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PROPOSAL CONDITIONS

GENERAL CONDITION

Eclipsys has responded to your proposal request with current information about our software and services. Please understand that this proposal response is not an offer, commitment, or contract. Eclipsys will only be bound by a separate, definitive, duly executed and delivered written agreement. Due to possible changes in business direction or for any other reason or no reason, Eclipsys may (at any time, without penalty or obligation) update, otherwise modify, or withdraw this proposal response, or choose not to engage in or withdraw from any associated negotiations.

DEMONSTRATIONS STATEMENT

Eclipsys looks forward to demonstrating the comprehensive functionality, features, tools, and workflow support of our solutions. In order to fully and fairly display these benefits, we reserve the right to demonstrate Eclipsys' scripted scenarios, as well as scripts of your creation, and to determine a mutually-agreeable schedule.

CONFIDENTIALITY STATEMENT

CAREFULLY READ THE FOLLOWING BEFORE OPENING OR DISTRIBUTING THIS CONFIDENTIAL RFP RESPONSE OR ANY ASSOCIATED DOCUMENTATION OR INFORMATION PROVIDED BY ECLIPSYS (COLLECTIVELY, "ECLIPSYS MATERIALS"). OPENING OR DISTRIBUTING ALL OR A PORTION OF THE ECLIPSYS MATERIALS CONSTITUTES YOUR AND YOUR ORGANIZATION'S AGREEMENT TO THESE TERMS. The Eclipsys Materials contain valuable, confidential information of Eclipsys and/or its vendors and trade secrets that are protected by law. You and your organization must keep all Eclipsys Materials in strict confidence and may not use the Eclipsys Materials for any purpose other than review and evaluation of our RFP response. You may share Eclipsys Materials only with your employees and counsel who have direct involvement in your organization's internal review and evaluation of our RFP response. You must instruct persons with whom you share Eclipsys Materials to keep the Eclipsys Materials confidential, not to share them with any third party, and to use them only for review and evaluation of our RFP response. You are responsible for any violation of these restrictions by any person with whom you share the Eclipsys Materials. These restrictions do not apply to Eclipsys Materials that have entered the public domain.

PLANNED DEVELOPMENT

Eclipsys Practice Solutions prioritizes development of PeakPractice. Each planned enhancement is placed on a roadmap for development and an estimated timeline is stated. These timelines can and sometimes do shift to accommodate other necessary development with shorter deadlines.

In responding to the California Behavioral Health Electronic Health Record (CA BH-EHR) Request for Information, responses marked as "planned" have been placed on the roadmap for PeakPractice. However, they may or may not be completed within the next 12 months.

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D. COMPANY BACKGROUND

RR-D-01 Please provide the following information regarding the makeup of your company.

Corporate Information	
Company Name	Eclipsys Corporation
Company Type (C-Corp, S-Corp, LLC, LLP, Sole Proprietorship, Etc.)	C-Corp
Location of Corporate Headquarters	Atlanta, GA
Location of Field Support Offices	West Des Moines, Iowa
Location of Programming/Technical Support Personnel	West Des Moines, Iowa
Primary Contact Information for this RFI	
Name	Nick Roerig
Title	Sales Executive
Office/Location Address	1025 Ashworth Road Suite 222 West Des Moines, IA 50265
Phone Number	877-633-6683 x 323
Email Address	Nick.roerig@eclipsys.com
Internet Home Page	www.medinotes.com

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RR-D-02 Provide an overview of your firm and its history. Describe the strength of your firm and its ability to meet the needs of California's behavioral health recipients and providers. (2 pages maximum).

Eclipsys Practice Solutions is pleased to provide a proposal to help California Behavioral Health meet their current and future technology goals. We feel that our technology, experience, and superior customer service will meet and exceed your goals of increased consumer and family empowerment, and to modernize and transform clinical and administrative information systems. Our solution currently contains features that you may wish to deploy now or in the future, like; Patient Portal, Kiosk, Referring Physician Portal, Continuity of Care Records/Documents, and our patent-pending integrated supply chain management software, Eclipsys PeakPractice SC.

Eclipsys PeakPractice EHR/PM was designed, developed, and implemented to compliment the way physicians and their staff practice medicine. PeakPractice is currently CCHIT 2006 Certified and the CCHIT 2008 certification application has been submitted.

From the beginning, Eclipsys Practice Solutions realized that streamlining workflow, through shared, real-time information, as well as easy access to a rich foundation of clinical databases and content was what the industry wanted. Successful systems create a standardized and simplified process, and in turn, result in increased efficiency in every aspect of daily operations. For example, connectivity to reference labs, like Quest and LabCorp, offers efficient ordering and results management; electronic prescribing to pharmacies provide for fast and accurate medication management and dictations can be digitally stored and routed and signed using our IntelliFlow routing engine.

Eclipsys PeakPractice™ EHR/PM is built using N-tiered architecture and SQL as a database. By choosing this development platform and design, Eclipsys PeakPractice™ EHR was architected to be horizontally expandable. Specifically, the system was designed for use in a multi-provider, multi-specialty, and multi-location environment. The high-level of intuitive customization at the user-level allows for endless options, allowing the physicians and their staff to mold the product into a workflow solution that works the way they do for all specialties and situations. Whether there is one provider or thousands, the technology allows for clustering, load balancing, and most importantly, the ability to grow.

Our clinical decision support features were built using best-of-breed clinical components from industry leading companies. Through strong partnerships with Thomson MICROMEDEX® and UnicorMed, Eclipsys PeakPractice™ EHR/PM offers state-of-the-art clinical and financial decision making support, respectively. Additionally, relationships with organizations such as Instant Medical Objects, Dragon Naturally Speaking, Symantec, Thawte, Primetime Medical Software, Ensure Technologies, WebMD, Welch Allyn, and MidMark bring the best technologies together in one affordable solution.

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We are unique in that we offer an industry-leading and architecturally "clean" suite that can be implemented separately or completely. The Enterprise Suite version includes: Patient, Physician, and Employer Portals, Kiosk, Document Imaging/Management, Supply Chain Management, iWatch Desktop Control and Video, and much more. By building a turnkey solution from the ground up, features and functionality within the Patient Portal and other features are an actual part of the software, as opposed to an "artificial limb," or add-on/third-party solution. Like the physician's portion of the software, the patient portal is customizable, intuitive, and intelligent. Patients have the ability to update demographic information, schedule/request appointments, enter daily logs, request referrals and Rx refills, research the library of Thomson MICROMEDEX patient information (English and Spanish), complete a computerized patient "interview," and even pay their bill online.

Moreover, outside providers and employers have their own portals providing a powerful and easy way to communicate with referring physicians and employers up to date. Any portion of a patient's chart can be sent with only a few clicks in the latest Continuity of Care Record (CCR/CCD) format.

Clinical staff will appreciate the ease of use when documenting patient encounters. Our templates are easy to build and can modified on the fly if needed. They incorporate the ability to directly handle dictation, macros, free-text entry, voice recognition and imaging with annotation as well as the ability to create a referral or make a referral right within the encounter without going outside the actual note. Moreover, using our IntelliHistory patient interviews, which contain nearly 60,000 questions - based on chief complaint, collects the patients' subjective data at check-in or via the patient portal, can be directly added into the note saving valuable time in recording patient subjective reports.

In summary, you will find that Eclipsys PeakPractice Suite will meet the current and future needs for California Behavioral Health and allow your organization to grow and manage the healthcare services efficiently and with a level of collaboration that will encourage staff to deliver and seek care in a manner that is easy and secure.

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RR-D-03 List the number of employees (full-time equivalents) in your organization by category for the last 3 years.

Category	2006	2007	2008
Total Employees	2219	2445	2840
Installation/Setup	451	459	510
Research and Development	384	556	734
Application/Technology Support	172	214	286
Customer Service / Helpdesk	*See Application/Technology Support*	*See Application/Technology Support*	*See Application/Technology Support*
Support	*See Application/Technology Support*	*See Application/Technology Support*	*See Application/Technology Support*
Other	1212	1216	1310
Those with Clinical Backgrounds:	*Eclipsys currently has over 700 employees with various clinical certifications and over 300 employees with various technical certifications. We do not provide the level of detail requested below*		
- Physicians	N/A	N/A	N/A
- Psychologists	N/A	N/A	N/A
- Psychiatrists	N/A	N/A	N/A
- Registered Nurses	N/A	N/A	N/A
- Other Clinicians	N/A	N/A	N/A

RR-D-04 Has your company acquired or merged with any other organizations in the past three years? If so please list each organization and the purpose behind such activity.

Eclipsys Corporation acquired MediNotes Corporation in October, 2008. The purpose behind the acquisition was to expand the product offerings to Eclipsys Corporation clients and future business opportunities.

RR-D-05 How long has your company been in the business of developing and implementing your Electronic Health Record related products?

Eclipsys Practice Solutions, formerly MediNotes Corporation, has been active in the EHR product market since 1996. Eclipsys Corporation was established and has been in the business of developing and implementing EHR related products since 1996.

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RR-D-06 What were your firm's annual revenues for the last 3 fiscal years?

Category	2005	2006	2007
$1,000,000 - $5,000,000	N/A	N/A	N/A
$5,000,000 - $25,000,000	N/A	N/A	N/A
$25,000,000 - $100,000,000	N/A	N/A	N/A
Greater than $100,000,000	$383,271,000	$427,613,000	$477,500,000

RR-D-07 What percentage of your firm's annual revenues directly resulted from behavioral health care solutions during the past 3 fiscal years?

Our total annual revenue is provided below. Revenue is not broken out by the areas you requested.

Category	2005	2006	2007
Percentage of annual revenue resulting from BH solutions	$383,271,000	$427,613,000	$477,500,000

RR-D-08 What percentage of annual revenue did your company expend for research and development (R&D) on your proposed products during the last 3 fiscal years?

Category	2005	2006	2007
Percentage of annual revenue expended on R&D	13.5%	13.5%	11.9%

RR-D-09 What percentage is budgeted for R&D in the current and next fiscal year?

Category	2008	2009
Percentage of annual revenue budgeted for R&D	13%	13%

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E. PARTNER AND/OR RESELLER REFERENCES

RR-E-01 Please list any partners and/or resellers in the areas of behavioral health: Strategic or tactical development, sales, support, delivery, consulting, or training.

Eclipsys Practice Solutions resellers do not specify a specific discipline in which to specialize.

RR-E-02 For each partner or reseller listed above, please identify the following**:** (3 pages maximum)

1. Functional areas.
2. Nature of partnership/relationship.
3. Length of the relationship.
4. Referencable customers for whom you have jointly provided services.

N/A

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F. BEHAVIORAL HEALTH SOLUTIONS EXPERIENCE

Descriptions of the Functional Requirement Categories referenced in questions RR-F-01 through RR-F-05 of this section are in The Preface (Section A). In your responses to the questions in this section, emphasize your experience in the State of California.

RR-F-01 Describe your firm's experience and qualifications in design, development, and implementation of Behavioral Health Practice Management systems. (5 pages maximum)

PeakPractice uses ENS as a claims clearinghouse. PeakPractice sends 837P (HCFA) and 837I(UB) claims to ENS and receives status information back regarding acceptance or rejection. Claims status transactions (276/277) are sent to ENS to retrieve claim status to provide a "Send and Forget" functionality and confidence in claims transmission.

Through the integrated Practice Management component within PeakPractice, payments can be entered in batches (e.g. insurance payments or payments from the mail) or one at a time (patient co-payments).

DIAGNOSTIC/PROCEDURE CODING

For the assessment and diagnosis, the user has a database of more than one million descriptions to describe the patient's problem. Instead of being required to use the billing terminology to document patient's problems or being limited to terms typed into the application by staff, PeakPractice provides a database of descriptions and their current ICD linkage. This database is updated monthly.

PeakPractice includes support for ICD-9, CPT 4, HCPCS, SNOMED CT and NDC codes.

SCHEDULING

Eclipsys PeakPractice offers a user customizable calendar with capabilities to schedule not only medical professionals, but resources (equipment, rooms, etc) as well.

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Capture Appointments
Appointment | Referrals
Demographic Information — Primary Chart # — Verify Insurance
Name: Title ---Select- Last* First Middle Suffix ---Select- Search Clear
Appointment Information
Chief Complaint* | Reason* ----Select---- | Priority* Low | Notes
Appointment Date* 04/15/2008 | Location Name* Admin Location | Service Location* Main Office | Insurance ---Select---
Required Providers/Staff/Resources
Simultaneous — Minimum Waiting Time: 5 Mins — Maximum Waiting Time: 30 Mins — Search Available
Provider — New

Specialty	Provider Name	Date	Day	Start Time	End Time	Duration	Status	Seq	Avail	Del
General Practice	Hills, Ronna	04/15/2008	Tue	09 : 00 AM	10 : 00 AM	60 mins	UnConfirmed	1		X

Staff — New
Resource — New
Referral or Authorization Required — Save — Cancel

Figure 1: Capture Appointment Dialog

All appointments, even those requiring additional resources such as equipment, procedure rooms or specific providers or staff may be scheduled through the Capture Appointment dialog. When the appointment is saved, it blocks out time not only on the practice's main calendar, but also on the calendars of the provider and the staff/resources indicated.

Appointments may be scheduled not only by practice staff, but by patients as well. Based on practice preferences, patients may both request an appointment or search and book an appointment through the Patient Portal. Users can control whether patients may book their own appointments, how many of such appointments are allowed per day and what information is required to verify an appointment time.

RR-F-02 Describe your firm's experience and qualifications in design, development, and implementation of Behavioral Health Clinical Data Management systems. (5 pages maximum)

DISEASE CARE REVIEW (DCR)

IntelliFlow, the rules-based engine of PeakPractice that sends out tasks, alerts and messages may be configured to send out any number of automated notifications. Some of the most common tasks and alerts that clients use are: medication refill tasks, lab results, clinician orders, return to clinic reminders, Disease Care Review (DCR), patient portal appointment notifications, kiosk pending review notification and appointment. This functionality is extremely

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customizable to allow clients to determine when they want to be alerted and who should get the information.

DCRs are user customizable based on their standard of care and can be set up for any variety of issues. When activated based on the DCR's parameters and trigger points, IntelliFlow routing engine then routes tasks and alerts based on client defined parameters.

Disease Care Review

Triggers — DCR Template Name: Epilepsy in Pregnancy

Diagnosis Trigger
Code (ICD) From 649.4 To 649.44

Demographic Trigger
Min Age Years 16 Months 0 Days 0 Max Age Years 50 Months 0 Days 0 Gender Female

Medication Trigger
Medication Dilantin-125,Phenytoi Medication Therapeutic Class Immunization

Lab Trigger
Lab Order Result Range Max Min Lab Result Type ---Select---

History Trigger
SHx PSHx 0 Day(s)
FHx PMHx 0 Day(s)

Vitals Trigger
Vitals BP (BP- Systolic) Value Min Max Add
(BP- Diastolic) Value Min Max

Add Check Points

Doc Type	Message	Check Point Details	Repeat Freq.	Repeat For

Save Template Cancel

Figure 2: DCR Dialog

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PROTOCOLS

The most common method of documenting the assessment and plan is through **Protocols**. Based on clinical findings and patient history, a protocol suggests options, consisting of possible diagnoses, medications, lab orders, other clinical orders, consent forms, patient education and instructions on when to return to the clinic. Provided in a pick-list format, protocols provide guidance and a fast entry documentation method. Charges are created automatically where needed. If the user is unsure of what the problem and treatment might be, there is an option called “Ask Clinician” where they are guided through a tree of questions to arrive at the proper protocol. Individual protocols can be built to include a wide variety of data, thus providing a guideline for consistency clinic-wide.

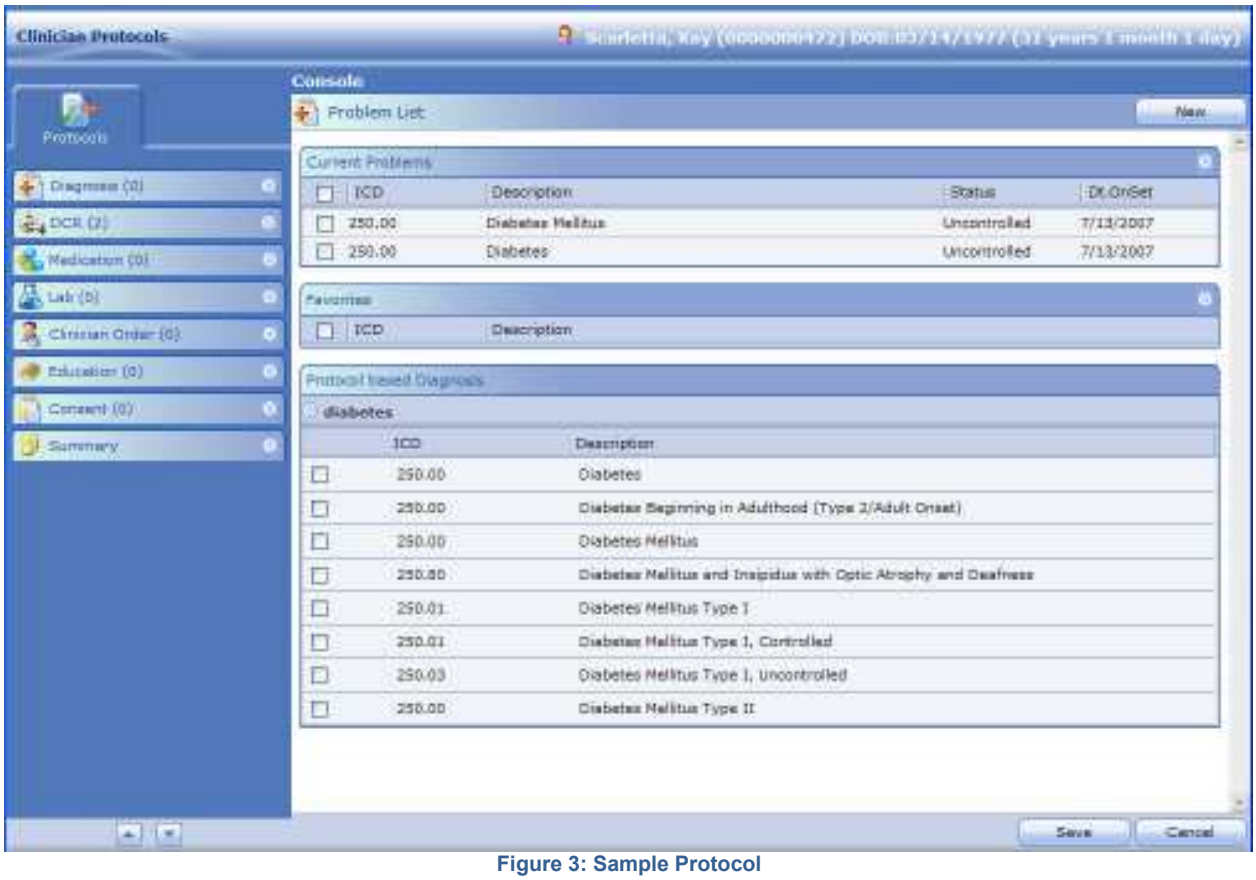

Figure 3: Sample Protocol

Any orders are sent to the user who is assigned to complete them (when they are to be performed on location) and lab orders/prescriptions are sent electronically. Patient education material specific to chief complaint can be printed, displayed on the screen and sent to the patient portal. Any needed consent forms can be signed electronically on a signature capture device.

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RR-F-03 Describe your firm's experience and qualifications in design, development, and implementation of Computerized Provider Order Entry (CPOE) systems. (5 pages maximum)

LAB RESULTS

Electronic lab interfaces have been developed with Lab Corp and Quest. Many of the lab systems through WebMD also have an interface available. Eclipsys Practice Solutions willingly works with third party vendors to develop custom interfaces when necessary.

Based on preferences stated during administrative setup, results can be sent to the providers task list for review. In addition, they can be tasked to another other practice member or group of members to be completed. Manually entered lab results will be reviewed by the system and the appropriate provider will be alerted if values fall outside of set normal limits. A lab result form can also be scanned into the system and saved with the patient's chart to verify accuracy at a later date if necessary.

Outbound lab order requests are sent from the PeakPractice server to the EDI server over an encrypted HTTPS connection. From the EDI server, requests are sent to the appropriate lab through a variety of methods depending on the lab vendor, including: TCP/IP over a VPN (Emdeon/WebMD Clinician), secure web services (Quest Hub), FTPS or SFTP encrypted file transfer (Fletcher-Flora/LabPak).

Once results are received from the lab the designated provider or role (i.e. nurse) would receive a task to review the results. Additionally, if the lab results are abnormal the lab results task rule could designate that the results go directly to the assigned provider. If the results are not reviewed after a pre-defined number of days, the designated user would receive an additional alert about the expired and results that have yet to be reviewed. Lab result letters can be generated and emailed (secure email invitation to the patient portal) or mailed.

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PRESCRIBING

PeakPractice uses SureScripts as an ePrescribing vendor. The user can send new prescriptions, receive and respond to refill requests. Pharmacies listed through SureScripts are loaded into the application automatically. Users can specify a favorite list of pharmacies based on their location. A preferred pharmacy may also be stored in the patient record for future use.

The drug database includes homeopathic and over-the-counter drugs. Automatic checks against a patient's formularies provide alternatives to non-formulary drugs when available. Drug calculators, contact info for thousands of pharmacies and extensive patient and clinical information for medications are also included.

With RxHub, the user can also verify prescription benefit eligibility, access formulary information that is displayed when writing and refilling prescriptions and view the patient's medication history.

PeakPractice has a truly robust e-Rx and drug management system. In addition to SureScripts and RxHub certifications, we also include drug databases from industry-leading Thomson MICROMEDEX. This inclusion offers PeakPractice users 14 levels of drug interaction checking, including drug-drug, allergy, lactation, food, disease, tobacco and more. Warnings, interactions, and possible dosage inaccuracies are visibly marked with either a red (warning) or green (ok) alert. This database is updated at least monthly (sometimes more frequently if unsafe medications are pulled off the market). Updates are pushed out to all of our clients to ensure they have the most up-to-date drug information available.

Customizable favorite lists allow either a provider or an organization to easily access a list of their top prescribed medications. Medications can also be searched by therapeutic class or name and can be further filtered by generic, brand or both. Tabs across the top of the medications screen allow for quick entry of current medications, medication history, refills, allergies and a copy of the problem list. A new prescription can be ordered electronically, printed to paper or faxed to the pharmacy, depending on the drug class and patient needs.

When prescribing medications, a series of information buttons are available to give the user more information about the drug itself, warnings associated with it, interactions, etc.

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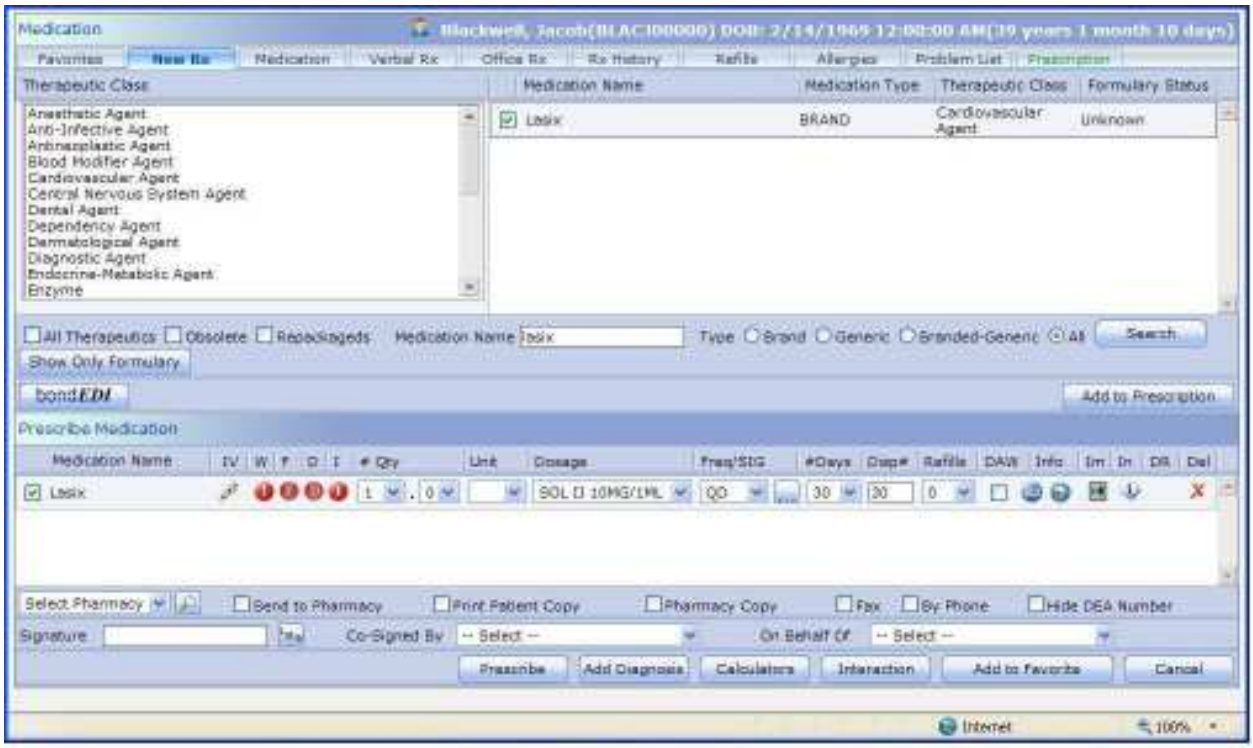

Figure 4: Prescription Dialog

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RR-F-04 Describe your firm's experience and qualifications in design, development, and implementation of interoperable Electronic Health Record (EHR) systems. (5 pages maximum)

CUSTOMIZATION

Customization is available in nearly every aspect of PeakPractice including the CentCom and Patient Chart screens. CentCom, or Central Command, shows a view of the practice overall. The Summary View Boxes (SVBs) can be listed in preferred order to facilitate appropriate workflow. Preferred order is set by user; each individual can customize their CentCom based on the information they need at a glance.

Figure 5: CentCom

As is the case with CentCom and other display areas, the Patient Master Chart can also be arranged to display user preferred SVBs.

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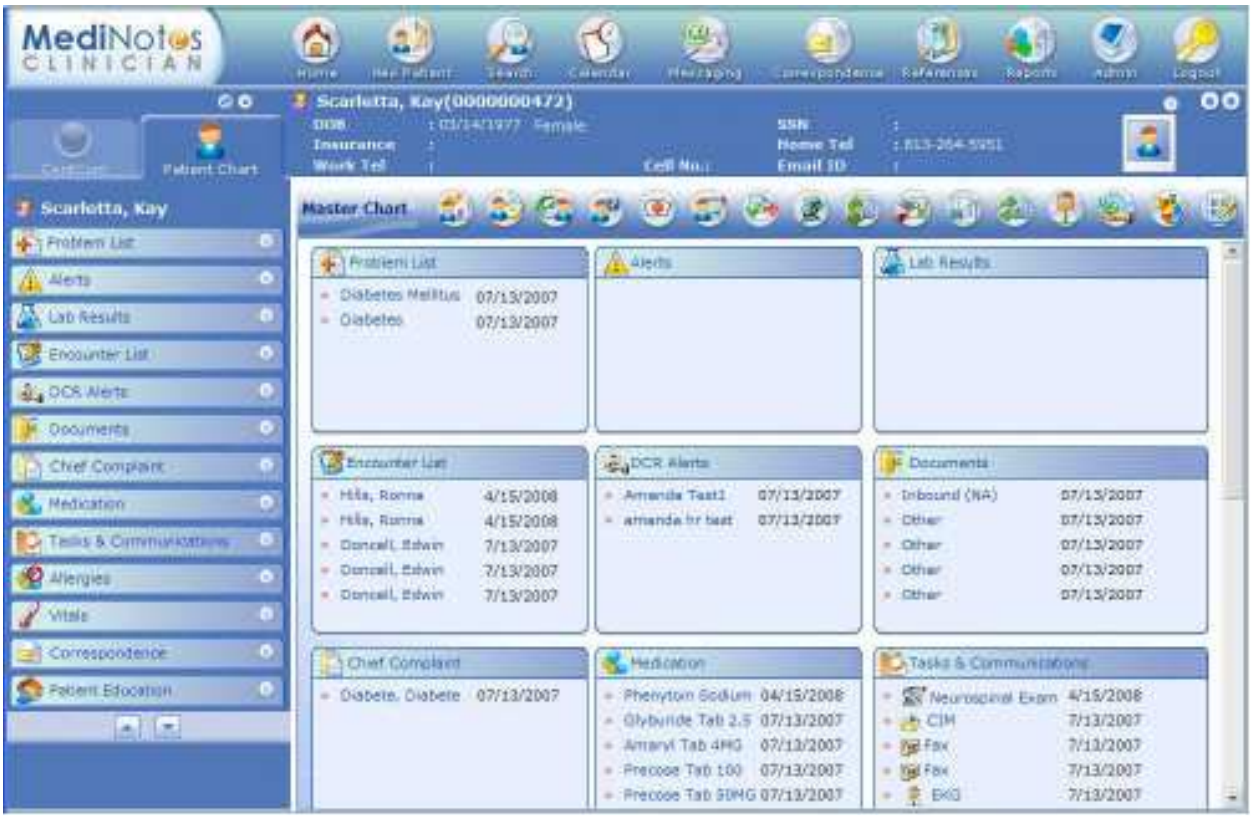

Figure 6: Patient Master Chart

Customization of the program is conducted through the course of training of the program. The number of training hours necessary will vary depending on number of potential users to be trained, those user's roles (physician, nurse, front desk staff, etc) and the timeline for 'Go Live".

Eclipsys Practice Solutions recommends each practice designate at least one "Super User". The Super User is trained on all levels of the program and essentially becomes the go-to person for the rest of the staff when questions arise. The Super User is also often the customizing expert, creating Units, templates, reports, etc for other users in the practice. In addition, the Super User can offer guidance when other users wish to create their own templates, reports, etc.

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CORRESPONDENCE

Through the system's Correspondence module, any number of templates can be created. Forms created in word processing and saved as PDFs with interactive fields can be input into the system and then mapped to database fields for user, location and patient specific auto-fill. Other documents can easily be created within the system by using cut/copy/paste functionality.

After a template has been populated with personalized information, it can be sent to the PrintQ for printing or faxing. It can also be sent to the patient or physician portal for secure retrieval.

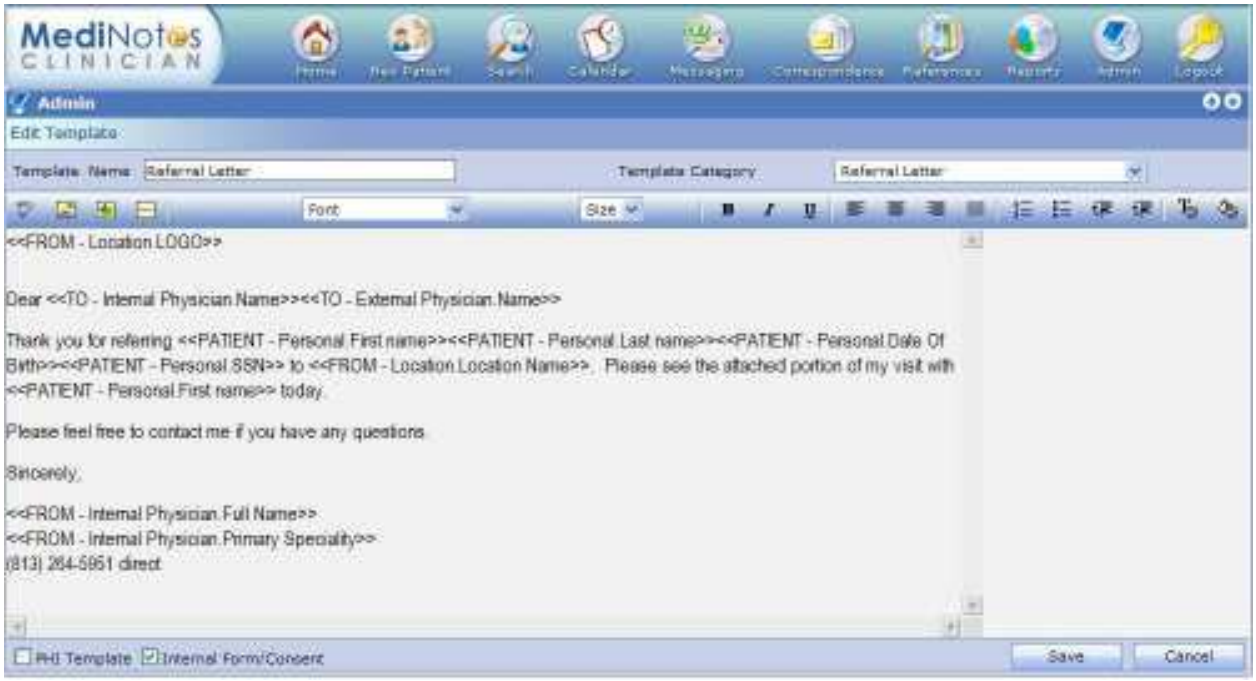

Figure 7: Correspondence Template

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PROGRESS NOTES

Templates, used to document patient encounters, are comprised of smaller pieces called Units. Units can be customized by the administrator to have default values. Wording can be customized to read exactly as the clinic desires. Additionally, with permission, the provider can add or edit these descriptions on-the-fly.

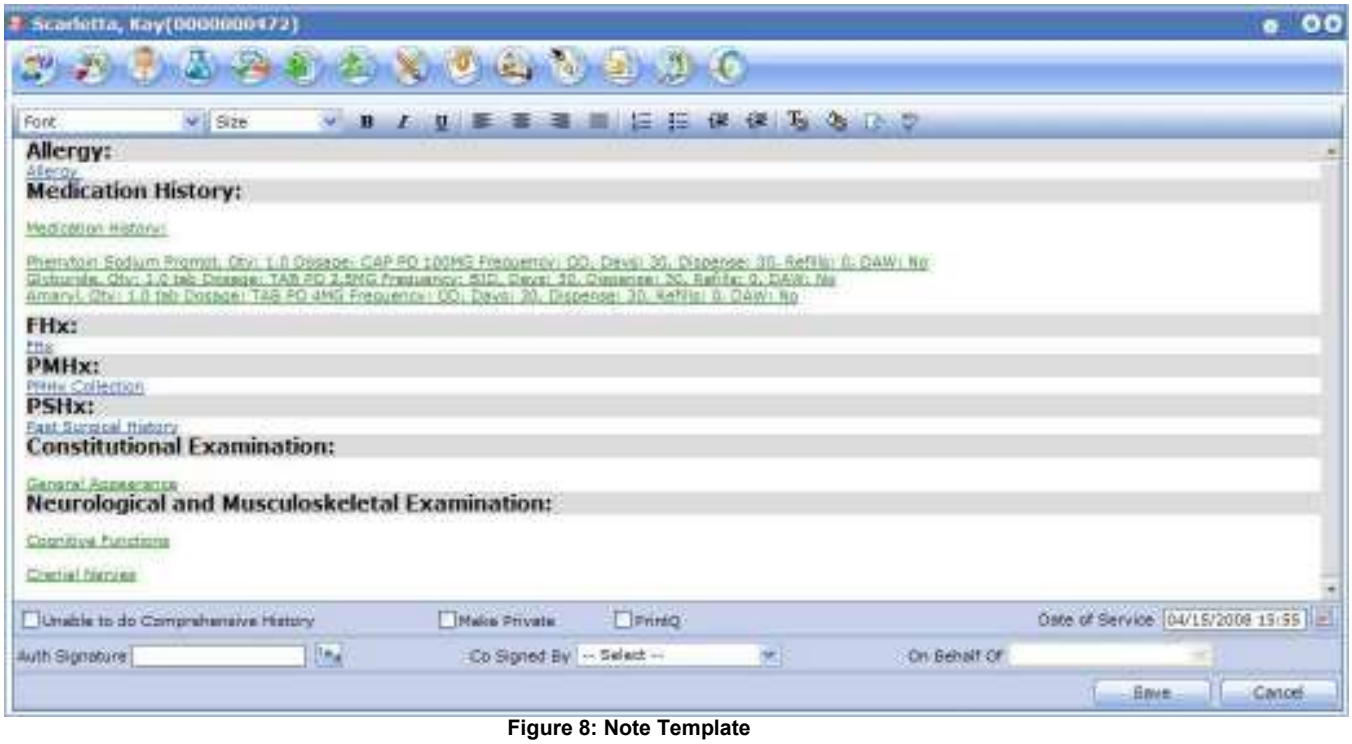

Figure 8: Note Template

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During the workflow of the patient visit specific exams will appear by default based on the patient's complaints, but additional exams can easily if needed. Exam findings can be documented using checkboxes, radio buttons, text boxes, measurement slider bars, numeric values and other easy to use data entry points. The user can draw on images, as well as include text, highlighting, and other markings to clearly document exam findings. If preferred, the user can also choose to use Dragon Naturally Speaking to enter text by voice recognition or they can record a voice file and save it as part of the note. The same user can then either finish their documentation using the recording or a transcriptionist or other user can transcribe the file.

A provider's signature may be captured through a signature pad. This graphic can be stored within the provider's administrative account, where, a 4-digit PIN number is also set up. This PIN is required to digitally sign progress notes, prescriptions, etc.

RR-F-05 Describe your firm's experience and qualifications in design, development, and implementation of Personal Health Record (PHR) systems. (5 pages maximum)

Any portion of a patient's chart can be sent with only a few clicks in the latest Continuity of Care Document (CCR/CCD) format. Continued development of PHR specifications will occur as standards are finalized.

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PATIENT PORTAL

The **Patient Portal** provides the ability for a new patient to do their complete registration online through a secure connection. This registration process enables the patient to complete demographics, medical history, immunization history and any practice-defined information, as well as electronically signing forms and consents. Existing patients can view, edit, print, and request information through the portal.

The functionality available on the portal is controlled by the client so they can expose as much or as little of the functionality desired. Some of the functionality included in the portal includes demographic editing, viewing and printing patient education, sending and receiving messages and other correspondence, medication refill requests, viewing history, viewing diagnoses, requesting or booking appointments, daily logs to record things such as blood pressure and glucose values, viewing statements and requesting referrals.

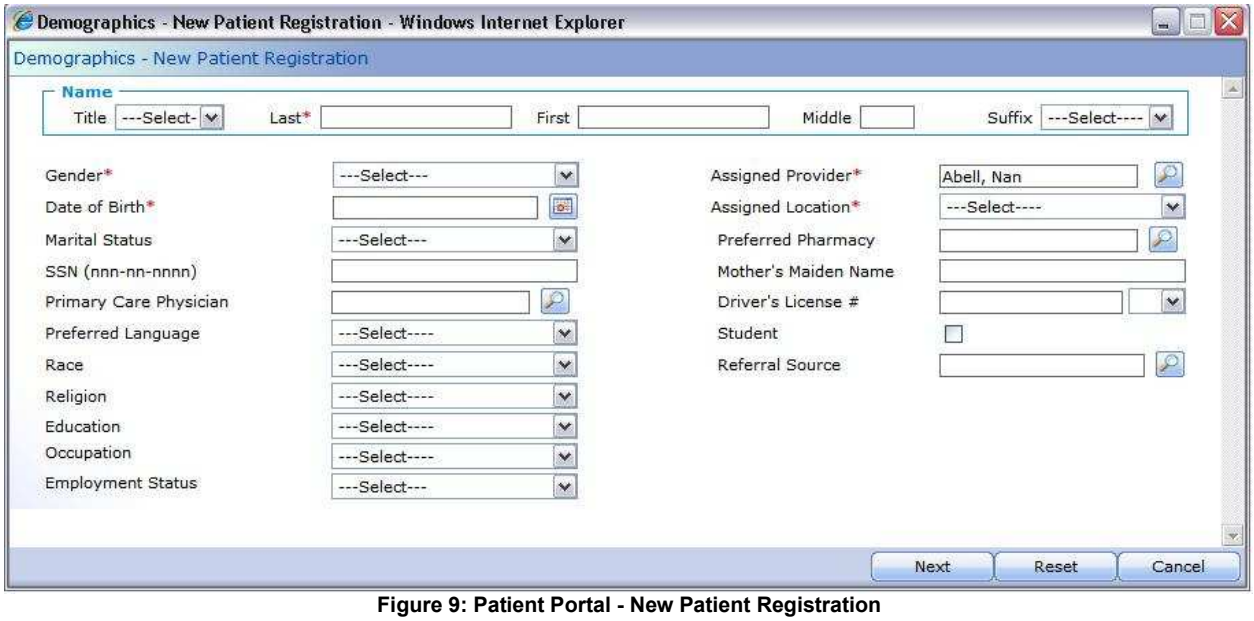

Figure 9: Patient Portal - New Patient Registration

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RR-F-06 Describe your firm's experience and qualifications for Systems Integration. (3 pages maximum)

Eclipsys Practice Solutions works regularly with third party vendors to develop interfaces between products. Interface costs vary greatly depending on the complexity of the interface itself. If integration is desired, our Development team would work with the desired vendor to identify if an interface was feasible and what resources from both companies would be needed. If needed, a quote would then be presented to the client for approval before any work began.

PeakPractice is a complete EHR/PM suite, therefore, any third party applications required to be fully functional have been integrated into the software. With the exception of custom built or lab interfaces to specific, the software should function fully out-of-the-box.

Portable Device Interfaces: Serial Midmark EKG, Welch-Allyn Vitals Spot, ePad Signature Capture Device, MedicScan OCR Card Scanning USB device

RR-F-07 Describe your firm's experience and approach to the conversion of electronic behavioral health data. (1 page maximum)

Conversion of demographic data is completed during the early stages of implementation. Eclipsys Practice Solutions implementation specialists do not normally assist clients in the scanning and paper chart retiring process, however, training is completed during implementation to ready the appropriate staff for such a project.

Eclipsys Practice Solutions has converted data from hundreds of systems. We recognize that most clients have data in some format that they would like to preserve when implementing one of our applications.

Frequently we are able to obtain data in a format that is useable. Most systems have some capability to export data into a comma separated or an excel format. We have created an import utility that allows for formatted data to be directly written to the correct fields within the PeakPractice SQL Database.

The normal approach is to preserve patient demographics and is thus a straight forward data conversion. More complex data conversions are available and will require client and PeakPractice developers to outline which data is to be converted and what time frame will be utilized.

Traditional data conversions involve a "sample" phase. This phase takes a small portion of the source data, converts it and loads it into a test database for PeakPractice. This site is then access for accuracy by the client. If this stage is successful, then the "final" phase is planned. The "final" phase will convert all of the data closest to the expected period of "go-live" date. Using the sample and final stage data conversion approach allows for the smallest gap between information being entered into the source system and it being made available in a live PeakPractice installation.

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RR-F-08 Describe your firm's experience and approach to the conversion of paper-based behavioral health data. (1 page maximum)

PeakPractice includes an image management module which allows for the routing and categorization of files. Eclipsys Practice Solutions recommends scanning all paper-based behavioral health data and then routing those scanned files to the appropriate category in a patient's master chart. During implementation, this issue will be addressed by our Implementation team.

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G. SOLUTION PRODUCT HISTORY

RR-G-01 Please provide the following information about the solution product(s) that you propose.

#	Product Name and Primary Function	When First Deployed	Where First Deployed	Number of Installations To Date
1	PeakPractice EHR/PM Enterprise Suite	11/1/2004	Florida private practice	100+

RR-G-02 For each solution product listed in the above table, please provide:

1. The history of the product including whether the product was internally developed or acquired from another source.

PeakPractice EHR/PM/SC suite was developed internally utilizing a single database for real-time data access from all modules.

2. The specific Industry standards that the product was designed to, including any exceptions to those standards.

PeakPractice was designed to comply with HL7 and CCHIT industry standards.

3. Whether the product is CCHIT certified.

PeakPractice is CCHIT Certified Ambulatory 2006. Application for 2008 CCHIT Ambulatory Certification has been submitted and Eclipsys Practice Solutions is awaiting assignment of testing dates.

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RR-G-03 How are enhancement and new release priorities determined?

Many items in the application can be customized without requiring assistance from Eclipsys. Client enhancement requests typically make up about 33% of each release averaged over a year.

When requests are submitted, they are entered into the issue tracking system and prioritized for the Development Roadmap. The balance of the Roadmap is 33% Existing Product Refinement (improving what we have) and 33% Strategic/Technology development.

RR-G-04 How are clients supported during the release of an enhancement?

Eclipsys Practice Solutions contacts clients to attempt to find a mutually convenient time to perform any upgrades.

RR-G-05 Describe the size of the installed base of your solution. Include the number of users and the number of sites where the product is installed.

PeakPractice is installed at over 100 locations and includes 300+ users.

RR-G-06 Describe any regularly-held seminars or user group meetings available to users of your product and the time/place of the next gathering.

Eclipsys Corporation hosts an annual user group meeting in Atlanta, Georgia; Eclipsys User Network (EUN). EUN meetings are typically held in the autumn of each year. In addition to the EUN, a user forum is maintained and monitored.

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H. SOFTWARE TECHNOLOGIES

RR-H-01 Provide the technologies used for each solution product identified above.

PeakPractice was built on the latest Microsoft ASP.Net technologies. Utilizing a N-tiered architecture on a Microsoft SQL 2005 Database allows for ultimate scalability. The front end of PeakPractice uses Microsoft's IIS Service which has built in technologies for caching and compression as well as scalability. Security is provided using SSL encryption which is seamlessly applied within the application. Additional advantages for growth and controls on costs is that the application only require Internet Explorer to run at the desktop level. No special software is required beyond the server. Long-term costs are minimal even in a growing environment of users.

Eclipsys PeakPractice can be structured ASP, client/server or a hybrid of both. Regardless of hosting structure, access to Internet Explorer 7.0 or newer is required for program access.

#	Product Name	Product Type	Operating System	Database	Application Language
1	Eclipsys PeakPractice Enterprise Suite	Electronic Medical Record, Practice Management, Supply Chain Management	Windows	SQL Server	.Net

SERVER HARDWARE MINIMUM SPECIFICATIONS

RR-H-02 In the following table, please provide the minimum server hardware technical specification levels for operation of your solution software products. Please consider all types of possible servers such as: database, fax, email, internet, backup, image management, etc.

See attached: Hardware Specifications

CLIENT HARDWARE MINIMUM SPECIFICATIONS

RR-H-03 In the following table, please provide the minimum client hardware technical specification levels for operation of your solution software products. Please consider all types of client types including workstations, tablet PCs, PDAs, etc.

See attached: Hardware Specifications

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PERIPHERAL HARDWARE MINIMUM SPECIFICATIONS

RR-H-04 Provide the minimum peripheral hardware technical specification levels for operation of your solution software products. Please consider all types of peripherals such as printers, scanners, card readers, notepads, etc.

See attached: Hardware Specifications

MINIMUM NETWORK/COMMUNICATION SPECIFICATIONS

RR-H-05 Provide the minimum network/communication technologies employed by your solution software products.

See attached: Hardware Specifications

SYSTEM BACKUP/RECOVERY CONSIDERATIONS

(Not to exceed 4 pages)

RR-H-06 Describe the system backup process for your core product.

For ASP and hosted client databases, Eclipsys Practice Solutions utilizes Veritas. With Veritas, incremental daily backups are completed while a full backup is completed once a week. A full daily backup is sent to the SAN (storage area network). Veritas and SAN are available to client server solution clients as well and is recommended.

For a complete system recovery, the information is pulled from the last backup and reset in the system.

Technicians follow an install/upgrade checklist to measure restored size to what was on the backup tape/drive (byte by byte comparison)

RR-H-07 Can backup be completed in a dynamic mode so that the system can be operational 24 hours per day?

The ability to complete backup in a dynamic mode would depend greatly on what backup solution is chosen by the client. If the backup solution has the ability to backup active files, this will be attainable.

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RR-H-08 Describe any automated backup features that allow rapid and unattended backups of system and operational data on a user-scheduled basis.

Backups can be scheduled to run automatically during periods of low activity. Automated verification of backup, recover and validation processes is completed daily.

RR-H-09 Can the system be configured to support improved fault tolerance and system recovery (e.g., mirrored disk drives/servers)?

We recommend using a RAID system for improved fault tolerance. This does not require any configuration on the part of the software. We do not currently have a solution for redundant servers (i.e. 2 database servers or 2 website servers).

DATA ARCHIVING CONSIDERATIONS

(Not to exceed 4 pages)

RR-H-10 What are the capabilities for archiving data?

Currently, PeakPractice is not able to archive data. However, records that are deemed necessary for archival can have a setting selected to make them inactive. Inactive patient records do not show on active searches. In addition, user role security can be augmented to limit access to inactive records.

RR-H-11 What are the capabilities for restoring archived data?
Inactivated patient records may be searched for separately. If necessary, a patient record may be reactivated by users having the security access to complete the task.

RR-H-12 What tools/media are used for archiving data?
N/A

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SYSTEM INTERFACE CONSIDERATIONS

(Not to exceed 3 pages)

RR-H-13 Describe your overall approach to developing, testing, implementing, and upgrading system interfaces to other third-party systems. Describe the process you use to settle disputes over interfaces between your solution and others.

Eclipsys Practice Solutions employs a project manager in the Development Department specifically for negotiating and testing interfaces with third party vendors. In addition to working with vendors, said project manager also communicates with clients to facilitate efficient communication with all involved.

RR-H-14 With what version of HL7 is your product compliant?

- Scheduling and Demographics: HL7 version 2.3 and 2.4
- Billing charge codes: HL7 version 2.5
- Lab orders: HL7 version 2.3.1 or 2.5.1
- Lab results: HL7 version 2.3.1 or 2.5.1

DATA SECURITY CONSIDERATIONS

(Not to exceed 3 pages)

RR-H-15 Discuss your approach to data/information security, especially with regards to Internet technologies. What level of encryption and authentication is supported?

We require the usage of an SSL certificate (https://) to secure external data access.

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SCALABILITY CONSIDERATIONS

(Not to exceed 3 pages)

RR-H-16 Describe your product's ability to expand to accommodate increasing numbers of users, servers, etc.

PeakPractice was built on the latest Microsoft ASP.Net technologies. Utilizing a N-tiered architecture on a Microsoft SQL 2005 Database allows for ultimate scalability. The front end of PeakPractice uses Microsoft's IIS Service which has built in technologies for caching and compression as well as scalability. Security is provided using SSL encryption which is seamlessly applied within the application. Additional advantages for growth and controls on costs is that the application only require Internet Explorer to run at the desktop level. No special software is required beyond the server. Long-term costs are minimal even in a growing environment of users.

RR-H-17 Provide any performance metrics that describe the maximum load(s) under which your system can continue to perform at an optimum level.

Performance metrics are being compiled at this time and thus are not available at the time of RFI completion.

RR-H-18 It is possible that many counties will want to work with the same vendor. How would your company mitigate the impact from potentially high-volume purchases from multiple counties in California? Include in your answer the need to hire additional staff, increase locations and the possible impact to implementation and training schedules, and problem response times.

Eclipsys Practice Solutions believes strongly in promoting from within. Therefore, many of the staff supporting PeakPractice is also available to assist in implementations while others are brought up to speed to meet client needs.

During the process of demonstrating and promoting PeakPractice to potential clients, the Training, Technical Support and Practice Success Team departments are notified of the scope of the project and preliminary plans are made. Thus, when a contract is signed, the plans can be put into place immediately.

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I. BEHAVIORAL HEALTH EHR FUNCTIONAL REQUIREMENTS SURVEY

RR-I-01 Please complete the CA BH-EHR Functional Requirements Survey (an Excel spreadsheet) that accompanies this RFI. **The Functional Requirements Survey is part of this RFI and must be completed.**

See attached: CA_BH-EHR Functional Requirements Survey for Eclipsys Practice Solutions.xls

J. IMPLEMENTATION PLANNING

(Not to exceed 5 pages)

RR-J-01 Describe your suggested best-practice approach to implementing your solution. Please include details regarding data conversion and training, and how these activities contribute to your suggested approach.

See attached: PeakPractice – Implementation.pdf
See attached: PeakPractice – Phase Flowsheet.pdf

RR-J-02 What is the typical implementation timeframe for your solution? Express your answer as a range (6 to 12 months, 1 to 2 years, etc.) qualified by a size-of-project; factor such as number of users, total project cost, etc. An example would "6 to 12 months for a total project cost not exceeding $500,000" etc. Please feel free to share any metrics that you typically use to estimate the timeframe for the implementation for your solution.

Because availability of providers and staff vary so greatly from practice to practice, it is difficult to specify an average time for implementation. Depending on the compliance to the training schedule and each practice's overall timeline for implementation, satisfactory benchmarks can be met to accommodate the project scope.

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K. TRAINING AND DOCUMENTATION

TRAINING

(Not to exceed 2 pages)

RR-K-01 Describe the types of training offered, i.e., end-user, systems administrator, installer, etc.

Training is offered for all users of PeakPractice ranging from front desk staff to systems administrators. Courses are tailored around each user's role and appropriate workflow needs.

RR-K-02 How often is training offered (as needed, or on a set calendar schedule)?

The schedule of online training courses begins every two weeks. It is recommended that most courses be taken in order, however, some courses may be taken at any time they are available. During the initial implementation, a client's tailored training plan will be developed.

RR-K-03 Please give the duration of each class, the location of training and the recommended number of people that should attend training.

Online courses range in duration from one hour to six hours each depending on class content. Onsite days include 8 hours of training per day. The number of people attending each class depends greatly on the goals and objectives of the client, the total number of people to be trained and the timeline in which the implementation is to be completed.

RR-K-04 Please describe if training is classroom style with an instructor, one-on-one, computer-based training, self-study, etc.

The training program for PeakPractice includes both online and onsite study. Classes are available one-on-one and in groups. In addition, a Learning Management System to facilitate self-study is currently being implemented.

RR-K-05 Who provides the training: employees of your company or sub-contractors?

All training of PeakPractice is provided by employees of Eclipsys Practice Solutions.

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RR-K-06 Do you provide clinician-specific training?

One-on-one clinician training is available.

RR-K-07 Do you provide fiscal-specific training related to billing Short-Doyle Medi-Cal in California?

Not at this time.

DOCUMENTATION

(Not to exceed 2 pages)

RR-K-07 Describe the documentation (both system and training) provided as part of standard installation approach including:

1. Manager and user reference manuals (applications).
2. User operator/system administrator manuals.
3. Hardware/OS manuals.
4. Network and Security.
5. Training manuals (initial and ongoing user self-training).

PeakPractice documentation is available on the Eclipsys Practice Solutions EDU website. All documentation is provided at time of implementation. During initial database setup, usernames and passwords will be granted to all PeakPractice users for access to the EDU website.

RR-K-08 Is the documentation available:

1. In hardcopy?
2. On CD-ROM?
3. On the Local Area Network?
4. On the Internet?

PeakPractice documentation is available on the Eclipsys Practice Solutions EDU website. PDF copies of documentation, online training schedules and other helpful tips are available for viewing, printing or saving to a server or workstation.

RR-K-09 How often is your documentation updated? How often are updates made available to the user? How is documentation updated (memo, revised manuals, on-line, CD, etc.)?

Documentation is updated as features are added or edited within the system. Updates are uploaded to the PeakPractice EDU site and are immediately available to users.

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L. CONTRACTUAL SUPPORT

(Not to exceed 4 pages)

RR-L-01 Do proposed acquisition and/or ongoing maintenance/support costs include:

1. Future enhancements to acquired/licensed application modules?
2. Operating system and related environmental software?
3. Interface maintenance?
4. Architectural changes such as migration to emerging technologies and new methods of systems deployment?

The annual maintenance agreement for PeakPractice includes all updates and upgrades as well as Technical Support assistance when needed. Interface maintenance fees will be included in the annual maintenance total billed to the clients.

RR-L-02 What are your normal support hours (specify time zone)? Where is support staff located?

Normal support hours are Monday through Friday from 7:00 AM – 7:00 PM Central Standard Time. The Technical Support team for PeakPractice is located in West Des Moines, Iowa.

RR-L-03 Which of the following support features are available? Check all that apply:

Toll-free hotline	
Remote monitoring	√
Remote diagnostics	√
Training tutorials	√
Web-based support tracking	√
24x7 software support	
24x7 hardware support	√*

*Eclipsys Practice Solutions' Data Center is monitored 24 hours per day. If an emergency should arise, a technician is on call.

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RR-L-04 Provide the response time for problems reported during:

Regular business hours.
Off-hours.

We currently receive support requests via phone and email. Email issues are given a lower priority and target response time is 48 hrs. Phone support is available for higher priority issues. Calls are queued and answered by first available staff. Issues are handled based on the impact that it has on the client and may be escalated to different individuals as needed including Development. Issues outside of support hours are addressed the following business day.

In 2007, Eclipsys Practice Technical Support maintained an unprecedented level of service to our clients by answering over 90% of incoming phone calls within one minute or less.

RR-L-05 Describe your problem reporting software and tools. Are they available via the Internet? Can a list of outstanding problems and enhancements by client be viewed on-line and downloaded?

Eclipsys Practice Solutions uses Test Track Pro and Jira for ticket tracking. Technical Support, Development and Quality Assurance all use these systems for proper routing of issues. Other departments have access to the systems for research capabilities.

At this time, a list of outstanding problems and enhancements are not available to be viewed online or downloaded by clients.

RR-L-06 Describe your firm's approach to software maintenance agreements. Include how, and at what frequency, your firm provides maintenance and upgrade services in support of your system products.

The Eclipsys Practice Solutions software maintenance agreement fee covers Technical Support as well as updates/upgrades to the PeakPractice software. Assuming the maintenance agreement is current; clients receive Technical Support assistance as needed. Clients also receive upgrades and updates to the program as they occur.

Eclipsys Practice Solutions upgrades PeakPractice five times per year on average; one main release early in the year with 4 quarterly releases. In addition, hot fix patches are released as needed.

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M. COST AND LICENSING

(Not to exceed 3 pages)

RR-M-01 Describe your pricing and/or licensing models based on the various product functionalities listed above. Do not provide specific pricing in your response, but information on how pricing is derived is pertinent. Examples of pricing models may be: module-based pricing, package or suite pricing, single price package, subscription based, package plus maintenance, etc

The client server and hosted versions of PeakPractice is priced per provider license. Ancillary staff, up to a 7-to-1 ratio, is included at no additional charge when a provider license is purchased. The PeakPractice Enterprise Suite license includes all functionality for the Electronic Health Record and Practice Management modules. The integrated Supply Chain Management module is offered at an additional fee; it is also licenses per provider.

Annual maintenance is charged on each license for the Enterprise Suite and the Supply Chain Management module (if purchased). The annual maintenance contract provides not only product technical support, but also updates and upgrades to the software.

In addition to the license fees, some monthly subscriptions are necessary to facilitate electronic prescribing, clearinghouse access (when utilizing practice management), claim processing, etc.

PeakPractice is also available as a true ASP program. In this model, a monthly subscription fee is charged for the suite of products per provider. The software maintenance is included in the monthly subscription fee. Additional monthly fees would apply similarly to the client server and hosted versions.

RR-M-02 List any programs your corporation currently participates in, in which you provide a single pricing and licensing model for a large customer with decentralized purchasing (public or private sector), and functional descriptions of that model. Examples of this type of licensing/procurement program may be the State of California Software License Program (SLP), or the California Strategic Sourcing Initiative.

Eclipsys Practice Solutions regularly works with Independent Physician Associations, Regional Health Information Organizations, Health Information Networks, Group Purchasing Organizations and other private physician groups to offer unique purchasing opportunities to their membership.

The most recent organization who signed a preferred vendor agreement with Eclipsys Practice Solutions is Genesis Physician's Group, Dallas, Texas. Agreements were made to offer a discount to their current membership. In addition, co-marketing campaigns are being developed to serve the best interests of both Genesis Physician's Group and Eclipsys Practice Solutions.

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N. RISKS AND ISSUES

(Not to exceed 3 pages)

RR-N-01 It is fully expected that Counties will encounter risks/issues that they must manage and mitigate. Please identify the risks/issues that a County is most likely to encounter when implementing your solution. Please include examples from prior implementations of your solution.

Through experience in implementing hundreds of clients over the years, the number one risk Eclipsys Practice Solutions has determined is the lack of "buy in" for the product and its adoption. It is essential to designate a Project Leader that not only has the time and ability to be the "go to" person for the clinic, but who also can be a positive force for change.

Setting realistic, measurable expectations is a key aspect for a successful implementation. The learning curve during implementation can be challenging; these expectations and set benchmarks offer guidance to participants of the project.

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O. PROJECT REFERENCES

RR-O-01 Provide a minimum of three (3) previous implementations of your solution that most closely approximate a CA County Behavioral Health setting. Include a California reference if available. Provide names and contact information of individuals who have sufficient experience to speak knowledgeably concerning:

1. The implementation process
2. System functionality
3. Vendor support
4. Documentation
5. Training
6. Overall customer satisfaction

Samuel E. Dey, Jr., M.D.
Dogon Behavioral Medical Group
Riverside California
(951) 341-8930
sdey@dogonmentalhealth.com

Reference for: vendor support; overall customer satisfaction

Joseph L. Antonowicz, M.D.
Altoona Regional Health System
(814) 946-2573
bwoolheater@altoonaregional.org

Reference for: vendor support; implementation process and implementation team

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APPENDIX A: SUPPORTING INFORMATION

SOFTWARE TECHNOLOGIES

File Name: PeakPractice-Hardware-Req.pdf
Referenced in questions: RR-H-02, RR-H-03, RR-H-04, RR-H-05

IMPLEMENTATION PLANNING

File Name(s): PeakPractice – Implementation.pdf; PeakPractice – Phase Flowsheet.pdf
Referenced in questions: RR-J-01

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