



*The Brien Center
Electronic Health Record
Request for Proposal
December 10th, 2024*

Prepared By:



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I. Executive Summary

RFP Objective

This RFP provides vendors with the information needed to create an accurate estimate of the price and methods for designing, customizing, and implementing an Electronic Health Record and Practice Management System for The Brien Center.

SimiTree (an outside consulting firm) has worked collaboratively with The Brien Center to interview staff throughout the organization to confirm requirements. Information that was gathered is also included within this RFP in the form of a project vision and a comprehensive list of the key requirements that need to be addressed in The Brien Center's future EHR. These documents have all been included in this RFP for vendors to understand the work that has been completed to date, and to give a comprehensive understanding of The Brien Center's needs.

It should be noted that responses to questions and scenarios outlined in this RFP (including each line-item requirement in the Explicit Requirements Matrix) will be included as part of any contract(s) that results from this request. As such, vendors should respond to this RFP knowing that contracts will include these items as the definition of available system functionality.

Company Overview

The Brien Center is CBHC, a provider of behavioral health and addiction services through outpatient, residential, community-based services that promote the recovery, independence, and quality of life of those served. They provide access and support to meet the behavioral needs of individuals of all ages, race, and cultures by working in partnership with state agencies, individuals, families, and other providers.

Staff

Currently, The Brien Center has [00] staff with the following types and approximate volumes: *The Brien Center currently has [00] open positions*

Staff Grouping	Roles	# of Staff
Clinical / Direct Care	TBD - The Brien Center to provide	
Administration/Front Desk		
Medical		
Accounting/Billing		
IT		
HR		
Executives		

II. Vendor Requirements

Selection Process

Single Point of Contact

Amber Byrd (amber.byrd@simitreehc.com) and Mary Hansen (mary.hansen@simitreehc.com) will be the Single Point of Contact (SPoC) for this RFP process. To maximize efficiency and to ensure a fair selection process, vendors are prohibited from communicating with other The Brien Center or SimiTree staff regarding this RFP. All questions and communications regarding this RFP should be directed to Amber Byrd and Mary Hansen.

Deadlines

Please notify Amber Byrd via email by **12/16/2024 at 5pm EST** of your organization's intent to respond. Final RFP responses are due by **01/10/2025 at 5pm EST**. Late submissions will not be accepted except in extraordinary circumstances.

Respondents should submit electronic responses via email to amber.byrd@simitreehc.com (paper copies will not be accepted or reviewed)

Selection Timeline

Date	Milestone
12/10/2024	RFP released to vendors
12/16/2024	Intent to Respond to RFP due by 5 PM EST
01/10/2024	RFP responses are due by 5pm EST
01/2025	Short 2-hour demonstrations (availability will be communicated via email)
02/13/2025 - 02/17/2025	Full Day demonstrations (8:30 am - 5:00 pm EST, 30-minute lunch)
02/2025	Preferred Vendor Selected

Finalists

Based on the web demos and scoring of the RFP responses, The Brien Center will select up to 2 vendors for full day demos. The agenda will be divided into sections like those in the web demos but will focus more on carefully defined user scenarios.

The dates between **02/13/2025 to 02/17/2025** have been set aside for onsite full day demonstrations with the two finalist vendors. Please block off those dates to be scheduled for demonstrations if your system is selected.

For the full day demonstrations, the expectation is that the content will reflect an understanding of The Brien Center's services and requirements based on the information provided in this document and the addendums. It should also focus on navigating live through a test/demonstration system

rather than screenshots or indicating that the functionality exists without showing it. Not demonstrating functionality indicated on the agenda may result in a failing score for that section of the presentation.

From there, depending on whether a suitable vendor is found, The Brien Center will begin procurement according to its internal practices.

Response Requirements

All proposals must include the following:

1. Executive Summary of your proposal
2. Vendor Details
 - a. Company overview
 - i. Number of staff members
 - ii. Local/offshore support model
 - b. Company history
 - i. Years in business
 - ii. Significant ownership changes
 - iii. Tenure of management team
 - c. Experience and qualifications
 - i. Customers (including approximate number of agencies live on system)
 - ii. Experience implementing for Community Behavioral Health Centers
 - d. Minimum of three customer references. All should provide Behavioral Health services. Please include:
 - i. A customer located in Massachusetts
 - ii. A customer that has implemented within the past 12 months
 - iii. A customer that has a similar service mix to The Brien Center including CBHC, adult and youth crisis intervention, community crisis stabilization, residential and outpatient behavioral health services.

NOTE: References should include a specific person and contact information including phone and email. It is assumed that The Brien Center can reach out directly
 - e. Product roadmap showing the current focuses of your system and how you intend to evolve the system over time.
 - f. Details of any previous litigation with customers
3. Description of proposed system functionality to address items in:
 - a. Section [VI. Key Functional Requirements](#)
 - b. Section [VII. Technical Requirements](#)
4. Complete the attached [Appendix A: The Brien Center Explicit Requirements Matrix](#). Instructions are on the Read Me tab.
5. Complete the attached [Appendix B: The Brien Center Total Cost of Ownership](#). Instructions are on the Read Me tab. See [Company Overview](#) for user numbers to use for licensing estimate

Notice of Terms and Conditions

BY RESPONDING TO THIS RFP, YOU HEREBY AGREE TO THE FOLLOWING TERMS AND CONDITIONS:

Gap Analysis

If you are required to prepare a Gap Analysis (document identifying the differences and distinctions between the functionality of your software and the business requirements of The Brien Center), the Gap Analysis is incorporated by reference into the final contract.

Milestones

The Brien Center will determine and select the mutually agreed upon vendor milestones and acceptance criteria incorporated into the final contract.

Previous Litigation

The vendor shall disclose any previous litigation with customers.

Software and Services

Vendor warrants that the Software and Services will be performed with reasonable care and in a diligent manner, and further, Vendor represents that it will assign sufficient and qualified personnel to perform the services as set forth in the Agreement.

Costs Associated with RFP Response

The Brien Center is not liable for any of the costs (including travel costs) incurred by a respondent in preparing or submitting a response or proposal. Neither party is legally bound by the submitted proposals – this will be addressed during the contract phase of system procurement.

Right to Select or Reject Proposals

The Brien Center reserves the right to reject any or all responses for any reason at its sole discretion. We reserve the right to make copies of responses and disperse them for internal review as we see fit.

Confidentiality

The Brien Center may disclose to the respondent written material, oral conversations, or other information that The Brien Center considers to be confidential (“Confidential Information”). Respondent must agree to hold in strict confidence and trust all Confidential Information provided by The Brien Center and agree not to disclose or otherwise provide or transfer, directly or indirectly, any Confidential Information or anything related to the Confidential Information to third parties, without The Brien Center’s prior written consent. Respondent may disclose Confidential Information only to directors and employees advised of the terms of this confidentiality requirement and who need to know such information to enable the respondent to respond to this RFP. Respondent further agrees that it may use the Confidential Information only in connection with responding to this RFP and not for any other purpose or for the benefit of any third party. Respondent agrees to require any of its directors and employees who obtain Confidential Information to comply with these terms and agrees to be responsible for any breach of this requirement by such persons.

IV. The Brien Center Programs

The list below expands upon the [Company Overview](#) by describing in more detail the services provided by The Brien Center. This section does not require a response, but demonstrating an understanding of the needs in each of these program areas will be critical evaluation criteria for potential vendors and should be used to inform responses to the requirements below.

Key Program Requirements

- Referral management
- Integrated Telehealth
- Electronic Signature Capture (via Telehealth appointment, F2F appointment, etc.)
- Mobile Crisis/Crisis Documentation
- Mobile access
- Comprehensive Reporting Capabilities
- Custom Assessments
- Psychiatric Evaluation
- Scheduling & Appointment Reminders
- E&M Notes & Complexity Coding Support
- Golden Thread
- Sliding Fee Scale
- Flexible Roles & Permissions
- Breaking the glass functionality
- Chart Audit Functionality
- Ease of chart searches (i.e., search for the last Individual Therapy Note)
- Supported Care Coordination Workflows
- Evidence Based Practice Tools
- Client Portal
- Call Center Functionality
- Tracking Crisis Call Follow-ups
- Integrated e-Prescribing and eMAR
- Skill Training Documentation
- Employment Tracking
- Tracking external appointments
- Behavior Tracking
- Behavior Plans
- Standardized Assessments
- Individual and Family Notes
- Bed Management
- Group Notes
- Centralized location for Clinical and Medical Diagnosis entry
- Real-time/Batch Insurance Eligibility
- Ease of tracking to-dos, draft documents, expired documents

Community Behavioral Health Center & Emergency Services

Community Behavioral Health Center (CBHC)

The Brien Center **CBHC Services** serves as an entry point for clients who receive timely, high-quality, and evidence-based treatment for mental health conditions and substance use disorders, including routine appointments, urgent visits, and 24/7 community-based crisis intervention as an alternative to hospital emergency departments.

Adult Mobile Crisis Intervention/Youth Mobile Crisis Intervention

The Brien Center’s AMCI/YMCI Team provides crisis assessment, intervention, and stabilization services around-the-clock, every day of the year to individuals of all ages who are experiencing a behavioral health crisis and who may be at risk of harming themselves or others. The purpose of the AMCI / YMCI is to respond rapidly, assess effectively, and deliver a course of treatment that will promote recovery, ensure safety, and stabilize the crisis. Most frequently, individuals will continue their recovery through the Brien Center’s outpatient services. In some cases – when medically necessary – the individual will be hospitalized.

Adult Community Crisis Stabilization Programs (CSS)

The Adult CCS provides staffed, secure, safe, and structured crisis stabilization and treatment services in a community-based program that serves as an alternative to inpatient psychiatric hospitalization for individuals with mental health and/or substance use disorders. Services at this level of care include crisis stabilization; initial and continuing assessment; care

management; psychiatric evaluation and medication management; peer-to-peer support; and mobilization of natural support and community resources.

Child & Adolescent Services

Outpatient Treatment Services

The Brien Centers' Child and Adolescent services offers a range of therapeutic, focusing on evidence-based practices for child and adolescents. The interventions provided include psychiatric, medication management, substance use disorder prevention, individual therapy, group therapy, family therapy services.

Intensive Home-Based Therapeutic Care (IHBTC)

The Brien Center's IHBTC programs provide a continuum of community-based wraparound services to serve adolescents in their homes. Additional services include long and short term out-of-home care in group homes for youth. Referrals for wrap-around services are made by the Department of Children and Families or the Department of Mental Health.

Children's Behavioral Health Services

The Brien Center offers home-based family therapy, behavioral therapy, and mentoring to adolescents. Children's behavioral services are strength-based, combining family therapy and therapeutic mentoring to prevent out-of-home placement. The in-home therapy included Applied Behavioral Analysis (ABA) and behavioral planning.

Community Service Agency (CSA)

CSA serves youth who are experiencing serious emotional disturbances. Intensive Care Coordination and Family Support services are utilized to provide individualized, coordinated, family-driven care.

Therapeutic Day Services

The Brien Centers offers after school programs in at two locations, serving children 5 – 18 years old with a serious mental illness or severe emotional disturbance. Treatment is individualized to each child, including services like Day Program, Crisis Management, Outreach, Behavior Management, and Group Counseling.

Patrick Miller Youth Substance Abuse Prevention Program

A community-based program that provides education, prevention, intervention, screening, and outpatient services to address substance use for youth with a substance use disorder. Prevention services are available to all Berkshire County School Systems. The Brien Center utilizes evidence-based programming, such as Adolescent Community Reinforcement Approach (ACRA).

Adult & Family Services

Outpatient Mental Health, Addiction, and Peer Support

Adult and Family services are offered to clients 18 years and older. The Brien Center provides comprehensive, integrated, and culturally competent counseling, psychotherapy, and psychiatric services for individuals and families.

Community Service Division

Adult Community Clinical Supports (ACCS)

The ACCS program is funded by the Department of Mental Health. The program offers clinically based model of care, utilizing evidence-based interventions to help promote engagement, assessment/plan assistance to help individuals achieve their goals, family

engagement, peer support and recovery coaching, housing, and referrals to Mass Rehabilitation.

Residential and Integrated Team

The Brien Center offers three levels of Residential care.

- 24-hour staffed residential services
- Outreach support from the integrated care team. Offering housing assistance, medication skill building, money management, support individuals at medical and behavioral health appointments, etc.
- BHCP supports and Elder Services

Behavioral Health Community Partner

BH CP

As a behavioral health community partner (BH CP), we organize care and facilitate communication across medical, behavioral health and long-term services, including agencies and social supports. The Brien Center works collaboratively with Accountable Care Organizations (ACOs) and Managed Care Organizations (MCOs) to provide care coordination to certain members identified by ACOs, MCOs or MassHealth and we serve adults ages 21 and up to the age of 65 who are participating in a MassHealth Accountable Care Organization (ACO). Providers and members may also refer to a patient by contacting the member's health plan.

V. The Brien Center IT Architecture

This section is intended to provide vendors with a sense of the current state IT architecture for The Brien Center. This information should be used while responding to specific questions in the sections below.

Application Architecture

The Brien Center currently operates on eHana as the primary source for clinical documentation. The organization utilizes A/R Plus for billing. The Brien Center hopes to find a system that supports referral management, clinical and medical documentation, and billing within a single application. Below are the systems utilized today to manage the wide range of services The Brien Center provides to support their client population.

Possible Integration Point	Current Software/ Portal/ Partner Name	Description of Potential Use
EHR: Medical		
e-Prescribing	DrFirst - Not Integrated with EHR	Integrated e-Prescribing Platform
e-Prescribing: fax	N/A	Integrated e-Prescribing Fax Functionality
Labs	Not integration	Lab integration for lab orders and inbound lab results
Prescription Monitoring Program (PDMP)	Not integration	Interface with a PDMP
Practice Management, Finance, Accounting		
Appointment Reminders	Manual	Integrated solution for appointment reminders (automated call, text, email)
Telehealth	Zoom - Not Integrated with EHR	Integrated telehealth platform
Payer Portal(s)	N/A	The ability to exchange data through file imports/exports, or a live interface, including the following HIPAA Transaction EDI formats: 837, 835, 270/271, 278, 999
Billing Software	A/R Plus - Not Integrated with EHR	Single solution EHR/RCM
General Ledger	Sage Intacct - Not Integrated with EHR	Direct connect or custom import/export capabilities
Clearinghouse	TriZetto	
EHR: Clinical Data		
State Reporting: CANS	Virtual Gateway - Interface	Automated process for the submission of CANS assessment
State Reporting: BSAS Enrollment (SUD Reporting)	Virtual Gateway - Manual Entry	Automated process for the BSAS Enrollment for SUD clients

State Reporting: Enrollment/Discharge	Virtual Gateway - Manual Entry	Automated process for Enrollment/Discharge
Massachusetts Department of Mental Health (DMH)	Not integration	Automated process for Enrollment/Discharge
Admission/Discharge/Transfer Alerts (ADT)	Not integration	Receiving ADT alerts for active clients
Health Information Exchange (HIE)	HIWay - Not integration	Send and receive information from state HIE
Continuity of Care Documents	Not integration	Send and receive information from provider network
EHR: Miscellaneous		
Single Sign-on (SSO)	N/A	
Scheduling Decision Tree Support	ZingTree	
AI Capabilities	N/A	Built in AI Capabilities or AI Partner (i.e., Eleos)
Business Intelligence Tool	N/A	Ability to share data with a Business Intelligence Tool (i.e., Power BI)

VI. Key Functional Requirements

This section lists the key requirements for a new EHR for The Brien Center. Please provide details on how the system addresses each of these requirements. Please make sure to address each bullet point and indicate which requirement you are addressing in your response by number/letter. Including screenshots whenever possible will significantly increase our understanding, but at minimum it should be included where indicated as required.

A blank or partial response, a "yes, meets requirements" answer, or a failure to provide screenshots as required will be scored as "Fail."

General Functions & Navigation

- **Dashboard and Upcoming To-Do Items -**
 - Please show how the system can support staff seeing items coming due or already past-due. **(Screenshots required)**
 - Please show how the system can automatically send to-dos based on events (i.e., send a to-do to the assigned supervisor when a document requires co-signatures based on a clinician's credential). **(Screenshots required)**
 - Please explain how supervisors can see all upcoming due dates or already past-due items by program, staff, or client.
 - Please show how the system displays a comprehensive view of all documents that are still in draft by authored staff or client. **(Screenshots required)**

- **Mobile Access -** In some community-based service locations, staff will not have reliable access to the internet. Please describe how your system will be able to support this requirement, including whether the proposed solution is a separate mobile application or browser based. **(Screenshots required)**

- **Flags, Alerts, and Notifications -** Please describe the functionality to provide staff alerts, prompts, notifications, and flags. Include examples of flags available out of the box or easily configured in the system. **(Screenshots required)**

- **Patient Portal -**
 - Please describe how the system supports a client portal or client facing application to provide electronic data collection and a digital intake process (i.e., electronic intake forms, consents, scheduling appointments, completing standard assessments, messaging, view lab results, medications, payment collection, and other health information, patient education etc.). **(Screenshots required)**

Administrative/Business Operations

- **Inquiry and Referral -** Referrals are received via internal and external sources. Please indicate how your system can support coordination and tracking of pending requests/status, including information that would be required for a full admission. **(Screenshots required)**

- **Intake -** Please indicate how your system can support coordination of scheduled and walk in intakes, including tracking requests, Clients waiting, and clinician availability. **(Screenshots required)**
 - Does functionality exist to show when patients' registration is fully or partially completed?

- **Records Review** - Please describe your system's clinical record review/audit functionality. Include information around how designated staff can flag a record for review, document comments, and track follow-up and corrections. **(Screenshots required)**
- **Consents/Release of Information/Disclosures** - Please demonstrate: **(Screenshots required)**
 - How the system tracks effective and expiration dates for signed consents/ROI/Disclosures
 - How the system tracks active releases of information (electronic and paper)
 - How the system pulls together documents for disclosures
 - Features to support verification that a release exists before disclosing information
- **Client Check-in** - Please show how your system supports a same-day access walk-in model. **(Screenshots required)**
 - Electronic check-in
 - Integrated check-in process that can be used to populate the client's chart
 - Ability to connect a same-day walk-in with an existing referral or client chart
 - Ability to easily see when a client is checked in, in-session, checked out
 - Please outline the department appointment reports available out of the box, outlining:
 - All scheduled appointments vs Walk-in Appointments
 - Verifying that all appointments have a corresponding service note
 - Estimation tools for out-of-pocket responsibility (e.g., copay, deductible, outstanding balance)
- **Centralized Scheduling** - Please describe the system's ability to support centralized scheduling. Please include how the following can be accomplished via Centralized Scheduling. **(Screenshots required):**
 - View multiple staff schedules at once
 - View availability by criteria (e.g., staff credentials, locations)
 - Searching for next available appointment
 - Decision Tree Scheduling Support: Use data from a patient's record to influence the scheduling workflow and suggest the most appropriate appointment
 - Insurance verification at the time of appointment scheduling
 - Ability to add soft stops or hard stops at the point of appointment scheduling
 - Recurring appointments with varying frequencies
 - Tracking of status for attendance, no-shows, and cancellations
 - Scheduling Group appointments
 - Create/view appointments on a mobile device (e.g., android or iPhone)
 - Validation that every scheduled appointment has a completed/draft documentation
- **Telehealth** - Please describe how the system supports telehealth visits. Integrating telehealth software and scheduling telehealth appointments.
- **Residential** - For Recovery Home and apartment programs, please describe the system's functionality related to **(Screenshots required):**
 - Tracking Vacancy
 - Tracking Leave of Absence
 - Census Verification
 - Ability to track program specific requirements within the EHR (i.e., tornado and fire drills are required every quarter for each shift)

Clinical

- **Assessment** - Please describe the system's ability to support multiple templates for program-specific comprehensive assessments and how other standalone assessment tools (e.g., PHQ-9) can be incorporated into the assessment workflow. **(Screenshots required)**
- **Treatment/ Service Plans** - Please describe the system's ability to support different types of service plans based on the type of program in which the Client is receiving services. Please show the following: **(Screenshots required)**
 - Documenting strengths and barriers
 - How goals, objectives, and interventions are managed
 - How the Treatment Plan Library can be managed
 - Process for plan reviews and updates
 - Rating progress towards plan goals/objectives
 - Electronic capture of signatures from additional participants (e.g., other The Brien Center staff, team members, Client/family)
- **Service Note Design** - Please show examples of service note templates in the system. If possible, please show a template with structured values and text fields. **(Screenshots Required)**
 - Describe how pertinent data from an assessment can be linked to a service note.
 - Describe how goals from a treatment plan can be linked to a service note, so a clinician can select the goals they focused on during that session.
 - Describe how service notes can be configured to capture the service type of Face to Face, Telehealth, Onsite, Offsite services, to drive billing.
- **Group Notes** - Please show the following:
 - An example of a group note that includes a general section applicable to all attendees and an individualized section per attendee. **(Screenshots Required)**
 - Explain how groups are defined (i.e., groups by program, assigning staff to groups, assigning staff to groups).
- **Evidence Based Practices** - Please describe the system's ability to adapt and support fidelity to evidence-based practices (EBPs). How can the system support ensuring that language, plans, and services are consistent with EBP models?
- **Care Coordination** - Please describe the system's ability to support the following: **(Screenshots required)**
 - How users can see all intakes by program for a given time frame to support outreach efforts
 - How users can track the date of the last contact, how many contacts by client for assigned clients. Including the ability to see pertinent information regarding the contact (i.e., ability to see what resources were provided to the client, what support the client requested)
 - How care coordinators can collect electronic signatures (i.e., during a telehealth call or patient portal)
- **Behavior Tracking / Behavior Management** - Please describe your system ability to track client behavior and the work being done to improve the specific behavior.

Medical

- **ePrescribing** – Please describe your system’s ability to: **(Screenshots required)**
 - Prescribe, modify, and refill medications
 - Check for drug-drug/drug-allergy/drug-formulary interactions
- **Medication Lists** - Please show both the prescriber and non-prescriber view current and historical medications (Medication Orders and Self-reported medications). **(Screenshots required)**
- **Orders and Lab Results** – Please demonstrate how providers will be able to generate orders/lab requests, view results in the system, and sign-off of lab results. **(Screenshots required)**
 - How providers can electronically sign off on lab results.
 - For labs that are not interfaced with the system, explain how lab images/results are attached to the individual’s record.
 - How staff are notified when in-clinic injections are ordered.
- **Vitals** – Please show how vitals can be tracked in the system, including how data entered and how it can be viewed over time. **(Screenshots required)**
- **Allergies** - Please show how allergies can be documented and viewed in the system, including any differences. **(Screenshots required)**
 - Please show how the system alerts staff of drug-allergy interactions
- **Medical Notes** - Please provide an example of a medical note and describe any available functionality to support appropriate E&M coding. **(Screenshots required)**
 - Ability to update Problem lists and Dx lists from within the note
 - Ability to place orders from within the note (i.e., Point of Care Tests, Lab Orders, In-Clinic Injection Orders, Pharmacy Orders, etc.)
 - Bi-directional functions between medical documents (i.e., ability to pull vitals/orders into the Medical Note)
- **Medication Administration** - Please describe how the systems eMAR can support: **(Screenshots Required)**
 - Ability to see the eMAR at the client level
 - Ability to see the eMAR at the residential unit level
 - Ability to document date/time of administration
 - Ability to document self-administered vs nurse administration

Billing

- **Charge Capture** - Describe how your system can interpret services for billing based on elements such as program, duration, location (onsite/offsite/telehealth) and type of service documented. What elements in the Client’s record or service documentation can drive different billing requirements?
- **Fee Schedules / Rate Tables** - Please describe how your system handles fee schedule setup, including:
 - Billing setup variables that can impact code and rate output
 - How covered services are defined

- How standard and contracted rates are differentiated
- How standard and contracted rates can be updated in bulk
- **General Billing Rules** - Please indicate how the system would support the following common billing rules:
 - Missing valid authorization
 - Duplicate services
 - Duration too short/long
 - Insurance expired
- **Front End Business Rule Validation** - Please indicate any functionality around flagging/notifying the user at scheduling and at signature when a service will not be billable due to The Brien Center-defined business rules related to billing, such as missing documentation (e.g., diagnosis, treatment plan), or missing payer information.
- **Insurance** - Please indicate how client's insurance policies are set up and managed, including effective dates and accounting for coverage gaps.
 - Please explain how the system supports waterfall billing when the client has a secondary payer.
- **Self-Pay** - Please describe: **(Screenshots required)**
 - How co-pay amounts can be tracked
 - System functionality (and related data elements) for creating sliding fee scales
 - How self-pay statements can be generated, including the user interface for creating statements and a sample out of the box statement if available
 - How the system generates a client statement when payment from a payer is pending
- **Eligibility Verification** - Please describe the system's ability to support batch and real time 270/271 transactions. Please describe how the system supports identification of any changes in coverage and the process for making and tracking updates to the client's assigned payer details. **(Screenshots Required)**
- **Authorization** - Please describe how your system supports real time authorization monitoring for clinical, billing, and support staff for the lifecycle of the authorization (requested, approved, etc.). **(Screenshots Required)**
- **Claims Processing** - Please describe how your system supports electronic claim file creation and submission, including screenshots of the user interface. **(Screenshots required)**
- **Re-Billing** - Please describe how services can be re-billed after corrections are made and/or after a certain amount of time as open A/R. Show user interfaces that can be used to make the corrections. **(Screenshots Required)**
- **Remittance Processing** - Please describe the logic and configuration options available to control how the system automatically calculates adjustments and recoupments and determine what happens next based on the adjustment type, such as transferring a service from one payer to another.
- **Payment Posting** - Please show the user interface(s) available for posting 835 files and manual remittance. **(Screenshots required)**

- **Denial Management** – Please describe how your system allows for tracking the reason and notes related to follow up and resubmission when a claim is denied. **(Screenshots required)**

System Administration

- **User Roles and Security** – Describe your functionality to include system level administration, database administration, and user level security options. Please show how users are set up in the system and how they are assigned permissions.
 - Describe how staff are provided access to client information in emergent situations in cases when the staff member is not assigned to the client.
 - Describe the systems “break the glass” monitoring functionality.
- **System Configuration** - Please explain the extent to which The Brien Center can control system configuration (e.g., global settings) and what type of changes would require vendor intervention.
- **User Defined Forms** –
 - Please explain the user interface for creating user defined forms and updating existing forms.
 - Please explain how data within a form can pull from or push to other forms (i.e., ability to update Dx within an assessment that pushes to the standard Dx form)
- **User Defined System Rules** – Please explain how The Brien Center specific system rules can be configured. (i.e., Only services outlined on the Tx Plan can be rendered).
- **Customizations** – This refers to custom development (configuration not able to be completed with tools in the user interface). Please describe in detail:
 - The process for requesting and implementing customizations
 - The process for The Brien Center to create in-house custom forms, assessments, and rules
 - Impact - How customization impacts future upgrades and support
- **Massachusetts State Requirements** – Please explain the vendors’ commitment to upkeep Massachusetts specific state requirements (i.e., when the state changes a form, assessment, output requirement, etc., what responsibilities the vendor will have to upkeep the EHR). Please include the following details:
 - The vendors commitment to build and maintain a stable interfaces to the various state portals
 - The vendors’ commitment to updating the system to align with state reporting requirements (i.e., CQIP requirements, incident reporting to the state, BHCP requirements, ACCS billing requirements, etc.)
 - Does the vendor anticipate associated cost for the client upon each update requirement?

Implementation Process & Ongoing Support

- **Implementation** – Please describe how you support the implementation of the system.
 - **Plan** - Specify a suggested plan for implementation and support including approach (phased or big bang) and timeline for completion.
 - **Resourcing**

- What is the staff resourcing expected of The Brien Center throughout the implementation?
- What are the different vendor team staffing models offered (e.g., hourly vs fixed)?

- **Training Method** - Please describe the resources and methods of training available to The Brien Center before and after the go-live, including any expected deliverables (e.g., test system setup, training materials, job aids). This should include both Super User Training and End User training.

- **Support**
 - **Service Level Agreement** - Please include:
 - The levels of support agreements available to The Brien Center
 - Describe the SLA for each level of support
 - **Availability** - Provide details as to times available, time zones, and options available such as phone, email, fax, and chat
 - **Issues** - Describe your case handling / ticketing system.
 - How are tickets submitted? What access is needed to submit a ticket?
 - How are tickets prioritized?
 - How are tickets escalated?
 - How can tickets be reviewed/updated by The Brien Center?
 - What is the expected turnaround time, both for initial response and resolution?
 - **Help Documentation** - What self-service support is available (e.g., documentation, online searchable knowledge base, videos, etc.)? Please include an example.

VII. Technical Requirements

Performance & Upgrades

- **Outages** -
 - **Outage Management:** How are system outages monitored and what is the process for resolving them?
 - **Communication:** What steps will you take to notify the customer of progress towards resolving the issue?
 - **Frequency:** In the past two years, how many infrastructures related outages have you experienced?
 - **Maintenance** - Please describe your approach to downtime related to maintenance of the application.

- **Software Upgrades** - Discuss how software upgrades and patches are handled, including:
 - **Releases** - Schedule and number of releases annually
 - **Fixes** - How hotfixes/patches are received and implemented, including scheduling downtimes, reasons for those downtimes, and backup procedures.

Data

- **Ad Hoc and Custom Reporting**
 - What are the skills needed for The Brien Center staff to create custom reports?

- How is report logic documented for standard reports? Is the logic for all out of the box reports made available to adapt for custom reports?
- Please describe any available ad hoc reporting interface that allows end users to select parameters to pull data without requesting a custom report (**Screenshots Required**)
- **Available Reports** – Please also provide a list of out of the box reports with descriptions.

Appendices

Appendix A: The Brien Center Explicit Requirements Matrix

The Explicit Requirements Matrix spreadsheet gives a comprehensive list of all the required and requested features of The Brien Center's future EHR system. It is arranged into heading and subheading by functional areas to make it easier to digest. The final list will be included as part of a contract. Please see attached spreadsheet titled "Appendix A The Brien Center Explicit Requirements Matrix"

Appendix B: The Brien Center Total Cost of Ownership

The Total Cost of Ownership spreadsheet provides a template for estimating the Total Cost of Ownership of your proposed system **over five years**. The first tab provides instructions for completing the sheet. Responses must be filled out in the requested format to be considered complete so please reach out if you have any questions. See attached spreadsheet titled "Appendix B The Brien Center Total Cost of Ownership"