State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

Request for Quotation

ADDRESS CORRESPONDENCE TO ATTENTION OF:

JOHN ABBOTT
304-558-2544

RFQ COPY
TYPE NAME/ADDRESS HERE

VENDOR

DIVISION OF VETERANS AFFAIRS
ATTENTION: C. PRATHER
SUITE 101
1321 PLAZA EAST
CHARLESTON, WV
   25301-1400   558-3661

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
06/26/2007				

BID OPENING DATE:	07/25/2007		BID OPENING TIME	01:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT

REQUEST FOR QUOTATION

THE PURCHASING DIVISION IS SOLICITING BIDS FOR THE
VETERAN'S NURSING FACILITY TO PROVIDE TWO (2) CLINICAL
/FINANCIAL, (COTS) SOFTWARE PACKAGES FOR ITS NURSING
FACILITIES IN CLARKSBURG, WV AND BARBOURSVILLE, WV

ATTACHMENTS: 1. SPECIFICATIONS
              2. BID FORM
              3. PURCHASING AFFIDAVIT

MANDATORY PRE-BID: THERE WILL BE A MANDATORY PRE-BID
ON JULY 12, 2007; 1:30 PM, LOCATED AT THE VETERAN'S
NURSING FACILITY IN CLARKSBURG, WV.
FAILURE TO ATTEND THIS PRE-BID MEETING WILL AUTO-
MATICALLY DISQUALIFY THE VENDOR FROM BEING AWARDED
THE CONTRACT.

QUESTIONS WILL BE ACCEPTED TILL 7/6/2007, AND SHOULD
BE DIRECTED TO: JOHN ABBOTT AT JABBOTT@WVADMIN.GOV
OR THE PURCHASING DIVISION ADDRESS STATED ON THIS RFQ.

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER
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CLINICAL/FINANCIAL SOFTWARE

VENDOR PREFERENCE CERTIFICATE

CERTIFICATION AND APPLICATION* IS HEREBY MADE FOR
PREFERENCE IN ACCORDANCE WITH WEST VIRGINIA CODE,
5A-3-37 (DOES NOT APPLY TO CONSTRUCTION CONTRACTS).

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

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GENERAL TERMS & CONDITIONS
REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)

1. Awards will be made in the best interest of the State of West Virginia.

2. The State may accept or reject in part, or in whole, any bid.

3. All quotations are governed by the *West Virginia Code* and the *Legislative Rules* of the Purchasing Division.

4. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required $125.00 registration fee.

5. All services performed or goods delivered under State Purchase Orders/Contracts are to be continued for the term of the Purchase Order/Contract, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods, this Purchase Order/Contract becomes void and of no effect after June 30.

6. Payment may only be made after the delivery and acceptance of goods or services.

7. Interest may be paid for late payment in accordance with the *West Virginia Code.*

8. Vendor preference will be granted upon written request in accordance with the *West Virginia Code.*

9. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.

10. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.

11. The laws of the State of West Virginia and the *Legislative Rules* of the Purchasing Division shall govern all rights and duties under the Contract, including without limitation the validity of this Purchase Order/Contract.

12. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.

13. **BANKRUPTCY:** In the event the vendor/contractor files for bankruptcy protection, this contract is automatically null and void, and is terminated without further order.

14. **HIPAA Business Associate Addendum -** The West Viginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, and available online at the Purchasing Division's web site **(http://www.state.wv.us/admin/purchase/vrc/hipaa.htm)** is hereby made part of the agreement. Provided that, the Agency meets the definition of a Covered Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.

INSTRUCTIONS TO BIDDERS

1. Use the quotation forms provided by the Purchasing Division.

2. **SPECIFICATIONS:** Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as **EQUAL** to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.

3. Complete all sections of the quotation form.

4. Unit prices shall prevail in cases of discrepancy.

5. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.

6. **BID SUBMISSION:** All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications.

       SIGNED BID TO:

       Department of Administration
       Purchasing Division
       2019 Washington Street East
       Post Office Box 50130
       Charleston, WV 25305-0130

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A.   APPLICATION IS MADE FOR 2.5% PREFERENCE FOR THE
REASON CHECKED:

( )   BIDDER IS AN INDIVIDUAL RESIDENT VENDOR AND
HAS RESIDED CONTINUOUSLY IN WEST VIRGINIA FOR FOUR
(4) YEARS IMMEDIATELY PRECEDING THE DATE OF THIS
CERTIFICATION; OR

( )   BIDDER IS A PARTNERSHIP, ASSOCIATION OR CORPORA-
TION RESIDENT VENDOR AND HAS MAINTAINED ITS HEAD-
QUARTERS OR PRINCIPAL PLACE OF BUSINESS CONTINUOUSLY IN
WEST VIRGINIA FOR FOUR (4) YEARS IMMEDIATELY PRECEDING
THE DATE OF THIS CERTIFICATION; OR 80% OF THE OWNERSHIP
INTEREST OF BIDDER IS HELD BY ANOTHER INDIVIDUAL,
PARTNERSHIP, ASSOCIATION OR CORPORATION RESIDENT VENDOR
WHO HAS MAINTAINED ITS HEADQUARTERS OR PRINCIPAL PLACE
OF BUSINESS CONTINUOUSLY IN WEST VIRGINIA FOR FOUR (4)
YEARS IMMEDIATELY PRECEDING THE DATE OF THIS
CERTIFICATION; OR

( )   BIDDER IS A CORPORATION NONRESIDENT VENDOR
WHICH HAS AN AFFILIATE OR SUBSIDIARY WHICH EMPLOYS
A MINIMUM OF ONE HUNDRED STATE RESIDENTS AND WHICH
HAS MAINTAINED ITS HEAQUARTERS OR PRINCIPAL PLACE OF
BUSINESS WITHIN WEST VIRGINIA CONTINUOUSLY FOR THE
FOUR (4) YEARS IMMEDIATELY PRECEDING THE DATE OF THIS
CERTIFICATION.

B.   APPLICATION IS MADE FOR 2.5% PREFERENCE FOR THE
REASON CHECKED:

( )   BIDDER IS A RESIDENT VENDOR WHO CERTIFIES THAT,
DURING THE LIFE OF THE CONTRACT, ON AVERAGE AT LEAST
75% OF THE EMPLOYEES WORKING ON THE PROJECT BEING BID
ARE RESIDENTS OF WEST VIRGINIA WHO HAVE RESIDED IN
THE STATE CONTINUOUSLY FOR THE TWO YEARS IMMEDIATELY

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

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Request for Quotation

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PRECEDING SUBMISSION OF THIS BID;
OR
( ) BIDDER IS A NONRESIDENT VENDOR EMPLOYING A
MINIMUM OF ONE HUNDRED STATE RESIDENTS OR IS A
NONRESIDENT VENDOR WITH AN AFFILIATE OR SUBSIDIARY
WHICH MAINTAINS ITS HEADQUARTERS OR PRINCIPAL PLACE
OF BUSINESS WITHIN WEST VIRGINIA EMPLOYING A MINIMUM
OF ONE HUNDRED STATE RESIDENTS WHO CERTIFIES THAT,
DURING THE LIFE OF THE CONTRACT, ON AVERAGE AT LEAST
75% OF THE EMPLOYEES OR BIDDERS' AFFILIATE'S OR
SUBSIDIARY'S EMPLOYEES ARE RESIDENTS OF WEST VIRGINIA
WHO HAVE RESIDED IN THE STATE CONTINUOUSLY FOR THE TWO
YEARS IMMEDIATELY PRECEDING SUBMISSION OF THIS BID.

BIDDER UNDERSTANDS IF THE SECRETARY OF TAX & REVENUE
DETERMINES THAT A BIDDER RECEIVING PREFERENCE HAS
FAILED TO CONTINUE TO MEET THE REQUIREMENTS FOR SUCH
PREFERENCE, THE SECRETARY MAY ORDER THE DIRECTOR OF
PURCHASING TO: (A) RESCIND THE CONTRACT OR PURCHASE
ORDER ISSUED; OR (B) ASSESS A PENALTY AGAINST SUCH
BIDDER IN AN AMOUNT NOT TO EXCEED 5% OF THE BID AMOUNT
AND THAT SUCH PENALTY WILL BE PAID TO THE CONTRACTING
AGENCY OR DEDUCTED FROM ANY UNPAID BALANCE ON THE
CONTRACT OR PURCHASE ORDER.

BY SUBMISSION OF THIS CERTIFICATE, BIDDER AGREES TO
DISCLOSE ANY REASONABLY REQUESTED INFORMATION TO THE
PURCHASING DIVISION AND AUTHORIZES THE DEPARTMENT OF
TAX AND REVENUE TO DISCLOSE TO THE DIRECTOR OF
PURCHASING APPROPRIATE INFORMATION VERIFYING THAT
BIDDER HAS PAID THE REQUIRED BUSINESS TAXES, PROVIDED
THAT SUCH INFORMATION DOES NOT CONTAIN THE AMOUNTS OF
TAXES PAID NOR ANY OTHER INFORMATION DEEMED BY THE TAX
COMMISSIONER TO BE CONFIDENTIAL.

UNDER PENALTY OF LAW FOR FALSE SWEARING (WEST VIRGINIA

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

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CODE 61-5-3), BIDDER HEREBY CERTIFIES THAT THIS
CERTIFICATE IS TRUE AND ACCURATE IN ALL RESPECTS; AND
THAT IF A CONTRACT IS ISSUED TO BIDDER AND IF ANYTHING
CONTAINED WITHIN THIS CERTIFICATE CHANGES DURING THE
TERM OF THE CONTRACT, BIDDER WILL NOTIFY THE
PURCHASING DIVISION IN WRITING IMMEDIATELY.

              BIDDER: --------------------------------

              DATE: --------------------------------

              SIGNED: --------------------------------

* CHECK ANY COMBINATION OF PREFERENCE CONSIDERATION(S)
IN EITHER "A" OR "B", OR BOTH "A" AND "B" WHICH YOU
ARE ENTITLED TO RECEIVE. YOU MAY REQUEST UP TO THE
MAXIMUM 5% PREFERENCE FOR BOTH "A" AND "B".
(REV. 12/00)
                   NOTICE

A SIGNED BID MUST BE SUBMITTED TO:

     DEPARTMENT OF ADMINISTRATION
     PURCHASING DIVISION
     BUILDING 15
     2019 WASHINGTON STREET, EAST
     CHARLESTON, WV 25305-0130

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THE BID SHOULD CONTAIN THIS INFORMATION ON THE FACE OF
THE ENVELOPE OR THE BID MAY NOT BE CONSIDERED:

SEALED BID

BUYER: JOHN ABBOTT---------------------------

RFQ. NO.:   VET07C013---------------------------

BID OPENING DATE: 7/25/2007---------------------------

BID OPENING TIME: 1:30 PM---------------------------

PLEASE PROVIDE A FAX NUMBER IN CASE IT IS NECESSARY
TO CONTACT YOU REGARDING YOUR BID:

CONTACT PERSON (PLEASE PRINT CLEARLY):

****** THIS IS THE END OF RFQ VET07C013 ****** TOTAL: _____

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Scope of Work:

The West Virginia Veterans Nursing Facility is soliciting bids to obtain a Commercial Off-the-Shelf (COTS) integrated, clinical/financial software package. The West Virginia Division of Veterans Affairs has two locations in West Virginia. Facility 1 location is: West Virginia Veterans Nursing Facility, One Freedom's Way, Clarksburg WV 26301. Facility 2 location is: Barboursville Veterans Home, 512 Water Street, Barboursville, WV 25504.

The successful vendor will provide an integrated clinical/financial software package along with additional features designed to meet the unique needs of a State Facility. The software package must be a Commercial Off-the shelf package that requires little or no customization or tailoring to meet the requirements of this Request for Quotation.

The successful vendor will be required to install and maintain their software on the State of West Virginia – owned equipment at both locations. Installation will entail loading the software on State of West Virginia – owned servers and ensuring that the software will operate as specified in other sections of this proposal. The proposed client/server software is to operate within a Windows 2003 Server operating system utilizing Windows XP and Microsoft 2007 compatible.

Attachment A, Software Specifications, contains the specifications/functions of the software. The required specifications/functions are **(M)** mandatory and if any of these mandatory requirements are not met or are absent from the vendor's offering the bid will be rejected. Mandatory options are those that the facility may purchase at a later date but must be available for inclusion in the software functionality at the time of the bid opening. The costs for mandatory and desired options must be disclosed in Attachment B and are to remain fixed for at least 120 days after bid opening. The State of West Virginia reserves the right to obtain desired enhancement options anytime during the life of the contract. The vendor's offering format needs to address all components of the RFQ.

Warranty: Unless otherwise specifically stated by the bidder/proposer, the equipment manufacturer's standard warranty shall apply as a minimum and must be honored by the contractor. The successful vendor will provide warranty support services, at no additional cost to the West Virginia Veterans Nursing Facility, for at least 90 (ninety) days, or until a successful month's billing and reporting cycle is completed, whichever is longer, after acceptance of the software and annual maintenance thereafter for the life of the resulting contract. Bidders must provide with their bid a detailed description of their maintenance program. Acceptance of the software will occur upon successful installation of the software.

Vendor's Quotation Format:

The quotation should be formatted in the same order, providing the information listed below:

Title page - Should state the RFQ Subject (West Virginia Veterans Nursing Facility – Financial/Clinical Software) and number (VET07C013), the name of the Vendor, Vendor's business address, telephone number, name of authorized contact person to speak on behalf of the Vendor, dated and signed.

Table of Contents - Clearly identify the material by section and page number.

Section I - Understanding the Scope of Work

> Vendor will be required to install and maintain their software on State of West Virginia – owned equipment. Installation will entail loading the software on State of West Virginia – owned servers and ensuring that the software will operate as specified in other sections of this quotation. Vendor will be evaluated on the list of mandatory included on **Attachment A.**
>
> Deliveries of any and all software products are to be delivered to the West Virginia Veterans Nursing Facility, F. O. B. Destination Freight Prepaid, and Installed. Bid delivery prices are to include all packaging, insurance, transportation and installation costs and charges, as applicable. Costs and charges for all parts and operating manuals should also be included if they apply. Facility location for delivery is: one Freedom's Way, Clarksburg WV 26301.
>
> The top three vendors will be asked to conduct an oral presentation/demonstration verifying their company can meet the mandatory requirements.

Section II – Planned Project Management & Staffing

> Bidder must provide with their bid a project plan, with a named project manager who will remain through out the deployment, outlining how they would manage the requirements of the bid if awarded the contract. The plan must be include a detailed timetable for installation, training, and testing. The plan must also include any assumptions, dependencies and risks associated with the plan. This will assist the facility's Project Manager in scheduling and resource identification/allocation. The facility project manager will interact with the vendor's project manager to ensure a successful deployment. The successful vendor's project management plan will have to be mutually agreed upon. Failure to arrive at a mutually agreed upon project plan within 20 days of contract award will result in the contract being cancelled.

> **Bidder Qualifications:**
>
> a. Bidder organization/qualifications: Bidder must provide information regarding its organization, how long it has been in the software development business (particularly the Skilled, long-term care nursing home accounts receivable/billing software business), and how it remains current with Medicaid, Medicare and HIPAA changes.

b. Bidder must provide three current references, which are State Veterans Homes that are actively using the bidder's proposed software in a similar setting as the State of West Virginia and have been doing so for more than a year. All references provided must contain a valid contact name employed by the reference with an accurate phone number. All references will be contacted. The facility will make three attempts to contact the reference. If contact cannot be made, no points will be provided for that reference. It is the responsibility of the Bidder to ensure the reference contact information is current and accurate.

Section III – Support, Maintenance and Warranty Requirements

Vendor will be required to install and maintain their software on State of West Virginia – owned equipment. Installation will entail loading the software on State of West Virginia – owned servers and ensuring that the software will operate as specified in other sections of this quotation.

The successful vendor will be required to train five to ten personnel on-site on the software's correct operation including, but not limited to, adding, modifying, and deleting records, producing invoices, preparing and printing reports, producing and transmitting billings, and entering and maintaining all clinical documentations. **See Attachment A.**

Section IV - Cost

(NOTE: If any of these mandatory requirements are not met or are absent from the vendor's offering the bid will be rejected.)

Optional Software Functionality/Support Specifications:

(NOTE: Mandatory options, designated by an (M), are those that the State of West Virginia may purchase at a later date but must be available for inclusion in the software functionality at the time of the bid opening.

MANDATORY ITEMS

MARKETING/PREADMISSIONS
A. **Demographic Information**
1. Software must capture information about prospective Veteran resident including as a minimum name, address, email, from where the lead originated, date of the initial inquiry, special needs (such as oxygen, meds, IV), date admission is needed, referral information, contact information and their relationship. **(M)**
2. A follow up tracking and tickler file must be created which shows all activities and communications to the prospect and family. **(M)**
B. **Military History**
1. Military history must be included, which shows the dates of service, rank, service number, priority group and eligibility. **(M)**
2. Military information must designate the wars and conflicts in which the prospect participated. **(M)**
3. Military information must designate if the prospect was a POW **(M)**
4. Military information must designate if the prospect was a Purple Heart recipient **(M)**
5. Military information must list all honors awarded **(M)**
6. Military information must list Veterans Service Organizations active with the prospect **(M)**
C. **Clinical Assessment**
1. A basic wellness assessment must be available to determine the prospect's mental and health condition. This assessment must be customizable by the facility. **(M)**
2. A medical approval date must be available within the software. **(M)**
D. **Reporting**
1. A waiting list must be generated based on both the initial date of inquiry as well as the date admission is needed. **(M)**
2. Reports must be generated to show all follow up actions to inquiries and actions needed to be completed. **(M)**
3. Reports must be available to illustrate the number of new inquiries, from where inquiries were referred, number of new admissions, number of facility tours. **(M)**
4. Custom ad hoc reporting must be available for all fields captured **(M)**
5. Any documents needed to be generated for the prospect must be able to be created with mail merge capability from the prospect's demographic file and printed on demand. **(M)**
6. Capability must be available to scan information from the prospect into the prospect's file such as insurance information, medical approval information, and military information. **(M)**

7. Information placed into the prospect's record must be easily transferred to the admission record should the prospect become a resident. **(M)**

FINANCIAL

A. Calculation of Private Pay Charges
1. Software must calculate charges for private pay residents based on a daily rate for each level of care multiplied by the number of days (in-house and furlough) captured from the census. **(M)**
2. The software must also be capable of billing patients on a monthly basis rather than a daily basis. Rates must be able to be prorated based on the timeline the resident should be charged. Prorated charges should be calculated by days of the year or days of the month. **(M)**
3. The software must be capable of billing at the established daily rate. Medicaid/Medicare residents are billed at the Medicaid/Medicare daily reimbursement rate determined by the State of West Virginia. The current pay categories are:
   a. Private/non-Medicaid payer **(M)**
   b. Medicaid Eligible **(M)**
   c. Residential **(M)**
   d. Domiciliary **(M)**
   e. Assets/Income **(M)**
   f. Medicare **(M)**

4. Private pay charges must be billed based on the established daily rate or monthly rate for each care level. When residents are on furlough or on a hospital leave, these residents must be billed at a percentage of the applicable rate. **(M)**
5. Corrections to any prior month's charges and receipts, due to a level of care change, bedhold, etc., must be accomplished through journal entries or other methods of data input, and be reflected as prior month adjustments. **(M)**
6. The software must be capable of pre-billing and retroactive billing. **(M)**
7. The software must be capable of making contractual adjustments for all appropriate accounts with one transaction. **(M)**
8. The system must be able to provide an itemized statement to include care charges, ancillary charges, etc. **(M)**
9. Software must have capability condensing ancillaries to one line. ie: 3 bags of briefs condensed to 1 line item w/a qty of 3. **(M)**
10. Private Statements must be produced in a format to print on plain paper with top 1/3 perforation tear off for the payee to return with payment. Statement must be customizable by the State for items such as logo and comments. **(M)**
11. At least 3 individual comment lines per statement run must be available along with at least one resident specific comment line. **(M)**
12. Override rates must be available by specific resident with a beginning and end date. Reports must be available to show the special override rates. **(M)**

B. Calculation of Charges for Medicaid Residents
1. The software must calculate charges for Medicaid/Medicare residents based on a daily rate multiplied by the number of days (in-house and furlough) captured from the census. **(M)**
2. At the beginning of each month, the Patient Liability (member portion of charges) must be pre-billed to residents covered by Medicaid/Medicare. Any changes to the month's pre-billed patient liability must be adjusted at or before the close of the month. **(M)**

3. User must be able to enter patient liability on an exception basis. An Accounts Receivable (A/R) package must carry forward patient liability from the previous month. When the patient liability is changed for the month, the changed amount is carried forward and used until the next change is made. **(M)**
4. Medicaid/Medicare charges are to be billed based on the established daily rate. Residents on furlough or on a hospital leave must be billed at a percentage of daily Medicaid rate if applicable. **(M)**
5. Medicaid/Medicare may change eligibility and rates retroactively and for several months at a time. The system must calculate retroactive rate increases and/or decreases. This system must calculate retroactive charges and/or credits, which will be used to post the retroactive charges and cash payments through prior month adjustments. **(M)**
6. The software must be capable of bridging with bar code inventory tracking systems for medical supplies. **(M)**

C. Receipt of Payments from Individuals & Small Receipt Remittances from third party payment sources
1. Payments received from residents and the third party sources must be receipted manually and keyed into the A/R system. Receipt reconciliation is required to verify the receipt entries. If an error occurs during posting, there must be a means of tracing and correcting the posted receipts. **(M)**
2. Cash receipts must be tracked by batch number. **(M)**
3. Software must be able to either distribute the entire cash received for the resident automatically from the oldest invoice to the newest invoice or manually by specific invoice. **(M)**
4. Software must be able to automatically draft a designated bank account to pay funds. **(M)**

D. Report/Statement Capabilities
1. The software must have the capability to print statements for private pay, domiciliary, and Medicaid/Medicare residents. The system must also have the capability to print prior month statements for any payer type. The system must be able to print statements for a single resident, a group of residents, or all residents. Print statements by payer categories. **(M)**
2. The software must provide a summarization of transactions for the previous month to be used for posting general ledger entries to the statewide general ledger. **(M)**
3. The system must be able to print, at a minimum, a census listing, aging report, separated by payer type by resident or resident type, resident ledger report, cash receipts journal, occupancy report based on payer source, ancillary analysis, insurance reports and an adjustment report on a monthly basis. **(M)**
4. The AR system must have direct export capability for reports to preformatted Excel spreadsheets. **(M)**
5. The system must have a report generator to create specialized user defined reports using Crystal Reports. **(M)**

E. Miscellaneous
1. Invoice adjustments for reverse and rebill must be available by resident or by resident type. **(M)**
2. The software must provide complete financial audit trails. **(M)**
3. A review of accounts on-line must be available. This review must clearly identify if there are any special notes or adjustments attached to any invoice. **(M)**

4. Software must have capability to export AR summary data to the general ledger system in a CSV or comma delimited structure. **(M)**
5. After monthly processing, the software must transmit Medicaid/Medicare charges to a fiscal intermediary electronically, (via modem) according to the specifications. **(M)**
6. Invoice and adjustments notes must be available. **(M)**
7. Census summary must be available to be exported for creation of per patient day statistical reporting. **(M)**

F. Resident Trust Account Module
1. Software must include a fully functional trust program that is capable of calculating interest based on a minimum average balance; distributing the interest to eligible resident accounts; transferring funds between individual accounts; making deposits and withdrawals; printing receipts; printing statements monthly, quarterly, yearly or as requested; printing annual 1099 interest forms (for IRS reporting) and making adjustments. **(M)**
2. Software must print resident trust account statements individually or for total population within a specified time frame, ie. monthly, quarterly, annually or within user defined time frames. The statements must show detailed historical data. **(M)**
3. The software should be capable of entering, modifying, and deleting income and expense items. **(M)**
4. The system should allow a memo field to list temporary encumbrances or other information, which can be printed on a list of resident trust balance totals. **(M)**
5. The software must print receipts for each trust transaction with signature lines. Receipts must have automatic sequential numbering. Must print receipt at time of occurrence (no batch entry). **(M)**
6. The software must contain reports to reconcile cash, checks, and adjustments to assist in balancing the petty cash and bank reconciliation. **(M)**
7. The system must use real time to show account transactions and balances for both posted and unposted transactions. **(M)**
8. The software must be able to print State checks from the resident trust module. **(M)**
9. The software must be able to transfer funds directly from the Resident Trust module to open invoices for the resident. **(M)**

G. VA Per Diem Charges and Payments
1. The software must accommodate private insurance and third party payers. **(M)**
2. The system must have the ability to calculate multiple user defined charges based on census. For example:
   a. A veteran on any type of leave status other than a leave to a VA facility is entitled to a per diem offset if the leave is less than or equal to 96 hours (referred to as the 96 hour rule). The amount of the per diem for allowable bedhold days is the same as when residing in the facility. For leaves exceeding 96 hours, no VA per diem is received for the entire leave. The software should bill using these time restraints. **(M)**

H. Collections module
1. Software should include a module for maintaining a collections procedure for past due accounts. **(M)**
2. Collections notes should be available online. **(M)**
3. Various collections categories should be definable by the facility. **(M)**
4. Follow up tracking ticklers should be available for the collections process. **(M)**
5. Export collections information should be available to send to third party agencies. **(M)**

I. **Bill Fiscal Intermediary Electronically**

    1. Upon submitting an application to obtain eligibility on a resident's behalf, the West Virginia Veterans Nursing Facility calculates the interim charges for the resident as if Medicaid/Medicare has been approved. The system therefore must be capable of holding or locking claims from being submitted until Medicaid/Medicare certification is obtained. **(M)**

J. **Resident Scheduling.**

    1. Capability for scheduling residents' activities, tests and procedures is required. **(M)**
    2. Residents should be able to receive a printed calendar of their scheduled appointments by week or month. **(M)**
    3. Staff member assignments to the residents for scheduled activities should be available. **(M)**
    4. Schedules should be entered either by resident or by procedure/activity. **(M)**

K. **Email notification.**

    1. A method should be available to notify any designated person or distribution list of changes or new information entered to a resident's file. **(M)** For example:
       a. Nursing should get an email whenever an assessment is due
       b. When a new resident enters the facility, all appropriate staff and management should receive an email notification of the new resident with their room assignment and other pertinent information.
       c. Whenever a resident's private balance exceeds ninety days, the appropriate billing persons and management should be automatically notified.

L. **General Ledger**

    1. Accommodate multiple separate corporate entities (i.e. facilitates) within a single chart of accounts, allowing for optional consolidation at two or more levels. **(M)**
    2. Ability to view account numbers and descriptions when searching for an account, in drop down list format. **(M)**
    3. Integrate with the following applications: Accounts Payable, Accounts Receivable. **(M)**
    4. Accept the following types of journal entries: general, recurring auto-reversing, accrual and adjusting. **(M)**
    5. Allow viewing and printing of transaction detail for individual accounts or groups of accounts for any user defined time period. **(M)**
    6. Ability to download GL data to an Microsoft excel spreadsheet. **(M)**
    7. Allow flexible, user defined account numbering with at least 24 characters and eight segments. **(M)**
    8. Maintain an unlimited number of budgets. Edit multiple budgets and accounts simultaneously. **(M)**
    9. Automatically post an amount from a single-source account to multiple destination accounts. Calculate the amount to be posted to each of the destination accounts based on a percentage allocation, a quantity, or based on a value from another destination account. **(M)**
    10. Maintain up to 99 of years of transaction history and period summary history Post to an unlimited number of future fiscal years, or reopen a past year and specify the fiscal year to be used for printing general ledger reports. **(M)**
    11. Be able to run all financial reports for anytime period, including current. **(M)**
    12. Post Financial Reports on the system and allow secured access via on-line inquiry for Management, Administrators, & Department Heads. **(M)**
    13. Report on user-defined statistical data using reporting features, including census. **(M)**
    14. Create financial reports in any combination, which include: current month, actual, budgeted; Prior year, year to date and prior year to date. **(M)**
    15. Income Statements must be available for every cost center and numerous user-

defined cost center groupings. **(M)**

16. Provide ability to monitor database and send e-mail notifications to appropriate staff based on specific events i.e. account balance exceeds budgeted amount, G/L expense transaction exceeds specified amount. **(M)**

M. Accounts Payable

1. Be able to create multiple remittance addresses for a single vendor. **(M)**
2. Be able to combine 1099 and non-1099 payments to a vendor on a single check with appropriate descriptions. **(M)**
3. Automatic 1099 processing with ability to print on plain paper. **(M)**
4. Ability to ensure that each purchase order number and check number are system generated and only used once. **(M)**
5. The ability to process one time checks to miscellaneous vendors "on-the-fly" without having to set-up extensive vendor information. **(M)**
6. Must include ability to leverage Crystal Reports and the ability to create personalized settings. **(M)**
7. Ability to access the invoice history file for a detailed record of accounts payable, including detailed distribution of expense amounts to various GL accounts. **(M)**
8. Ability to automatically calculate due dates, discounts due dates and discount amounts, and expense invoices to any number of accounts. **(M)**
9. Provide ability to monitor database and send e-mail notifications to appropriate staff based on specific events i.e. invoice exceeds specified dollar amount or invoice is past 90 days due. **(M)**

NURSING

A. *SELF MAINTAINED SOFTWARE*

The software company must maintain a current ICD-9 library with at least yearly updates. **(M)**

B. FACE SHEET

1. Face sheet must be customized to the unique requirements of the West Virginia Veterans Nursing Facility and include a digital photo of the resident and a bar code symbol for the resident **(M)**

C. CENSUS

1. The software must calculate census on any day or period requested by simply by updating resident changes in the clinical/financial portion of the system. **(M)**
2. The software must be capable of bed history tracking including tracking multiple bed/room assignments on a single day by a single resident. **(M)**
3. Bed holds must be tracked for census reports at the end of the month. **(M)**
4. The system must have the capability of reporting specific billable days based upon pay source criteria. **(M)**

D. CARE PLANNING

1. The software must have a library function built into their care-planning module which provides a library of problems, goals, and approaches; a system that allows us to change these to meet our needs. **(M)**
2. The software must allow us to custom build care plan templates based on specific diseases, health conditions or issues. **(M)**
3. The software must allow for facility-defined problems, goals, and approaches appropriate for our residents and allow us to customize per individual resident. **(M)**

4. The software must maintain a history of resolved problems and interventions for each resident. **(M)**
5. The software must have query reporting capabilities that can group different care planning problems and interventions etc. **(M)**

E. FLOW SHEETS
1. The system must automatically prepare flow sheets for facility-defined disciplines based on the care planning goals and interventions. **(M)**
2. The system must allow the individual home to determine what approaches are necessary to be carried over to the flow sheets and which need to stay on a care plan or assignment sheet, etc. **(M)**
3. The system must have the capability of preparing assignment sheets for staff that outline care or specific tasks to individualized persons. This is particularly desirable in the future when we eventually go to a paperless record. **(M)**

F. MDS
1. The program must have a RUGS calculation in it for help in getting the most out of costs of care. **(M)**
2. The software must be able to schedule the MDS and track the assessments done, past due, due, etc. **(M)**
3. The software must be capable of electronically submitting MDS data. **(M)**
4. The software must be able to automatically schedule and report on all assessments due. **(M)**
5. Reports for the MDS should include the ability to query the MDS data for residents meeting certain conditions based on data answered on the MDS. **(M)**
6. The software should allow the user to compare the current MDS answers for a resident to any prior MDS for that resident and show the differences. **(M)**
7. 802/672 information and reports should be available and updated both from MDS data and user data. **(M)**

G. *CLINICAL DOCUMENTATION*
1. The system must have the capability to allow staff to do bedside assessing directly into a remote wireless notebook or slate computer, which can be incorporated at some point in the future. **(M)**
2. The system must allow input and use of facility-defined assessments. **(M)**
3. The system must allow Vital Signs monitoring with comparison of the past records, and alert the Quality Assurance nurses based on the parameters built into the system by each home. **(M)**
4. Wound/Skin documentation and tracking automatically built into the program with facility-defined parameters. History is kept of all wounds. At least twenty active wound sites must be tracked and past history of wounds must be carried forward to allow for weekly wound round monitoring Digital photos of wounds must be incorporated into the assessment. **(M)**
5. System must provide for online progress notes by discipline in a narrative format. Once a note is created, it cannot be modified. **(M)**
6. Industry standard assessments must be available online to include as a minimum:
    a. Skin assessment **(M)**
    b. Bowel and Bladder assessment **(M)**
    c. Elopement risk assessment **(M)**
    d. Wandering risk assessment **(M)**
    e. Mental assessment **(M)**
    f. Fall risk assessment **(M)**
    g. Wound care assessment **(M)**

      h. AIMS assessment **(M)**
      i. Smoking risk assessment **(M)**

H. PHYSICIAN ORDERS/DOCUMENTATION

1. The system must have a physician order capability where an order can be inputted one time and be carried over to all needed areas throughout the record. **(M)**
2. The system must have a report function for physician orders that would allow for monitoring of like drugs, like diagnosis, etc. for QA purposes. The report function must allow for a monthly review of records by the physician in a "recap" format. **(M)**
3. The system must have the capability of carrying orders over to the Medical Administration Records, Treatment Administration Records and as needed (PRN) Medication Records and any other facility-defined flow sheets for monthly monitoring. **(M)**
4. The system must maintain a history of all resolved orders. **(M)**
5. The system should monitor inputted orders based on parameters outlined by the facility and alert the needed party when these parameters are not met. **(M)**
6. The system must allow the facility to define a library of orders as outlined by our formulary list, be able to be broken down into categories based on drug types, drug interactions and side effects, practitioner, frequency, route, diagnosis, and origin and expiration date. A reporting function for these categories must also be available. **(M)**
7. The users must be able to define what orders go where with a choice feature for different types of records. **(M)**
8. There must be an "X" out function to X out boxes for unneeded days and an "apply on" feature that allows the facility to define when a drug is given or not given. **(M)**
9. System must possess ability to produce electronic MARs and TARs with a documentation requirement (circle) for any order past the designated delivery time parameters. **(M)**
10. System must be able to print bar coded wristbands for positive patient identification to help prevent medication errors. This must be tied into the eMAR and eTAR system for authentication prior to administration. **(M)**
11. MARs and TARs must produce printed output on both plain paper format and MEDPASS preprinted forms. Digital pictures of the resident must be on the printed format. For plain paper printing, system must be capable of producing a duplexed back page for documentation notes. **(M)**

I. INCIDENT/ACCIDENT FEATURE

1. The system must monitor/track all incidents inputted by the facility. It should have the capability of preparing monthly comparison reports and tracking records as outlined by the facility. **(M)**
2. Incidents should be tracked for both residents and visitors. **(M)**
3. Electronic sign off on incident tracking must be available **(M)**
4. Incident tracking must be able to include digital photos of incidents and incident sites **(M)**

J. REPORT FEATURE:

1. The system must be able to perform at least the reports indicated above as well as these listed below but not limit us to only these report mechanisms: Admit and Discharge, Birthday List, Census, Contacts, Diagnosis, Face Sheets, Bed Hold, Vital Signs, Wait List, Assessment, Therapy cap status, etc. **(M)**
2. Reports must be available for ad hoc reporting as well as extracts to Excel or Crystal Reports. **(M)**
3. Ability must be available for querying residents based on narrative documentation such as listing all residents which have had selected conditions or words placed within the electronic chart. **(M)**

4. The system must allow for the facility to define reports and have them built into the system by a report writer such as crystal reports. **(M)**

K. *Health Insurance Portability and Accountability Act (HIPAA)*

1. This software company must keep up on all regulations at the state and federal level. They must ensure that the system meets all HIPAA requirements. **(M)**
2. The system should generate a log file to audit whenever a record is added, changed or deleted and by whom. **(M)**
3. There must be built-in permissions where an Administrative user could define who in the facility has access to what part of a record and what components of the integrated system. **(M)**

L. Staff Scheduling.

1. Capability for staff scheduling as a separate module. **(M)**

M. Positive Patient Identification

1. A method for printing wristbands for the residents along with bar code information is required. **(M)**
2. Prior to administration of medications or treatments, a method to bar code scan the resident's wristband for identification is necessary which would automatically bring up the resident's medications or treatments due. **(M)**

N. Chart Printing

1. An easy method to reproduce the full electronic documentation chart as needed by resident and by start and end dates as needed. **(M)**

O. Electronic sign off

1. Capability to go paperless is required as a feature of the software. Where appropriate, electronic signatures must be available with proper security and audit trails. **(M)**
2. For clinically sensitive areas such as progress notes, MDS and assessments, a secondary authentication method is required such as biometric or PIN data. **(M)**

MILITARY INFORMATION

A. VA Per Diem Charges and Payments

1. The software should have the ability to create VA Per Diem charges. VA Per Diem refers to the daily amount paid to West Virginia Veterans Nursing Facility by the Federal VA for each veteran at the Homes. The system must be able to calculate, from the resident census, a bill to Federal VA for all allowable VA billable days subject to rules established at each facility. **(M)**
2. A veteran on leave to a VA Hospital will receive no VA Per Diem offset for any days spent at the VA facility. **(M)**
3. Software must auto-remit payments based on receipts from the VA form 10-5588. **(M)**
4. VA Per Diem payments, which are received monthly, are paid in a lump sum and are not patient specific. The system should therefore allow posting to a specified date range and not require individual posting to resident accounts. When payments do not match outstanding charges for the specified date range, the system must create an exception report. The exception report should include outstanding charges and/or cash remaining not posted. **(M)**

B. Veterans Specific Reports
1. Software must produce as a minimum:
   a. VA Application for Health Benefits **(M)**
   b. VA Health Benefits Renewal Form **(M)**
   c. Catastrophically Disabled Veteran Evaluation **(M)**
   d. Veterans Census 10-5588 report
   e. VSO reports **(M)**
   f. Purple Heart Recipients Report **(M)**
   g. POW Report **(M)**
   h. Services and honors reports **(M)**
   i. Wars and conflicts reports **(M)**

C. Military Demographic Data
1. Military history must be included, which shows the dates of service, rank, service number, priority group and eligibility. **(M)**
2. Military information must designate the wars and conflicts in which the prospect participated. **(M)**
3. Military information must designate if the prospect was a POW **(M)**
4. Military information must designate if the prospect was a Purple Heart recipient **(M)**
5. Military information must list all honors awarded **(M)**
6. Military information must list Veterans Service Organizations active with the prospect **(M)**

D. Resident Fee calculation and reporting
1. A unique resident fee is established based on an ability to pay formula taking into account the resident's income, assets and obligations. This formula must be programmed into the software and a history of the changes to the resident's financial obligations must be maintained. **(M)**
2. A letter must be generated on demand to the resident and/or responsible party explaining how the fee is calculated along with any changes from a prior period. **(M)**

ALL PROGRAMS

A. Installation, Training & Trial Period (All mandatory)
1. The vendor must provide "hands-on training" to ensure that staff can effectively and efficiently utilize the purchased software. The training will be held at the home's physical location. A training outline must be provided with the bidder's proposal. **(M)**

B. Technical Requirements
1. Network System: Software must operate on a Windows 2003 Server environment, Windows XP workstations and be Microsoft 2007 compatible. **(M)**
2. Software must support users on a minimum user workstation that is a Pentium 1 G with 256mb RAM. **(M)**
3. Software must support users in a client-server multi-user environment. **(M)**
4. Software problems must be resolved within one business day if they inhibit processing of billing, receiving or clinical information. If unable to resolve within one day, a time frame will need to be mutually agreed upon in writing. **(M)**
5. Billable enhancements that are unique to West Virginia Veterans Nursing Facility must be addressed in future software upgrades and versions within the quoted bid costs. **(M)**
6. The software must meet Federal (CMS/HIPAA) and State of West Virginia requirements and regulations for Medicaid and Medicare. **(M)** The following Website may assist you: http://cms.hhs.gov/medicare. **(M)**

7. The software company must be capable of maintaining the system with updates that meet all Health Insurance Portability and Accountability Act (HIPAA) and CMS regulations. **(M)**

8. The software must have the capability to assign multiple levels of security functions to insure confidentiality. **(M)**

9. The system must be integrated with all programs where data can be entered one time and then shared to all departments. The system must have the capability of interfacing with Microsoft Office programs. **(M)**

Integrated Clinical/Financial Software Package
Attachment B: Bid Form

Order Quantity	Software Functionality/Support Specifications	Unit Price	Extended Price
2	Basic cost of software package as described in Attachment A, *to include to* include a minimum of 120 hours of on-site training, shipping, handling and all other initial costs	$	$
2	Maintenance/licensing/warranty costs for first year of operational usage (to include software upgrades).	$	$
2	Maintenance/licensing/warranty costs for second year of operational usage (to include software upgrades).	$	$
2	Maintenance/licensing/warranty costs for third year of operational usage (to include software upgrades).	$	$
2	Maintenance/licensing/warranty costs for fourth year of operational usage (to include software upgrades).	$	$
2	Maintenance/licensing/warranty costs for fifth year of operational usage (to include software upgrades),	$	$
2	Rate for training after initial training/installation period (per what interval, i.e. hour, day, etc.). Please note, this information will not be used to award this bid, but will be a point of negotiation in any ensuing contract.	$	$
	Total Cost		$

Name: _____

Company Name: _____

Signature: _____

Date: _____

Payments will be made, based upon meeting project plan milestones (listed below), in percentage increments with final payment of 30%.

40% - Installation of software
40% - Completion of training
20% - Successful months billing and reporting cycle completed.
100%

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STATE OF WEST VIRGINIA
Purchasing Division

PURCHASING AFFIDAVIT

West Virginia Code §5A-3-10a states: No contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and the debt owned is an amount greater than one thousand dollars in the aggregate

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law; or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities. "Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

EXCEPTION: The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

LICENSING: Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, West Virginia Insurance Commission, or any other state agencies or political subdivision. Furthermore, the vendor must provide all necessary releases to obtain information to enable the Director or spending unit to verify that the vendor is licensed and in good standing with the above entities.

CONFIDENTIALITY: The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures and rules. Vendors should visit **www.state.wv.us/ admin/purchase/privacy** for the Notice of Agency Confidentiality Policies.

Under penalty of law for false swearing (West Virginia Code, §61-5-3), it is hereby certified that the vendor acknowledges the information in this said affidavit and are in compliance with the requirements as stated.

Vendor's Name: _____

Authorized Signature: _____ Date: _____

Purchasing Affidavit (Revised 04/15/07)