**Attachment A: Vendor Response Template**

**State of Louisiana Department of Health, Office of Public Health**

**Request for Information (RFI): Contractor-hosted SaaS Certified Electronic Health Record (EHR) Solution with Integrated Revenue Cycle Management (RCM) Services**

**Vendor Name:**
**Contact Person:**
**Email:**
**Phone:**

**Instructions for Respondents:**

* Please provide clear, concise responses referencing the requirement number.
* Attach supporting documentation as needed (e.g., brochures, technical specs, screenshots).
* For optional features, please indicate availability and any additional costs.

**Section 1: Corporate Background and Experience**

Responder shall provide a brief description of the company, including a brief history, corporate structure, and the number of years in business.

|  |  |
| --- | --- |
| Item | Vendor Response |
| Company Background and Relevant Experience |  |
| corporate structure |  |
| number of years in business |  |

**Section 2: Business Model for Contracting of Services**

Responder shall describe its approach to a contract for its services should it be awarded a contract, but without providing any cost information in its response. If a Commercial- Off-the-Shelf or Software-as-a-Service solution is proposed, the responder should indicate if proposed products are available through NASPO ValuePoint or similar purchasing agreements, the preferred cooperative purchasing program being considered for this RFI.

|  |  |
| --- | --- |
| Item | Vendor Response |
| Approach |  |

**Section 3: Implementation Timeframe of Solution**

Responder shall indicate the minimum time frame from contract execution for full implementation of its solution, inclusive of equipment acquisition, configuration, and testing.

|  |
| --- |
|  |

**Section 4: Implementation and Support**

Responder shall describe its proposed solution and approach for the following implementation and support elements:

|  |  |
| --- | --- |
| Requirement | Vendor Response (Capabilities, Technical Details, Limitations, Comments) |
| Project management and system configuration |  |
| Data migration from legacy systems |  |
| Staff training and onboarding |  |
| Ongoing support and issue resolution |  |
| Performance metrics and service level agreements |  |

**Section 5: Approach and Methodology**

Responder shall describe its proposed solution and approach for delivery of services, specifically identifying the use of delivery methodologies, or other methods to address evolving system needs in order to support the following functional requirements, grouped by domain:

**A. Core Platform Architecture & System Administration**

|  |  |
| --- | --- |
| Requirement | Vendor Response (Capabilities, Technical Details, Limitations, Comments) |
| 1. Cloud-Based EHR Deployment: High availability, data redundancy, secure remote access, reduced local infrastructure requirements. |  |
| 2. User Roles, Access Controls & Audit Logging: Role-based access control, user account management, DetailED audit trails. |  |
| 3. System Usability & Navigation: Intuitive clinical and administrative navigation, workflow optimization. |  |
| 4. sINGLE SIGN ON: sTATE sINGLE sIGN oN (sso) iNTEGRATION. |  |
| 5. tRAINING eNVIRONMENT: NEW STAFF LIVE SYSTEM COPY, Synchronized with PRODUCTION SYSTEM updates. |  |
| 6. TEST ENVIRONMENT: DEPLOYMENT PENDING REQUIRED EVALUATION/ASSESSMENT. |  |

B. Clinical Workflow, Documentation & Usability

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 7. Comprehensive Clinical Documentation: Includes support for SOAP notes, templates, macros, and structured data input by providers and nurses. |  |
| 8. Clinical Decision Support (CDS): Supports Clinical Decision Support (CDS) functionality that is easily configurable by OPH staff to encourage adoption of screening programs and preventive health initiatives. |  |
| 9. E-Prescribing: Must be compliant with federal/state laws and include drug interaction checks, history access, and pharmacy transmission. |  |
| 10. Telehealth Integration: Must support scheduling, virtual visits, documentation, and billing directly in the EHR. |  |
| 11. Spellcheck & Customization: Provides real-time spellcheck in narrative fields; interface customization for accessibility (e.g., font size, zoom). |  |
| 12. Multi-Patient Chart Access: Enables concurrent access and navigation across multiple patient records. |  |
| 13. Role-Based Charge Correction: Allows clinical staff (e.g., nurses, NPs) can independently correct charge errors. |  |
| 14. Clinical Data Automation:* Auto Import: Clinical and lab history can be auto-imported into new visits.
* Carry-Forward: Key patient data (e.g., labs, diagnoses) carries across encounters to reduce re-entry.
 |  |

**C. Orders, Labs, and Clinical Integration**

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 17. Batch Laboratory Order Entry: Multiple test ordering in a single workflow. |  |
| 18. Automated Lab Billing: Automatic charge application upon results receipt. |  |
| 19. Interoperability: Has a standards-based (HL7, FHIR, ePrescribe) exchange with labs, imaging centers, and pharmacies. |  |
| 20. Imaging: Contains radiology & Diagnostic imaging modules |  |

**D. Scheduling, Front Desk & Practice Operations**

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 21. Advanced Scheduling: Contain a configurable module with provider and/or location views, appointment types, alerts, and multi-calendar display. |  |
| 22. Integrated Payments: Ability for real-time credit card processing within clinical and billing workflows. |  |
| 23. Patient Label Printing & Digital Signatures: Has ID label generation and electronic signature support. |  |
| 24. Income-Based Copay Calculator: Ability to calculate sliding scale based on Federal Poverty Guidelines (Title X compliant). |  |

**E. Patient Engagement & Communication**

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 25. Patient Portal: Is HIPAA-compliant with access to records, secure messaging, billing, appointments, and updates to demographics/insurance. |  |
| 26. Customizable Forms: Ability for customizable forms and documents available for completion via the portal, to include ability to upload documents or images for submission from mobile device or PC. |  |
| 27. Mobile Functionality: Ability for SMS scheduling where patients can schedule via text with pre-defined appointment types, self-register and document upload |  |
| 28. Mass Messaging & Notifications: Has tools for staff-driven email/text alerts, batch messaging, and group rescheduling (e.g., LaWIN system/ WIC model). |  |
| 29. Patient Resources: Contains a Patient Education Library |  |
| 30. Patient Portal: Is HIPAA-compliant with access to records, secure messaging, billing, appointments, and updates to demographics/insurance. |  |

**F. System Integration & Interoperability**

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 31. Real-Time Insurance Verification: Ability for instant eligibility checks via insurance card data. |  |
| 32. LINKS Integration: Has bidirectional communication with Louisiana’s immunization registry. |  |
| 33. Interoperability: Is interoperable with Louisiana Office of Public Health State Laboratory Starlims v11 or current validated version, LabCorp, Quest Diagnostics, Clinical Pathology Laboratories (CPL) |  |
| 34. Electronic Communication: Facilitates fully electronic communication with patients, medical specialists, labs, imaging centers, Managed Care Organizations (MCOs), and other providers to improve efficiency and documentation. |  |
| 35. Referrals: Accepts Community Health referrals |  |
|  |  |

**G. Inventory & Resource Management**

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 36. Real-time Pharmacy Inventory: Tracks medication inventory, dispensing, and control within the EHR for multiple locations. |  |

**H. Reporting & Analytics**

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 37. Flexible Reporting Tools: Contains standard dashboards, custom/ad hoc reporting across clinical, financial, and operational domains. |  |
| 38. Reporting Replica Database: Can create a non-production replica with detailed data dictionary to support analytics |  |

**I. Compliance & Certification**

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 39. ONC Certification: System must meet ONC Health IT Certification standards. |  |
| 40. HIPAA Compliance: Has full adherence to HIPAA Privacy, Security, and Breach rules. |  |
| 41. MES/IAPD Funding Alignment: Compliant with Medicaid Enterprise System (MES) modularity and reuse standards. |  |
| 42. Tuberculosis Program: Compliant with Title 40, Public Health and Safety and LA Administrative Code, Title 48, Public Health, LAC Title 51 |  |
| 43. Family Planning Program: Compliant with LA Revised Statute Title 46, LA Administrative Code Title 50, Title 48, Office of Population Affairs Title X, OPA FPAR reporting requirements |  |
| 44. Children's Special Health Services: Compliant with LA Administrative Code Title 48, Social Security Act Title V, Maternal and Child Health Block Grant reporting |  |
| 45. Block Grant: Compliant with Preventative Health and Health Services Block Grant |  |
| 46. Requirements: Meets requirements of HRSA’s Office of Pharmacy Affairs, Public Health Service Act, 340B, Office of Risk Management reporting |  |
| 47. ADA & Accessibility: Vendor shall design the User Interface to work on all browsers installed on the standard State computer image (Edge, Chrome & Firefox). Vendor shall incorporate and test accessibility throughout the design and development processes to remain compliant with Section 508 Amendment to the Rehabilitation Act of 1973. Specifically, all web content (not subject to exception from the DOJ final rule [28 CFR Part 35, Subpart H]) shall comply with Web Content Accessibility Guidelines (WCAG) 2.1, Level AA. |  |
| 48. State Compliance: Configured in compliance with state-specific consent models |  |

**J. Eligibility & Benefits Verification**

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 49. Real-Time & Batch Checks: Includes copays, deductibles, benefit limits, and exclusions via EDI or payer APIs |  |
| 50. Integrated Status Tracking: Verification data is visible to front-desk, billing, and clinical staff within the patient record |  |

**K. Claims, Denials, & Appeals**

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 51. Electronic Claims Submission: Has configurable claim scrubbing and support for payer-specific rules.  |  |
| 52. Coding: Explanation should include how the vendor maintains or provides CPT/ICD coding expertise, auditing, and quality assurance. |  |
| 53. Independent Billing: Provides support documentation and billing of optional non-ambulatory services (e.g., laboratory orders, Durable Medical Equipment) independently of patient visits. |  |
| 54. Denial Management: Has ability for auto-categorization, routing to work queues, and tracking with alerts. Vendor should provide information regarding denial code setup, denial action documentation, and the process for resubmission with timelines. |  |
| 55. Appeals Support: Contains tools for generating appeal letters, tracking statuses, and automated resubmissions. |  |
| 56. Payer Feedback Integration: Contains support for remittance feedback and payer portal access. |  |
| 57. Clearinghouse services: Has ability to interface with or perform pre-submission scrubbing, tracking, submission. |  |

**L. Payment Posting & Reconciliation**

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 58. ERA Posting (835): Supports manual/automated payment posting at transaction level, splitting, adjustments, and reconciliation.  |  |
| 59. Audit & Reconciliation Reports: Contains tools to ensure transparency, track deposits, and detect payment variances. |  |
| 60. Collection Process: Explain your policy and approach to ensure global standards and best practices for accounts receivable and write-offs. |  |

**M. Revenue Cycle Analytics & Reporting**

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 61. Key Metrics Reporting REQUIREMENTS: Collections by payer, provider, location; Denials with CARC/RARC codes; A/R aging and bad debt; Claim rework, appeals, clean claims |  |
| 62. Export & Scheduling: multiple formatted reports, scheduled delivery |  |
| 63. Filterable Dashboards: capacity to filter by payer, service date, entry date, & encounter type |  |

**N.** **Credentialing and Payer Enrollment Support (Optional)**

|  |  |
| --- | --- |
| Requirement | Vendor Response |
| 66. Credentialing tools: Has optional module for managing provider credentialing, CAQH integration, payer enrollment tracking, alerts, and document storage |  |

**Section 6: Key Information Requested**

In addition to the above responses, respondents shall provide the following details regarding their company performance:

* Sample performance metrics and reporting dashboards
* Reference clients (especially in similar environments)

|  |  |
| --- | --- |
| Item | Vendor Response |
| Client References |  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

\*\*\*Attach sample performance metrics and reporting dashboards