

REQUEST FOR PROPOSAL

“Montana Health Research and Education
Foundation”

RURAL HEALTHCARE PILOT PROJECT
FUNDING YEAR 2009

RFP-00

NETWORK INFRASTRUCTURE
PROCUREMENT

Montana Health Research and Education Foundation
1720 Ninth Avenue
P.O. Box 5119
Helena, Montana 59604-5119
Attn: Joan Miles, Project Coordinator

I. General Information

I.1. Introduction. The Montana Health Research and Education Foundation received Rural Healthcare Pilot Project funding on behalf of the Montana Healthcare Telecommunications Alliance for their Frontier Access to Healthcare in Rural Montana (FAhRM) project. The purpose of FAhRM is to build a statewide telecommunications backbone for health information technology. Participating network hubs are Eastern Montana Telemedicine Network (Billings), Partners in Health Telemedicine Network (Billings), REACH Montana Telehealth Network (Great Falls), Community Medical Center (Missoula), St Patrick Hospital and Health Sciences Center (Missoula), and Health Information Exchange of Montana (Kalispell).

I.2. Montana Health Research and Education Foundation's vision is to design and implement a robust, secure, sustainable, telehealth network that has sufficient scalable high capacity links from the above hubs to the cloud to support health care applications of the end to end networks allowing seamless, dynamic routing of data from the hub-managed partners to hub-managed partners. Montana Health Research and Education Foundation will utilize funding provided by the Federal Communications Commission ('FCC') under the Commission's order 07-198 ('Rural Healthcare Support Mechanism') of 19 November 2007, selecting participants for the Rural Healthcare Pilot Program, as well as matching and participatory funds as defined in the Order and provided by the Partners and their member sites and organizations.

I.3. Overview. Currently, the MHTA member networks (specifically EMTN, RMTN, and PHTN) collaborate through a VPN cloud managed by Cut Throat Communications, primarily for video conferencing. This cloud is configured as a mesh network allowing any network to connect with any other member network at any time. This is accomplished through individual members leased copper T1 into the existing vendor which provides the backbone routing on its network. The VPN network is configured as its own "subnet" allowing for quality of service, security and management between members. Network functionality is enhanced via each member's on-site bridges which provide firewall security and routing to the member networks. The Frontier Access to Healthcare in Rural Montana (FAhRM) FY08 project is designed to augment and enhance the existing wide-area networks of the Partners. Desired telehealth applications include the transport of diagnostic imaging and media, shared patient electronic health records, provider to provider consultation, Homeland Security initiatives and Disaster Readiness, clinical research functions and improved health education applications. The Montana Health Research and Education Foundation is soliciting bids from vendors, suppliers and service providers to provide the connectivity (carrier-based high capacity links and dedicated fiber optic cable installations) and required edge network electronics and devices.

I.4. Bidders are asked to provide proposals based on the accompanying site, routing, and technical information. Although consolidated bids for connectivity, hardware, and services will be considered as preferential (see Section 2), vendors are encouraged to submit bids for technological, logical, or geographical segments of the project. Thus, Montana Health Research and Education Foundation will entertain three types of bids under this RFP:

I.5. Consolidated – One inclusive price to provide connectivity, equipment, and services for any or all of the sites, areas, or regions according to the specifications set forth in this RFP.

I.6. Connectivity – Price to provide connectivity and carrier services for any or all of the sites, areas, or regions defined in this RFP.

I.7. Hardware – Price to provide hardware (logical network components, as defined herein) for any or all of the sites, area, or regions defined in this RFP.

I.8. The RFP process will allow Montana Health Research and Education Foundation to receive competitive offers for network development from independent telephone companies, local exchange carriers, cable operators, hardware distributors and manufacturers, cabling and construction contractors, and others. These competitive offers will be judged by Montana Health Research and Education Foundation according to the criteria set forth in Section 2.0 of his document.

1.0 Administrative and Procedural Information

1.1. The Rural Health Care Pilot Program ('RHCPP') of the Universal Service Fund, which is administered by the Universal Service Administrative Company (USAC), is a support program authorized by Congress and designed by the Federal Communications Commission (FCC) to encourage the development of rural high capacity networks to provide advanced healthcare telecommunications capabilities and services to rural health care providers (HCPs).

1.2. Notice: This project is subject to the USAC procurement rules. Vendors must meet all USAC requirements. Montana Health Research and Education Foundation will submit a USAC Form 465 to USAC who will review the documentation and will post the RFP on the USAC website. More information on bidding and posting rules can be found at <http://www.lifelinesupport.org/rhc-pilot-program/vendors>.

1.3. The following considerations apply to the proposal submission / review process:

1.3.1. Any and all questions regarding this RFP should be submitted in writing and directed to the website FAHRM.com. All vendor questions and program answers regarding this project will be shared on this site.

1.3.2. In the event it becomes necessary for Montana Health Research and Education Foundation to amend, add to or delete any part of this RFP, the amendment will be posted on the USAC web site, as required by the Order and by the USAC-mandated bidding procedures.

1.3.3. Bid proposals must be received at the Montana Health Research and Education Foundation office no later than 3PM, Mountain Time on the allowable contract date posted on the Rural Health Care Pilot Program website. This receipt deadline requirement is a mandatory requirement and is not subject to waiver by Montana Health Research and Education Foundation. Accordingly, no bid proposals will be accepted after the date and time specified. A late bid proposal will be returned unopened to the bidder.

1.3.4. No bid proposal will be accepted by telephone, electronic mail or facsimile. The proposal receipt deadline is for actual receipt in the Montana Health Research and Education Foundation office as identified below. Delivery, whether via postal mail or other service, must be arranged to assure arrival before the deadline set forth above.

1.3.5. Bid proposals must be mailed or otherwise physically delivered to the following address:

**Montana Health Research and Education Foundation
FAhRM Project
1720 Ninth Avenue
P.O. Box 5119
Helena, Montana 5960-5119
Attn: Joan Miles, Project Coordinator**

It is strongly suggested that certified delivery services be used to verify the receipt of bids by Montana Health Research and Education Foundation, FAhRM Project.

1.3.6. Bid Proposals will be opened at 3PM, Mountain Time on the allowable contract date posted on the Rural Health Pilot Program website. The bid proposals and the evaluation documents created by Montana Health Research and Education Foundation will remain confidential until Montana Health Research and Education Foundation has evaluated all compliant bid proposals submitted in response to this RFP and the selection process is complete. Once the evaluation and selection

process is complete, the bid proposals submitted and the evaluation documents created by the Montana Health Research and Education Foundation will be made available for inspection.

1.4. Bid Proposal General Requirements

1.4.1. Failure to comply with or supply any and all information requested to accompany bid proposals may be cause for rejection of the proposal as non-compliant.

1.4.2. All bid proposals must be valid for a period of 60 days from the date of submission.

1.4.3. By submitting a bid proposal the vendor agrees to the terms and conditions contained within this RFP.

2.0 Proposal Evaluation and Contract Terms

2.0.1. Vendor's response to the RFP demonstrates a clear and complete understanding of the goals of the overall project.

2.0.2. Bidder's proposition for providing the consolidated project needs – i.e., proposals that combine connectivity, hardware, and services.

2.0.3. The above notwithstanding, vendors may bid for connectivity or network edge hardware exclusively.

2.0.4. Bidders will conduct site visits to each Partner location and will evaluate and document the individual requirements at each site to connect to the statewide backbone infrastructure.

2.0.5 Bidders response to RFP will include Company experience and knowledge of the Montana Telehealth Network.

2.0.6. Implementation timeline must begin as soon as possible after contract signing and must be mutually agreed upon by both parties. Bid proposals must include a project plan and timeline detailing milestones and overall schedule. Critical path items and potential delay circumstances must be clearly identified.

2.0.7. Connectivity services – 5 year duration.

2.0.8. Hardware service and maintenance – 5 year duration.

2.0.9. Service Level Agreements and/or Performance guarantees, including uptime and response time guarantees.

2.0.10. Proposed system testing and acceptance provisions will be required on all bid proposals. Montana Health Research and Education Foundation reserves the right to work in concert with vendors to develop appropriate testing and acceptance criteria for specific installations or configurations, to be defined and accepted by both parties prior to contract initiation.

2.0.11. Any contract resulting from this RFP will contain specific deliverable item acceptance provisions.

2.0.12. Bid proposals will contain acknowledgement of, and provisions for providing, USAC invoicing requirements and formats. Bidder will conform to invoicing procedures and processes as promulgated by USAC.

2.0.13. Bidder agrees to provide a project manager or other individual who will be the primary contact for all dealings with Montana Health Research and Education Foundation.

2.1. Design Compatibility

2.1.1 Bidder's proposal accounts for existing network design within the Partner network(s) to which its bid applies, and does not require re-grooming or reconfiguration of circuits or transports not directly impacted by the project. (This requirement does not include the decommissioning of existing circuits being replaced by new specified circuits.)

2.1.2 Bid proposals for redundant / resilient site connections will be evaluated on a cost

effective basis for the specific site(s) involved, and may be accepted for a single-circuit connection on that basis.

2.2 Hardware Components

2.2.1. Bidder's proposal accounts for existing hardware components and network logical and physical topology, and does not impose restrictions or reconfiguration requirements to accommodate specifications of proposed equipment that do not meet RFP requirements. (This requirement does not include the reconfiguration or decommissioning of existing equipment being replaced by new specified devices.)

2.2.2. Bidder's proposal includes maintenance and support contract options.

2.2.3. Bidder's proposal includes only those installation and configuration services specifically requested in the RFP.

2.3 Provider / Vendor Qualifications

2.3.1. Bidder possesses the ability to provide proposed services or products in the manner and within the timeline(s) specified in the RFP, as determined by Montana Health Research and Education Foundation, based on:

2.3.1.1. Client references to be provided;

2.3.1.2. Reputation in the industry;

2.3.1.3. Past performance in the experience of one or more of the Frontier Access to Healthcare in Rural Montana partners (if applicable);

2.3.1.4. Objective qualifications of key staff and proposed project personnel;

2.3.1.5. Bidder's proposal includes only those installation and configuration services specifically requested in the RFP.

2.4 Cost

2.4.1 Montana Health Research and Education Foundation will select a cost effective bid or bids presented that meet the requirements of the RFP, whether that is a consolidated bid for all sites in the Frontier Access to Healthcare in Rural Montana (FAhRM) consortium, as defined herein or site-by-site bids for connectivity or hardware.

2.4.2. Bid proposals must identify all costs associated with the proposed solution, including engineering, installation, configuration, maintenance, and monthly recurring costs.

Specifically, for connectivity proposals:

2.4.2.1. Implementation fees, including one-time connection or provisioning charges and hardware costs.

2.4.2.2. Monthly recurring charges amortized over the period of the proposed contract, for transmission at the proposed bandwidth, port charges, transport charges, taxes, fees, and assessments.

2.4.2.3. Contract termination provisions, including specific penalties, if any, for early termination by Montana Health Research and Education Foundation.

Specifically, for hardware and fiber installation proposals:

2.4.2.4. Purchase price for each unit. Bundled pricing may be cited, but individual components must be identified and detailed pricing provided.

2.4.2.5. Shipping costs for each unit or shipment.

2.4.2.6. Engineering, configuration and installation charges.

2.4.2.7. Taxes, permits, fees, licenses.

2.4.2.8. Maintenance and/or support charges for the proposed contract period.

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

2.5 Evaluation and Decision

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

2.5.2. Montana Health Research and Education Foundation reserves the right to select bid proposals which, in the sole judgment of Montana Health Research and Education Foundation, most nearly conforms to the specifications set forth herein, and will best serve the needs of Montana Health Research and Education Foundation and its Partners and participants, and provides the most cost-effective means for producing those results.

2.5.3. Montana Health Research and Education Foundation 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 Montana Health Research and Education Foundation such waiver is in the best interests of the project.

2.5.4. Montana Health Research and Education Foundation 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.

2.5.5. Montana Health Research and Education Foundation is not obligated to accept any proposal received in response to this RFP. In particular, Montana Health Research and Education Foundation may accept received proposals in whole or in part, or it may reject all proposals received.

2.4.6. 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>.

2.4.7. The selection decisions made by Montana Health Research and Education Foundation and reported to USAC under this RFP are final, and appeals or re-submissions will not be considered.

3.0 Site, Routing, and Technical Information

3.1. The Frontier Access to Healthcare in Rural Montana project consists of the addition and enhancement of high capacity connectivity to the cloud and concomitant hardware to six hub sites in Montana, in support of the project's selection as a participant on the FCC Rural Healthcare Pilot Program.

3.2. The project requires high capacity connectivity and site-based network routing hardware. The requirements for this RFP are grouped by Partner to enable vendors to most effectively evaluate the site(s) for which to submit proposal(s) keeping in mind that this RFP requires connecting the six network sites to the cloud only and does not include network changes to the Partners network sites.

3.3. Bidders are cautioned that most sites in all Partner regions are currently utilizing circuits funded in part by the Rural Health Care Program, administered by USAC. All connectivity bids solicited under this RFP are for newly-provisioned circuits from the network hubs to the cloud. No bid may include any change, updating, or "re-grooming" of any circuit currently being funded by the Rural Health Care Program. Further, installation timing of new circuit installations must be coordinated such that existing circuits are decommissioned as the new, RHCPP-supported circuits are installed. Bids failing to meet these requirements will be rejected without further consideration.

Appendix A: Site Connectivity Drawings

The following drawings provide a graphical depiction of the connectivity of the member partners and associated hubs. The drawings are intended to provide an overview only. In the event of a discrepancy between the drawings and any Detail Site Specifications or any written description or specification in this RFP, the written version shall be considered to be authoritative.

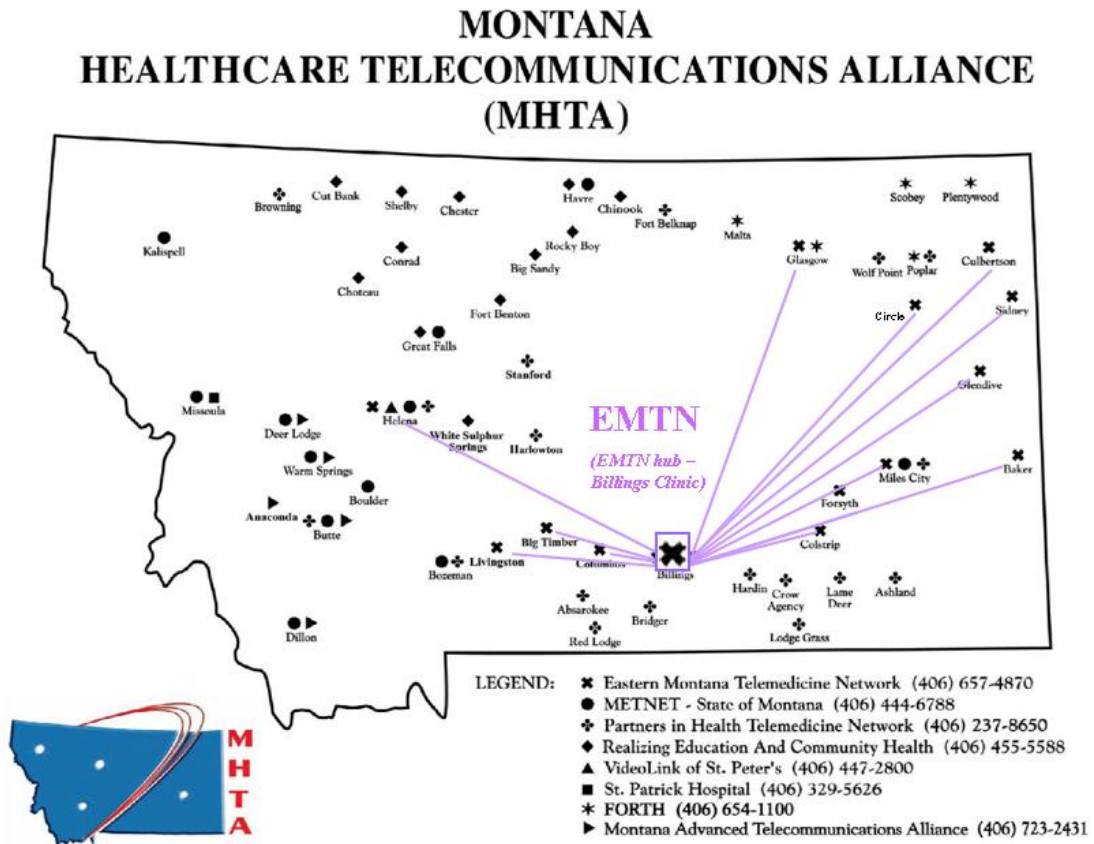
3.4. Partner 1: Eastern Montana Telemedicine Network:

3.4.1 All high capacity links specified are to provide transport between the indicated Partner sites and the Eastern Montana Telemedicine Network hub site located at the Billings Clinic, 2800 Tenth Avenue North, Billings, Montana.

3.4.2 Bidders are required to propose a specific solution to provide the backhaul services and connectivity needed to accomplish the goal of connecting the hub to the cloud.

3.4.3 Site connectivity backhaul redundancy and resiliency should be proposed when possible, to provide separate physical and logical paths for redundant circuits.

3.4.4 Physical facilities and provisioning to the demarcation point of each network hub must be included in the recommended solution.



Eastern Montana Telemedicine Network Partners:

Billings Clinic (data center)	2800 Tenth Ave N	Billings, MT.
Livingston Health Care	504 S 13th Street	Livingston, MT.
Colstrip Medical Center	6230 Main Street	Colstrip, MT.
Pioneer Medical Center	301 W 7th Ave	Big Timber, MT
Frances Mahon Deaconess Hospital	621 3rd St S	Glasgow, MT.
Eastern Montana Community Mental Health	2508 Wilson Lane	Miles City, MT.
Beartooth Hospital & Health Center	620 West 21st St.	Red Lodge, MT.
McCone County Health Center	605 Sullivan Rd	Circle, MT.
Sidney Health Center	216 14th Ave SW	Sidney MT.
Dahl Memorial Healthcare Assoc	215 Sandy Street	Ekalaka, MT.
Fallon Medical Complex	202 S 4th St W	Baker, MT.
Roosevelt Medical Center	818 Second Ave E	Culbertson, MT.
Stillwater Community Hospital	44 West 4th Ave N	Columbus, MT.
Glendive Medical Center	202 Prospect Dr.	Glendive, MT.

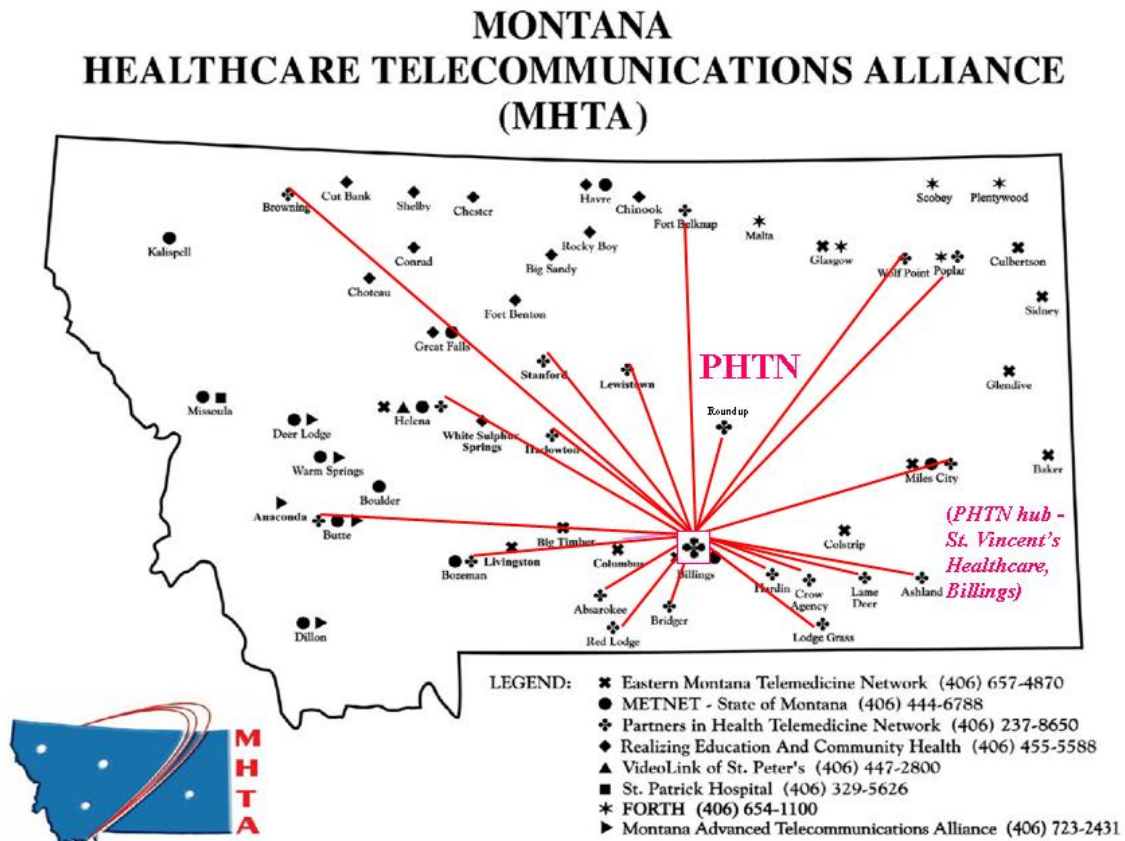
3.4. Partner 2: Partners in Health Telemedicine Network:

3.4.1 All high capacity links specified are to provide transport between the indicated Partner sites and the Partners in Health Telemedicine Network hub site located in St Vincent Health Care, 1233 N 30th Street, Billings, Montana.

3.4.2 Bidders are required to propose a specific solution to provide the backhaul services and connectivity needed to accomplish the goal of connecting the hub to the cloud.

3.4.3 Site connectivity backhaul redundancy and resiliency should be proposed when possible, to provide separate physical and logical paths for redundant circuits.

3.4.4 Physical facilities and provisioning to the demarcation point of each network hub must be included in the recommended solution.



Partners in Health Telemedicine Network Partners:

St. Vincent Health Care (data center)	1233 North 30th St.	Billings, MT.
Ashland Community Health Center	501 Main Street	Ashland, MT.
Bozeman Deaconess Health Services	915 Highland Blvd	Bozeman, MT.
St. James Healthcare	400 South Clark	Butte, MT.
West Park Hospital	707 Sheridan Ave	Cody, WY.
Barrett Hospital & HealthCare	90 Highway 91 South	Dillon, MT.
Wheatland Memorial Healthcare	530 3rd St NW	Harlowton, MT.
Holy Rosary Healthcare	2600 Wilson Street	Miles City, MT.
Roundup Memorial Healthcare	1202 Third St West	Roundup, MT.
Central Montana Medical Center	408 Wendell Ave	Lewistown, MT.
Mountain View Clinic	501 W 20th	Red Lodge, MT
Absarokee Medical Center	55 N Montana Ave	Absarokee, MT.
Hardin Clinic	16 N Miles Ave	Hardin, MT.

3.4. Partner 3: REACH Montana Telehealth Network:

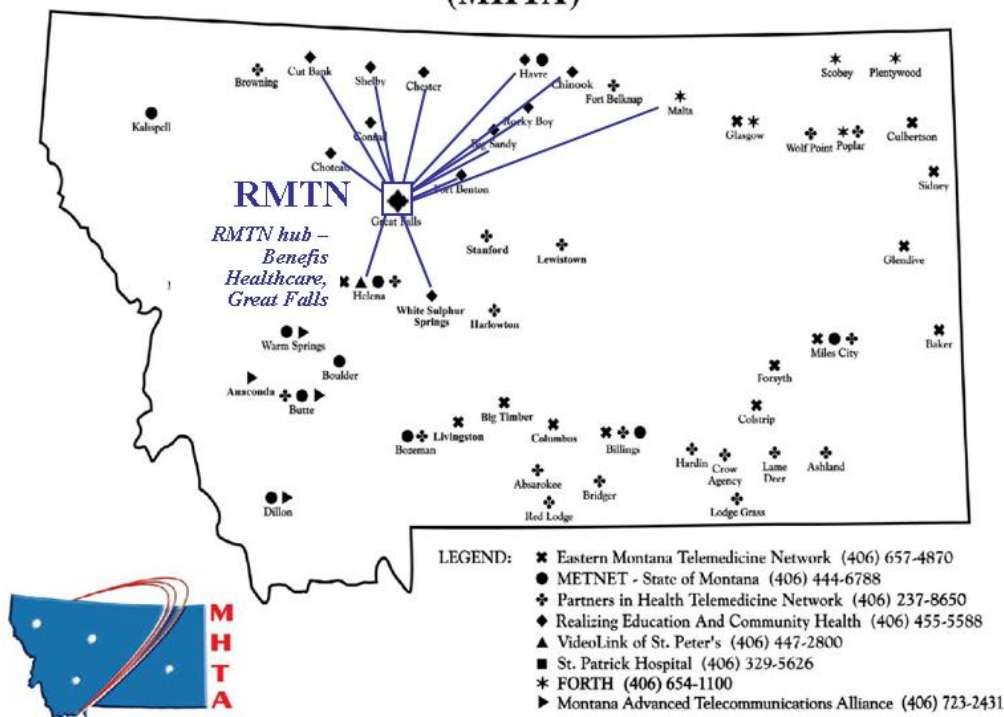
3.4.1 All high capacity links specified are to provide transport between the indicated Partner sites and the REACH Montana Telehealth Network hub site located at Benefis Hospital, 1101 26th Street South, Great Falls, Montana.

3.4.2 Bidders are required to propose a specific solution to provide the backhaul services and connectivity needed to accomplish the goal of connecting the hub to the cloud.

3.4.3 Site connectivity backhaul redundancy and resiliency should be proposed when possible, to provide separate physical and logical paths for redundant circuits.

3.4.4 Physical facilities and provisioning to the demarcation point of each network hub must be included in the recommended solution.

MONTANA HEALTHCARE TELECOMMUNICATIONS ALLIANCE (MHTA)



REACH Montana Telehealth Network Partners:

Benefis Hospital (East Campus, data center)	1101 26th Street S	Great Falls, MT
Benefis Hospital (West Campus)	500 15th Ave S	Great Falls, MT
Big Sandy Medical Center	166 Montana Ave E	Big Sandy, MT.
Liberty Medical Center	Monroe & Highway 03	Chester, MT.
Teton Medical Center	915 4th Street NW	Choteau, MT.
Pondera Medical Center	805 Sunset Blvd.	Conrad, MT.
Northern Montana Healthcare	30 13th Street	Havre, MT.
Phillips County Hospital	311 South 8th Ave E	Malta, MT.
Marias Medical Center	640 Park Drive	Shelby MT.
Mountainview Medical Center	16 W Main	White Sulphur Springs, MT.
Missouri River Medical Center	1501 St. Charles St	Fort Benton, MT.

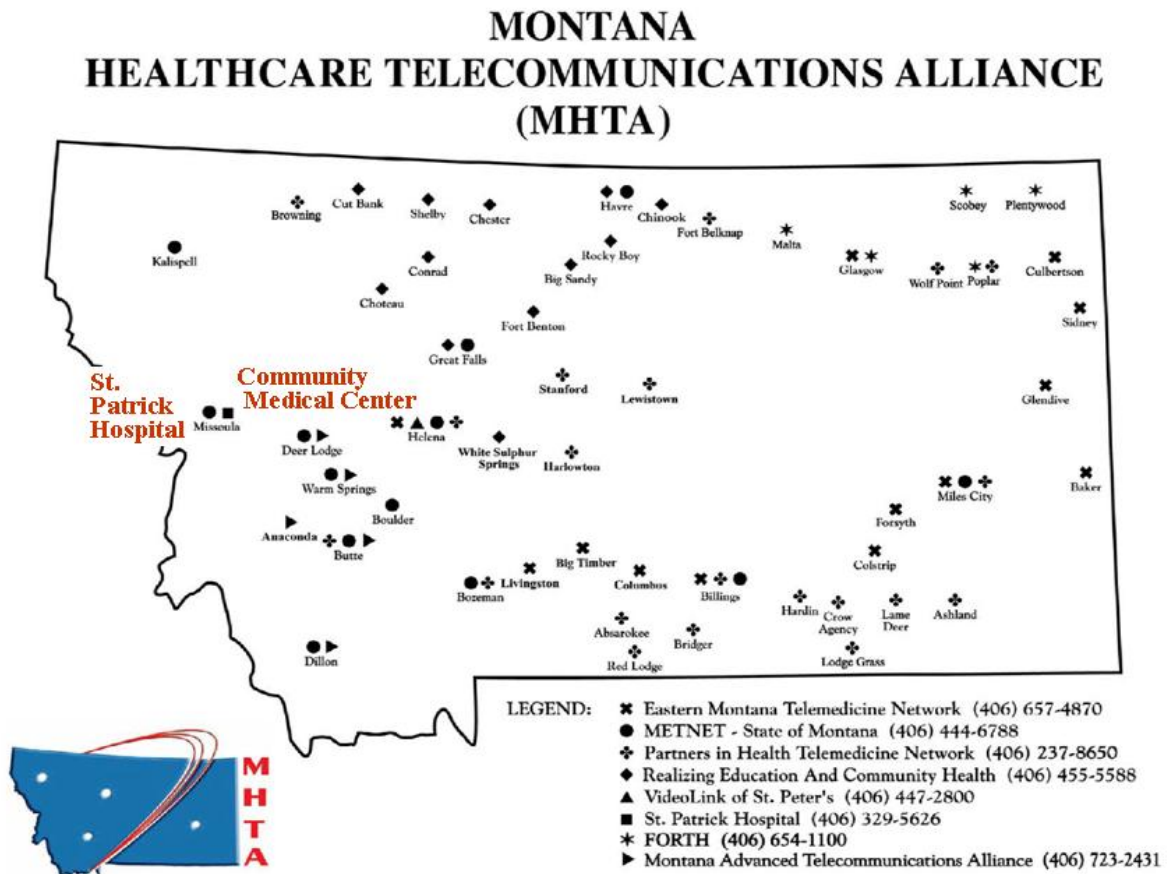
3.4. Partner 4: Community Medical Center:

3.4.1 All high capacity links specified are to provide transport between the indicated Partner sites and the Community Medical Center hub site located at 2827 Fort Missoula Road located in Missoula, Montana.

3.4.2 Bidders are required to propose a specific solution to provide the backhaul services and connectivity needed to accomplish the goal of connecting the hub to the cloud.

3.4.3 Site connectivity backhaul redundancy and resiliency should be proposed when possible, to provide separate physical and logical paths for redundant circuits.

3.4.4 Physical facilities and provisioning to the demarcation point of each network hub must be included in the recommended solution.



Community Medical Center Partners:

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No partners at this time.

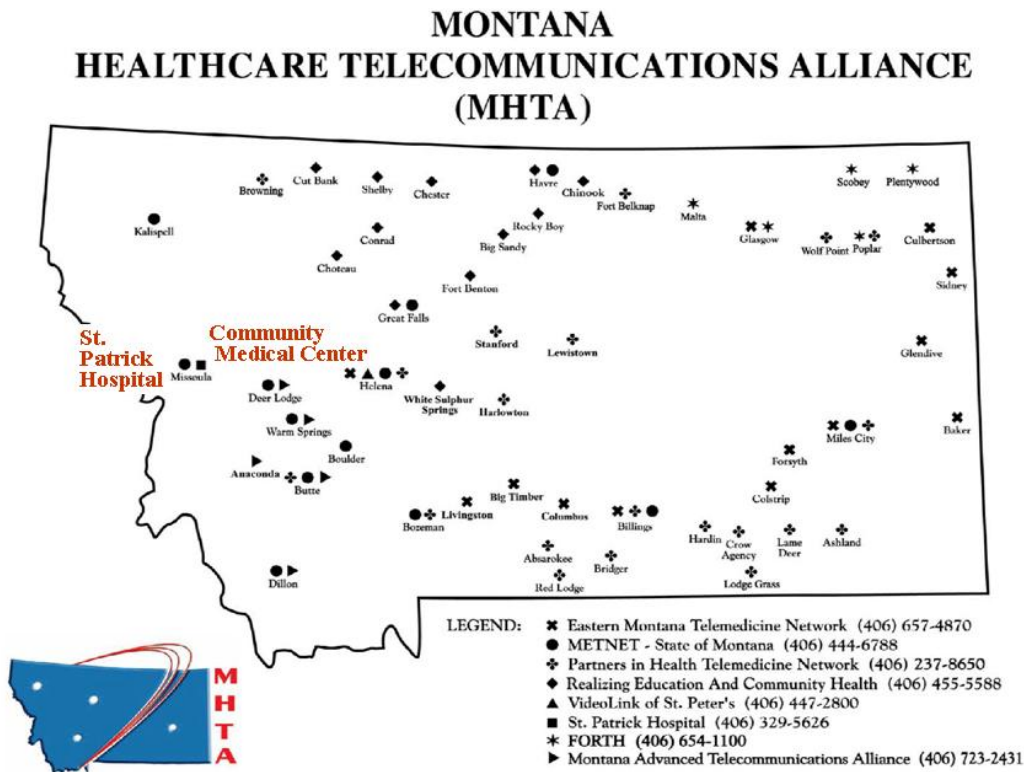
3.4. Partner 5: St Patrick Hospital and Health Sciences Center:

3.4.1 All high capacity links specified are to provide transport between the indicated Partner sites and the St Patrick Hospital and Health Sciences Center hub site located at 500 West Broadway, Missoula, Montana.

3.4.2 Bidders are required to propose a specific solution to provide the backhaul services and connectivity needed to accomplish the goal of connecting the hub to the cloud.

3.4.3 Site connectivity backhaul redundancy and resiliency should be proposed when possible, to provide separate physical and logical paths for redundant circuits.

3.4.4 Physical facilities and provisioning to the demarcation point of each network hub must be included in the recommended solution.



St Patrick Hospital and Health Sciences Center Partners:

No partners at this time.

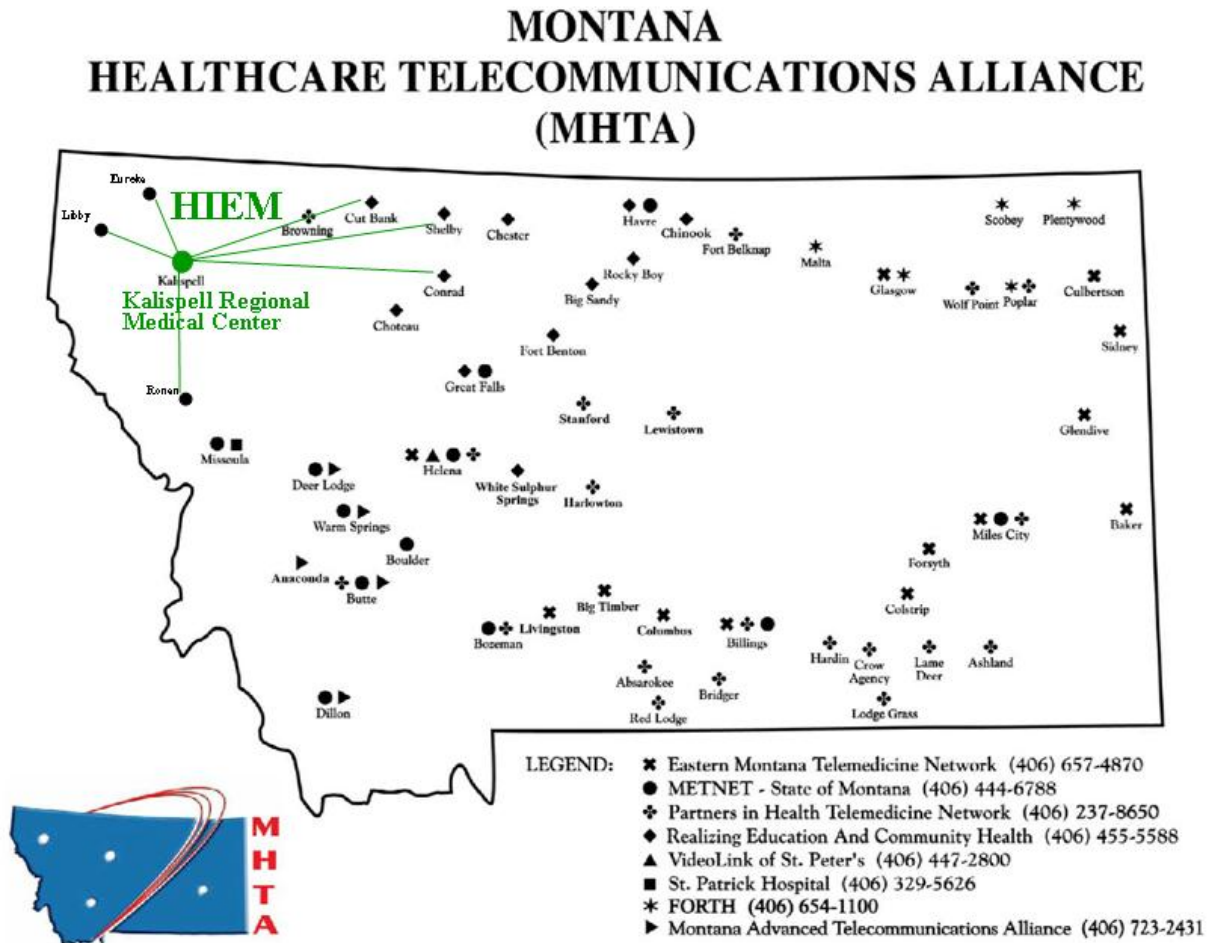
3.4. Partner 6: Health Information Exchange of Montana:

3.4.1 All high capacity links specified are to provide transport between the indicated Partner sites and the Health Information Exchange of Montana hub site located in Kalispell Regional Medical Center, 310 Sunnyview Lane, Kalispell, Montana.

3.4.2 Bidders are required to propose a specific solution to provide the backhaul services and connectivity needed to accomplish the goal of connecting the hub to the cloud.

3.4.3 Site connectivity backhaul redundancy and resiliency should be proposed when possible, to provide separate physical and logical paths for redundant circuits.

3.4.4 Physical facilities and provisioning to the demarcation point of each network hub must be included in the recommended solution.



Health Information Exchange of Montana Partners:

Kalispell Regional Medical Center (data center)	310 Sunnyview Ln	Kalispell, MT.
Glacier Community Health Center	519 East Main Street	Cut Bank, MT.
Lincoln County Community Health Center	320 East Second St	Libby, MT.
North Valley Hospital	1600 Hospital Way	Whitefish, MT.
Northern Rockies Medical Center	802 2nd St SE	Cut Bank, MT.
St. John's Lutheran Hospital	350 Louisiana Ave	Libby, MT.
St. Luke Community Healthcare	107 6th Ave SW	Ronan, MT.

3.4.5. Edge Hardware (Router) Requirements

3.4.5.1. Routers are required for most sites.

3.4.5.2. Routers must be compatible with existing network hardware in each Partner region on a functional, configuration, and physical level.

3.4.5.3. General information for the equipment types should be specified. This information should be based on products by vendor name.