses) for database and system access or does the customer purchase these?	Click here to enter text.
– If customer must purchase, how many need to be purchased based on expected number of users on the product?	Click here to enter text.
List all security enhancements which must be accommodated on workstations (e.g., Internet sites trusted, active x controls enabled, Dot Net versions supported, registry modifications, etc).	Click here to enter text.
Does the product support any of the following external devices: • USB devices • Scanners (manufacturer/model) • Flatbed • Handheld (i.e., Barcode, PDA, BlackBerry Devices, etc.) • Card Readers (i.e. smart card, security • Other Input Devices	Click here to enter text.
What are the bandwidth requirements per user?	Click here to enter text.
What are the workstation requirements?	Click here to enter text.
Manufacturer/Model • Processor • Storage • Memory • Operating System	Click here to enter text.
Does the product require any type of client (i.e. Citrix, clientware, Cisco VPN, etc.)?	Click here to enter text.
What applications are supported and/or need to be installed on the workstation? • Java • Flash • Adobe Reader • Microsoft Office (i.e., Word, Excel, etc.) • Antivirus • Which folders/files must be excluded from active scanning? • Crystal Reports • Open Office • Remote Access Software (WinVNC, RDP, GoToMyPC, etc.) for support	Click here to enter text.
Require ODBC driver or SQL application on workstations?	Click here to enter text.
Any other applications required?	Click here to enter text.
Can the product be securely accessed from any location with an Internet/broadband connection?	Click here to enter text.
How is data saved at the ASP location?	Click here to enter text.
How often is routine maintenance performed on remote system? • Backups? • Updates? • Performance Monitoring and Enhancements	Click here to enter text.
Since we would be dependent on Internet connection, what is our strategy if the Internet connection goes down and cannot use your system?	Click here to enter text.
How will the customer be able to download and distribute the patient's health record to meet meaningful use?	Click here to enter text.

How will the customer be able to upload patient-provided records (either paper or electronic format (radiology, medical records, lab data, etc.))?	Click here to enter text.

Infrastructure and Technology

If product is a SaaS model, please respond to questions below:

Do you provide direct SaaS solutions or require 3rd party vendor participation?	Click here to enter text.
How are support issues handled?	Click here to enter text.
Does a 3rd party vendor host any part of your product and/or data?	Click here to enter text.
Does your product require or recommend a firewall on the client side?	Click here to enter text.
− If yes, what is the recommended manufacturer/model?	Click here to enter text.
Can the product be securely accessed from any location with an Internet/broadband connection?	Click here to enter text.
− What are the security requirements for remote users (non-office users)?	Click here to enter text.
What are the minimum bandwidth requirements?	Click here to enter text.
List all security enhancements which must be accommodated on client workstations (e.g., Internet sites trusted, active x controls enabled, Dot Net versions supported, registry modifications, etc.).	Click here to enter text.
Does the product support any of the following external devices: • USB Devices • Scanners (Manufacturer/Model) • Flatbed • Handheld (i.e., Barcode, PDA, BlackBerry Devices, etc.) • Card Readers (i.e., Smart Card, Security) • Other Input Devices	Click here to enter text.
What are the workstation requirements?	Click here to enter text.
Manufacturer/Model • Processor • Storage • Memory • Operating System	Click here to enter text.
Does the product require any type of client (i.e. Citrix, clientware, Cisco VPN, etc.)?	Click here to enter text.
What applications are supported and/or need to be installed on the workstations? • Java • Flash • Adobe Reader • Microsoft Office (i.e., Word, Excel, etc.) • Antivirus • Which folders/files must be excluded from active scanning? • Crystal Reports • Open Office • Remote Access Software (WinVNC, RDP, GoToMyPC, etc.) for support	Click here to enter text.
Require ODBC driver or SQL application on workstations?	Click here to enter text.
Any other applications required?	Click here to enter text.
How is data saved and stored?	Click here to enter text.

How will the customer be able to download and distribute the patient's health record to meet meaningful use?	Click here to enter text.
How will the customer be able to upload patient-provided records (either paper or electronic format (radiology, medical records, lab data, etc.))?	Click here to enter text.
Can information be exported to CD/DVD in CSV or comma text delimited format?	Click here to enter text.
Does product allow reports be created?	Click here to enter text.
– Ad hoc reporting option?	Click here to enter text.
– Provide a list of standard reports (no customization) which the customer may run to meet meaningful use requirements.	Click here to enter text.

How often is routine maintenance performed on remote system?
  • Backups?
  • Updates?
  • Performance Monitoring and Enhancements
	Click here to enter text.

Can you provide a contingency strategy or disaster recovery plan in the event Internet service is lost and customer is unable to access your system and application?	Click here to enter text.
Do you have normal 'downtime' windows for system backup and maintenance?	Click here to enter text.
– Does this affect access to the product?	Click here to enter text.
How is data gathered during Internet outages?	Click here to enter text.

Is it uploaded into the system when Internet restored?
  • Is this process done manually or automatically?
  • How do we verify information has been uploaded?
	Click here to enter text.

In the event access to your site is unavailable, what steps will you take to notify the customer of progress towards resolving the issue?	Click here to enter text.
– What steps should the customer take during this time?	Click here to enter text.
In the past two (2) years, how many outages have you experienced due to your own infrastructure problems?	Click here to enter text.
Do you have redundant Internet providers?	Click here to enter text.
Is there a patient portal?	Click here to enter text.
Is there a test environment for the customer to use?	Click here to enter text.
What are the network infrastructure requirements?	Click here to enter text.
What are your security requirements and recommendations for client workstations?	Click here to enter text.
Is your site secured with encryption and antivirus?	Click here to enter text.
– How often is access audited and by whom?	Click here to enter text.
– Is there an off-site disaster recovery location for your server farm?	Click here to enter text.
– How often is this tested?	Click here to enter text.
Vendor Support	
Do you offer multiple support programs? Please provide a detailed list of each with your standard SLA for each support program.	Click here to enter text.
What are your support statistics (# of Support Calls to the % of resolutions at each severity level)?	Click here to enter text.
Define the Support Structure (Tiered Approach, Client assigned 1 point of contact, etc.)	Click here to enter text.
What is your availability to the practice for meetings to discuss EHR issues and concerns?	Click here to enter text.

When is customer support available? • Preferred method of contact (Phone call, e-mail, etc.)? • Where is your customer support staff located? Are they 'off-shore'? • What are your normal hours of support? • How is after hours support handled? • Will someone be on-call at all times?	Click here to enter text.
Problem/Resolution Process • Response time expectations for all levels of severity • Average time to close tickets by severity level • Escalation Process • Severity Level System • Issue/Resolution Tracking System • Test System vs. Live System	Click here to enter text.
Who has ownership of the following: • Data • Software • Enhancements or Customizations Paid for by Customer • Hardware • Servers • Workstations	Click here to enter text.
What are your additional fee based services?	Click here to enter text.
Do you have online support (Knowledgebase, InfoCenter, etc.)?	Click here to enter text.
Is your support staff certified (i.e., HDI, SCP)?	Click here to enter text.
Is remote assistance an option for workstation and server issues?	Click here to enter text.
Describe Enhancement Request Model	Click here to enter text.
Do you have a user forum for practices to seek help from peers and share ideas?	Click here to enter text.
Do you have regional and national user conferences?	Click here to enter text.
On-going Maintenance	Click here to enter text.
Upgrade Process • Will customer get to choose which upgrades they want? • Frequency of Upgrades? • How long can a customer delay an upgrade without losing support? • Will training be provided for new functionality?	Click here to enter text.
Testing • Will customer get a chance to test the product in a test environment? • Will customer get access to test scripts from vendor? • Will customer have an opportunity to parallel test with vendor or conduct Acceptance Testing? • End to End Testing?	Click here to enter text.

Product Enhancement Requests • If customer wants to add an enhancement, what is the process? • Are there additional costs for an enhancement? • How soon will customer be able to view, test, and use enhancement? • How will upgrades work with new enhancement? • Will all other customers get the enhancement one company has paid for? • How will the company stay up-to-date on required meaningful use definition changes?	Click here to enter text.

Training/Testing – All Phases (Selection through Post Go-Live)

Development/Training Environment	Click here to enter text.
Specify if this will be provided before or after a contract is signed.	Click here to enter text.
Will access be granted to development/training environment for testing during upgrades and during training processes?	Click here to enter text.
What types of online training are available?	Click here to enter text.
Videos • Recorded Modules/Workflow Training Courses • Recorded Interactive "Many-to-One" Training Sessions • Quick Reference or Tips & Tricks Videos • Trial Demonstration of EHR	Click here to enter text.
Web Based Training • Interactive training activity with screenshots & instructions to give clinic exposure of EHR selected before core training	Click here to enter text.
Facilitator/Consultant Led Training Sessions • Module Training Sessions • Workflow Training Sessions (Nurse, Provider, Front Office, etc.) • One-on-One Training Sessions with Consultant • Describe your training personnel (i.e., background, position, medical credentials). • Vendor-Directed Demo (i.e., Web Ex Training, On-Site, etc.)	Click here to enter text.
Training Documents (Identify format of documentation) • Training Manuals • Quick reference guides that focus on specific tasks • On-line Printable Training Documentation • Upgraded Training Guide • Describe when these documents are modified and how quickly they are made available to the customer after product changes occur.	Click here to enter text.
Is Practice/Specialty Specific Training Offered?	Click here to enter text.
What is created by vendor vs. customer? – Creating specialized templates for efficient documentation – Creating favorites/shortcuts within the product – Does the product have customizable preferences?	Click here to enter text.

Will a workflow assessment be completed by the vendor?
   –   Will a document be sent to be completed by clinic?
   –   Will vendor complete on-site workflow assessment?
   –   Is there an additional cost for workflow assessment?
	Click here to enter text.

Will recommendations be provided for abstracting or bulk loading data from paper charts into the EHR?	Click here to enter text.
Contractually, can users access the live EMR system prior to Go-Live for build or 'pilot' purposes?	Click here to enter text.

Super User Training
   –   Will super users be trained by vendor?
   –   Remote or on-site training provided?
	Click here to enter text.

Cost of Training
   –   Describe training options included in contract agreement.
   –   Will additional costs be incurred on clinic for training?
	Click here to enter text.

On-Site Training
   –   How many days does EHR vendor provide for on-site training?
   –   Will Go-Live be scheduled shortly after initial staff training?
   –   What is the consultant/provider ratio during training?
   –   Will trainers complete a readiness assessment before Go-Live?
   –   Will vendor provide clinic with on-site demos before and after contract is signed?
   –   Will office be trained on hardware if purchased through the vendor before Go-Live training?
	Click here to enter text.

Go-Live	Click here to enter text.
Will vendor staff be on-site during 'Go Live' timeframe?	Click here to enter text.

What will be their role during 'Go Live'?
   –   Trainer
   –   Technical
	Click here to enter text.

Post Go-Live Training and Support	Click here to enter text.
After 'Go-Live', who (i.e., support team, implementation manager, etc.) will be available to answer questions, issues, and/or training requests? – If original implementation team, how long before this level of service is transferred to "normal" support team?	Click here to enter text.
Will a post Go-Live assessment be completed after a specified amount of time by the vendor?	Click here to enter text.
How will clinic be notified of upgrades when they are released and who is responsible for installing these updates (dates, training, documentation, etc.)?	Click here to enter text.
Contract Terms and Vendor Guarantees	
Will the customer be allowed to perform acceptance testing of this product prior to "Go-Live"?	Click here to enter text.
Will the customer be allowed to make payments based upon milestones with a significant portion of the fees not payable until "Go-Live"?	Click here to enter text.

What is the vendor's responsibility when: – Problem resolution is not met by a certain time based on severity level of the problem or issue? – Meaningful use criteria are not met as promised? – Upgrades cause problems (causes meaningful use criteria to no longer be met or critical workflows to break)? – Training is not conducted in agreed upon timeframe and/or the training materials are not adequate or delivered per contract deliverables? – Implementation is not completed by vendor in the agreed upon timeframe due to issues related to the vendor (staffing conflicts, software problems, etc.)? – Incompatibility issues arise between hardware (which meets agreed upon specifications) and approved software? – Promised product functionality does not exist at time of Implementation? – Damages to hardware during transport if purchased through vendor or while vendor is on-site during installation? – Data is corrupted during the course of normal use and operation of the product? – SLAs are not met?	Click here to enter text.
Will you allow the representations made in your response to this RFI to be incorporated into the contract?	Click here to enter text.
Will you agree to a cap on price increases? For how long?	Click here to enter text.
How long will you guarantee to provide maintenance (or other support) on this product?	Click here to enter text.
What is the process that you will follow when "sunsetting" this product?	Click here to enter text.
Will you escrow the source code for this product?	Click here to enter text.
Will you agree to the contract being governed by [STATE] law (including the applicable provisions of the UCC)?	Click here to enter text.
Will you agree to negotiate a standard form contract for use by [REC] clients?	Click here to enter text.
Other Vendor Services Offered	
What other companies have you partnered with to provide services on your behalf and what are their contact information?	Click here to enter text.
If their work is done on your behalf (implementation, upgrades, etc.), do you warranty their work as if it was your own?	Click here to enter text.

Specifications

When responding to each item in the specifications section, place an "X" under one of the following columns:

"Yes, Included" = the function is available in the system and it is part of the basic system

"Yes, Additional Cost" = the function is available but it requires system customization at an additional cost

"No" = the function is not available

Use the column labeled "**Comments / Clarifications**" to include additional information you wish to include as part of your response. This column can also be used to indicate if a function is not currently available but will be available in a future release by indicating the version number and approximate month/year when the function will be available (e.g. Version 8.2/August 2012). No comment or clarification should exceed half a page in length. Comments and Clarifications may be provided on a separate attachment.

Specifications	Yes, Included	Yes, Addtl. Cost	No	Comments / Clarifications
1. General				
1.1 The system supports both a total paperless function and a hybrid function, where the contents of the electronic record can be printed for inclusion in the paper chart.	☐	☐	☐	Click here to enter text.
1.2 The system includes automatic translation of codes to data.	☐	☐	☐	Click here to enter text.
1.3 The system includes support and updates for the above vocabularies.	☐	☐	☐	Click here to enter text.
1.4 The system includes SNOMED CT as the integrated standard nomenclature of clinical terms.	☐	☐	☐	Click here to enter text.
1.5 Your company provides after-hours call center support for the system.	☐	☐	☐	Click here to enter text.
2. Demographics / Care Management				
2.1   The system has the capability to record demographics including:
2.2 Preferred language, insurance type, gender, race, ethnicity, and date of birth.	☐	☐	☐	Click here to enter text.
2.3 The system supports the Continuity of Care Document Continuity of Care Record, HITSP standard.	☐	☐	☐	Click here to enter text.
2.4 The system has the capability of importing patient demographic data via HL7 interface from an existing Practice Management System, Patient Registration System, or any such system used for patient registration and/or scheduling.	☐	☐	☐	Click here to enter text.
3. Patient History				
3.1 The system has the capability to import patient health history data, including obstetrical history data, from an existing system.	☐	☐	☐	Click here to enter text.
3.2 The system presents a chronological, filterable, and comprehensive review of patient's EHR, which may be summarized and printed, subject to privacy and confidentiality requirements.	☐	☐	☐	Click here to enter text.
4. Current Health Data, Encounters, Health Risk Appraisal				
4.1 The system includes a combination of system default, provider customizable, and provider-defined and reusable templates for data capture.	☐	☐	☐	Click here to enter text.
4.2 The system obtains test results via standard HL7 interface from: laboratory.	☐	☐	☐	Click here to enter text.
4.2.1. The system obtains test results via standard HL7 interface from: radiology/ imaging.	☐	☐	☐	Click here to enter text.

Specifications	Yes, Included	Yes, Addtl. Cost	No	Comments / Clarifications
4.2.2. The system obtains test results via standard HL7 interface from: other equipment such as Vitals, ECG, Holter, Glucometer.	☐	☐	☐	Click here to enter text.
4.3 The system has the capability to capture and monitor patient health risk factors in a standard format.	☐	☐	☐	Click here to enter text.
4.4 The system provides a flexible, user modifiable, search mechanism for retrieval of information captured during encounter documentation.	☐	☐	☐	Click here to enter text.
4.5 The system provides a mechanism to capture, review, or amend history of current illness.	☐	☐	☐	Click here to enter text.
4.6 The system enables the origination, documentation, and tracking of referrals between care providers or healthcare organizations, including clinical and administrative details of the referral.	☐	☐	☐	Click here to enter text.
4.7 The system tracks consultations and referrals.	☐	☐	☐	Click here to enter text.
5. Encounter – Progress Notes				
5.1 The system records progress notes utilizing a combination of system default, provider customizable, and provider-defined templates.	☐	☐	☐	Click here to enter text.
5.2 The system includes a progress note template that is problem oriented and can, at the user's option be linked to either a diagnosis or problem number.	☐	☐	☐	Click here to enter text.
6. Problem Lists				
6.1 The system creates and maintains patient-specific problem lists.	☐	☐	☐	Click here to enter text.
6.2 For each problem, the systems has the capability to create, review, or amend information regarding a change on the status of a problem to include, but not be limited to, the date the change was first noticed or diagnosed.	☐	☐	☐	Click here to enter text.
7. Clinical Practice Guidelines (CPG)				
7.1 The system includes and maintains evidence-based Clinical Practice Guidelines (CPGs) published and maintained by credible sources such as the American Heart Association (AHA), U.S. Preventive Services Task Force (USPSTF), American College of Cardiologists (ACC), American College of Physicians (ACP) and other groups. The guidelines incorporate patient education and **actionable** alerts and reminders.	☐	☐	☐	Click here to enter text.
7.2 The system allows reporting and analysis of any / all components included in the CPG.	☐	☐	☐	Click here to enter text.
7.3 Included in each CPG, the system has the capability to create, review, and update information about:	☐	☐	☐	Click here to enter text.
7.3.1 The performance measures that will be used to monitor the attainment of objectives.	☐	☐	☐	Click here to enter text.
7.3.2 The quantitative and qualitative data to be collected.	☐	☐	☐	Click here to enter text.

Specifications		Yes, Included	Yes, Addtl. Cost	No	Comments / Clarifications
7.3.3	Performance metrics: CPG shall allow for decision support based on standardized discrete data to be used to calculate clinical performance measures.	☐	☐	☐	Click here to enter text.
7.3.4	Collection means and origin of data to be evaluated.	☐	☐	☐	Click here to enter text.
7.4	The system allows the provider or other authorized user to override any or all parts of the guideline. The system is able to collect exceptions for NOT following the CPG.	☐	☐	☐	Click here to enter text.
8.	**Care Plans**				
8.1	The system provides administrative tools for organizations to build care plans, guidelines, and protocols for use during patient care planning and care.	☐	☐	☐	Click here to enter text.
8.2	The system generates and automatically records in the care plan document, patient-specific instructions related to pre- and post-procedural and post-discharge requirements. The instructions must be simple to access.	☐	☐	☐	Click here to enter text.
9.	**Prevention**				
9.1	The system has the capability to display health prevention prompts on the summary display. The prompts must be dynamic and take into account sex, age, and chronic conditions.	☐	☐	☐	Click here to enter text.
9.2	The system includes user-modifiable health maintenance templates.	☐	☐	☐	Click here to enter text.
9.3	The system includes a patient tracking and reminder capability (patient follow-up) updatable by the user at the time an event is set or complied with.	☐	☐	☐	Click here to enter text.
10.	**Patient Education**				
10.1	The system has the capability to create, review, update, or delete patient education materials. The materials must originate from a credible source and be maintained by the vendor as frequently as necessary.	☐	☐	☐	Click here to enter text.
10.2	The system has the capability of providing printed patient education materials in culturally appropriate languages on demand or automatically at the end of the encounter. At minimum, the materials must be provided in English and Spanish as applicable.	☐	☐	☐	Click here to enter text.
11.	**Alerts / Reminders**				
11.1	The system includes user customizable alert screens / messages, enabling capture of alert details.	☐	☐	☐	Click here to enter text.
11.2	The system has the capability of forwarding the alert to a specific provider(s) or other authorized users via secure electronic mail or by other means of secure electronic communications.	☐	☐	☐	Click here to enter text.
12.	**Orders**				

Specifications	Yes, Included	Yes, Addtl. Cost	No	Comments / Clarifications
12.1 The system includes an electronic Order Entry module that has the capability to be interfaced with a number of key systems depending on the health center's existing and future systems as well as external linkages, through a standard, real time, HL7 two-way interface.	☐	☐	☐	Click here to enter text.
12.2 The system displays order summaries on demand to allow the clinician to review/correct all orders prior to transmitting/printing the orders for processing by the receiving entity.	☐	☐	☐	Click here to enter text.
13. Results				
13.1 The system has the capability to route, manage, and present current and historical test results to appropriate clinical personnel for review, with the ability to filter and compare results.	☐	☐	☐	Click here to enter text.
13.1.1 Results can be easily viewed in a flow sheet as well as graph format.	☐	☐	☐	Click here to enter text.
13.2 The system accepts results via two way standard interface from all standard interface compliant / capable entities or through direct data entry. Specifically – Laboratory, Radiology, and Pharmacy information systems. Please attach list of currently available interfaces, if available	☐	☐	☐	Click here to enter text.
13.3 The system includes an intuitive, user customizable results entry screen linked to orders.	☐	☐	☐	Click here to enter text.
13.4 The system has the capability to evaluate results and notify the provider.	☐	☐	☐	Click here to enter text.
13.5 The system allows timely notification of lab results to appropriate staff as well as easy routing and tracking of results.	☐	☐	☐	Click here to enter text.
13.6 The system flags lab results that are abnormal or that have not been received.	☐	☐	☐	Click here to enter text.
14. Medication and Immunization Management				
14.1 The system identifies drug interaction warnings (prescription, over the counter) at the point of medication ordering. Interactions include: drug to drug, drug to allergy, drug to disease, and drug to pregnancy.	☐	☐	☐	Click here to enter text.
14.2 The system alerts providers to potential administration errors for both adults and children, such as wrong patient, wrong drug, wrong dose, wrong route, and wrong time in support of medication administration or pharmacy dispense/supply management and workflow.	☐	☐	☐	Click here to enter text.
14.3 The system supports multiple drug formularies and prescribing guidelines.	☐	☐	☐	Click here to enter text.
14.4 The system provides the capability for electronic transfer of prescription information to a patient or organization selected pharmacy for dispensing.	☐	☐	☐	Click here to enter text.
15. Confidentiality and Security				

Specifications	Yes, Included	Yes, Addtl. Cost	No	Comments / Clarifications
15.1 The system provides privacy and security components that follow national standards such as HIPAA.	☐	☐	☐	Click here to enter text.
15.2 The system provides privacy and security components that follow Wisconsin state-specific laws and regulations.	☐	☐	☐	Click here to enter text.
15.3 The system hardware recommendations meet national security guidelines.	☐	☐	☐	Click here to enter text.
15.4 The system has hardware recommendations for disaster recovery and backup.	☐	☐	☐	Click here to enter text.
16. Clinical Decision Support				
16.1 The system offers prompts to support the adherence to care plans, guidelines, and protocols at the point of information capture.	☐	☐	☐	Click here to enter text.
16.2 The system triggers alerts to providers when individual documented data indicates that critical interventions may be required.	☐	☐	☐	Click here to enter text.
17. Reporting				
17.1 Are standard clinical reports built into the system for the user to query aggregate patient population numbers?	☐	☐	☐	Click here to enter text.
17.2 The system can generate lists of patients by specific conditions to use for quality improvement.	☐	☐	☐	Click here to enter text.
17.3 The system has the capability to report ambulatory quality measures to CMS for PQRI.	☐	☐	☐	Click here to enter text.
17.4 The system can generate patient reminder letters for preventive services or follow-up care.	☐	☐	☐	Click here to enter text.
17.5 The system supports disease management registries by:	☐	☐	☐	Click here to enter text.
17.5.1 Allowing patient tracking and follow-up based on user defined diagnoses.	☐	☐	☐	Click here to enter text.
17.5.2 Providing a longitudinal view of the patient medical history.	☐	☐	☐	Click here to enter text.
17.5.3 Providing intuitive access to patient treatments and outcomes.	☐	☐	☐	Click here to enter text.
17.6 What reporting engine is utilized within the software? (ex. Crystal Reports, Excel, proprietary).	☐	☐	☐	Click here to enter text.
17.6.1 If utilizing Crystal Reports do you provide a listing of all reportable data elements?	☐	☐	☐	Click here to enter text.
17.7 Does the end user have the ability to create custom reports?	☐	☐	☐	Click here to enter text.
17.8 Can reports be run on-demand during the course of the day?	☐	☐	☐	Click here to enter text.
17.9 Can reports be set up to run automatically as well as routed to a specific person with in the office?	☐	☐	☐	Click here to enter text.
18. Meaningful Use				
18.1 The system has a bi-directional lab component.	☐	☐	☐	Click here to enter text.
18.2 The system can check insurance eligibility electronically from public and private payers. List clearinghouses with which this functionality exists.	☐	☐	☐	Click here to enter text.
18.3 The system can submit claims electronically to public and private payers.	☐	☐	☐	Click here to enter text.

Specifications	Yes, Included	Yes, Addtl. Cost	No	Comments / Clarifications
18.4 The system can provide patients with timely electronic access to their health information.	☐	☐	☐	Click here to enter text.
18.5 The system can provide clinical summaries to patients for each visit.	☐	☐	☐	Click here to enter text.
18.6 The system can provide a summary care record for each transition of care and referral visit.	☐	☐	☐	Click here to enter text.
18.7 The system can exchange key clinical information among providers of care and patient authorized entities electronically.	☐	☐	☐	Click here to enter text.
18.8 The system can submit immunization data electronically to the Wisconsin immunization registry.	☐	☐	☐	Click here to enter text.
18.9 The system can provide electronic syndromic surveillance data to public health agencies and actual transmission according to applicable law and practice.	☐	☐	☐	Click here to enter text.
19. Cost Measuring / Quality Assurance / Reporting				
19.1 The system has built-in mechanism/access to other systems to capture cost information.	☐	☐	☐	Click here to enter text.
19.2 The system supports real-time or retrospective trending, analysis, and reporting of clinical, operational, demographic, or other user-specified data including current and future UDS reports.	☐	☐	☐	See http://bphc.hrsa.gov/uds/
19.3 The system allows customized reports or studies to be performed utilizing individual and group health data from the electronic record.	☐	☐	☐	Click here to enter text.
19.4 The system will provide support for third-party report writing products.	☐	☐	☐	Click here to enter text.
20. Chronic Disease Management / Population Health				
20.1 The system provides support for the management of populations of patients that share diagnoses, problems, demographic characteristics, etc.	☐	☐	☐	Click here to enter text.
20.2 The system has a clinical rules engine and a means of alerting the practice if a patient is past due.	☐	☐	☐	Click here to enter text.
20.3 The system generates follow-up letters to physicians, consultants, external sources, and patients based on a variety of parameters such as date, time since last event, etc. for the purpose of collecting health data and functional status for the purpose of updating the patient's record.	☐	☐	☐	Click here to enter text.

Specifications	Yes, Included	Yes, Addtl. Cost	No	Comments / Clarifications
20.4 At minimum, the system is able to generate a variety of reports based on performance measures identified by the Physician Consortium for Performance Improvement (AMA/Consortium), the Centers for Medicare & Medicaid Services (CMS), and the National Committee for Quality Assurance (NCQA) for chronic diseases. Information on these measures can be found at: http://www.ama-assn.org/ama/pub/category/4837.html. The system follows measures approved by NQF (national quality form) and prompted by the AQA (ambulatory quality alliance) as well as those identified by the HRSA's Health Disparities Collaborative http://www.healthdisparities.net/	☐	☐	☐	Click here to enter text.
21. Consents, Authorizations, and Directives				
21.1 The system has the capability for a patient to sign consent electronically.	☐	☐	☐	Click here to enter text.
21.2 The system has the capability to create, maintain, and verify patient treatment decisions in the form of consents and authorizations when required.	☐	☐	☐	Click here to enter text.
21.3 The systems captures, maintains, and provides access to patient advance directives.	☐	☐	☐	Click here to enter text.
22. Technical Underpinnings				
22.1 The system incorporates extensive, secure telecommunications capabilities that link staff and clinicians from remote locations to the central site.	☐	☐	☐	Click here to enter text.
22.2 Do you provide hardware or have a relationship with a hardware vendor?	☐	☐	☐	Click here to enter text.
22.3 If working with a hardware vendor do you have negotiated pricing with them?	☐	☐	☐	Click here to enter text.
23. Billing				
23.1 The system provides a bidirectional interface with practice management systems.	☐	☐	☐	Click here to enter text.
24. Document Management				
24.1 The system includes an integrated scanning solution to manage old charts and incoming paper documents.	☐	☐	☐	Click here to enter text.
24.2 Scanned documents are readily available within the patients chart.	☐	☐	☐	Click here to enter text.
24.3 Scanned documents can be attached to intra office communication and tracked.	☐	☐	☐	Click here to enter text.
24.4 The system has the ability to bulk scan and easily sort old patient charts for easy reference later.	☐	☐	☐	Click here to enter text.
24.5 Images and wave files can also be saved and stored in the document management system.	☐	☐	☐	Click here to enter text.
24.6 Insurance cards and drivers license can be scanned and stored in patient demographics.	☐	☐	☐	Click here to enter text.
24.7 Scanned documents can be attached to visit notes.	☐	☐	☐	Click here to enter text.
24.8 In a multiple location environment can each office scan in the same manner?	☐	☐	☐	Click here to enter text.
25. Technical Support				

Specifications	Yes, Included	Yes, Addtl. Cost	No	Comments / Clarifications
25.1 What hours is technical phone support available?	☐	☐	☐	Click here to enter text.
25.2 What is the average amount of time for issue resolution?	☐	☐	☐	Click here to enter text.
25.3 If a problem persists what is the escalation process?	☐	☐	☐	Click here to enter text.
25.4 Do you have electronic ticketing for non-emergent technical support?	☐	☐	☐	Click here to enter text.
25.5 Do you have a user forum for practices to seek help from peers and share ideas?	☐	☐	☐	Click here to enter text.

3 Specialty Specific Requirements

Specifications	Yes, Included	Yes, Addtl. Cost	No	Comments / Clarifications
1. Specialty Specific Requirements –				
1.1 Click here to enter text.	☐	☐	☐	Click here to enter text.
1.2 Click here to enter text.	☐	☐	☐	Click here to enter text.
1.3 Click here to enter text.	☐	☐	☐	Click here to enter text.
1.4 Click here to enter text.	☐	☐	☐	Click here to enter text.
1.5 Click here to enter text.	☐	☐	☐	Click here to enter text.
1.6 Click here to enter text.	☐	☐	☐	Click here to enter text.
1.7 Click here to enter text.	☐	☐	☐	Click here to enter text.

Practice Scenarios

The project team created business scenarios that describe processes that the new EHR/PMS solution should address. A written response by the Vendor to these scenarios is requested. The Evaluation and Selection Committee will use the responses to the business scenarios to judge the ability of the prospective vendor's proposed solution to meet Wilder's general operational and reporting requirements. The Vendor should indicate whether the functionality is delivered by the software off the shelf or with modifications to fulfill the requirement. Include sample output of any reports requested in the scenario. If modifications or additional software (e.g., custom interfaces not included in software package) are required to achieve full functionality, additional explanation or screen samples, etc. may be attached to this section. Reference the scenario ID for all explanations. Selected business scenarios will also be used during on-site demonstrations and scored by the participants. Business Cases are detailed in the following table.

Scenario Area	Background	Key Points	System Approach to Scenario
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.

Cost Estimate Template

For each proposed product, please provide cost estimates based upon a typical installation. To allow us to be able to compare responses, please assume that the product is going to be used at number of site(s) with number of providers. Also, any additional details regarding cost or pricing that may be helpful in our analysis should be included as well.

Please use the following template, if possible—or attach a cost estimate proposal that includes answers to each question below — *and provide it as a separate, sealed document within the RFP response.*

One time fees	
One time implementation fees:	Click here to enter text.
Training fees:	Click here to enter text.
Consulting fees:	Click here to enter text.
Initial year costs (include all fees for license, use, access, etc.)	
For x providers:	Click here to enter text.
For each additional provider:	Click here to enter text.
Please provide the pricing algorithm used to calculate this cost.	Click here to enter text.
Ongoing annual costs (include all fees for maintenance, support, use, access, etc.)	
For x providers:	Click here to enter text.
For each additional provider:	Click here to enter text.
Please provide the pricing algorithm used to calculate this cost. Also, please provide your policy regarding price increases.	Click here to enter text.
Five (5) year cost of ownership	
Please indicate the estimated TCO ("total cost of ownership") for the product over a 5 year period.	Click here to enter text.
Training fees:	Click here to enter text.