

Greater Minnesota Telehealth

Broadband Initiative

Request for Proposal for Eight hospitals of the Medi-sota, Inc. consortium FCC Rural Health Care Pilot Program

The Greater Minnesota Telehealth Broadband Initiative (GMTBI), on behalf of nine hospital members of the Medi-sota, Inc. health care consortium, is seeking bids for telecom services under the FCC's Rural Healthcare Pilot Program. The GMTBI is a consortium of five health care networks representing approximately 120 health care facilities that was authorized for funding under the 3-year FCC Rural Healthcare Pilot Program. It is the vision of the GMTBI is to enable a set of standard telehealth connection services throughout the State of Minnesota that will facilitate any healthcare location in the state to share one or more telehealth services with any other healthcare location within Minnesota, and ultimately, to interconnect with other health care providers regionally and nationally.

This RFP addresses the telecommunications, perimeter hardware, and network maintenance for eight facilities in the Medi-sota, Inc. consortium that are seeking new or enhanced services. Simultaneous with the build outs identified herein, the GMTBI will develop network architecture and routing to address the overall vision for the remaining sites in the Medi-sota, Inc. consortium and the Minnesota network. Sites addressed by services provided in this RFP will then be prepared to participate in further network building addressed by the GMTBI network implementation plan.

Medi-sota, Inc. is a non-profit healthcare consortium of 30 rural health care providers in Minnesota and 1 healthcare organization in eastern South Dakota. It provides services to its members, including: educational programs for members and trustees, preferred vendor contracts, networking opportunities, physician and ancillary staff recruitment, collection agency services, and annual wage and benefit surveys. The connectivity provided will continue to build member capacity to electronically exchange health information and engage in telemedicine services. Medi-sota, Inc. is requesting services for its members that currently do not have adequate telecommunication capacity to handle facility demands.

In 2006, Medi-sota, Inc. was the recipient of a USDA Distance Learning and Telemedicine grant. Under this grant, they were able to purchase videoconferencing equipment for the purposes of building distance learning and telemedicine opportunities. In 2007, the Lac qui Parle Health Network, a subset of three hospitals in the Medi-sota consortium – Johnson Memorial Health Services, Dawson; Madison Lutheran Home, Madison; and Appleton Area Health Services – received a \$1.6 grant from the Health Resources and Services Administration to implement a shared electronic health record system. The services in those hospitals currently do not support exchange of patient data, images, or other records. In addition, they are poised to complete installation of videoconferencing equipment purchased under USDA funding, but do not have the telecommunications capacity to employ the system.

Requested services. This request for proposal establishes new private site connections at 8 of the 30 Medi-sota member sites that currently have inadequate connectivity for their needs. Other sites in the consortium have established adequate connections, but they are not interoperable, which will be addressed in the overall network architecture of GMTBI. There will also be a direct connection to the GMTBI managing entity, SISU Medical Systems in Duluth, MN.

The services requested will provide connectivity to each site as specified in Table 1.1 and network diagram, attached. The configuration must support quality of service (QoS), specifically DSCP prioritization end to end for telehealth and secure reliable connections for electronic health information exchange. Eventually the

connectivity will be able to provide additional services to Medi-sota members for a converged IP network that will consolidate many technologies into one platform. The successful bidder(s) will support routes for existing services at the original sites and referral hospitals and clinics to provide a seamless transition to their bandwidth solution(s). The hardware for the connections will be purchased and configured through the successful bidder(s) to support these routes. Any ongoing changes to the hardware will be done by the managing entity for the GMTBI, SISU Medical Systems.

Telecom service options for remaining end-user sites should reflect overall pricing, quality standards, and network-wide service requirements as described below and in Table 1.1. Bids must be responsive to service needs established by end-user hospitals in Table 1.1. All sites will route to Rice Memorial in Willmar, MN which will eventually link all 30 Medi-sota, Inc. sites. A DS3 connection to SISU Medical Systems in Duluth will allow the Medi-sota sites to interoperate with other health care providers in Minnesota and beyond. All site connections are listed in Table 1.1 and the Form 465 attachment, which incorporates this RFP.

The vendor(s) will be responsible for all network hardware purchasing and maintenance in accordance with the site needs in Table 1.1. The existing Medi-sota, Inc. sites will connect via T-1 circuits with router and T-1 port capacity to accommodate the bandwidth needed for each site as defined. The vendor(s) must deliver connectivity over a private data network in a secure and prioritized fashion on an Internet Protocol (IP) platform. Vendor(s) may be required to purchase local access from the local exchange carrier to complete last-mile connectivity to nearest POP. The end user site would be responsible for internal wiring and connection to the room locations where the telehealth equipment will be located. The vendor will be responsible for all network hardware purchasing and maintenance in accordance with the site needs in Table 1.1 and the parts list included. The vendor shall provide network services in a manner that meets HIPAA requirements concerning telecommunications.

Quality of Service (QoS) - All local access circuits and Vendor's core infrastructure network should be designed to deliver QoS, specifically DSCP from end-to-end. Vendor will be required to prioritize traffic with QoS to ensure packet delivery and latency remains at or above industry standards for the routing protocols as well as for switching.

Network IP services should support: *(As a requirement the vendor must be able to guarantee that the requested services are included in the SLA/contract for **each** connection that will be made. If the parameters cannot be met after the point of implementation, the GMTBI reserves the right to terminate any and all contracts, based on the fact that services are not being met as specified.)*

1. Specified bandwidth for each site and hardware necessary in Table 1.1
2. Administrative network security policy and operational requirements for data transport that meets HIPAA security and privacy requirements of State and Federal regulations and statutes.
3. Support for standards-based encryption protocols.
4. Requirements defined for common technical standards and operational procedures to maintain system reliability, relevant parameters include:
 - i) An average end to centralized GMTBI hub site delay of less than (<) 20 millisecond. (*i.e. – Johnson Memorial Hospital to Rice Memorial Hospital to SISU Medical Systems in Duluth.*)
 - ii) Provide less than (<) 0.1% packet loss.
 - iii) Provide less than (<) 20 millisecond jitter (delay variance).
 - iv) Provide greater than or equal to 99.99% network availability.

Proposed system testing and acceptance provisions will be required on all bid proposals. The Greater Minnesota Telehealth Broadband Initiative / SISU Medical Systems reserves the right to work in concert with vendors to develop appropriate test and acceptance criteria for a specific installation or configuration, to be defined and accepted by both parties prior to contract initiation.

IMPLEMENTATION SCHEDULE DESCRIPTION

Network buildout is preferred to occur prior to any inclement weather or winter conditions, and therefore any construction should begin in the spring of 2009. Please include a plan with timeline, and address ability to meet project timeline goals. Identify circumstances that may create project delays.

PRICING AND COST INFORMATION

Vendors submitting proposals should identify all costs associated with the solution they are quoting. All hardware **MUST BE** new and not refurbished equipment in order to qualify for the FCC Pilot Program funding. All equipment in Table 1.1 and accompanying parts list must be used. The configurations are based on Cisco Systems products. Whenever the name of a manufacturer, trade name, brand name, or model and catalog numbers followed by the words "or equal" or "approved equal" are used in the specifications it is for the purpose of item identification and to establish standards of quality, style, and features. Bids on equivalent items of the same quality are invited. However, to receive consideration, such equivalent bids must be accompanied by sufficient descriptive literature and/or specifications to clearly identify the item and provide for competitive evaluation. Quotes should include the following:

1. Implementation fees, including purchase of required new hardware for end-to-end connectivity and initial configuration of network hardware.
2. Ongoing transmission fees for end-to-end connectivity.
3. Ongoing manufacturer maintenance for the new hardware that will be purchased from Cisco 24 x 7 x 4 Smart net support for 3 years.
4. Any other costs associated with the solution that may add cost to participants.

Bid proposals should identify all costs that are included in bid in sufficient detail as to confirm with the categories contained in the Rural Health Care Pilot Program Order 07-198, Appendix G, with the proposed solution, including installation, configuration, maintenance and any recurring costs.

Purchase price for each unit. Bundled pricing may be cited, but individual components must be identified and detailed pricing provide. Shipping cost for each unit or shipment shall be included as well.

All subcontracting shall be pre-approved by The Greater Minnesota Telehealth Broadband Initiative. The Prime Contractor/Bidder shall be responsible for all subcontractor(s) work and payment. The Greater Minnesota Broadband Initiative / SISU Medical Systems will not pay any subcontractor or third parties directly. Proof of release of liens of subcontractors will need to be submitted prior to invoice approval.

A deadline for bid submissions will be 30 days after the posting of the form 465 on the RHCPP web site. Program rules require the Form 465 and RFP to be posted for a minimum of 28 days, meaning that at a minimum a contract could not be signed until the 29th day after posting of the RFP. You must submit 2 copies of your proposal in hard copy format to SISU Medical Systems, c/o: John Saaristo, Multimedia Analyst, 5 W 1st St Suite 200 Duluth, MN 55802.

All bid proposals must understand and acknowledge USAC invoicing requirements and formats. Bidder will conform to invoicing procedures and processes as promulgated by USAC. Any successful bidder(s) is required to have a current Service Provider Identification Number (SPIN) as required by the Rural Health Care Pilot Program Order. A SPIN number may be obtained by contacting the Universal Services Administrative Company (www.usac.org)

All costs may not qualify for RHCPP funding. It is critical that accurate, detailed cost information should be provided for all portions of the bid proposal.

The project is subject to USAC procurement rules. Vendors must meet all USAC requirements. Project (GMTBI) has submitted a USAC Form 465, Form 465 Attachment(s) and RFP Scoping Document(s) and

USAC will post these documents on the USAC web site. More information on bidding and posting rules can be found at <http://www.usac.org/rhc-pilot-program/tools/search-postings-2008.aspx>

PROPOSAL EVALUATION

Any and all costs incurred by Vendor(s) in preparing and submitting a proposal are the Vendor(s) responsibility and **shall not** be charged to the GMTBI or reflected as an expense of the resulting contracts. Proposed vendor responses will be based on but not limited to the following:

- Compliance with RFP guidelines
- Compliance with new hardware requirements
- Compliance with Network IP Services such as QoS, DSCP and H.323
- Proposed implementation time frames
- Solution functions and features and suitability of vendor(s) solution(s) to meet project goals
- Cost of solution, both start-up construction and ongoing services
- GMTBI **shall not** accept multiple proposals from the same vendor.

The selection will be based on all factors indicated in this section, and may not go to the lowest bidder if cost is outweighed by a combination of other features in the winning vendor's bid.

The Greater Minnesota Broadband Initiative reserves the right to select bid proposals which, in the sole judgment of the GMTBI & SISU Medical Systems, most nearly conforms to the specifications set forth herein.

The GMTBI & SISU Medical Systems reserves the right to waive any and all issues of form or presentation in considering bid presentations for acceptance or rejection, if, in the sole opinion of the GMTBI & SISU Medical System, such waiver is in the best interests of the project.

The Greater Minnesota Telehealth Broadband Initiative is not responsible for any costs incurred by a vendor related to the preparation or delivery of the bid proposal, or any other activities carried out by the vendor as it relates to this RFP.

Changes in applicable laws and rules may affect the award process or any resulting contracts. Vendors are responsible for ascertaining pertinent legal requirements and restrictions. Vendors are encouraged to visit the official Federal websites pertaining to the Pilot Project, at <http://www.lifelinesupport.org/rhc-pilot-program/> and <http://www.fcc.gov/cgb/rural/rhcp.html>.

The selection decisions made by The GMTBI & SISU Medical Systems and reported to USAC under this RFP are final, and appeals or re-submissions will not be considered.

SISU Medical Systems, representing the GMTBI and Medi-sota, Inc. facilities reserves the right to issue any resulting order with the vendor(s) whose proposal, in the judgment of the group, most nearly conforms to the specifications and will best serve the needs of the Medi-sota participant members included in this request. SISU Medical Systems, Inc. on behalf the GMTBI and Medi-sota, Inc. are not obligated to accept any proposal received. It may accept proposals in whole or in part, or may reject all proposals.

CONTACT ON THIS RFP:

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ATTACHMENTS

Table 1.1
Network Map

TABLE 1.1

HCP Name	Connection	Termination Point	Router	Switch
Appleton Area Health Services	T1 - 5Mb	Rice Memorial	Cisco 2821 or equal	48 port - Cisco 3560 PoE or equal
Graceville Health Center	T1 - 5Mb	Rice Memorial	Cisco 2821 or equal	48 port - Cisco 3560 PoE or equal
Johnson Memorial Health Services	T1 - 5Mb	Rice Memorial	Cisco 2821 or equal	48 port - Cisco 3560 PoE or equal
Madison Lutheran Home	T1 - 5Mb	Rice Memorial	Cisco 2821 or equal	48 port - Cisco 3560 PoE or equal
Murray County Medical Center	T1 - 5Mb	Rice Memorial	Cisco 2821 or equal	48 port - Cisco 3560 PoE or equal
Sibley Medical Center	T1 - 5Mb	Rice Memorial	Cisco 2821 or equal	48 port - Cisco 3560 PoE or equal
Sleepy Eye Medical Center	T1 - 5Mb	Rice Memorial	Cisco 2821 or equal	48 port - Cisco 3560 PoE or equal
Rice Memorial Hospital	DS3-Clear Channel	SISU Medical Solutions	ASR 1004 or approved equal	48 port - Cisco 3560 PoE or equal

Hardware: Cisco ASR1004 Router or approved equal

Quantity	Product	Description
1	ASR1004	Cisco ASR1004 Chassis, Dual P/S
2	ASR1000-ESP10	Cisco ASR1000 Embedded Services Processor 10G, Crypto
1	ASR1000-RP1	Cisco ASR1000 Route Processor 1, 2GB DRAM
1	M-ASR1K-RP-4GB	Cisco ASR1000 RP1 4GB DRAM
1	M-ASR1K-HDD-40GB	Cisco ASR1000 RP1 40GB HDD
1	ASR1000-RP1	Cisco ASR1000 Route Processor 1, 2GB DRAM
1	M-ASR1K-RP-4GB	Cisco ASR1000 RP1 4GB DRAM
1	M-ASR1K-HDD-40GB	Cisco ASR1000 RP1 40GB HDD
1	ASR1000-SIP10	Cisco ASR-1000 SPA Interface Processor 10
1	MEMUSB-1024FT	1GB USB Flash Token for Cisco ASR 1000 Series
1	SASR1R1-AISK9	Cisco ASR 1000 Series RP1 Advanced IP Services
2	SPA-8XCHT1/E1	Cisco 8-port Channelized T1/E1 Shared Port Adapter
1	SPA-8X1GE-V2	Cisco 8-port Gigabit Ethernet Shared Port Adapter, Version 2
1	SPA-2XCT3/DS0	2-port Channelized T3 to DS0 Shared Port Adapter
2	ASR1004-PWR-AC	Cisco ASR1004 AC Power Supply
2	CAB-AC	Power Cord
1	ASR1000-Rack Kit	Cisco Rack Kit for ASR1000
1	ASR1000-SPA	SPA for ASR1000, No Physical Part, For Tracking Only
1	ASR1000-SPA	SPA for ASR1000, No Physical Part, For Tracking Only
1	ASR1000-SPA	SPA for ASR1000, No Physical Part, For Tracking Only
6	CON-SNTP-ASRESP10	SMARTNET 24X7X4 Cisco ASR1000 Embedded Services Processor
3	CON-SNTP-ASRRP1	SMARTNET 24X7X4 Cisco ASR1000 Route Processor 1,2GB DRAM
3	CON-SNTP-ASRRP1	SMARTNET 24X7X4 Cisco ASR1000 Route Processor 1,2GB DRAM
3	CON-SNTP-ASRSIP10	SMARTNET 24X7X4 Cisco ASR1000 SPA Interface Processor 10

3	CON-SNTP-ASR1K4	SMARTNET 24X7X4 Cisco ASR1004 Chassis, Dual P/S
3	CON-SNTP-ASRAISK	SMARTNET 24X7X4 Cisco ASR 1000 Series RP1 ADV IP SERVICE
3	CON-SNTP-8X1GEV2	SMARTNET 24X7X4 8-Port Gigabit Ethernet Shared Port Adapter
6	CON-SNTP-8XCHT1E1	SMARTNET 24X7X4 8Prt Channel T1/E1
3	CON-SNTP-2XCT3DSO	SMARTNET 24X7X4 2-port Channelized T3 to DS0 Shared

Hardware: Cisco 2821 Router or equal

Product	Description
C2821-WAE/K9	2821 SEC Bundle WAE-502 NM,Adv IP Serv,128F/256D
S28NRAISK9-12415T	Cisco 2800 AISK9-AISK9 FEAT SET FACTORY UPG FOR BUNDLES
MEM2821-256U512D	256 to 512MB DDR DRAM factory upgrade for the Cisco 2821
MAX-28/38-FLASH-BN	64 to 256 MB CF Factory Upgrade and 256MB USB Flash Token for 2800/3800
PWR-2821-51-AC-IP	Cisco 2821/51 AC/IP power supply
CAB-AC	Power Cord,110V
VVIC2-2MFT-T1/E1	2-Port T1/E1 Voice/WAN with Drop & Insert
NME-WAE-3020-K9	Cisco (WAAS) Network Module w/80 GB hard drive and 512MB memory
S28NAISK9	Cisco 2800 Advanced IP Services K9
ROUTER-SDM	Device manager for routers
MEM2800-64U256CF	64 to 256 MB CF Factory Upgrade for Cisco 2800 Series
MEM2800-256D-INC	256MB DDR DRAM Memory factory default for the Cisco 2800
CON-SNT-2821SRST	3 years SNT 8x5xNBD SmartNet

Hardware: Cisco 3560 48 Port POE Switch or equal

Product	Description
WS-3560-48PS-S	Cisco 3560 48 Port POE Switch
CON-SNTP-3560	3 years SNT 8x5xNBD

Medi-Sota, Inc Connectivity for FCC

Minnesota

Duluth

N

Graceville

Appleton

Madison

Dawson

Wilmar

Sibley

Sleepy Eye

Slayton

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