#	Question	Draft Answer
1	Is this an active RFP?	RFP 1003-24 is a new and active RFP. We will correct where it is posted on the RFP Website.
2	Can you also clarify if it replaces the RFP conducted in 2023 in light of your FQHC-LA application?	RFP 1008-23 Electronic Health Record Backup Plan – was not awarded as there was no need for a Backup Plan. RFP 1003-24 uses similar RFP formats and attachments but where RFP1008-23 was for the Behavioral Health System, RFP 1003-24 is focused on Primary Care. It also has specific requirements re FQHC experience and reporting.
3	Is this specifically for a medical E H R to support the FQHC "look-a-like" side of Community Healthcore? Or, will there be a need for Behavioral Health in this as well for Integrated Care?	It is an active RFP, specifically looking at Primary Care, Women's Health and Psychiatry functionality within an FQHC.
4	Would it be possible for you to send me copies of the RFP responses you received for RFP 1008-23 and, if you had gone through any evaluation work, any docs created for that process?	The Center did not go through any evaluation work so there were no docs created from 1008-23. The RFP responses are available under the Texas Open Information Act.
5	Whether companies from Outside USA can apply for this? (like, from India or Canada)	From the Technical Requirements: The Offeror shall host, maintain, and operate the solution within the United States of America. All systems and data must reside in the United States – Private data center preferred. Please describe you standard hosting options.
6	Whether we need to come over there for meetings?	The selected vendor would be expected to make some face to face visits as deemed by Community Healthcore within the initial implementation phase.
7	Can we perform the tasks (related to RFP) outside USA? (like, from India or Canada)	NO – The Offeror shall host, maintain, and operate the solution within the United States of America. All systems and data must reside in the United States – Private data center preferred. Please describe you standard hosting options.
8	Can we submit the proposals via email?	The RFP only provides for email proposals.
9	Are 3 FQHC clients in Texas a MUST have? As you know [our company] has a lot of clients in Texas and roughly 43 FQHCs nationwide, but none in Texas.	Due to the Texas specific requirements such as Texas Health Steps and Texas Vaccine for Children's programs, the requirement for three FQHC's in Texas must remain.

10	I notice a good bit of Behavioral functionality in this RFP in addition to Medical. Would the Behavioral needs of this system be in addition to what Credible is already doing?	This is specific to the behavioral health/psychiatry services offered by Core Health. These would be done in the new EHR and separate from State Contracted Local Mental Health Authority services.
11	90 day Implementation time frame seems a tough requirement, presumably for any vendor, can elaborate on what is driving that requirement and if that is accurate?	Offerors may submit longer time frames but our desire is to have the system in place in a shorter than longer implementation period. The implementation time frame will be one of the factors used in evaluating proposals. Please see Attachment A.III.G.2. Implementation Timeline and Resources Needed FQHC LA. Ultimately the Center is seeking best value.
12	You want to have a signed contract by 5/31/24 so you can show HRSA you're in contract with a vendor that can support an FQHC Look-Alike with reporting and compliance.	Yes, your assumptions are correct
13	Can you explain what your expectations are for implementation length?	We want to formally begin the implementation process on 6/3 with a hopeful "Go live" 90 days from that which would be 9/3/24.
14	Number of providers (MD/DO)=	two
15	Number of mid-levels (NP/PA) =	nine
16	Number of Behavioral Health practitioners (any credential) =	five (This is included in the NP/PA numbers)
17	Number of total system users who need hosting access and training (beyond what was listed above, which are all considered billing providers) =	40 to 75
18	# of Tax IDs =	one (TAX ID for CORE HEALTH SYSTEMS)
19	# of physical different locations that will be offering services =	five (5 Different Locations and each location has its own NPI)
20	List all services that will be offered at your FQHC (OB/GYN, dental, peds, etc.) =	OB/GYN, Psychiatry, Primary Care (Adults/Pedi), Medication Assisted Therapy
21	Will you be offering dental services?	Not at this time, maybe sometime in the future
22	If offering dental, list number of dentists and list number of dental hygienists =	N/A

23	Will you be needing revenue cycle management services for this new line of business? If so, elaborate on the extent of managed services you would want from Vendor.	Yes, if available please describe in your RFP response.
24	# of providers offering virtual visits =	Currently we have 11 Providers but, in the future, we plan on expanding to other Licensed Professional Staff (LPCs, LMFTs & LCSWs along with some Behavioral Health Consultants).
25	# of different fax lines =	five
26	Would you want patients to be able to self-schedule for all FQHC providers?	No however we would like the Patient to have to the option to request a Date and Time.
27	Preferred clearinghouse?	ClaimMD
28	Name of HIE you'd want connection to:	We currently do not have a specific HIE we want to connect to at this time, however, we need the system to have the capabilities to connect to a HIE system in the future.
29	Any data conversions need scoping? If so, what data elements do you want imported and from which legacy system?	YES. The legacy system is Credible Data to be pulled would be reasonable data elements as expected in an EHR migration.
30	List all interfaces you'd want set up between the new EHR platform (lab, HIE, imaging software, etc.) =	Quest Lab, Credible, Texas Vaccines For Children/ImmTrac2, etc.
31	Do you need to interface with a pharmacy system? If so, which one?	All elements as expected for a system as certified for meaningful use.
32	Do you want merchant payment processing scoped? This is the ability for patients to pay online and have card info stored.	Yes (Along with the capabilities of providing Client Statements)
33	Are you using an RCM service for your behavioral health line of business? If so, what company? Will you use the same for your FQHC?	Currently, NO we are not using an RCM Service. If Offeror has an RCM company that contracts for RCM Services please add it to your response.
34	Do you have grant funding to support or offset the purchase of this EHR/PM system that will support your FQHC line of business? If so, is there a hard deadline to use the funds?	No

35	Who is the selection committee comprised of? What are top 3 must-haves?	Selection committee is made up of IT, Clinical, Business staff. For top 3 must haves please refer to the system requirements.
36	After selection, there is a 90 day window to implement the system as I read in the terms of the RFP. Is there any wiggle room to this? Would any circumstance change this timeline?	See Response 11
37	Are the 11 providers noted above included in the 40 to 75 users?	Yes
38	Are there any acute beds or just ambulatory services?	Just Ambulatory services
39	For the demonstrations on May 9th and May 10th, how much time will be allocated for each vendor.	Up to 16 hours allowed for demonstrations. Time will be based upon the number of vendors selected to demo. We anticipated Offerors notification by COB Tuesday, May 7th.