

REQUEST FOR PROPOSALS (RFP)

ISSUE DATE: NOVEMBER 23, 2020

TITLE: COMMUNITY HEALTH AND NAVIGATION ELECTRONIC MEDICAL RECORD SYSTEM

I. PROJECT DESCRIPTION

Eagle County Paramedic Services (ECPS) is accepting proposals from interested vendors for the implementation and maintenance of an Electronic Medical Record System (EMR) for our Community Health (Community Paramedicine) and Behavioral Health Navigation programs starting on January 1, 2021 as an annual agreement for three (3) years. At the District's sole discretion, the contract may be extended for not more than two (2) one-year periods. The deadline for submitting a proposal is December 18, 2020 at 5 p.m. MST. Proposals must be submitted in PDF format to Kevin Creek, kcreek@ecparamedics.com by deadline. Late or incomplete transmittals will not be accepted or referred back to the submitter.

II. RFP PACKAGE CONTENTS

A. This RFP package includes:

- Sections I through X hereof
- Questionnaire
- Acknowledgment

B. If a proposer discovers any ambiguity, conflict, discrepancy, omission, or other error in the RFP, the proposer must immediately notify the District of such error and request modification or clarification. Modifications or clarifications will be emailed to all interested applicants on or before 2 p.m. on Dec. 7, 2020.

C. Questions must be submitted in writing to Kevin Creek, kcreek@ecparamedics.com, no later than 2 p.m. MST on Friday, December 4, 2020.

III. BACKGROUND INFORMATION

A. ECPS is a statutory Title 32 Special District with about 75 full-time equivalent positions and revenues of more than \$13 million. The facilities are located in several buildings throughout the county to serve a population of approximately 55,000 in the Central Rocky Mountain region of the Colorado Rockies.

B. The District maintains a robust and extensive Community Paramedic (CP) program that has been in existence over 10 years. Currently, the District uses ESO and an Excel spreadsheet for documentation and data tracking for patient encounters. The CP program responds to 750 – 1000 calls for service every year and is expected to increase during ET3 Model Deployment. The Behavioral Health Navigation program is 9 months old and requires extensive management and a longitudinal record that can be shared with many providers in the community. Currently, this is managed through a home-built system.

C. The District receives its funding via a mill levy, patient billing, and other sources of income such as grants, investment income, and special ownership tax revenues.

D. The District is governed by an elected five (5) member board of directors and serves as the only Health Service District in Eagle County providing Paramedic Services.

IV. CORE PRODUCT FEATURES AND CAPABILITIES

Core Product Features and Capabilities will be included in the contract.

1. Customizable off-the-shelf (COTS) product
2. Electronic Medical Record (EMR) as a longitudinal record
3. Hospital record integration or integration with health information exchange
4. Integration with ESO for common patient look-up
5. Quality Assurance (QA) / Quality Improvement (QI) Monitoring
6. Billing integration
7. Data Analytics and Reporting Tool (sophisticated / advanced)
 - a. Ability to perform keyword searches in narratives
 - b. Ability to convert one-to many fields to separate columns instead of becoming multiple rows of data for the same patient
 - c. Ability to export raw data quickly and easily into a delimited file that can be read by statistical software (e.g. SPSS, SAS, Tableau)
 - d. Ability to export reports into common file formats (e.g. xls, csv, pdf)
 - e. Ability to export every field into one of the described formats
8. Cloud-based server with redundant US only servers
9. Web-based system with Offline capability
10. PC, tablet, and smart-phone compatible
11. Runs on Windows, Mac, Android, and iOS
12. System and Server Setup
13. Administrator, Internal and External End-User Training
14. Ongoing Technical Support and System Maintenance

ANCILLARY PRODUCT FEATURES AND CAPABILITIES

1. NEMSIS v3.4 Compliant Software or willing to pursue if NEMSIS standard is applied to Community Paramedic programs in the future.
2. NEMSIS v3.5 Compliance actively being pursued or willing to pursue if NEMSIS standard is applied to Community Paramedic programs in the future.
3. Computer Aided Dispatch (CAD) integration
4. Live audio recording/dictation/speech-to-text
5. Integration with mobile technologies (e.g. smartwatch integration)
6. Integration with medical devices (e.g. cardiac monitor, vital signs monitor, etc.)

Offeror's proposal must explain their abilities to meet the identified core and ancillary products fully, partially, or not at all.

V. FUNCTIONAL AND TECHNICAL REQUIREMENTS:

Offerors are to indicate their capability of fulfilling each requirement listed in EXHIBIT D.

VI. PROPOSAL PREPARATION AND SUBMISSION INSTRUCTIONS: RFP RESPONSE:

To be considered for selection, Offerors must submit a complete response to this RFP. One (1) copy of each proposal shall be submitted in accordance with instructions on the first page of this RFP, by email.

Offerors that submit a proposal which contains Proprietary and/or Confidential information must also submit one (1) copy in which Proprietary and/or Confidential information is REDACTED. Submit one (1) PDF file containing the REDACTED file and one (1) containing a copy of the proposal (flash drives will not be accepted). Designating the Purpose, Scope, Specifications, Terms and Conditions, Price and/or anything other than specific data, figures, and/or paragraphs that constitute trade secret or proprietary information as Proprietary and/or Confidential is not acceptable.

VII. TIMELINE

A. Dates provided are best estimates and subject to change as required.

RFP Documents Available Friday, November 23, 2020.

Written Questions Deadline Friday, December 4, 2020 at 2 p.m.

Written Answers Provided Friday, December 11, 2020 at 2 p.m.

PROPOSALS DUE Friday, December 18, 2020 at 5 p.m.

Contract Term Begins January 1, 2021

Implementation, Deployment and Training of COTS EMR March 1, 2021

VIII. QUALIFICATIONS

A. The firm must be able to demonstrate financial stability by submitting financials for the past year.

B. The firm must agree to comply with Colorado Revised Statutes (CRS) 8-17.5-101, et seq. which prohibits the use of illegal alien labor on public contracts and requires participation in either e-verify or other employee verification service.

C. Prior to commencing work, the awarded firm must provide evidence of insurance, as described in Section IX, Indemnification, Insurance, and Warranty.

D. Prior to commencing work, all members of the audit team shall attend certification training for the Health Insurance Portability and Accountability Act of 1996 (HIPAA). The training is provided by ECPS at no charge. In lieu of training, the awarded firm may provide evidence of current HIPAA certification for

all members of the audit team, and the District, at its sole discretion, will be the judge of its acceptability or non-acceptability.

E. Prior to commencing work, the awarded firm must execute a Business Associate Agreement.

F. Vendor or Principles shall be checked against the OIG website for exclusions from the Medicare and Medicaid programs.

IX. AWARD PROCESS AND SELECTION CRITERIA

A. Contract award will be made on the determination of value and in the best interest of ECPS, based on evaluation criteria outlined below. In reviewing the proposals, Cost 35% (35 maximum points)
Adherence to specifications 25% (25 maximum points)

C. Up to three (3) finalists may be selected to interview on-site or remote demonstration of products. Costs incurred for travel, food, lodging and demonstration purposes will be the sole responsibility of the finalists.

D. The selected firm will be given the first right to negotiate an agreement acceptable to the District. In the event that an agreement satisfactory to the District cannot be reached, the District may enter into contract negotiations with one or more of the remaining qualified firms.

E. It is anticipated that award will be made within three (3) weeks after proposal deadline, or if interviews are conducted, within three (3) weeks of completion of interviews. Award will take place during a regularly scheduled meeting of the Board of Directors (BOD). BOD meetings are open to the public and are advertised on the ECPS website at www.eaglecountyparamedics.com. In addition, all proposers will be notified by email.

F. Upon award, a contract will be issued to the successful proposer. Work shall commence only after review and acceptance of all contract documents (including insurance certificates) by ECPS.

X. ADDITIONAL CONSIDERATIONS

A. Proposals must be guaranteed through December 31, 2020.

B. Proposals must be in compliance with all RFP requirements. Failure to do so may result in disqualification.

C. All proposal material submitted shall become the property of ECPS and shall not be returned. Redacted proposals will be available for public viewing. Redacted proposals will remove all drawings, graphs, images and pricing information.

D. Any information contained within the proposal that is proprietary in nature or protected by copyright, trademark, or other intellectual property law should be clearly identified for nondisclosure purposes.

XI. INDEMNIFICATION, INSURANCE AND WARRANTY

The following will be required of the awarded firm:

A. Indemnification. The firm must agree to hold harmless ECPS, its elected officials, officers and employees from any claims as a result of the awarded firm's negligence.

B. Insurance. The firm must purchase and maintain, at its own cost, primary insurance(s) with the minimum coverage limits described below. Insurance(s) must be with insurers and formats acceptable to ECPS, covering all premises and operations, and in force from the beginning of the project through the warranty period. The Consultant(s) will be responsible for any deductible losses required in its insurance(s).

Commercial General Liability

- combined single limits of one million dollars (\$1,000,000) each occurrence
- one million dollars (\$1,000,000) aggregate

Coverage must include bodily injury, broad form property damage (including completed operations), personal injury (including coverage for contractual and employee acts), blanket contractual, independent contractors, products and completed operations. The policy must also contain a provision for severability of interests. ECPS, its elected officials, officers and employees must be named on the certificate as additional insured.

Professional Liability

- one million dollars (\$1,000,000) each occurrence
- one million dollars (\$1,000,000) aggregate

Employer's Liability Insurance

- six hundred thousand dollars (\$600,000) each accident
- six hundred thousand dollars (\$600,000) disease - policy limit
- six hundred thousand dollars (\$600,000) disease
- ECPS, its elected officials, officers, and employees must be named on the certificate as additional insured.

Worker's Compensation (Evidence of qualified self-insured status may be substituted)

- in an amount according to applicable laws for Consultant's employees

Comprehensive Automobile Liability – bodily injury and property damage

- combined single limits of six hundred thousand dollars (\$600,000) each occurrence
- six hundred thousand dollars (\$600,000) aggregate

Automobile coverage shall be for each owned, non-owned or hired Consultant vehicle (including employee-owned vehicles) used for the project and shall also contain a provision for severability of interests. ECPS, its officials and employees must be named on the certificate as additional insured.

C. Certificates of insurance must be received and approved by ECPS prior to the beginning of services. Certificate(s) must identify the project and indicate that cancellation, termination or material change to the policy will not occur without 30 days prior written notice to the District. If asked, the Consultant must provide a certified copy of any policy and/or endorsement. Should the Consultant fail to purchase or maintain insurance(s) as required, the District may either terminate the contract or purchase the required insurance and recover the cost from the Consultant.

D. Warranty. The Consultant must warrant that the work will be performed in a professional manner in accordance with County, State, and Federal standards applicable to the project.

XII. PROPOSAL CONTENT / SUBMISSION INSTRUCTIONS

A. Minimum proposal content is as follows:

Proposals should be as thorough and detailed as possible so that the District may properly evaluate your capabilities to provide the required goods/services.

Completeness of Proposal

Offeror should display a thorough understanding of the requirements, familiarity with the content of this proposal, submittal of all required documentation and the overall quality of response.

Offerors are required to submit the following as a complete proposal:

1. Return the RFP cover sheet and all addenda acknowledgments, if any, signed and filled out as required.
2. The following Exhibits must be submitted with the proposal, along with any accompanying documentation:

EXHIBIT A – Proposed Plan and Methodology – Free form to include documentation and full understanding of the needs of this RFP.

EXHIBIT B – References – Provide 3 References from other organizations of similar size, scope and type of service in Community Paramedicine and Patient Navigation.

EXHIBIT C – Pricing Schedule – Basis for pricing and any exclusions.

EXHIBIT D – Functional and Technical Requirements – See form

EXHIBIT D – Functional and Technical Requirements

Requirement	Description	Response
Mandatory	Customizable off-the-shelf (COTS) product	
Mandatory	Electronic Medical Record (EMR) as a longitudinal record	
Mandatory	Hospital record integration or integration with health information exchange	
Mandatory	Integration with ESO for common patient look-up	
Mandatory	Quality Assurance (QA) / Quality Improvement (QI) Monitoring	
Mandatory	Billing integration	
Mandatory	Data Analytics and Reporting Tool (sophisticated / advanced)	
Mandatory	Ability to perform keyword searches in narratives	
Mandatory	Ability to convert one-to many fields to separate columns instead of becoming multiple rows of data for the same patient	
Mandatory	Ability to export raw data quickly and easily into a delimited file that can be read by statistical software (e.g. SPSS, SAS, Tableau)	
Mandatory	Ability to export reports into common file formats (e.g. xls, csv, pdf)	
Mandatory	Ability to export every field into one of the described formats	
Mandatory	Cloud-based server with redundant US only servers	
Mandatory	Web-based system with Offline capability	
Mandatory	PC, tablet, and smart-phone compatible	

Mandatory	Runs on Windows, Mac, Android, and iOS	
Mandatory	System and Server Setup	
Mandatory	Administrator, Internal and External End-User Training	
Mandatory	Ongoing Technical Support and System Maintenance	
Optional	NEMSIS v3.4 Compliant Software or willing to pursue if NEMSIS standard is applied to Community Paramedic programs in the future.	
Optional	NEMSIS v3.5 Compliance actively being pursued or willing to pursue if NEMSIS standard is applied to Community Paramedic programs in the future.	
Optional	Computer Aided Dispatch (CAD) integration	
Optional	Live audio recording/dictation/speech-to-text	
Optional	Integration with mobile technologies (e.g. smart watch integration)	
Optional	Integration with medical devices (e.g. cardiac monitor, vital signs monitor, etc.)	