



# CAMERON COUNTY PURCHASING

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**ADDENDUM # 2 - PAGE 1 of 5**

**Date out : 3 - 7 - 14**

**RFP # 140203**

**RFP TITLE: ELECTRONIC HEALTH RECORDS SOFTWARE SYSTEM (HEALTH)**

**DEADLINE: MARCH 25 2014**

*(IN ORDER TO AVOID DISQUALIFICATION – ALL ADDENDUMS MUST BE SIGNED AND RETURNED BY DEADLINE AND INCLUDED IN THE SEALED BID PACKAGE SUBMITTED)*

## **QUESTIONS & ANSWERS – BATCH 1 - to RFP # 140203**

1. Can we attend the bidders conference via the telephone?

**The Health Department has a telephone bridge to allow for a conference call to set up.**

**That number is 888-251-2909 and the access code is 3345497. Please let me know if you plan to utilize this so that we can make the appropriate arrangements.**

2. If we elect to respond to both RFPs and submit the Alternate Combined Proposal Pricing Sheet along with the standard Itemized Description and Cost Sheet, can the County still select a vendor who responds to both RFPs as an awardee to one of the RFPs? And if they plan on possibly selecting a vendor for one of the facilities even if they submitted a cost proposal for both RFPs, I would assume that the price in the Itemized Description and Cost Sheet will prevail over the discounted price offered on the Combined Proposal Pricing Sheet.

**Addendum # 1 has been released which deletes the alternate combo section.**

**This would allow proposers to submit on either RFP or they can also submit both RFP's with pricing specific to each RFP as requested/submitted. Combo pricing will not be requested as part of the RFP for submittal.**

**Addendums should be retrieved at the following link in the Addendum column:**

[http://www.co.cameron.tx.us/purchasing/specs\\_notices.htm](http://www.co.cameron.tx.us/purchasing/specs_notices.htm)

3. If a vendor only submits for one RFP (Health Department and not the jail), will they be disqualified or have a lesser chance to win the RFP when both the jail and Health department bid points are combined?

**see answer to Q # 2**

4. Please confirm this is a cloud request?

**Yes - this will be vendor hosted.**

5. We are interested to know the number of providers/physicians or mid-levels?

**We have 10 physicians and 2 mid – levels.**

6. Does the County seek a web-based secure system or a Windows based PC type system?

**We are looking for a web based system - vendor hosted.**

7. How many providers are included in each RFP for EMR? Providers being Doctors, NP's, PA's, billing providers?

**The Health Department has 10 MDs and 2 NPs that would utilize the system. Please provide explanation/clarification on your interpretation of "billing provider".**

8. You reference EMR, but I think you are actually asking for a PM/EMR combined? Could you clarify?

**Please provide clarification on definition of "PM".**

9. Pg. 4 – The County states that there will be a combined estimate of 100 users, what is the anticipated number of concurrent users?

**Approximately 80**

10. Pg. 10 – ***"ALTERNATE COMBINED: Evaluation Committees Scores for RFP#140202 & 140203 will be combined and averaged. The scoring for alternate combined pricing will be used for the Price related score in this category".***- If a vendor elects to respond to both RFPs and submits the Alternate Combined Proposal Pricing Sheet along with the standard Itemized Description and Cost Sheet, can the County still select a vendor who responds to both RFPs as an awardee to just one of the RFPs? And if a vendor who has submitted a response for both the DOH and Sheriff's Office RFPs and is awarded just one, please verify that the price on the pricing sheet will prevail over the Alternate Combined pricing sheet.

**Refer to Answer question # 2 above**

11. Pg. 12 – Just to confirm, the performance bond does not have to be submitted with the bid response; and that once the awarded vendor is notified they will furnish the bond prior to contract execution.

**Yes - that is correct**

12. Pg. 13 - To Confirm, bidders are to supply the server hardware requirements. Are we to price out the hardware costs as well? Are these hardware costs to be included in the total price which the bidders are to be scored against?

**The County is soliciting a Web based / Vendor hosted solution - if the County is to incur server hardware costs associated with this project please explain and answer can address in Batch 2 (follow-up) Q & A.**

13. General - What practice management system is the County currently using?

**The Health Department does not have a PM system.**

14. General - Is there a firm expectation that testing will happen prior to contract execution? If so, can this be done as part of the demonstration in partnership with the vendor?

**We would like to see testing prior to contract which can be done as part of demonstration (see RFP page 8).**

15. General - If the vendor is not committed to a Money Back Guarantee should they remove themselves from the process?

**Money Back Guarantee is now deleted and not included.**

16. General - Can you elaborate on your expectations of the MBG? What does that entail?

**Money Back Guarantee is now deleted and not included.**

17. General - Is Cameron County okay with the software being hosted by a 3rd party partner of the vendor?

**That would be okay as long as they meet all standards and regulations to ensure compliance with HIPPA.**

18. General - What are the interface expectations? What systems will need integration for this project?

~~**There are no interface expectations nor do we have a system that will need integration for this project.**~~  
**per pre-bid meeting discussion - Yes – integration would be a plus including Labs. This to be explained in more detail ie: Batch 2 Q & A**

19. General - Has Cameron County approved funding for the procurement of this EHR for 2014?

**NO**

20. General - Does the County have an anticipated implementation start date?

**While there is no anticipated implementation start date, the Health Department must have a functional EMR system in place by January 2015.**

21. For each of the 5 locations, please indicate the number of providers based on the below definition:

“Providers” mean those Physicians, Nurse Practitioners, Physician Assistants, Audiologists, Optometrists, Therapists, Occupational Therapists, Physical Therapists, Music Therapist, Speech Therapists, Massage Therapists, Chiropractors, Anesthesiologists, Psychologists, Dentists, Hygienists, Licensed Social Workers, Midwife, Nutritionists, Dietitians, Counselors, Mental Health Practitioners, Neurophysiologists, Nurses that provide patient care, and Podiatrists employed by or under contract with Customer to provide services within the medical field. The term Provider shall not include Customer personnel employed by or under contract with Customer as office managers, secretaries, or other administrative staff, and (hereinafter referred to as “Customer Personnel”). For any category of Customer staff not identified above, eClinicalWorks and Customer shall agree in writing as to who is a Provider.

“Full Time Provider” means any provider that works more than 2 days a week is equal to 1.0 Full Time Equivalent Provider (FTE)

**17 Full Time Providers**

“Part Time Provider” means any provider that works 2 days or less per week is equal to 0.5 Full Time Equivalent Providers (FTE). Practice must have a minimum of 1.0 FTE in a practice. If the provider increases the number of day’s worked, customer will be required to purchase a full time license and pay the increase in license fees. eCW may conduct an audit at any time, if the provider is found to be working more than 2 days per week then the customer must purchase the full time license and will incur a 10% penalty on both the license fee, support and maintenance. All fees will be retroactive. If the practice has only part time providers, then the first part time provider will be considered 1.0.

**13 Part time Providers**

22. Are interfaces required? If yes, please list them?

~~NO~~ YES-- List to be addressed in Batch 2 Q & A

23. Do you require data migration services?

NO

24. Do you require single or multiple databases?

JR - That is up to the programming team. If multiple departments are going to use the same software solution they should have separate databases.

25. Do you require an EMR solution only or do you also require a Practice Management solution?

We are seeking a EMR system; however, we realize that aspects of a PM system could be added to the EMR system in order to utilize the EMR system to its’ optimum.

26. Part VII Form Contract: The first bullet states, "Submit form contract as part of RFP response." What is meant by Form Contract?

If you have a Draft of your standard Form Contract for the County's review please insert it along with the specified attachments.

27. Within Section 6: Desired Functionality/Minimum Requirements it makes reference to a check list; however, there is not one provided. Should there be a check list or is there an error in the RFP?

The checklist referenced on pg 21 is a reminder to review and ensure that pg 2 of RFP is being addressed as well.

28. The numbering is off within various sections of the RFP. Are they numbered incorrectly or are questions missing? These questions are:

- Additional Questions – A ( starting on page 41) 4,5,14,19,23,41,& 42, are missing
- Additional Questions – B (starting on page 44) 22,23,31,41,45, & 60 are missing

pg 41 all there except for 41 & 42 - disregard 41 & 42 - none missing

pg 44 - disregard 22, 23, 31, 41, 45, 60 - none missing

29. If responding to RFP #140203 and RFP #140202, do you want them bound as one proposal and shipped in the same box or do you want them bound separately and shipped in the same box?

Bound separately and may be shipped in the same box.

30. Will you provide a Word version of the RFP?

Yes – upon request

31. Can you provide a budget range for this project ?

NO

Company Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Vendor Signature \_\_\_\_\_ Date \_\_\_\_\_

**Must include and return with RFP package**