

Starting Date: 08/6/25

Closing Date: 10/01/25

Request for Proposal (RFP)

Electronic Health Record (EHR)

Tehama County Sheriff's Office and Tehama County Probation Department

Purpose

Tehama County Sheriff's and Probation Office has issued this Request for Proposal ("RFP") for the provision, implementation, and ongoing maintenance of an Electronic Health Record ("EHR") optimized for use in correctional facilities, with a go-live date of November 1, 2025, that meets the requirements outlined in this RFP. All interested parties are invited to submit proposals.

Background

Tehama County Jail, located at 502 Oak St., Red Bluff, CA 96080, houses an average of 197 inmates daily; the Juvenile Hall at 1790 Walnut St., Red Bluff, CA 96080, houses an average of 25 individuals daily. We currently use a manual, paper-based system (hard files) for health records and are seeking an Electronic Health Record (EHR) system to modernize and centralize records management for both facilities.

The Jail has approximately 41 staff and the Juvenile Hall has 25 staff members. We anticipate 8 concurrent users of the new EHR system across both sites. Integration with Tehama County Health Services is critical, especially for coordinating medical care and mental health treatment. No current electronic legacy system is in use, but any new system must be compatible with county IT security protocols and potential interfaces with regional health or justice information systems.

EHR Requirements

Tehama County Sheriff's Office seeks to develop a collaborative relationship with an EHR Vendor that will provide the software necessary to support the varied healthcare services provided within the correctional setting(s). We are looking for a Vendor that will commit the resources necessary to keep EHR product up to date to help us meet the challenges of the continual changing health care and IT needs related to correctional health in California. The Vendor submitting the proposal will bear all responsibility for ensuring the functionality of the EHR System along with any third-party add-ins by their subcontractors.

The following are the areas of support the new EHR System must include, but are not limited to:

Functional Capabilities

- Eligibility Verification - 270/271 format
- Scanning
- Demographic data management
- Claims file transmission 837/835
- Release Management
- Rx Management and e-Prescribing
- Order Entry

- Coding functionality (ICD-10 and diagnosis codes)
- Internal reports for clinical and productivity purposes
- Custom reporting capabilities

IT Security Requirements

- Must be compliant with the following federal and Tehama County IT and Security Requirements. Including:
 - HIPAA Privacy and Security Compliance
 - Maintain HIPAA-compliant policies and procedures
 - Ensure staff are trained on HIPAA requirements
 - Sign a Business Associate Agreement
 - CJIS Compliance (if applicable)
 - Data Encryption
 - In transit using 1.2 or higher
 - At rest using AES-256 or equivalent NIST-approved standards
 - Backups must be encrypted and securely stored
 - Authentication and Access Controls
 - Solutions must utilize Role-Based Access Control (RBAC) aligned with principle of least privilege
 - Two-Factor Authentication(2FA) must be centrally managed and enforced for administrator and remote access.
 - Account activity must be logged and monitored
 - Audit Logging
 - User logins and attempts
 - Access to, and Edit, of patient records
 - Administrative and configuration changes
 - Tamper-evident and exportable
 - Disaster Recovery and Data Backup
 - Vulnerability and Penetration Testing
 - Annual third-party penetration testing, with reporting available upon request
 - Quarterly vulnerability scanning, with critical issues remediated within 30 days
 - System Hosting and Data Residency
 - Hosted solutions must store all data within the continental United States
 - Must disclose all hosting partners and third-party providers
 - Required Supporting Documentation
 - Copy of current HIPAA compliance statement
 - BAA
 - Summary of most recent SOC 2 Type II, ISO 27001, or similar security audit
 - Recent penetration test summary from past 12 months
 - Sample Service Level Agreement (SLA) with metrics

Additional Requirements

- Meaningful Use Certified
- Must meet Payor requirements and changes

Proposed EHR System Go Live Date: November 1, 2025

RFP Timeline

Please see the submission schedule below. All responses to this RFP must be received electronically by October 1, 2025

RFP Submission Schedule	
Process	Due Date
Issue RFP	August 6, 2025
Submission of Letter of Intent	August 18, 2025
RFP Responses Due Electronically	October 1, 2025
Evaluation Period	October 2-19, 2025
Selected Vendors Notified to Conduct Demonstrations	October 23, 2025
Vendor Demonstration Dates	TBD
Contact Selected Vendors Reference	TBD
Selection Committee Deliberation	TBD
Vendor of Choice Selected & Notified	TBD
Initiate best and final negotiations	TBD

Response Deadline

All proposals must be submitted by email. Interested Vendors must submit an electronic copy of their proposed solution to jcrane@tehamaso.org by the date and time indicated in the schedule.

Submission Format

Responses should be submitted in Microsoft Word, Microsoft Excel, and/or Adobe PDF formats.

General Information

Right to Accept or Reject Any or All Proposals

Tehama County Sheriff’s Office is not obligated to any course of action as the result of this RFP. This RFP does not commit the Tehama County Sheriff’s Office to make an award, nor does it obligate it to pay any costs incurred by Vendors in the preparation and submission of proposals in anticipation of a contract. The Tehama County Sheriff’s Office reserves the right to modify this RFP at any time and reserves the right to reject all responses to this RFP, in whole or in part, at any time.

Negotiation

The Tehama County Sheriff’s Office reserves the right to negotiate with Vendors determined to have a reasonable chance of being selected. All such Vendors shall be afforded fair and equal treatment with respect to such negotiations, and no such Vendor shall be given information that would give that Vendor a competitive advantage over any other Vendor.

References

The Tehama County Sheriff’s Office requires Vendors to furnish, with this proposal, a list of at least three (3) references of facilities utilizing the Vendor’s EHR. Ideal references would include at least one of the references be from a correctional facility. Include the name of the customer, address, contact name, email, and telephone number.

1. Executive Summary

Please provide a brief description of company and services, including history, ownership, number of employees, and number of facilities the Vendor currently supports. Describe your proposed EHR System in non-technical terms, including any unique or distinctive features of the system. Include in this summary your experience and use in maintaining an EHR in correctional settings.

2. Vendor Profile

Using the template below, please provide the requested information on your organization.

2. Vendor Profile	
General	
Name	Click here to enter text.
Address (Headquarters)	Click here to enter text.
Main Telephone Number	Click here to enter text.
Parent Company (if applicable)	
Name	Click here to enter text.
Address	Click here to enter text.
Telephone Number	Click here to enter text.
Primary Proposal Contact	
Name	Click here to enter text.
Title	Click here to enter text.
Address	Click here to enter text.
Telephone Number	Click here to enter text.
Fax Number	Click here to enter text.
Email Address	Click here to enter text.
Market Data	
Number of years as EHR Vendor?	Click here to enter text.
Total number of facilities in how many states? How many are live and how and many are in implementation?	Click here to enter text.
Total number of end users?	Click here to enter text.
Does the product have a California presence?	Yes/No.
Does the Vendor have experience with correctional healthcare?	Yes/No.

3. Technical Response

Product name and version #?	Click here to enter text.
How frequently are versions released? When is the next version release?	Click here to enter text.
Single Database for billing and EHR?	Yes/No.
Is it a Client Server, ASP or Hosted model?	Yes/No.

Will there ever be a charge to copy, move, or retrieve patient data from the product should a customer decide to change Vendors, or a provider leave the customer?	Yes/No.
Is the product certified electronic health record technology (CEHRT)?	Click here to enter text.
Are the modules necessary to meet each of the menu set objectives included in the attached pricing, or are they sold separately at an additional cost?	Click here to enter text.
Is a demo copy available prior to purchasing?	Yes/No.
Onsite implementation or remote?	Click here to enter text.
Has your company acquired, been acquired, merged with other organizations, or had any "change in control" events within the last five (5) years?	Yes/No. If yes, please elaborate.
Please provide information on any outstanding lawsuits or judgments within the last five (5) years. Please indicate any cases that you cannot respond to as they were settled with a non-disclosure clause.	Click here to enter text.
Does the product meet all HIPAA, 42 CFR Part 2, HITECH, and other security and privacy requirements?	Yes/No.
Does the product provide different levels of security and privacy based on User Role, Site, and/or Enterprise settings?	Yes/No.
Is there a security audit process or log within the product?	Yes/No.
Describe the product's ability to lockout users (for upgrades, security breaches, employee terminations, etc.).	Click here to enter text.
Describe how the patient's data is always secured and in all modules of the product (e.g., strong password protection or other user authentication, data encrypted at rest, data encrypted in motion).	Click here to enter text.
Describe how the patient's data is secured when accessed via handheld devices (e.g., secured through SSL websites, iPhone apps, etc.).	Click here to enter text.
Licensing	
How is the product licensed?	Click here to enter text.
Are licenses purchased per user?	Yes/No.
Define 'user' if it relates to the licensing model (i.e., FTE MD, all clinical staff, etc.).	Click here to enter text.
<ul style="list-style-type: none"> How does the system licensing account for residents, part time clinicians, and midlevel providers? 	Click here to enter text.
<ul style="list-style-type: none"> Can user licenses be reassigned when a workforce member leaves? 	Yes/No.
If licensing is determined per workstation, do handheld devices count towards this licensing?	Yes/No.
Is system access based on individual licensing, concurrent, or both?	Click here to enter text.
For modular systems, does each module require a unique license?	Yes/No.
In concurrent licensing systems, when are licenses released by the system (i.e., when the workstation is idle, locked, or only when user logs off)?	Click here to enter text.

Vendor Support	
<p>Customer support:</p> <ul style="list-style-type: none"> Preferred method of contact? Where is your customer support staff located? What are your normal hours of support? How is after-hours support handled? 	Click here to enter text.
<p>Problem/Resolution Process:</p> <ul style="list-style-type: none"> Prioritization rubric Response time expectations Escalation Process Issue Tracking System 	Click here to enter text.
<p>Who has ownership of the following:</p> <ul style="list-style-type: none"> Data Software Enhancements or Customizations Paid for by Customer Servers 	Click here to enter text.
<p>Upgrade Process:</p> <ul style="list-style-type: none"> Will customer get to choose which upgrades they want? Frequency of upgrades? How long can a customer delay an upgrade without losing support? Will training be provided for new functionalities? 	Click here to enter text.
<p>Implementation Process:</p> <ul style="list-style-type: none"> What is the typical implementation timeline? Is there a customer guide and project plan for implementation activities? Is there the ability for data to be migrated from previous EHRs? Will Vendor staff be onsite during 'Go Live' timeframe? 	Click here to enter text.
<p>Testing:</p> <ul style="list-style-type: none"> Will customer get access to test scripts from Vendor? Will customer have an opportunity to conduct Acceptance Testing? 	Click here to enter text.
<p>Product Enhancement Requests:</p> <ul style="list-style-type: none"> If customer wants to add an enhancement, what is the process? How are enhancement requests evaluated and, if appropriate, prioritized? How will the company stay up to date on required meaningful use definition changes? 	Click here to enter text.
<p>Is training documentation provided? What type of documentation, for example, training manuals, quick reference guides, etc.? Is training documentation provided in an electronic format that we will be able to edit?</p>	Click here to enter text.

Will a workflow assessment be completed by the Vendor? <ul style="list-style-type: none"> Will Vendor complete onsite workflow assessment? Is there an additional cost for workflow assessment? 	Click here to enter text.
Will recommendations be provided for abstracting or bulk loading data from paper charts into the EHR?	Yes/No.
Is there a guarantee to provide maintenance (or other support) on this product?	Yes/No.
Are regulatory changes to the EHR included in the annual maintenance?	Yes/No.
If not, please include/describe how costs are incurred for those changes.	Click here to enter text.
Regulatory Changes	
How are changes required by Payors handled?	Click here to enter text.
Is there a cost?	Yes/No.
How are changes required by the State handled?	Click here to enter text.
Is there a cost?	Yes/No.

4. Data Export, Migration, and Reporting

Data Importing/Exporting	
What formats can data be exported in?	Please List All.
What formats can data be imported in?	Please List All.
Reporting	
What technologies are used to build reports in the system?	Please List All.
Is ad-hoc reporting by users an option?	Yes/No.
Please summarize the set of standard reports and dashboards provided to all custom	Please List All.
Migration	
Do you have an established methodology for data migration?	Yes/No.
What will be migrated and in what format(s)?	<List>
What data will not be migrated?	<List>
Is there additional cost for data migration?	Yes/No.

5. Billing and Claims Management Functionality

Enrollment/Eligibility Verification
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Describe any health plan enrollment/eligibility functionality within the system? (real-time, batch eligibility, etc.)	Click here to enter text.
What formats can data be imported in?	Please List All.
Claims Processing	
Does the system have the ability to send claims via 837 file formats?	Click here to enter text.
Does the system have a claim scrubber or edit functionality? If so, please describe.	Click here to enter text.
Do any of your current customers send claims to California's Department of Health Care Services or their agent via the system?	
Please describe functionality enabling privileged end-users to correct and resubmit claims rejected by a clearinghouse or denied by a health plan.	
Electronic Remittance Advice	
Is the system able to receive ERAs through 835 files?	Yes/No.
If so, describe the posting process.	Click here to enter text.

6. Proposed Pricing

Please provide pricing based upon a typical installation.

One time fees	
One time implementation fees:	Click here to enter text.
Training fees:	Click here to enter text.
Consulting fees:	Click here to enter text.
Initial year costs (include all fees for license, use, access, etc.)	
For x users:	Click here to enter text.
For each additional user:	Click here to enter text.
Please provide the pricing algorithm used to calculate this cost.	Click here to enter text.
Do you charge for support?	Click here to enter text.
Ongoing annual costs (include all fees for maintenance, support, use, access, etc.)	
For x users:	Click here to enter text.
For each additional user:	Click here to enter text.
Please provide the pricing algorithm used to calculate this cost. Also, please provide your policy regarding price increases.	Click here to enter text.
Is there an ongoing charge for Support?	Yes/No.
Is there a charge for maintenance and bugs?	Yes/No.
Is there a charge for State/Federal requirements?	Yes/No.
Is there a charge for delays or extended timetables?	Yes/No.

7. References

Name	Contact Name, Phone Number, and Email Address
1) Click here to enter text.	Click here to enter text.
2) Click here to enter text.	Click here to enter text.
3) Click here to enter text.	Click here to enter text.

8. Scoring Rubric

Evaluation Criteria	Weight (%)	Score	Weighted Score
I. Technical Proposal			
A. Compliance with Scope of Services	15		
B. Security & Privacy Compliance	10		
C. HIPAA, 42 CFR Part 2, HITECH Compliance	10		
D. Billing and Claim Management Functionality	10		
E. IT Systems, Integration and Support	15		
F. Formulary Management	5		
G. Reporting & Oversight	5		
H. Implementation & Transition Plan	5		
II. Pricing Proposal			
A. Overall Cost Proposal	20		
C. Clarity & Completeness of Pricing Worksheet	5		

TOTAL 100