

A Request for Proposal (RFP) is a formal document sent to vendors inviting bids for the organization's EHR project. A RFP provides valuable insight into the vendor's operations and products. It standardizes comparison by asking all vendors the same questions. It also provides the vendor with crucial information about the health organization seeking to implement EHR, such as provider profile and project goals.

Sending a RFP to vendors often creates a "competitive feeding frenzy". Some vendors may try to schedule an on-site meeting early in the process. It is important to discourage such attempts to maintain a fair and objective EHR selection process.

Vendors that do not respond to the RFP in the allotted time should be eliminated from the process. This typically signifies they are either not interested in the work or do not have appropriate resources. Asking for an extension on the response due date might also raise a "red flag" although it is useful to learn more about the vendor's reasons. If an organization allows extra time to a vendor, this privilege should be extended to all vendors.

The first step in analyzing RFPs is the overall response assessment. Did the vendor follow instructions on how to respond? Did they understand the questions? Was the RFP response received early or on time?

RFP responses should provide answers to the important questions listed below. Each question references sections of the sample DOQ-IT *Request for Proposal (RFP)* document.

- Does the vendor's EHR product provide the key functionality needed to achieve the organization's goals?
 - ▶ (Reference *RFP* sections: System Features, Technical Design and Operational Requirements, System Integration and Interoperability, Report Generation and Tools, Security, HIPAA)
- Does the vendor share the organization's vision for the EHR?
 - ▶ (Reference *RFP* sections: Vendor Background and Information, References)
- Does the vendor utilize the desired technology?
 - ▶ (Reference *RFP* sections: Technical Design and Operational Requirements, References)
- Can the vendor support the organization's EHR purchasing strategy?
 - ▶ (Reference *RFP* sections: Pricing and Contracts)
- Can the vendor support the organization's desired implementation strategy? (*all at once, phased approach, pilot clinic first, etc.*)
 - ▶ (Reference *RFP* sections: Implementation, Documentation and Training)
- What is the vendor's understanding of the implications of implementing an EHR system?
 - ▶ (Reference *RFP* sections: Implementation, Documentation and Training)
- What is the vendor's strategy and track record for operations and maintenance support?
 - ▶ (Reference *RFP* sections: System Support, References)
- Is the vendor's business performance and perceived stability in line with the organization's expectations?
 - ▶ (Reference *RFP* sections: Vendor Background and Information, References)

In-depth RFP analysis can be divided between team members by section/category. Each team member's RFP analysis results should be reported back to the team and compared as a whole. It is recommended that each team member use the Likert scale to quantify the analysis (see the *DOQ-IT Request for Proposal (RFP) Analysis Worksheet*).

Analyze pricing separately. Although cost is perceived as a top barrier for EHR adoption, it should not interfere with the understanding of the product and vendor. Price quotes should be normalized for comparison and should include the cost of hardware, software, implementation (include the cost of interfaces), maintenance and support. As some of these are one-time costs and others are ongoing, it is a good idea to spread and recalculate the cost over three years (three years is the period during which the need for new hardware is the least likely to occur).

The conclusion of this process should be the selection of two to five vendor finalists for further analysis. It is very important, at this stage, to eliminate any vendors who appear to be sub par.