

DIVISION OF FINANCE - PURCHASING DEPARTMENT

100 N. Broadway St, Suite 610 Wichita, KS 67202 • Phone (316) 660-7255 • Fax (316) 660-1839

PURCHASING@SEDGWICK.GOV • SEDGWICKCOUNTY.ORG

ADDENDUM #2 RFP #24-0055 ELECTRONIC MEDICAL RECORDS SOFTWARE FOR THE SEDGWICK COUNTY HEALTH DEPARTMENT HEALTHY BABIIES PROGRAM

August 6, 2024

The following is to ensure that vendors have complete information prior to submitting a proposal. Here are some clarifications regarding the proposal for Electronic Medical Records Software for the Sedgwick County Health Department Healthy Babies Program for the Sedgwick County Health Department.

Questions and/or statements of clarification are in **bold** font, and answers to specific questions are *italicized*.

1. Which EHR system is currently used at your health agency for this program?

Currently utilizing a custom module of the State of Kansas Data Application and Integration Solutions for the Early Years (DAISEY) system.

2. Do you use separate systems for billing or practice management?

Yes. Currently billing functions are performed through Athena One, which is utilized by multiple medical programs within the Health Department.

3. What's the current budget (existing spend) and budget for this project?

There is no specific budget allocated. Respondents should provide their best estimated cost to meet the criteria of the Scope of Work.

4. What are the key improvements you are looking for with the adoption of the new EHR system?

Respondents must demonstrate ability to meet needs outlined in the Scope of Work. Key focus in on assessment and documentation forms and ease of data access and formatting to meet reporting needs of multiple funders.

5. What other EHR systems have you already previewed (via demo) related to this RFP?

The program has received product demos by Go Beyond for Well Family Systems, Bontera Case Management, and Athena One

RFP #24-0055

6. We define system users as each individual user login/password. How many total users will require access to the system? Of this total, how many are clinicians, clerical, and billing staff? How many are full time vs. part time? Additionally, are any of the required logins external logins such as Community Health Workers (CHW), First Responders, etc.?

We will require approximately 25 user accounts. Approximately 14 Clinicians, two (2) Enrollment Specialists, two (2) Supervisors, one (1) Admin Officer, one (1) Program Manager, one (1) Division Director, one (1) Data Analysts, and three (3) Billing/Clerical staff.

7. How many total clinicians at your health department have NPIs? Are they MDs, PAs, or NPs?

None within this program. Any billing would be submitted under the Health Department NPI.

8. Do you dispense medications and track medications inventory?

No.

9. Do you need medication prescribing capabilities?

No.

10. Which Labs are a "must" requirement to interface with the EHR?

N/A.

11. Which other Interfaces (e.g. HIE, Immunization Registry etc.) are a "must" to connect to with the new EHR?

State of Kanas DAISEY, UniteUS integrated referral system.

12. Do you have any other systems which are a "must" to integrate with the new EHR?

N/A.

13. When do you hope to select/implement the new EHR?

Selection completed by 1st week of September. Implementation by December 31, 2024.

14. Can you provide sample reports, forms, notes, etc.?

Links to Healthy Start Date Collections Forms below. All data points collected for all HRSA clients are reported to funder:

- i. https://healthystart-tasc.org/wp-content/uploads/2024/06/1.-Demographic Form 05-01-2024.pdf
- ii. https://healthystart-tasc.org/wp-content/uploads/2024/06/2.-Background Form 05-01-2024.pdf
- iii. https://healthystart-tasc.org/wp-content/uploads/2024/06/3.-Prenatal Form 05-01-2024.pdf
- iv. https://healthystart-tasc.org/wp-content/uploads/2024/06/4.-ParentChild Form 05-01-2024.pdf

Please see attached data collection forms related to KDHE MCH grant funding. All data points collected for all MCH clients are reported to funder:

Please note, client enrollment per funding source is determined by ZIP Code and system would need to be able provided reports by funder.

15. Is there a Vendor Evaluation Criteria? And if so, what percentage is given for each category?

Please refer to page 6 of RFP.

16. How many locations does your health department have?

Not seeing this reference in the RFP Scope of Work. There is only one (1) location for this project.

17. It appears that all Healthy Start grantees are provided with a no-cost data system (CAREWare). Can you explain why the county is seeking an additional data solution?

Careware is not a true EHR. It acts as a repository for HS data only. It does not allow for data tracking for any other source and reports are not functional/user friendly.

18. Is Healthy Start the only model being implemented in this request?

No. The Healthy Babies Program currently has three (3) funding sources with separate client tracking and reporting requirements.

19. How many tools/forms are required for the project?

Demographic information: https://healthystart-tasc.org/wp-content/uploads/2024/06/1.-Demographic_Form_05-01-2024.pdf

Background Information: https://healthystart-tasc.org/wp-content/uploads/2024/06/2.-Background_Form_05-01-2024.pdf

Assessments: Edinburgh Postnatal Depression Scale (EPDS), PHQ-9, ASSIST, Safe-Sleep, ACES, Ages and Stages Questionnaire, Pregnancy Intention Planning

Client Encounter: individual (in-home/phone/digital) & Group Education

20. Will the county assume the responsibility/cost for gathering and licensing any proprietary tools required to be developed to support the project?

Yes.

21. How is data currently being collected and reported to HRSA? Is it through another database, Excel spreadsheet, etc.?

Currently, the Healthy Babies (HB) Program utilizes a custom module of Data Application and Integration Solutions for the Early Years (DAISEY) administered by the Kansas Department of Health and Environment (KDHE) as its EHR. Data related to Health Start Initiative (HSI) Clients is downloaded from DAISEY and manually entered into Careware, an external data repository offered to HSI grantees, which is then converted to the appropriate reporting format for HRSA, and uploaded into their system HSMED. Data related to KDHE funded clients is pulled by the State's DAISEY module directly via API.

The Sedgwick County Health Department utilizes Monday.com, Excel, and Word to document and report program measures, including but not limited to; Unduplicated Clients Served Month over Month, Client Encounters MOM, Safe Sleep Assessment scores, Completed Referrals, and Well-Child Visit compliance.

22. Is the vendor required to be registered to do business in Kansas to submit a bid for this RFP (understanding this can occur after bid acceptance)?

Vendor will not be required to register until awarded.

23. Is the vendor required to have insurance registered in Kansas to submit a bid (understanding this can occur after bid acceptance)?

Vendor will not be required to register until awarded.

24. What is the county's desired implementation date post-award?

System to be implemented by December 31, 2024.

25. Does the county have any specific format they wish to view the response and pricing in? Are there page limit requirements, etc.?

No page limit. .pdf is preferred.

26. Is the county interested in expanding these services? Are there other counties in Kansas with which the county will be collaborating in the future regarding the expansion of services?

This is related to the Healthy Babies Program only.

27. What specific features and functionalities are required for the Electronic Medical Records (EMR) software? We would like to understand the scope of the functionality required for current implementation.

The Healthy Babies Program serves on average 900 – 1100 unduplicated clients (Mothers, Fathers, and Children) per year.

Staff need to be able to document client encounters both in-home and via phone or digital meeting, including, but not limited to;

Client type by enrollment type and phase (prenatal, postpartum, inconceptional, fathering),

Type of contact (individual or group education),

Educational topic reviewed,

Assessment(s) completed (Edinburgh Postnatal Depression Scale (EPDS), PHQ-9, ASSIST, Safe-Sleep, ACES, Ages and Stages Questionnaire, Pregnancy Intention Planning) result, and change over time,

Referrals completed and status,

Medical health assessment or mother and child post-birthing completed and status,

Well-Child and Well-Women Exam(s) status and history.

28. How will the proposals be evaluated, and what are the key factors that will influence the decision?

Please refer to Page 6 of the RFP.

29. Would the county prefer a custom-built software solution specifically tailored to your requirements or would you be open to us proposing our existing system with the necessary modifications and enhancements to meet your specifications?

Preference is for an OTB solution with necessary mods.

30. Will county be looking for Cloud or On-Premises hosting? On the cloud, do you have any preference for the vendor to use cloud components (for example, Azure cloud data factory, fabrics, etc.). Please note that cloud components are billed by the cloud provider based on usage and it would be hard to determine the annual cost in such a scenario.

Cloud based.

31. Can we recommend our existing proprietary tools to save time and mitigate risk in building a solution for you?

You may.

32. What are the consequences if a bidder fails to complete and submit all required attachments?

Deduction of points related to responsiveness to required documentation.

33. What are the tentative timelines and a high-level budget for the implementation?

Overall budget is not defined. Responders' should include their best budget estimation to meet implantation expectations. Selection is expected to be made in late August - early September. System implementation is to be completed by December 31, 2024.

34. Which quality measures are you submitting for your Healthy Start program?

Attached is the template for the HIS final impact report. This provides all PMs expected to be reported on at the end of the grant cycle. All other data points indicated in HRSA forms previously sent are reported on monthly basis.

35. Customization and API Functionality:

Could you elaborate on the types of custom application programming interfaces (APIs) that will be required? Are there specific third-party systems or services that the EMR software must interface with and if so, what are the technical specifications for these integrations?

Any new system will need to indicate the ability to integrate API functionality with the State of KS DAISEY Module as well as UniteUS integrated referral system. Coordination and Integration needs, and Technical Specs would need to request from the vendors directly. It is known that both vendors have capability and interest in API data transfers.

HB is currently utilizing Dell Latitude 7450 laptops with Windows 11 Pro

36. User Training and Support:

What are the specific expectations for the web-based user training sessions mentioned in the Scope of Work? How many training sessions are anticipated, and what is the preferred duration and format for these sessions?

Web-based (live zoom/teams, etc., and self-paced tutorials) would be the best format. No minimum number is required. A training plan should be is recommended to be submitted with the RFP response.

Please see the following link to required reports.

https://www.sedgwickcounty.org/finance/purchasing/current-bids-and-proposals/24-0055/

Firms interested in submitting a *proposal* must respond with complete information and **deliver on or before** 1:45 pm, *CDT*, *August 13*, *2024*. Late *proposals* will not be accepted and will not receive consideration for final award.

"PLEASE ACKNOWLEDGE RECEIPT OF THIS ADDENDUM ON THE PROPOSAL/BID RESPONSE PAGE."

Lee Barrier

Purchasing Agent

Lee Barrier

LB/ch