

**LOS ANGELES COUNTY
DEPARTMENT OF MENTAL HEALTH**



**REQUEST FOR PROPOSALS
FOR AN
INTEGRATED BEHAVIORAL HEALTH
INFORMATION SYSTEM (IBHIS)**

RFP #DMH-1109B2

ADDENDUM NUMBER ONE

January 13, 2010

**Prepared By
County of Los Angeles
Department of Mental Health
Chief Information Office Bureau**

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1.0 AMENDED RFP DOCUMENTS

All Sections and Appendices updated by Addendum Number One of the Integrated Behavioral Health Information System (IBHIS) Request for Proposals (RFP #DMH-1109B2), are posted to the DMH IBHIS RFP website at: <http://dmh.lacounty.gov/IBHIS/addendums.html>. All RFP documents are provided in Portable Document Format (PDF). The PDF version is the official copy.

Addendum Number One includes the following major change(s):

RFP Documents	Change(s)
Appendix A (Statement of Work)	<ul style="list-style-type: none">• Task 6.1.3 (Develop Credentialing Interfaces) has been added.
APPENDIX B.1 (Functional Requirements Response)	<ul style="list-style-type: none">• In Section V (Service Delivery), requirement 461 has been modified.
APPENDIX B.2 (Technical Requirements Response)	<ul style="list-style-type: none">• In Section XI (Interfaces), requirement 265 has been modified.
APPENDIX C (Price and Schedule of Payments)	<ul style="list-style-type: none">• In Section III.C (Professional Services: Fixed Price Professional Services), footnote⁽²⁾ has been modified.• In the Schedule of Payments, rows for Subtotal Task 11.0 (System Close-Out/Shut-Down) have been grayed out; and footnote⁽⁴⁾ has been added.

All other RFP provisions shall remain the same.



**INTEGRATED BEHAVIORAL HEALTH INFORMATION SYSTEM (IBHIS) RFP #DMH-1109B2
2.0 COUNTY RESPONSE TO PROPOSERS' SUBMITTED QUESTIONS**



No.	RFP Document	Section No.	Page	Proposer Question	County Response
1.	<p>RFP Body &</p> <p>Appendix B.1</p> <p>Appendix B.1</p>	<p>Section 1.1 Paragraph 3, Line 5</p> <p>Section 2.4.6</p> <p>Functional Requirements Section IX (Portals) Requirements 909-914</p> <p>Functional Requirements Section III (Authorization) Requirement 99</p>	<p>1</p> <p>13</p>	<p>[1] Please provide additional information about DMH's expectations for the secure web-based portal to be implemented for clients and contract providers during the IBHIS project. Vendors need to know the specific read-write capabilities and limitations to be applied both to clients and providers when using the portal.</p> <p>[2] How many contract providers will be using the portal and how many provider ID's must be managed?</p> <p>[3] What is the total number of clients that may use the portal?</p> <p>[4] Please define the types of client records that contract providers will need to have access to via the portal, and [5] please identify access limitations that may need to be applied for HIPAA or other privacy reasons.</p> <p>[6] Will DMH be prescribing and assigning role-based contract provider access to client records?</p> <p>[7] Is it DMH's intent that all records for a given client are accessible by any contract provider granted access to that client's records?</p> <p>[8] Please describe the vision that DMH has for client access to their personal health records.</p> <p>[9] Will this be a read-only access of a limited number of fields; or [10] will clients be afforded a limited write capability to manage certain demographic data?</p> <p>Aside from service authorization requests (Appendix B.1 requirement #99),</p>	<p>[1] [4] [5] [7] With regards to the client portal, DMH is requesting to know if Proposer offers a client portal in their standard product.</p> <p>The full scope of what contract providers will be able to see has not been determined at this time but would be expected to include role-based read-only access to medication history information, recent assessments, laboratory and psychological test results, and clinician notes from prior visits. DMH is aware that Treatment Authorization Requests require data to be written from the provider portal to IBHIS. Contract providers need to be able to submit and track Treatment Authorization Requests from the portal.</p> <p>[2] [3] Refer to Section 3.0 (DMH Statistics) of Appendix B.4 (System Hardware Response), which provides statistics. Each Proposer shall utilize the information provided in this RFP and apply Proposer's experience and best judgment in responding.</p> <p>[6] Yes.</p> <p>[8] DMH envisions interfacing to one or more external PHRs.</p> <p>[9] [10] DMH anticipates allowing clients to submit demographic updates via the client portal.</p>

* Not provided by Proposer or not applicable.



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				<p>[11] please identify all other queries or reports that DMH expects to be generated by clients or contract providers via the portal.</p>	<p>[11] DMH cannot identify all possible queries or reports to be generated by clients or contract providers via the portal. However, each Proposer shall apply their experience and best judgment to identify or suggest queries and reports that would be useful for clients or contract providers.</p>
2.	RFP Body	Section 2.1.3.7, Paragraph 2	6	<p>[1] Does your organization require ePrescribing functionality, which enables physicians and/or prescribing practitioners to perform ePrescribing related transactions with retail/mail order pharmacies as well as Payers and Pharmacy Benefit Managers?</p>	<p>[1] Yes, DMH is seeking ePrescribing functionality apart from the IBHIS RFP proposal. Therefore Proposer is not required to propose ePrescribing functionality in response to this RFP. Refer to Sections 2.3.7 and 2.4.4 of the RFP Body for further information.</p>
3.	RFP Body & Appendix B.1	<p>Section 2.3.7 Functional Requirements</p> <p>Section IV – Intake Requirement 280</p> <p>Section V – Service Delivery Requirement 400</p> <p>Section V – Service Delivery Requirement 401</p>	11	<p>[1] Will you require a pharmacy benefits manager (PBM) with this RFP (#DMH-1109B2)? [2] If not, when is do you anticipate implementing a PBM?</p>	<p>[1] No. The PBM is a separate project and not a part of this proposal request. Refer to Section 2.4.4 of the RFP Body for further information.</p> <p>[2] DMH anticipates the PBM will be implemented by Fiscal Year 2010/2011, prior to the IBHIS implementation.</p>



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4.	RFP Body	Section 2.3.7 Lines 1-8	11	[1] Please describe in detail your workflow for medication ordering and medication management.	[1] A medication ordering and medication management workflow is not available for distribution at this time. Refer to Section 2.4.4 of the RFP Body for further information.
5.	RFP Body	Section 2.3.7 Lines 1-8	11	[1] Will you be requiring a pharmacy inventory management system?	[1] Yes, DMH is seeking a pharmacy inventory management system apart from the IBHIS RFP proposal. Therefore Proposer is not required to propose a pharmacy inventory management system in response to this RFP. Refer to Section 2.4.4 of the RFP Body for further information.
6.	RFP Body	Section 2.3.11	11, 12	[1] Can you please provide the name of the Department/Agency or the project in the State of Michigan from which DMH has adopted the project management methodology?	[1] While the IBHIS Project Management Methodology (PMM) is based on the State of Michigan's concepts, phases and practices consistent with the Project Management Institute (PMI), it has been adapted to conform to DMH PMM standards. The link to the DMH PMM can be viewed at: http://dmh.lacounty.gov/IBHIS/PMM/Project_Management_Methodology.pdf
7.	RFP Body	Section 2.4.4	12, 13	[1] What is the schedule for the PBM implementation? [2] How should we develop our implementation plan for IBHIS to interface with the PBM?	[1] DMH anticipates the PBM will be implemented by Fiscal Year 2010/2011, prior to the IBHIS implementation. [2] Proposer is not requested to provide an implementation plan for IBHIS to interface with the PBM in its response at this time. Contractor shall work collaboratively with County to define PBM interface development plans and timelines in accordance with Task 1.0 (Project Planning) of Appendix A (Statement of Work).



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8.	RFP Body	Section 2.4.7	13	<p>[1] Please describe more thoroughly the County's requirements for integration of this Documentum software with the proposed vendor application. We did not see related tasks or requirements in the functional or technical requirements documents, at Appendices B.1 and B.2 of the RFP.</p> <p>[2] Please provide information on the Documentum version/license the County has.</p> <p>[3] Please describe how and where in the cost proposal the County wishes the vendor to enter costs for the integration of the EMC software within its overall solution.</p> <p>[4] If it is the County's intent to include integration with Documentum, please describe the extent to which this tool is expected to be used as part of the vendor proposed solution.</p> <p>[5] Is it DMH's expectation (or desire) to use Documentum-enabled workflows as part of the IBHIS?</p> <p>[6] If so, for which specific business processes?</p>	<p>[1] [4] [5] [6] Section 2.4 of the RFP Body states "Information provided in this Section 2.4 (Future Systems Environment) is solely for the purposes of providing an overview of County's goals for its future systems environment and does not limit or supersede the specific functional and technical requirements set forth in Section 5.0 (Proposal Requirements) of this RFP." DMH only "anticipates" using products from EMC Documentum® and has not determined or defined requirements specific to EMC Documentum®.</p> <p>[2] Not available.</p> <p>[3] County's document and image integration requirements can be found in requirement Nos. 202-205 in Section IV (Intake) of Appendix B.1 (Functional Requirements Response). Proposer shall provide proposed fixed prices in accordance with instructions provided in Appendix C (Price and Schedule of Payments).</p>
9.	RFP Body	Section 2.4.9 Paragraph 1	14	<p>[1] Please provide the County's requirements for interfacing with the County's existing Cognos software and describe the extent to which this tool (and/or Crystal Reports) are expected to be used as part of the vendor proposed solution.</p> <p>[2] Are there associated requirements for integrating or interfacing with Cognos that are not listed in Appendices B.1 and B.2?</p> <p>[3] If so, please provide the details.</p>	<p>[1] [2] [3] If Proposer has existing report definitions as part of their proposed solution, DMH is not asking the Proposer to change either those definitions or the tools they use to develop them. If Crystal Reports licenses are needed to modify reports embedded in Proposer's solution, DMH has those licenses and Proposer should not include Crystal Report licenses in their proposal. Cognos will be used for DMH Ad-hoc reporting from but</p>

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				<p>[4] Where in the cost proposal are the costs for the associated integration or interfacing services to be quoted by vendors?</p>	<p>not limited to the DMH Data Warehouse. If Proposer chooses to use Cognos to develop production reports, Proposer should not include Cognos licenses in their proposal. DMH does not envision an interface directly to Cognos. Refer to Section XI (Interfaces), requirement No. 265 of Appendix B.2 (Technical Requirements Response) which has been modified.</p> <p>[4] Not applicable.</p>
10.	RFP Body	Section 2.4.9, Paragraph 2	14	<p>[1] Please detail what (if any) interface or integration requirements vendors are expected to perform related to providing extracts from IBHIS for the DMH Data Warehouse.</p> <p>[2] Where in the cost proposal should the associated costs for these services be included?</p>	<p>[1] DMH cannot specify Interface details or the integration requirements to be performed related to providing data extracts from IBHIS to the DMH Data Warehouse until it is familiar with the proposed solution. Refer to Section XI (Interfaces), requirement No. 265 of Appendix B.2 (Technical Requirements Response) which has been modified.</p> <p>[2] Proposer shall provide proposed fixed prices for integration in Section V (Other Professional Services) of Appendix C (Price and Schedule of Payments).</p>
11.	RFP Body	Section 2.4.10	14	<p>[1] Given that the state expects LA County DMH (eventually) to exchange EHR's and outcome measures electronically, is it DMH's preference that the vendor's IBHIS solution be implemented in a CCHIT-certified, EHR-ready status at go-live?</p> <p>[2] Will the DMH act as intermediary between the IBHIS vendor and the contract providers, or will the vendor need to work directly with the contract providers in getting their system EDI exchanges tested and de-bugged with</p>	<p>[1] Yes. It is our preference during the Term of the Agreement that IBHIS be implemented in a CCHIT certified behavioral health EHR ready status.</p> <p>[2] DMH will act as an intermediary between the EHR Contractor and the contract providers.</p> <p>[3] Refer to Appendix B.1 (Functional Requirements Response).</p>

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				IBHIS? [3] Please describe the extent and scope of EDI exchanges the vendor must accommodate from contract providers. [4] How many providers and [5] how many different originating systems will the vendor have to work with? [6] Will the vendor be permitted to prescribe a standard set of file specifications and messaging standards through which EDI exchanges must occur from contract providers?	[4] Not applicable, see response [2] above. However, Proposer may refer to Section 3.0 (Statistics) of Appendix B.4 (System Hardware Response). [5] Not applicable. See response [2] above. [6] DMH expects to work collaboratively with the EHR Contractor to develop a standard set of file specifications and messaging standards through which EDI exchanges will occur. Contractor's EDI expertise will be sought, but the final decision on which standards and messages to implement will be determined by DMH.
12.	RFP Body	Section 3.1 and 3.1.1	19, 20	<ul style="list-style-type: none"> • Medication Management [1] What functions are expected of IBHIS as opposed to the PBM? [2] Will the PBM be the system physicians use for prescribing medications?	[1] Refer to Section V (Service Delivery) of Appendix B.1 (Functional Requirements Response) for Medication Management requirements. [2] Refer to Sections 2.3.7 and 2.4.4 of the RFP Body for further information.
13.	RFP Body	Section 3.1.1	19, 20	<ul style="list-style-type: none"> • Medication Management [1] Please define your needs in the requirement of "medication management". [2] How does the pharmacy and medication administration fit into this requirement?	[1] Refer to Section V (Service Delivery) of Appendix B.1 (Functional Requirements Response) for Medication Management requirements. [2] Refer to Sections 2.3.7 and 2.4.4 of RFP Body for further information.



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14.	RFP Body	3.2.1.9	21	[1] Please confirm if this is functionality for adjudicating/paying incoming claims from providers or [2] is it for producing outgoing claims for service provided	[1] [2] This particular requirement can apply to either processing inbound claims or producing outbound claims. Note that both functions are required in Appendix B.1 (Functional Requirements Response).
15.	RFP Body	Section 4.28	38	[1] Please describe any County-specific requirements for this notification that would be above and beyond or different than what the federal government may already require.	[1] The County-specific requirement is for Contractor to notify its employees of the Federal Earned Income Tax Credit in accordance with IRS Notice 1015. Refer to Appendix Q (IRS Notice 1015) to determine eligibility requirements for the Earned Income Credit (EIC).
16.	RFP Body	Section 5.7.11 Line 1-6	59	[1] Please describe the method(s) by which the County will assure all competing vendors include all costs in their price proposals; that they do not use assumptions or exceptions to artificially lower the appearance of their bid price to obtain a higher score?	[1] County's recourse to ensure the truth and accuracy of Proposer's responses are described in Section 5.2 (Truth and Accuracy of Representations) and specifically advises against the practice to "bid low to get the County's business." Proposer is required to provide fixed total price responses in accordance with Section 5.7.11 (Price Proposal (Section G)) of the RFP Body. Furthermore, Proposer shall provide "all inclusive pricing" in accordance with the instructions of Appendix C (Price and Schedule of Payments). County's evaluation and response to Proposer's price proposal are described in Sections 6.3.8 (Price Proposal Evaluation Criteria) and 6.5 (Contractor Selection) of the RFP Body which can, at County's sole discretion include the disqualification of the proposal upon County's discovery of false, misleading or unrealistic information.



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17.	RFP Body	Section 5.7.11 Lines 11-17	59	<p>[1] Does the County anticipate circumstances under which there would be a sales tax liability for the vendor?</p> <p>[2] If so, please describe.</p> <p>[3] Are there any other taxes or fees the county anticipates (other than income taxes paid by the Vendor) which must to be taken into consideration.</p> <p>[4] Where in the price schedule should those taxes or fees be listed?</p>	<p>[1] [2] No. However, each Proposer is strongly advised to seek legal counsel specific to their potential sales tax liability.</p> <p>[3] Refer to Section 4.39 (Defaulted Property Tax Reduction Program) of the RFP Body and Paragraphs 8.5 (Sales/Use Tax) and 84 (Contractor's Warranty of Compliance with County's Defaulted Property Tax Reduction Program) of Appendix E (Sample Agreement).</p> <p>[4] Refer to the 4th bullet in the Instructions of Appendix C (Price and Schedule of Payments), "All pricing shall be quoted in U.S. dollars. All applicable duties, licensing fees, taxes, transportation charges and pass-through charges shall be included in the proposed fixed price. No hidden prices or costs will be accepted."</p>
18.	Attachment RFP 4	Proposed EDI Data Exchange Solution	1	<p>Our understanding is that the only "approved" standard CCD is a HL7 defined file that is medical record and does not include mental health data.</p> <p>[1] Will the county be defining the structure of a CCD?</p>	<p>[1] DMH will not be defining the CCD record structure independent of the HL7 standard. DMH anticipates that an HL7 standard to include mental health specific data will be completed during the Term of the Agreement and Contractor will be expected to comply. Refer to Section II.A, Item (6) of Appendix D (Maintenance and Support Services).</p>



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19.	Appendix A & Appendix D	Section 1.9.1 & Section II (D)	2	<p>Appendix A (Section 1.9.1) appears to be in conflict with the definitions of Level I through Level IV priority deficiencies and 'workarounds' found in Section II D (Corrective Maintenance), on pages 8-9 of Appendix D.</p> <p>[1] Please clarify the difference in definitions for application deficiencies. [2] If possible, please consider making the definitions of said application deficiencies consistent throughout the RFP so as to eliminate confusion among vendors about what truly constitutes Level I through Level IV deficiencies.</p>	<p>[1] Deficiency is defined under Paragraph 1.4 (Definitions) of Appendix E (Sample Agreement).</p> <p>[2] The distinction of having two (2) Deficiency levels in Appendix A (Statement of Work) is to monitor the timely resolution of a Deficiency while implementing the System whereas, the four (4) levels of Deficiencies defined in Appendix D (Maintenance and Support Services) shall be used during Production Use to describe and manage the severity of the impact to normal business operations in the event of a disruption during Production Use.</p>
20.	Appendix B.1	Functional Requirements Section V - Service Delivery Requirement 400		<p>Ability to define program or pharmacy benefit plan eligibility based on financial, client and utilization criteria</p> <p>[1] Who is defining this (pharmacy or payor)?</p>	<p>[1] DMH (payor) will define all benefit plans.</p>
21.	Appendix B.1	Functional Requirements Section V - Service Delivery Requirement 401		<p>Ability to flag a provider when a client meets program or pharmacy benefit plan eligibility criteria</p> <p>[1] What is meant in the question? How do you want to flag the provider?</p>	<p>[1] "to flag" shall have the same meaning as "to alert", with regards to functional requirement No. 401 of this RFP.</p>
22.	Appendix B.1	Functional Requirements Section V - Service Delivery Requirements 466-467 and 486-487		<p>Requirement # 466 Pharmacy orders remain "open" until filled notification received.</p> <p>[1] How are the filled notification alerts being received? (Are they being faxed, called in, inputted by staff at LACM?) Requirement #467 Adds the pharmacy prescription number to medical history. [2] How is the clinician getting this info? Is the</p>	<p>[1] [2] [3] [4] Alerts and information will be received electronically via NCPDP Standard Transactions. Refer to Section V (EDI) of Appendix B.2 (Technical Requirements Response) and Section 2.4.4 of the RFP Body for further information.</p>

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				<p>pharmacy calling/faxing this information in? Requirement #486 Medication dispensed. [3] How will clinicians know where the medication was filled and how it was filled? Requirement #487 Dispenser of medication. [4] How will clinicians know where the medication was filled and how it was filled?</p>	
23.	Appendix B.1	Functional Requirements Section VIII - Claims Requirement 764		[1] Is an accounts payable system in the scope of this RFP?	[1] DMH is seeking an Integrated Behavioral Health Information System with accounts payable functionality as part of the solution.
24.	Appendix B.1	Functional Requirements		<p>Question regarding previous RFP (Tab 9 Pharmacy).</p> <p>[1] What was your intent and meaning in deleting the Pharmacy tab from the original RFP release, which was Tab 9 (R2 Appendix B.1 Functional Requirements spreadsheet)? [2] Are you no longer requiring a Pharmacy solution? [3] If not, what are your plans pertaining to your pharmacy needs?</p>	<p>[1] [2] [3] The requirements of the prior IBHIS RFP #DMH- 0908B1 are irrelevant to Proposer's response to this RFP. Each Proposer shall utilize the information provided in this RFP in responding to the requirements of this RFP.</p> <p>Proposer shall refer to Section 2.4.4 of the RFP Body which describes County's plans for PBM and prescribing.</p>
25.	Appendix B.1 & Appendix B.2	Functional Requirements and Technical Requirements		<p>In reviewing the IBHIS functional and technical requirements, Appendices B.1 and B.2, we did not observe any requirements for e-prescribing (as in the previous IBHIS RFP).</p> <p>[1] Is it the intent of DMH that all IBHIS prescriptions will be printed and managed using a manual process (or at least until the separately acquired PBM solution is implemented and integrated with IBHIS)?</p>	[1] The requirements of the prior IBHIS RFP #DMH-0908B1 are irrelevant to Proposer's response to this RFP. DMH anticipates the PBM will be implemented by Fiscal Year 2010/2011, prior to the IBHIS implementation.



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26.	Appendix B.2	Technical Requirements Section I – System Architecture Requirement 11		<p>[1] How is “System Software” defined? [2] Does it include the application software?</p>	<p>[1] [2] Capitalized terms used in Appendix B.2 without definition therein shall have the meanings given to such terms in the body of Appendix E (Sample Agreement), Appendix A (Statement of Work) or Appendix F (Glossary). Refer to Paragraph 1.4 (Definitions) of Appendix E (Sample Agreement) which provides definitions.</p>
27.	Appendix B.2	Technical Requirements Section V – EDI Requirements 159-164		<p>[1] Are you asking about functionality for a system that would generate authorizations for providers?</p>	<p>[1] Requirement Nos. 159–162 refer specifically to claims processing. Requirement Nos. 163 and 164 refer to all types of EDI transactions. Refer to Sections III (Authorizations) of Appendix B.1 (Functional Requirements Response) and Section V (EDI) of Appendix B.2 (Technical Requirements Response) regarding Treatment Authorization Requests and EDI requirements, respectively.</p>
28.	Appendix B.2 &	Technical Requirements Section XI – Interfaces Requirements 260-271		<p>County has provided 12 interface requirements—numbered 260 – 271. There is no mention of an interface requirement (or an integration requirement) for the existing PATS (Pharmacy) system. The previous IBHIS RFP had extensive pharmacy requirements, but those requirements have been removed from this RFP. The RFP narrative in Section 2.4.4 (page 12 of the RFP body) confirms the PATS solution will be replaced under the scope of a separate RFP, later.</p> <p>[1] Please explain the County’s plans for the IBHIS solution as it pertains to interoperability with the County’s PATS/PBM solution. [2] Is it DMH intent for the IBHIS vendor to</p>	<p>[1] DMH anticipates the PBM will be implemented by Fiscal Year 2010/2011, prior to the IBHIS implementation.</p> <p>[2] No. An Interface to the existing PATS solution is not required.</p> <p>[3] No.</p> <p>[4] Not applicable.</p> <p>[5] There will be some pharmacy data conversion from the Integrated System (e.g., allergies, medication history).</p>



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	RFP Body	2.4.4		establish an interface to the existing PATS solution and later to reconfigure that interface to service the PATS/PBM replacement system? [3] Are there any interim pharmacy data exchanges required of the IBHIS solution? [4] If so, please describe them. [5] Will IBHIS have any requirements for pharmacy data conversion or pharmacy reporting?	
29.	Appendix B.2.1	Question 2	1	[1] What is the expected maximum number of concurrent users?	[1] Refer to Section 3.0 (DMH Statistics) of Appendix B.4 (System Hardware Response). Each Proposer shall utilize the information provided in the RFP and apply Proposer's experience and best judgment in responding.
30.	Appendix B.3	Item 8.3	11	[1] Please describe any requirement for converting paper records, as we cannot find other references to such a requirement elsewhere in the RFP. [2] Please also include quantities / document types as this may impact the vendor's conversion approach.	[1] [2] The conversion of paper patient charts is not being requested as part of this proposal. Refer to Section 2.4.7 of the RFP Body for further information.
31.	Appendix B.4	System Hardware Response Section 2.0 Acceptable and Preferred Technology Item 1,	2	[1] Does DMH intend to use existing hardware? [2] Will DMH acquire hardware from the selected IBHIS vendor or from another vendor? [3] Are servers limited to the models specified (IBM pSeries p570, HP Integrity rx3660/rx6600)?	[1] This information is not necessary for the preparation of a Proposal. [2] Refer to Section 1.0 (Introduction) of Appendix B.4 (System Hardware Response), which states County will purchase System Hardware and associated operating system software under a separate contract. Proposer is not being asked to propose or price System Hardware in its proposal. [3] The proposed solutions will be limited to those specific options, while different



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					models within the same hardware family are acceptable (i.e., an IBM pSeries p590 would be acceptable instead of a p570).
32.	Appendix B.4	System Hardware Response Section 3.0 DMH Statistics	5, 6	<p>The statistical matrix reflects total DMH staff of 1708 persons who claim for direct client services, and 3850 total LAN users. Right-sizing the solution is important.</p> <p>[1] Please affirm which headcount(s) are to be used by the vendor in determining the number of named and concurrent users for IBHIS.</p> <p>[2] Will this number of named and concurrent users be changing over time?</p> <p>[3] If so, please describe the growth or reduction of named and concurrent users DMH anticipates year to year during the life of and potential extensions to the contract.</p>	<p>[1] [2] [3] County has provided the necessary information in the RFP to price the proposal. Proposers are instructed to take into account reasonable growth over the Term of the Agreement. Each Proposer shall utilize the information provided in this RFP and apply Proposer's experience and best judgment in responding.</p>
33.	Appendix B.7	Proposed Project Approach and Schedule Section 2.0 Proposed Project Schedule Paragraph 3	2	<p>[1] Recognizing that vendors must make certain assumptions based on their understanding of RFP requirements, will the County allow reasonable changes to the time periods set forth in the proposed detailed work plan, once the County's expectations become better known during contract negotiations?</p>	<p>[1] Once a resultant Agreement is negotiated and finalized with the prospective Contractor(s) (if any) and approved by the Board, any changes to the terms and conditions of the Agreement, including the Detailed Work Plan, can only be made pursuant to the Terms of the Agreement, specifically Paragraph 6 (Change Notices and Amendments) of Appendix E (Sample Agreement).</p>
34.	Appendix C	Price and Schedule of Payments Instructions Bullet No. 1		<p>[1] Where in their offers should vendors include a listing of other 3rd party services or subscription items? (For example, Wiley Libraries, Multum Services, or First DataBank are services rather than software which may be needed in the IBHIS solution, and may or may not already be subscribed to by the County).</p>	<p>[1] [2] [3] Refer to Section 5.0 (Proposed Software Not Matched To Specific Requirements Listed in Section 4.0 (correspondence to DMH Functions)) of Appendix B.5 (System Software Response). If there are recommendations within the scope of the proposal request, proposed fixed prices</p>

* Not provided by Proposer or not applicable.



**INTEGRATED BEHAVIORAL HEALTH INFORMATION SYSTEM (IBHIS) RFP #DMH-1109B2
2.0 COUNTY RESPONSE TO PROPOSERS' SUBMITTED QUESTIONS**



No.	RFP Document	Section No.	Page	Proposer Question	County Response
				<p>[2] Do these annually renewable services need to be quoted; and if so, [3] where should they be listed in the Price Schedule?</p>	<p>can be provided in Section I.B (Third Party Software) of Appendix C (Price and Schedule of Payments).</p>
35.	Appendix C & Appendix A	Price and Schedule of Payments Section III.C Professional Services: Fixed Price Professional Services & SOW 11.0 & Schedule of Payments Subtotal Task 11.0		<p>Under the line items of SOW 11.1 thru 11.4, the County reflects the deliverables entitled System Closeout/ Shutdown tasks. These lines are grayed out and the instructions tab indicates we are not to fill in an amount for those tasks at this tab. We again see this deliverable on the Schedule of Payments tab, line 41. Please explain:</p> <p>[1] Is this Schedule of Payments tab the only place those tasks are to be quoted? Or is there another location these (potential) services are to be entered?</p>	<p>[1] Section III.C (Professional Services: Fixed Price Professional Services) and the Schedule of Payments to Appendix C (Price and Schedule of Payments) have been modified to clarify where Proposer is to provide proposed fixed prices for Transition Services.</p>
36.	Appendix E	Sample Agreement Section 9.2.1 Warranty Periods for Warranty Services Lines 1-4	28	<p>[1] Are there any conditions (for example-lower price) under which the County would consider shortening the "System Warranty Period" to 12 months rather than the cited 24 months following Final System Acceptance of all Work? [2] If so, please describe.</p>	<p>[1] [2] Any exceptions Proposer may take to Appendix E (Sample Agreement) must be submitted in its proposal as described in Section 5.7.9 (Acceptance of or Exceptions to Appendix E (Sample Agreement), Appendix D (Maintenance and Support Services) and Requirements of Appendix A (Statement of Work) (Section E) of the RFP Body.</p>
37.	Appendix E	Sample Agreement Section 10.2.1 & 10.2.1 (i) License Grant	33	<p>[1] Under what conditions would the County limit its licensing authority to a specified number of named or concurrent end users? [2] Can the County bound the upper limit for named or concurrent end users it anticipates will be using the IBHIS solution? [3] Please describe the natural organizational boundaries that will be observed in restricting licensing and use of the IBHIS solution. (e.g., all users would be governmental or contract employees of the LA County DMH, and no users outside of this organization would be</p>	<p>[1] Any exceptions Proposer may take to Appendix E (Sample Agreement) must be submitted in its proposal as described in Section 5.7.9 (Acceptance of or Exceptions to Appendix E (Sample Agreement), Appendix D (Maintenance and Support Services) and Requirements of Appendix A Statement of Work) (Section E) of the RFP Body.</p> <p>[2] Each Proposer shall utilize the information provided in this RFP and</p>

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**INTEGRATED BEHAVIORAL HEALTH INFORMATION SYSTEM (IBHIS) RFP #DMH-1109B2
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No.	RFP Document	Section No.	Page	Proposer Question	County Response
				authorized use of the DMH licenses.)	<p>apply Proposer's experience and best judgment in responding. Refer to Response [1] above.</p> <p>[3] Refer to both Responses [1] and [2] above and Paragraph 1.4 (Definitions) of Appendix E (Sample Agreement).</p>
38.	Appendix E	Sample Agreement Section 14.1		<p>Background: Proposer is a distributor of health care software developed by a third party vendor. With reference to the last sentence in Section 14.1 of the Sample Agreement, it is Proposer's understanding that the third party vendor will not be considered a subcontractor of Proposer just because Proposer installs the third party's non-customized software.</p> <p>[1] If, however, the third party vendor provides services such as, installation, training and implementation services, in conjunction with the licensing of its software, would the third party vendor be considered a subcontractor of Proposer?</p>	[1] The third party vendor would be considered a subcontractor of the Prime Contractor.
39.	IBHIS RFP #DMH-0908B1 - Addendums I & II	*		<p>In LA County's document entitled Integrated Behavioral Health Information System (IBHIS) RFP# DMH-0908B1, Responses to Proposer's Submitted Questions, Addendum I, dated December 31, 2008 and in the subsequent document entitled, Integrated Behavioral Health Information System (IBHIS) RFP# DMH-0908B1, Responses to Proposer's Submitted Questions, Addendum II, dated January 16, 2009, the County provided important answers to vendor questions pertaining to the previous IBHIS RFP.</p> <p>[1] Are there any changes in the County's</p>	[1] [2] Responses to questions submitted in reference to the prior IBHIS RFP #DMH-0908B1 are irrelevant to Proposer's response to this RFP.

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INTEGRATED BEHAVIORAL HEALTH INFORMATION SYSTEM (IBHIS) RFP #DMH-1109B2
2.0 COUNTY RESPONSE TO PROPOSERS' SUBMITTED QUESTIONS



No.	RFP Document	Section No.	Page	Proposer Question	County Response
				responses to the questions previously submitted by vendors? [2] If so, please describe the nature and extent of those changes resulting from this updated IBHIS RFP.	
40.	*	*		[1] Will the county be open to solutions that are Java/J2EE based with thin (web-browser based) access?	[1] Refer to Section 2.0 (Acceptable and Preferred Proposed Technology) of Appendix B.4 (System Hardware Response).
41.	*	*		[1] Can you tell me if there is a plan to hire a consultant to assist with the system configurations and implementation of this project?	[1] County does not plan to hire consulting services outside of the IBHIS Agreement.