Package Contents

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2. AHS Pharmacy Management System RFI Responses to Questions
3. List of Health Center Addresses
CITY OF PHILADELPHIA

Philadelphia Department of Public Health
Division of Ambulatory Health Services

REQUEST FOR INFORMATION

Pharmacy Management System

October 1, 2019
SUMMARY OF KEY RFI DATES:

- Date RFI Issued: 10/1/2019
- Questions Due: 10/8/2019, 5:00pm ET
- Answers Returned: 10/11/2019
- Responses Due: 10/21/19, 5:00pm ET

All RFI correspondence must be by email and must be directed to:

Attn: Michele Reynolds
Email: michele.reynolds@phila.gov
1. TERMINOLOGY

Terms which have specific meaning when used within this document:

- “Pharmacy Management System” is an electronic system that stores data and enables functionality that organizes and securely maintains medication prescribing, tracking and business processes within pharmacies.

- “Hosted” means a contractual arrangement to provide computer services (e.g. as a SAAS offering), including, but not limited to: operations and maintenance of equipment, storage, application support, and disaster recovery/business continuity services.

- “Respondent” is any person, corporation, or partnership who chooses to submit a response to this request for information.

2. PURPOSE OF THIS REQUEST FOR INFORMATION

The Philadelphia Department of Public Health Division of Ambulatory Health Services (PDPH AHS) is issuing this request for information to determine if there are companies in the marketplace that provide a Pharmacy Management solution for use within the Ambulatory Community Health setting.

This RFI is not a solicitation for procurement. It is intended to inform a Request for Proposal (RFP) for a Pharmacy Management System. Information learned from this RFI will be used to help develop the Statement of Work for that RFP.

3. CONDITIONS GOVERNING THE RFI

A. SEQUENCE OF EVENTS

1. **RFI Issued:** This RFI is being issued on **October 1, 2019** by PDPH AHS.

2. **RFI Questions:** All questions about the RFI must be submitted by email to Michele Reynolds at michele.reynolds@phila.gov no later than 5:00PM Eastern Time on **October 8, 2019**.

3. **Answers to RFI Questions:** All RFI questions will be catalogued, answered, and published to all known prospective respondents 10 days before the RFI deadline on **October 11, 2019**.

4. **RFI Response Deadline:** The deadline for receipt of responses is **October 21, 2019**, no later than 5:00 PM Eastern Time. Responses received after the due date and time will not be included in the RFI review.

5. **RFI Response Submission:** All responses must be submitted electronically to Michele Reynolds at michele.reynolds@phila.gov. All responses must be labeled in email Subject line: "Response to RFI – AHS Pharmacy Management System"
B. GENERAL REQUIREMENTS

To be considered, all responses must comply with the requirements and specifications listed:

1. **No Obligation:** This RFI in no manner obligates PDPH AHS or any Respondent to the eventual rental, lease, purchase, etc., of any equipment, software or services described, implied or which may be proposed.

2. **Termination:** PDPH AHS reserves the right to cancel this RFI at any time, and to reject any or all responses submitted if PDPH AHS determines such action or actions are in its best interest.

3. **Clarifications / Questions:** All requests for clarifications or questions are to be sent by electronic mail and directed to:

   Attn: Michele Reynolds  
   Email: michele.reynolds@phila.gov

   All questions will be catalogued, answered, and published 10 days before the RFI response deadline and noted in the Sequence of Events. All Respondent’s will be notified by electronic mail with the full set of questions and responses.

4. **Basis for Response:** All information provided to PDPH AHS in writing or in the RFI response will be held confidential and available to only PDPH AHS.

5. **Response Preparation Cost:** Any cost incurred by the Respondent in the preparation, transmittal or presentation of any response or material submitted in response to this RFI will be borne solely by the Respondent.

6. **Respondent's Terms and Conditions:** Respondents must submit a complete set of materials by the stated deadline via electronic mail to:

   Attn: Michele Reynolds  
   Email: michele.reynolds@phila.gov

4. RESPONSE FORMAT AND ORGANIZATION

A. **NUMBER OF RESPONSES**

Respondents may submit only one (1) response. Responses consisting solely of marketing materials will not be considered.

B. **NUMBER OF COPIES**

Respondents shall provide one official copy of a response as an attachment(s) within an electronic mail message. Please note required response format below.
C. RESPONSE FORMAT

Responses should be submitted in MS Word, Excel and/or PDF format. Completeness and clarity are desirable in all areas.

The respondent's submission to this RFI must be organized in the following format:

1. Executive Summary – In this section please briefly describe:
   - What uniquely qualifies you in this space
   - What you see as the Critical Success Factors to project success
   - Name and title of the person authorized by the organization to contractually obligate the organization, and the names, titles and telephone numbers of persons to be contacted for clarification

2. Response to Functionality Assessment (Section 5C, all questions)
3. Response to Technical Specifications (Section 5D-1)
4. Response to Pricing Summary (Section 5D-2)
5. Respondent’s General Terms and Conditions for business engagements
6. Other Supporting Materials/Documentation
   Respondents may attach other materials that they believe may improve the quality of their responses. However, these should be included as items in a separate appendix. Note: Submissions of marketing materials only will not be considered.

5. REQUIREMENTS AND SPECIFICATIONS

A. BACKGROUND INFORMATION

This document constitutes a Request for Information (RFI), from vendors and/or organizations who provide and perform services to plan, test, deploy and maintain pharmacy management systems. Interested and qualified organizations are encouraged to respond.

PDPH Division of Ambulatory Health Services delivers direct patient health services in eight community health centers and operates licensed pharmacies in each location. The administration and management of pharmacy services is accomplished centrally. AHS has implemented an Electronic Pharmacy Management System to manage prescriptions and pharmacy inventory in support of the delivery of pharmacy services for its community health center providers and clients. The current system is integrated with an electronic health record (EHR) system to enable health center physicians to accomplish electronic prescribing for their patients. The EHR-Pharmacy Management System integration has streamlined the way the City’s government-sponsored health services are delivered, incorporates best practices from the health care industry, enhances the quality of care provided and maximizes the extent to which Philadelphia’s residents who use government health services achieve positive health outcomes. Thus, the use of a pharmacy system is an integral part of the City’s scope of health services. The current Pharmacy Management System is end of life and must be replaced.
The mission of PDPH is to protect the health of all Philadelphians and to promote an environment that enables people to lead healthy lives. PDPH provides services, sets policies and enforces laws that support the dignity of every man, woman and child in Philadelphia. The City recognizes that the implementation and integration of high quality, standards-based, highly integrated, regulatory compliant pharmacy software is critical in achieving its goals to assure the delivery of safe, efficient, and effective care.

B. SCOPE

This RFI is a preparatory step to inform AHS’ understanding of current pharmacy management solutions and the costs associated with implementation planning, deployment and maintenance services that meet or exceed AHS requirements.

THIS IS NOT A BID.

PDPH AHS operates its health clinics in different communities within the City of Philadelphia. All centers are designated Federally Qualified Health Centers or Federally Qualified Health Center Look-alike facilities. The scope of services includes adult medicine, pediatrics and adolescent services, diagnostic services, pharmacy, dental health, health education and social services. AHS has an administrative unit that performs functions relevant to medical group practice management for the 8 sites—central governance and administration, financial administration and billing services, clinic operations and management, information services, human resources management and performance measurement and quality improvement.

AHS fills approximately 250 prescriptions in a normal eight hour business day across the eight pharmacy locations in the Philadelphia area. Most new prescriptions are e-prescribed via AHS’s existing EHR (eClinicalWorks) and received into the health center pharmacy’s e-prescribing queue. AHS pharmacies maintain a storefront in each health center to dispense medications for prescriptions written by providers in those health centers but they do not handle commercial/merchant transactions or sell over the counter drugs at any location. Medications are dispensed without charge to self pay or uninsured patients; insurance billing is accomplished for patients with pharmacy benefits. Refill and renewal requests are e-prescribed, presented to the interactive voice response (IVR) system, e-faxed, or presented in person, by health center.

The AHS Pharmacy Administration location houses central pharmacy administration where the following general functions are performed:

- Maintain master pharmacy patient, drug, & insurance database
- Control price table
- Purchasing, receiving
- Inventory reconciliation and distribution
- Insurance billing & on-line adjudication
- Reporting
- Regulatory and compliance functions
- Pharmacist licensure and credentialing
- Maintain drug image files
- Control IVR interface
- Other pharmacy management functions
Each of eight health center pharmacy locations performs a relevant range of functions including, but not limited to:

- ePrescribing by providers from integrated Practice Management/EMR system
- refill requests via interactive voice response (IVR) phone system
- electronic refill request/response via bidirectional EMR interface
- label printing
- product information
- allergy checking / drug-drug interaction algorithms
- prescribing workflow (end-to-end prescription tracking)
- patient historical medication profile

PDPH AHS is seeking information on Pharmacy Management Systems including related pharmacy software, professional services, installation, and training necessary to implement a fully functional unified system. Further, PDPH AHS seeks information describing the hardware, technical and network requirements to operate such a proposed system in an optimal state.

The desired system must be capable of replicating all current AHS pharmacy functions and workflows (as listed), be expandable to meet future AHS needs, be capable of integrating with other AHS pharmacy and related health information technology systems, and be capable meeting Federal 340B, Joint Commission, state pharmacy board and FDA requirements. General requirements for the System and/or services sought by this RFI are outlined in Section 5C and Section 5D to follow.

RESPONSE REQUIRED, SECTIONS 5C AND 5D, TO FOLLOW.
C. FUNCTIONALITY ASSESSMENT

Respondents must describe or provide a reference to the accompanying technical documentation describing how the proposed software solution meets each of the following system requirements. PLEASE USE THE QUESTION NUMBERS AS CROSS-REFERENCES TO YOUR RESPONSE.

Purchasers seek to understand to what extent features are currently available and to what extent they are configurable within the application versus needing development or external resources.

✓ Please indicate whether the proposed solution has the functionality currently available, not available, or planned (indicate anticipated delivery date).

✓ Please describe which components and/or features/functions are configurable, customizable, developable or dependent on external resources.

C1. What is (are) the name(s)/version(s) of your proposed system? Please describe in brief the full functionality of the system at the highest level.

C2. Does the system contain functionality to perform Order Management / Prescription Processing services? Please describe what functionality is present and how it is implemented in the system.

C3. Does the system contain functionality to perform Inventory Management services? Please describe what functionality is present and how it is implemented in the system.

C4. Does the system contain functionality to perform Administrative Management services? Please describe what functionality is present and how it is implemented in the system.

C5. Does the system contain functionality to perform Reporting services? Please describe what functionality is present and how it is implemented in the system.

C6. Does the system have an integrated module or component for system-generated patient notifications? Are there any third party solutions that the system integrates with for performing these services via email, fax, and/or telephone?

C7. Does the system interchange pharmacy information with other systems? Please describe this process.

C8. Does the system contain functionality to support pharmacy services in public health clinics?

C9. Please describe your rules or workflow engine capabilities for dynamic workflow creation within your system.

C10. Are there other specific functions in the system that is not mentioned in this RFI that are valuable or specific to the system? If so, please describe.

C11. Please describe any previous reference implementations of the system for the following environments:
   a)    FQHC and FQHC “look a like” clinics
   b)    Ambulatory Health centers
   c)    Public Health clinics

D. TECHNICAL SPECIFICATIONS AND PRICING SUMMARY
D1. Describe and illustrate the preferred system architecture and deployment model as well as alternatives supported (please include hosting models, server architecture (virtual/physical), database, platforms, operating systems with version numbers, etc.) Diagrams preferred.

D2. Describe how the system is secured/encrypted and its adherence to HIPAA/HITECH as well as industry standard security practices.

D3. Please provide line item/categorical and TOTAL COST FOR 4 YEARS for full planning, testing, training, deployment and support of a replacement for this system as outlined in Part B Scope, with year 1 reflecting all implementation costs. THIS IS NOT A BID. Respondent’s pricing model should also include the following information:

- What is the pricing/licensing model for the implementation and maintenance/support of your system (e.g., number of users, concurrent users, per PC, annual, perpetual, etc.) please explain.
- Within the system are there any third party costs associated with specific functionality, e.g., inventory, billing, distribution, reporting? If so, please describe where these costs are associated, and for what functions.

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REMEMBER:

The respondent's submission to this RFI must be organized in the following format:

1. Executive Summary – In this section please briefly describe:
   - What uniquely qualifies you in this space
   - What you see as the Critical Success Factors to project success
   - Name and title of the person authorized by the organization to contractually obligate the organization, and the names, titles and telephone numbers of persons to be contacted for clarification

2. Response to Functionality Assessment (Section 5C, all questions)
3. Response to Technical Specifications (Section 5D-1)
4. Response to Pricing Summary (Section 5D-2)
5. Respondent’s General Terms and Conditions for business engagements
6. Other Supporting Materials/Documentation

Respondents may attach other materials that they believe may improve the quality of their responses. However, these should be included as items in a separate appendix. Note: Submissions of marketing materials only will not be considered.

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PDPH AHS recognizes and appreciates the time and effort required to respond to this RFI. Thank you for your interest in this important project.
### QUESTIONS AND ANSWERS:

<table>
<thead>
<tr>
<th>Q1. What are the names and addresses of the 8 pharmacy locations?</th>
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<tbody>
<tr>
<td>▪ There are nine sites, including our Central Pharmacy. Please see attached location sheet.</td>
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<tr>
<th>Q2. Do these locations service any Skilled Nursing Facilities and if so, do they do any cycle filling?</th>
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<tr>
<td>▪ No, Health Center pharmacies serve patients receiving care in their respective ambulatory care facilities.</td>
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<tr>
<th>Q3. Who are they (health center pharmacies) using as their IVR company?</th>
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<tr>
<td>▪ HBS</td>
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<tr>
<th>Q4. Who are they (health center pharmacies) using as a Wholesaler?</th>
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<tr>
<td>▪ R&amp;S NorthEast</td>
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<tr>
<th>Q5. Is their (health center pharmacies) 340b inventory separated out physically or virtually?</th>
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<td>▪ All of our patients are 340b eligible so we only purchase 340b (if available)</td>
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<th>Q6. Are they (health center pharmacies) using any interfaces?</th>
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<tr>
<td>▪ ePrescribing (Rx orders) interface from EMR to pharmacy</td>
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<tr>
<td>▪ Billing interface to clearinghouse</td>
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<tr>
<td>▪ In development—bidirectional refill request/response interface with EMR</td>
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<th>Q7. Are they (health center pharmacies) using any automation?</th>
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<tr>
<td>▪ Not at this time</td>
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<th>Q8. The RFI states, “AHS fills approximately 250 prescriptions in a normal eight hour business day across the eight (8) existing pharmacy locations in the Philadelphia area. Most new prescriptions are e-prescribed via AHS’s existing EHR (eClinicalWorks) and received into the health center pharmacy’s e-prescribing queue.” Are you indicating there are a total of 250 scripts a day across all 8 pharmacies, which would average 31 scripts per pharmacy per day, or are you saying the average for each pharmacy is 250 scripts per day which would be 2,000 scripts per day total across the enterprise?</th>
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<td>▪ That would be 250/site (some as many as 500/day).</td>
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<th>Q9. Your previous RFP (Nov 2018) stated “No computer hardware or other equipment, and no network or computer installation services (such as cabling or physical installation of equipment) will be purchased under any contract resulting from this Request for Proposals. The City will purchase such equipment</th>
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and services separately, through its normal procurement process.” Is that still the case? Are there any exceptions to this rule?

- The City reserves the right to use existing hardware purchasing contracts to satisfy implementation requirements in software and IT services contracts. In addition to purchasing considerations, the City seeks assurances of hardware compatibility with City infrastructure, security standards, software and workflows.

Q10. The budget on the previous City of Philly RFP page showed $0 to $450,000 for this project. Is this a firm top limit?

- The City understands that the $450K budget limited the range of potential solutions. Through this RFI, the City is seeking to understand fully loaded implementation and maintenance costs to realistically inform a revised project budget.

Q11. Who is the current IVR vendor? (see #3 above). [Is the City open to using an alternative IVR if that means enhancing efficiency?]

- HBS

Q12. Can you clarify the type of data requested to/from eClinicalWorks EHR system via HL7 interface?

- Rx Orders + Allergies – NCPDP 10.6 “NewRx” message standard, from eCW to Pharmacy
- Refill Request -- NCPDP 10.6 “REFREQ”, from Pharmacy to eCW (in development)
- Refill Response -- NCPDP 10.6 “REFRES”, from eCW to Pharmacy (in development)

Q13. Do you conduct Medication Therapy Management cases in the pharmacies? If so, what vendors do you utilize?

- In house Case reviews

Q14. Is your intention to keep current fax numbers? Is there one centralized fax number or does each pharmacy have their own?

- One centralized fax number – subject to change.

Q15. Is purchasing medication vial labels a part of this RFI?

- Please include price.

Q16. Is purchasing medication a part of this RFI, or will there be a separate RFP for wholesale services?

- Separate

Q17. Do you intend to include hardware as a part of the RFP, or will procurement be handled separately?

- The city will advise on procurement mechanism; please include all hardware specifications and estimated costs for the proposed system. Use 25 workstations as a planning number.
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<th>Q18. Do you currently (or plan to) provide medication home-delivery services for patients?</th>
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<td>• No</td>
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<th>Q19. What is your desired/planned implementation timeline?</th>
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<td>• Implementation will follow an aggressive deployment schedule for completion by end of 1Q 2020.</td>
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<td>Health Center #1 - Central</td>
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*Strafford Mansion Health Center*