



**Request for Quote  
Questions and Responses**

**Request for Proposal:** Electronic Patient Care Reporting System RFP

**Proposal Due Date:** Friday, November 3, 2023

All Prospective Respondents: In reference to the quote solicitation, the following questions and inquiries were submitted, and have responses from Boston Public Health Commission/Boston EMS below.

**1. Could Boston EMS supply complete EMS reports generated in 2021, 2022, and Year-to-Date (YTD) 2023**

2021: 121,396

2022: 126,340

2023: 104,767

**2. How many devices will have the ePCR software loaded, including reserves?**

Boston EMS requires the ability to install the software on their complete inventory of tablets, with a maximum of 100 being used concurrently. This number does not include non-mobile devices such as desktop station computers accessing the application via the internet.

**3. Does your current ePCR vendor possess the capability to export all current BEMS data in a NEMSIS 3.4/3.5 format, accompanied by a corresponding .pdf file for the final record?**

If Boston EMS selects a new vendor to provide ePCR services, the department will work with the current vendor to export data in the above-referenced standard.

**4. 5.02. Is Boston EMS open to considering a vendor utilizing a remote project manager?**

Boston EMS' does not require a full-time on-site project manager. Our preference would be that the project manager is available in person for pivotal dates associated with implementation, testing and training. The department will work with the selected vendor to coordinate scheduling.

**5. 6.01. Is the intended purpose to have the vendor replicate the entire database on a specified schedule to a local database onsite for local data access by BEMS?**

Yes, Boston EMS requires a daily export of data to a local server through an automated SFTP transfer or API.

**6. Is there a BI tool BEMS uses today to connect to the current ePCR data?**

We are working toward this and hope to have it in place in 2024.

**7. Will Boston EMS be responsible for all maintenance and support of the onsite servers?**

Yes, local servers are not the responsibility of the ePCR vendor.

**8. 7.01. Is the intention behind this related to signature forms or another requirement? Can BEMS provide a use case to clarify this requirement?**

This preferred capability should have read '*Capacity on the back end of the application to turn on and off the camera*'. This may be used to help recover a device, by enabling the camera function remotely. Boston EMS personnel may also use the camera to scan driver's licenses or hospital bracelets.

**9. 7.04. Is the purpose of this requirement to facilitate the installation of a third-party vendor application? Could you please provide the envisioned objective for this requirement and a use case example?**

Boston EMS is interested in continuing to advance the provision of pre-hospital care, which may include telehealth or translation services. We are asking if the ePCR vendor has partnered with such companies they might recommend.

**10. What's the name of Computer Aided Dispatch (CAD) vendor that the city will have us integrated with?**

The City of Boston is currently using Hexagon for the CAD System, although it is possible that at some point in the future this may change.

**11. Will BEMS address all vendor questions submitted early enough to allow follow-up questions before the 10/30 question submission deadline?**

Boston EMS is not intending to change the guidelines and timeline set forth in the ePCR.

**12. Could you please provide the make and model of your existing mobile hardware?**

The existing Hardware is the Samsung Galaxy Tab Active Pro SM-T547U.

**13. Regarding data retention, how many years does Boston EMS intend to require vendors to store all ePCR records (SafetyPAD and Health EMS), and does the department plan to routinely purge records older than a specific date on a monthly or annual basis?**

Boston EMS requires ePCR vendors to remain compliant with all federal and state regulatory medical record requirements, although our preference is to retain records indefinitely.

**14. Does the current CAD system transmit Lat/Long coordinates in the data feed?**

Yes, the current CAD system collects Lat/Long coordinates, which is required to feed into the ePCR application.

**15. What is the estimated total record count for ePCR data to be imported from Health EMS through the expected go-live date of July 1, 2024?**

The estimated total record count to be imported from HealthEMS is 950,000 records.

**16. Can companies from Outside USA apply for this?**

No, see B1 1.1 "Proposals shall only be accepted from firms located in the continental United States that have an established reputation of permanency and reliability in the field of EMS electronic patient care report systems."

**17. Can we perform the tasks (related to RFP) outside USA? (like, from India or Canada)**

No.

**18. Can we submit the proposals via email?**

Yes, please refer to the RFP proposal submission guidelines.

**19. 1.04 Please define what is meant by "reporting".**

'Reporting' in this context refers to the ability to pull single records in a standard format or multiple records based on set criteria. Single records should be accessible in a PDF format, while multiple records should have the option to extract to Excel. Authorized members of Boston EMS may analyze records, using identified trends to inform training, public messaging, or city services. For example, if Boston EMS is interested in exploring trends in pediatric asthma, it is helpful to be able to filter records by multiple categories, such as age and treatment. Multi-field search capability to include "and" "or" search criteria functionality.

**20. 1.16 Please define what is meant by "limited access".**

Limited access for hospitals means they can only view ePCR trip sheets for patients transported to their facility and would not have the ability to edit the Boston EMS patient care report. The Boston EMS administrator should have the ability to grant limited access allowing a receiving facility to attach documents in multiple formats, such as a hospital's trauma report, to a patient care report.

**21. 2.04 Please provide the current BPHC requirements for password length and expiry period.**

The current requirement is 8 characters, with 1 upper case, and 1 number, expiring every 90 days.

**22. 2.07 Is the expectation that the vendor will provide the software (or multiple softwares based on hardware being used)?**

Yes, Boston EMS would like the vendor to include the MDM software in their proposed solution.

**23. Is the expectation that the vendor will configure and manage the device images, or will Boston EMS be configuring and managing?**

Boston EMS prefers an android-based application with a standard configuration file managed through an MDM.

**24. 3.03 Please define "Accept as new" and "Accept as update".**

This refers to the crew being able to view a current CAD Dispatch record and accept it as new or allow the user to update an existing open record.

**25. 6.01 Please define what is meant/intended by "local redundancy in-house on Boston EMS servers" .**

Boston EMS requires a daily export of data to a local Boston EMS server. The Vendor is not responsible for providing or managing the server.

**26. Section D, Item 1.1 Please provide the Contract and Contract Attachments for legal review.**

The contract is included as an attachment [here](#), below the link for the RFP.

**27. Would you consider an extension of the due date from 11/03 to 11/17**

No, Boston EMS will not consider any extensions.

**28. You listed the minimum amount of BLS and ALS ambulances during peak times. What would be the max amount of ambulances in service at any given time?**

Boston EMS adds additional ambulances during anticipated surge events. In total, the department can deploy up to 100 ePCR (concurrent) tablets assigned to ambulances, supervisors and non-transporting teams.

**29. How will we receive the data?**

The data will be received via SFTP.

**30. Will it be in a specific file format?**

The data will be in NEMESIS 3.4/3.5 format.

**31. Could you provide more details on the size of that legacy data?**

Boston EMS estimates the total legacy data to be approximately 2,400 Gigabytes.

**32. Is the auto insurance still required to submit for this RFP, even though as a vendor we will be supporting operations and training remotely?**

Automobile insurance is not a requirement of this RFP.

**33. For the financial statements request, how would the city prefer this documentation be presented and to what level of fidelity?**

Please provide the company's qualified audit opinions based on GAAP and annual balance sheets for the last two years.

**34. 1.5.1.4 Given we use a secured HIPAA compliant cloud server with redundancy for backups. Are cloud servers acceptable?**

HIPAA compliant cloud servers are acceptable.

**35. With respect to the requirement for audited financial documents, will Boston EMS accept alternative documentation if no such audits have been conducted?**

Yes, if no such audited financial statements have been completed, vendors must provide alternative documentation in the form of a letter from a Certified Public Accountant that attests to the organization's financial strength and stability.

**36. Given the size of BEMS's operation and the potential complexity (depending on the vendor) of deploying new technology, we would ask BEMS to shed some light on its decision to undertake this process.**

Boston EMS is currently in its last year of a 3-year contract and made the decision to put out an RFP. The expectations of any successful ePCR vendor are set forth in the RFP.

**37. What worked well during the last deployment?**

Details that make for a successful deployment are outlined in the RFP.

**38. What features from BEMS's current system are "must-have" and "nice-to-have" that should remain in place during the next deployment?**

Please refer to the RFP for preferred and required capabilities.

**39. What lessons learned did BEMS take away from its last / current deployment, and what features / functions remain on BEMS's wish list?**

Any lessons learned, desired features/functions and wish lists from the current or past vendors have been incorporated into the language of the RFP.

**40. Please describe BEMS's interest in using the Massachusetts HIWay for information sharing with hospitals and other care facilities / healthcare partners across the care continuum.**

Boston EMS will work with the contracted vendor to discuss any features not outlined in the RFP.

**41. Does BEMS have access to its existing/legacy data? If so, where are the data files?**

Yes, If Boston EMS contracts with a new vendor, they will be asked to import all of our legacy data from our current ePCR platform, to allow for complete access and searchability of the data including all attachments, signatures and EKG data /PCO files.

**42. Was SafetyPad data imported into Sansio during the last transition?**

Yes.

**43. Based on the last RFP cycle, how much weight will pricing have relative to a vendor's ability to expeditiously achieve all of BEMS's technical and service objectives?**

Please refer to section 'N. Proposal Requirements/Evaluation Criteria' which includes the weight (points) associated with each criteria, including price.

**44. It can be highly conducive to efficient, informed, and reliable contracting if BEMS provides an "all-in" budget target and/or a "not to exceed" amount that includes all of the features, functions and service that has been delineated in Section F. Is that possible?**

We encourage all responding vendors to provide a comprehensive and reasonably priced solution. We do not intend to change the language of the RFP regarding the pricing.

**45. Please explain the rationale for requesting a "browser-based" application rather than a "thick client" application that can be more reliably utilized in an offline mode (especially in areas of the City where network connectivity is challenged, for example, in the basement of a brownstone). Would BEMS accept a combination "cloud-and-client" system that does not require an internet connection and that works in a secure application rather than a browser?**

Please refer to the RFP for requirements. If you are unable to meet said requirements, please outline these limitations in your response.

**46. In an ideal setting, our preferred go-live duration is approximately two months. At the shortest, we have deployed at scale (i.e., across a county as large as Los Angeles) in less than one week. Can BEMS please explain why it believes that more than seven (7) months are needed to deploy following contract execution? Is the duration based on past experience (i.e., the expectation of complexity), or is there a legal reason (e.g., existing contract expiration date) why BEMS would like to have its new engagement begin on July 1st?**

As stated in the RFP, please provide a timeline for what you believe to be reasonable for your solution, based on a go-live date of July 1<sup>st</sup>.

**47. Regarding, pay-per-chart: The RFP says that BEMS responds to 130,000 calls and transports 85,000. What is the appropriate figure to use for the number of PCRs created per year (i.e., for volume-based modeling purposes)?**

Boston EMS has traditionally opted for an annual fee price model. In 2022, Boston EMS had 126,340 electronic patient care records.

**48. What is Boston EMS' preferred pricing model? Or what pricing structure(s) does it NOT want to evaluate?**

Boston EMS prefers to have a set all-inclusive annual fee, with day 1 of year 1 being the go-live date. All pricing structures will be evaluated.

- 49. The three choices on the capabilities matrix are: "available as a current feature," "in development," and "not available." Can we request that an additional column be added: "available but configurable"?**

Please do not add additional columns. This will present challenges to reviewers if the responses are not in a standardized format. Select the most appropriate column provided and if additional clarification is needed, include that information under 'Details'.

- 50. 7.02 Please provide additional explanation about the preferred functionality regarding multiple languages. For example, which languages are preferred?**

If this is a feature your application supports, please include available languages. The ten most common languages spoken in Boston are available [here](#).

- 51. 7.02 For the different languages, is this PATIENT-facing or CLINICIAN-facing? Is this ALL data fields on the interface, or does this primarily refer to signature documents?**

This is in reference to the patient signature section of the ePCR.

- 52. Can Boston EMS provide its preferences with regards to testing and training, so bidders can provide feedback and possibly suggest alternatives and/or methods to meet these objectives?**

Boston has requested the vendor to provide best practices associated with training personnel on their system. That said, Boston EMS would likely plan for training on the application during a regularly scheduled in-person training cycle. Based on the go-live date, this would likely be scheduled for three alternating Fridays in mid-May and June. The vendor is not required to send a representative to these trainings, but they may be asked to provide training materials (for example training videos or tutorials) and should account for this in the proposed timeline.

- 53. Boston EMS mentions Handtevy integration. Are there any others that are desired and/or requested.**

Please address the desired and requested capabilities outlined in the RFP.

- 54. Can Boston EMS please confirm that faxing is not a goal of the RFP.**

Please refer to the RFP for faxing requirements.

- 55. Can you please clarify / specify whether your goal and intent would be to use the existing state-overseen interoperability network (strongly preferred), OR would you prefer to have the vendor provide its own proprietary network (which would require convincing each facility to use the proprietary network instead of the state-provided approach)?**

Boston EMS' requirement is to share data with receiving facilities. Please refer to the RFP for requirements associated with receiving facility data sharing. Data sharing with hospitals may vary based on hospital preference from faxing to establishing a connection through an API.

- 56. Is Boston EMS interested in features outside of the scope of the RFP? (Consolidation of multiple questions)**

No, Boston EMS is asking vendors to submit responses that specifically address the requirements set forth in the RFP. For the awarded vendor, Boston EMS welcomes future discussions regarding additional capabilities.

**57. 1.03 -- What is a "Cloud Base" server? Is this supposed to say, "cloud server".**

Yes, this should have stated 'cloud server'.

**58. Please provide detail regarding BEMS's preference for Android devices vs. Windows devices.**

Vendors should provide their hardware recommendations to optimize the use of their platform.

**59. Are you amenable to seeing such a packaged summary that exceed those listed in the RFP, if so are you able to access links via Dropbox?**

Please do not provide additional information outside of the scope of the RFP. The response should be sent as an email attachment and should not require additional links to permit access.

**60. How do you plan to confirm receipt of emailed proposal.**

Boston EMS will send a confirmation email for each proposal that is received.