

**METROPOLITAN AREA EMS AUTHORITY**

**d/b/a MEDSTAR MOBILE HEALTHCARE**

**Request for Proposal For:**

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**Enterprise Resource Planning (ERP) System**

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**RFP ID number: 2017-003**

**Issue Date: April 24, 2017**

**Response Due Date: June 1, 2017 4:30 p.m**

**SUBMIT ELECTRONIC COPIES ONLY**

**Technical Proposal to [lgray@medstar911.org](mailto:lgray@medstar911.org)**

**Cost Proposal to [jjordan@medstar911.org](mailto:jjordan@medstar911.org)**

**Register to receive notices and concerning the RFP** by sending contact information to [lgray@medstar911.org](mailto:lgray@medstar911.org)

**Contact for Questions:** All questions concerning this RFP shall be directed to Wayne Stokes, IT Manager for MedStar, via email at **[wstokes@medstar911.org](mailto:wstokes@medstar911.org)**. Questions must be submitted in writing only. Vendors must communicate only with Mr. Stokes on matters relating to the RFP and should not communicate with any other employee or representative of MedStar regarding the RFP.

# Table of Contents

Table of Contents.....	3
1. Introduction .....	5
1.1 Overview.....	5
1.2 General Notices and Requirements .....	5
1.2.1 Response to the RFP Binding Upon Vendor .....	5
1.2.2 Response Modification or Withdrawal .....	5
1.2.3 Non-conforming Responses.....	5
1.3 MedStar’s Mission.....	6
1.4 MedStar’s Current Operations.....	6
1.4.1 Human Resources and Payroll.....	6
1.4.2 Accounts Payable – .....	6
1.4.3 Capital Assets .....	7
1.4.4 General Ledger .....	7
1.4.5 Current User Counts .....	7
1.4.6 Vehicles .....	7
1.5 Product/Services Currently In Use .....	7
1.6 Current Technical Environment .....	8
1.6.1 Planned Technical Changes .....	9
1.7 Minimum Qualifications of Vendors.....	9
1.8 Expected Scope of Solution and Term of Contract.....	9
1.9 Minimum Technical Specifications .....	10
1.10 Additional Requirements.....	10
1.11 Overall Evaluation Process .....	10
1.12 Selection Criteria.....	10
1.13 Selection Process .....	11
1.14 Evaluation TimeLine .....	11
2.0 Vendor Response Guidelines .....	11
2.1 Proposal Submission .....	11
2.2 Pre-Proposal Questions and Responses .....	12
2.3 Proposal Format.....	12
2.3.1 Executive Summary (Section 1) .....	13
2.3.2 Company Background (Section 2) .....	13
2.3.3 Proposed Solution (Section 3).....	13
2.3.4 Implementation Plan (Section 4) .....	14
2.3.5 Delivery of Product and Services (Section 5) .....	14

2.3.6	Ongoing Support Services (Section 6) .....	14
2.3.7	Required Vendor Agreements (Section 7).....	14
2.3.8	License and Maintenance Agreements (Section 8) .....	14
2.3.9	Payment Terms and Conditions (Section 9).....	15
2.3.10	Exceptions and Deviations (Section 10).....	15
2.3.11	Client References (Section 11) .....	15
2.3.12	Required Forms and Attachments (Section 12).....	15
2.4	Cost Proposal .....	16
EXHIBIT A	.....	17
Standard Contractual Provisions	.....	17
Appendix - Proposal Forms.....		20
FORM A: Binding Response (Cover Page).....		21
FORM B: Vendor Contact Information .....		22
FORM C: Vendor Background.....		23
FORM D: Client References .....		25
FORM E: Application Software .....		26
FORM F: Functional Requirements .....		27
FORM G: Technical Requirements.....		37
FORM H: Vendor Hosted Solutions / Security .....		39
FORM I: Project Management .....		40
FORM J: Report Development .....		41
FORM K: Training.....		42
FORM L: Staffing Plan.....		43
FORM M: Ongoing Support Services.....		45
FORM N: COST PROPOSAL.....		47

# 1. Introduction

## 1.1 Overview

MedStar Mobile Healthcare (“MedStar”) is soliciting proposals (“Responses”) from qualified vendors for a comprehensive ERP solution that will integrate the data and information used in the operation of our human resource management, finance and procurement, logistics, and customer relationship departments. The successful Vendor will offer a robust solution that allows MedStar to (1) leverage its investment in its current software and information system resources and (2) adapt to future information technology needs.

## 1.2 General Notices and Requirements

MedStar may, in its sole discretion, reject any or all proposals. The successful Vendor, if any, will be required to enter into a contract (“Contract”) with MedStar which will incorporate the RFP and the response to the RFP and which will include standards terms substantially in form set forth on Exhibit “A” hereto. The final Contract may differ in some respects from the terms of the RFP and or the terms of selected Vendor’s response.

MedStar reserves the right to select more than one Vendor to provide the products and services that are the subject of the RFP. MedStar may contact Vendors after submission of the Responses to determine whether they are willing to stand by their Response if they are requested to provide less than all of the products and services identified in this RFP.

### 1.2.1 Response to the RFP Binding Upon Vendor

The Binding Response Form must be completed and submitted with the RFP Response. The Response must contain the signature of a duly authorized officer of the Vendor, with power to bind the Vendor. All submitted Responses shall be binding on the respondent and irrevocable for a period of **one hundred and twenty (120) days** from the Response submission deadline.

### 1.2.2 Response Modification or Withdrawal

Responses may be modified, withdrawn, or re-submitted in writing prior to the submission deadline. After this deadline, no resubmissions or modifications may be made for any reason.

### 1.2.3 Non-conforming Responses

***MedStar reserves the right, in its sole discretion, to reject any or all Responses and to reject any Response deemed non-conforming. MedStar also reserves the right to waive technical nonconformities when in the best interests of MedStar.***

Responses determined by MedStar in its sole discretion to be non-conforming may be rejected by MedStar. A Response may be considered non-conforming for the following (and other) reasons.

- The Response does not meet the minimum technical standards.
- It appears that there was collusion with other Vendors.
- The Response was received after the deadline for submission.
- The Response contains technical irregularities.
- The Response is not in the form set forth in Section 3.
- Unbalanced value of any items.
- Vendor does not meet the Minimum Qualifications

In addition, Vendors may be disqualified and their Responses not considered, among other reasons, for any of the following specific reasons:

- The Vendor has an interest in any litigation against MedStar.
- The Vendor is in arrears on any existing contract or has defaulted on a previous contract with MedStar or other customers.
- Lack of competency as revealed by a financial statement, experience and equipment, response to questions, etc.
- Uncompleted work on other projects, which in the judgment of MedStar will prevent or hinder the prompt completion of work under this RFP.
- Vendor has an interest in more than one Response submitted for this RFP.

### 1.3 MedStar’s Mission

MedStar is a governmental agency created through the adoption of a uniform EMS ordinance and interlocal cooperative agreement between municipalities located in Tarrant County, Texas, under the provisions of Section 773.051 of the Texas Health and Safety Code MedStar provides a variety of services related to mobile and prehospital healthcare, including but not limited to 911 emergency medical response, medical transportation, mobile integrated healthcare, and management and consulting services. MedStar’s mission is to provide world class mobile healthcare with the highest quality customer service and clinical excellence in a fiscally responsible manner. MedStar has been recognized as an innovator in healthcare integration.

### 1.4 MedStar’s Current Operations

#### 1.4.1 Human Resources and Payroll

Number of full-time employees	418
Number of part-time employees	47
Number of bargaining units	0
Number of applicants (annually)	1446
Payroll frequency	Bi-weekly

#### 1.4.2 Accounts Payable –

Number of active vendors in AP system	500
Number of invoices input annually	7000

Frequency of check runs	Weekly
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### 1.4.3 Capital Assets

Number of capitalized fixed assets	9,000
Fixed asset capitalization threshold	\$5000

### 1.4.4 General Ledger

Fiscal year end	Sept. 30
Number of funds	5
Number of department codes	20
Number of balance sheet accounts	250
Number of expense accounts	1000
Number of revenue accounts	150
Number of manual journal entries (monthly)	100
Number of cash accounts	9
Number of bank accounts	9
Number of annual check voids	45

### 1.4.5 Current User Counts

Perform Planning, Budgeting, Forecasting	30
Manage Pay	3
Manage Financial Services	5
Perform General Accounting	5
Process Accounts Receivable (AR)	30
Operate controls and monitor compliance with internal controls policies and procedures	6
Process Accounts Payable (AP)	3
Order Materials/services	3
Do ordering for departmental requisitions	45
Purchasing	3
Receiving	15
Recruiting	30
On-Boarding	5
Compensation	5

### 1.4.6 Vehicles

MICU (Ambulances)	61
Support vehicles	15
Small response vehicles	11

## 1.5 Product/Services Currently In Use

MedStar intends to replace the following software:

- Peachtree Accounting
- Proliant – HR
- Payroll provider

- Treeno Document Management System
- Avesta - Employee onboarding

MedStar intends to reduce or eliminate the use of

- MS Excel spreadsheets
- MS Access Databases
- SharePoint
- Reduce the cost and functionality needed from eCore

MedStar expects to continue the use of the following software and technical equipment:

- Maintstar fleet management software
- Logis Computer Aided Dispatch
- RescueNet Billing Software (includes patient satisfaction reporting)
- Operative IQ narcotics and asset tracking and maintenance software
- Zirmed—payment processing software
- Imagetrend – electronic patient care reporting
- Litmos Training Modules online learning management platform
- eCore for scheduling, certification, timekeeping management
- Tableau – Data analytics and intelligence reporting software
- Drivecam (reporting unusual driving events)-
- First Watch- operational and clinical metrics reporting
- Genetec door and camera security system
- ATT Connect web collaboration platform
- Cloverleaf-data transmission conduit and translator

## 1.6 Current Technical Environment

- Network – Cisco based backbone and edge equipment, including wireless infrastructure.
- Servers and Storage environment – Microsoft based infrastructure primarily Windows 2012 along with Windows 7 - 10 on the desktop. Storage is primarily SAN.
- Backup Environment – MedStar currently uses a managed StorageCraft backup solution, including replication between production and hot DR sites.
- Data Center Environment –Built to meet Tier II standards with redundant capacity components, redundant power, and multiple uplinks.
- Workstations/Desktop Environment – Windows 7 -10. .
- Virus & Patch Environment – Currently Microsoft Antivirus, migrating to Kaspersky. Utilize Microsoft System Center for patching and updates
- Telecom Systems – Cisco SBE 6000
- Technology Standards – From a Reference Architecture perspective, MedStar is primarily a Microsoft infrastructure, including OS and database environments. Linux is used in the environment when needed. Database architecture is primarily Microsoft SQL Server, with some isolated exceptions.
- Servers – Dell physical 1-2 unit servers and M1000 blade chassis. MedStar is currently about 80% virtualized through the use of VMWare including use of virtual desktops for end user computing.

- Workstations – Dell, laptop/desktop within 4 years of age and Microsoft Surface Pro 3 and 4. Use of Dellthin clients for virtual infrastructure. Network, Cisco core, distribution, access model
- Telecom Systems – Cisco
- Directory Services – Microsoft Active Directory
- Office Productivity – MS Office 2010 or newer

### **1.6.1 Planned Technical Changes**

MedStar is working on the following projects:

- Octave/Allegro Risk management program
- Outsource Tier 1 for low level IT support
- External healthcare network payor integration
- JPS 835/837 (interfacility electronic payment submission)
- Billing software integration with LOGIS

## **1.7 Minimum Qualifications of Vendors**

To qualify for evaluation, Vendor must demonstrate experience in providing the requested products and services, financial stability, customer satisfaction, and no substantial history of regulatory problems. MedStar will evaluate each Vendor's ability to deliver its proposed ERP based on specified qualifications, client references, and the overall viability of the Vendor's Company. The minimum qualifications for evaluation are:

1. Vendor must provide reviewed or audited financial statements for the past three years.
2. Vendor must have successfully installed substantially similar ERP systems at a minimum of ten other organizations, at least five of which are in the healthcare business. At least two of the installations must have been completed within the last 3 years.
3. Vendor must have successfully installed substantially similar ERP systems at agencies of similar size and complexity.
4. Vendor must warrant that the proposed ERP system can interface with software to be maintained by MedStar are producible in a reasonable timeframe, including references from prior agency interfaces.
5. Vendor cannot be under suspension, exclusion, or debarment by any State or Federal agency and shall not be tax delinquent.
6. Vendor must have all required licenses and permits to do business in the State of Texas and Tarrant County.
7. Vendor must have all required licenses and permits to provide the products and services proposed.

## **1.8 Expected Scope of Solution and Term of Contract**

MedStar requires an integrated solution that satisfies the needs of all of our human resource management, finance and procurement, logistics, and customer relationship departments. MedStar recognizes that this may not be accomplished with software provided by a single vendor, but rather with an integration of the existing and proposed software components. Vendors should propose software modules for as many of the

solutions as they are able. Vendors should also identify the solutions their modules do not provide and propose how their proposed modules would integrate with MedStar’s existing modules or modules provided by third party vendors. The Response should include solutions for the following areas of MedStar’s operations:

- Human Resources and Information Systems
- Finance (accounting, billing, collecting)
- Procurement and logistics
- Customer relationship management
- Medical Records and Reporting
- Contract Management.

The Response should include the professional services Vendor will provide for:

- Software Installation
- Data Conversion
- Integration and Interface Development
- Software Modifications
- Implementation & Training Services
- System Documentation Development
- Ongoing Support and Maintenance Services.

**Term:** MedStar expects to enter into a contract with the successful Vendor for a term of three years with one year renewals to follow.

## 1.9 Minimum Technical Specifications

See Exhibit A for the technical specifications and the functional requirements of the required products and services. Proposals that do not meet the minimum technical criteria will not be evaluated and will be deemed rejected.

## 1.10 Additional Requirements

None.

## 1.11 Overall Evaluation Process

Responses to this RFP will be evaluated by the MedStar staff. MedStar’s intent is to acquire the solution that provides the best value to MedStar and meets or exceeds both the functional and technical requirements identified in this RFP.

## 1.12 Selection Criteria

For the RFP responses that meet the minimum requirements, the following selection criteria will be observed:

Criteria	Weight %
Proposed solution and functional requirements	30
Cost including implementation, initial and ongoing	30
Implementation requirements	20
Technical requirements	10
General vendor – customer list, site visit, completeness and quality of response	10
Total	100

### 1.13 Selection Process

MedStar anticipates that the selection process will include the following:

1. Pre-bid conference (may participate in person, by phone, or online)
2. Follow-up questions and answers
3. Select top 3 vendors
4. On-site demonstrations
5. Reference checking with other healthcare users who are using the vendor's product
6. Site visits to healthcare users who are using the vendor's products

Once the final selection has been made, MedStar will then enter into contract negotiations with the vendor whose overall solution best meets the needs of MedStar.

### 1.14 Evaluation TimeLine

Event	Date
Release RFP	April 24, 2017
Deadline for Written Questions	May 10, 2017
Response to Written Questions	Questions and answers will be posted weekly, with final questions being answered on May 24 2017
Proposal Due Date	June 19, 2017
Vendor Interviews (Oral Presentations)	June 29-July 21, 2017
Final Committee Recommendation	August 4, 2017
MedStar Board / Executive Approval	August 23, 2017
Begin Implementation	Upon Contract Approval

MedStar reserves the right to alter the schedule above to meet the needs of MedStar.

## 2.0 Vendor Response Guidelines

### 2.1 Proposal Submission

The vendor must submit a copy of the Vendor's Technical Proposal and a completed, copy of the Cost Proposal in separate documents.

Technical Proposals must be emailed to the following address no later than the submission deadline:

*lowens@medstar911.org*

Cost Proposals must be emailed to the following address no later than the submission deadline:

*jjordanj@medstar911.org*

***Proposals will only be accepted in electronic format.***

## 2.2 Pre-Proposal Questions and Responses

It is the Vendor's responsibility to ask questions, request changes or clarifications, or otherwise advise MedStar if any language, specifications or requirements of this RFP appear to be ambiguous, contradictory, or appear to inadvertently restrict or limit the requirements stated in the RFP to a single source.

MedStar will make every attempt to ensure that questions, change requests, and clarification requests receive an adequate and prompt response. However, in order to maintain a fair and equitable RFP process, all registered Vendors will be advised, via the issuance of an addendum to the RFP, of any relevant or pertinent information related to the procurement. Questions, change requests, and clarification requests must be sent via email only, to **Wayne Stokes, [wstokes@medstar911.org](mailto:wstokes@medstar911.org)**, by the due date for questions regarding the proposal.

MedStar will entertain supplemental questions and requests, likewise directed in writing, that are submitted at least four (8) calendar days prior to the Response due date specified in Section 1.13. Therefore, Vendors are advised that any questions received after four (8) calendar days prior to the Response due date may not be answered.

No other sources of responses or clarification are considered valid. Contact with other employees or agents of MedStar is expressly prohibited without prior consent of the identified RFP Contact. Vendors directly contacting other employees or agents of the MedStar during any part of the RFP process, prior to the award of contract, if any, risk elimination of their proposals from further consideration.

## 2.3 Proposal Format

To facilitate the analysis of responses to this RFP, the vendor is required to format their Response in accordance with the instructions outlined in this section. Vendors must respond in full to all RFP sections and follow the RFP format (section numbering, etc.) in their Response. Required forms should be completed and attached to the end of the Response.

The Response should be organized as follows:

Section	
Cover	Proposal Binding Response (Form A)
1	Executive Summary
2	Company Background
3	Proposed Solution
4	Implementation Plan
5	Delivery of Product and Services
6	Ongoing Support Services
7	Required Vendor Agreements
8	License and Maintenance Agreements
9	Payment Terms and Conditions
10	Exceptions and Deviations
11	Client References Additional Requirements
12	Required Forms and Attachments

Instructions relative to each part of the response to this RFP are defined below.

### **2.3.1 Executive Summary (Section 1)**

This part should be limited to a brief narrative not to exceed two pages describing the proposed solution. The summary should contain as little technical jargon as possible and should be oriented toward non-technical personnel. No costs should be included.

### **2.3.2 Company Background (Section 2)**

Vendors must provide information about their company so that MedStar can evaluate the Vendor's stability and ability to support the commitments set forth in their Response. The Response must specifically state how the Vendor meets the minimum qualifications set forth in Section 1.7 above (items 1-7). Other information that should be included in Section 2 of the Response is:

1. The company's background including a brief description (e.g. past history, present status, future plans, company size, etc.) and organization charts.
2. Audited financial information for the past two completed fiscal years that includes income statements, balance sheets, and statement of cash flows.
3. Privately-held companies wishing to maintain confidential financial information must provide information detailing the company's long-term stability.
4. If the vendor is proposing to use a subcontractor, please provide background information on the subcontractor, vendor relationships with that firm and the specific services and/or products that the subcontractor will provide.
5. A summary of each recall of any of the Vendor's products during the past ten years.
6. A summary of any investigation of any the Vendors' products during the past ten years by any governmental entity, including the outcome and remedial action.
7. The details of any investigation, administrative proceeding, or recall of the Vendor's products offered in the Response.
8. Any litigation involving the company or any subcontractor during the past five (5) years, including pending litigation. Identify the parties, the subject of the dispute, the court or arbitration tribunal and case number, the date filed, current status of the dispute, and how it was resolved if not pending.

### **2.3.3 Proposed Solution (Section 3)**

In addition to the information requested on required forms, the Vendor is required to provide a detailed description of how it will meet the requirements of this RFP. This section must include, at a minimum, the following items.

- a) Description of your overall proposed solution
- b) Description of unique aspects of the Vendor's solution in the marketplace
- c) Description of components of the solution that are industry standard versus being proprietary to the vendor.
- d) For third party products proposed that are integrated with the vendor's solution provide the following for each product:
  1. Reason that this product is a third-party product version being part of the software vendor's solution

2. Extent to which this third-party product is integrated with the vendor's solution.

Vendors should identify where conflicts may exist between their solution and current technologies used by MedStar as described in section 1.5 and 1.6 of the RFP. MedStar would like the integration plans and costs to include integration to the following solutions

- a) Maintstar – Asset and Maintenance Management – SQL DB Based version
- b) eCore – ePro Scheduler Plus – vendor hosted emergency medical services personnel scheduling solution
- c) Integration between all solutions proposed in the RFP, including the recommended payroll processing partner

#### **2.3.4 Implementation Plan (Section 4)**

Provide an implementation plan in narrative format supported by an activity-level project plan that details how the proposed solution is to be implemented. It is expected that the vendor will lead the efforts in each of the implementation areas unless stated otherwise. This implementation should include the following:

- a) General implementation approach
- b) Project management approach
- c) Description of how you transition from the sales cycle to the implementation phase of the project.
- d) Description of key differentiators of the approach as it relates to implementing a solution on time, within budget and with the ability to meet MedStar's needs.

#### **2.3.5 Delivery of Product and Services (Section 5)**

State your commitment to providing the product/services in a conforming and timely fashion.

- a) What is the required time between an award of the contract and delivery of the product or services?
- b) What factors might delay delivery and implementation?
- c) What remedies for delay will you provide?

#### **2.3.6 Ongoing Support Services (Section 6)**

In addition to providing responses to the Form M, please describe the scope and conditions of any post-delivery and post-implementation support

#### **2.3.7 Required Vendor Agreements (Section 7)**

Vendors submitting Responses that require MedStar to sign additional vendor agreement documents must submit all such documents in their entirety and in original form with their Response in this section. These should be identified in Section 7 and attached at the end of the required forms as Exhibit 2.3.7.

#### **2.3.8 License and Maintenance Agreements (Section 8)**

Identify all required license and maintenance agreements for all components of the recommended solution (i.e., hardware, software, operating system, database, etc.).

These should be identified in Section 7 and attached at the end of the required forms as Exhibit 2.3.8.

### **2.3.9 Payment Terms and Conditions (Section 9)**

All Responses shall specify the terms and conditions of payment, which will be considered as part of, but not control, the award of Response (do not include pricing in the section—must be submitted separately). Note that MedStar's review, inspection, and processing procedures ordinarily require sixty days after receipt of invoice, materials or service. Responses which call for payment before sixty days from receipt of invoice or provide discounts only for payment before sixty days will be considered only if, in the opinion of MedStar, the necessary review, inspection and processing procedures can be satisfactorily completed as to the specific purchases within the specified time.

Invoices shall be fully documented as to labor, materials and equipment provided. Orders will be placed by the Support Services Department and must be given a Purchase Order Number to be valid. Payment will not be made by MedStar until the vendor has been given a Purchase Order Number, has furnished proper invoice, materials, or services, and otherwise complied with MedStar Purchasing procedures, unless this provision is waived by MedStar in writing.

### **2.3.10 Exceptions and Deviations (Section 10)**

All exceptions must be clearly stated in this section of the Response and must include a sectional or page reference to the subject of the exception, the scope of the exception, the ramifications of the exception for MedStar, and any proposed alternative, including suggested replacement language. MedStar, at its sole discretion, may reject any exception or deviation within Vendor's Response. Vendors who fail to take exception to a requirement will be to meet that requirement.

**Standard Contractual Provisions:** Vendors should expect that the provisions included on Exhibit A will be part of any contract issued by Medstar under this RFP. Any exceptions or objections to these provisions **MUST** be included in Section 10 of your Response. Otherwise, submission of your Response binds you to these terms and they will not be subject to negotiation.

### **2.3.11 Client References (Section 11)**

The Vendor must identify the clients that qualify the Vendor under items 2 and 3 of Section 1.7 and complete the Client References form (Form D) for five of the identified clients.

### **2.3.12 Required Forms and Attachments (Section 12)**

Vendors must complete and submit the forms contained in the Appendix:

- A. Binding Response Form (cover page to Technical and Cost proposal)
- B. Vendor Contact Information
- C. Vendor Background
- D. Client References

- E. Application Software
- F. Functional Requirements
- G. Technical Requirements
- H. Vendor Hosting Form
- I. Project Management
- J. Report Development
- K. Training
- L. Staffing Plan
- M. Ongoing Support Services
- N. Cost Proposal (submit separately)

Vendors must also submit:

- a. Information Security Assessment Form (for vendor hosted solutions)
- b. A copy of current business license(s), professional certifications, and other credentials Vendor deems relevant
- c. Certificate of good standing or qualification to conduct business in Texas from Secretary of State
- O. Reviewed or audited financial statements for the past three years.

## 2.4 Cost Proposal

Costs and pricing for the vendor's proposed solution should be submitted on a **Cost Proposal Form**. *It is the responsibility of the Vendor to ensure the accuracy of the pricing provided as part of the Response. Vendors will be bound by the terms offered in the Response and Cost Proposal Form, notwithstanding any errors or inaccuracies in the Cost Proposal or elsewhere in the Response.*

Costs should include the complete, fixed costs for the solution including but not limited to the following: project management, delivery costs, license fees, training, travel, per diem, installation, documentation, discounts, operating costs, etc. Use additional pages as needed to provide additional cost detail; however, all costs should be completely reflected on the **Cost Proposal Form**.

Vendors should also indicate whether their Cost Proposal would vary if the Vendor was asked to supply less than all of the products and services required by the RFP.

The Cost Proposal must be submitted separately from the Technical Proposal.

MedStar will consider special vendor pricing on discounts in exchange for MedStar's willingness to participate in new product testing or promotion including ability of vendor to bring other potential customers to city job sites to demonstrate product. The amount of product discount in exchange for these services should be clearly stated in the Response. Any promotional strategies should be discussed with the RFP Contact person and approved by the Chief Executive Officer before submission of the Response.

**END -- see Exhibit A and Appendix with forms.**

# EXHIBIT A

## Standard Contractual Provisions

Vendors should expect that the provisions below will be part of any contract issued by Medstar under this RFP. Any exceptions or objections to these provisions MUST be included in Section 10 of your Response. Otherwise, submission of your Response binds you to these terms and they will not be subject to negotiation.

1. *Indemnification.* To the extent permitted by law, and without waiving any immunities or defenses otherwise available against third parties, each party agrees to indemnify, defend and hold the other party, and the other party's officers, employees and agents, harmless from and against any and all losses, damages, costs, expenses or liabilities, including reasonable attorneys' fees, (collectively, "Damages") that arise from, or are related to, the party's breach of this Agreement, or which relate to any act or omission undertaken or caused by the indemnifying party. The foregoing indemnification obligation includes Damages arising out of any alleged infringement of copyrights, patent rights, and/or the unauthorized or unlicensed use of any material, property or other work in connection with the performance of the Services. The indemnifying party will have the right, but not the obligation, to control the intake, defense, and disposition of any claim or cause of action for which indemnity may be sought under this section. No claim for which indemnity is sought by a party will be settled without that party's prior written consent, which shall not be unreasonably delayed or withheld. An indemnifying party's liability obligation shall be reduced to the extent that a claim is caused by, or the result of, the indemnified party's own willful or intentional misconduct, or negligence or gross negligence.

2. *Alternative Dispute Resolution:* If the parties are unable to resolve a dispute informally, the dispute will be settled by final and binding arbitration. The cost of the arbitration shall be split evenly between the parties; however, the party prevailing in the arbitration shall be entitled to an award of its reasonable attorneys' fees and costs. No party may submit a dispute to arbitration without first giving the other party the opportunity to engage in formal mediation.

3. *Assignment.* This Agreement may not be assigned or transferred by a party without the prior written consent of the other party. This Agreement will be binding upon and inure to the benefit of the parties hereto, their legal representatives, and permitted successors and assigns.

4. *Amendment.* No amendment or modification of this Agreement will be valid or binding upon the parties unless such amendment or modification is in writing and executed by a duly authorized representative of each party.

5. *Severability.* If any provision of this Agreement is declared invalid by a court of competent jurisdiction, such provision will be ineffective only to the extent of such invalidity, illegibility or unenforceability so that the remainder of that provision and all remaining provisions of this Agreement will be valid and enforceable to the fullest extent permitted by applicable law.

6. *Other Terms.* MedStar will not be bound by any terms or conditions printed on any purchase order, invoice, memorandum, or other written communication between the parties unless such terms or conditions are incorporated into this Agreement or a duly executed amendment thereto.

7. *No Waiver.* The failure of either party to enforce or insist upon compliance with any of the terms and conditions of this Agreement, the temporary or recurring waiver of any term or condition of this Agreement, or the granting of an extension of the time for performance, will not constitute an Agreement to waive such terms with respect to any other occurrences.

8. *Merger and Conflicts with RFP and Response.* This Agreement, together with the RFP and the Vendor's Response, Exhibits, Statements of Work, and any other documents incorporated herein by reference, constitutes the sole and entire agreement of the parties to this Agreement with respect to the subject matter contained herein, and supersedes all prior and contemporaneous understandings and agreements, both written and oral, with respect to such subject matter. No representation, promise, inducement or statement of intention has been made by either party which is not embodied herein. Any document that is not expressly and specifically incorporated into this Agreement will act only to provide illustrations or descriptions of products and services to be provided, and will not act to modify this Agreement or provide binding contractual language between the parties. To the extent there is a conflict between this Agreement and the terms of the RFP or the Vendor's Response, the terms of this Agreement shall control.

9. *Compliance with Laws.* MedStar and Vendor and their employees shall perform under this Agreement in accordance with all applicable federal, state and local laws, rules and regulations, all applicable rules and regulations set by the State of Texas.

10. *Independent Contractors.* None of the provisions of this Agreement are intended to create and none shall be deemed or construed to create any relationship between the parties other than that of independent contractors. Neither Provider nor its employees shall be considered the employee of MedStar. This Agreement shall not create the relationship of employer-employee, partnership, or joint venture. Neither party shall have the right or power in any manner to unilaterally obligate the other to any third party, whether or not related to the purpose of this Agreement.

11. *Governing Law and Venue.* This Agreement shall be governed by the laws of the State of Texas without regard to its conflict of law's provisions and the venue of any litigation arising from this Agreement shall be in the District Courts of Tarrant County, Texas or the United States District Courts of the Northern District of Texas located in Fort Worth, Texas. The venue of any dispute resolution activity shall be in Fort Worth, Tarrant County, Texas.

12. *Waiver.* The failure to comply with or to enforce any term, provision, or condition of this Agreement, whether by conduct or otherwise, shall not constitute or be deemed a waiver of any other provision hereof; nor shall such failure to comply with or to enforce any term, provision, or condition hereof constitute or be deemed a continuing waiver. No waiver shall be binding unless executed in writing by the party making the waiver.

13. *Taxes.* Provider recognizes that MedStar qualifies as a tax-exempt governmental agency pursuant to Section 151.309 of the Texas Sales, Excise, and Use Tax Code, and is not responsible for payment of any amounts accountable or equal to any federal, state or local sales, use, excise, personal property, or other taxes levied on any transaction or article provided for by this Agreement.

14. *Counterparts.* This Agreement may be executed in multiple counterparts, each of which shall be deemed an original for all purposes and all of which shall constitute one and the same instrument for all purposes.

15. *Confidentiality.* Each party agrees to keep the other party's proprietary information, including all information relating to any of the products or services required under this Agreement, confidential and not to use such proprietary information except as necessary to perform under this Agreement. Upon expiration or termination of this Agreement, each party will return to the other party its respective proprietary information. Without limiting what is MedStar's confidential information, all information relating to patients and employees of MedStar is confidential.

## **Appendix - Proposal Forms**

The Appendix contains various forms that should be prepared and submitted along with the Vendor's Response. The intent of providing such forms is to ensure comparability between proposals. This Appendix includes the following forms:

- A. Binding Response (use as cover page to Technical and Cost proposal)
- B. Vendor Contact Information
- C. Vendor Background
- D. Client References
- E. Application Software
- F. Functional Requirements
- G. Technical Requirements
- H. Vendor Hosting
- I. Project Management
- J. Report Development
- K. Training
- L. Staffing Plan
- M. Ongoing Support Services
- N. Cost Proposal (submit separately)

## FORM A: Binding Response (Cover Page)

RFP Title: ERP System

RFP ID no. 2017-002

VENDOR NAME: \_\_\_\_\_

DATE OF SUBMISSION: \_\_\_\_\_

On behalf of the above named Vendor, I hereby submit the attached Response to RFP no. 2017-002 issued by the Metropolitan Area EMS Authority (MedStar Mobile Healthcare). I certify that I am authorized to bind the Vendor to the terms of the attached Response (Technical Proposal) and the terms of the Cost Proposal which is being submitted separately to MedStar Mobile Healthcare. The Response, including the Cost Proposal, shall be binding on the Vendor for no less that 120 days from the deadline for submission. I understand that this Response may not be withdrawn after the deadline for submission. On behalf of the Vendor, I agree that any inaccuracies or errors in the Response or Cost Proposal are the sole responsibility of the Vendor and will be binding on the Vendor, notwithstanding the inaccuracies or errors.

I further certify that Vendor has not prepared this Proposal in collusion with any other Vendor, and that the contents of this Proposal as to prices, terms or conditions have not been communicated by the undersigned nor by any employee or agent to any other vendor or to any other person(s) engaged in this type of business prior to the official opening of this Proposal. And further, that neither the Vendor nor their employees nor agents have been for the past six (6) months directly nor indirectly concerned in any pool or agreement or combination to control the price of goods or services on, nor to influence any person to submit a Proposal or not submit a Proposal thereon.

AUTHORIZED SIGNATURE:

\_\_\_\_\_  
By: \_\_\_\_\_

Title: \_\_\_\_\_

## FORM B: Vendor Contact Information

<b>Name of Business:</b>	
<b>Principal Contact Person:</b>	
<b>Address 1:</b>	
<b>Address 2:</b>	
<b>Address 3:</b>	
<b>Telephone:</b>	
<b>E-mail:</b>	
<b>Name of Individual Project Manager:</b>	
<b>Telephone:</b>	
<b>E-mail:</b>	
<b>Location of Project Office:</b>	

## FORM C: Vendor Background

(must be completed for Vendor and for each proposed subcontractor)

<b>Vendor name:</b>				
<b>Is Vendor prime contractor:</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
1.	What are the key differentiators of your company and its proposed solution?			
2.	What awards has your company or proposed solution obtained that are relevant to this project?			
3.	What documentation is available from an independent source that positively promotes either the company or products and services the Vendor is offering?			
4.	What strategic alliances have you made to further strengthen your products and services?			
5.	How do you guarantee the products and services provided by your company?			
7.	What is your niche in the marketplace and your preferred customer size?			
8.	Please describe the level of research and development investment you make in your products (i.e. – annual budget, head count, etc.):			
10.	Please describe your commitment to providing solutions for the public sector marketplace:			
11.	How many fully operational customer installations of the product proposed in this RFP, currently in production, has the Vendor completed?			
		<b>Location</b>	<b>Date</b>	<b>Quantity</b>
12.	How many fully operational customer installations, in total, has the Vendor completed?			
		<b>Location</b>	<b>Date</b>	<b>Quantity</b>

13.	Please state the year the Vendor started in the business of selling the proposed solution to local governments:		
14.	Where is the Vendor's closest support facility/sales office?		
15.	Where is the Vendor's company headquarters?		
16.	Please list the Vendor's sales in the previous three years:		
		<b>Year</b>	<b>Sales</b>
		2014	
		2013	
		2012	
17.	How many total employees does the Vendor have in each of the following categories:		
		<b>Area</b>	<b>Number</b>
		Sales/Marketing	
		Management/Administration	
		Help Desk Staff	
		Development Staff	
		Other	
		<b>Total:</b>	
18.	What is the Vendor's hourly rate for implementation assistance beyond that which is included in the Vendor Response by skill set?		
		<b>Rates for Additional Implementation Assistance</b>	
		<b>Skill Set</b>	<b>Hourly Rate</b>
			\$ / hr.
			\$ / hr.
			\$ / hr.
19.	What would be the Vendor's preferred comparably sized, site visit location?		

## FORM D: Client References

(complete a separate form for each client identified in Section 2.3.11)

Vendor name:	
Customer name:	
Customer contact:	
Customer phone number:	( )
E-mail address	

Describe Nature of Project and Services Provided to This Client:

## FORM E: Application Software

1.	In the table below, please provide the Vendor name, Vendor product, and product version for each of the proposed modules:				
		<b>Vendor</b>	<b>Proposed Product</b>	<b>Proposed Product Version</b>	
	<b>Module</b>				
	Accounts Payable				
	Bank Reconciliation				
	Budgeting				
	Business Licensing				
	Capital Assets				
	Cash Management				
	Cash Receipting				
	Contract Management				
	Debt Management				
	General Ledger				
	Grant and Project Accounting/Management				
	Human Resources				
	Inventory Management				
	Miscellaneous Billing and Accounts Receivable				
	Payroll				
	Purchasing				
	Time and Attendance				
	Work Order				
	Reporting/Report Writer				
	Customer relationship management				
2.	Describe your proposed licensing scheme (enterprise, module versus system, concurrent versus named, external Internet user(s), query versus user, etc.) and how that works in a disaster recovery situation.				

## FORM F: Functional Requirements

This Form identifies selected key features, functions, and capabilities MedStar is seeking in a new ERP system. Vendors must respond to each section explaining how their proposed solution meets the needs of MedStar, as well as identifying any features and functions that can further improve MedStar's processes. Proposals for products or services that do not meet the following technical criteria will not be evaluated and will be deemed rejected: Vendors are required to rate how their proposed solution meets the needs of MedStar using the following rating criteria.

Rating	Description
<b>4</b>	<b>Standard and available in the current release.</b> Software supports this requirement. No customization is required.
<b>3</b>	<b>Meets requirement with minor configuration or modification.</b> Testing and production of modifications will be completed by implementation date. Include an estimate for the cost of the modification.
<b>2</b>	<b>Available with 3<sup>rd</sup> party software application.</b> Indicate name of the application recommended and number of installs jointly completed.
<b>1</b>	<b>Future Release.</b> Requirement will be available in the next release. Indicate anticipated release month and year.
<b>0</b>	<b>Not available.</b> Software does not meet the requirement.

Ref	Description	Rating	Comments
<b>A.1</b>	General Requirements		
<b>A.1.1</b>	General System Requirements		
	System should provide simple user screens with useful pertinent information only		
	An intuitive, consistent (within and across modules), well designed user interface that is preferably browser-based		
	Fully integrated system where data is only entered one-time (single-points of data entry) to eliminate re-keying of information		
	Robust search capabilities for data analysis and inquiry		
	Ability to drill-down and drill-across from a transaction view to the supporting source data and documents if added		
	Ability to easily export information directly to Excel, Adobe, and flat file formats for example, but not to exclude other options.		
	Provide user-defined tables, fields, screens, reports, hot keys, and business rules/workflows		
	Ability to modify setup/configuration (i.e. setup codes, report parameters, etc.) without the assistance of the software provider		
	Ability to apply access security by role, individual or member of group and apply rules for exception based on functions, departmental data, etc.		
	Comprehensive online help, documentation, training materials, and a train the trainer program		
	Protection in terms of Disaster Recovery utilizing Volume Snap Shot services.		
	Ability to import files from different sources to various modules. (i.e. AP vouchers, journal entries, cash receipts, etc.)		
	All transactions are processed in real-time and immediately available for inquiry and reporting		
	Robust security capabilities with the ability to integrate to MS Active Directory 2012 or greater and utilize single signon functionality.		

	The system should accommodate role based security		
	Ability to use workflow capabilities and be available across all appropriate modules		
	Reporting should be user friendly, allowing staff to create and/or obtain reports or to export data with minimal training		
	Robust audit and transaction logging capabilities		
<b>A.1.2</b>	<b>Workflow</b>		
	Track transactions submitted for approval and review with a date / time stamp + submitter name		
	Automate approval notification both at the system level and via MedStar's email system		
	Implement best practice workflow templates for all core financial, payroll, and personnel transactions (i.e. payables processing, purchase orders, GL transaction approval, payroll processing, budgeting, etc.)		
	Ability for MedStar to create custom workflows based on MedStar's business rules		
	Employ a rich set of attributes in determining what users participate in which steps in the approval processes (e.g. GL number segments, unique groupings, project/task codes, object/spend category codes, consideration of roles, etc.)		
<b>A.1.3</b>	<b>Document Imaging</b>		
	Provide imaging of documents created by the system including purchase orders, payroll checks, accounts payable, W2's, 1099's, etc. The images should be available by individual record; for example, an individual's paycheck and not the entire check run for the pay period		
	Allow manually scanned images to attach to appropriate transaction records. The module should prompt for scanned attachments and should allow for user defined indices.		
	Conform to records management requirements including retention schedules with notification and prompted automated purging with user authorization.		
	Provide drill-down ability for the user to view related documents associated with financial, payroll, and personnel transactions. For example, vendor inquiry should provide the ability to view images of accounts payable checks, associated purchase orders, the requisition and associated manually scanned documents including bids and packing lists		
	Provide system coordination to allow batch processing of images. For example, allow accounts payable invoices received to be scanned in a batch and then associated with each purchase order		
<b>A.2</b>	<b>Financial Management</b>		
<b>A.2.1</b>	<b>General Ledger</b>		
	Basic fund accounting		
	Support journal entries; one-time, recurring, allocations and distributions, and ability to apply reversal or corrections		
	Support a mass import / entry without customization		
	Provide rules for entry validation based on roles at department level to prevent incorrect account codes used		
	Ability to change time worked on projects from employees' home accounts for each pay period and have the same % of benefits and taxes follow the projects from the employee's home account		
	Provide month end soft closing (i.e. prevent new entries to a closed accounting period for specific modules), ability to allow multiple periods open at the same time and a systematic year end close with ability to allow multiple closings		

	Provide automated year-end closing of revenue and expenditure accounts, roll forward the balance sheet to subsequent year beginning balances		
	Automate year-end accrual/reversal process especially in regards to multi-year capital projects		
	Capture multiple dates; transactional dates, posting dates, data entry dates, etc.		
	Provide a fully integrated system with all other modules		
	Provide all users access to the GL information based on security roles		
	Provide journal entry templates for efficient data entry		
	Tracks interfund transactions through "due to" and "due from" entries		
	Ensure transfers within and between funds are balanced		
	Allow for Cost Accounting; for distributed purchases, payments, labor costs, within Health System programs, activities and projects		
	Allow for configuration of workflows and approval options		
	Provide out of the box reporting and inquiry ability to address budget vs actual, expense reporting, journal reporting, transactional reporting		
	Provide user Dashboard		
	Provide user access to transaction details and drill down capabilities across modules		
	Allow for data analytics, what if analysis and forecasting		
	Streamline CAFR reporting		
	Allow AdHoc reporting at GL level		
<b>A.2.2</b>	<b>Budget Preparation and Management</b>		
	Ability to develop budgets annually		
	Provide options for seeding budgets with historical data (e.g., last year's actuals) or developing zero-based budgets		
	Support rules for budget transfers and adjustments during current budget year		
	Allow for justification data and background to be entered by departments as supporting content to stay with line item entries through budget roll-up cycles		
	Allow for document attachment at budget line item		
	Allow data import from Excel spreadsheets		
	Ability to apply mass changes to various accounts during budget process		
	Ability to save multiple versions during budget preparation		
	Ability to override transactions that fail budget check		
	Ability to control budgets at multiple levels		
	Provide ability to address organization changes		
	Address electronic workflow review and approval with ability to set rules		
	Automate budget requests - once approved requests will update departmental budgets without need to key		
	Employee details (salaries, benefits, etc.) for all employees should roll up to fund/departmental budgets		
	Provide employee budgeting, using actual Payroll data to populate employee budgets, and add positions with known salary and benefits from tables		
	Ability to add/delete/reallocate/shift positions and update proposed budgets in real time		
	Support allocation of employees costs by percentage to multiple account strings		

	Ability to update tables with various rates, including COLA rates, variable benefits, fixed benefits, and other personnel related rates and have changes update the proposed budget in real time		
	Provide pre-formatted outputs		
	Provide Budget Dashboard for high level information		
	Robust reporting capabilities to produce annual budget document		
	Robust budget reports available for budget staff and departmental use		
	Extensive use of Budget vs. Actual on-screen and hard-copy reporting		
	On-screen and reporting drill-down & drill-across for underlying details		
	Ability to report on justification details by budget line item in reporting		
	Outputs that are exportable to various file output formats (particularly Excel)		
	Ability to check available budgets on rollup to higher level of an organization set		
	Include reporting at all levels, with various criteria options		
	Status of department budget approvals		
	Ability to see budget to actual in real time and then drill down on those transactions		
	Automate budget carryover process along with need for multi-year CIP project budgets to roll to next year		
	Provide for way to allow contract / PO line items to roll with next year's budget automatically		
<b>A.2.3</b>	<b>Financial Reporting</b>		
	Provide easy access to data		
	Provide on-screen inquiry and ability to print results		
	Provide ability to save frequently run reports to favorites		
	Provide security access within reporting based on security roles		
	The ability to modify existing reports to include new data elements		
	The ability to develop new reported which generate accurate results (results that complement those provided via canned reports and in-system inquiry)		
<b>A.2.4</b>	<b>Requisitions / Purchasing</b>		
	Track information for the entire life-cycle of the procurement (i.e. requisition through payment)		
	Requisition to Purchase Order system		
	Ability to pre-encumber/encumber requisitions and purchases against pre-determined budgets - ability to override transactions that fail budget check		
	When a PO or requisition cancelled or closed, pre-encumbrance and encumbered amounts should be released		
	Ability to email/notify requester when PO's and Contracts are reaching a certain amount expended		
	Perform budget checking during requisition and purchase order creation (or as defined) to validate funds		
	Allow for an open PO to be maintained over multiple years		
	Provide flexibility to set purchase rules for dollar amounts and purchase type to direct workflow approvals		
	Allow for PO Types; Annual, Blanket, Multi-Department, etc.		
	Provide standing departmental PO's, based on dollar limit to invoice against		
	Provide a robust workflow for the approval of requisitions and purchase orders based on user defined, pre-established criteria		

	Management of Health System P-Card usage and reconciliation with bank		
	Support for the purchase of recurring services by automatically generating a requisition/purchase order based on pre-established criteria		
	Capture internal or external justification, notes, or comments on purchase order. Internal comments should only be visible to Health System staff		
	Ability to attach files to requisition, purchase order, packing slips, etc.		
	Support for tracking requestor and indicating the requestor name on the requisition.		
	Limit which users are authorized to override PO limits established		
	Allow for defined close and roll-over dates at system and module level		
	Include canned reports to meet MedStar Purchasing reporting needs		
	Support year-end activities such as the ability to roll purchase orders to the new fiscal year		
	Allow purchase orders to be entered for the new fiscal year prior to the start of that fiscal year		
	Prevent a purchase order from being issued to an inactive vendor		
<b>A.2.5</b>	<b>Accounts Payable</b>		
	Invoice processing		
	Automated matching process		
	Payment processing		
	Streamline payment of recurring invoices (debt service, lease payments, etc.)		
	Allow multi-line items for the purchase order/invoice for payment and to select by line item		
	Provide accounting and control for processing deposits and retention based payments		
	Allow for employee reimbursements from expense reports		
	Processing of 1099's and support 1099 reporting requirements		
	Electronic funds transfers		
	Automated bank reconciliation		
	Capture an image of the check and attach it to the voucher / check record		
	View the purchase order image, invoice image and payment image in vendor inquiry if available		
	Automatically calculate payment discounts		
	Automatically calculate taxes as appropriate for items being paid		
	Assign shipping and tax amounts at time of data entry		
	Allow splitting charges among several funds, programs, projects, etc.		
	Provide ability to short close a PO		
	Provide security by user for viewing or changing the tax ID or social security number field in the vendor master record		
	Attach relevant document images to accounts payable items (i.e. invoice, purchase order, payment, and receipt documents)		
	Provide workflow support for check issuance and invoice approvals		
	Allow staff to view vendor detailed payment history (i.e. see all PO's outstanding and payments made)		
	Provide the ability to view and select vendor information by a search feature or criteria, including business type		
	Provide ability to select active vendors		

	Ability to automatically send vendors emails with ACH payment details if payment is processed via ACH payment.		
	Provide ease of entry for single vendor payment requests		
	Assist in timely invoice processing to avoid late fees through automatic notifications		
	Create Positive Pay files		
	Ability to upload files for payment (i.e. Housing)		
	Payment cancellations (cancel & close/cancel & re-issue)		
	Ability to stale date/escheat payments		
	Ability to delete, close, or hold voucher for payment		
<b>A.2.6</b>	<b>Accounts Receivable / Billing</b>		
	Ability to integrate with SQL Server based Accounts Receivable application.		
	Provide for a commonly used form to standardize departmental processes		
	AR Aging detail sufficient to support collection activity and summary		
	Workflow capability for possible review and approval of invoices (billings)		
	Ability to monitor Revenue contracts		
	Ability to view customer history with details on invoice dates, paid dates, check-numbers, etc.		
	Efficiently research payment histories/billing histories for any customer		
	Ability to query an invoice to determine status		
	Efficient set up of new customers		
	Manage Health System wide Fee Schedule		
	Automate billing process for permits and other items as needed		
	Provide ability to print a statement of a single transaction or accumulative transactions		
	Ability to manage deposits and escrows		
	Provide invoice / account transactional reporting and research by account with drill down for supporting transactions and details		
	Ability to add user-defined messages to invoices and statements for customers		
	Ability to restrict access to add, delete, or modify customer information by users		
	Ability to develop customized invoices		
	Ability to correct invoices prior to posting and reprinting invoices and statements		
<b>A.2.7</b>	<b>Cashiering / Bank Reconciliation</b>		
	Provide the ability to accept external cash from third party solutions via file imports manually or on a scheduled basis		
	Ability to accept cash, check, credit card and electronic payments		
	Ability to enter negative amount with appropriate security		
	Ability to process NSF check, including payment reversal and general ledger account reversal, rebill with NSF check charge and track all history on customer record		
	Full electronic reconciliation of financial transactions with the financial institutions such as banks, lock boxes, as well as credit card merchants		
	Support use of multiple banks		
	Support work flow for approval process		

<b>A.2.8</b>	<b>Contract Management</b>		
	Integrate with Requisitions, Purchase Orders, Accounts Payable, Grants, Capital Projects and document imaging		
	Provide electronic workflow approvals for contract management		
	Track all aspects of a contract (i.e, terms, due dates, deliverables, quantities, milestones, etc.)		
	Verify budget availability during data entry		
	Allow for multi-year contracts		
	Make contract management and reporting an efficient process.		
<b>A.2.9</b>	<b>Grant Accounting / Management</b>		
	A centralized system for all grant management		
	Capture grant costing details for real time visibility		
	Capture revenue and expense details		
	Provide the ability to accurately account for all grant related activity over multiple fiscal years		
	Provide rules to ensure overhead % allocation is consistently applied		
	Assist in allocation of resources costs applied to grants		
	Robust reporting of total grants managed, department details and grants status		
<b>A.2.10</b>	<b>Project Accounting / Management</b>		
	Support the establishment of a project budget (which is typically linked to a funding source)		
	Allow rules for project type definitions		
	Manage recording of expenditure activity against the project budget (by pre-defined project task or activity)		
	Allow allocations to be managed at multiple levels and reconcile to the GL		
	Allow for CIP projects to carry-over multiple years		
	Detailed tracking of labor hours, billings, material and labor costs as well as units and labor hours		
	Cost and units, including labor hours, may be distributed to as many Projects and sub-projects as the user wishes to establish		
	Provide phase breakdowns for such items as mobilization, overhead, supervision, engineering, drafting, layout, miscellaneous, sub-contracts, shop work, field work, installation, etc.		
	Association of project codes directly to time entry for actual costs vs. allocations		
	Track actual, committed and estimated (or budgeted) costs		
	Produce reports showing details of costs and revenues by job		
	Allow for the reporting of project activity by period or over the life of the project		
	Ability to manage escrows.		
<b>A.2.1 1</b>	<b>Fixed Asset Management</b>		
	Asset creation through purchasing requisition, AP voucher and journal entries		
	Provide for mass entry or electronic import		
	Allow for an individual asset to have multiple funding sources but maintain the same asset id		
	Allow for full account string to be associated with asset		

	Provide asset tag management or interface of data		
	Ability to manage Grant funded assets by type (federal, homeland security, etc.)		
	Full asset maintenance (including transfers)		
	Asset depreciation schedules, and ability to change depreciation methodology from a point in time and recalculate the depreciation based on the remaining life		
	Asset disposal and retirement		
	Managing sale of an asset and revenue receipt		
	Robust reporting at all data levels		
	Track non capitalized assets		
<b>A.3</b>	<b>Human Resources</b>		
	Provide applicant tracking, with the ability to group applicants by custom selection criteria, ability to notify a selected or all applicants for a particular recruitment, and ability to track documents for each applicant.		
	Incorporate Position Control		
	Make extensive use of table-based salary maintenance schedules		
	Provides Business Analytics and simple ad hoc reporting		
	Provide self-service online options supporting W-4 changes, time-off requests, cash-out requests, employee profile changes, beneficiary changes, subject to workflow rules		
	Provide workflow and self-service options for open enrollment process.		
	Provide workflow approvals for time-delayed actions/events; (i.e., compensation that begins after a specific number of hours or date).		
	Track certifications including expiration date		
	Provide the ability to specify required certifications by job title		
	Support automatic notifications of upcoming salary step increases		
	Provide Employee Event tracking to manage performance evaluations, training, and certifications, salary increases		
	Provide tracking and reporting for employees on medical leave and/or workers' comp leave		
	Provide reports to determine FMLA eligibility (which is primarily based upon hours worked, excluding certain leave types).		
	Provide workflow for the above tracking and reporting functionalities such as performance evaluation, FMLA, etc., wherein emails are sent to the HR administrator, employees and their supervisors.		
	Provide an online portal for employee access to personnel forms, MOUs, policies, procedures, personnel manual, salary schedule, etc.		
	Provide reporting of all annual EEO data		
	Provide an audit report of all system changes with specific change(s) (before and after), user who made the change, and date & time of change.		
	Implement strict security measures concerning employee ID and access to system		
	Implement an electronic Employee Performance Review process		
	Organization charting capability		
	Provide benefits administration capabilities		
	Provide COBRA billing capabilities		
	Maintain personnel administration for basic demographic, address information, and emergency contacts		
	Manage all personnel actions (promotions, demotions, salary increases, leave, etc.)		

	Support employee self-service for simple changes		
	Provide maintenance of employment history		
	Streamline request to add a pay code to an employee through a form and workflow		
	Compensation		
	Enforce the administration of rules for calculating pay		
	Maintain effective salary dates		
	Calculate future pay increases		
	Calculate additional pay based on flexible, user defined criteria		
	Calculate step, increment, and percentage pay increases for all or a group of employees		
	Project costs for future fiscal years		
	Provide analysis of compensation by Chart of Account element		
	Allow for rules based benefits		
	Allow unlimited earning codes		
	Provide Employee Status codes to manage leaves, Workers' Comp., FMLA, etc.		
	Provide tracking of suspension and disciplinary events		
	Ability to address current and future Affordable Care Act requirements		
	Provide off-the-shelf reports that provide data on applicant, employment, certification, training, evaluation, leave of absence, termination, status scenarios, etc.		
	Provide ability to extract data in multiple file formats for manual and or electronic interface to other systems		
	Support for ad hoc reporting		
	Calculate leave eligibility and leave availability		
	Notify employees of leave that will be lost or automatically paid		
	Integrate leave types with Benefits Administration and Payroll		
	Track leave taken, leave lost, and leave payments by leave type and reason		
<b>A.4</b>	<b>Payroll</b>		
	Generate paychecks, direct deposit (supporting deposits across multiple accounts on a single check), EFT files, and related positive pay (exception based) files		
	Comply with State and Federal payroll tax withholding and reporting requirements		
	Support retro-active and manual payments		
	Calculate benefit deductions based on rules specified in benefits administration module, including mid-year rate changes		
	Calculate pay based on user defined criteria (pay status, overtime rules, etc.)		
	Support multiple concurrently open payrolls (e.g. vacation, sick or comp time cash outs, etc.)		
	Support Utah Retirement System files and reports		
	Provide ability for Positive Pay, ACH, Check Register interfaces		
	Support multiple pay codes and support numerous MOU's and flexible %		
	Support setup of earn codes, deductions codes and others at the company level or support upload of setup changes to various employee groups.		
	Support Fair Labor Standards Act (FLSA)		
	Manage accruals for Comp Time Leave, Workers Comp, etc.		
	Provide the ability to automatically upload Federal and state tax changes (rates, earnings, deductions)		
	Include automated Time and Attendance collection at department level		

	Automate the vacation pay-outs to replace manual process		
	Generate off-the-shelf and ad hoc reports that support data requirements associated with Utah Retirement Systems, auditors, payroll register review, sick and vacation accrual reports for management, edit lists, overtime reports, tax reports, auto allowance reports, extensive exception and payroll calculations / generation reports, etc.		
<b>A.5</b>	<b>Customer Relations Management (CRM)</b>		
	Support contacts list of current high level facility, community and jurisdictional customers		
	Support logging of customer interactions with notes and supporting documents		
	Provide ability for internal users to review history of interactions with supporting notes and documents from off-campus locations		
	Provide logging of customer complaints and resolutions with searchable discrete data elements that can be exported to a statistical software application for analysis – include automated notification workflow for task completion or delays in processing		
	Integrate with Exchange calendars for coordination of external meeting		
	Integrate email utility with contact lists for e-newsletter distribution		
	Provide an e-commerce platform that facilitates MedStar Saver enrollment and renewal		
<b>A.6</b>	<b>Medical Supply Chain Management</b>		
	Support bar code and RFID tracking		
	Ability to perform cycle counts and automated ordering based on par levels and ordering points		
	Ability to have multiple parts/supply room locations that can be named by MedStar		
	Check in / Check out functionality		
	Preventative maintenance management		
	Integration with electronic patient care reporting (ePCR) to track supply usage based on procedure		
	Ability to assign inventory items to categories and sub-categories		
	Track part, case, and internal barcodes / RFID tags		
	Track lot numbers and expiration dates		
	GL account tracking		
	Supplier Management - Supplier tracking, integration/punch out, automated PO creation and ordering, price per item tracking by supplier		
	Track manufacturer, make, model, year, serial number, asset tag, purchase price, purchase date, in service date, warranty, decommission date, GL Account for assets		
	Facilities Maintenance – Maintenance request tracking, facility asset tracking including manufacturer, make, model, year, serial number, asset tag, purchase price, purchase date, in service date, warranty, decommission date, GL Account		

## FORM G: Technical Requirements

**Minimum Requirements:**

1. The proposed ERP system must provide 99.993% uptime in a warranted environment.
2. The ERP system and all proposed integrations must meet or exceed all HIPAA, HITECH, and PCI-DSS security standards.

Use the following to describe how you propose to meet the technical requirements of the RFP:

1.	Identify the communication protocols and networking requirements that are required for implementation and operation of the proposed system. In the event that there are multiple communication systems and/or protocols available, list all options. Take into account MedStar’s current WAN and remote computing requirements and indicate what changes are required or recommended.
2.	What database(s) are you proposing?
3.	What server operating system are you proposing?
4.	Is your proposed solution browser based? If only certain components/module are, please specify and identify those.
5.	Describe what, if any, footprint (e.g. local software artifacts such as DLLs) exists on the user’s desktop.
6.	Does your proposal contain or envision the use of a data warehouse? If yes, describe your data warehousing capabilities and architecture.
7.	Describe the system administration tools that are used to manage the application including any data archival tools, tools for managing application updates, online help management tools, etc.
8.	Describe the network management systems that either your system uses, interoperates/integrates with, or you recommend. Please specify.
9.	Describe the minimum hardware, software, storage, memory, operating system and other requirements for desktop computers to access the application such that MedStar can determine the extent to which existing computers must be upgraded or replaced.
<b>System Performance</b>	

1.	System response time must not impede the ability for departmental staff to perform their required job functions using the system. Will your system be available 99.5% of the time, except for planned downtime?
2.	Can you guarantee a 3-second maximum response time?
3.	What are your guarantees on system performance?

<b>Security</b>	
1.	Describe the identification and authorization capabilities of your proposed solution for users.
2.	Describe how your system interoperates with Active Directory.
3.	Describe the security audit capabilities of your proposed solution.
4.	What functions does your proposed system have to protect the privacy of information designated "private" (e.g. personally identifiable, SSN, credit card, ACH, HIPAA, etc.) that it processes or stores?
5.	What will you do to address vulnerabilities in your product discovered subsequent to us deploying your code? In what time interval will they be fixed (Critical & non-critical)? At what cost to MedStar?
6.	What is your process for notifying the customer and fixing bugs once they have been identified?

## FORM H: Vendor Hosted Solutions / Security

1.	Will your company host the solution or will this be managed by a third party?
3.	Provide the total number of clients and corresponding number of end-users of hosted solutions currently supported by your company.
4.	Does the system interfaces support a browser interface with or without the help of additional components?
5.	How are hosted software applications deployed for use by numerous customers (dedicated servers for each hosted customer, or is a single set of applications utilized for all customers)?
6.	What system/application availability and response time will your proposed system meet? What are MedStar's responsibilities to ensure this level of performance?
7.	How do you track monthly usage for subscription-based services?
8.	How much notification will you give MedStar in advance of any scheduled downtime?
9.	Where would local support be located for a client in Fort Worth, TX?
10.	Are support calls included in annual maintenance fees, or charged on a per call basis? If on a per-call basis, please specify rates and billing method
10.	If you are propose to host the ERP solution, you must complete and submit the attached MedStar Information Security Assessment Forfor SaaS/Cloud solutions Security Assessment form. You may also request a copy of the Assessment Form from <a href="mailto:wstokes@medstar911.org">wstokes@medstar911.org</a> .



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## FORM I: Project Management

1.	How does the Vendor plan to manage the vast amount of material that is produced during the project through potential solutions such as a collaboration environment?
2.	Provide specific information on project close-out activities to transition support to MedStar.
3.	How will project management be resourced?

## FORM J: Report Development

1.	What is the query tool and report writer that Vendor is proposing?
2.	What is your definition of a report?
3.	What reports are available out of the box? Provide a list and samples at the end of this section.
4.	Describe your process for determining the scope of what reports will have to be developed (not out-of-the-box) and what effort it will take to develop and test them?
5.	It is expected that the system will provide the ability for end-user querying and reporting to be performed without impacting the performance of the transactional system. Does your proposal meet this expectation?

## FORM K: Training

1.	What types of training documentation will be developed by the Vendor?
2.	What additional tools will be used in developing the training material?
3.	Describe the opportunities for ongoing training.
4.	Describe the Vendor's ability to provide online training material versus classroom training.

## FORM L: Staffing Plan

1.	Identify the degree to which Vendor staff will be onsite versus off-site during the project.																				
2.	Provide the type and amount of implementation support to be provided (e.g., number of personnel, level of personnel, time commitment (FTE), etc.).																				
3.	Provide the resource and configuration requirements for the Vendor's staff during the implementation:																				
		a. Number of workstations																			
		b. Number of desks																			
		c. Number and size of dedicated rooms for the project																			
		d. Parking																			
		e. Telephones																			
		f. Network accessibility needs																			
		g. White boards																			
		h. Flip charts																			
		i. Power requirements																			
		j. Other resource needs																			
4.	Use the table provided below to identify the number of MedStar business staff expected to be committed to the project implementation. Initial identification of project roles has been provided but should be supplemented or revised by Vendors based on their experience in implementing their product in similar environments.																				
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;">Project Role</th> <th style="width: 40%;">Project Responsibilities</th> <th style="width: 20%;">FTE</th> </tr> </thead> <tbody> <tr> <td>Executive Sponsor(s)</td> <td></td> <td></td> </tr> <tr> <td>Project Manager</td> <td></td> <td></td> </tr> <tr> <td>Project Administrator</td> <td></td> <td></td> </tr> <tr> <td>Functional Process Owners</td> <td></td> <td></td> </tr> <tr> <td>Functional Process</td> <td></td> <td></td> </tr> </tbody> </table>			Project Role	Project Responsibilities	FTE	Executive Sponsor(s)			Project Manager			Project Administrator			Functional Process Owners			Functional Process		
Project Role	Project Responsibilities	FTE																			
Executive Sponsor(s)																					
Project Manager																					
Project Administrator																					
Functional Process Owners																					
Functional Process																					

		Team Participants (per member involvement)			
		Training Coordinator Team Lead			
		Change Management Team Lead			
		Communications Team Lead			
		Other Roles			
		Other Roles			
		Other Roles			
5.	Use the table below to identify the number of technical resources expected to be committed to the project implementation. Initial identification of project roles has been provided but should be supplemented or revised by Vendors based on their experience in implementing their product in similar environments.				

## FORM M: Ongoing Support Services

<b>Support and Maintenance</b>	
1.	Provide the minimum, maximum, and average response times (hours) provided as part of the basic support agreement and average response time for the past twelve (12) months.
2.	Provide Help Desk services for technical support and end users. Specify days and hours and any escalation options and procedures.
3.	Identify the party or business unit that is responsible for the support options provided above. The Vendor shall include information for a Client-hosted versus a Vendor-hosted solution.
4.	Provide the following regarding the number of business staff of MedStar should expect to be committed to providing on-going application support: <ul style="list-style-type: none"> <li>a. Role</li> <li>b. Responsibility</li> <li>c. Estimated time commitment in terms of FTE time</li> </ul>
5.	For IT staff resources, please provide the following information: <ul style="list-style-type: none"> <li>a. Type of positions required (e.g., help desk, trainer, DBA, report developer, application support, system administrator, security administration, etc.)</li> <li>b. Number of FTEs within each position</li> <li>c. Skill sets required for each position</li> <li>d. Training required and whether the Vendor provides this training</li> </ul>
6.	Do you limit the number of MedStar staff who can call in for support? If yes, explain your model and how additional staff can be included and at what incremental cost? If there is no limitation, the maintenance agreement should clearly state this fact. Are you agreeable to include such language in our contract?
7.	Describe the types of support needed to keep the product under current support and to keep the product enhanced.
8.	Do you need remote access to the server to support/maintain it? If yes, describe the method(s) and security used.
<b>Software Updates and Distribution</b>	
9.	It is anticipated that all system updates and release patches will be downloadable from the Vendor's web site. An accumulation patch process is desired. Provide information on how "server" and "client-side" software updates are received, processed and distributed to either the server and/or client environment, including but not limited to: <ul style="list-style-type: none"> <li>a. Backward version compatibility and support of back versions,</li> <li>b. Timeframe/policy on moving to new versions,</li> <li>c. Automatic product upgrades or on demand,</li> </ul>

	<ul style="list-style-type: none"> <li>d. Ease of implementation for MedStar staff versus need to contract for services.</li> <li>e. Use of Microsoft Systems Management Server (SMS) 2003 and/or Microsoft Software Update Services (SUS) to deploy new versions and patches to servers and clients.</li> </ul>
10.	<p>Describe the product release cycle including:</p> <ul style="list-style-type: none"> <li>a. Frequency of upgrades/enhancements or new versions (major and minor version releases)</li> <li>b. Contents of release,</li> <li>c. How long release takes to implement, and</li> <li>d. Use of release notes.</li> </ul>
<b>Customizations</b>	
11.	How does the Vendor define customization versus configuration?
12.	How can MedStar configure the software directly without Vendor involvement?
13.	How are local configurations maintained when installing new releases of the Vendor's software?

## FORM N: COST PROPOSAL

Vendor Name: \_\_\_\_\_

THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED SEPARATELY FROM THE TECHNICAL PROPOSAL TO: [jjordan@medstar911.org](mailto:jjordan@medstar911.org) with a “read” receipt requested. Remember to attach a copy of the **Binding Response Form** as a cover sheet to this Cost Proposal.

Use this format to prepare your Cost Proposal:

Component	Cost
<b>I. Implementation</b>	
A. Software	
1. [identify all new software Medstar will need to purchase	
SUBTOTAL	
A. Labor	
[identify each component of labor required for implementation]	
SUBTOTAL	
TOTAL IMPLEMENTATION COST	
<b>II. Recurring Costs</b>	
A. Software	
[list any annual fees for required new software]	
SUBTOTAL	
[list annual charges for support and maintenance]	
SUBTOTAL	
ANNUAL TOTAL	

VENDOR NOTES AND EXPLANATIONS: *[add here]*

Authorized Signature: \_\_\_\_\_

Contact Name (please print): \_\_\_\_\_

Title: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email address: \_\_\_\_\_