



MARICOPA COUNTY SPECIAL HEALTH CARE DISTRICT
dba MARICOPA INTEGRATED HEALTH SYSTEM
2611 East Pierce Street
Phoenix, AZ 85008-6092

REQUEST FOR INFORMATION (RFI)

90-10-032-RFI

CLINICAL DEVICE INTEGRATION

Date Published:	February 5, 2010
Response Due Date:	February 16, 2010
Procurement Officer:	Andrew Wilson
Contact Information:	602-344-1403

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CONFIDENTIALITY

Information which is received through responses to this Request for Information or gathered through discussions will be treated as confidential and will not be shared with any other party. All information which is received through this process will be governed by the Maricopa County Special Health Care District Procurement Code and A.R.S. 41-2550 and may be subject to Public Records Request only if a formal Procurement (RFP/RFQ) is developed, published and contract awarded.

INTRODUCTION AND PURPOSE OF THIS RFI

THIS IS A REQUEST FOR INFORMATION (RFI) ONLY. This RFI is issued solely for information and planning purposes – It does not constitute a Request for Proposal (RFP) or promise to issue an RFP in the future. This Request for Information does not commit Maricopa Integrated Health System (MIHS) to contract for any product/supply or service whatsoever. MIHS at this time is not seeking proposals and will not accept unsolicited proposals. All costs associated with responding to this RFI will be solely at the interested parties' expense. Not responding to this RFI will not preclude participation in any future RFP, if any is issued. If any future RFP is developed from this RFI, it will be duly published on the MIHS Contracting Opportunities Website at <http://www.mihs.org/openbid/index.html>. It is the responsibility of the potential offering vendors to monitor this website for additional information pertaining to this requirement.

With this RFI, MIHS is requesting information regarding your company and its products/services. The same information will be gathered from different companies and will be used to review the products/services available.

SCOPE

Maricopa Integrated Health System is requesting information with regard to systems and/or products that facilitate the integration of patient data electronically produced by medical devices, with Epic, the electronic medical record application in use at MIHS. Any cost information that is submitted with this RFI should be specific to the product/service described and should be your company's normal unsolicited pricing available on the open market.

MIHS currently uses the following list devices which are all possible sources for patient data to be captured and incorporated with the EMR:

- GE Solar 8000I patient monitors
- GE Dash series patient monitors
- GE MUSE with 12 lead capability, MAC 5500
- GE PACS
- GE ProCare blood pressure machines
- Hill-Rom Nurse Call
- Aestive anesthesia machines
- Alaris Medley infusion pumps
- Servo I, Pulmonetic, Sensormedic ventilators
- GE CoroMetric fetal monitors
- GE Ultrasound machines

Note: *The above is not an all-inclusive list*

RFI PROCEDURES

All responses to this RFI should be in a “white paper” format and contain specific information that details your product/service that is available at the time of this RFI. Responses shall include the completion of any forms that are included in this RFI. All responses shall be in MS Word or Adobe PDF format and shall not exceed seven (7) pages single sided. Responses can include brochures which provide additional detail to support your statement(s) and should be documented in your response as attachments. Any supporting documentation which is not in MS Word or Adobe PDF format should be mailed in to the Procurement Officer identified in this RFI and must contain the **RFI Number 90-10-032-RFI** clearly printed on the outside of the envelope.

RFI DUE DATE AND TIME

All Responses to this RFI are due no later than **Friday, February 16, 2010 at 2:00 PM Phoenix, Arizona Time** and should be submitted by e-mail to Andrew Wilson, Procurement Officer at andrew.wilson@mihs.org.

Questions regarding this RFI shall be submitted in writing by e-mail to the Procurement Officer. Verbal questions will NOT be accepted. Questions submitted after February 12, 2010 at 11:00AM will not be answered. Submit your questions to: Andrew Wilson, Procurement Officer at andrew.wilson@mihs.org.

Any supporting documentation, i.e. brochures, which support your response and cannot be submitted in MS Word or Adobe PDF format, may be submitted to:

Andrew Wilson, Procurement Officer
Maricopa Integrated Health System
2611 East Pierce Street
Phoenix, AZ 85008-6092

Any submissions of materials that are not sent via e-mail must adhere to the same due date as identified above.

BACKGROUND INFORMATION**MARICOPA INTEGRATED HEALTH SYSTEM**

Maricopa Integrated Health System (MIHS) includes Maricopa Medical Center (MMC), the Arizona Burn Center, the Comprehensive Healthcare Center, 11 community-oriented family health centers, and an attendant care program. Maricopa Medical Center also serves as a premier training center for the nation's physicians. MIHS is located in the central portion of Arizona.

MIHS is the health care safety net for citizens of Maricopa County. The health system serves people of many nationalities who come from diverse cultures and speak several different languages. MIHS provides care for all that enter its doors. Annually, MIHS has nearly 20,000 inpatient admissions and 300,000 outpatient visits.

Maricopa Medical Center is a 541-bed licensed, full-service hospital, which includes the Valley's a 16 bed pediatric emergency department open 24 hours a day, every day, as well as one of six Level I Trauma Centers in the Central Valley. The Arizona Burn Center, Arizona's only regional burn center, and the Maricopa Psychiatric Center, a 92-bed behavioral health facility is also on site. Outpatient primary and specialty care is also offered at the Comprehensive Healthcare Center, a specialty care clinic located at the MMC campus.

Maricopa Integrated Health System has 11 Family Health Centers throughout the Valley. The professional medical staff at all 11 centers are trained and certified in primary care and focuses on the treatment of both adults and children. Many of our Family Health Centers are designed to provide all your health care in one location, including primary care, dental care and pharmacy services.

Maricopa Integrated Health System's Desert Vista Behavioral Health Center provides a safe place for people in need of behavioral health care and psychiatric services. At Desert Vista, inpatient psychiatric services are provided in a comfortable, friendly environment. Located in Mesa, Desert Vista Behavioral Health Center specializes in the care of patients with major mental illness in an inpatient setting. The Center's medical staff consists of psychiatrists, nurse practitioners and psychologists.

HOW THE PRODUCT/SERVICE WILL BE USED

MIHS is requesting information regarding products that relay clinical patient specific data captured by various clinical patient monitoring devices to the appropriate MIHS hospital information systems, such as the EPIC electronic medical record application system(s).

STATEMENT OF NEED

Patient data will be captured and relayed to the EPIC application "real time", as it is made available by the various monitor devices.

REQUIREMENTS

The proposed integrating product must be capable of being active and operationally supported 24 hrs per day, daily (24 x 7) in all of MIHS facilities.

QUALIFICATIONS

The vendor product should be capable of running and supported in a production manner as described above.

90-10-032-RFI CONTACT INFORMATION FORM

COMPANY NAME:	
COMPANY ADDRESS:	
COMPANY CITY/TOWN, STATE, ZIP:	
COMPANY WEBSITE:	
MAIN PRODUCTS/SERVICES:	
NUMBER OF YEARS ON THE MARKET: (RFI PRODUCT LINE)	
COMPANY LOCATIONS:	
CONTACT PERSON RESPONSIBLE FOR ANSWERING THIS RFI:	
TELEPHONE:	
ADDRESS:	
E-MAIL:	
DO YOU HAVE A LOCAL PRESENCE IN ARIZONA:	
IF "YES", IDENTIFY LOCATION/ADDRESS:	
COMPANY LOCAL REPRESENTATIVE:	
ADDRESS:	
TELEPHONE:	
E-MAIL:	
IF AN RFP IS PUBLISHED FOR THIS PRODUCT/SERVICE DO YOU WANT TO BE INCLUDED IN THE INTERESTED PARTIES TO BE CONTACTED:	
IF "YES" CONTACT NAME:	
CONTACT E-MAIL ADDRESS:	
LIST OTHER HOSPITALS WHERE YOUR PRODUCT/SERVICE IS IN OPERATION: (NOT MORE THAN 5)	