



## **REQUEST FOR PROPOSAL**

### **Document Management System**

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**Group 1**

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## **1 INTRODUCTION**

Community Physician Group (CPG) will contract with a vendor for the purchase of a Document Management System in order to eliminate the need for paper charts.

### **1.1.1 1.1 Background**

Five years ago CPG implemented an EMR system which has been fairly successful in deploying a CPOE, clinical documentation, clinical decision support, and medical alerts. One of the original goals of the EMR implementation was to eliminate the need for physicians to utilize paper charts. This has not been accomplished. The physicians have found that they need to retrieve data from our legacy paper charts and work with external data brought into the practice on paper much more frequently than expected. The process of working with both paper and electronic records has an adverse effect on clinician efficiency and satisfaction. The need to retrieve and manipulate data on paper requires extra staff members and prevents the practice from deriving the full cost efficiency benefits that were predicted for the EMR. For these reasons, the practice has decided to implement an electronic document management system (DMS) to convert all legacy paper records and incoming paper documents to digital format and make them easily available to users within the EMR. The group would also eventually like to maintain all its nonmedical documents, for example business office records, in digital format so the DMS must be capable of interacting with document processing applications such as Microsoft Word and Adobe Acrobat as well as facilitating multiuser editing of a single document.

Document management includes the meaningful indexing, annotating, archiving, routing, and retrieval of electronic documents, including scanned pages, web pages, e-mail

messages, spreadsheets and word processing files (Rollins, 1998). This works in a medical setting for both entering data currently in paper charts and in keeping data electronically, eliminating the need for the paper chart, on an ongoing basis.

For documents currently in paper format, staff members are able to use a scanner to create an electronic version of the hard copy original. The original can then be sent to permanent storage while the new electronic image of the document can be manipulated/cleaned-up online (Kuwata, 2011). Additionally, optical character recognition (OCR) technology translates characters contained in the document's image into meaningful text. Web-based DMSs are beginning to store content in the form of html which allows for better application of search capabilities such as full-text searching and stemming (PolicyStat, 2011).

A fully functional DMS should allow clinicians to enter information about the electronic document (e.g., title, author, creation date and key words including a patient's name, document description) for purposes of later retrieval. This information is called metadata. The system should also be capable of keeping track of the different versions created by different users (history tracking). DMSs commonly provide storage, versioning, metadata, security, HIPPA compliance, as well as indexing and retrieval capabilities. By integrating a DMS into CPG's existing EMR, the group will be able to eliminate the need for paper charts and decrease future expenses associated with paper charts.

## **2 STATEMENT OF PURPOSE**

The purpose of this document is to solicit proposals for supplying a Document Management Software Solution to CPG to convert all legacy paper records and incoming paper documents to digital format and make them easily available to users within the EMR. This solution is intended to complement the existing EMR system and will transform all CPG practice locations into paperless offices, eliminating the storage, availability, staffing, and cost issues associated with paper charts. This will be completed without requiring physicians to make any major modification in the way they practice or view patient data.

The current system(s) in use by CPG are failing to meet the business needs of the organization in the following areas:

1. The physicians have found that they need to retrieve data from our legacy paper charts and work with external data brought into the practice on paper much more frequently than expected.
2. The process of working with both paper and electronic records has an adverse effect on clinician efficiency and satisfaction.
3. The need to retrieve and manipulate data on paper requires extra staff members and prevents the practice from deriving the full cost efficiency benefits that were predicted for the EMR.

Our primary objectives in implementing a DMS system are as follows:

1. Convert all legacy paper records and incoming paper documents to digital format and make them easily available to users within the EMR.
2. Maintain all its nonmedical documents, for example business office records, in digital format
3. Improve operational efficiencies throughout the organization
4. Integrate a DMS into CPG's existing EMR, eliminating the need for paper charts and decreasing future expenses associated with paper charts.

The intent of this RFP is to communicate our requirements for a DMS system and to provide vendors with sufficient information to enable them to prepare responses to this RFP. We are requesting that you submit a formal proposal which addresses the costs for procurement, implementation and maintenance of software from your organization. CPG anticipates a six-month timetable for the completion of this project.

### 3 EXISTING ENVIRONMENT

#### 3.1 Background

##### 3.1.1 Current CPG Locations and Employees

Community Physician Group (CPG) is a multispecialty medical group practice consisting of 150 physician members organized into 20 specialty and subspecialty divisions. CPG is the largest physician group in the city of Metropolis and draws its patients from a mid-state area with a population of over 5 million. Within its service area, CPG has developed an excellent reputation as the organization capable of delivering the highest quality, most up-to-date, and most holistic medical care available. As population demographics change to reflect larger numbers of older citizens in the service area, CPG has seen accelerating growth in both new patients enrolled per year and total patients under care. CPG continues to leverage the power of health information technology to care for these increased patient volumes while maintaining or even increasing quality levels.

**Main Clinic Facilities:** Metropolis, MO

**Satellite Clinic Facilities:** Anytown, MO  
Whoville, MO  
Utopia, MO  
Gotham City, MO

In addition to its physician staff, CPG employs over 750 full-time employees at its five locations. Over the last five years, the CPG medical staff has added an average of 10,000 new patients per year to the practice census and has participated in over 600,000 patient visits per year. The annual gross billings of the practice in the most current fiscal year were in excess of \$400 million.



**3.1.2 Current Technical Environment**

CPG's current IT infrastructure consists of a distributed network of HP Compaq desktop and laptop workstations connected to a data center where the group's software runs on HP ProLiant rack servers. Workstations may connect to the network by either secure Wireless-N or wired switched Ethernet running the TCP/IP communication protocol. Networking equipment such as gateways, routers, switches, firewalls, and VPN appliances are recent generation Cisco Systems devices. Satellite clinics connect to the main facility over leased T-1 lines, and all access to CPG systems from locations outside CPG facilities must be by VPN.

The workstations run the Microsoft Windows 7 Professional operating system, and the servers run Windows Server 2008. CPG uses Microsoft Office 2010 Professional for all standard desktop applications such as word processing, spreadsheets, and presentations.

Not infrequently, documents may also be created and edited in Adobe Acrobat.

Microsoft Outlook 2010 serves as the group's e-mail and shared calendar application. The practice utilizes the EpicCare ambulatory electronic medical record (EMR) from Epic Systems.

We are looking for a document management hardware and software solution that uses a GUI interface and can support a variety of mobile and fixed client workstations with varying internal configurations and capabilities. The proposed system must be accessible via the Internet with rigorous mechanisms to preserve data security, confidentiality, and

integrity. The system will need to support bar coding technology and metadata tagging and to interface with our current electronic medical record and desktop applications.

The proposed document management system will be mission-critical for the organization and widely used by our clinicians. On a typical busy clinic day, a practice wide profile of users logged in to the practice network and EMR could easily consist of 300 concurrent users, although requests by each user to store and retrieve documents in the management system will only occupy a small fraction of the time connected to the system.

## 4 VENDOR REQUIREMENTS & INSTRUCTIONS

It is the vendor's responsibility to ensure that all sections of this RFP are addressed. CPG reserves the right to reject proposals considered to be incomplete. CPG will reach out to the vendor if clarification to responses is needed. All questions related to this RFP should be addressed to [CPG@mail.com](mailto:CPG@mail.com).

### 4.1 Proposal Format, Delivery, and Deadline

#### 4.1.1 Format

The first page of the proposal should include title of RFP, name of the organization submitting the proposal and address as well as the total funds the organization is requesting. Someone from the organization should be designated as a primary contact for any questions CPG may have during review of the proposal. Include this person's name, title, email address and phone number on the first page as well. See Appendix A as a sample first page. Proposal should be typed, double-spaced, Times New Roman style, 12 point font with one inch margins. Each page should be numbered consecutively, excluding the first page. A header consisting of the Organization Name and Date of Submission is also required on every page, excluding the first page. Subsequent pages of the proposal should contain the responses to the questions posed in the RFP.

#### 4.1.2 Delivery

Proposals should be submitted electronically, as a Microsoft Word document, via CPG's RFP website [www.CPGRFPSubmission.com](http://www.CPGRFPSubmission.com). Upon submission the vendor will receive a confirmation number. The vendor is required to reference this confirmation number in all correspondences with CPG.

**4.1.3 Deadline**

Proposals must be submitted by 11:59 PM EST on April 15, 2012.

## **5 TERMS AND CONDITIONS**

Vendors must follow all terms and conditions as outlined in this RFP.

### **5.1 Contract**

Submission of a proposal is in no way a contractual agreement between the vendor and CPG. The term of the contract will be negotiated at time of award. CPG reserves the right to cancel a contract if the vendor fails to meet both technical and functional requirements as specified in this RFP.

### **5.2 Price Protection**

All cost information contained within a proposal are considered to be valid for a period of 12 months post submission.

### **5.3 Proprietorship**

All information contained within a proposal, including supplemental material, become the property of CPG and will not be returned. The vendor is responsible for identifying any information in its proposal that they consider to be confidential or proprietary at time of submission.

### **5.4 Acceptance or Rejection**

CPG reserves the right to accept or reject any proposal for any reason.

### **5.5 Proposal Modification(s) & Withdrawals**

Once a proposal has been submitted modifications are not allowed. A vendor may, however, withdraw their proposal prior to the submission closing date. Vendor must do so via faxed letter to (202) 394-7564, be sure to include your confirmation number and the signature of an authorized official of the company. After the submission closing date proposals may not be withdrawn.

### **5.6 Expenses Incurred by Vendor**

All expenses associated with the preparation and/or submission of a proposal are the responsibility of the vendor. Vendor is also responsible for covering all costs associated with a request for a formal presentation at CPG headquarters.

### **5.7 Evaluation Criteria**

The following criteria will be used to rate each RFP:

- Ability to meet functional requirements
- Ability to meet technical requirements
- Ease of Use
- Formal Presentation
- Implementation Timeline
- Customer References
- Total Funds Requested
- Post Go Live Support and Maintenance

### **5.8 Formal Presentation**

Once all proposals have been submitted and evaluated, CPG will invite the top three vendors to present their product in front of a team of executives. CPG will be responsible for organizing these meetings. In the event that a vendor chooses to “opt out” of a formal presentation the vendor’s “spot” will be given to the vendor next on the list.

## **6 SCOPE OF THE RFP**

This RFP is a solicitation for information regarding the purchase, implementation, and maintenance of a DMS software system. As such, our objectives are as follows:

- Use a quantitative and qualitative features and function analysis to identify the DMS that will best integrate with CPG’s current EMR while meeting our defined business requirements.
- Identify the organization which we feel will represent the best “partner” for CPG in implementing a new DMS system both initially and ongoing by conducting quantitative interviews with current customers.
- Purchase and implement new software, including re-engineering of the necessary business processes to be in line with the processes of the new system.

### **6.1 Product Software Pricing**

#### **6.1.1 Pricing Structure**

- Price - The vendor should provide the price of the proposed solution, broken down by application/module, including licensing fees (if any).
  - Cost of Ownership (breakdown over a certain number of proposed contract years)
  - Other Costs (maintenance, upgrades, hardware costs, OCR, interface software, consultation and support fees, post-implementation training and services, travel, etc.)
  - Discounts including but not limited to: discounts available for participation in beta testing programs, for extending the length of the service agreement, or for enrolling larger numbers of users.

- Invoicing (fee schedule and terms)
- Return on Investment – The vendor should outline the ROI for 1 year, 5 years and 10 years post-implementation for CPG and show examples of cost savings achieved by other customers.
- Acceptance Period - The vendor should outline the terms for validating the product after implementation and the refund policy
- Warranty - The organization should provide a copy of the warranty, as well as how it is affected by maintenance and support agreements after the implementation period (AHIMA Body of Knowledge, 2010)

## **6.2 Project Management**

The activities to be provided by the supplier project manager shall include the following:

- Development of an overall implementation strategy
- Development of technical standards for modifications, security, conversion, and system administration for all modules
- Development of a training program, both initial and ongoing
- Development of a comprehensive implementation plan, including allocation of needed resources
- Project timeline, staging and scheduling
- Task management and tracking
- Project meetings and documentation



### **6.3 Mentoring Technical Staff**

The vendor should mentor the technical staff of CPG so that they can complete the following:

- User Administration
- Access Privilege Control Management
- Logging/Auditing Function
- Digital Signature Functions
- Records Management Function
- Archiving Functions
- Continuity of Operations (e.g. support for backup, recovery)
- Maintenance of Standardized Vocabularies and Code Sets
- Future Plans - General description of long-term plans, including identified future systems environment and projected timetables (AHIMA Body of Knowledge, 2010).

### **6.4 Functional Expertise**

During the course of the implementation, we will need to be able to understand how the various aspects of your system can best be utilized by our organization. In order to continue with process improvement exercises after the completion of the implementation, our personnel must develop knowledge in these areas:

- Assistance and guidance with development of the business rules and applying them to the DMS system as well as the existing EMR
- Fit and gap analysis and systems analysis
- Assistance in the development of data interfaces to/from external entities

## **6.5 Optional Services**

In addition to the standard items listed above, we expect to need assistance in a variety of other areas. These may include, but will not necessarily be limited to, the following:

- Where needed and justified, customized design and programming for supported modifications, such as the addition of a high speed scanner system capable of recognizing barcodes on documents prior to import and supporting OCR and metadata tagging after import.
- Any other implementation support required for the on time, on budget, and successful completion of the project

## **7 SUPPLIER QUESTIONNAIRE**

### **7.1 Supplier Background**

#### **7.1.1 General Information and Financial Status**

- a. Provide the full company name, headquarters location, address, and telephone number of your organization.
- b. Provide the year your company was founded and the length of time your organization has been operating in the document and content management services business.
- c. Disclose fully all your relationships with any and all subcontractors, data centers, data- hosting companies, Internet service providers, and Internet carriers.
- d. Provide the name(s), telephone number, fax number, and e-mail address of all persons authorized by your company to negotiate with CPG.
- e. Indicate whether your company is currently the subject of an investigation by any governmental agency.

- f. Indicate whether your company is currently involved in litigation with any organization regarding fulfillment of contractual obligations, performance, or intellectual property infringement.
- g. If you are a public company, provide audited financial statements for the past two years, including annual reports and 10-K filings if available. If you are a subsidiary of a larger corporation, include that parent company's annual report. If you are a privately held company and will not disclose detailed financial information, provide an order of magnitude estimate of total collected revenue for each of the last two years and the percentage of revenue devoted to sales and advertising activity, research and product development, infrastructure development, maintenance, salaries, overhead, and other expenses.
- h. Provide your company's organizational chart, total number of full time employees, and a brief biography of each senior manager.
- i. Describe the relative size of this project (total users, total database size) compared to ongoing service at three of your current customers.

## **7.2 Customer References**

Provide a list of three current customers who have contracted for the same or similar services including for each reference:

- Company name
- Contact name
- Company Address
- Contact telephone and fax numbers

- Contact e-mail address

These references will be contacted only at the end of the service provider selection process as part of the due diligence phase prior to executing a final contract, and the chosen provider will receive adequate notice to arrange for such contact to occur. It will be assumed that the designated customers are willing to answer questions concerning your company's performance and services.

### **7.3 Pricing Structure**

#### **7.3.1 Document Management Services Pricing**

In this section, please define your pricing structure for document management services including charges per user per month and any other charges that may be billed separately such as enhanced levels of help desk and support functions and charges related to the size of the database. In addition please include a guaranteed limit on the annual increase in per user per month charges for the next five years and described the method used to calculate such increases. Describe any discounts available if a customer commits to a longer term of service or increases the total number of users above specified thresholds.

#### **7.3.2 Customization and Implementation Costs**

Please describe the pricing for initial consultation, set up, user training, and deployment of the document management system and for development and installation of a custom interface that will allow documents from the document management system to be displayed at appropriate locations in the existing EMR. Please specify the number and

qualifications of personnel required for each stage of implementation and the predicted number of hours of their time.

### **7.3.3 Conversion and Import of Paper Documents**

You are asked to define pricing for a high-speed scanner, interface, and any other hardware or software infrastructure necessary to convert paper documents to digital form, attach metadata tags, index them, and import them into the document management system. Please provide pricing for your recommended hardware and infrastructure configuration. Shortly after implementation, CPG intends to begin the process of converting a large number of legacy paper documents (potentially more than 500,000 pages) to digital form and import them into the document management system. Please specify what, if any, additional charges will be associated with this process.

## **7.4 Implementation Services**

### **7.4.1 Methodology**

Please provide detailed information regarding the implementation methodology utilized by your organization. Will necessary software be delivered electronically or on physical media? Will necessary hardware be installed by you or by a subcontractor? How will the necessary interface to the EMR be developed, installed, and tested? What tools will your organization use to confirm that the document scanning system and EMR interface are proceeding according to the agreed upon schedule and to track the personnel and hours devoted to the implementation process? Please define the schedule of meetings and

communication between your implementation team and CPG's project management team.

#### **7.4.2 Training and Support**

Please describe your organization's procedures for conducting user training and specify the methods used including but not limited to on-site personal training, web-based training and tutorials, physical media such as CD or DVD, and printed materials. Please also specify your organization's policies and procedures for user support including but not limited to hours of support availability, help desk procedures, methods of contacting support personnel such as telephone or e-mail, and mechanisms for emergency problem resolution in time sensitive situations. CPG also hopes that its existing information systems personnel can gain some familiarity and expertise with the technology used by the document management system allowing it to provide a significant level of on-site support. Please describe steps involved in training our IT personnel to achieve this capability.

#### **7.4.3 Documentation**

In this section, please define the types of documentation available both within and outside of your system. Are user manuals available in print, on disk, online, or all three? Will manuals be supplied as part of the implementation? Are in-line help screens easily available within the document management system and are they context-sensitive?

#### **7.4.4 CPG Resources**

In this section please identify the recommended resources from both IT technical and functional user areas that CPG should devote to successful completion of this project. Please specify by job title the number and percentage dedication full time employees (FTEs) required, especially in regard to establishing the document scanning system and the interface to the EMR. Please also identify any physical or hardware resources needed and any other requirements of CPG.

## **7.5 Technology**

### **7.5.1 Database**

Please describe the database application, database server hardware, database server operating system, and data center logical and physical structures used by your organization, including a high-level network diagram. Do you manage your own data server infrastructure or is it hosted? Please specify your data center management and maintenance protocols. Please specify whether you are a licensed technology partner of the company that supplies your database application, at what level, and the number and level of certified developers on you staff.

### **7.5.2 Document Management System Functionalities**

Please confirm that all the following functionalities are included in your system under the pricing defined in Section 7.3 or define and explain any deviation from these requirements. Additional charges for any of these functionalities will not be acceptable to CPG unless specifically reviewed and negotiated.

- Integration Functionalities: API availability, GUI form builder, integration with Microsoft Office, integration with Microsoft Outlook, integration with Microsoft Windows Explorer, WebDAV interface.
- Collaboration Functionalities: collaboration management, document check-in/checkout, document locking, multiple simultaneous user collaboration, text and image editing tools, user access control.
- Versioning Functionalities: document versioning, automatic version control, version tracking, document comparison, edit tracking, version promotion and rollback, audit trailing.
- Indexing Functionalities: document locking, archiving, and retention, automatic data format conversion, document indexing, OCR, custom index templates, indexing necessary for capture, predefined index properties.
- Metadata Functionalities: manual and automatic document tagging, electronic signature capture, records management.
- Printing and Publishing Functionalities: compliant ISO standards, configurable user access permissions, multiple document formats, customizable reporting, digital watermarking.
- Search Functionalities: full text searching, Boolean and multi-condition queries, save frequent searches, search by content, metadata, or version.
- Storage Functionalities: access and retrieval from any location with an Internet connection, configurable storage location, electronic file shredding, e-mail archiving, fax management.



## **7.6 Data Privacy and Confidentiality**

Because many of the documents managed by CPG contain protected health information, data privacy and confidentiality are especially important to our organization. Please describe your organization's systems for document encryption, password protection, user authentication, security reporting, and secure transport of data over the Internet, such as VPN technology. Describe your organization's policies and procedures to remain compliant with HIPAA and ISO 27000 series privacy and security regulations. Describe your organization's defenses against malware and attacks by unauthorized individuals. Describe your organization's data breach reporting and notification policy.

## **7.7 Data Security and Integrity**

Please describe in detail your organization's data protection, backup, and recovery procedures. What are the frequency, extent and redundancy of data backups? Does each backup overwrite the previous copy? Are multiple backups maintained to allow rollback to a prior date if necessary? Are backups maintained at different geographic locations to guard against physical disaster at a particular data center?

## **7.8 Level of Service**

The time sensitive needs of CPG's patient care activities require that all patient related clinical documents be securely accessible 24/7/365 from any location with an Internet connection. Please describe the methodology used by your organization to maintain 99.9% uptime and document availability for your clients. Please also describe the formulas and metrics used to calculate the uptime percentage. What remedies and rebates

are available to clients if your organization is unable to maintain the contracted level of service? Do you have a standard service level agreement?

### **7.9 Contract Renewals and Data Transfer**

Does your organization typically utilize automatically renewing contracts, and will you accept agreements that expire after a set agreed-upon term and will not renew unless and until a new agreement is negotiated? Please also define whether there is any "acceptance" period at the beginning of an agreement during which CPG can terminate the contract without penalty if the document management system does not perform as specified. In the event an agreement is not renewed, what is your standard method to prepare the client's data for export to another document management system? Please define any charges related to preparing and/or exporting a client's data to another system.

### **7.10 Terms and Conditions**

Please specify the time frame for completing the process of getting CPG up and running on your document management system including the document scanning system and the interface to the EMR. Please describe your standard billing schedule and payment terms. CPG's standard payment term is net 45 days. Please identify any differences between payment terms and conditions for monthly service charges vs. charges for implementation services as defined in Section 7.4.

## 8 APPENDICES

### 8.1 APPENDIX A – Proposal Cover Letter

RFP Title: Community Physician’s Group Document Management System

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

Vendor Address: \_\_\_\_\_  
\_\_\_\_\_

Total Funds Requested: \$ \_\_\_\_\_.

Contact Name: \_\_\_\_\_

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

Contact Email Address: \_\_\_\_\_

Contact Phone Number:( ) \_\_\_\_ - \_\_\_\_\_

## 9 REFERENCES

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