



## REQUEST FOR PROPOSAL PS-1034 BEHAVIORAL HEALTH ELECTRONIC HEALTH RECORD SYSTEM ACQUISITION AND IMPLEMENTATION ADDENDUM NO. 2

September 9, 2009

### **ISSUE #1:**

**Correction to:** Appendix G – Cost Proposal

**Tab Name:** “Total Cost Summary”

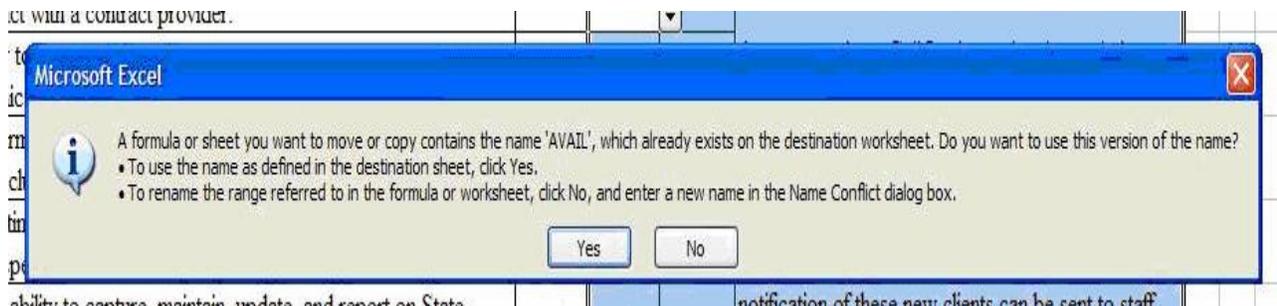
**Rows:** 11, 12, 13, 14

**Description of Change:** Rows 11, 12, 13, and 14 are being deleted from the “Total Cost Summary” tab. The costs for professional services displayed in these rows are already included the total cost of professional services show on the tab named “I – Professional Services”. Deleting the rows will keep the cost of these services from being counted twice. The instructions on the “Total Cost Summary” tab indicate that vendors are not to enter any cost figures on the “Total Cost Summary” tab. However, vendors may, at their discretion, simply delete rows 11, 12, 13, and 14 from the original version of the “**Appendix G – Cost Proposal**” file issued with the original RFP packet, or may use the newly released file that will be posted on the County’s Purchasing website as part of Addendum #2.

**File Name with Corrections:** “BHEHR RFP PS-1034 - Appendix G - Cost Proposal - From Addendum 2.xls”

### **ISSUE #2:**

**Clarification:** As part of Addendum #1, a new version of “**Appendix C – Functional Requirements**” was released. If vendors attempt to copy columns or sheets from the original version of “**Appendix C – Functional Requirements**” to the new version of “**Appendix C – Functional Requirements**” that was released as part of Addendum #1, a pop-up box may appear that looks like this:



**County of San Luis Obispo    RFP PS- #1034    September 9, 2009    Page 2**  
**BEHAVIORAL HEALTH ELECTRONIC HEALTH RECORD SYSTEM**  
**ACQUISITION AND IMPLEMENTATION**  
**ADDENDUM 2**

This box may actually appear twice – once with a question about the use of the name “AVAIL,” and another about the use of the name, “HOW\_MET.” It is acceptable to press the “Yes” button on both pop-up boxes. Alternatively, it is acceptable to leave your responses in the original spreadsheet that was issued with the RFP packet and simply make the manual adjustments described in the "Q&A Part 3" document dated August 25, 2009, which is posted on the SLO County website. Examine question 7 on page 3 for directions.

**ISSUE #3:**

**File Name:** “BHEHR RFP PS-1034 - Appendix C - Functional Requirements - From Addendum 1.xls”

**Tab Name:** “1.18 Referrals”

**Row:** 23

**Requirement #:** 1.18.5.1

**Clarification:** In the responses and answers provided to vendors on 8/18/09, the County indicates in the answer to question #12 that requirement # 1.18.5.1 is being “removed.” More precisely, vendor responses to this requirement are not going to be counted. This requirement will not physically be removed from the functional requirements spreadsheet. Instead, the County will simply not count vendor responses to this requirement when the responses are tallied.

PHILL HALEY - BUYER

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**ACKNOWLEDGMENT**

\_\_\_\_\_ Dated

The foregoing addendum is hereby acknowledged and was considered in final submission of Request for Proposal PS-#1034, to be opened on September 16, 2009.

\_\_\_\_\_ Proposer

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

**PLEASE SIGN ACKNOWLEDGEMENT AND RETURN WITH PROPOSAL.**

Proposer's Name: \_\_\_\_\_

RFP No: PS-1034

## APPENDIX G - Addendum 2 Update

### COST PROPOSAL



### Behavioral Health Electronic Health Record System



## Cost Proposal - Table of Contents

<b>INSTRUCTIONS</b>
<b>Total Cost Summary</b>
<b>I - Professional Services</b>
<b>II - System Software</b>
<b>III - Training</b>
<b>IV - Custom Modifications</b>
<b>V - Custom Interfaces</b>
<b>VI - Data Migration</b>
<b>VII - Professional Services Rates</b>
<b>VIII - Annual Maintenance and Support Services</b>
<b>IX - Assumptions</b>



## Instructions

The pricing shall be inclusive of all labor, overhead, travel, equipment, materials and any other expenses required to deliver all Deliverables, products, services and other Work in accordance with **Appendix B - County Proposed Statement of Work** and the system requirements (**Appendix C - Functional Requirements, Appendix D - Technical Requirements and Appendix E - Data Requirements**). Proposer assumes all liability for any omissions.

Complete and provide the descriptive detail requested for each and every required section and schedule.

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.

All cost quotations shall be firm and an irrevocable offer which shall remain in full force and effect for a minimum of three hundred and ninety (390) days after the proposal submission deadline set forth in RFP section 1.4 (Schedule of Events), or until execution by County's Board of Supervisors of any resultant Agreement, whichever occurs later.

Proposer shall provide all dollar amounts in a two (2) decimal format and all descriptive information in alphanumeric characters and text formats.

Formulas will automatically transfer the Total Cost from each worksheet into the Total Cost Summary worksheet. Proposer **shall not** enter pricing into the Total Cost Summary worksheet.

Proposer shall expand cells, insert additional rows, wrap text, and respond to each section, as necessary. No other templates shall be accepted. Proposers **shall not** alter formulas. All formulas in the Schedule of Payments are locked. All responses shall be in cells that are unshaded.

In tab "IX - Assumptions," list all relevant assumptions effecting the proposed fixed costs.

**NOTE: County may choose to use existing County System Hardware or may elect to purchase System Hardware under a separate contract.**



## TOTAL COST SUMMARY

**Instructions:** Cost information will transfer automatically to this page. No entries should be made on this sheet. If adjustments are required, adjustments should be made to the source data on other worksheets.

Section #	Component	Total Fixed Cost
I	Professional Services	\$ -
II	System Software	\$ -
	<b>Sub-Total BHEHR Implementation Fixed Cost</b>	<b>\$ -</b>
III	Software Maintenance and Support (Sum of all Maintenance Fees for First 3 Yrs)	\$ -
	<b>TOTAL BHEHR Project Fixed Cost</b>	<b>\$ -</b>



### PROFESSIONAL SERVICES

**Instructions:** Part 'A' below lists each task as it appears in the sample Statement of Work (**Appendix B - County Proposed Statement of Work**). Costs for services that are detailed on other tabs in this Cost Proposal (Task 4, 6, 8, 9) will be automatically transferred into this sheet. List costs for all remaining Professional Services (Tasks 1, 2, 3, 5, 7, 10). In Part 'B,' list the fixed cost all other professional services required to successfully complete the project. Add rows as needed. Include a description of the service as well as the level of staff required to perform the service and the number of staff hours required.

Part A: SOW Professional Services	Proposed Fixed Cost
SOW Task 1 - Project Management	\$0.00
SOW Task 2 - Establish System Environment	\$0.00
SOW Task 3 - Documentation	\$0.00
<b>SOW Task 4 - Data Migration (total will automatically calculate based on total cost in tab "VI - Data Migration")</b>	<b>\$0.00</b>
SOW Task 5 - System Design and Customization	\$0.00
<b>SOW Task 6 - Training (total will automatically calculate based on total cost in tab "III - Training")</b>	<b>\$0.00</b>
SOW Task 7 - Testing	\$0.00
<b>SOW Task 8 - System Modification (total will automatically calculate based on total cost in tab "IV - Custom Modifications")</b>	<b>\$0.00</b>
<b>SOW Task 9 - Interface Development (total will automatically calculate based on total cost in tab "V - Custom Interfaces")</b>	<b>\$0.00</b>
SOW Task 10 - System Cutover ("Go Live")	\$0.00
<b>SUB-TOTAL FIXED COST PROFESSIONAL SERVICES (PART A):</b>	<b>\$0.00</b>

Part B: Professional Services - Additional Tasks				
Item No.	Description of Services	Level of Staff Required	Staff Hrs Required	Proposed Fixed Cost
1				\$0.00
2				\$0.00
<b>FIXED COST PROFESSIONAL SERVICES TOTAL PART B</b>				<b>\$0.00</b>
<b>TOTAL FIXED PRICE PROFESSIONAL SERVICES (PART A &amp; B)</b>				<b>\$0.00</b>



SYSTEM SOFTWARE						
<b>Instructions:</b> List all software components that will be supplied as part of the proposed solution. Provide the name of the Product, Version and Purpose of each module or component. Provide Total Qty and Unit Cost for each software component. Proposed Fixed Cost will calculate automatically. Item # is meant to just be a reference number. Additional rows may be added as necessary.						
Item #	Manufacturer/ Licensor	Description of each Component		Total Qty	Unit Cost	Proposed Fixed Cost
1		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
2		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
3		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
4		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
5		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
6		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
7		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
8		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
9		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
10		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
11		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
12		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
13		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
14		Product Name			\$0.00	\$0.00
		Version				
		Purpose				
<b>TOTAL FIXED SOFTWARE COST</b>						<b>\$0.00</b>



**TRAINING**

**Instructions:** List all training that the proposer considers necessary to ensure that all individuals who will be working with the system are properly trained. Provide descriptive information and proposed fixed costs for each course to be provided in accordance with Task 6 (Training) of **Appendix B - County Proposed Statement of Work**. If needed, Vendor shall enter any other costs under the category of "Other (Recommended by Vendor)," including any training on peripheral hardware. For each Category below, list each course provided in your training curriculum and include a brief course description and provide the Unit Cost Per Attendee to calculate the Proposed Fixed Price. Add rows to each category as needed.

Category	Course Title and Description	# of Training Days	Est. County Staff Per Course	Unit Cost Per Attendee	Proposed Fixed Cost
System Administration	Course 1 [Title]: [Description....]		6	\$0.00	\$0.00
	Course 2 [Title]: [Description....]		6	\$0.00	\$0.00
Database Administration	Course 1 [Title]: [Description....]		3	\$0.00	\$0.00
	Course 2 [Title]: [Description....]		3	\$0.00	\$0.00
Interface Development	Course 1 [Title]: [Description....]		2	\$0.00	\$0.00
	Course 2 [Title]: [Description....]		2	\$0.00	\$0.00
Report / Query Development	Course 1 [Title]: [Description....]		10	\$0.00	\$0.00
	Course 2 [Title]: [Description....]		10	\$0.00	\$0.00
Application Configuration	Course 1 [Title]: [Description....]		10	\$0.00	\$0.00
	Course 2 [Title]: [Description....]		10	\$0.00	\$0.00
Form Development Tool	Course 1 [Title]: [Description....]		10	\$0.00	\$0.00
	Course 2 [Title]: [Description....]		10	\$0.00	\$0.00
User Acceptance Training	Course 1 [Title]: [Description....]		20	\$0.00	\$0.00
	Course 2 [Title]: [Description....]		20	\$0.00	\$0.00
Train the Trainer Application Training	Course 1 [Title]: [Description....]		10	\$0.00	\$0.00
	Course 2 [Title]: [Description....]		10	\$0.00	\$0.00
Other (Recommended by Vendor)	Course 1 [Title]: [Description....]			\$0.00	\$0.00
	Course 2 [Title]: [Description....]			\$0.00	\$0.00
<b>TOTAL FIXED TRAINING COST</b>					<b>\$0.00</b>



### CUSTOM MODIFICATIONS

**Instructions:** Provide proposed fixed costs for software modifications needed to implement the proposed System Software in accordance with Task 8 (Custom Modifications) of **Appendix B - County Proposed Statement of Work**. Provide cross-references to the specific Section Name and Requirement Number in the Functional and Technical requirements matrices relating to Custom Modifications (excluding Interfaces and Conversions which are addressed on a separate tab (V -Custom Interfaces). Provide the Proposed Fixed Cost per Item No. In addition to the description of the service, also provide the hours and responsibility level of your staff to provide such services.

Item No.	Reference to Appendix C - Functional Requirements and Appendix D - Technical Requirements responses			Description of Modification	Level of Staff Required and Est. Hrs for Each	Software Component to be Modified	Proposed Fixed Cost
	Indicate: Functional or Technical	Requirement Section Name	Requirement No.				
1							\$0.00
2							\$0.00
3							\$0.00
4							\$0.00
5							\$0.00
6							\$0.00
<b>CUSTOM MODIFICATIONS TOTAL FIXED COST</b>							<b>\$0.00</b>



**CUSTOM INTERFACES**

**Instructions:** Provide proposed fixed costs for the effort to create Custom Interfaces as described in **Appendix B - County Proposed Statement of Work** to implement the proposed System Software. Note that for each Custom Interface, a separate proposed fixed cost should be provided for the development of the specification and for the development of the interface. Provide cross-references to the specific Task No. in the SOW relating to Interfaces. Provide the Proposed Fixed Price per Item No. The description of the services to be provided shall include the hours and responsibility level of your staff to provide such services.

Item No.	Name of Interface	SOW Task No.	Description of Services	Level of Staff Required and Est. Hrs for Each	Proposed Fixed Cost
1	Family Care Network		Define and document interface specification		\$0.00
			Develop custom interface:		\$0.00
2	Drug Testing Lab		Define and document interface specification		\$0.00
			Develop custom interface:		\$0.00
3			Define and document interface specification		\$0.00
			Develop custom interface:		\$0.00
4			Define and document interface specification		\$0.00
			Develop custom interface:		\$0.00
5			Define and document interface specification		\$0.00
			Develop custom interface:		\$0.00
<b>CUSTOM INTERFACES TOTAL FIXED COST</b>					<b>\$0.00</b>



**DATA MIGRATION**

**Instructions:** List each Source System in operation at the County that will be part of the data migration effort, the Est. # of Records to be converted, a Description of the Service to be provided and the estimated number of staff hours required to complete the data migration to the proposed system. Refer to Task 4 of **Appendix B - County Proposed Statement of Work** for a description of the scope of Data Migration services.

Item No.	Source System	Est. # of Records	Description of Services	Est. Staff Hrs Required	Proposed Fixed Cost
1					\$0.00
2					\$0.00
3					\$0.00
4					\$0.00
5					\$0.00
6					\$0.00
7					\$0.00
8					\$0.00
<b>DATA MIGRATION TOTAL FIXED COST</b>					<b>\$0.00</b>



**PROFESSIONAL SERVICES RATES**

**Instructions:** List all proposed fixed labor rates to be used for invoicing Other Professional Services should the County request additional services not included in the initial RFP or Vendor proposal. If it is necessary to include Other Personnel, add rows to the table as necessary.

**Proposed Fixed Labor Rates are as follows:**

Item No.	Job Title or Type	Hourly Rate
1	Project Manager	\$0.00
2	Trainers	\$0.00
3	Application Support Resource (Analyst)	\$0.00
4	Interface Developer	\$0.00
5	Software Developer	\$0.00
6	<i>Other Personnel not listed above:</i>	\$0.00
	A.	\$0.00
	B.	\$0.00



**ANNUAL MAINTENANCE AND SUPPORT SERVICES**

**Instructions:** Provide Maintenance and Support Information for each Licensed Software Product (both Vendor owned and Third Party) along with yet-to-be-built Custom Modifications and Interfaces. Include Start Action that begins maintenance charge to County, Initial Annual Maintenance charge as a percentage of Software License Fee, the Month that Maintenance Fees Increased, the Maximum Annual Maintenance Increase Basis Years 1 thru 10. Manually enter the amount of the Initial Annualized Maintenance Fee for each listed components, along with the Sum of all Maintenance Fees for First 3 Years. See **Appendix B - County Proposed Statement of Work** (Task 11, On-Going Maintenance, Enhancements and Support) for definitions of routine annual maintenance and support services.

Item No.	Software Component									COST	
	List all product from: - Section II: System Software (including both Base Software Components and Third Party Software) - Section IV: Custom Modifications - Section V: Custom Interfaces	Start Action for Maintenance Charge	If Maintenance Start Action = "Other" please Describe	Initial Annual Maintenance Charge as Percentage of Software License	If Initial Annual Maintenance Charge Percentage = "Other" please Describe	Month that Maintenance Fees Increase	If Maintenance Increase Month = "Other" please Describe	Maximum Annual Maintenance Increase Basis Years 1 thru 10	If Maintenance Increase Basis = "Other" please Describe	Initial Annualized Maintenance Fee	Sum of all Maintenance Fees for First 3 Years
1										\$0.00	\$0.00
2										\$0.00	\$0.00
3										\$0.00	\$0.00
4										\$0.00	\$0.00
5										\$0.00	\$0.00
6										\$0.00	\$0.00
7										\$0.00	\$0.00
8										\$0.00	\$0.00
9										\$0.00	\$0.00
10										\$0.00	\$0.00
11										\$0.00	\$0.00
12										\$0.00	\$0.00
13										\$0.00	\$0.00
14										\$0.00	\$0.00
15										\$0.00	\$0.00
16										\$0.00	\$0.00
17										\$0.00	\$0.00
18										\$0.00	\$0.00
19										\$0.00	\$0.00
20										\$0.00	\$0.00
21										\$0.00	\$0.00
<b>MAINTENANCE AND SUPPORT TOTAL</b>										<b>\$0.00</b>	<b>\$0.00</b>



## ASSUMPTIONS

**Instructions:** State any assumptions used to develop the fixed costs in this Cost Proposal. List the Cost Proposal Section and Item No., along with a detailed description of the assumption being made. Describe the effect of the assumption on the proposed fixed cost for each item listed. Add rows as necessary.

Item No.	Cite the Cost Proposal Section and Item No.	Description of the Assumption
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		